



Lunch and Learn
Parenting Through Community Trauma
TRANSCRIPT



[Video Link](#)

Watch Time: 48 minutes (presentation)

Read Time: 16 minutes (presentation) (approximately)

Introduction

Dr. Lisa Novak, CATCH Board Member ([00:05](#)):

I'm Lisa Novak and I'll be moderating today's event. I am a clinical psychologist, a CATCH board member, and the mom of two boys. And this presentation feels so important to me for all of those reasons. We are here today because our community was rocked to the core this summer. And we're all just trying to figure out what's best for ourselves and for our kids. On the other side of such a traumatic event. That being said, I am so pleased to introduce you to our speaker for today, Michelle Magida. She is a wonderful, licensed clinical professional counselor who can help guide us through the complexities of parenting through trauma. Michelle is the founder of Therapy, Ect. And she was on the front lines at Highland Park High School in the days and weeks following the mass shooting. She uses her knowledge, her expertise, and her warmth to help children and families heal from both primary and secondary trauma. Michelle, thank you so much for being here today and I'll let you take it from here.

Michelle Magida, LCPC, Founder Therapy Ect. ([01:13](#)):

Hi, thank you so much. I'm here just as much as a professional as a mom and as a community member. Being a parent, it doesn't come with a manual or a handbook and every parenting journey is completely unique and different, not only from household to household, but even within households as well because every child is unique and different. And as parents, our instinct is to want to protect our children, to keep them from ever falling, to keep them from ever feeling hurt or pain. And I get that. I get that urge to just want to put my babies in a bubble. And for me, they really are still babies kindergarten and second grade, but **the truth is that's not our actual job. Our job isn't to protect them from getting hurt. Our job is to teach them what to do when they get hurt.**

Michelle Magida ([02:22](#)):



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And that's hard enough as is when we are not rocked to our core. And safety is just paramount to being able to be successful, to be able to be your best self, to be able to trust your instincts, you need to feel safe. And it's been hard to feel safe in the aftermath of this devastating tragedy. As a community member, as a volunteer CCT member that was at the high school, I get it.

Connection vs Protection

Within our body, we have what's known as the autonomic nervous system and it is our internal body security system that's constantly scanning our environment for one of two things. We're either able to engage in connection or protection. And it's been very, very hard for many of us to engage in connection because we are still so frazzled that we feel the need to be in protection, which can look like being irritable, which can look like having a short fuse, which can look like being hypervigilant. But it can also look like completely shutting down and just closing off and seeming like you just don't care anymore, but it's just your system's way of protecting itself.

Michelle Magida ([04:08](#)):

So how do we actually continue engaging in connection, which is what our children need us to do when our systems are very, very intensely screening for a need for protection right now. Do be honest with your children. Tell them your worries. Tell them the truth. Tell them everything in an age appropriate way. You can very, very, very easily rupture a connection with your child when they can sense that you're not being fully transparent or authentic with them. It's their autonomic nervous system saying, Hey, my spidey senses are tingling, even though you think you're protecting them. The best way to protect them is to be honest with them, but do it in an age appropriate way. When I say that we need to teach our children what to do when they feel hurt it means that we're going to have to trust in our community, which can be very, very hard right now, but also trust in our children, which can also be challenging if they are younger, but you have to trust that they have the instincts to know what's right and wrong, that they know where to go if, and when something were to happen.

Michelle Magida ([05:51](#)):



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Just like when children are little, those little toddlers that are exploring their environment. They will oftentimes peek over to see if mom is going to let me do this? And so when we keep an eye out for the possible challenges and safety issues, but don't interject too quickly so that they can safely make mistakes with us. That's what we want. We want them to make as many mistakes as possible under our care. And they're looking to us as the adults, as their role models right now, to know, is it okay to have mixed feelings? Is it okay to not understand what's going on? To be excited at the start of school and to be scared and worried at the same time, both things can be true. It's uncomfortable for adults to process to understand let alone for a child.

Sharing Feelings/Fears in “Age Appropriate” Ways

Dr. Lisa Novak ([07:16](#)):

You had mentioned earlier this idea of speaking truthfully and in age appropriate ways to our children. And that's something I know I struggle with a lot, especially with younger kids, myself is I don't want to scare them more by sharing that I'm feeling scared. So can you contextualize that a little bit for us? What does age appropriate look like at different ages and how do we share without further freaking our children out?

