and in control. As much as possible, children should stay with people with whom they feel most familiar. Expect changes in behavior. Be more available. Provide them with “security” symbols (night-light, security blanket, picture of parent for pocket or bedside). Help children to have a plan to handle worries and anxieties, (talk about feelings, draw a picture of the worry, journal, physical activity, etc.). Make opportunities for play. Continue to celebrate family events and holidays.

Media Coverage. Following a disaster, it is normal to watch the news about what happened. However, disaster research has shown that unexpected messages or images on television can be frightening. Those who watch the disaster coverage can become what are called “secondary victims” and can suffer emotional and physical problems. It is best to not allow young children to watch news coverage of the disaster and limit watching for older children. If they do watch, watch with them and give them an opportunity to talk about what they are seeing.

Feelings and Reactions. Children express their feelings in different ways. Some children will react by becoming withdrawn and unable to talk about the event, while others will feel intensely sad and angry at times and at other times will act as if nothing has occurred. Don’t be surprised if some children don’t seem to be affected by what they have seen and heard. Not everyone has immediate reactions; some have reactions that show up days, weeks, or even months later, and some may never have a reaction.

When To Seek Professional Help

Children are amazingly resilient, but they can be deeply affected by traumatic world events. Seeing a mental health professional is a good idea if a child shows any of the following changes for longer than three months.

- Behavior or academic problems at school.
- Angry outbursts.
- Withdrawal from usual social activities or play.
- Frequent nightmares or other sleep disorders.
- Physical problems such as nausea, headaches, weight gain or loss.
- Intense anxiety or avoidance behavior that is triggered by reminders of the event.
- Depression or a sense of hopelessness about life or the future.
- Alcohol or drug use problems.
- Dangerous, risk-taking behavior.
- Continued worry about the event as a primary focus in life.

Certain events may make a child more vulnerable to having difficulty coping. If a child has experienced a recent loss such as a divorce, a death, or a move, he or she may feel particularly overwhelmed. A traumatic event can reactivate the emotions associated with previous trauma, which can be overpowering.

Seeing a counselor does not mean that a child is “mentally ill” or that you have failed to support him or her. Following a trauma, many adults and children have found that it is helpful to talk with a professional who has specialized training in post-traumatic reactions and can help them understand and deal with their feelings.

The previous information is adapted from information provided by the American Red Cross.

Resources

www.kidshealth.org/parent/positive/talk/news.html – article “How to Talk to Your Child About the News”.
https://extension.purdue.edu/purplewagon/war/warpubs.htm – article “When War is in the News”. Plus links to other pertinent articles.
www.redcross.org/services/afes/ - links to services for families of military personnel.
www.redcross.org/monsterguard - Free kids app from the American Red Cross. Teaches kids how to prepare for and respond to an emergency.

Your school social worker, school psychologist, and school counselor are also resources to use when children need help in dealing with difficult situations. Please contact your school to access their services.

Talking to Kids About War, Terrorism, and Disaster

Children’s reactions to traumatic events often mirror those of the adults in their lives. How parents or other adults respond to a child during this time can help him or her learn coping skills, regain some sense of security, and feel supported.

Need help? Don’t know where to start?
Dial 2-1-1 or go to www.ne211.org.

Provided by LPS School Social Workers
BECAUSE FAMILIES MATTER

Lincoln Public Schools
Department of Student Services
Rev. 8/2015
Children’s Reactions

Children’s fears and anxiety are very real, even though, to adults, they may seem exaggerated. Following a traumatic event, they may begin acting younger than they are. Behaviors that were common at an earlier age, such as bed-wetting, thumb sucking, clinging to parents or fear of strangers may reappear. Older children who have shown some independence may want to spend more time with their families. Bedtime routines can provide a sense of security and feel supported. The following is information to help understand children’s reactions and needs during times of crisis.

Some children show their fear by developing physical symptoms, such as stomachaches, headaches or feeling “sick.” Children can experience thinking difficulties, becoming easily distracted, feeling confused and finding it hard to concentrate. These reactions can be triggered by smells, sights, sounds, objects or activities. A child may be unaware of the triggers and of any behavioral changes. They are not intentionally showing fear or anxiety. Children of different ages react in different ways to traumatic events.

Birth to 2 years. Without the ability to speak, children cannot describe the event, nor their feelings, but they retain memories of particular sights, sounds or smells. When they are older, these memories may emerge in their play. Babies may be more irritable, cry more often and need to be held and cuddled frequently. They will respond to the caring that is given to them by an adult.

Preschool and Kindergarten. In the face of an overwhelming event, very young children can feel helpless and unable to protect themselves. When the safety of their world is threatened, they feel insecure and fearful. Children this age do not understand permanent loss. They believe consequences are reversible. They will repeatedly recreate parts of the events in their play. These are all normal reactions. Abandonment is a major childhood fear. Separation anxiety can increase after a crisis, so children need frequent reassurance they will be cared for and will not be left alone.

School Age (7 to 11 years). Children at this age have the ability to understand the permanence of loss. They can become preoccupied with details and want to talk about it continually. They may not be able to concentrate in school and their grades may drop. They may not want to go to school. Since their thinking is more mature, their understanding of the disaster is more complete. This can result in a wide range of reactions, like anger, sadness and anxiety. School age children can also slip back into earlier behaviors. As in younger children, sleep problems can appear as can an increased number of physical complaints.

Pre-adolescence and Adolescence (12 to 18 years). In this age group, children have a need to appear knowledgeable and experienced, especially to their family and friends. When they live through traumatic times they need to feel their anxieties and fears are normal and are shared by their peers. Because they survived a traumatic event, they may feel immortal. This can lead to taking dangerous risks. Their reactions are a mixture of those from earlier age groups and those that are more adult. Teenage years are a time of moving outward into the world, however, this may be delayed if the world feels unsafe to them. Even teenagers may return to earlier ways of behaving. Teens may have a hard time discussing feelings with family members. Some will prefer to talk to other trusted adults or to peers.

How To Help Children

TALKING ABOUT WHAT HAPPENED

• Listen to and accept children’s feelings.
• Notice when children have questions and want to talk.
• Give honest, simple brief answers to their questions.
• Make sure they understand your answers and the meaning you intend.
• Use words or phrases that won’t confuse a child or make the world more frightening.

• Create opportunities for children to talk with each other about what happened and how they are feeling.
• Give your child an honest explanation if you are feeling upset and don’t want to talk about what happened. You may want to take “time out” and ask a trusted family friend to help.

If children keep asking the same question over and over again it is because they are trying to understand and make sense out of the disruption and confusion in their world. Younger children will not understand that death is permanent, so their repeated inquiries are because they expect everything to return to normal.

• Children often feel that the world revolves around them and their actions. If the child feels guilty, ask him or her to explain what happened. Listen carefully to whether a sense of responsibility is attached to some part of the description. Explain the facts and emphasize that no one, least of all, the child, could have prevented the event.
• Let the school help. The child’s teacher can be sensitive to changes in the child’s behavior and respond in a helpful way.

• Even if you feel the world is an unsafe place. You can reassure your child that you will do everything possible to stay safe. Give him or her some examples of how you will do this.
• Be especially loving, available and supportive; your child needs you at this time.

Routines. Children of all ages benefit from the family keeping their usual routines (meals, activities, and bedrooms) as close to normal as possible. This allows a child to feel more secure.