



# Children and Disaster

*R.L. Peterson, Extension Family Development and Resource Management Specialist  
The Texas A&M University System*

Children and people with disabilities can be very vulnerable during a disaster. Children who are directly affected by the disaster may experience both physical and psychological traumas.

## **Degree of Personal Impact**

Researchers have consistently shown that the more personal exposure a survivor has to the disaster's impact, the greater their post-disaster reactions. The death of a family member, loss of a home, and destruction of a community are highly stressful events. In each of these, grief and trauma are intertwining.

## **Children from Birth to 2**

Children younger than 2 have little understanding of cause and effect relationships and often no past experience to help them deal with a crisis. Before they are old enough to speak children have little way to communicate their stress. However, they can retain memories of sights, sounds and smells related to the event and later on their play activities may involve acting out the trauma.

## **Children Age 2 to 5**

Children ages 2 to 5 may have abandonment fears after a disaster. The concept of permanent loss may not yet be established for preschool children. They also may re-enact the disaster over and over to try and make sense of it. Preschool children may act out or regress in their behavior. They may experience loss of appetite, stomach aches and sleep problems, including nightmares.

### **Interventions for Young Children**

- Give verbal assurance and physical comfort
- Provide comforting bedtime routines
- Avoid unnecessary separations
- Permit children to sleep in their parents' room temporarily
- Encourage expression regarding losses (for example, death of pets or loss of toys)
- Monitor media exposure to disaster trauma
- Encourage expression through play activities

## **Children Age 6 to 11**

Children ages 6 to 11 may become preoccupied with the event, show signs of regressive behavior, have night terrors, or want to stay home from school. They understand the permanence of loss and may feel feelings of guilt or anger related to the event.

## **Interventions for School Age Children**

- Give children additional attention and consideration
- Relax expectations of performance at home and at school temporarily
- Set gentle but firm limits for acting out behavior
- Provide structured but undemanding home chores and rehabilitation activities
- Encourage verbal and play expression of thoughts and feelings
- Listen to the child's repeated retelling of the disaster event
- Rehearse safety measures for future disasters
- Develop school disaster program for peer support, expressive activities, education on disasters, preparedness planning and identifying at-risk children

## **Long-Term Problems**

In some cases, children may have long-term problems such as depression, prolonged grief and Post-Traumatic Stress Disorder (PTSD). Therefore, it is important to recognize the signs of depression or PTSD in children.

Symptoms of depression may include persistent sad or irritable mood, loss of interest in activities once enjoyed, significant change in appetite or body weight, difficulty sleeping or oversleeping, psychomotor agitation or retardation, loss of energy, feelings of worthlessness or inappropriate guilt, difficulty concentrating, and recurrent thoughts of death or suicide. Five or more of these symptoms that persist for 2 or more weeks may signify a major depression. If you suspect a child is experiencing depression, he or she should be evaluated by professional.

PTSD can develop at any age, including in childhood. Symptoms typically begin within 3 months of a traumatic event, although occasionally they do not begin until years later. Once PTSD occurs, the severity and duration of the illness varies. Some people recover within 6 months, while others suffer much longer.

PTSD symptoms must be present for longer than 1 month and may include re-experiencing the event through play, nightmares, flashbacks and frightening thoughts; routine avoidance of reminders of the event; diminished interest or emotional numbness; increased sleep disturbances; irritability; poor concentration; depression; or regressive behavior. As with depression, if you suspect a child is experiencing PTSD, he or she should be evaluated by a qualified mental health professional.

## **Monitoring Children after a Disaster**

Research indicates that children who experience an initial traumatic event before they are 11 years old are three times more likely to develop psychological symptoms than those who experience their first trauma as a teenager or later in life (FEMA). Some children may be slow to show distress because they don't feel upset. In these cases it may take several weeks or even months for signs or symptoms of their distress to appear.

What is important to remember is that all children are able to cope better with a traumatic event if parents, friends, family, teachers and other adults support and help them with their experiences. This help should start as soon as possible after the event and should include close monitoring of children's behavior.

Original material authored by Karen P. Vance, Consumer Education Specialist, University of California, Cooperative Extension.

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