

Crisis Counseling Guide

Age-Related Reactions of Children to Disasters

If an emergency/disaster occurs, it is important to recognize normal reactions of children to the event. Reactions of children are generally age related and specific. This section provides an overview of normal reactions within determined age groups and helpful hints for enabling children to cope with the disaster-precipitated stress. Also included is a list of symptoms which may warrant referral to a mental health professional.

Disaster may strike quickly and without warning. These events can be frightening for adults, but they are traumatic for children. During a disaster, your family may have to leave their home and daily routine. Children may become anxious, confused or frightened. As a parent, you will need to cope with the disaster in a way that will help children avoid developing a permanent sense of loss. It is important to give children guidance that will help them reduce their fears. Ultimately, you should decide what's best for your children, but consider using these suggestions as guidelines.

Key Concepts

- Children experience a variety of reactions and feelings in response to a disaster and need special attention to meet their needs.
- The two most common indicators of distress in children are changes in their behavior and behavior regression. A change in behavior is any behavior the child exhibits that is not typical for them. For example, an outgoing child may become very shy and withdrawn. Regression is where past behaviors occur, such as thumb sucking or baby-talk.
- Children may experience a variety of reactions and feelings based on their age. Helpful hints for coping with these reactions are listed.

Reactions to disasters may appear immediately after the disaster or after several days or weeks. Most of the time the symptoms will pass after the child readjusts. When symptoms do continue, most likely a more serious emotional problem has developed. In this case, referring the child to a mental health worker who is experienced in working with children and trauma would be necessary.

Reactions by Age Groups

Preschool (1–5 years)

When faced with an overwhelming situation, such as a disaster, children in this age range often feel helpless and experience an intense fear and insecurity because of their inability to protect themselves. Many children lack the verbal skills and conceptual skills needed to cope effectively with sudden stress. The reactions of their parents and families often strongly affect them.

Abandonment is of great concern for preschoolers, and children who have lost a toy, pet, or a family member will need extra comfort.

Typical Reactions:

- Bed-wetting
- Fear of the darkness or animals
- Clinging to parents
- Night terrors
- Loss of bladder or bowel control, constipation
- Speech difficulties (e.g., stammering)
- Loss or increase of appetite
- Cries or screams for help
- Immobility, with trembling and frightening expressions
- Running either toward an adult or in aimless motion
- Fear of being left alone; of strangers
- Confusion

Helpful Hints:

- Encourage expression through play reenactment
- Provide verbal reassurance and physical comforting
- Give frequent attention
- Encourage expression regarding loss of pets or toys
- Provide comforting bedtime routines
- Allow to sleep in same room with parents until the child can return to their own room without the post-disaster fear

School Age (5–11 years)

The school-age child is able to understand permanent changes or losses. Fears and anxieties predominate in this age group. Imaginary fears that seem unrelated to the disaster may appear. Some children, however, become preoccupied with the details of the disaster and want to talk about it continuously. This can get in the way of other activities.

Typical responses:

- Thumb sucking
- Irritability
- Whining
- Clinging
- Aggressive behavior at home or school
- Competition with younger siblings for parental attention
- Night terrors, nightmares, fear of darkness
- School avoidance
- Withdrawal from peers
- Loss of interest and poor concentration in school
- Regressive behavior
- Headaches or other physical complaints
- Depression
- Fears about weather; safety

Helpful Hints:

- Patience and tolerance
- Play sessions with adults and peers
- Discussions with adults and peers
- Relaxed expectations at school or at home (temporarily)

- Opportunities for structures but not demanding chores and responsibilities at home
- Rehearsal of safety measures to be taken in future disasters

Preadolescence (11–14 years)

Peer reactions are especially significant in this age group. The child needs to know that his/ her fears are both appropriate and shared by others. Helping should be aimed at lessening tensions and anxieties and possible guilt feelings.

