

Learning about Complex-PTSD at Pet Therapy School: Noah's Story

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All about language

It is fair to say that there are a range of views about what language is used to refer to people who have Post Traumatic Stress Disorder (PTSD) or other trauma-related mental health difficulties. Different professional groups and affected communities sometimes have strong views about this, as trauma and illness-related language can be a source of personal and professional disagreement.

For example, some people with lived and living experience do not like to use the word 'disorder', saying they are not disordered. Instead, they think the environment and relationships they experienced were 'disordered'. In respect for this, some services, advocacy groups and clinicians use the term Post Traumatic Stress (PTS) to support their agency.

However, the majority of mental health professionals and academics who study people who have been exposed to trauma state that it is important to be specific about the terms PTS and PTSD. They argue that it is vital to be able to use the term PTS symptoms to describe the typical reactions to trauma and other challenging life events, which, whilst distressing, do not indicate that someone is unwell or needs treatment. There is a lot of scientific evidence showing that a large number of people who are exposed to significant trauma experience symptoms such as intrusive thoughts, nightmares and very strong startle reactions for days, weeks or even months after the trauma.

The term PTS is used to describe post-traumatic symptoms that commonly occur in the general population who are not ill, and these symptoms mostly go on to settle.

However, when people have trauma-related symptoms that go on for more than a month, which meet the diagnostic criteria [DSM-5 or ICD-11] and which substantially impair someone's day-to-day function, then they have a health condition which is called PTSD. A diagnosis allows a person to access certain treatments. It helps the professional involved in providing care to give information about treatments and connect them with support.

In writing this book, we have discussed this issue and respect a wide range of terminologies. While we come from many different backgrounds, we agree that this book is about people who, unfortunately, have developed mental health disorders rather than short-term trauma symptoms. This is why we use the term PTSD in this book to describe a persistent trauma-related health condition, keeping in mind that most people do not develop PTSD after exposure to trauma.



Foreword

This little book can help children and family members understand what might be going on with their loved one suffering from Complex Post Traumatic Stress Disorder (C-PTSD).

It can be very difficult to understand why a parent has changed so much after something terrible and extraordinary has happened to them. I commend this book because it puts things very simply in an understandable way for children. I am sure that adults who read it will also find it helpful. Providing resources for families navigating C-PTSD can support the entire family in making sense of what has happened—together. It could enhance the therapeutic journey for parents while also creating opportunities to rebuild connections with loved ones.

How can C-PTSD occur?

C-PTSD is a mental health difficulty that can be caused by exposure to multiple severe psychologically traumatic events. When the mind is faced with overwhelming trauma, its natural reaction is to stop processing what is going on and focus only on survival – fighting the threat, trying to escape or freezing and hiding. So, the memory of the traumatic events is not laid down immediately and systematically.

When the threat recedes, processing the memory of what has happened can become haphazard. The mind tries to process what has happened, but instead of smooth processing, the traumatic material

is re-lived and re-experienced through vivid nightmares while they are asleep and flashbacks while they are awake. These are very intense and frightening, realistic replays of the event and can lead to poor sleep and withdrawal from daily life. Intrusive memories can also occur. Reminders of the traumatic events cause anxiety symptoms in our bodies with palpitations, sweating, shortness of breath and stomach churning. Reminders also serve to upset us emotionally. The mind becomes permanently switched on and hyper-aroused. This means that people become irritable, angry, do not get enough sleep, and struggle to concentrate or focus emotionally. They are constantly on alert, looking for signs of danger. They are focused on the trauma, and everyday things (including feeling positive) do not seem to matter as much anymore. The mind learns to try to avoid anything to do with the trauma, first by avoiding any reminders or triggers, and thoughts and feelings related to the trauma. Avoidance then becomes the main way of coping with anything that causes stress. This leads to changes in behaviour, including self-imposed isolation and decreased interaction in relationships. We call this condition Post Traumatic Stress Disorder (PTSD).

How is C-PTSD different to PTSD?

