

ASSOCIATE PROFESSOR BRETT McDERMOTT SPEAKS ABOUT THE POSSIBLE EMOTIONAL RESPONSES OF CHILDREN WHO HAVE SURVIVED, WITNESSED, OR LOST LOVED ONES DURING THE CURRENT BUSHFIRES.

We began by asking, "What do we really know about children's reactions to bushfires?"

"Australia is quite fortunate in that there have been several large studies about bushfires and the emotional response of children. Approximately 4,000 children were reviewed after the 1994 Sydney bushfires and another 500 after the Canberra bushfire disaster.

We know that children have a range of potential reactions, which can be summarized as either anxiety or depressive reactions. In the current Victorian bushfires, unfortunately responses might be even more complex because of the horrendous loss of life, which brings into play grief, traumatic grief and bereavement.

The typical anxieties that children get are either a phobia or posttraumatic stress disorder. A phobia is a direct fear about something immediately relating to the frightening event, for example: the furnace like sound of the fire; wind; the smell of smoke; or indeed the site of fire. A phobia means you have an intense immediate fear reaction – your body often tells you you're anxious as well and makes you want to avoid and run.

Posttraumatic stress disorder is a bit more complicated. In the first aftermath after a frightening event PTSD symptoms are usually of the re-experiencing phenomena like, nightmares, flashbacks and feeling like it is all happening again. Also in these first two months your nervous system can be hyper-aroused, so: you can be very vigilant; you can startle incredibly easily; you may be jumpy, sweaty and have a high pulse rate – which you can feel as palpitations. Later on you may have more symptoms like feeling numb and detached. And parents, especially parents of primary aged children, describe this as the child experiencing a personality change. The type of personality change we see with posttraumatic stress disorder is: the child is less emotionally reactive; they are more restrictive in their feelings; they often avoid interactions or avoid events; and in children they become less interested in life, less vital and less reactive.

In terms of depression, you are more likely to go down a depression path if you have experienced bereavement, or a significant loss of possessions and valued objects. And of course the bereavement can be to the much-loved family pet as well as to a significant adult to the person's life. In bereavement and depression you are more likely to have lowered mood, again you might lose the pleasure response and interest in life, have sleep problems, lose your appetite, lose your weight, and your thinking pattern might change to thoughts that are more negative and pessimistic.

The research both in Sydney and Canberra demonstrated a few things that predicted these adverse emotional outcomes. The most predictive factor of

anxiety was a feeling that you may die, thinking that you could have died, or, sure that you were about to die during the bushfire. And if you had this experience as a child it increased your chance of PTSD about five times. Which makes it a very important piece of information to elicit. The other important things were: if you had a frightening evacuation experience; if you got physically very close to the fires (so you could almost measure your chance of PTSD with a tape measure), if you were separated, and if you witnessed significant injury of others, or damage, such as house damage. If you were more exposed you were at greater risk of PTSD.

You were protected: (i) if you were older – so adolescents had a lower rate than children, (ii) if you were male – who tended to show their emotional distress in other ways (iii) if you were well connected to your community through school, or sporting clubs etc. These people tended to do a little bit better.

In disasters there are two phases:

(i) The acute phase - where everyone, completely appropriately, is highly focused on food, water, shelter and safety. In this phase people are encouraged to talk and are directed to the services they can access for immediate help.

(ii) In several months time (when the spotlight seems to have left the bushfires and people not directly involved tend to move on) people can feel left out and abandoned as their suffering continues. These feelings can lead to sadness, and sometimes, anger. But also at this time (2-3 months after the bushfires) some children (about 5-10%) can still have emotional problems. They may still have sadness and depression or an anxiety reaction, like PTSD.

So, it is very important after a couple of months to still be vigilant about our children's emotional health. For those children with persisting symptoms this is a very appropriate time to talk to a school counselor, GP, or child and youth mental health team. If the symptoms are still there in three months they might still be there in 9 months or 12 months. The young people better at three months are fine, they've processed the reaction themselves and getting on with their life. But, the other children we need to take a special interest in".

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AUSTRALIAN CHILD &
ADOLESCENT TRAUMA,
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Podcast February 15th 2009
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