

Trauma

Full transcript · 10 video clips · generated 22 September 2026

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1. What is this thing called trauma

Hello, I'm Catherine Gallagher and I'm a clinical psychologist by trade and am the clinical practice manager at START. And that's an NGO in Christchurch which supports children, youth and adults who have experienced sexualised violence. So we provide counselling and consultations and education, things like this. So I'm really happy to be part of this process. Kia ora, I'm Liz Riley, I'm Kaiarahi Team Lead at Manaaki, which is a mental health and wellbeing support within primary schools in Canterbury. My name's Sam, I'm a child psychologist, child and family psychologist, and I work at KidPsych and also at START, supporting young people who are having difficulties.

Well welcome, it's really Sam. We're here today to talk about trauma. So can we start with just, what is this thing called trauma? Can you tell us your definition? Yeah, well it's a really good place to start, I think, Liz. Trauma actually is of Greek origin, the word, and it literally means wound. Yeah, and I think it's good to kind of demystify it a bit because the word trauma and traumatic gets, those words get bandied around quite a lot these days. I was listening to somebody the other day who said, oh, I went to see this movie and it was really traumatic. But chances are it actually wasn't traumatic.

It might have been traumatic. It might have been sad or distressing or disturbing. But when we talk about trauma, we're thinking about being placed in a situation where we're completely overwhelmed. And it's when we have a threat to our literal survival. So we're in a situation where we're unable to escape, we're rendered powerless, and we're completely overwhelmed. Yes. And there's quite a difference there. And we can think about, you know, living here in Canterbury, even in the last 10, 12 years, there's been a number of events for our young people and for ourselves that have been potentially traumatic.

And it's interesting you bring those up because I think in those events there will have been some traumatised people. But there might have also just been some people who were very scared. And I think that when we think about trauma, it's not always the event that creates the trauma. The event can be scary. But it's the person's experience. So for some people in the earthquake, I know my kids were kind of like, was the Xbox okay? And as soon as they worked out the Xbox was okay, they were kind of like, ah. And then they had a picnic with their cousins. So that potentially traumatic event was experienced by them as something that was a bit unsettling, but wasn't overwhelming.

Whereas someone else might have been part of that very same experience, but their internal experience would have been very different. Because for them. You know, they felt like I might have died. Or they had that real intense overwhelming fear that someone I love might have died. So that's an important thing to think about. It's the internal experience as well as what happens outside. Quite a difference.

2. How do I know if my child has experienced trauma_

So how would I know if my child had experienced trauma? Well I think you know what we say to all parents is that you are actually the expert on your child and generally speaking you will notice some change in them, some change in their behaviour. Often we see sleep. Sleep can be one of the first things that gets disturbed. There'll be you know nightmares or not being able to get off to sleep at night as they would have normally or waking in the night not being able to get back to sleep or wanting to be you know go and sleep in your bed. So there's lots of changes that can happen that you'll pick up on and I think after a potentially traumatic event what we need to remember is that most kids will be okay with enough sort of scaffolding and support and the opportunity to kind of work through and process things.

But if after a certain amount of time they still appear to be struggling that's when it can be quite good to seek some support. It's really important that hey because I think that we can pathologise a normal reaction and if you've gone through something scary it's actually necessary and normal and yeah really important that we kind of have a reaction to it. So as you're saying you know that that most kids or actually most human beings when they've gone through something scary it's like an injury. It hurts and the brain and body has to have its own good time to work that through. And our brains and bodies do have a real natural drive towards healing but again there can be some factors that make that healing harder.

It can be the size of the event, the lack of support or you know whether or not that event has happened in relation to a whole lot of other things having happened. So it can be other factors that make it really hard and can can kind of help you with that. It can kind of mean that that natural drive towards healing gets stuck. So as Zane was saying you know if things aren't changing, if that pattern's kind of getting worse, if the things you're doing that you would normally do which would be fine and make things better aren't making them better then that's when it might be really important to reach out for some support.

And if you're not doing okay really important to reach out for support.

3. Should I talk with my child about the trauma_

So before I reach out for support, would you recommend that I talk to my child about what they're experiencing? Should I face it head on? Yeah, I think this is often a question that parents ask because they're not sure, am I going to make this worse? Perhaps if I talk about it more, it's going to get bigger and harder. But in actual fact, what we would recommend is, yes, to at least create a framework whereby your child knows that they can come and talk to you if they need to. So perhaps you set it up by saying, look, you know, this really hard thing happened. You might have even been involved as a parent.

And yeah, it was a bit scary. And gosh, you know, that's normal to feel a bit wobbly after that. And so, you know, if you want to come and talk to me about it, or maybe we can. Like, especially with a younger child who might not be able to articulate so well what's going on inside of them. Let's draw about it, or let's do some painting. Or maybe we, you know, get out our toys and we, you know, show what happened together. So your child gets a way to kind of process what it was that happened to them. And in support with you, make better sense of that. And that processing is really important because one of the things, you know, we talked before about trauma being overwhelming.

