Psychological First Aid for Children and Adolescents

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The following points are covered in this information sheet:

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Common and expected immediate responses to a frightening or overwhelming experience

Why it is important to help at this time

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Ways parents and carers can help

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Definition of Psychological First Aid

“Psychological First Aid” is a term used like physical first aid, to describe strategies to assess and protect people in an emergency which threatens their lives or wellbeing. Psychological first aid is an internationally accepted concept and strategy supported by the World Health Organisation, which has developed specific guidelines for use across the world. Special guidelines have also been developed for children, both by the World Health Organisation and the National Child Traumatic Stress Network in the U.S.A.

The key principles are always safety, survival, shelter and to protect life. The words used to inform Psychological First Aid for children in a disaster or other emergency are:

• Listen/Look
• Protect
• Connect

These guidelines below expand on some of the important issues for consideration when children are affected by an emergency.

Common and expected immediate responses to a frightening or overwhelming experience

When infants, children and adolescents have an overwhelming or frightening experience, their immediate reactions may include becoming “frozen” physically and/or emotionally. It may be difficult for them to be fully aware of what is going on around them. They may also be over-aware of some details which can become magnified for them. They are likely to be deeply afraid and highly anxious. They may also experience intense physical reactions such as:

• nausea,
• heart palpitations
• loss of bowel and bladder control
• out of control crying or screaming.

They will have an overwhelming need to feel the protection, safety and comfort of the most important
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and familiar people in their lives – such as their parents, extended family and/or teachers.

Why is it important to help at this time?

Regaining a sense of emotional and physical safety, feeling protected from the powerful and confronting force of the traumatic event and being comforted and calmed, gradually brings the episode to a close. This limits the potential damaging effects of the experience and provides the first steps in the recovery process.

Guidelines for what children and adolescents need

• Children need to be with their parents/carers. If this is not possible, try to keep in touch by phone or emails
• Try to avoid unnecessary separation of children from their parents/carers or siblings
• Maintain a calm, non-threatening environment
• Take care of basic health needs including shelter, clean water, warmth, healthy food and rest
• Maintain familiar objects, routines, places
• Explain what has happened and, if possible, what will happen next

Ways parents and carers can help

• Make sure you look after your own safety and wellbeing
• Be mindful of the child’s needs and reactions and be responsive to them.
• Look for some support for yourself so you are better able to understand and help your child or adolescent
• Remove the child and yourself as much as possible from the sight, sounds, smells and circumstances of the incident. Look for a quiet and settled place with other people around.
• Tell your child that they are safe (when this is the case), that you are with them and that you will look after them
• Try to avoid exposure to distressed people, other people’s conversations about their experience and media reporting of the incident
• Comfort your child with the normal comforting actions your child is used to such as cuddling, stroking, holding hands and sitting together. Quiet conversation and singing can also help to reassure them that they will be ok
• Accept the child’s responses, reactions and feelings. Don’t tell them to ‘be good’ ‘stop being silly’, or to ‘be brave’
• Do not make behavioural or emotional demands or have expectations the child might not be able to meet at this particular time.
• Allow the child or adolescent to talk and say what needs to be said. Let them cry, but do not force them to talk. Calming and quiet conversation will help a child to settle and feel safe.
• Answer any questions factually, clearly and concisely without unnecessary detail. If you do not have information, say so. Do not make promises which may not be able to be kept or make statements that may not be accurate.
• Reassure the child or adolescent that their reactions are normal and will pass in time
• Help the child to manage any physical reactions such as using slow and steady breathing when they are tense, breathing rapidly or fidgeting
• As soon as possible connect with something familiar - a person, a place, an object. Familiarity and routine help to establish and maintain recovery.
• If children and adolescents want to play or listen to music, try to make this happen.
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• If children and adolescents want to play or listen to music, try to make this happen.

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