Typical Responses:

- Sleep disturbance
- Appetite disturbance
- Rebellion in the home
- Refusal to do chores
- School problems (e.g., fighting, withdrawal, loss of interest, attention seeking behaviors)
- Physical problems (e.g., headaches, vague pains, skin eruptions, bowel problems, psychosomatic complaints)
- Loss of interest in peer social activities

Helpful Hints:

- Group activities geared toward the resumption of routines
- Involvement with same age group activity
- Group discussions geared toward reliving the disaster and rehearsing appropriate behavior for future disasters
- Structured but undemanding responsibilities
- Temporary relaxed expectations of performance
- Additional individual attention and consideration

Adolescence (14–18 years)

A disaster may stimulate fears concerning the loss of their families and fears related to their bodies. It threatens their natural branching away from their family because of the family's need to pull together. Disasters disrupt their peer relationships and school life. As children get older, their responses begin to resemble adult reactions to trauma. They may also have a combination of some more childlike reactions mixed with adult responses. Teenagers may show more risk-taking behaviors than normal (reckless driving, use of drugs, etc.). Teens may feel overwhelmed by their emotions, and may be unable to discuss them with their families.

Typical Responses:

- Headaches, or other physical complaints
- Depression
- Confusion/poor concentration
- Poor performance
- Aggressive behaviors
- Withdrawal and isolation
- Changes in peer group or friends
- Psychosomatic symptoms (e.g., rashes, bowel problems, asthma)
- Appetite and sleep disturbance
- Agitation or decrease in energy level
- Indifference
- Irresponsible and/or delinquent behavior

- Decline in struggling with parental control

Helpful Hints:

- Encourage participation in community rehabilitation work
- Encourage resumption of social activities, athletics, clubs, etc.
- Encourage discussion of disaster experiences with peers, family, and significant others
- Temporarily reduce expectations for level of school and general performance
- Encourage but do not insist upon discussion of disaster fears within the family setting

Referral to a Mental Health Professional

Following a disaster, people may develop Post-Traumatic Stress Disorder (PTSD), which is psychological damage that can result from experiencing, witnessing, or participating in an overwhelmingly traumatic (frightening) event. Children with this disorder have repeated episodes in which they re-experience the traumatic event. Children often relive the trauma through repetitive play. In young children, distressing dreams of the traumatic event may change into nightmares of monsters, of rescuing others or of threats to self or others.

PTSD rarely appears during the trauma itself. Though its symptoms can occur soon after the event, the disorder often surfaces several months or even years later. Parents should be alert to these changes:

- Refusal to return to school and "clinging" behavior, shadowing the mother or father around the house;
- Persistent fears related to the catastrophe (e.g., fears about being permanently separated from parents);
- Sleep disturbances such as nightmares, screaming during sleep and bed-wetting, persisting more than several days after the event;
- Loss of concentration and irritability;
- Behavior problems, i.e., misbehaving in school or at home in ways that are not typical for the child;
- Physical complaints (stomachaches, headaches, dizziness) for which a physical cause cannot be found;
- Withdrawal from family and friends, listlessness, decreased activity, preoccupation with the events of the disaster.

Professional advice or treatment for children affected by a disaster—especially those who have witnessed destruction, injury or death—can help prevent or minimize PTSD. Parents who are concerned about their children can ask their pediatrician or family doctor to refer them to a child and adolescent psychiatrist. (The American Academy of Child and Adolescent Psychiatry. www.aacap.org/factsfam/disaster.htm)

Tips for Parents

Children often imitate their parent's behavior. When parents have coped well with the situation, there is an excellent chance the children will also cope well. When problems are kept hidden and not discussed openly, children may interpret this to mean that something dreadful is going on, often even worse than it really is.

How Parents Can Help Their Children Cope

- Hug and touch your child often.
- Reassure the child frequently that you are safe and together.
- Talk with your child about his or her feelings about the disaster. Share your feelings too. Give information the child can understand.
- Talk about what happened.
- Spend extra time with your child at bedtime.
- Allow children to grieve about their lost treasures; a toy, a blanket, their home.
- Talk with your child about what you will do if another disaster strikes. Let your child help in preparing and planning for future disasters.
- Try to spend extra time together in family activities to begin replacing fears with pleasant memories.
- If your child is having problems at school, talk to the teacher so that you can work together to help your child.

