

Children’s responses to trauma vary according to the age of the child. Generally, children respond by reverting to behavior typical of an earlier developmental stage. These responses are considered NORMAL if they are of brief (under three weeks) duration. If any of these symptoms continue, there are professionals available to help you with your questions.

AGES 1 - 6	AGES 6 - 11	AGES 12 - 18
Bedwetting Crying Immobility Excessive clinging Thumbsucking Wetting pants Loss of bowel control Fear of darkness Inattentiveness Fear of animals Fear of being left alone Fear of crowds Overactivity Underactivity Nightmares Inability to sleep without a light or someone else Awakening during night Sensitivity to noises Irritability Confusion Speech difficulties Eating problems Stomach aches Accident prone* Violent fantasies/play Re-enacting event Wanting to die* Wishing to go to heaven*	Bedwetting Nightmares Change in sleep patterns - unwillingness to fall asleep - need for night light - fear of sleeping alone - fear of darkness Irrational fears Irritability Disobedience Excessive clinging Headaches Stomach aches Visual or hearing problems Refusal to go to school Poor performance Fighting Loss of interest Loss of concentration Distractibility Refusal to talk about event Violent fantasies or play Re-enacting the event Accident prone* Appetite disturbances Over/underactivity Inattentiveness Wanting to die*	Withdrawal and isolation Headaches Stomach pains Running away Depression and sadness Suicidal thoughts* Stealing Change in sleep patterns Sleeplessness School problems Nightmares Increased sleep Confusion Violent fantasies Avoiding talking of event Delinquent behavior Use of drugs Use of alcohol Sexual acting out Accident prone* Relationship difficulties Change in appetite Aggressiveness Risk-taking behavior* Overactivity Irritability Confusion Inattentiveness

\*Any suicidal talk or actions should be taken seriously and professional help should be sought immediately. Younger children do not understand the permanence of death, so do not understand the consequences of “suicidal” behavior. Even very young children can become suicidal.

# COPING WITH CHILDREN'S RESPONSE TO TRAUMA

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Although children have many of the same reactions to trauma as adults do, they have different ways of expressing their reactions and need special help to cope. The following are some suggestions for dealing with the child in crisis:

- When disaster hits a family, the child often has to deal not only with the disaster itself, but with the unavailability of his parents who are, themselves, consumed with the disaster. One of the child's biggest fears is the loss or unavailability of his parents when he needs them. This fear often becomes fact in a disaster.
- Your child's fears are real to him. He is truly afraid. He's not trying to make life difficult for you. Treat all fears as genuine.
- Your child needs a lot of reassurance that you will take care of him.
- Keep all promises you make to your child during the crisis. In other words, do not make promises you cannot keep. It is important that he can count on you when all else is in chaos.
- Listen to your child. Listen to his fears. Listen to how he feels. Listen to his explanation about what he thinks happened.
- Explain the facts that you know about the disaster. You may have to explain more than once.
- Encourage him to talk.
- Include him in the clean-up activities or other activities designed to return life to normal. He'll feel more in control if he can help.
- Maintain your routine as much as possible.
- Young children need to be held.
- You may need to be flexible with bedtime routines. A child may need you to stay with him while he falls asleep, he may want a night light, or to sleep with a sibling or with you. If you allow him to sleep with you, you should agree on a time (not more than 3 - 4 days) when he will return to his own bed.
- If your child is fearful of going to school, insist that he go, but accompany him to school. Let teachers and school counselors know when your child is in crisis - they can frequently help.
- Your child may draw pictures of the disaster or re-enact the disaster in his play. This can be very disturbing to adults. Children do not have the verbal skills that adults do, so this is their way of "talking" about the event. They should be encouraged to draw and re-enact the event. Help them verbalize what they are doing, how they feel about it, and what they think happened in the disaster.
- Sharing your feelings about the disaster with your child can be helpful. Telling your child that you were frightened too may help him feel better about his own responses. However, it is best not to share your fears about your (or his) ability to cope. Exhibiting confidence that both of you will be able to cope is important.
- Do not expect your child to take care of your fears. For instance, do not keep your child home from school or have him sleep with you because you are afraid to be separated from him. Find help for yourself to cope with your own fears.
- Try to find a special time each day to spend together as a family. This is always a good idea, but especially important in times of crisis.
- Do not tell a child a deceased person is "happy in heaven with God or Jesus." Children do not have the concepts to understand this and, all too often, want to join the person in heaven by dying themselves. This can lead to suicidal behavior such as walking in front of cars.
- Have some fun together with your child.