Michelle Magida ([07:47](#)):

The first thing is it is completely okay to use adjectives, to use emotions, to explain to our children how we're feeling to **connect emotion with behavior, behavior with situations.** To let them know, I feel worried there are so many changes happening right now. That's completely okay. Now what you do with that worry and how you show that worry, that is where your anxiety can spill over onto them.

Dr. Lisa Novak ([08:30](#)):

Can you bring that back here to this specific traumatic event and especially at the start of the school year, if parents are feeling a little nervous about dropping their kids off and, you know, sending them back into the world, how do we share about that?



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Michelle Magida ([08:47](#)):

So the first part is sharing your feelings to let the child know they're not alone and it's completely normal to have those feelings. And the second part is then what do we do with those feelings? And that is to have a solution or a plan. So I feel worried with all of the changes going on, I will need you to be consistent in letting me know where you are after school. And then make sure that consistency is clear. **If children know what is expected of them. And if children know what to expect from others and what to expect from their environment, that is safety because there's so much out of their control.**

Reasonable and Realistic Co-Existing

Michelle Magida ([09:45](#)):

So to be able to at least know what to anticipate is huge. Then if children know what to expect from others and know what is expected of them, and there still seems to be a high level of conflict or anxiety or resistance, then we need to kind of check in with ourselves to see if those expectations are reasonable and realistic. And I think this is going to be tricky for a lot of parents at this time, because what was realistic before may not be reasonable right now. So realistically, I was able to hold a lot more on my plate before the shooting. And I am in my third year of my PhD program. I've been doing this for all of these years. I came from the world of special education. I know all of these tools and still as a human, not as a therapist, but as a human, I still struggle.

Michelle Magida ([11:01](#)):

So what was realistic of me before isn't reasonable to ask that of me right now. And if it's not reasonable to hold ourselves up to those same expectations, it's just as fair for us to reevaluate if the expectations we continue to hold for our children are still reasonable. **What that looks like is if it worked before and all of a sudden it's not working, instead of coming from a place of what's wrong with you, you clearly know what to do. You've done this before stop being so difficult. Recognize that behavior as communication.** And say, wow, this isn't working right now. That system, that approach, that request, that expectation used to work. But now there's resistance. There's power struggles. There's a lot of



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nonverbal communication that wasn't present before. And instead of fighting it, it'd be really, really helpful to recognize it as a sign that something just isn't working anymore.

Pick Your Battles

Dr. Lisa Novak ([12:32](#)):

What my thoughts are then what comes next? Okay. So old systems aren't working right now, things have broken down a little bit. We're going to empathize. We're going to validate. We're going to understand

Michelle Magida ([12:50](#)):

And still sometimes you have to get in the car. And still sometimes you have to go to school. And still sometimes you have to do things that you don't want to do. Right? So what then. First of all, pick your battles. When I say, choose your battles. I mean, it's not black and white. Give as much control back as possible. What do you want for dinner? What do you want to wear? Which place should we go to first? Do you want to push the cart or should I? All of these tiny, tiny little pieces of permission to have control means so much more than you know to that child.

Michelle Magida ([13:47](#)):

And sometimes, unfortunately we need to take a step back before we can inch back forward. So that means that we might be noticing some regressive behaviors. That means that our child is showing behaviors, that they have not shown for a really long time or that on the outside doesn't match their chronological age. So, you know, a 10 year old sucking their thumb and being in a ball on the couch. Or a child that previously didn't have difficulty sleeping on their own all of a sudden is scared of the dark and doesn't want to sleep on their own. **So what we don't want to do is fall into all or nothing, mind traps, where we say it has to be this way, or it has to be this way.** So let's say we're seeing some regressive behaviors. We're going to recognize that as a need for connection, because they're needing to protect themselves. So we're not going to say, oh baby, are you okay? But we are going to say, I'm here. I'm with you.



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Michelle Magida ([15:09](#)):

So let's say a child that used to be able to sleep by themselves no longer can sleep by themselves. And you know, just take baby steps, backwards, nightlight. Sometimes old school baby monitors help. Just so that they know that you can hear them if needed. Another thing that I have done with children is just go to Walmart or the Dollar Store and get a whole spindle of yarn. So that you have one end and then the child has the other end, so they can tug it. You can tug back so that they know that you're there. Sometimes it's really they just want to know that you're going to be there to protect them if need be. And that's your way of connecting is letting them that constant reassurance is what they need.

When Do I Know My Kid Needs More Help?

