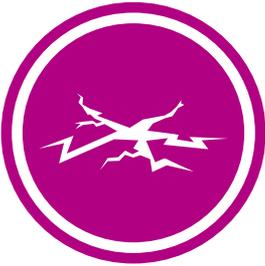




Responding To Children's Reactions To Disasters



Earthquakes



Floods | Tsunami's



Human Caused
Disasters



Hurricanes



Fires



Tornados

Responding to Children's Reactions to Disasters

This pamphlet was prepared to help parents and others respond to children's fears and anxieties following a disaster. Natural disasters that often affect children include earthquakes, fires, floods, tornadoes, or hurricanes. Person/people caused disasters include community or school violence, terrorist attacks, the threat of an attack, bioterrorism, or other acts.

This pamphlet is intended to provide basic information regarding children's emotional responses to disasters. It is designed to help parents better understand their children's reactions and to provide suggestions for interacting and intervening. The information is intended to complement, not replace, common-sense family values and, if needed, the personalized assistance of a family doctor or counselor.

The Child and Family Guidance Center, established in 1962, is a nonprofit organization providing high quality mental health care, supportive social services, and linkages to needed community resources in the San Fernando, Antelope, and Santa Clarita Valleys of Northern Los Angeles County. We support children, strengthen families, empower communities, and change lives.



RESOURCES

County of Los Angeles Emergency Survival Guide - lacounty.gov
American Red Cross - www.redcross.org
Federal Emergency Management Agency - www.fema.gov
FireSafety - www.FireSafety.gov

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The Trauma

Disasters are traumatic and/or frightening events that may occur in some children's lives. Children can feel very frightened, confused and anxious during a disaster and afterwards some children may show a temporary change in behavior. For most children, these changes will be mild, short-term, and will diminish with time. Children who have experienced other traumatic events in the past or have existing mental health problems may be more vulnerable to trauma and may show a more significant change in behavior.

Understanding the Child

For the average child, growing up consists of certain daily routines. For most school age children, regularity involves the presence of parents, awakening in the morning, preparing for school, meeting with the same teacher, the same children, playing with friends and sleeping in their own beds. Essentially the child is able to depend on a series of predictable events. For the pre-schooler life is much the same. He/She spends his/her days within the familiarity of his/her world, maybe at home, with babysitters or at nursery school. His/Her surroundings remain more or less constant.

Children expect dependability from adults and certainly from the forces of nature. When there is an interruption in this natural flow of life, the child may experience anxiety and fear, however, there are many ways that a parent can intervene to help children cope with their feelings.

Children under five may react in a number of ways:

- **Anxiety, generalized fear.**
- **Clinging to parent or caregiver.**
- **Increased crying, tantrums, angry outbursts.**
- **Whimpering, sadness, withdrawal.**
- **Physical complaints such as stomach aches, or nausea.**
- **Refusal to sleep alone, nightmares.**
- **Returning to behaviors common to a younger age such as thumb sucking, bedwetting, and being afraid of the dark.**

Responding to a Child's Fear and Anxiety

Fear is a normal reaction to any danger which threatens life or well-being. What is a child afraid of after a disaster?

- He/She is afraid of recurrence, injury or death.
- He/She is afraid of being separated from his family.
- He/She is afraid of being left alone.

Parents should recognize that there are fears which come from within the child, his/her imagination or his/her fantasies. These are in addition to fears that are stimulated by a real event. Even after the event has passed, his/her anxiety may sometimes remain.

The child may not be able to describe his/her anxious feelings. Even though intensely afraid, the child may be genuinely unable to give an explanation that makes rational sense to the adult. Children are dependent on adults for love, care, security and food. They fear most the loss of their parents and being left alone. In a disaster, even the child who is usually competent and unafraid may react with fear and considerable anxiety to an event that threatens the family.

A child having less experience in distinguishing a real threat from an imaginary one is likely to be plagued by fears with no basis in reality. It is important to note that fantasized danger is as real and as threatening as present danger. Parents must recognize that a child who is afraid, is afraid!

Children are not trying to make life more difficult for anyone. Their fear is uncomfortable to them as well. They would like nothing better than to be rid of their fears. If children feel their parents will not or cannot understand their fear, then they feel ashamed, rejected and unloved. Consequently, they feel even more afraid.

The first step for parents is to understand the kinds of fear and anxiety a child experiences.



Listen and Communicate

What can parents do to help their child? They should begin communicating; listening and talking. To the extent possible, the family should remain together. The child needs reassurance by the parents' words as well as their actions!

"We are all together and we are safe." "You don't have to worry, we will look after you."

Realistically, parents also are experiencing fear. However, they have the maturity to cope with their fears. A demonstration of strength should be apparent to the child, making him feel more secure and reassured.