And, you know, we have these alarm systems in our brain. And when we have something really scary that happens, the alarm system's doing its job, right? It's signalled that something's dangerous and that we need to pay attention and do something to protect ourselves. And when that's been overwhelming, sometimes that alarm system kind of gets, you know, switched on to high alert. Stays on high alert, which can explain some of the symptoms that young people have when they, you know, become traumatised. One of the things that also happens when we have that real rush in terms of a really scary experience is that our memory function, the way our brain functions, actually kind of changes.

Because as you can imagine, if you're going through something really scary and you need to gear up to run away or fight this thing that's affecting you, to think about the shopping list or to think about my play date tomorrow, that's just wasting good energy that could be chucked at, you know, escaping a scary situation. So our brain function actually changes when we're kind of being overwhelmed by a scary situation. And so in that overwhelm and in that brain function change, it actually affects how we remember things. So for a little, actually not just a little person, for anybody who experiences a traumatic event and they experience that overwhelm, how they remember what happened.

How it happened, what they were doing, all of that stuff can kind of get a bit mixed up. And so, you know, as Sam was saying, that processing gets a little bit haywire. So part of what Sam was suggesting is that we can help the brain do that a little bit more. Because the brain hates things that don't make sense. And so if there are memories or experiences that aren't neatly slotted away, then the brain keeps going, what was that? I can't make sense of it. I don't know how to kind of learn from that experience. And so it keeps kind of bringing it back into consciousness. And if it was a yucky experience, we don't tend to want to keep it in consciousness.

We tend to try and, you know, stay left. So part of when people have been through a tough experience is giving the brain a chance to settle, to recuperate, to feel safe and rest, and then giving them a chance to sort of in bite sized chunks, as Sam was suggesting, bring it back into consciousness. So if we get to talk about it a little bit. Then the brain gets to go, oh, that's what happened. You know, there's a beginning, middle and end to the story. And we ended up being OK. And oh, that's right. Even though I felt really scared, I was able to do these things to keep myself safe. Oh, that's right.

Actually, even though I was really scared, my mum or my dad or my teacher was able to come in and they were with me when I was scared. And so I wasn't alone. So those are the kinds of information that a traumatised little brain kind of forgets or can't kind of grab hold of. So in kind of processing or retelling that story, there's chances for that information to come in. And that doesn't mean we're turning a parent into a therapist. You know, we're just wanting to normalise the fact that these things can and could be talked about in a really helpful way. And if you, as the parent, are finding it really hard to talk about, that might be an opportunity to bring in some extra help because that might say that you're struggling with this stuff.

And it doesn't mean we have to talk about it and talk about it. It's just about dropping and running with the young person to say, this is something we can talk about, and in fact, I'm up for it. And even if there might be tears and some upset, we can do this together. I was also going to say about allowing those emotions because they're really natural and normal and important. So it's OK to feel sad. It's OK to cry. It's OK to feel angry or frustrated. If, you know, with whatever it is that's happened, and the risk is that if we move on too quickly from whatever it is, you know, the traumatic event, then we're kind of denying our young people the opportunity to feel and express and believe and have faith in those emotions.

And that can sometimes be unhelpful because if we're having to move on too quickly, we might not be able to do it. We might just go, oh, well, I shouldn't be feeling that. I'll just push that down. And and that can end up being unhelpful down the track. And I think that that's a really good point, because if you think about social media, if you think about life in general, there's a lot of messages about positive emotions that, you know, you could just have a contented baby or, you know, a happy baby is kind of meaning good parenting or, you know, we need to get over things. We need to self-soothe.

And of course, those things. Those are important. But, you know, just taking on what Sam's saying, we really need those negative emotions, because if we don't learn how to deal with frustration, if we don't give ourselves permission or feel valid to have the tough feelings as we're having them, how the hell do we actually deal with really tough stuff when it does happen? So these emotions will serve a really, really key purpose. And, you know, so so parents, it's really important to allow your kid to feel frustrated, allow them to feel sad, feel sad along with them. The key bit here.

The key, though, is that as the parent, if you've got big feelings, how to keep yours a little bit in check, which doesn't mean you hide them away, which doesn't mean you always show the child the smiley face, because in fact, if you see it on the inside and showing a smiley face and nervous systems pick up incongruence. So if you're faking it all the time, you've got to pick up on that and go, actually, what do I need to take care of my own needs? But I think that if we're saying to kids, you know, actually, this is not. It's normal and natural in the myriad of feelings you can have as part of being a human being.

So really important to validate those feelings as a parent. Yeah. Yeah. Crucial role for yourself and for your child. Yeah, for sure.

