

# COPING WITH CHILDREN'S REACTIONS TO HURRICANES AND OTHER DISASTERS

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This pamphlet has been prepared to help parents deal with children's fears and anxieties following a disaster. When we use the word "parents" here and throughout the pamphlet, we are also including teachers and other adults having responsibility for the child.

## UNDERSTANDING THE CHILD

The course of growing up for the average child consists of certain regularities. 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, sleeping in his own bed, essentially being able to depend on a series of predictable events. The child expects a dependability from adults and certainly from the forces of nature. For the pre-schooler life is much the same. He spends his day within the familiarity of his world, be it at home, with babysitters, or a nursery school, etc. His family remains more or less constant. When there is an interruption in this natural flow of life, the child experiences anxiety and fear. How the adults help the child to resolve these "problem times" may have a lasting effect on the child.



## 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 is afraid of recurrence, or injury, or death.**

**He is afraid of being separated from his family.**

**He is afraid of being left alone.**

Parents should recognize, however, that there are fears that stem from within the child, his imagination or his fantasies, as well as those fears that are stimulated by a real event. Even after the event has passed, his anxiety will sometimes remain. The child may not be able to describe his anxious feelings. Even though he is intensely afraid, he may be genuinely unable to give an explanation that makes rational sense.

The child, who is dependent on adults for love, care, security—even food, fears most the loss of his 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 which threatens the family. Since adults also react emotionally with normal and natural fear to disaster, the child becomes terrified, taking parental fears as a proof that the danger is real. A child having less experience in distinguishing a real threat is likely to be plagued by fears with no basis in reality. It is important to note that fantasized danger can be as real and threatening as "real danger."

A child experiences similar fear in other situations; for example, when parents separate, or divorce, when a child goes to the hospital or when there is a death in the family. *Parents all recognize these more familiar fears and attempt to deal with them.*

In natural disasters like fires, floods, tornadoes, or earthquakes, our first concern is with and our first attention goes to physical safety. This is as it should be.

*However, parents tend to ignore the emotional needs of the child once they are relieved that nothing "serious" has happened to members of the family.*

When there has been no physical injury, they may be surprised about the persistence of the child's fears. They may even feel resentment, particularly if the child's behavior disrupts or interferes with the daily routine of the family.

***One must recognize that a child who is afraid is afraid!***

He is not trying to make life more difficult for himself or his parents. His fear is uncomfortable to him. He would like nothing better than to be rid of his fears. If the child feels that parents are not understanding of his fear, he feels ashamed, rejected, unloved and consequently, even *more* afraid.

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

Parental understanding and helpful intervention can reduce the severity of fears and can prevent more serious problems from developing. This is not a new role; parents routinely and effectively help children cope with fears encountered in day-to-day situations. However, when an unusual situation occurs, the ability of some parents to reassure their child, particularly when they themselves have been frightened, may be impaired. The child feels even more fearful or anxious when suddenly he is unable to turn to the adults for reassurance.

## **ADVICE TO PARENTS**

**What can parents do to help their child?**

**It is of great importance for the family to remain together.**

Being together with the family provides immediate reassurance to a child. Fears of being abandoned and unprotected are immediately alleviated. For example, immediately after a disaster parents should not leave the child in a "safe" place while they themselves go elsewhere to inspect possible damage. They should not leave the child alone in the evacuation center while they go back to the damaged area; they should not leave the child to go shopping, but should take him along. With no opportunity to experience the fear of being left alone, the child is less likely to develop clinging behavior.

***The child needs reassurance by the parents' words as well as their actions!***

"We are all together and nothing has happened to us."

You don't have to worry, we will look after you."

Realistically, parents are also experiencing fear. However, they have the maturity to cope with the stresses upon them. A demonstration of strength should be apparent to the child who will feel more secure and reassured; however, it will not harm the child to let him know that you are also afraid. As a matter of fact, it is good to put these feelings into words. This sharing will encourage him to talk about his own feelings or fears. Communication is most helpful in reducing the child's anxiety and, for that matter, the adult's anxiety. The child may then express some fears which are not real and the parents will have an opportunity to explore these fears and reassure the child.

*Listen to what the child tells you about his fears*

*Listen when he tells about how he feels, what he thinks of what has happened.*

*Explain to the child, as well as you can, about the disaster (the fear-inducing event), about the known facts and, again, listen to him.*

A child may express his fears in play or in actions. If these are unrealistic, explain and reassure him. You may have to repeat yourself many times. Don't stop explaining just because you have told him this once before.