Dr. Lisa Novak ([16:17](#)):

I'm wondering about this bigger theme that might hit a lot of people's questions about what we should be expecting at this point? What is normal in such an abnormal situation? And the question I get a lot is how do I know if my child, my teenager, needs more help, are these things not considered normative responses anymore?

Michelle Magida ([16:55](#)):

So I look at three different areas. The first area I look at is social functioning. **Social functioning is how we interact, speak and treat other people?** How are we able to engage, maintain relationships with other people? So social functioning, the second area that I look at is **emotional functioning. How do I talk to and treat myself? Am I kind to myself? Am I taking care of myself? Am I taking care of my body? Am I getting my daily needs met?** And then the last area of functioning is age dependent. It's either **academic functioning or occupational functioning.** So despite how you may be doing with relationships externally and relationships internally, meaning the relationship you have with yourself, are you able to push past that and do what is expected of you? Can you still do the things that you need to do?



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Michelle Magida ([18:00](#)):

And in all three of those areas, are you able to do that in a socially appropriate way for your age, for your culture? If there's a change in one area, kind of watch out. If there's a change in two or more areas, get help. Don't wait for more. Don't wait for them to fail. Our system is designed to only intervene on children's behalfs once they fail, once they're failing, once they're struggling. And I hate that for them. I hate that for us, because fail is our first attempt at learning. Fail isn't like the F scarlet letter that everybody thinks that it is. We need to make mistakes. That's how we learn. That's how we grow. And so what we need to do is grow through what we go through, which can be so scary and so hard. And I don't know how to do most of the jobs of the parents that come to my office and I'm not expected to because I didn't go to school for that. So the things that I know and the things that seem so common sense to me I would never expect my parents to know what to do.

Dr. Lisa Novak ([19:53](#)):

And so what I'm hearing is sort of twofold. One is that it's normal. We want to validate that a lot of people aren't going to be themselves right now. They may be regressing in certain areas that we may have teenagers that are shutting down, whatever it may be. Is the recommendation then typically to wait for a period of time before we decide that they need additional support or that support is always the recommendation.

Michelle Magida ([20:26](#)):

We are our children's biggest advocates and you should never feel ashamed or embarrassed to ask for help ever. We are past the four week mark. So if we are having ongoing visible struggles, then this is the time to reach out.

What if my kid is acting “normal” should I still worry?

Dr. Lisa Novak ([20:57](#)):



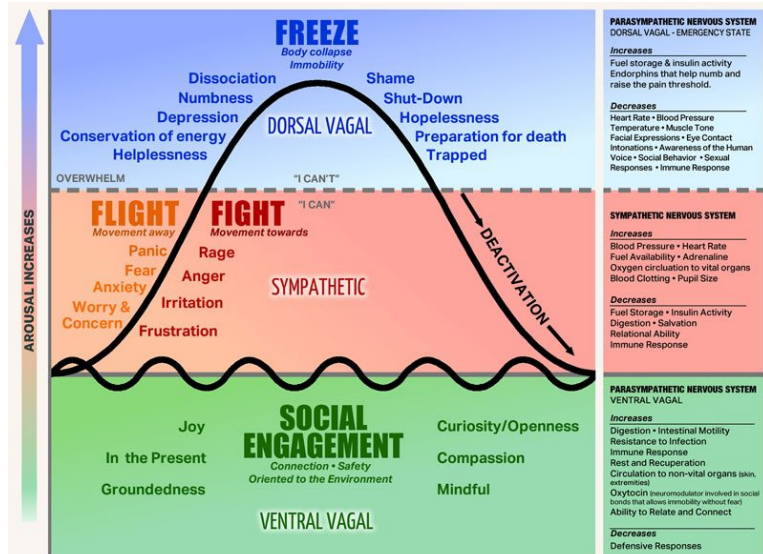
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What if there haven't been any visible signs to this point of any changes, no changes in socialization, emotions, anything like that? Is there something related to trauma responses where there is a delayed response to these things and what can parents look for there?

Michelle Magida (21:19):

When I talked about the autonomic nervous system, this amazing internal security scanning system that's constantly checking. Are we safe enough to engage in social interactions and connect with other people? Let's call that the green zone, not to be confused with zones of regulation for any of my elementary friends. If I'm talking green, yellow, red, I am talking about polyvagal theory. So on the green area, we're able to connect. We're able to activate our social engagement system. And if we're not there, then we're engaged in protection and protection can look like fight and flight. So that's yellow, that's agitated, that's irritable. That's a lot of the stuff we've talked about. And then if we're in red, then we are in freeze. And when we're in freeze, it can look like shutting down. It can look like not caring. It can look like isolation. It can look like I'm going to make myself as small as possible because I don't feel that I can survive this potential threat if I fight or flight. So I might as well just play possum.



