Parent Guidelines for Helping Youth after Mass Violence

The recent attack has been an extremely frightening experience, and the days, weeks, and months following can be very stressful. Your children and family will recover over time, especially with the support of relatives, friends, and community. Keep in mind that families and youth had different experiences during and after this violent incident, including those who experienced physical injury, were involved in police investigation, or worried about the safety of family members and friends. This attack might also act as a reminder to other violent events that family members have experienced in the past. How long it takes to recover will depend on what happened to you and your family during and after this event. Some adults and children have been seriously injured and will require medical treatment and long-term rehabilitation. Some are adjusting to the death of a loved one. Over time, some youth and adults will return to normal routines, while others may struggle. Children and teens may react differently to the attack depending on their age and prior experiences. Expect that youth may respond in different ways. Be supportive and understanding of different reactions, even when you are having your own reactions and difficulties.

Children's and teen’s reactions are strongly influenced by how parents, relatives, teachers, and other caregivers respond to the attack. They often turn to these adults for information, comfort, and help. There are many reactions that are common after mass violence. These generally diminish with time, but knowing about them can help you to be supportive, both of yourself and your children.

Common Reactions

- Feelings of anxiety, fear, and worry about the safety of self and others
- Fears that another violent incident may occur
- Changes in behavior:
  - Increase in activity level
  - Decrease in concentration and attention
  - Increase in irritability and anger
  - Sadness, grief, and/or withdrawal
  - Radical changes in attitudes and expectations for the future
  - Increases or decreases in sleep and appetite
  - Engaging in harmful habits like drinking, using drugs, or doing things that are harmful to self or others
  - Lack of interest in usual activities, including how they spend time with friends
- Physical complaints (headaches, stomachaches, aches and pains)
- Changes in school and work-related habits and behavior with peers and family
- Staying focused on the violent event (talking repeatedly about it)
- Strong reactions to reminders of the attack (seeing friends who were also present during the attack, media images, seeing a truck speeding, police)
- Increased sensitivity to sounds (screaming, tires screeching)
Things I Can Do for Myself

- **Take time to reflect how this attack has impacted you.** Take a few moments for yourself so you can express your own emotions and also find the words you want to use to your children about what happened.

- **Take care of yourself.** Do your best to drink plenty of water, eat regularly, and get enough sleep and exercise.

- **Help each other.** Take time with other adult relatives, friends, or members of the community to talk or support each other.

- **Put off major decisions.** Avoid making any unnecessary life-altering decisions during this time.

- **Give yourself a break.** Take time to rest and do things that you like to do.

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Things I Can Do for My Children

- **Spend time talking with your children.** Let them know that they are welcome to ask questions and express their concerns and feelings. You should remain open to answering new questions and providing helpful information and support. You might not know all the answers and it is OK to say that. At the same time, don’t push them to talk if they don’t want to. Let them know you are available when they are ready.

- **Find time to have these conversations.** Use time such as when you eat together or sit together in the evening to talk about what is happening in the family as well as in the community. Try not to have these conversations close to bedtime, as this is the time for resting.

- **Promote your children’s self-care.** Help children by encouraging them to drink enough water, eat regularly, and get enough rest and exercise. Let them know it is OK to take a break from talking with others about the recent event or from participating in any of the community events.

- **Help children feel safe.** Talk with children about their concerns over safety and discuss changes that are occurring at school and in the community to promote safety. Encourage your children to voice their concerns to you or to teachers at school. If they know the circumstances of the attack, encourage them to talk with you if they have continued worry so you can help to differentiate what happened during the attack and what they are worried about now.

- **Maintain expectations or “rules.”** Stick with family rules, such as curfews, checking in with you while with friends, and keeping up with homework and chores. On a time-limited basis, keep a closer watch on where teens are going and what they are planning to do to monitor how they are doing. Assure them that the extra check-in is temporary, just until things stabilize.

- **Address acting out behaviors.** Help teens understand that “acting out” behaviors are a dangerous way to express strong feelings over what happened. Examples of “acting out include intentionally cutting oneself, driving recklessly, engaging in unprotected sex, and abusing drugs or alcohol. You can say something like, “Many children and adults feel out of control and angry right now. They might even think drinking or taking drugs will help somehow. It’s very normal to feel that way - but it’s not a good idea to act on it.” Talk with children about other ways of coping with these feelings (distraction, exercise, writing in a journal, spending time with others).

