

INFORMATION SHEET



Supporting your child in hospital

The burn experience

Children can react differently to burn injuries. Some of this will depend on their developmental stage. Here are some changes that you may notice in your child.

<u>0-5 years</u>

After the burn injury they may:

- relive the accident through play, drawings, or conversation
- become more fussy or clingy or even distant and fearful
- experience more tantrums than normal
- revert to a previous developmental stage
- develop new fears that don't have anything to do with the accident that caused the burn injury eg afraid of the dark, don't want to be left alone.

Age 6-12 years

After the burn injury they may:

- relive the accident through nightmares or upsetting thoughts that 'pop' into their heads
- want to avoid talking about the accident
- become aggressive, disobedient or withdraw from their family and friends
- be more anxious about their safety and ask lots of questions about their ongoing safety.



Age 13-18 years

After the burn injury they may:

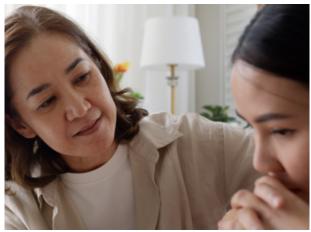
- re-experience the accident by talking about it a lot or not want to talk about it at all
- be on edge and have difficulty concentrating and sleeping
- have mood swings and worry that their reactions aren't normal
- not want to do things they used to enjoy and their school performance may change
- want to avoid social events and have relationship troubles with friends and family.



The important thing to remember if you notice changes in your child's behaviour is that support is available. Talk to the burns team and they will refer you to the best person to help you and your child.







Communication is key

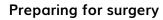
Providing reassurance and communicating well with your child following their burn injury and while they are in hospital, is very important. There are ways to help your child that we know can reduce their stress and we refer to these as the 4 S's. These are being seen, safe, soothed, and secure.

Seeing your child does not just involve the eyes. It means sensing the mind behind the behaviour and helping them 'name to tame' their feelings. You could try saying something like, "I can see you're not feeling so good. Can you share with me how you feel right now?"

Safety involves avoiding actions or responses that might frighten or hurt them. It is about being protective and turns down their 'fight and flight and freeze' response. A statement such as, "I'm here for you. We will do this in your own time", can help them to feel safe and reassured.

Keeping your child **soothed** means comforting them and being alongside them to help them stay with 'big' feelings, de-escalate together, and then return to a calm and safe state. You could try something like, "I am with you. These are big feelings that may seem too much on your own right now."

Provide **security** to your child by being consistent, predictable, and giving choice and control to the child. For example, there are a few comfort positions for young children that help your child feel secure and supported when they are going through a procedure that you can try. Your treating team will show you ways to hold your child and provide support.



Operations for burn injuries usually include a skin graft or skin spray, where we take a small piece of skin from elsewhere on the body to help heal the burn. These are routine, everyday operations that have been used to treat acute burn wounds for several years. They are very safe.

The burn surgeon will explain everything to you before the operation. This will help to prepare you and your child.

Remember, it is normal and natural for children, teenagers, and parents to worry about surgery, or to lose sleep or have nightmares about the thought of needing an operation. Misunderstandings will increase that worry, so ask about anything you don't understand, or are not clear about.

Remember to:

- 1. Ask questions.
- 2. Make notes.
- 3. Ask for the information to be repeated or simplified.
- 4. Check your child's understanding and use simple language to correct any confusion.



Seeking help

The hospital experience may be very new and even confronting for you. Identifying who can help you while your child is in hospital is important.

- 1. For information and help about your child's medical situation talk to the nursing staff, an occupational therapist or physiotherapist, or your child's surgeon.
- 2. For support and advice about how you, your family or your child are coping talk to the hospital's social worker, psychologist, or aboriginal liaison officer.
- 3. Remember to ask for and accept help from partners, family, friends, and the community.

Connections

Work to find ways to connect your child with their siblings and other family members, their friends, their school, and people from other groups they are usually involved in, such as sports groups or other recreational activity groups, while they are in hospital.

SMS, video chats and video messages, cards and hospital visits can help your child to feel supported and connected.

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This is a difficult time for everyone, so, remember that accidents happen. Try not to feel guilty or blame others if you can help it.

You can't change what has happened. Think about what needs to be done next and how to manage things so you can move forward.

Remember that its 'OK' to ask for help and teach your child that they can do the same.