Dr. Lisa Novak (22:50):

That is really about fleshing out some of the signs you've used a lot of really helpful words, like noticing conflict, noticing resistance, noticing anxiety, if our kids, or oftentimes our teens, aren't super verbal and



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expressive about how they're feeling or don't have the words to describe it. Can you share some of the signs and things that we can look for?

Trauma Signs to Look For

Michelle Magida ([23:15](#)):

So the number one thing that I look for is are they taking care of themselves? And that means sleep and eat. If you're noticing a huge change in their sleeping and or eating patterns too much, too little as **compared to their previous norm, not compared to other kids, not compared to their growing body, but compared to what they used to do.** Followed by acts of daily living ADLs. Are we showering? Are we putting on clean clothes? Are we brushing our teeth? Do we care what we look like when we walk out of the house? Next, we're looking at isolative behaviors, not being interested in the same things that used to rev up our engines. Things that we were passionate about before. Activities that we were really interested in. If all of a sudden everything seems boring and blah, and I don't care. That's another sign that maybe they could use some help. So I need more sleep. I need less sleep. I'm on top of the world. I'm going to eat my feelings. I have no appetite. I'm not taking care of myself. I'm not hanging out with my friends. I had a falling out with my boyfriend and I had a falling out with my friends and I'm just going to binge watch TV, but my grades are fine. I get help. Though, I hate using academic functioning as a point of reference for individuals that are perfectionistic and are very, very hard on themselves because they will beat themselves up before they let it show externally. So that's where knowing your child is going to be really important and not waiting for them to fail across all areas of functioning is also going to be important.

When a trauma response can look like ADHD

Dr. Lisa Novak ([25:28](#)):

Another one that comes to mind for me is just a general availability for learning concentration, focused attention. I feel like that is one that we get a lot as a first sign that something has gone awry or that



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student is not feeling themselves. And it can mimic an attention disorder in many ways. And I get a lot of people calling me wondering if suddenly their student might be presenting with ADHD when really the symptoms did seem to present shortly after a trauma.

Michelle Magida ([26:09](#)):

When we hear about ADHD, I'm going to go one step further and just talk about our prefrontal cortex in general, which is responsible for all sorts of fun things like planning, prioritization, organization, starting a task, finishing it all the way through emotion regulation. So if a child likes to clean your room and all of a sudden, it just feels like the most ginormous project in the world. It's because they're probably flooded. And instead of saying, go clean your room, it's go clean up the Legos and then come check back in with me. You know, go clean off your desk and then come check in with me. Helping them to chunk and helping them to break things down. And also not as many step directions could be helpful, too.

When do I get the school involved?

Dr. Lisa Novak ([27:24](#)):

When is the right time to let the teacher know what's going on with my child?

Michelle Magida ([27:40](#)):

When it's impacting their ability to feel comfortable, safe, and productive at school. So reach out to school if you need them to support your child with school.

What do different behaviors say about my kid's trauma?

Dr. Lisa Novak ([28:01](#)):

I've gotten a few questions here that are polar types of responses that are all responses to trauma and curious what you would suggest for parents with these different types of situations. So one is what if you have a teenager who actually really seems quite blasé about the whole thing and just kind of says



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it's no big deal. Do we just let it go? Do we worry about it? Do we try to make him talk about it? How do we handle that?

Michelle Magida ([28:33](#)):

So you can't make anyone talk about anything. You can't make a child go to a therapist. But what we can do is constantly continuously let them know that you're there, that it's okay to not be okay. And that if you don't want to talk to me, there are other people to talk to. You don't have to poke the bear. You just have to keep letting them know that you are available if needed, whether it's on this topic or any other topic.

Dr. Lisa Novak ([29:13](#)):

Then on the flip side of that coin, what if somebody is not showing regressive behaviors, but almost the opposite. They're getting overly organized. They're hyper cleaning their spaces. And they're starting to become increasingly perfectionistic and extra focused on their schoolwork.