- **Limit media and social media exposure.** Protect your teen from too much media coverage and social media about the incident, including on the Internet, radio, television, or other technologies (e.g., texting, Facebook, Twitter). Explain to them that media coverage and social media technologies can

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National Child Traumatic Stress Network  
[www.NCTSN.org](http://www.NCTSN.org)
trigger fears of the violent event happening again and also spread rumors. Let them know they can
distract themselves with another activity or that they can talk to you about how they are feeling. Also
ask them to describe what they have seen online already so you can correct any misinformation or
provide support.

- **Be patient.** Children may be more distracted and need added help with homework or projects once
school is in session. They may need temporarily extra time to complete their work or more frequent
breaks. Make sure they are patient with themselves as well.

- **Manage reminders.** Help children identify different reminders (people, places, sounds, smells,
feelings) and to clarify the difference between the event and the reminders that occur after it.

- **Monitor changes in relationships.** Explain to children that strains on relationships are expectable.
Emphasize that everyone needs family and friends for support during this time. Spend more time
talking as a family about how everyone is doing. Encourage tolerance for how your family and friends
may be recovering or feeling differently. Accept responsibility for your own feelings, by saying “I want
to apologize for being irritable with you yesterday. I was having a bad day.”

- **Address radical changes in attitudes and expectations for the future.** Explain to children that changes
in people’s attitudes are common and tend to be temporary after a mass violent incident like this.
These feelings can include feeling scared, angry, and sometimes revengeful. Find other ways to make
them feel more in control and talk about their feelings.

- **Get adults in your children’s life involved.** If there has been a serious injury of your child or a death of
a loved one, or if your child is having difficulties, let your child’s teacher or other caring adults know
so that they can be of help.

- **Empower your child to get involved in their medical care.** For children with injuries and long-term
medical needs, encourage them to participate in medical discussions and decisions as much as
possible. Have them ask their own questions and give opinions about different procedures. Teens are
especially concerned about their physical appearance, fitting in, and their privacy. Talk with them
about their concerns, problem-solve ways to address them, and respect their privacy.

- **Seek professional help.** If children have continued difficulties for a couple of months after the attack,
parents should consult a trusted helper—a doctor or mental health professional.
Psychological Impact of Mass Violence

The combination of life-threatening traumatic personal experiences, loss of loved ones, disruption of routines and expectations of daily life, and post-violence adversities pose psychological challenges to the recovery of children and families in the affected areas. The following issues may be helpful to consider:

Reactions to Danger

Danger refers to the sense that events or activities have the potential to cause harm. In the wake of the recent attack, people and communities have greater appreciation for the enormous danger of violence and terrorism and the need for effective emergency management plans. There will be widespread fears of recurrence that are increased by misinformation and rumors. Danger always increases the need and desire to be close to others, making separation from family members and friends more difficult.

Posttraumatic Stress Reactions

Posttraumatic stress reactions are common, understandable, and expectable, but are nevertheless serious. The three categories are: 1) Intrusive Reactions, meaning ways the traumatic experience comes back to mind. These include recurrent upsetting thoughts or images, strong emotional reactions to reminders of the attacks, and feelings that something terrible is going to happen again; 2) Avoidance and Withdrawal Reactions, including avoiding people, places and things that are reminders of the attacks, withdrawal reactions, including feeling emotionally numb, detached or estranged from others, and losing interest in usual pleasurable activities; and 3) Physical Arousal Reactions, including sleep difficulties, poor concentration, irritability, jumpiness, nervousness, and being “on the lookout for danger.”

Grief Reactions

Grief reactions are normal, vary from person to person, and can last for many years. There is no single “correct” course of grieving. Personal, family, religious, and cultural factors affect the course of grief. Over time, grief reactions tend to include more pleasant thoughts and activities, such as positive reminiscing or finding uplifting ways to memorialize or remember a loved one.

Traumatic Grief

People who have suffered the loss of a loved one under traumatic circumstances often find grieving even more difficult than it might otherwise be. Their minds stay on the circumstances of the death, including preoccupations with how the loss could have been prevented, what the last moments were like, and issues of accountability. Traumatic grief changes the course of mourning, putting individuals on a different time course than is usually expected.

Depression

Depression is associated with prolonged grief and strongly related to the accumulation of post-violent adversities. Symptoms can include depressed or irritable mood, change in sleep or appetite, decreased interest in life activities, fatigue, and feelings of hopelessness and worthlessness. Some youth and adults may experience suicidal thoughts.

