

# National Center for Disaster Preparedness

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## Common Stress reactions experienced by children (1 – 18 years) after a disaster and coping strategies to use during their time of trauma

(Adapted from “What to Expect After a Disaster: Children’s Typical Reactions”)

Age Group	Reactions	How to help
<p><i>Pre-School: 1 – 5 years</i></p>	<ul style="list-style-type: none"> <li>• <i>Regressive Reactions: resumption of bedwetting, thumb sucking, fear of darkness, fear of animals, fear of “monsters”, fear of strangers</i></li> <li>• <i>Physiological Reactions: loss of appetite, overeating, indigestion, vomiting, bowel or bladder problems (e.g. diarrhea, constipation, loss of sphincter control), sleep disorders and nightmares</i></li> <li>• <i>Emotional/Behavioral Reactions: nervousness, irritability, disobedience, hyperactivity, tics, speech difficulties, anxiety about separation from parents, shorter attention span, aggressive behavior, exaggeration or distortion of disaster experience, repetitive talking about experiences, exaggeration of behavior problems.</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Give additional verbal assurance and ample physical comfort (e.g. holding and caressing)</i></li> <li>• <i>Give warm milk and provide comforting bedtime routines</i></li> <li>• <i>Permit child to sleep in parents’ room on a temporary basis</i></li> <li>• <i>Provide opportunity and encouragement of expression of emotions through play activities including drawing, dramatizing the experience, telling stories about the experience</i></li> <li>• <i>Resume normal routine as soon as possible</i></li> </ul>
<p><i>Early Childhood: 5 – 11yrs</i></p>	<ul style="list-style-type: none"> <li>• <i>Regressive reactions: increased competition with younger siblings for parents’ attention, Excessive clinging, Crying or whimpering, Wanting to be fed or dressed, Engaging in habits they had previously given up</i></li> <li>• <i>Physiological Reactions: headaches, complaints of visual or hearing problems, persistent itching and scratching, nausea, sleep disturbance, nightmares, and night terrors.</i></li> <li>• <i>Emotional/Behavioral Reactions: school phobia, withdrawal from play groups and friends, withdrawal from family contacts, irritability, disobedience, fear of wind, rain etc (anything that reminds them of the disaster), aggressive behavior, repetitive talking about their experiences, sadness over losses</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Give additional attention and ample physical comforting</i></li> <li>• <i>Gentle but firm insistence on more responsibility than the younger child; positive reinforcement of child’s age-appropriate behavior</i></li> <li>• <i>Temporarily lessen requirement for optimum performance in school and home activities</i></li> <li>• <i>Reassure child that competency will return</i></li> <li>• <i>Provide opportunity for structured, but not demanding, chores and responsibilities</i></li> <li>• <i>Encourage physical activity</i></li> <li>• <i>Encourage verbal and written expressions of thought and</i></li> </ul>



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		<p><i>feelings about the disaster, feelings of loss; encourage the child to “grieve” loss of pets or toys.</i></p> <ul style="list-style-type: none"> <li>• <i>Provide play sessions with adults and peers</i></li> <li>• <i>Rehearse safety measures to take in the future</i></li> </ul>
<p><i>Pre-Adolescent: 11 – 14yrs</i></p>	<ul style="list-style-type: none"> <li>• <i>Regressive Reactions: competing with younger siblings for attention, failure to perform chores, normal responsibilities</i></li> <li>• <i>Physiological Reactions: headaches, complaints of vague aches and pains, overeating or loss of appetite, bowel problems, skin disorders, sleep disorders</i></li> <li>• <i>Emotional/Behavioral Reactions: loss of interest in peer activities, drop in level of school performance, disruptive behavior, loss of interest in hobbies and recreation, resistance of authority, increased difficulty relating to siblings and parents, sadness or depression, anti-social behavior (e.g. stealing or lying)</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Give additional attention and consideration</i></li> <li>• <i>Reassurance that ability to concentrate will return</i></li> <li>• <i>Temporarily lower expectations of performance at school and home</i></li> <li>• <i>Encourage verbal and written expression of feelings</i></li> <li>• <i>Provide structured but undemanding responsibilities</i></li> <li>• <i>Encourage taking part in home or community recovery efforts</i></li> <li>• <i>Rehearse safety measures to be taken in the future</i></li> <li>• <i>Encourage physical activity</i></li> <li>• <i>Encourage social interactions</i></li> </ul>
<p><i>Adolescent: 14 – 18yrs</i></p>	<ul style="list-style-type: none"> <li>• <i>Regressive Reactions: resumption of earlier behaviors and attitudes, decline in previous responsible behavior, decline in emancipatory struggles over parental control, decline in social interest and activities</i></li> <li>• <i>Physiological Reactions: bowel and bladder complaints, headaches, skin rash, sleep disorders, disorders of digestion, vague physical complaints or exaggerated fears of physical problems, painful menses or cessation of menses</i></li> <li>• <i>Emotional/Behavioral Reactions: marked increase or decrease in physical activity level, expression of feelings of inadequacy and helplessness, delinquent behavior (e.g. stealing or vandalism), increased difficulty in concentration on planned</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Encourage discussion of disaster experiences with peers and significant others</i></li> <li>• <i>Encourage involvement in rehabilitation and recovery efforts in the community</i></li> <li>• <i>Temporarily reduce expectation for level of school and home performance</i></li> <li>• <i>Encourage resumption of social activities and sports.</i></li> </ul>



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