In C-PTSD, we have this same symptom pattern as in PTSD, but over and above

this, because of the multiple exposure to traumatic events, additional symptoms develop. They include great difficulty in interpersonal relations, frequent mood swings and huge problems with controlling mood and emotional feelings. They have impulsive behaviours which we call ‘emotional dysregulation’. There is also a change in the way everything is perceived, with a very negative outlook developing in relation to most things and people, as well as towards life itself.

What does this mean for our family?

This is why parents might not be sleeping well, become distant and easily irritable and impulsive, seem angry for no reason, no longer talk much, look miserable, and are not happy. The good news is that people do get better if they have help, including therapy aimed at restoring the processing of traumatic memories. This storybook helps us understand what might be happening and how to support our loved ones on their journey to recovery.

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Foreword

As someone who has walked the path of grief and resilience—widowed with three young children aged just 2, 4, and 6—I understand intimately the quiet strength required to rebuild a life in the shadow of loss. That experience has shaped my commitment to supporting families who live with the enduring impacts of trauma, especially those whose stories are often left untold.

This storybook is a powerful testament to those stories. Co-created by those with lived and living experience, whose parents have lived with complex-PTSD, it offers a gentle yet profound window into their world. It is not just a book—it is a bridge. It provides a bridge between generations, between silence and expression, and between pain and healing.

During my time as CEO of Woronora Memorial Park, I had the privilege of supporting initiatives like the Wave of Light, a deeply moving event that honoured lives. The glow of thousands of candles—each representing a cherished memory—was a reminder that grief shared becomes grief softened. It was also a celebration of community: families, friends, and strangers coming together in solidarity, compassion, and hope.

That experience deepened my belief in the healing power of remembrance, storytelling, and community. Today, as CEO of Legacy Australia, I am proud to stand beside this project, which continues that tradition in a

new and vital way. It is a testament to what happens when we create safe spaces for children to express, connect, and be heard.

To those with lived experience who helped shape this book: your courage is extraordinary. To the parents and therapists who will use it: may it be a source of connection and comfort. And to the wider community: may we all listen more deeply to the voices of those growing up in the shadow of trauma—and respond with empathy, action, and care.

I appreciate the dog hero! My family has two cats—British Shorthairs—whose quiet purrs and gentle presence seem to know exactly when companionship is needed most. They remind me that healing often begins not with words, but with presence.

Graham Boyd
Chief Executive Officer
Legacy Australia Inc



Foreword

Through my work in Veteran mental health research and directly with Veterans and their families, it is clear that children from military Veteran families face challenges that children from other families do not necessarily share. We know that complex-PTSD can have profound ripple effects throughout Veteran families, impacting spouses, children, and family dynamics in interconnected ways. I have seen first-hand the need to support children whose parents have complex-PTSD.

We also know that many families can develop resilience, and effective PTSD treatment for the Veteran often improves outcomes for the entire family. Children can thrive with at least one supportive caregiver, and appropriate help can make a difference. Family therapy, psychoeducation about PTSD, and support groups for family members can make a difference. Research to further improve and prevent complex-PTSD is ongoing.

Children's books are a creative and innovative way to support the needs of families and children positively through bibliotherapy. This book is co-created and research based, drawing on lived and living experience narratives, as well as service provider and educator narratives. It is a valuable resource to provide information about complex-PTSD directly to children. Vivid pictures and stories that a child can relate to are an ideal way to impart knowledge. Parents reading to children is a

wonderful way for parents to open dialogue with their children on a complex topic and encourage them to share their feelings. Reading together can help inform and reassure their children, teaching them that a burden shared with a supportive adult, is a burden halved.

There is also brief, but helpful information near the end of the book that can help families seek professional help if needed.

The Canadian Institute for Military and Veteran Health Research (CIMVHR) played an essential role in facilitating the development of Marg's important books for Canadian children. The research partnerships that helped make this and the whole series of evidence-based children's books possible were forged at CIMVHR's Forum, held annually across Canada.

Additionally, there are no paywalls to access this book or other books in the series. It is free, online, and most importantly, published under a Creative Commons Licence. This means anyone can re-use, recycle, translate, culturally adapt, update, and reproduce these resources now, and in years to come. For those who wish to purchase a hard copy of the Canadian resources, the series is available in print from The Legion web store.

I congratulate Dr. Marg Rogers and her team of authors for this important new resource to help military Veteran families and their children

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Who is this book for?