Children Between 6 and 11 have a range of reactions

Parents may see:

- Whining, clinging, acting younger.
- Sleep problems, nightmares.
- Hyperactive or silly behavior.
- Increased tantrums and angry outburst.
- Aggression with parents, sibling and peers.
- Increased sibling rivalry.
- Irritable, low frustration tolerance.
- Reenactments of the trauma in their play.
- Preoccupation with safety, crime and death.
- Difficulty concentrating.
- Physical symptoms such as head and stomach aches.
- Change in appetite.
- Withdrawn, isolative, quiet around friends, family, and teachers.
- Refuse to go to school.
- Develop unfounded fears.
- Sad, cries easily, depressed.

Earthquakes



- Practice drop, cover and hold on. If you do not have sturdy furniture to hold on to, sit on the floor next to an interior wall and cover your head and neck with your arms.
- Keep a flashlight and shoes by each person's bed.
- Bolt water heaters and gas appliances to wall studs.
- Bolt bookcases and other tall furniture to wall studs.
- Learn how to shut off the gas valves in your home.
- Keep and maintain an emergency supplies kit in an easy-to-access place.

Fires



- **EVACUATE** immediately when fire alarm or smoke is visible.
- Do not waste any time saving property.
- It may be smoky; getting low may make it easier to breathe and see. Smoke contains toxic gases which can disorient you or, at worst, overcome you.
- Once you are out of the home, never re-enter the home. **ONCE OUT—STAY OUT!**
- Call fire department.
- If you catch fire, remember, stop, drop, and roll.

Floods | Tsunami's



- Monitor your local radio and TV station broadcasts for information.
- If local officials advise evacuation, do so promptly.
- Know where the shelters are located.
- Bring outside possessions inside the house or tie them down securely.
- If there is time, move essential items and furniture to upper floors in the house. Disconnect electrical appliances that cannot be moved. **DO NOT** touch them if you are wet or standing in water.
- If you are told to shut off water, gas, or electrical services before leaving, do so.

Tornados



- Go to a pre-designated shelter area such as a safe room, basement, storm cellar, or the lowest building level.
- If there is no basement, go to the center of an interior room on the lowest level (closet, interior hallway) away from corners, windows, doors, and outside walls.
- Put as many walls as possible between you and the outside. Get under a sturdy table and use your arms to protect your head and neck. Do not open windows.
- If outside lie flat in a nearby ditch or depression and cover your head with your hands. Be aware of the potential for flooding.

Hurricanes



- Protect your house from wind damage by boarding your windows and doors; water damage by sandbagging around your premises.
- When a hurricane WARNING is issued conditions are expected in 24 hours or less. Listen constantly to a battery-operated radio or television for official instructions.
- If officials indicate evacuation is necessary: leave as soon as possible. Avoid flooded roads and watch for washed-out bridges.
- Unplug appliances. Turn off electricity, gas and main water valve.
- Take warm protective clothing, blankets and sleeping bags to shelter.

Human Caused Disasters



- Wherever you are, be aware of your surroundings. The very nature of terrorism suggests there may be little or no warning.
- Take precautions when traveling. Be aware of conspicuous or unusual behavior. Do not accept packages from strangers. Do not leave luggage unattended. Unusual behavior, suspicious packages and strange devices should be promptly reported to the police or security personnel.
- Do not be afraid to move or leave if you feel uncomfortable or if something does not seem right.
- Learn where emergency exits are located in buildings you frequent. Notice where exits are when you enter unfamiliar buildings.

It is not harmful for parents to let the child know that they also are afraid. Actually, it is good to put these feelings into words. This sharing will encourage children to talk about their own feelings or fears.

Communication is most helpful in reducing the child's anxiety. Let your child know you are willing to listen and talk about the disaster. These "talks" with children should include the following interventions:

- Ask questions, such as "What are you most upset about?" "What do you feel confused about?"
- Clarify misunderstandings that children may have of risk and danger.
- Give simple answers to children's questions; don't overwhelm them with information.
- Discuss the preparedness plan that was established prior to the disaster which can strengthen a child's sense of safety and security.
- Some children cannot verbalize their feelings; allow them to draw as a means of communication and expression. They will talk when they are ready.
- Explain what the child can expect to happen following the disaster.

A child may express his fears in words, play or actions.

Children between 12 and 17 have various reactions:

- Flashbacks to the traumatic event (flashbacks are the mind reliving the event).
- Avoiding reminders of the event.
- Anxiety and fearful about safety.
- Nightmares or other sleep problems.
- Social withdrawal from friends and/or family, isolation.
- Sad, cries easily, depressed.
- Decrease in energy level, apathy, loss of interest in usual activities.
- Complaints of physical aches and pains.
- Drug, alcohol, tobacco use and abuse .
- Delinquent behavior i.e. disruptive, disrespectful, destructive behavior or risk taking.



Re-establish Routine as Soon as Possible

There will be many things for a parent to do after a disaster. A child can and should be included in these activities. It is actually reassuring for a child if the parent involves him in these tasks.

