MythBuster
Trauma and mental health in young people
Let’s get the facts straight

MYTH
“It’s my fault”
Introduction
Most young people will have been exposed to at least one traumatic event in their lifetime. Multiple and prolonged exposure to trauma is also common. When a young person reaches out to open up about trauma, the way that others around them respond can have a massive effect on the young person’s ability to understand and cope with what has happened. Some aspects of trauma remain largely misunderstood, especially when it comes to its relationship with mental health.

This mythbuster has been created for young people, their families, and carers. It aims to tackle some of the most common and harmful myths about trauma in the mental health space, and to replace these with a better understanding of what trauma is and how it can affect young people.

Trauma can come from many different life experiences

What is trauma?
Trauma is broadly described as a deeply distressing experience that can be emotionally, mentally, or physically overwhelming for a person. It takes on many different forms and affects each person very differently. It is important to know that an experience does not have to be life threatening to be traumatic. Approximately two thirds of young people will have been exposed to a traumatic event by the time they turn 16. Experiencing a traumatic event can potentially affect both their current and future mental health.

What types of events cause trauma?
Trauma can come from many different life experiences. Listed below are some examples of different types of trauma.

Single event trauma
Single event trauma is related to a single, unexpected event, such as a physical or sexual assault, a bushfire, an accident, or a serious illness or injury. Experiences of loss can also be traumatic, for example, the death of a loved one, a miscarriage, or a suicide.

Complex trauma
Complex trauma is related to prolonged or ongoing traumatic events, usually connected to personal relationships, such as domestic violence, bullying, childhood neglect, witnessing trauma, emotional abuse, sexual abuse, or torture.

Vicarious trauma
Vicarious trauma can arise after hearing first-hand about another person’s traumatic experiences. It is most common in people working with traumatised people, such as nurses or counsellors. Young people may also experience vicarious trauma through supporting a loved one who is traumatised (e.g. a parent or a friend).

Trans- or intergenerational trauma
Trans- or intergenerational trauma comes from cumulative traumatic experiences inflicted on a group of people, which remain unhealed, and affect the following generations. It is most common in Aboriginal and Torres Strait Islander young people and young people from refugee families.

Direct and indirect trauma
Some types of trauma are called ‘direct trauma’, and others are called ‘indirect trauma’. A ‘direct trauma’ is experienced first-hand or by witnessing a trauma occurring to another person. An ‘indirect trauma’ comes from hearing or learning about another person’s trauma second-hand.

Anyone can experience trauma, regardless of their age or social/cultural background

Who experiences trauma?
Some young people are at higher risk of being victimised, abused, marginalised, excluded, and/or experiencing unsafe situations that leave them vulnerable to potentially traumatic experiences. Young people who are more likely to have experienced trauma include those in out-of-home care, in the juvenile justice system, those experiencing homelessness, young refugees or asylum seekers, Aboriginal or Torres Strait Islander young people, and young people working in emergency services. However, it is very important to understand that anyone can experience trauma, regardless of their age or social/cultural background.
How do our perceptions of traumatic events change as we age?

When trying to understand the impact trauma has on the lives of young people, it is important to understand that the way we make sense of and respond to trauma changes as we age. During childhood we are more sensitive to our environment, so how we view threats can be quite different to the way an adult views threats. For example, immediately after a bushfire, parents may be distressed about the safety of their children, the loss of their property or livelihood, and the impact on their community. On the other hand, children may be most distressed about separation from their family, the disruption of their daily routines, and the loss of their pets. This can mean that adults might be confused or unable to relate to their child’s response to a traumatic event. A child may also be confused by their reactions and/or why they might not be feeling or responding to an event in the same way as others around them.

Young people and children process trauma differently

Children process trauma differently compared to adults because their brains are still developing. This means that the types of things that children experience as traumatic, and how they understand them, can be very different to adults.