The book is for use with families who have already experienced a family member with complex- PTSD. It contains discussions about complex-PTSD. Adults (such as parents, carers, extended family members, support workers, clinicians and educators) are encouraged to pre-read the book to ensure it is right for the child they are supporting. It is important to note it is not for general group or classroom reading. We strongly recommend reading the book with the child one-on-one. This approach allows the child to ask questions and potentially

share their experiences in a safe and comfortable environment. They may not wish to share but just talk about the character's experiences. This might feel safer for them, rather than sharing what is happening in their family. They might share later, when the book is read again, or when they feel more comfortable and have time to process what they have learned.

You can find out more about ways to use [bibliotherapy](https://ecdefenceprograms.com) with children on our website (ecdefenceprograms.com).

Ages

We have piloted this on children and adult children from families where there has been complex-PTSD and they seem to report finding it useful. That said, we think the story pages are more suitable for children aged 8-13. Teenagers might find the other pages useful. Different topics are covered in each chapter.

Chapter 1: Complex-PTSD, emotions;
Chapter 2: Hypervigilance, scary memories;
Chapter 3: Connections, self-talk, coping;
Chapter 4: Dissociation, therapy, caring.

How to use this book

The various sections and resources are for different audiences.

Aims of the book

The book's aims are on page 38.

Section	Who is it for?	Page	Notes
Preamble and forewords	Adults	2-5	The research team wrote the page about language, and clinicians and service providers wrote the forewords.
Story	Children (with an adult)	8-35	These are based on the narratives of those who have experienced complex-PTSD in their family. Chapter 1: 8-12; Chapter 2: 13-21, Chapter 3: 22-27; Chapter 4: 28-35.
Questions	Children and adults	36-37	These pages provide a springboard for discussions about the storyline and the topic.
Research pages	Adults	38-44	These provide easy-to-understand, evidence-based information about complex-PTSD and families.
Online complex-PTSD modules	Adults	Online	These are part of the Child and Family Resilience Programs for parents and support workers, working with service families. ecdefenceprograms.com

Characters



Hassan father,
carer for Cindy
loves repairing
cars and hip hop
dancing



Noah
therapy dog
and narrator
loves walks
and playing
chase



Zamen son
loves dinosaurs
and dinosaur
stickers



Cindy mother
loves photography
and learning sign
language



Lucy daughter
loves plants and
tap dancing

Chapter 1

My name is Noah, and I go to pet therapy school. When we finish our training, we get to meet our new families. They said we would be ready to support someone with complex-PTSD, but we would also learn more on the job.

I am a pet therapy dog, not a service dog. That means I can also support other family members.

What is complex-PTSD?

**Complex-
Post Traumatic
Stress Disorder**



When the day finally arrived,
I was so nervous to meet my new family.
My job is to care for everyone in the family.
There is my new human mother, Cindy.
She is an Air Force Veteran
and is training in sign language.
Cindy has complex-PTSD.

The children were so excited to meet me.
They were jumping around,
laughing and squealing.
Their names are Zamen and Lucy.
Then there is Hassan, my new human dad.
He is a civilian paramedic.



Emotions

Monday



Tuesday



Wednesday



Thursday



Friday



Learning with my family is a little different from learning at school. At pet therapy school, we learnt that people with complex PTSD might feel really big emotions because of hard things that happened to them.

And that's okay, I am here to help them feel safe and calm.

I am learning that when
Cindy feels strong emotions,
the children might feel that way, too.
This is why my job is so important.



I help Cindy find some calm
in the difficult feelings she is having.
I also help the children to feel calm
when life is bumpy at home.
I help them to do this with cuddles, pats
and caring looks.



After Cindy feels upset all day,
she falls asleep.

Hassan gently reminds the children to
take care of their own feelings. He asks them
to do things they enjoy, such as drawing pictures,
hugging their favourite toys or running outside.

He says it's not their job to make everything right for Cindy or
to make her feel better all the time.

Chapter 2

At pet therapy school, we were also told that people with complex-PTSD might be very watchful.

That means they are always looking and listening carefully, just in case something scary or bad might happen— even if everything is safe.





