Trauma and children - newborns to two years

Summary

- Babies and toddlers are directly affected by trauma.
- They are also affected if their mother, father or main caregiver is suffering consequences of the trauma.
- If their home and routine becomes unsettled or disrupted as a result of the trauma, babies and toddlers are also vulnerable.
- You can help your baby or toddler recover by providing support to rebuild a safe, calm and nurturing home.

Trauma can have a serious effect on babies and toddlers. Many people wrongly believe that babies do not notice or remember traumatic events. In fact, anything that affects older children and adults in a family can also affect a baby. Traumatic and life-threatening events may include incidents such as car accidents, bushfires, sudden illness, traumatic death in the family, crime, abuse or violence in the community.

Trauma can seriously disrupt important aspects of child development that occur before the age of three years. These may include bonding with parents, as well as foundational development in the areas of language, mobility, physical and social skills and managing emotions. Providing support to help the family rebuild a safe, secure and nurturing home will help the baby or toddler recover.

How trauma affects babies and toddlers

Babies and toddlers are very helpless and depend on their family and parents for a sense of safety and security. They need emotional nurturing, through loving and reassuring interactions, and help with coping in an ongoing and consistent way. This is how babies and toddlers develop and grow.

During their early months and years, children are very sensitive to:

- problems affecting their parents or main caregivers, which may include fear, sadness or being overwhelmed
- separation from their parent or primary carer – for instance, absence due to injury or other factors related to the trauma. This can have a double impact: distress of the separation itself and insecurity of having to manage without the safety, understanding and nurturing their carer provides. Both can slow recovery and increase the impact of the trauma
- what is happening in the household – babies and toddlers are affected by noise, distress or a very mixed-up routine where they are not sure what is happening next
- disruption to the development of a bond or close relationship with their parent or lack of parental understanding – trauma can sometimes get in the way and make the formation of this bond more difficult.

If any of these things are happening, it is important to think about the effect on the baby. If the family or primary carer is affected, the baby is probably also affected.

Common reactions to trauma in babies and toddlers

When babies or toddlers are exposed to life-threatening or traumatic events, they become very scared – just like anybody else. Some common reactions may include:

- unusually high levels of distress when separated from their parent or primary carer
- a kind of ‘frozen watchfulness’ – the child may have a ‘shocked’ look
- giving the appearance of being numb and not showing their feelings or seeming a bit ‘cut off’ from what is happening around them
- loss of playful and engaging smiling and ‘coo-ing’ behaviour
- loss of eating skills

What parents and carers can do to help babies and toddlers cope with trauma

Structure, predictability and nurturing are key to helping a baby or toddler who has been traumatised. There are a number of things parents and carers can do to help their baby or toddler cope with and recover from trauma.

- Seek, accept and increase any support you need to help you manage your own shock and emotional response.
- Get information and advice on how the baby or toddler is going.
- Learn to recognise and manage the child’s signs of stress and understand cues for what is going on for them.
- Reduce the intensity and length of the initial stress reaction by helping the child settle and to feel safe and cared for as quickly as possible.
- Maintain the child’s routines around being held, sleeping and feeding.
- Offer a calm atmosphere and soothing activities.
- Avoid any unnecessary separations from important caregivers.
- Avoid exposing the child to reminders of the trauma, where possible.
- Expect that the child may temporarily regress (go backwards) in their behaviour or become ‘clingy’ and dependent. Don’t panic if this occurs – it is one of the child’s ways of trying to cope with what they have been through.
- Take time out to recharge yourself.

When to seek help for babies and toddlers after a traumatic event

The first and second year of a child’s life has lots of ups and downs. Development may slow down for a while and then move forward again. It can sometimes be difficult to work out if this is just one of those times or whether something more serious is happening.

It may help to seek professional advice if:

- the baby or toddler is slipping backwards in development
- development slows down, especially if this occurs following a traumatic event or major disruption in the family and household
- you feel that the trauma has got in the way of knowing your baby, developing close, loving feelings and feeling connected to them – it is important to seek help to get this bonding process back on track
- you have been separated from the baby or toddler at the time of danger or during its aftermath
- you or other carers are emotionally unwell with stress, grief, anxiety, exhaustion or depression – this can have a serious effect on the baby or toddler
- your family has lost their home and community.

There is increasing evidence to suggest that the younger a child, the more serious the post-traumatic problems. Actively seeking help and advice is important.

If at any time you are worried about your mental health or the mental health of a loved one, call Lifeline 13 11 14.

Where to get help

- **Your GP (doctor)**
- Your maternal and child health nurse
- Your local community health centre
- **Parentline** Tel. 13 22 89
- Your local **Child and Adolescent Mental Health Service** – many of these now have specialised services for young babies and toddlers
- **Paediatrician** or Child and Adolescent Psychiatrist – your doctor can refer you

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