When looking back at traumatic experiences in childhood, it can be hard to understand the confusing emotions and reactions experienced at the time. A young person might look back and think that they should have been able to understand things ‘better’ or cope ‘better’. This can lead to strong and difficult feelings like anger, guilt, and shame.

When a young person is caught up in this way of thinking, they are expecting an ‘adult’ response from a child. In other words, they are looking back on their experiences in childhood through the lens of an adult. By doing this, it is easy to forget that the trauma happened to a child, who had much less ability and life experience to help them process their trauma and seek support.

How does trauma affect young people?

Short-term effects

The short-term effects of trauma are often described as normal reactions to abnormal events, and can include:

- fear
- guilt
- anger
- isolation
- helplessness
- disbelief
- emotional numbness
- sadness, confusion
- flashbacks or persistent memories and thoughts about the event.

It is really important to know that these are normal and healthy reactions to trauma. These can last for up to a month after the trauma has occurred, and can slowly reduce over time.

Long-term effects

Sometimes these strong emotions, thoughts, and memories can continue over time and even worsen. This can overwhelm a young person and have damaging effects on their life and its course (e.g. their wellbeing, relationships, and their ability to work and/or study). Some traumas, such as those occurring in childhood, may have effects that only become clear later in life. Long-term, there is a strong relationship between trauma and poor mental and/or physical health outcomes; however, in many cases young people can bounce back with the right support. In some situations, young people can draw personal strength from their struggle with trauma and experience a feeling of positive growth.

Developmental effects

Being exposed to trauma when we are very young can change how our brain grows, negatively affecting our ability to learn. High amounts of stress when we are very young can also increase risk-taking behaviours in adolescence and early adulthood, which can lead to poor physical health later in life.
What is post-traumatic stress disorder or PTSD?

Post-traumatic stress disorder (PTSD) is the most commonly talked about trauma-related diagnosis. Symptoms include having intrusive memories of the traumatic event, increased stress, avoidance of situations and/or people associated with the trauma, and increased negative thoughts. These symptoms impact a person’s ability to keep up with their day-to-day life and make it hard for them to focus on work and/or study and other tasks. PTSD can also cause problems with a person's relationships with others. In high-income countries, including Australia, approximately 30% of PTSD is experienced before the age of 18. Symptoms of PTSD may differ between children, adolescents, and adults. It is really important to get help early if you are struggling to cope after experiencing trauma because evidence shows that the sooner help is sought, the lower the risk of developing PTSD.

What are the most common myths about trauma?

Traumatic events and a young person’s reactions to them vary a lot. They can vary between people (e.g. some people may be more sensitive to traumatic experiences than others), and within the same person over time, or depending on the type of traumatic event they have experienced. This can make it difficult for us to have a shared understanding of what trauma is and how it can affect people. If we feel confused or uncertain about what trauma is, and how it can affect someone, it is very easy to get caught up in common and unhelpful myths. Below are some of the common myths surrounding trauma and the reasons why these myths are harmful and untrue.

MYTH: “Everyone who has mental ill-health has experienced trauma”

This myth is particularly harmful because young people who have not experienced trauma, but who are struggling with their mental health, may feel that they have no right to feel how they do, or be very confused about their experiences. They may also worry that if they seek support everyone will assume they have experienced trauma.

Just because a young person is experiencing mental ill-health does not necessarily mean that they have gone through trauma. There are many risk factors that contribute to the beginning of mental ill-health. These can include environmental, genetic, social, and cultural risk factors. Mental ill-health can start without a specific event ‘tipping a person over the edge’. In fact, mental ill-health is often triggered by a build-up of a number of smaller stressful events rather than one big traumatic event.

Even though trauma is linked to a higher chance of poor mental health, it is important to remember that the causes of mental ill-health in young people are very complex.