Physical Symptoms

Survivors may experience physical symptoms, even in the absence of any underlying physical injury or illness. These symptoms include headaches, stomachaches, rapid heartbeat, tightness in the chest, change in appetite, and digestive problems. In particular, the hearing tires screech can lead to panic reactions, especially in response to reminders. Panic often is expressed by cardiac, respiratory, and other physical symptoms. More general anxiety reactions are also to be expected.
Trauma and Loss Reminders

Trauma reminders: Many people will continue to encounter places, people, sights, sounds, smells, and inner feelings that remind them of the attack. The sounds of confusion and people screaming may become powerful reminders. Adults and youth are often not aware that they are responding to a reminder, and the reason for their change in mood or behavior may go unrecognized. Media coverage can easily serve as unwelcome reminders. It is particularly difficult when loved ones/friends have been together during a traumatic experience, because afterward they can serve as trauma reminders to each other, leading to unrecognized disturbances in these important relationships, especially in a young person’s life. Loss reminders: Those who have lost loved ones continue to encounter situations and circumstances that remind them of the absence of their loved one. These reminders can bring on feelings of sadness, emptiness in the survivor's life, and missing or longing for the loved one's presence.

Post-violent Stress and Adversities

Contending with ongoing stresses and adversities can significantly deplete coping and emotional resources and, in turn, interfere with recovery from posttraumatic stress, traumatic grief, and depressive reactions. For example, teens may exhibit confusion, somatic responses (e.g., headaches, stomachaches), unusually aggressive or restless behaviors, or concerns about safety. Medical treatment and ongoing physical rehabilitation can be a source of additional stress. New or additional traumatic experiences and losses are known to exacerbate distress and interfere with recovery. Likewise, distress associated with prior traumatic experiences or losses can be renewed by the experience of the attack. Youth’s recovery is put in jeopardy without properly addressing changes in their relationships, monitoring of their at-risk behaviors, and assisting with changes to future life goals. Some adversities require large-scale responses, while others can be addressed, in part, by personal and family problem solving.

Consequences of These Reactions

Intrusive images and reactivity to reminders can seriously interfere with school performance and avoidance of reminders can lead to restrictions on important activities, relationships, interests and plans for the future. Irritability and impaired decision-making can interfere with getting along with family members and friends. Trauma-related sleep disturbance is often overlooked, but can be persistent and affect daily functioning. Some may respond by being unusually aggressive or restless, needing to be around parents or caregivers more than usual, or voicing fears or concerns about their safety or the safety of their friends. Adolescents may become inconsistent in their behavior, start to withdrawal and avoid social situations, become overly confrontational or aggressive, or engage in high risk behaviors (e.g., driving recklessly, using drugs and alcohol). Depressive reactions can become quite serious, leading to a major decline in school performance, social isolation, loss of interest in normal activities, self-medication, acting-out behavior, and, most seriously, attempts at suicide. Traumatic grief can lead to the inability to mourn, reminisce and remember, fear of a similar fate or the sudden loss of other loved ones, and to difficulties in establishing or maintaining new relationships. Adolescents may respond to traumatic losses by trying to become too self-sufficient and independent or by becoming more dependent and taking less initiative.

Coping after Catastrophic Violence

In addition to meeting people’s basic needs, there are several ways to enhance people’s coping. Physical: Stress can be reduced with proper nutrition, exercise and sleep. Youth and adults may need to be reminded that they should take care of themselves physically to be of help to loved ones, friends, and communities. Emotional: Youth and adults need to be reminded that their emotional reactions are expected, and will decrease over time. However, if their reactions are too extreme or do not diminish over time, there are professionals who can be of help. Social: Communication with, and support from, family members, friends, religious institutions and the community are very helpful in coping after catastrophic violence. People should be encouraged to communicate with others, and to seek and use this support where available.

Restoring a sense of safety and security, and providing opportunities for normal development within the social, family and community context are important steps to the recovery of children, adolescents, and families.
Talking to Children about the Shooting

The recent shooting has evoked many emotions—sadness, grief, helplessness, anxiety, and anger. Children who are struggling with their thoughts and feelings about the stories and images of the shooting may turn to trusted adults for help and guidance.

• **Start the conversation.** Talk about the shooting with your child. Not talking about it can make the event even more threatening in your child’s mind. Silence suggests that what has occurred is too horrible even to speak about or that you do not know what has happened. With social media (e.g., Facebook, Twitter, text messages, newsbreaks on favorite radio and TV stations, and others), it is highly unlikely that children and teenagers have not heard about this. Chances are your child has heard about it, too.

• **What does your child already know?** Start by asking what your child/teen already has heard about the events from the media and from friends. Listen carefully; try to figure out what he or she knows or believes. As your child explains, listen for misinformation, misconceptions, and underlying fears or concerns. Understand that this information will change as more facts about the shooting are known.

• **Gently correct inaccurate information.** If your child/teen has inaccurate information or misconceptions, take time to provide the correct information in simple, clear, age-appropriate language.