I noticed that Cindy is often watchful and alert. She is always on the lookout for danger, even when everything seems safe.

This can be hard for the children because they don't always understand why Cindy is feeling worried. This can make them worry too.



When it's time for Zamen's school excursion, Hassan offers to go along as a parent helper. That helps Cindy feel more relaxed at home. She takes a deep breath and tries not to let her worries take over.

I stay close by her side, resting quietly near her feet. I give her soft, gentle looks—the kind that say, “You’re not alone.” Sometimes, just being there for someone can help them feel calmer inside.

Scary memories

At pet therapy school, we learnt that people with complex-PTSD can feel as if a scary things are happening all over again. This means they might have scary memories sometimes.





I am learning how much this can affect the children's feelings of safety. The children are worried when Cindy struggles with scary memories because they don't like to see her upset. I try to stay close to Cindy to comfort her.

Sometimes, when Cindy is upset, the children hover around her. Hassan notices and talks to them, asking them to return to bed.

This is your
relax and
unwind time



They ask if they can sleep in the lounge room. Big feelings can make the house feel different. It's hard to sleep when you are worried. When the children feel scared, they listen to a guided meditation to help relax.

At pet therapy school,
we learned that people with
complex-PTSD
might stay away from
certain places or people.
Sometimes, those places
or people remind them of
something scary
from the past.

Avoiding these people and
places helps them feel better,
safe and calm. Everyone likes
to feel that way.





I am learning that this can sometimes make friendships harder for the children.

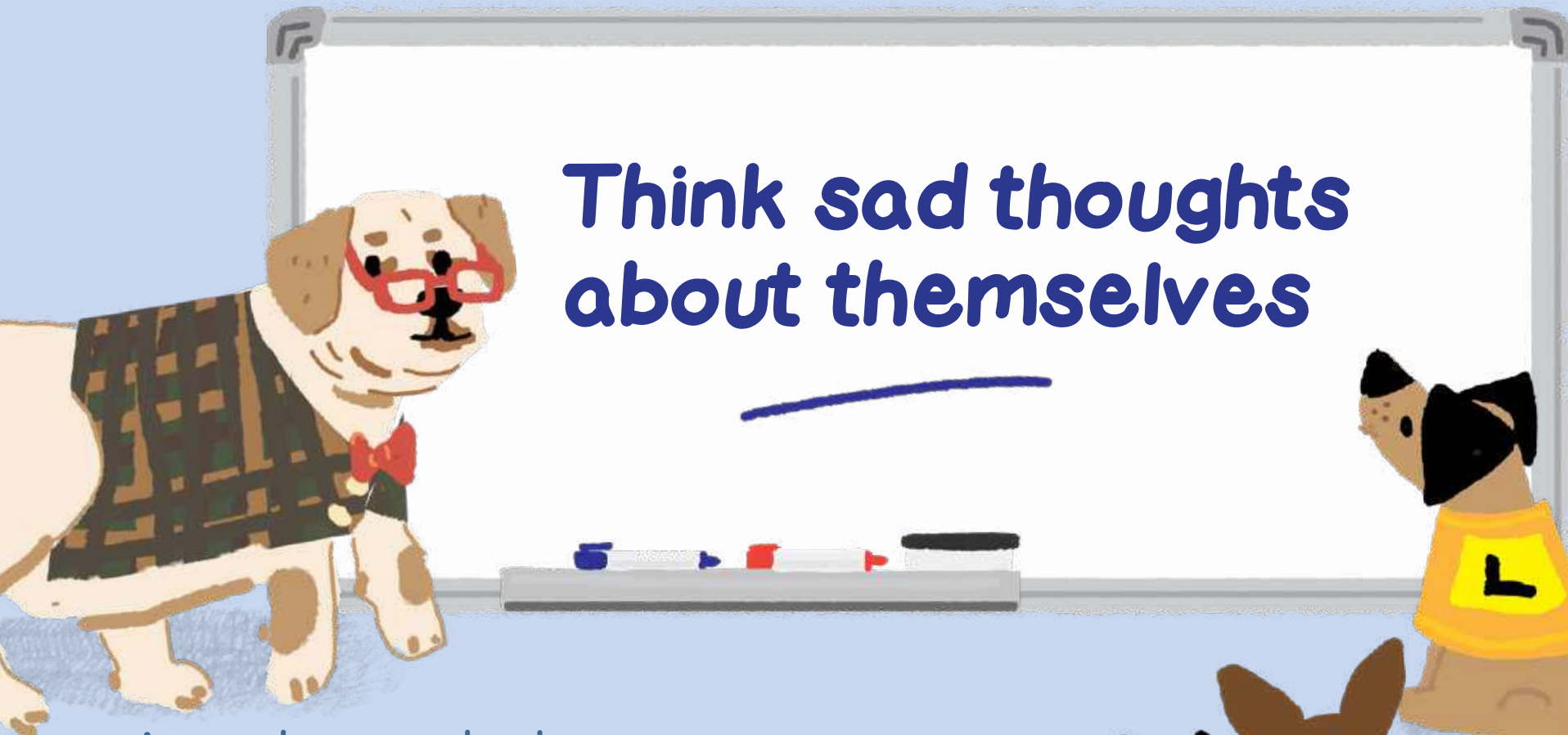
Cindy stays home a lot because she wants to keep everyone safe. That means the children don't go out much to the park, or to visit friends.