*Encourage him to talk.*

The silent child needs to be encouraged to talk. His difficulty in expressing himself may be very frustrating to the parents. It can be helpful to include other members of the family, neighbors, and their children in a talk about reactions to the disaster. Through the sharing of common experiences, fears are further reduced. It is essential that an attempt should be made to provide an atmosphere of acceptance where a child will feel free to talk about his fears (be it at home or at school). Adults are often reluctant to encourage the child to talk about fears and anxieties. They believe that this will only increase the fears and anxieties. Also, parents may feel helpless in reassuring the child, and may be afraid of actually harming the child by continued discussions. Statements like, "I know you are afraid," or, "It is a scary feeling," are helpful and should be used. Being told it is normal and natural to be afraid is also reassuring

*A child's fears do not need to completely disrupt his and the family's activities.*

It is apparent that there will be important concerns and things to do after a disaster: checking on the damage, cleaning up broken glass or fallen furniture. A child can and should be included in these activities. It is actually reassuring for a child if he is involved with the parent in these jobs. It is reassuring to see progress being made in bringing the house back to order and the routine of the household resumed: meals prepared, dishes washed, beds made, playmates coming over. For the parents of a very young child, the task is more difficult. Such a child may need more physical care, more holding; and this makes it harder for parents to attend to the other things that should be done. Unfortunately, there is no short-cut. If the child's needs are not met, the problem will persist for a longer period.

## **SETTLING DOWN**

When things begin to settle down, after the "excitement" of the event has passed, some degree of lethargy may set in for both the parents and children. It is very important that parents make a deliberate effort to avoid inactivity and to get back to routine.

*Parents should indicate to the child that they are maintaining control; they should be understanding but firm, supportive and make decisions for the child.*

Parents may become appropriately more permissive, but discipline has to be maintained. If the family is evacuated, there will be a delay in a return to normal. Planned activities in such centers will increase the morale of all and prevent immobilization of the child's own resources.

## BEDTIME PROBLEMS

The most frequently reported problem that parents encounter with their children occurs at bedtime.

*The child may refuse to go to his room to sleep by himself. When he does go to bed, he may have difficulty falling asleep. He may wake up often during the night; he may have nightmares.*

Parents question if they should make changes. Should they allow the child to sleep in the parents' bed, or in their bedroom or in another child's bed, or should the parent sleep in their child's room? It is necessary to become somewhat flexible. Bedtime may be delayed when the child is more anxious or wants to talk longer, but a limit should be set.

*It is natural for a child to want to be close to his parents, and for the parents to want to have the child near them.*



Some children, who are more anxious than others, can be allowed to move into a room with another child, or sleep on a mattress in the parents' bedroom. For another child it may be sufficient for the parent, at bedtime, to spend a little extra time in the child's bedroom reassuring him. All such arrangements, however, should return to normal after a few days. The parents and the child together should agree on the day for the return to his own bed (ideally not longer than 3-4 days hence) and the parents should abide by the decision. It is important for the child's independence that the parent be firm about his commitment.

*Parents should also be aware of their own fears and their own uncertainty and of the effect these have upon the child.*

If parents question—Is it going to be safe there? Will he be frightened?—they contribute to the child's continuing fear and his inability to go back to his room. Reassurance with firmness is an effective approach. Getting angry at the child, punishing, spanking, or shouting at him 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 nightlight on in the room, or in the hall, and 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**

Following a traumatic event, such as a natural disaster, irrational fears may develop in which some particular thing or situation evokes great anxiety to the point of panic, and is, therefore, strongly avoided. The child may become afraid of beds, his house, or darkness. A younger child may explain that imaginary monsters are threatening him. An older child may be afraid to go to school or even to leave his home. Reassurance to the younger child regarding monsters can be done by words, explanations, pointing out to the child the difference between his fantasy and reality. With school phobias (refusal to go to school), it is essential to see to it that the child gets to school. In this instance, firmness is necessary and the child should know that you do expect him to attend school. The teacher or the school counselor can be of help to you.

## **REGRESSIVE BEHAVIOR**

A child may sometimes revert to "childish" behavior which he has outgrown. Wetting his bed, clinging to the parents, thumb sucking, and other problems may occur temporarily, and should not alarm parents. They are normally of short duration. These behaviors are only signs of the child's anxiety, and parents' acceptance will reassure the child and shorten the duration of such behaviors. When parents over-react to these behavior patterns (become over-concerned, punish, or nag the child) these symptoms will persist much longer.

*Children respond to praise, and parents should make a deliberate effort not to focus upon the child's immature behavior*

## **HOW CAN THE PARENTS RECOGNIZE WHEN TO SEEK PROFESSIONAL HELP?**

Most parents are capable of helping their child overcome fears and anxiety. However, it is not a sign of failure if the parents find that they are unable to help their child by themselves. A telephone call to a pediatrician, family physician, the local mental health center or clinic could be helpful. In some cases, advice can be given on the telephone. In other instances, parents will be counseled to bring their child for an interview. In cases of severe anxiety, early action will result in a return to normal. Parents will recognize rather soon whether or not their attempts to help their child have been successful.

*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.*

*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.

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