• **Encourage your child to ask questions, and answer those questions directly.** Your child/teen may have some difficult questions about the incident. For example, she may ask if it is possible that it could happen at your workplace; she is probably really asking whether it is “likely.” The concern about re-occurrence will be an issue for caregivers and children/teens alike. While it is important to discuss the likelihood of this risk, she is also asking if she is safe. This may be a time to review plans your family has for keeping safe in the event of any crisis situation. Do give any information you have on the help and support the victims and their families are receiving. Like adults, children/teens are better able to cope with a difficult situation when they have the facts about it. Having question-and-answer talks gives your child ongoing support as he or she begins to cope with the range of emotions stirred up by this tragedy.

• **Limit media exposure.** Limit your child’s exposure to media images and sounds of the shooting, and do not allow your very young children to see or hear any TV/radio shooting-related messages. Even if they appear to be engrossed in play, children often are aware of what you are watching on TV or listening to on the radio. What may not be upsetting to an adult may be very upsetting and confusing for a child. Limit your own exposure as well. Adults may become more distressed with nonstop exposure to media coverage of this shooting.

• **Common reactions.** Children/Teens may have reactions to this tragedy. In the immediate aftermath of the shooting, they may have more problems paying attention and concentrating.
They may become more irritable or defiant. Children and even teens may have trouble separating from caregivers, wanting to stay at home or close by them. It’s common for young people to feel anxious about what has happened, what may happen in the future, and how it will impact their lives. Children/Teens may think about this event, even when they try not to. Their sleep and appetite routines may change. In general, you should see these reactions lessen within a few weeks.

- **Be a positive role model.** Consider sharing your feelings about the events with your child/teen, but at a level they can understand. You may express sadness and empathy for the victims and their families. You may share some worry, but it is important to also share ideas for coping with difficult situations like this tragedy. When you speak of the quick response by law enforcement and medical personnel to help the victims (and the heroic or generous efforts of ordinary citizens), you help your child/teen see that there can be good, even in the mist of such a horrific event.

- **Be patient.** In times of stress, children/teens may have trouble with their behavior, concentration, and attention. While they may not openly ask for your guidance or support, they will want it. Adolescents who are seeking increased independence may have difficulty expressing their needs. Both children and teens will need a little extra patience, care, and love. (Be patient with yourself, too!).

- **Extra help.** Should reactions continue or at any point interfere with your children’s/teens’ abilities to function or if you are worried, contact local mental health professionals who have expertise in trauma. Contact your family physician, pediatrician, or state mental health associations for referrals to such experts.
**In the Wake of Trauma:**

**Tips for College Students**

- Whether or not you were directly affected by a traumatic event, it is normal to feel anxious about your own safety, to picture the event in your own mind, and to wonder how you would react in an emergency.

- People react in different ways to trauma. Some may become irritable or depressed; others lose sleep or have nightmares; and others may deny their feelings or simply “blank out” the troubling event. There is no “right” or “wrong” way to feel after experiencing trauma.

- While it may feel better to pretend the event did not happen, in the long run, it is best to be honest about your feelings and to allow yourself to acknowledge the sense of loss and uncertainty.

- It is important to realize that, while things may seem off balance for a while, your life will return to normal.

- It is important to talk with someone about your sorrow, anger, and other emotions, even though it may be difficult to get started.

- You may feel most comfortable talking about your feelings with a professor, counselor, or church leader. The important thing is to share your feelings with someone you trust. If you don’t have someone to confide in, call 1-800-273-TALK for someone who will listen.

- It is common to be angry at people who have caused great pain. This desire comes from our outrage for the innocent victims. We must understand, though, that it is futile to respond with more violence. Nothing good is accomplished by hateful language or actions.

- While you will always remember the event, the painful feelings will decrease over time, and you will come to understand that, in learning to cope with tragedy, you have become stronger, more adaptable, and more self-reliant.

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**Helpful Resources**

**National Mental Health Information Center**
Toll-Free: 1-800-789-2647 (English and Español)
TDD: 1-866-889-2647
Web Site: www.mentalhealth.samhsa.gov

**National Clearinghouse for Alcohol and Drug Information**
Toll-Free: 1-800-729-6686 (English and Español)
TDD: 1-866-889-2647
Web Site: www.ncadi.samhsa.gov

**Substance Abuse Treatment Facility Locator**
Toll-Free: 1-800-662-HELP (4357) (24/7 English and Español)
TDD: 1-800-487-4889
Web Site: www.findtreatment.samhsa.gov

**Hotlines**

**National Suicide Prevention Lifeline**
Toll-Free: 1-800-273-TALK (8255)
TTY: 1-888-713-4646
Web Site: www.suicidepreventionlifeline.org