Michelle Magida ([29:34](#)):

So that is concerning. What happened to us was out of our control. Our world was rocked. We thought we were safe. We thought we were engaging in a community event, and we weren't safe. We weren't safe at home and that rocked us and that loss and lack of control can throw anybody spiraling. So what we as humans tend to do is try to compensate for that perceived lack of control by controlling every single thing that is within our grasp. **The two areas of control for children commonly is what we do with our bowels and what we put in our mouth.** So if we're noticing changes in eating, changes in bathrooming that can also be a symptom of this, but that compulsive need to engage in organization and cleanliness is maladaptive. If it's taking up a lot of their time and causing a lot of distress if they have to engage in it for over an hour a day, every single day and they know that it's silly. They wish they could stop, but they just can't. They need it kind of like scratching an itch, then certainly reach out for help.



What if I'm not okay as the parent?

Dr. Lisa Novak ([32:36](#)):

Bringing it back to us as the adults, as the parents, as the caregivers, let's take a moment to acknowledge that in many ways. We're not okay. And so, some of the questions are things like, what if I'm not okay? And my kids and my teens can see changes in me, but my reaction seems to be larger than theirs. You know, I want to be open. I want to be honest with them, but I don't want to scare them more. So do I keep it to myself? Do I talk about it with them? How do I navigate that?

Michelle Magida ([33:31](#)):

Remember when I talked about reasonable and realistic expectations? So I am going to admittedly disclose that I'm like the pot calling the kettle black here, because this is something that I've been struggling with a whole heck of a lot. And that is, I reevaluated the expectations I had of myself. And I recognized that the expectations I had of myself, that were realistic in the past, are no longer reasonable in the present, not forever, but for right now there's a little DBT there for you. Being okay with not being everything I want for my kids has been really hard.

Michelle Magida ([34:26](#)):

I'm reminded that I can only do my best and my best looks different right now. I'm not going to lie. My best has way more screen time and way more microwaveable chicken nuggets. And there are weekends where I have more energy and I can be more active. And there are days after school where I worked all day, you were in school all day, so you haven't had iPad yet. So you can just do whatever until dinner. They're going to notice a change in you. And that change can be giving yourself grace, that role modeling can be saying, I recognize I'm having a hard time. So I'm adjusting my expectations and then getting help for yourself.

Dr. Lisa Novak ([35:40](#)):



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It sounds like we don't have to get into the nitty gritty details of every anxious thought we had throughout the day. And we certainly don't want to scare our children, but just those blanket statements of, I'm struggling a bit right now.

Michelle Magida (35:57):

And we're not designed to be perfect all the time. We can't be happy all the time. So, whereas before I was talking about polyvagal colors, now I am talking about zones of regulation because my children are little. And so we talk about red, the explosion and green is awesome. But I tell my kids, it's okay to be yellow. You're going to have yellow moments. You're going to have yellow days. Like that's okay. Our goal isn't to never have a rupture in a relationship. Our goal isn't to never experience a negative emotion. Our goal isn't to never have a bad day. **Our goal is to manage our expectations and control our responses to those moments.**

ZONES OF REGULATION!			
Blue	Green	Yellow	Red
			
Sick Sad Tired Bored Moving Slowly	Happy Calm Good to Go Focused Ready to Learn	Frustrated Worried Silly/Wiggly Anxious Excited	Mad/Angry Mean Yelling/Hitting Out of Control I Need Time and Space

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How do we invite conversations with our teens about how they are doing?

Dr. Lisa Novak (37:00):

You have any tips, advice that parents can bring home with them today, about how to just sort of more broadly speaking, keep the conversation open with their children. And I'm thinking for this one even more so the middle schoolers, the high schoolers, you know, when we're sitting around a dinner table how do we do those? Check-ins without feeling like we're pressuring them, how do we invite conversations about their feelings in helpful ways?



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Michelle Magida ([37:31](#)):

One of the best ways that I love sharing for this particular request is family meetings. Family meetings don't have to happen every single night at dinner, but should happen on a weekly basis. And modeling your own check in with your child can also be extremely helpful. The next tip is don't ask open ended questions. How was your day? Instead ask specific questions, how did your math test go? They're like, whoa, you actually were paying attention. You do know what's going on in my life. **And they can answer a direct question more easily than an abstract one.**

Dr. Lisa Novak ([38:28](#)):

I actually encourage parents not to ask about tests in particular. I don't like that over emphasis on academics, but instead did you have a nice conversation with somebody today? Sometimes that open ended can feel overwhelming. They don't really know how to respond and then you get a fine and that's where that conversation ends.