So, I try extra hard to bring comfort, joy, and smiles into their home.

Chapter 3

Cindy and Hassan talked about play dates for the children.
They arranged for Michael from next door to come over to play.
The children built a cubby house on their playdate.
I even helped with the design.

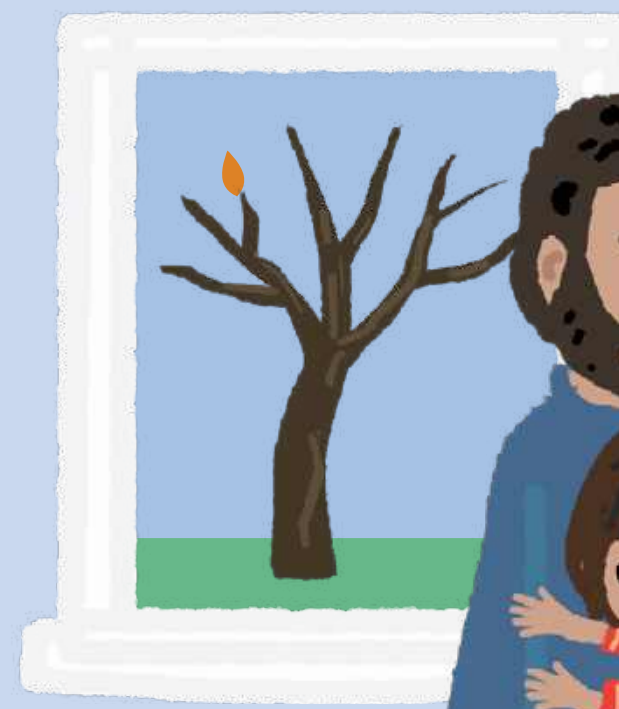




At pet therapy school,
we learnt that people with complex-PTSD
might sometimes feel really sad about
themselves.

They might believe they're not good enough,
or that no one should love them,
or no one could love them.
But that is not true.





I am learning how
much this can affect
how others feel.



An illustration of a man with a beard and dark hair, wearing a blue long-sleeved shirt and blue pants, sitting on a light blue floor. He is looking down at a spiral-bound photo album held by a young girl with dark hair, wearing a black shirt and blue pants. The girl is pointing at a photo in the album. A young boy with dark hair, wearing a red long-sleeved shirt and blue pants, is sitting next to the girl, also looking at the album. The album is open, showing several colorful photos of people. In the background, there is a large, light brown sofa with a patterned cushion. The wall is a solid light blue color.

Hassan is good at comforting the children while I care for Cindy.

Hassan sits with the children and looks through their special photo albums. These have many photos of Cindy having fun with them.

This reminds the children how much Cindy loves them.

Connecting can be difficult



At pet therapy school,
we learnt that people with
complex-PTSD might find it hard to
always be the parent they want to be.
They could also find it hard to parent
the way they did before.



What I learnt was that the rest of the family often takes on caring roles, like cooking. I love it when Zamen sneaks me extra treats.