**Office for Victims of Crime**
Toll-Free: 1-800-851-3420
TTY: 1-877-712-9279
Web Site: www.ojp.usdoj.gov/ovc/ovcrs/welcome.html

Note: Inclusion of a resource in this fact sheet does not imply endorsement by the Center for Mental Health Services, the Substance Abuse and Mental Health Services Administration, or the U.S. Department of Health and Human Services.
Tips for Talking With and Helping Children and Youth Cope After a Disaster or Traumatic Event

A GUIDE FOR PARENTS, CAREGIVERS, AND TEACHERS

“Adult support and reassurance is the key to helping children through a traumatic time”

Children and youth can face emotional strains after a traumatic event such as a car crash or violence. Disasters also may leave them with long-lasting harmful effects. When children experience a trauma, watch it on TV, or overhear others discussing it, they can feel scared, confused, or anxious. Young people react to trauma differently than adults. Some may react right away; others may show signs that they are having a difficult time much later. As such, adults do not always know when a child needs help coping. This tip sheet will help parents, caregivers, and teachers learn some common reactions, respond in a helpful way, and know when to seek support.

Possible Reactions to a Disaster or Traumatic Event

Many of the reactions noted below are normal when children and youth are handling the stress right after an event. If any of these behaviors lasts for more than 2 to 4 weeks, or if they suddenly appear later on, these children may need more help coping. Information about where to find help is in the Helpful Resources section of this tip sheet.

PRESCHOOL CHILDREN, 0–5 YEARS OLD

Very young children may go back to thumb sucking or wetting the bed at night after a trauma. They may fear strangers, darkness, or monsters. It is fairly common for preschool children to become clingy with a parent, caregiver, or teacher or to want to stay in a place where they feel safe. They may express the trauma repeatedly in their play or tell exaggerated stories about what happened. Some children’s eating and sleeping habits may change. They also may have aches and pains that cannot be explained. Other symptoms to watch for are aggressive or withdrawn behavior, hyperactivity, speech difficulties, and disobedience.

- **Infants and Toddlers, 0–2 years old**, cannot understand that a trauma is happening, but they know when their caregiver is upset. They may start to show the same emotions as their caregivers, or they may act differently, like crying for no reason or withdrawing from people and not playing with their toys.

- **Children, 3–5 years old**, can understand the effects of trauma. They may have trouble adjusting to change and loss. They may depend on the adults around them to help them feel better.
CHILDREN AND YOUTH IN THESE AGE RANGES MAY HAVE SOME OF THE SAME REACTIONS TO TRAUMA AS YOUNGER CHILDREN. OFTEN YOUNGER CHILDREN WANT MUCH MORE ATTENTION FROM PARENTS OR CAREGIVERS. THEY MAY STOP DOING THEIR SCHOOL WORK OR CHORES AT HOME. SOME YOUTH MAY FEEL HELPLESS AND GUILTY BECAUSE THEY CANNOT TAKE ON ADULT ROLES AS THEIR FAMILY OR THE COMMUNITY RESPONDS TO A TRAUMA OR DISASTER.

Children, 6–10 years old, may fear going to school and stop spending time with friends. They may have trouble paying attention and do poorly in school overall. Some may become aggressive for no clear reason. Or they may act younger than their age by asking to be fed or dressed by their parent or caregiver.

Youth and Adolescents, 11–19 years old, go through a lot of physical and emotional changes because of their developmental stage. So, it may be even harder for them to cope with trauma. Older teens may deny their reactions to themselves and their caregivers. They may respond with a routine “I’m ok” or even silence when they are upset. Or, they may complain about physical aches or pains because they cannot identify what is really bothering them emotionally. Some may start arguments at home and/or at school, resisting any structure or authority. They also may engage in risky behaviors such as using alcohol or drugs.

How Parents, Caregivers, and Teachers Can Support Children’s Recovery

The good news is that children and youth are usually quite resilient. Most of the time they get back to feeling ok soon after a trauma. With the right support from the adults around them, they can thrive and recover. The most important ways to help are to make sure children feel connected, cared about, and loved.

Parents, teachers, and other caregivers can help children express their emotions through conversation, writing, drawing, and singing. Most children want to talk about a trauma, so let them. Accept their feelings and tell them it is ok to feel sad, upset, or stressed. Crying is often a way to relieve stress and grief. Pay attention and be a good listener.

Ask your teen and youth you are caring for what they know about the event. What are they hearing in school or seeing on TV? Try to watch news coverage on TV or the Internet with them. And, limit access so they have time away from reminders about the trauma. Don’t let talking about the trauma take over the family or classroom discussion for long periods of time. Allow them to ask questions.