4. Does a traumatic event damage a child for life _

So if my child has experienced a truly traumatic event, are they damaged for life? It's a really good question, and I think it talks to a fear that a lot of parents have. And the very quick answer is no, they're not. I mean, we often talk about trauma as a nervous system injury. You know, it's a wound. But wounds can heal. But wounds heal when they've got the right conditions. And I don't know about you, you

know, if you've ever twisted an ankle or, you know, had a scar, it remains a bit sensitive. And so it might be that, you know, you're doing just fine, and then you might step in a pothole and you go, ooh, this feels extra sore because of my past experience.

So in terms of trauma, we can have impacts throughout our life. That doesn't mean we're broken, but it means there might be certain circumstances that when we start to feel a little bit unsettled, a little bit of extra support might be needed. And again, that doesn't mean that the initial support wasn't enough. It just means that, you know, healing is a process. And at times when the energy we might put into our healing needs to be diverted to something else, we might need a little bit of extra support, and that's actually normal. Yeah. Anything to add to that? Yeah. I was thinking, remembering that we're working with children, that they're kind of like a moving target.

So when you think about a four-year-old trying to make sense of something hard that's happened to them, and then a nine-year-old or a 13-year-old making sense of that as well, they're going to have a whole new perspective on it because their brain's grown. So it's really appropriate for children at different ages and stages to kind of have new understanding and then maybe get a bit wobbly again. A little bit of extra support. The other thing I was going to say was thinking about trauma as being the wound that is sustained. Trauma's not the event, so we can move on from that. That's the thing that happened in the past.

But as we move on and we heal, we can actually grow our natural resilience to be able to manage better when the next hard thing that comes along, because life is... It's full of challenges. So there is that thing called post-traumatic growth. And when we look back, perhaps, as a grown-up, we can look back and think, oh, yeah, that was that thing that happened to me. That was just a bit of a blip in what is my whole full life of lots of challenging and wonderful things that have happened to me. And I think, you know, as you're talking, Sam, I'm thinking of that word that... I don't know if other people had this experience.

I don't know who lived in Christchurch, but that resilience almost became a bit of a swear word. That, you know, you've either got it or you haven't. And if you're kind of struggling, then you're not resilient enough. And, you know, let's blow that one out of the water. Because, you know, it's not a thing, right? It's a process. And I think our resilience can be, you know, stronger at certain times than at other times. But one of the really key things that people need to hear is part of resilience. And that is actually recognising when you're feeling wobbly and reaching out for support. So resilience isn't a lack of wobbliness.

It's about going, hey, I know myself enough. I have enough confidence and enough awareness of who's around me and who I'm connected to and also connected to myself that actually I can be resilient and seek help because that's part of staying well. And so that, you know, what we learn from going through a tough time, there's quite a bit of evidence to say that, in fact, it... It's kind of like this, I don't know, if you've had a lot of trauma, it can make us a little bit more vulnerable because, obviously, you know, we've had a lot of stuff to get through so we might need some additional scaffolding.

But if you've had no trauma, no tough stuff, then, in fact, we can really struggle in those situations as well because if the first thing that happens is when you're 35 and you've had nothing particularly hard happen to you, those people can get knocked off their perch. So it's, I mean, not that you want to have a recipe book and say, right, well, I have this. I have this bit of trauma and that bit of hard bit and that bit of good stuff. You know, life doesn't work that way. But your child's not broken, you know, and they might need some additional support and scaffolding and sometimes their path might be slightly changed.

But one of the most powerful things you can do as a parent is see your child because self-esteem doesn't come from a lack of hard stuff or a lack of difficulty or a lack of challenges within ourselves. Self-esteem comes from seeing ourselves accurately and feeling loved and seen by others accurately. And we can do that no matter what happened to our child. Yeah. That's really heartening to hear. I think a lot of parents will take heart from that.

5. If my child requires support what is involved _

So if I find my child is in that position where I've seen a lot of changes and they are stuck and what I've done isn't appearing to make a lot of difference and I think they do need therapy and support, how long, in your experience, do they need? How long is a piece of string, Liz? Because it's coming back to... We sound like politicians. We're answering questions with questions. I'm used to asking you the questions, actually, rather than... I'm sorry. And it's coming back to where we're dealing with a unique individual, right? And there's lots of variables involved that can kind of make an impact on how your young person is going to kind of get through this.

But I guess... How... How long? You know, we don't know. We don't know exactly. Perhaps we can talk about variables. I mean, for example, age. Usually, it's harder for younger ones to... You know, the younger they are, the harder it might be. And these are generalisations for them to process what it was, especially if they're pre-verbal, so they don't have language yet. Then also the nature and the severity of what it was that happened to them. You know, how... How chronic and persistent was that? Who was it that hurt them? Yes. Yeah. Or if that's part of the trauma. Yeah. And also, importantly, how you, as the parent or caregiver, have been able to support them through it.