When Cindy feels alright,
the family enjoy doing activities
together.

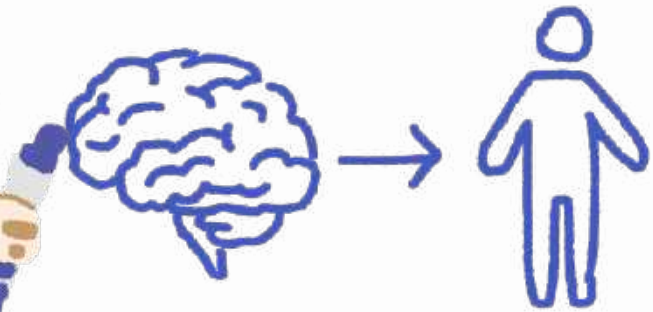
Hassan says everyone in the
family needs time to have fun.
I help everyone feel safe by being
calm and friendly.



Chapter 4

Brain and body

At pet therapy school, we learnt that people with complex-PTSD sometimes feel as if their brain and their body are not in the same place.





Now I know what that can look like in a family.

Sometimes, Cindy seems quiet or distant, as though she's not really hearing what's going on.

Other times, noises or sudden movements can make her jump or feel scared.

It can be confusing for the children, but I stay calm and help everyone feel more relaxed.



Lots of kids
and grown-ups
feel this way
sometimes.

Everyone in my new family talks to a counsellor.
It helps them feel safe and supported.
They have someone who really listens
and understands what they are going through.



I don't know
what to do
when she is
angry.

It is okay to calmly
say to her 'It makes
me sad when you
are angry with us'.



When the children get home from seeing a play therapist, they try out some new tricks to calm down.

They:

- copy my breathing,
- hold a soft toy,
- cuddle a pet,
- ask for a break when they are struggling, and
- look for five things they can see.



I really enjoyed pet therapy school. It helped to prepare me for life with my new family. There are a lot of things to understand about being part of a family when someone has complex-PTSD.

Some of these lessons can only be understood by living with families who go through it. I have learnt that it is hard for the person with complex-PTSD, but it is also really tough for the other family members too.



I know that the person with complex-PTSD
is trying hard to be strong and cope.
Sometimes those struggles can be seen,
and sometimes they are invisible.



Every day in my new family
is a little different.
Some days are bumpy,
with big feelings and worries.
Other days are full of laughter,
play, and cuddles.
I've learned that both kinds of days
are part of being a family,
and that's okay.



Questions and activities

1. List all the things Noah did to support Cindy and the children in the story.
2. List all the activities the children in the story did to cope when they struggled.
3. What makes a good therapy dog?
4. What do you find hardest about having a family member with complex-PTSD?
5. What do you do to cope?
6. Who do you speak to about your feelings when you are worried?
7. Draw a therapy dog and give it a name. On another sheet of paper, list all the things the dog needs to know to support someone with complex-PTSD
8. Therapy dogs take a lot of training so they are not available for every family. Find out how therapy dogs are trained.
9. What other pets or objects might be helpful for children and families when someone has complex-PTSD?



10. Make some masks showing a) how you felt yesterday, b) how you feel today, and c) how you want to feel tomorrow. You can use clay, plasticine or play dough.

11. List all the things you learned about complex-PTSD from this book.

12. Draw a tree showing one of the emotions that someone with complex-PTSD might experience often.

13. Create a collage scene with different coloured leaves to represent your family. What do each of the leaves represent about your family?

14. Noah works hard to support his new family. What can Noah do to make sure he stays well too?

15. Just like Noah helps Cindy, you can help yourself to feel calm when you feel unsafe. You can use a puppet or soft toy to hold and pat. Draw or paint your favourite soft toy.



How was this research-based storybook written?

The storybook was written using lived experience narratives from military, veteran and first responder families combined with the literature. The information below and in later pages explores research informing the book and the literature in this field.



Research question

How can the use of a storybook assist children from service families to build their knowledge and understanding of their parent's service-related complex-PTSD?