Children depend on daily routines: They wake up, eat breakfast, go to school, play with friends. When emergencies or disasters interrupt this routine, children may become anxious. In a disaster, they will look to you and other adults for help. How you react to an emergency gives them clues on how to act. If you react with alarm, a child may become more scared. They see our fear as proof that the danger is real. If you seem overcome with a sense of loss, a child may feel their loss more strongly.

Children's fears also may stem from their imagination, and you should take these feelings seriously. A child who feels afraid is afraid. Your words and actions can provide reassurance. When talking with your child, be sure to present a realistic picture that is both honest and manageable. Feelings of fear are healthy and natural for adults and children. But as an adult, you need to keep control of the situation. When you are sure that danger has passed, concentrate on your child's emotional needs by asking the child what is uppermost in his or her mind. Having children participate in the family's recovery activities will help them feel that their life will return to "normal." Your response during this time may have a lasting impact.

Be aware that after a disaster, children are *most afraid* that—

- the event will happen again;
- someone will be injured or killed;
- they will be separated from the family;
- they will be left alone.

Advice for Parents: Prepare for Disaster

You can create a Family Disaster Plan by taking four simple steps. First, learn what hazards exist in your community and how to prepare for each. Then meet with your family to discuss what you would do, as a group, in each situation. Next, take steps to prepare your family for disaster such as: posting emergency phone numbers, selecting an out-of-state family contact, assembling disaster supply kits for each member of your household and installing smoke detectors on each level of your home. Finally, practice your Family Disaster Plan so that everyone will remember what to do when a disaster does occur.

Preparations

- Develop and practice a Family Disaster Plan. Contact your local emergency management or civil defense office, or your local Red Cross chapter for materials that describe how your family can create a disaster plan. Everyone in the household, including children, should play a part in the family's response and recovery efforts.

- Teach your child how to recognize danger signals. Make sure your child knows what smoke detectors, fire alarms and local community warning systems (horns, sirens) sound like.
- Explain how to call for help. Teach your child how and when to call for help. Check the telephone directory for local emergency phone numbers and post these phone numbers by all telephones. If you live in a 9-1-1 service area, tell your child to call 911.
- Help your child memorize important family information. Children should memorize their family name, address, and phone number. They should also know where to meet in case of an emergency. Some children may not be old enough to memorize the information. They could carry a small index card that lists emergency information to give to an adult or babysitter.

After the Disaster: Time for Recovery

Immediately after the disaster, try to reduce your child's fear and anxiety.

- Keep the family together. Your first thought may be to leave your children with relatives or friends while you look for housing and assistance. Instead, keep the family together as much as possible and make children a part of what you are doing to get the family back on its feet. Children get anxious, and they will worry that their parents will not return.
- Calmly and firmly explain the situation. As best as you can, tell children what you know about the disaster. Explain what will happen next. For example, say, "Tonight, we will all stay together in the shelter." Get down to the child's eye level and talk to them.
- Encourage children to talk. Let children talk about the disaster and ask questions as much as they want. Encourage children to describe what they are feeling. Listen to what they say. If possible, include the entire family in the discussion.
- Include children in recovery activities. Give children chores that are their responsibility. This will help children feel they are part of the recovery. Having a task will help them understand that everything will be all right.

You can help children cope by understanding what causes their anxieties and fears. Reassure them with firmness and love. Your children will realize that life will eventually return to normal. If a child does not respond to the above suggestions, seek help from a mental health specialist or a member of the clergy.

(FEMA <http://www.fema.gov/pte/children.htm>)

*(The above material comes courtesy of the New York State Office of Mental Health web site:
<http://www.omh.state.ny.us/omhweb/crisis/crisiscounseling3.html>.)*