Because we know that, you know, all the research shows us that having that support is really critical to being able to heal. And I think, you know, as you were talking, talking about those variables, I was aware that, you know, another variable is actually motivation. You know, I might be, you know, eight, and I've gone through a really scary experience, or my family's gone through a really scary experience, but I just want to be eight. I don't want to think about this stuff. And, you know, as we talked about the brain before, as well as its desire to want to make sense of this stuff, it's also got that opposing mechanism which says, I don't want to think about this stuff.

And so avoidance can serve a purpose. And, you know, so you might have a little eight-year-old who, you know, mum and dad or whoever their significant adults are, are really worried about them because they know what they've been through. But this little eight-year-old's going, nah, I'm good, thank you very much. You know, I don't want to go and see my late son. And so, and that's not wrong. So, you know, in that situation, we might well say, hey, how about mum and dad or significant adults, you come and get some support. Because it might be that as you drop and run, as you get resourced, as you kind of support, your little eight-year-old, then that's actually the support that they need.

So sitting down with a therapist or a psychologist might actually be, in a way, if we force it, it might actually leave a bit of a bad taste in their mouth so that when they might need it, they're going, oh, I remember that experience. It kind of, I didn't feel like I had some agency in that. Whereas it might be for another eight-year-old, they're like, they're really into it. And the idea of being able to come along and play and talk might particularly suit them. So we're having to kind of get that combo of whose needs are out there and whose needs are being met. And certainly, you know, in our work, we'll have situations where it's actually mums and dads or the grown-ups that need the support and the kids just want to get on with being whatever age they are.

But they're given that knowledge that the door is always open and they can come and get support when they need it. I think that's a really important point, Catherine, because as I often say to young people, I know they were the ones that sort of rang up and said, hi, Sam, can I have an appointment? Can I see you? And the worst thing would be for a young person to be kind of dragged, you know, not really wanting to come but feeling kind of like they have to. And so I always make a point of kind of checking that because I think as Catherine was talking to it, that if it's the child's first experience of counselling or, you know, coming to see someone like us, we want that to be a good experience.

If they are in that phase of kind of not really wanting to look at it yet, we want them to come back when they are ready. We want them to know that, oh, well, actually, that person was quite nice and, you know, we're going to play some games. And I know that there's help if I need it, maybe even when I'm an older adolescent or if I'm an adult. And I think part of that can also be that it might not be, I might not be ready for help and there can be lots of reasons why I'm not ready for help. And one of them might be it doesn't feel safe to kind of unpack this yet or actually I'm a bit worried about mum and dad.

So if you can look after mum and dad, therapist, let me get on with the age I am, you know. And so there can be lots of things that if you're, you know, to slow it down and be curious because not all resistance is, you know, sometimes resistance has got really good reasons. So is the general rule, if you're looking for support from yourselves for your child, wherever you will be involved as well? Absolutely. Definitely, yeah. I would say that wherever possible, we love parents being involved. Yes. Yeah, and particularly, well, the younger the child, the more important it becomes. Well, I don't think you say it's almost essential.

Yeah. You know, so not only wherever possible, but, you know, if there's a person who's a little person in pain, they don't control their worlds. And so in whatever capacity, their significant adults need to, in some way, be signaling this is an okay thing to do and be as much support as they can be. And that might not be being in the room. It might just be being dropping off and picking up or having a parent session or being in the waiting room or, you know, being able to tolerate, you know, what's being talked about. So, sorry, I just jumped in there. No, no. We can put a plug in there for parents because it's not something you drop a kid off and say, sort yourself out.

Yeah. Therapist and you, go for it. It's a team effort. It's a team effort. It's a team effort. It's a team effort. Yeah. Yeah. And I think that, you know, it's certainly around safety. And that's the thing you have to think about first and foremost, is if you've got a young person who, where there's risk, and that's been identified straightaway, you need to have the parent involved in that. So, it makes it really hard if they've sort of just been dropped off and they're waiting in the car around the corner. But also, I think it's so much more powerful if you can have a parent alongside, you know, and we're working as a team to support this young person.

So, you might be introducing ideas or concepts or setting up some home practice depending on what you're working with. And really great to have the parent on board with that and knowing, oh, being able to reinforce it at home. Because, of course, we're just one tiny part of that child's life, whereas parents can be there 24-7. And I think the other thing, you know, the other part of the parent work that's so important is that they can make sense of what they're seeing. So, if they're seeing behavior that's distressing to them, if they can go, okay, my child needs to be going through this. I don't need to be frightened when they're upset.