Research statement

This storybook was designed to build on children's knowledge and understanding of:

- what complex-PTSD is, and how it affects family life
- the challenges parents face when they have complex-PTSD
- professional support available for parents with complex-PTSD and their spouses and children
- possible behaviour of those with complex-PTSD
- practical ways to support parents with complex-PTSD
- the effect of a parent's complex-PTSD on other family members, including children.

This storybook provides a starting point for parents or support workers to talk to children about some of the common experiences in service families whose parents are negatively affected by their service. The storybook explains some of the changes and challenges these families face. The illustrations assist the child to understand the impact on the family members as children struggle with changed behaviour of the parent, despite trying to support them. The book also shows practical coping strategies and ways family and friends can support parents struggling with complex-PTSD.



What does the literature and research say?

By Dr Victoria Williamson, Professor Dominic Murphy, Professor Neil Greenberg, Dr Philip Siebler, Fardous Hosseiny, Dr Michèle L. Hébert, and Dr Marg Rogers

What is complex-PTSD?

Complex PTSD is a mental health condition that can develop after repeated or long-term trauma. It includes all the symptoms of PTSD—such as distressing memories, nightmares, flashbacks, avoiding reminders of the trauma, and feeling on edge. It also includes extra challenges such as trouble managing emotions, feeling hopeless or diminished, and struggling to maintain close relationships (Frost et al., 2020).

What causes complex-PTSD?

It can develop after many types of traumatic events, including (but not limited to) war, torture, captivity, childhood abuse, or domestic abuse.

What does complex-PTSD feel like?

It can feel like living in constant emotional distress, often feeling stuck in the past and replaying difficult experiences. At times, this can lead to a lack of confidence and some people unfairly blame themselves for their trauma. They might also feel deep sadness at times and have trouble controlling their anger. Physically, they might experience symptoms such as extreme tiredness and difficulty sleeping. -All of these symptoms can have an impact on those around them and put a strain on their relationships.

What treatments are available?

Generally, a mix of evidence-based talking therapies and lifestyle approaches are needed to support someone with complex-PTSD (Cloitre, 2021). Treatments can include:

- Trauma-focused therapy (e.g., Cognitive Behavioural Therapy and/or Eye Movement Desensitisation and Reprocessing [EMDR]).
- For adults, some may find prescription medication helpful in addition to therapy (e.g., antidepressants or anti-anxiety drugs).
- Lifestyle changes, including a nutritious diet, good sleep, doing exercise, and mindfulness meditation, can be helpful for some people (Mulligan et al., 2024).
- Restarting a healthy routine such as pursuing education, work and social connectiveness (Cloitre et al., 2020).
- Engaging with support from occupational therapy to reintegrate into family life and work can also be helpful (Canadian Association of Occupational Therapists [n.d.]).

Talking about mental health with children

While it might seem obvious, letting the child know it is not their fault is important. This message needs to be repeated from time to time. Children tend to blame themselves for their parent's behaviour, even if it is unrelated. Reading books can allow children to practice their emotions safely and connect to the characters (Rogers, Sims, Johnson et al., 2025). Books can provide a springboard for discussion between children and a caring adult (Rogers, Sims, Siebler et al., 2025; Rogers, Sims, Thorsteinsson et al., 2025). When discussing mental health, it is important that adults do not 'overshare' about how they got complex-PTSD (or any other mental injury). Conversations about symptoms, rather than causes are preferable. However, if they ask, general comments are better than detail to protect the child. A parent might say, "I experienced a really tough time a few years ago at work, but I am getting support now".

Post-traumatic growth

Dagan and Yager (2019, p. 329) report that 'encouraging and helping establish varieties of accepting, trusting and nurturing' people in their lives and psychotherapy can help. Also, learning about post-traumatic growth 'within therapy ... can help patients' who have 'complex-PTSD address the underlying challenges and support post-traumatic growth' (Dagan & Yager, 2019, p. 329).

Other supports for parents, educators, support workers, and clinicians are available in the [Child and Family Resilience Programs](#) modules.

When should I see my doctor?

If you or someone you know is experiencing symptoms of complex-PTSD, [talk to a doctor](#). They can refer you to a [mental health professional](#) with experience in trauma, such as a [psychiatrist or psychologist](#).