It is reassuring to see progress being made in bringing the home back to order and the routine of the household resumed: meals prepared, dishes washed, beds made and playing with friends. For the parents of a very young child the task is more difficult. That child may need more physical care and more holding. This makes it harder for parents to attend to other necessary tasks. Unfortunately, there are no short-cuts. If the child's needs are not met, the problems will persist for a longer period.

When school resumes, children may put up some resistance. Re establishing routine includes returning to school therefore, firmness is important. Sometimes the assistance of the teacher or the school counselor may be necessary. The child should know that school attendance is expected.

Bedtime Problems

The most frequently encountered problems occur at bedtime.

The child may refuse to go to his/her room to sleep alone. When he/she does go to bed, he/she may have difficulty falling asleep. He/She may wake up often during the night. He/She may have nightmares. Parents question if they should make changes. Should they allow the child to sleep in the parents' bed, in their bedroom, in another child's bed, or should the parent sleep in the child's room?

To the extent possible the child should remain in his/her room and, if necessary, the parent may need to remain in the child's room. Then the child will begin to feel that his room is safe. It is necessary to be somewhat flexible. Bedtime may be delayed if the child is more anxious or wants to talk longer, but a bedtime pattern should be established as soon as possible. It may be sufficient for the parent, at bedtime, to spend a little extra time in the child's bedroom reassuring him/her.

Some children, who are more anxious than others, may be allowed to move into a room with another child or sleep on a mattress in the parent's bedroom. Sleeping arrangements should return to normal as soon as possible. The parents and child should agree on a day to return to the normal routine. It is important for the child's independence that the parent be firm about this commitment.

Parents also should be aware of their own feelings, their own uncertainty, fear or anger and the effects these have on the child. If parents have doubts about safety and express them to the child, they will contribute to the child's continuing fear and his inability to return to his room. Reassurance with firmness is an effective approach. Getting angry with the child, punishing, spanking or shouting will rarely help.

If the child comes out of his room, calmly return him to it and reassure him of your presence nearby. It may be helpful to leave a night light on in the room or hall and to leave his door ajar. Spending more time with the child during the day will make him feel more secure in the evening and at night.

Specific Fears

A younger child may fear imaginary monsters. Parents can give their child extra attention at bedtime, read a story, allow them to sleep with the lights on and reassure them with simple explanations, pointing out the difference between fantasy and reality. In some cases, parents may choose to allow the child to sleep in their room on a short term basis.

Be Patient with Changes in Behavior

A child may sometimes revert to behavior which he/she has outgrown such as bed wetting, clinging to the parents and/or thumb sucking. These and other problems may occur temporarily and are normally of short duration.

Following a disaster, parents may see an increase in hyperactive, silly or aggressive behavior. Since children use "play," as a way to cope and master their fears, parents may also see them repeatedly re-enact the disaster in their play. Although these behaviors may alarm parents, they are only signs of the child's anxiety and parental acceptance will reassure the child and shorten the duration of such behaviors.

When the child's behavior becomes disruptive, parents can help refocus them by introducing a calming activity such as drawing. Drawing can be a means of expression for children and can be very therapeutic. Exercise as little control as possible over their artwork. The goal is for them to express themselves--not draw a "pretty picture." Parents can also refocus children's behavior by introducing games or other art activities and participate in the play with them when possible.

Children respond to praise and parents should make a deliberate effort to remain calm, patient and realize that this regressive behavior is only temporary.

Seeking Help

How can parents recognize when to seek professional help?

If the sleeping problem continues for more than a few nights, if the clinging behavior does not diminish, if the fears become worse, it is time to ask for professional advice.

Most parents are capable of helping their child overcome fears and anxiety. However, it is not a sign of failure if they feel they are unable to help their children by themselves. A telephone call to a pediatrician, family physician or the local mental health center may be helpful.

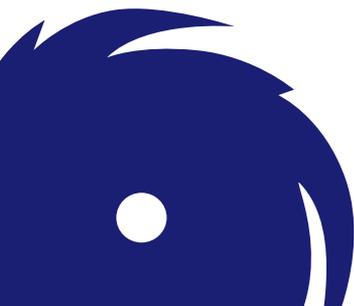
In some cases advice may be given on the telephone. In other instances, parents will be advised to bring their child for an interview. In cases of severe anxiety, early action will result in a faster return to normalcy. It will be evident to the parents if their efforts have been successful.

Mental health professionals are specially trained to help people in distress. They can help parents cope with and understand the unusual reactions of their child. By talking to the parents and child either individually or in groups, a child's fears can be overcome more easily.

Some parents are reluctant to consider seeking the help of a mental health professional or a clinic. However, more and more people are becoming aware that there is no stigma attached to seeking help. It is a way to avoid severe problems.

Be Prepared

Preparing for disaster helps everyone in the family accept the fact that disasters do happen, and that they can do something about it. Families should work together to identify and collect the resources needed to meet both the basic need and psychological needs during and after disaster. When children feel prepared, they cope better.





For Services Call...

San Fernando Valley | 818.739.5250

Antelope Valley | 661.265.8627



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