Evidence shows that the sooner help is sought, the lower the risk of developing PTSD

It is really important to know that developing mental health problems after trauma is not a sign of weakness
MYTH: “Everyone who has experienced trauma will develop mental ill-health”

Most people who experience trauma do not develop mental ill-health as a consequence.25 Many factors influence whether or not a young person develops mental ill-health after experiencing trauma. These include the severity and type of trauma, the support available, how easily they can access this support, past traumatic experiences, family history, and physical health.12, 25, 26

It is completely normal to experience strong or overwhelming emotions after a traumatic experience, but it is when these symptoms last a long time, worsen over time, or cause other problems (e.g. using substances to cope) that mental health difficulties are likely to arise. It is really important to know that developing mental health problems after trauma is not a sign of weakness. It does not mean anything about you personally. It is simply a sign that you need some extra support to recover from the effects of your experiences.

MYTH: “It’s my fault”

Trauma can happen to anyone, and if you are a victim of trauma, this does not mean that you are to blame for what happened to you. ‘It’s my fault’ is a common feeling after experiencing trauma, and it is completely normal to feel shame, guilt, and/or self-blame after these experiences. Even though we feel this way, it does not mean we deserve these feelings, and a huge part of recovery is working to overcome them.

These types of emotions are particularly common in young people who have been traumatised by another person (e.g. through sexual abuse, physical abuse, bullying, or violent crime). In cases of trauma resulting from abuse, it is important to understand that abuse comes from the needs and motivations of the perpetrator, not the individual. Being able to work through these strong emotions of self-blame, guilt, and/or shame is essential to recovery. This means it very important to find the right help to support you through this process.

MYTH: “Only bad things come out of traumatic experiences”

Struggling through traumatic experiences often changes the way a person views the world and people around them. A lot of the time, it can do this in a negative way (e.g. the world seems scarier, or people seem less trustworthy). However, in some situations, with the right support, and time to heal, a person may also draw strength and positive change from surviving a traumatic event.

When this happens, it is described as ‘post-traumatic growth’.27-29 When someone experiences post-traumatic growth, they may gain a greater appreciation for life, a feeling of greater personal strength, a deeper connection to others, and even gain new ideas about the path they see their life taking in the future.29 Research shows that post-traumatic growth is hugely influenced by many psychological, social, and environmental factors in a young person’s life.14 How each of us reacts to traumatic experiences is deeply linked to these factors, and our different reactions do not make us ‘weaker’ or ‘stronger’ compared to others.

MYTH: “Your life must be threatened for an event to be traumatic”

Traumatic experiences take many different forms.30 There does not have to be one defining event that makes something traumatic. It is true that traumatic events are sometimes singular and life threatening, but many are more complex. Many people experience trauma through ongoing or prolonged exposure to events such as abuse, neglect, and bullying. Some people experience trauma vicariously – that is through encountering another person’s traumatic experiences first-hand. In some populations, such as children of refugees and Aboriginal and Torres Strait Islander people, trauma can even be passed down from one generation to another.

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**Traumatic events are sometimes singular and life threatening, but many are more complex**
MYTH: “PTSD is the most common response to trauma”

Although post-traumatic stress disorder (PTSD) is the most commonly talked about trauma-related mental illness, it is not the most common mental health diagnosis among people who have experienced trauma. There are many ways that trauma can affect mental health in young people. In fact, for most young people, PTSD only captures a small aspect of their mental health state after trauma. Young people who have experienced trauma can develop a wide range of mental health problems, without developing PTSD. These include depression, anxiety, complex PTSD, borderline personality disorder, substance abuse disorders, eating disorders, psychosis, and suicide-related behaviours.