For practitioners:

When supporting someone with complex-PTSD, there are a number of guidelines to follow when treating someone for complex-PTSD. These include:

- [UK NICE guidelines](#)
- [UK Psychological Trauma Guidelines](#)
- [Australian Guidelines](#)
- [Canadian Chronic Disease Prevention](#)

Overall, when treating those with additional needs, such as complex-PTSD, extra time may be needed to build trust and be aware of their stability and safety. This will impact the potential success of the treatment. Barriers to trauma therapies might need to be considered. Ongoing supports are likely to be needed after therapy finishes to manage any lingering symptoms, resurfacing emotions or thoughts, and other conditions.

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*Editing, additional concepts and story writing

Yoo Mi Byun, Majida Mehana, Captain Reverand John VanStone, Fardous Hosseiny, Eileen Walsh and team, Lisa Vaters, Lily Baber, Anne Chartier and team, and Kelly Briggs.

From the authors

The authors would like to acknowledge the bravery of those with complex-PTSD who have told us they wanted a tool to support them with difficult conversations with their children about their condition. We also acknowledge the family members, friends, carers and professionals who support those with complex-PTSD.

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Praise for the book

from anonymous survey participants.

I really love the idea of having the story told from the perspective of a therapy dog. The illustrations of the dogs in their little learner vests are absolutely adorable!

The book takes on some quite heavy and complex topics, and it is wonderful to see these important ideas being introduced in a way that feels approachable for children. The explanations around trauma and emotions are clear and sensitive, which should really help both children and adults make sense of these challenging concepts.

I think it is most relevant to children aged 8 and above.

I would say that the vocabulary used was very appropriate for children.

*Very thorough.
Informational.*

I thought it was informative and set at the proper age level.

The story has a strong, empathetic foundation.

It helped me to feel calmer and be able to relate to the mum [character] since I have been diagnosed with PTSD.

As a Veteran and parent, I could relate to the story. I pictured myself as [the characters] Cindy and Hassan to see if the book would work as a resource.

I wish this book was available for my children when they were smaller.

I thought it would be good for my adult children to read, even now, to understand my constant need for safety and what they may see as intrusiveness, is actually a survival strategy of my trauma brain.

The story told from the perspective of the dog made it very engaging in a non-confrontational way with a potentially difficult topic.

Helped make sense of others' confusing responses.

I found them [the characters] really touching and insightful. It was quite emotional to know that some things that happen are not a character flaw but indicative of a condition.

Incredibly helpful to understand that certain behaviours stem from C-PTSD.

I feel heard and feel that it is a resource that could be used in many ways for many people and organisations.

I think this book can help normalize and explain some complex symptoms in an easy-to-understand way.

I will talk to my husband about it and pursue the REM therapy I have been recommended.

It's essential for children to learn that big feelings are normal in these role, and [that] we sometimes need help.

This is a great book that normalises things that can be scary for kids and parents to navigate.

I thought Cindy was really lucky to have Hassan.

I believe it is a great resource. The graphics are good to engage children. The use of the dog telling the story with pet therapy is fantastic.

I think it was a brilliant idea to tell the story from the perspective of the dog. This both engages children and lets them be an external observer of how C-PTSD is affecting each member of the family.

I would say to other clinicians or patients/clients that it manages to convey a lot of very useful and complex information in an easily understandable manner and offers helpful strategies for all members of the family.

It is just good to know that I need to focus on my child in such situations.

This is a realistic picture of what happens.

Teachers may not have the skills to manage triggers. [The] school counsellor should be involved in planning lessons and have procedures in place to ensure children have the support they need if they are triggered. Younger children - ensure they have a quiet area for self-regulation. I had a little tent with a teddy bear in the corner of the classroom, and that became the quiet area. Children could go to see a therapy pet to help them emotionally regulate. I am a former spouse of a Veteran.

The main storyline is engaging and really highlights each character's unique personality and emotional journey.

How do we stop the intergenerational cycle of service trauma?

This book was written, illustrated, produced and printed on Anawain land in Armidale, New England, NSW. The Anawain people are the traditional custodians of this land and have respected and nurtured it with the Kamilaroi, Dunghutti and Gumbaynggirr people.



A \$2.50 donation is given to Legacy Australia from the sale of this printed book.

