Coping With Stress in Children

Living in our world today is not as peaceful and easy as we would wish for our children and families. Sometimes we are forced to deal with some tragedy, a personal loss, trauma, physical or mental damage and/or a social crisis. These critical change affects our reality. Challenges to well-being are everywhere, family problems, crime, unemployment, lack of good jobs, and fear of the future due to social and political changes. Some parts of our community are anxious about changes in immigration policy and how these will impact families and children.

This guide presents some suggestions about how to help children of different ages cope with disasters (such as floods or fires or tornados) and traumatic events (for example hate crimes), these have much in common in terms of the stress they cause. Children can feel very frightened during a disaster or traumatic event, and afterwards some children may show temporary changes of behavior. For most children these changes will be mild and will diminish with time. However, reminders of what happened could cause upsetting feelings to return at a later time and behavior changes may emerge again. Watching scenes of the disaster or traumatic event on television can be distressing especially for younger children. Younger children may return to bed-wetting, have difficulty sleeping, and not want to be separated from their caregivers. Older children may show more anger than usual, find it difficult to concentrate at school and want to spend more time alone than usual. Some children are more vulnerable, and their reactions can be more severe and last for a longer period of time. This is true of children who are immigrants themselves, are the children of immigrants, or who are may be targeted because of their ethnicity or race.
Factors that contribute to greater vulnerability include:
• changes in migratory status, such as: being evacuated or physically separated from the community;
• bullying at school or work, such as, harassment from others or deportation comments like “start packing, because you are leaving;”
• daily anxiety, and frequent reminders from watching, and listening to repetitive and threatening news on TV or radio.

Children’s Reaction to Disaster
The following are common reactions that children may exhibit following a disaster. While the following descriptions are typical, some children may exhibit none of these behaviors and others may behave in ways not mentioned here.
Birth Through 6 Years

Although infants may have limited experiences, they can retain memories. Infants and very young children will not understand the specifics of what is happening but they do pick up on the stressed reactions of adults around them. They may react by becoming more irritable, crying more than usual, or wanting to be held and cuddled more. Preschool and kindergarten children can feel helpless, powerless, and frightened about being separated from their caregivers. Symptoms include: Bedwetting and other regressive behavior (thumb sucking, a need for a favorite blanket or toy), irrational fears, (monsters, kidnappers, pirates), unfounded fears (Daddy won’t come to pick me up from school; my house is going to burn down), nightmares. Children’s needs include: Simple, direct statements of assurance (“Your parents/your teachers care so much and are taking good care of you”), limited exposure to media, and images of tragedy or loss.

6 Through 10 Years

Older children can understand simple social consequences and the permanence of loss. They may become preoccupied with the details of the traumatic event and want to talk about it continually. This preoccupation can interfere with concentration at school and affect academic performance. Children may hear inaccurate information from peers, and parents should clarify. They may fear that the disaster or traumatic event will happen again and have sad or angry feelings. Symptoms include: Sleep disorders (too much, too little, restless); changes in appetite; nail biting; agitation; withdrawal; sudden tears; inability to concentrate on work; and aggressive behavior. Children’s needs include: A safe space to discuss the crisis, tragedy, or trauma and the feelings it has generated; the ability to ask questions, repeatedly, and know they will be answered calmly and patiently; a sense of connectedness to family and friends; help in putting the event in some kind of realistic perspective (“Yes, there are car accidents, but we try to prevent them by driving very safely, wearing seat belts, and paying attention to other drivers”); and limit exposure to screen time.

11 Through 15 Years

As children mature, their responses become more similar to those of adults. Much of adolescence is focused on moving out into the world. Following a disaster or traumatic event, that world can seem dangerous and unsafe. Teenagers may
react by becoming involved in dangerous, risk-taking behaviors, such as reckless
driving, and alcohol or drug use. Others may become fearful of leaving home and
avoid social activity. Teenagers can feel overwhelmed by their intense emotions, yet
unable to talk about them.
Symptoms include:
Appetite and/or sleep disturbances; inattention to schoolwork; headaches or
stomachaches; hyper-reaction to the event; seeming indifference toward the event;
drinking and/or smoking.
Children’s needs include:
Opportunities to do something useful that directly relates to the event; a peaceful
classroom and home environment; resumption of normal pre-teen activities; time
spent with trusted friends and adults.

For entire Family: Parents may also want to work with children to learn family
members’ phone numbers, establish a reunion point after an emergency, and
designate a trusted adult that children could contact if need be.

15 Through 18 Years

In the teenage years, a youth’s sense of security is challenged by the anticipation of
adulthood and all of its responsibilities. Young people this age feel they’re expected
to make mature adult decisions but their ability to reason is still greater than the
ability to gain control over their emotions. Although they’re capable of
understanding more about “the way the world works,” they aren’t necessarily
capable of understanding the feeling that crisis, tragedy or trauma may cause.
Symptoms include: Drinking and/or smoking, truancy or other rebellious behavior,
eglects of daily hygiene, withdrawal, from family or
friends, association with less-disciplined people.

Children’s needs include:
Assurance that they are still entitled to their childhood; the ability to engage in more
“give and take” conversations about the event and their feelings; positive role
models to learn from; supportive relationships.

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