You know, I'm going to be much more regulated and settled when I'm seeing that distress. The other thing that popped into my mind as you were talking, Sam, was that it's kind of, it's easy to understand when you've got a little four-year-old or six-year-old to go, parents, you know, we almost, a child can't drive themselves, right? You know, a parent needs to take them or someone needs to take them. It

gets a little bit more confusing when someone's kind of 16. And there can be that sense that, you know, actually, they can catch the bus or the therapist, you know, might be able to see them at school or actually the teenager themselves go and get away.

I don't want you anywhere near this process. And so, all of those things have to be taken into account. But I just put a little shout out there for parents of teenagers to not necessarily treat that, I don't want you involved in this as a full stop, to treat it as a bit of a comma. Because even though your child might be going, I don't want you to know how I'm doing or I'm looking to my peers to support me or I'm independent, I can do this on my own. Whatever all those valid thoughts and feelings might be, they haven't stopped needing you. They might have stopped telling you they need you, but they need you.

And how you parent might have to change a little bit in terms of how you show or meet those needs. But they need you just as much. And if a child's been traumatised, then actually we sometimes need to draw in the wagons a little bit more. Now, not smothering, that can be the temptation. Like, you know, I've got you now. I don't want that horrible thing to have happened, so I'm going to try and, you know, keep you safe. We need support around in terms of how close to hold. But we also don't want to disappear just because they've told us to. So, it's working that out. And that's where the therapist can help with that conversation too.

And if you've got a therapist who says, hey, look, your teenager doesn't want you in any way involved, actually it's okay to push back a little bit on that and say, I'm not going to force my way into a session. But it's actually okay and important that I kind of know how to support my young person at home. So, whether you or a colleague, can you help me please? Because, you know, I want to be able to be a resource to my young person, even if they're telling me to get staffed, you know. I need to know how to hear that and, you know, get my own support around that. So, yeah, really important. To be involved might look different, but to be involved.

Yeah. What's that adage with teenagers? Their job to resist, our job to persist. Yes. Yes, love it.

6. What if the parent is experiencing trauma_

So in terms of if in a family where I'm traumatised as the parent, which must happen in some instance as well, do the same guidelines apply? Do I look for changes that I'm experiencing, try to manage it myself, and then if I can't, look for support from yourselves? Yeah, I think so important, isn't it? Because chances are you've been in the same traumatic event. And what we would always say to parents is, if you're not coping, if you're really struggling, then we recommend that you seek your own support. Because what your kids need most is for you to be well. And we can't do that if our cup's empty.

It's that old analogy, isn't it? The oxygen mask, you've got to put it on yourself first before you can tend to your young ones. And the same is with this situation, is building up your resources, so then you're able to share some of that and to be able to cope and manage better when you're dealing with a wobbly young one. And I think that when, you know, as we were talking before about little brains, or actually any size brains, and that nervous system being on. And I think that if you're on high alert, if you've experienced trauma, if you're not coping well as a parent, then actually your kind of edginess or your reactivity, and these aren't sort of things to feel guilty about, even though as parents we do, right?

We feel guilty about everything that we're not doing perfectly. Your traumatised kid is likely to react to that more. You know, Joe Blow, 17-year-old, I'm talking about my own one at home, can kind of go, yeah, mum, you lost your temper, but I stopped listening to you. So, you know, go for gold. And I'm like, what? Anyway, maybe that's just only my own therapy. But, you know, if it's a 17-year-old who's traumatised, and actually mum might lose her rag and kind of get upset and get angry or be irritable, then, you know, if I'm sitting with my own nervous system being revved and I'm reading the room, I might not be a very good interpreter.

And so I might sense some danger. And, again, I'm not saying that to make parents feel guilty. I'm not saying that to make parents feel more guilty or more responsible. But it's just, I suppose, a shout-out to say, if you're feeling reactive and your revs feel high, your traumatised person is going to be sensing that too. So, I mean, I think one of the most important things that Sam's saying is, actually, it's probably more important for you to take care of yourself because your young person needs you. They need you more than they need a therapist. Yeah? And so if you're not doing okay, then, in fact, it's important for you to take care of yourself.

And that's a big priority, is how do we kind of help fill your cup and get your reserves? Or bring some other people in because it might be, hey, actually, my capacity to support my young person around this particular issue is a little bit limited and I'm actually being honest and that's okay for me to acknowledge that. So how do I bring in someone else from the whānau to kind of be alongside me or give myself some time away so that actually this young person transparently gets the message that, hey, I'm okay. I'm just a bit wobbly, but I've also got some things I know how to do to take care of myself.

So we've got you, person, little person, but it might mean that we need a bit more of a team. Yeah. Yeah. Yeah. And as you were talking, Catherine, I was also thinking that you here as a parent with decades of life experience, right, and also maybe previous traumatic experiences that can kind of be triggered if, you know, because you might have had stuff in the past. So being really mindful of how

you're doing and how you may be impacted and there might be a little person inside of you that's kind of got wobbly and not coping and getting that extra support kind of with an understanding that things can trigger our past hurts as well.