Adults can help children and youth see the good that can come out of a trauma. Heroic actions, families and friends who help, and support from people in the community are examples. Children may better cope with a trauma or disaster by helping others. They can write caring letters to those who have been hurt or have lost their homes; they can send thank you notes to people who helped. Encourage these kinds of activities.

If human violence or error caused an event, be careful not to blame a cultural, racial, or ethnic group, or persons with psychiatric disabilities. This may be a good opportunity to talk with children about discrimination and diversity. Let children know that they are not to blame when bad things happen.

It’s ok for children and youth to see adults sad or crying, but try not to show intense emotions. Screaming and hitting or kicking furniture or walls can be scary for children. Violence can further frighten children or lead to more trauma.

Adults can show children and youth how to take care of themselves. If you are in good physical and emotional health, you are more likely to be readily available to support the children you care about. Model self-care, set routines, eat healthy meals, get enough sleep, exercise, and take deep breaths to handle stress.
Tips for Talking With Children and Youth of Different Age Groups After a Disaster or Traumatic Event

PRESCHOOL CHILDREN, 0–5 YEARS OLD
Give these very young children a lot of cuddling and verbal support.

- Take a deep breath before holding or picking them up and focus on them, not the trauma.
- Get down to their eye level and speak in a calm, gentle voice using words they can understand.
- Tell them that you still care for them and will continue to take care of them so they feel safe.

EARLY CHILDHOOD TO ADOLESCENCE, 6–19 YEARS OLD
Nurture children and youth in this age group:

- Ask your child or the children in your care what worries them and what might help them cope.
- Offer comfort with gentle words, a hug when appropriate, or just being present with them.
- Spend more time with the children than usual, even for a short while. Returning to school activities and getting back to routines at home is important too.
- Excuse traumatized children from chores for a day or two. After that, make sure they have age-appropriate tasks and can participate in a way that makes them feel useful.
- Support children spending time with friends or having quiet time to write or create art.
- Encourage children to participate in recreational activities so they can move around and play with others.
- Address your own trauma in a healthy way. Avoid hitting, isolating, abandoning, or making fun of children.
- Let children know that you care about them—spend time doing something special; make sure to check on them in a nonintrusive way.

A NOTE OF CAUTION! Be careful not to pressure children to talk about a trauma or join in expressive activities. While most children will easily talk about what happened, some may become frightened. Some may even get traumatized again by talking about it, listening to others talk about it, or looking at drawings of the event. Allow children to remove themselves from these activities, and monitor them for signs of distress.
When Children, Youth and Parents, Caregivers, or Teachers Need More Help

In some instances, a child and their family may have trouble getting past a trauma. Parents or caregivers may be afraid to leave a child alone. Teachers may see that a student is upset or seems different. It may be helpful for everyone to work together. Consider talking with a mental health professional to help identify the areas of difficulty. Together, everyone can decide how to help and learn from each other. If a child has lost a loved one, consider working with someone who knows how to support children who are grieving. Find a caring professional in the Helpful Resources section of this tip sheet.

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Guía para los Padres Para
Ayudar a los jóvenes después de un tiroteo reciente

El reciente tiroteo ha sido una experiencia aterradora y los días, semanas y meses siguientes pueden ser muy estresantes. Con el tiempo sus hijos y su familia podrán recuperarse, especialmente con el apoyo de familiares, amigos y la comunidad. Sin embargo, las familias, los niños y los jóvenes pueden haber tenido diferentes experiencias durante y después del tiroteo, incluyendo aquellos que pueden haber sufrido lesiones físicas, los que están involucrados en la investigación policial, aquellos que están preocupados por la seguridad de los miembros de su familia y amigos, y los que han perdido seres queridos. El tiempo que toma recuperarse de un evento como este, dependerá de lo que le sucedió a usted y a su familia durante y después del mismo. Algunos adultos y jóvenes pudieron resultar gravemente heridos y probablemente requerirán tratamiento médico y rehabilitación durante largo tiempo. Con el tiempo, algunos de ellos retornarán a sus rutinas habituales, mientras que otros podrían tener dificultades para ello.

Los niños y jóvenes pueden reaccionar de diferente manera a un tiroteo, dependiendo de su edad y experiencias previas. Sepa que los jóvenes pueden responder de diversas maneras, brinde apoyo y sea comprensivo hacia las diferentes reacciones, aun cuando usted tenga sus propias reacciones y dificultades.

Las reacciones de los niños y jóvenes a un tiroteo están fuertemente influenciadas por cómo responden al evento los padres, familiares, maestros y otros cuidadores. A menudo los niños y jóvenes acuden a estos adultos para obtener información, consuelo y ayuda. Existen muchas reacciones que son comunes después de un evento de violencia masiva. Generalmente estas disminuyen con el tiempo, pero saber acerca de estas reacciones puede ayudarle a brindar apoyo, tanto a usted mismo como a sus hijos.

