

How news about violence affects kids

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Grim images of gun incidents spanning from Newtown, Conn., to Los Angeles have filled news reports of late, presenting a challenge for parents whose children are exposed to these events through the media—whether by television, newspaper or the Internet. And with discussions in the Senate to potentially ban assault weapons and boost funding for school security, gun violence is a topic that remains in the public eye.

Honest, age-appropriate communication is one of the most important elements in helping [youngsters](#) handle news of [traumatic events](#), according to Victor Carrion, MD, a child and adolescent psychiatrist at Lucile Packard Children's Hospital. Carrion also directs the Stanford Early [Life Stress](#) Research Program and has conducted extensive research on [childhood trauma](#). In this Q&A with writer Winter Johnson, he discusses how news about violence affects children and what parents can do to help them cope.

Q: What are the potential short-term psychological effects on school-age children hearing or seeing information about these events?

The short-term effects include children becoming concerned about their own safety, and—if they are very young, such as preschoolers and first- and second-graders—they may even be concerned about the safety of their family. Children can also be concerned about who will be taking care of them, or wonder if the tragedy that has happened will happen

again. In addition, children who are closer in proximity to the event will be at increased risk for symptoms of post-traumatic stress disorder. However, because the images in the media are now so prevalent and vivid, the psychological effect on the child can be the same as if the child was at the scene of the gun incident.

We must protect children by limiting their exposure to these images. If the child is 3 or 4 years old—and there is no chance of them hearing about a recent gun incident—then there is no need to discuss it with them. You only need to talk about it if you think your child will hear about it.

Q: What about the potential long-term impacts?

For some children—if they are not treated via an assessment and psychosocial therapy—their academic and social life will be impacted. Difficulty paying attention, managing emotional responses and problems with memory are common symptoms that children may experience. We call the ability to organize, make decisions and manage emotional responses "executive function," and this skill set could be impaired if a child witnesses or hears about a gun incident.

Post-traumatic stress disorder is a particular danger for children who live in volatile environments. They will develop the disorder more quickly if a violent gun event occurs near them.

Q: What are some of the early warning signs of childhood trauma for parents to look out for?

Irritability, a greater susceptibility to crying and difficulty with sleep are among the symptoms that should raise a red flag if they persist longer than a month. Younger children may become clingier and experience

nightmares and distressing or bad dreams. Children may regress in some behaviors—such as bedwetting or sucking their thumb—and you may hear them complaining more about a stomachache or headache. Some children, when they get older, may withdraw and become more isolated, and may potentially stop enjoying things that they used to.

Q: Are children who are under a certain age more vulnerable to psychological impact than a teenager would be?

We know that the younger the child—for example, a preschooler would be more vulnerable than a school-age child—the more they are at risk. Physiologically, their minds are more fragile. Adolescence is a critical period, just like early childhood; they are still vulnerable as well. People used to think that children—by virtue of being children—are more resilient, but there is no medical basis for that in neuroscience or psychological research.

Q: How do you recommend that parents should talk to their kids about disturbing events and images?

Encourage discussion with your children, but do not force it. Let your kids know that the conversation is welcome but that if the child doesn't want to, don't make them. Don't force bravery; let them know that it's OK to be fearful or angry or sad, that it's OK for them to have their reaction. It's also very important to assure young children of their safety. If that is one of their concerns, then it is important to give the message, "You are protected. You are safe."

In the event you notice warning signs in your [children's](#) behavior, I would recommend taking them to their pediatrician or mental health specialist for a consultation.

Provided by Stanford University Medical Center

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