Yeah.

7. Who do we tell about our child's trauma_

So, Catherine and Sam, just lastly, what would be your recommendation as to who as parents we tell about a traumatic event that may have happened for our child? I think it's a really good question because I think that, you know, we can have our own personal responses, you know, so I'm a bit of a talker. But so, you know, I might naturally go, oh, who are my people? And I want to, you know, bring in support for me, if that makes sense. So I might want to tell friends and family and stuff. And I think that, you know, following your natural desire to say, well, how do I resource myself, as we said before, to kind of resource this little person.

But sometimes you have to be a bit careful about that because depending on the type of trauma, it might be that young person doesn't really want too many people to know. So. So. Sometimes you have to sort of just, again, take that with a bit of a grain of salt to go, you know, I might need to let the young person know who I've let know. Or I might need to do that support giving over here, but separate from that young person. If they're feeling very like they want to hold what's happened to them a bit close. In terms of who needs to know, I suppose a rule of thumb would be who does that young person come into contact with that might need to manage or understand what might be going on for the young person.

So is it, you know, other members of the family? Do they have a lot of contact with? Is it siblings? Is it school? And again, school can be an interesting one because there can be a lot of people who want to know, but not so many people who need to know. And what do they need to know? So, you know, that idea of talking with the young person, because it doesn't mean we have to have the young person's permission to tell, because it might be that the young person says, I don't want anyone to know. But we say, actually, some people need to know. Right. So if you've got a choice of teachers, who might you feel most comfortable with them knowing?

And what would you like them to know? Nothing. Hey, they need to know something. They need to know you've been through a tough time, because what happens in class if you get a bit upset or get a bit grumpy and no one knows why? And they might then react in a way that makes you feel a bit worse. So does that make sense? So you're including the child in the conversation, but the child doesn't get to completely control the outcome, but they have some say or some agency in it. And if it is school, then it might be about talking to the school and saying, you know, who is the best person who can then disseminate the information most appropriately.

But, you know, letting others in the family know is an interesting one, because, again, it's who needs to know versus who wants. And sometimes as parents, our own shame or our own kind of like, oh, it looks like we're not coping or on my watch, how did that happen? Or we had this car accident and, you know, I don't really want to talk about it with too many people. So let's just not talk about it. Because family cultures can be interesting, too, because some families just don't talk about hard stuff. So there's all of those things that can be influenced there. But I think as a rule of thumb is everybody's needing to be resourced in the best way possible.

So who do we need to bring into that team to make that work as well as it can do? Yeah, I was thinking just particularly around school, because certainly a lot of the young people we see are really struggling at school. For lots of reasons, because they're, the world's just not feeling as safe for them as it was before. And so their ability to actually attend to a task, stay focused, or even their ability to be curious and explore, which is what all children need to be doing, has diminished. And they might also, because of that hypervigilance, be, have a bit of that fight flight that Catherine was talking about before, I think, where they might even mesh out.

From a place of feeling threatened, or they might run away, or there might be some quite unusual behaviour there that's challenging for a teacher, and that's misinterpreted if they don't know, if they have no knowledge of what it is that their child's been through. Certainly, I think that it's really, really important to help teachers know just enough so that they can grow some understanding, awareness, and understanding of what they're doing. And of course, empathy and compassion for that child, so they don't get sort of boxed into the naughty category, or, you know, go under the radar because they're just being lazy and looking out the window all the time.

Because that's an interesting thing to think about, isn't it? Because a lot of people have some assumptions. I mean, we're all judgmental, let's just acknowledge it, because our brain, you know, wants to make really quick judgments to kind of get on to the next thing, you know, and save resource. But, you know, when we've got a child who... Yeah. I think we can assume that a traumatized or a sad child's going to look quiet, and kind of be needing to be coaxed and supported, and kind of almost invite our care. Not so much. You know, a lot of traumatized kids are exactly as Sam's describing. They're edgy, you know, and they are not easy to care for.

Like firecrackers. Yeah. And so, again, their nervous system is problem-solving for them, but that problem-solving is creating a problem for everybody else. And so, that understanding means we at least can understand what we're seeing and can manage our own arousal and our own... Not always perfectly. And there's rupture and repair is a really important concept for any teacher or parent, which is

we're going to get it wrong. But the importance of acknowledging we've got it wrong and being able to come back and go, hey, mate, actually, it was a cool behavior. You're going to still have a consequence.

Because it's really important that standard parenting, standard teaching still happens, because that's what the young person needs. Because, actually, if suddenly the boundaries disappear, that actually makes me feel more unsafe. But it's kind of those standard routines and expectations with additional care. Yeah. Great.