Take home messages

- If you have experienced trauma, you are not alone. Trauma in young people is very common and it is important for family, friends, and mental health professionals to be aware of this.
- Traumatic events can be one off (e.g. car accident, sexual assault), ongoing/prolonged (e.g. childhood sexual abuse, bullying, emotional or physical abuse), or experienced second-hand (e.g. witnessing family violence). Any type of trauma has the potential to be very damaging to a young person's mental health.
- Often young people who have been abused or neglected feel at blame for what has happened to them - they may feel it was their fault, or that they 'brought it on' or 'asked for it'. If you are in this situation, it is very important to know that you are not to blame, no matter how strong the feelings of guilt or shame may be.
- There is no one uniform or 'right' way to respond to traumatic events. Responses to trauma are highly variable. Different people may react very differently, even to the same situation.
- Young people experiencing mental ill-health have not necessarily experienced trauma, and this does not make their mental health difficulties any less 'real' or 'legitimate'.
- Trauma does not always lead to mental ill-health in young people. Many young people exposed to trauma will make a full recovery without needing mental health intervention.
- Experiencing mental health difficulties related to trauma is not a sign of weakness or failure.
- Trauma can lead to a wide range of mental health difficulties, not just PTSD. These include anxiety, depression, substance abuse, borderline personality disorder, and eating disorders. It is important to get support from a health professional for any of these difficulties.
- It is possible to recover from mental health difficulties related to trauma.

Help is at hand

Support is a huge protective factor against ongoing mental health difficulties related to trauma. Sometimes people can try to cope with the effects of trauma alone, even though reaching out for support can be hugely beneficial. Some young people might feel an overwhelming sense of self-blame or shame and might not be aware of or understand the effects of trauma, making it even harder to seek support.

Seeking help from someone you know

It is really important to try to find someone you can talk to about what's going on for you. Seeking support for trauma recovery does not make a person 'weak', in fact it is a brave step to take on the road to recovery. Opening up about traumatic events can be daunting, making it very important to find someone you feel comfortable with and can trust to talk to. This person might be a family member, friend, or school counsellor.

Seeking professional help

Some young people may not feel comfortable opening up to people in their personal lives and may prefer to seek help through a mental healthcare professional. In terms of seeking professional help, a good place to start is with your GP, a counsellor, or through a visit to your closest headspace centre. A number of helplines are also available:

- Blue Knot Helpline (1300 657 380) provides information and short-term counselling for survivors of childhood sexual abuse.
- 1800RESPECT (1800 737 732) provides similar over-the-phone support for survivors of sexual assault, domestic, and family abuse.
Want to know more?

Some helpful resources about trauma and its effects include:

- ‘What the? Trauma, stress and teenagers’ – Phoenix Australia factsheet
- Trauma – Headspace factsheet
- Grief – Headspace factsheet
- PTSD, dealing with crises, and bereavement – SANE Australia (factsheets and guides)
- ‘Towards Recovery’ – Blue Knot factsheet for people who have experienced childhood trauma

Supporting someone who has experienced trauma

Supporting someone affected by trauma can be emotionally overwhelming, making it important to look after yourself. If you are concerned about the wellbeing of someone close to you, it is important to reach out for help.

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eheadspace provides specialist help for families, parents, carers, and friends who are worried about a young person’s mental health. They can offer support and information over the phone, through web chat, or email.

Some highly recommended websites that offer more detailed factsheets on providing support to someone affected by trauma include:

- The Australian Child and Adolescent Trauma and Grief Network
- Phoenix Australia
- ‘What’s OK at home?’ – created by the Domestic Violence Resource Centre, provides comprehensive help-seeking information for both young people and adults concerned about their own or another’s wellbeing.

References

8. The Australian Child and Adolescent Trauma Loss and Grief Network 2010, ‘How children and young people experience and react to traumatic events’, Australian National University, Canberra.
32. Widom, CS, Du Mont, K & Czaja, SJ 2007, 'A prospective investigation of major depressive disorder and comorbidity in abused and neglected children grown up', Archives of General Psychiatry, vol. 64, no. 1, pp. 49-56

Disclaimer
This information is not medical advice. It is generic and does not take into account your personal circumstances, physical wellbeing, mental status or mental requirements. Do not use this information to treat or diagnose your own or another person's medical condition and never ignore medical advice or delay seeking it because of something in this information. Any medical questions should be referred to a qualified healthcare professional. If in doubt, please always seek medical advice.

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