What can school teams do to support our struggling kid?

We've gotten a couple questions that are specific to schools and what school teams can be doing if our child is struggling. And if that is permeating into the school day, and especially with the recognition that our teachers have been through a lot over the past couple of years, and they're exhausted and they're overwhelmed, how can they help support our kids? How can we help support them?

Michelle Magida ([39:29](#)):

So a couple of things here. Number one, all of the local school districts have already done so many preventive and preemptive steps and measures to have systems in place to offer accommodations more readily to students now than ever before. So easy accommodations could be not having to walk the halls during passing period. The schools have done such an amazing job of coming up with things that work for each building, each grade, each team. There could be check and check out at the end of every class period. A student can have a free pass to go to the nurse's office or to the front office if they're needing, to not be in the classroom at the moment. Do reach out if your child is struggling. Don't put the feelings



of other people above the needs of your child. Yes. They've been through a lot. Yes, we're overburdened. Yes, all the things that we've talked about. And that's what we're here for call ask, do it.

What if I'm worried about what's next? What's the next traumatic event?

Dr. Lisa Novak ([41:17](#)):

What about this lingering sense of what's next? I'm holding my breath for this next traumatic thing to happen. How do I cope with that myself? Do you think my kids might feel that? Should I ask them and check in and be that specific?

Michelle Magida ([41:50](#)):

So it is okay to check in with your children. That is the one time that I will advocate being more open ended with them, because we don't want to put our own thoughts and feelings and burden them. Like maybe they're experiencing symptoms of depression, but we are experiencing symptoms of anxiety. And then I'll say, oh, have you been experiencing this? **And then they might say yes, because they think that not feeling what you're feeling is wrong or because they are saying what they think you want them to say, and then we can't get them the correct help.** So instead of saying, you know, anxious or whatever, whatever, some days are still hard for me. How's it been for you? I'm noticing that. I thought I'd be over this by now. And I'm going to look into some support for myself. I was wondering if this is something that you would be interested in, you know, if I could find someone for you to speak with. But what's next waiting for that shoe to drop. That's anxiety. The wondering what's next and living in the future is often breeding grounds for anxiety. Instead, anytime we feel stuck in not knowing what's going to happen, I strongly encourage you to bring it back to the present, bring it back to the here, bring it back to the now. Breathe. Ground yourself. I will literally rub my hands on the carpet, because I need that friction. I need that sensation. You can stomp your feet on the ground. There's lots of breathing exercises, 5, 4, 3, 2, 1. Anything to bring your mind back to where you are instead of where you are worried life might be.



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Dr. Lisa Novak ([44:03](#)):

I'm working with a child who is anxious, that other kids will keep talking about it and that some kids have even made up being at the parade who were not, how do we help with what other kids are talking about?

Michelle Magida ([44:23](#)):

So I'm guessing that this child is under the age of 11. And so when children are super worried about that, it's because they're still very egocentric, which means they think that everybody is looking at them, that life kind of revolves around them. And so when 11 and under, we're constantly looking at our peers and comparing ourselves to them because we don't know what's right. What's wrong? What's average? What's normal? What's okay? What's not okay. And so then if I say I was there when I wasn't there it's because of their feelings too. I wasn't there but I'm affected by it. So that child feels that they need to say that they were there in order to feel that connection or they're saying what they think the adults in their lives want them to say, because they're trying to connect with us in whatever way they know how, and that's not always logical, but that's what they're trying to do. They're sensing our need for protection and they're trying to connect with us.

Dr. Lisa Novak ([46:01](#)):

One last question just came in about not living in the community, should I still be speaking to my child's teacher? You know, they might not expect that this is what's going on. If I can actually chime in on that one and say that I always always recommend being as open with your kids' teachers, as you can be with what they're struggling with, it's the best way teachers can help. So I certainly would just share the experiences and then ask for open communication with the teacher, if they do start noticing anything.

Michelle Magida ([46:37](#)):

And I'm also going to caveat whoever posts that question local. I mean, if you're anywhere in the Northwest suburbs, this hit home, like you're local enough.

Dr. Lisa Novak ([46:54](#)):



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Thank you so much, Michelle, for doing this and for joining us, I know this is a tough topic to cover for a lot of reasons, and there's such a breadth of responses and things we can be looking for, but we really appreciate your expertise and your help.

Michelle Magida ([47:17](#)):

Thank you so much.