8. What do we mean by scaffolding_

So when we talk about scaffolding, what do we mean? Well, probably we're thinking about the scaffolding, aren't we, when we're doing painting or scaffolding around a building. And if we think about our children getting a bit wobbly, that they're actually needing us to kind of be that support to help them kind of keep going, to be stabilised, if you like. So it is a type of support, I guess. But it might need to happen over time. And I think when we're thinking about scaffolding a child that's traumatised, the best things that we can do as parents is to retain their normal routines so that life seems predictable for them.

And focus on all those basics, like good food, good sleep. Sleep's really important, sleep routines. Activity levels. So they're getting out in nature, fresh air, sunlight. All of those things that we know are going to keep our children well. And perhaps also when they're dealing with stress, because this is what trauma is about, managing stress, perhaps reducing some unnecessary demands. If it feels like they've got a really busy life and they just need to be able to have more time to rest, then perhaps reducing some of those could be helpful as well. I don't know if you'd have anything to add to that, Catherine?

I think you're covering it. I mean, I suppose what comes to my mind is that there's almost like general scaffolding. So, you know, that just well-being. And I think as parents, when our young people are going through a tough time, we can kind of think, you know, how do we fix it? How do we get it sorted? And take a big deep breath, mum and dad and whoever else is important in that young person's life, because literally just having life chugging along, as Sam's saying, helps. Because we can often think, well, we haven't done that thing. Well, what's that thing to do to kind of make it OK? And we need to be reminded that doing just life is actually really essential.

So we're settling into those routines. We're supporting their nutrition. We're supporting, you know, all of those things that we might think that's not rocket science. It's nothing big and flashy. But that kind of scaffolding in terms of just generally doing life, really helps. And then we've almost then got the scaffolding for those moments when things are getting out of control, you know, or feel like they're getting out of control. And so that's where it might be around again, you know, having some things that you've talked about with your young person about what's needed in those moments. Because if they're not regulating themselves, sometimes we need to be the calm that they get invited into, rather than getting invited into their storm.

And so, you know, what are the things in those particular moments that we might need to bring in the scaffold a little bit closer, to be able to support them? And I know we've banged on about this, so we apologize. Actually, we don't apologize. We need to bang on about it, is if the scaffold's not on firm ground, then it can be a bit useless. So we need you as the scaffold to be well cemented in, you know. So that doesn't mean you always have to be okay. But it means that you are taking care of yourself because literally our nervous systems talk to each other. And no matter how much you're doing, you're going to be okay.

And no matter how much you're doing, you're going to be okay. And no matter how much you're trying to be a scaffold, if we're not looking after ourselves and our scaffold's wobbly, then that's going to be not making it so easy for the little person. Now, let me be really clear to say that doesn't mean you can't be wobbly, parent. It's compulsory that we're wobbly. It's just that we're keeping an eye on our wobbliness. And we're making sure that we've got a scaffold around us. So it's kind of like literally, who's got our back? And if that needs to be professional support, go for it. There's no shame in that.

In fact, just as I said before about resilience, resilience is about knowing when I might be a bit wobbly. And if my little person or my big person is needing me, I actually need to take care of myself.

9. What is the impact of social media on the prevalence of “trauma”_

The term trauma, it's bandied about a lot. We see it a lot in social media. What, again, is the impact of social media with the way trauma has permeated our language? Yeah, I mean, it's such an important question. And I think that, you know, especially people who work in the trauma field, yay, that there's a growing awareness of what trauma is, and we're talking about it, and there's not shame attached. Well, there still is, of course, stigma attached to it in some situations. But to some extent, it being part of the dialogue that people are having, at one level, we're going, yay, you know, that it's out there.

But like anything, you know, if it's out there too much, then one of the risks is that everything becomes trauma. You know, as Sam was saying before, you know, you go to a movie, and it was a bit scary. I'm going to the dentist, and, you know, it's traumatizing because I became upset. So that idea of trauma becoming associated with upset, they are different things. And we actually need to be really clear about that, because otherwise we either, you know, can overreact to upsets, or we can start to become dismissive of trauma, because people can go, oh, for goodness sake, everybody's trauma. And so, you know, again, it's that kind of being able to work out the difference between the two.

And I think that... You know, one of the downsides or one of the realities of social media is that, you know, you can Google, you know, symptoms, and what comes up is, you know, your doctor Google can give us some really helpful information, but also can give us lots of serious information that we're not quite reading accurately or seriously. And so you've got young people Googling or communicating around symptoms or around things they're experiencing.