Reacciones comunes
• Sentimientos de ansiedad, miedo y preocupación por la seguridad de sí mismo y de los demás
• Temor de que se pueda producir otro tiroteo
• Cambios en el comportamiento tales como:
  • Aumento en el nivel de actividad
    o Disminución de la concentración y la atención
    o Aumento de la irritabilidad y la ira o enojo
    o Tristeza, el dolor y/o retraimiento
    o Cambios radicales en las actitudes y en las expectativas para el futuro
    o Aumento o disminución en el sueño y el apetito
    o Participación en actividades dañinas como el consumo de alcohol, el uso de drogas o hacer cosas que son perjudiciales para sí mismo u otros
    o Falta de interés en las actividades habituales, incluyendo el jugar con amigos
• Quejas a nivel físico (dolores de cabeza, dolores de estómago, otros dolores y molestias)
• Cambios en la escuela, en los hábitos relacionados con el trabajo y en la forma de comportarse con pares y la familia
• Permanecer enfocado en el tiroteo (hablar repetidamente sobre el tiroteo)
• Reacciones fuertes a los recordatorios del tiroteo (ver a amigos que también estaban presentes durante el tiroteo, imágenes de los medios de comunicación, humo, la policía, funerales)
• Mayor sensibilidad a los sonidos (ruidos fuertes, gritos)

**Cosas que puede hacer por usted mismo/a:**

• **Cuidar de usted mismo.** Asegúrese de cuidarse físicamente incluyendo el tomar suficiente agua, comer regularmente, dormir bien y hacer ejercicio.
• **Ayudarse mutuamente.** Tómese tiempo con otros familiares adultos, amigos o miembros de la comunidad para hablar o apoyarse unos a otros.
• **Posponga tomar decisiones importantes.** Evite tomar cualquier decisión innecesaria durante este tiempo que pueda alterar su vida.
• **Tómese un descanso.** Tómese el tiempo para descansar y hacer las cosas que más le gustan.

**Cosas que puede hacer por su hijo/a:**

• **Dedique tiempo para hablar con sus hijos.** Hágalas saber que está bien hacer preguntas, expresar sus preocupaciones y sentimientos. Debe permanecer abierto a responder a nuevas preguntas, proporcionar información útil y brindar apoyo. Es posible que usted no sepa todas las respuestas y está bien decir eso. Al mismo tiempo, no los fuerce a hablar si ellos no quieren. Hágalas saber que usted está disponible para cuando ellos estén listos.
• **Tome el tiempo para tener estas conversaciones.** Por ejemplo, utilice el tiempo cuando cenan juntos o cuando comparten juntos en la noche, para hablar de lo que está sucediendo en la familia y en la comunidad. Trate de no tener estas conversaciones cerca de la hora de acostarse, ya que este es el momento para el descanso.
• **Promueva el autocuidado de sus hijos.** Ayude a los niños y jóvenes animándoles a tomar suficiente agua, comer con regularidad, y obtener suficiente descanso y ejercicio. Hágalas saber que está bien tomar un descanso y no tener que hablar con otras personas sobre los recientes ataques, o que no tienen que asistir a ninguno de los servicios fúnebres.
• **Ayude a que los niños y jóvenes se sientan a salvo.** Hable con los niños y jóvenes acerca de sus preocupaciones sobre la seguridad, y sobre los cambios que se están produciendo en la comunidad para promover la seguridad. Anime a su hijo a expresar sus preocupaciones con usted o con maestros en la escuela.
• **Mantenga las expectativas o “reglas.”** Continúe con las reglas de la familia, como las horas de entrada a la casa, reportarse cuando están con amigos y mantenerse al día con las tareas escolares y quehaceres del hogar. Por un tiempo limitado, vigile más de cerca a dónde van los jóvenes y qué están planeando hacer, para saber cómo están. Indíqueles que este tener que reportarse más seguido es temporal, sólo hasta que las cosas se estabilicen.
• **Hable acerca de sus cambios perjudiciales en el comportamiento.** Ayude a los niños y jóvenes a comprender que estos comportamientos son una forma peligrosa de expresar fuertes sentimientos sobre lo que ocurrió. Los ejemplos de estos cambios incluyen el cortarse intencionalmente, el conducir vehículos de manera riesgosa o temeraria, las relaciones sexuales sin protección y el abuso de drogas o alcohol. Se puede decir algo como: “Muchos niños, jóvenes y adultos se sienten fuera de control y en este momento están muy enojados. Incluso pueden pensar que tomar alcohol o consumir drogas les ayudará de alguna manera. Es muy normal sentirse así - pero es peligroso el actuar de esa manera. Hable con los niños
acerca de otras maneras de enfrentar estos sentimientos (distracción, ejercicio, escribir en un diario, pasar tiempo con las personas).