And so, you know, sadness isn't just sadness which is a normal thing we go through it becomes depression anxiety isn't just anxiety it becomes panic attacks and so there's this kind of revving up or glorifying or kind of amplifying of what's going on um because we've now got a name for it um and i think there's um there seems to be and i'm stepping into this sort of um more generalizing kind of frame of going we don't we can't just kind of sit with something not being known we've got to have a name for it we've got to have a frame for it um because that then makes it go right well i'm this now you know um whereas in actual fact um you know there's a lot of stuff which again diagnostically you know as we talked about with trauma trauma involves something that i thought i was going to die thought someone i loved was going to die i was completely overwhelmed and incapacitated in terms of my ability to cope with it that is trauma or experiencing trauma there's a lot of other things which scare the hell out of us and make us very distressed and they are equally important to deal with and support but they're not trauma would you say anything anything to that sam yeah i think you've answered that well i was just going to say um yeah i think the pressures on um adolescents these days are huge and maybe there's almost this need to identify with something i don't want to say it's fashionable but um that well such and such has got this well i've got this and and trauma is just such a you know great word it can just cross the board can't hit so many potentials and it kind of signals back off and don't push me yeah because i'm traumatized and again sometimes that's really appropriate but sometimes it's actually no actually or actually even if you were traumatized you've still got a bed time if you were traumatized you've still got a bedtime or you still actually need to go to school so you know it's that having parent confidence as a parent that you know um trauma there's some things that you know can happen and we've talked about some of them today that can help but it doesn't mean you you step away from from boundarying um or supporting your young person to be themselves alongside this experience as opposed to this experience taking over who they are and over their identity

10. Key messages and resources

So, would we like to now just sum up our key messages around trauma? Well, I'm pleased you started, Sam. We're short and sweet. Oh, just go, ditto. I think key messages for parents to know is that even though lots of hard stuff can happen in life, that in most cases kids will be okay, that we have this natural inbuilt ability to heal. From hard things that happen to us. I'd also like to just re-emphasise to parents, you are the expert on your own child. And to kind of have faith in that. Have faith in being able to know when things are not quite right. And then appropriately seeking support when you feel that there's a need.

And with that support, I mean, certainly I think from our perspective, we... With children, we believe in early intervention, but we also believe in the lightest possible touch. So we don't, you know, it's not about your child being involved in therapy for years and years. It's just about giving them just enough support to kind of prop them up. So then they can just go on their way and do life as any normal kid should do. Yeah, I suppose my, you know, absolutely agree with what Sam's saying. I mean...

For me also, a really key factor is just how, how well you're feeling, you know, because I think that and this isn't to say it's your fault, even though that's what as parents we often take on board, but it's to say that if you are taking care of yourself and, you know, keeping your nervous system as calm and as regulated as possible, or if it does flare up, managing that and, you know, and calming it down as much as we can and getting support for it, then that helps your child. Yeah. Because they need, you are their source of safety. And so if you're feeling safe and settled in yourself as much as possible, then that's going to help their healing journey.

And again, you know, we were talking about social media before and kind of social pressures. Somewhere along the line, there's been this message that if you're a good person, bad stuff doesn't happen. And that's just a crock. Really bad stuff happens to incredibly good people. And, and, and life's got some pain in it. And I think that, and I hope this doesn't sound like a negative message to finish on. It's a real message because we were, we were designed as human beings to deal with pain. We were designed to deal with wounds and, um, you know, so we have some natural drives to be able to heal and support ourselves through those things.

But actually what modern society has also provided us some bloody good therapies, you know, there's some stuff out there that can really help people through these experiences. But try and not catch that belief that actually something bad happening was because

there was anything you did. Stuff happens in, in, in, um, with support and resource and self kind of belief, um, you're going to be okay and your kid's going to be okay too. I think the key points that I've taken away from this, that just the crucial role that a parent plays if your child has been traumatized and that as a parent, we are the constant and while we may seek expertise from people like yourselves, we are the ones that need to be there and to be, to successfully co-regulate with our child to make sure that our oxygen mask is on first, um, and validate those feelings.

Lean in and don't be afraid. Um, that's the key things I've picked up. And I'll just add to that. I mean, Sam's used to me wanting the last word. I don't have to have the last word. You can carry on. But, um, it's just that, that doesn't mean you have to become a therapist. That doesn't mean you have to become a better parent. Your child has grown up with you being you. And so they need you to be you, but they just need you to be you, um, with some support to be you, you know? So if you ask someone who's a bit grumpy and suddenly you're like, Oh, then they're going to go, what's happened to mom?

Or if you're someone who's typically quiet, you know, and not a great speaker and talker. They're going to expect you to be you. And, and so does that make sense? So, so it's not to suddenly put pressure on yourself that I have to become a super parent. It's you be you, but if you need a bit more support to be you in this situation, that's where others, people can help and step in. And I would imagine that the conundrum for so many parents is that when a traumatic event they discover has happened for their child, they throw their hands up and go, Oh, we need the experts. But like you both said, parents are the expert.

Um, so Sam, it is a worry, isn't it? When parents do consult Dr. Google, do you have any other advice? Well, Liz, what we'll do is we'll put together, um, some links, uh, to some trusted resources and websites and, and we'll be able to add those to, uh, to the video today for parents to take a look at. Thank you.