- **Limite la exposición a los medios de comunicación.** Proteja a su hijo de la excesiva cobertura de los ataques por parte de los medios de comunicación, incluyendo la Internet, la radio, televisión, u otras tecnologías (por ejemplo, mensajes de texto, Facebook, Twitter). Explíqueles que la cobertura de los medios de comunicación y de las redes sociales pueden desencadenar temores de que los ataques ocurran de nuevo, además de difundir rumores. Hágales saber que pueden distraerse con otra actividad o que pueden hablar con usted acerca de cómo se sienten.

- **Sea paciente.** Los niños y jóvenes pueden mostrarse más distraídos y requerir de ayuda adicional con las tareas del hogar y los trabajos escolares una vez la escuela reinicie.

- **Hable con sus hijos de sentimientos de aislamiento-vergüenza-culpa.** Explique que estos sentimientos son normales cuando suceden estas cosas, y corrija la auto-culpabilización con explicaciones realistas de lo que realmente ellos hubieran podido hacer. Tranquilícelos explicándoles que ellos no causaron ninguna de las muertes, y que estas no ocurrieron como castigo a cualquier cosa “equivocada” que alguien hubiera podido hacer. Usted puede decirles, “Muchos niños, jóvenes y aun adultos, se sienten como te sientes tú. Estás enojado y te culpan a sí mismo, pensando que hubieras podido hacer más. No es tu culpa. No habría nada más que hubieras podido hacer”.

- **Maneje las cosas que recuerden lo sucedido.** Ayude a los niños a identificar diferentes recordatorios (personas, lugares, sonidos, olores, sentimientos) y a aclarar la diferencia entre el evento y los recordatorios que ocurren después del evento. Cuando los niños y jóvenes experimentan un recuerdo, pueden decirse a sí mismos, “Me siento mal porque me acuerdo del tiroteo cada vez que veo una bolsa de papas fritas. Pero no hay disparos y estoy a salvo”. Algunos recordatorios pueden estar relacionados con la pérdida de amigos y/o familiares (fotos de la persona, música que solían escuchar juntos, lugares donde solían pasar tiempo juntos). Ayude a sus hijos a manejar los recordatorios de esas pérdidas y ofrézcales apoyo extra en estos momentos.

- **Monitoree cambios en la forma como sus hijos se relacionan con otros.** Explique a los niños que es normal que tras este tipo de eventos se den tensiones en las relaciones. Emphatic en que todos necesitamos familia y amigos para apoyarnos en estos momentos. Emplee más tiempo en hablar como familia acerca de cómo se esta sintiendo cada uno. Promueva tolerancia acerca de cómo su familia y amigos se pueden estar recuperando o sintiendo de manera diferente. Responsabilícese por sus propios sentimientos diciendo, “Quiero disculparme por haber estado irritable contigo ayer. Estaba teniendo un mal día”.

- **Hable acerca de cambios radicales en actitudes y expectativas futuras.** Explique a los niños que los cambios en la actitud de la gente son comunes, y tienden a ser temporales después de una tragedia como ésta. Estos sentimientos pueden incluir sentirse asustado, enojado y a veces con sentimientos de venganza. Encuentre otras maneras de hacerlos sentir más en control de sí mismos y hablar acerca de sus sentimientos.

- **Involucre a otros adultos en la vida sus hijos.** Si ha habido alguna herida grave o muerte en la familia o muerte de un amigo cercano, o si su niño o el joven está teniendo dificultades, déjele saber a la maestra de su hijo o a otros adultos importantes para él, de manera que estos puedan ayudarle.

- **Ayude a su hijo a involucrarse más en su cuidado medico.** A los niños o jóvenes que han sido heridos o que tienen necesidades médicas a largo plazo, motivelos a participar en discusiones y decisiones médicas lo más que le sea posible. Permita que ellos hagan sus propias preguntas y expresen sus opiniones acerca de diferentes procedimientos. Los jóvenes se preocupan especialmente por su apariencia física, si encajan o no con el ambiente y por su privacidad. Hable con ellos acerca de estas preocupaciones y busque soluciones para responder a estas preocupaciones, respetando su privacidad.

- **Busque ayuda profesional.** Si los niños o jóvenes continúan teniendo dificultades dos meses después de los ataques, los padres deben consultar un profesional en quien confíen – un doctor o un profesional en salud mental.