

❖ ECRH Notes ❖

Ecumenical Center for Religion and Health, San Antonio, TX

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Helping Our Children Cope

For children, a war can be anything from fantasy superheroes fighting the villain to something that undermines their very foundation of security. The results can be unsettling. (Some things to look for in your child are listed on the reverse side of this publication.)

As a part of our response to the war in Iraq, the Ecumenical Center is providing the following information on how to talk to your child about war and how to bring comfort and reassurance in the midst of the conflict.

Maintain routines. Routines are important to children of all ages and bring a sense of order and security to the world.

Spend time together reassuring children they are loved. Demonstrate this in the way that is typical in your family. Consider lots of warm, safe hugs or soothing words.

Allow children to talk about their feelings, theories and ideas about what's happening. Talking is one of the primary ways children test their ability to understand the world around them.

Listen to what your children say without judgment and, as appropriate, share additional information. You can't promise them there is nothing to worry about, but you can comfort your children with genuine, reality-based reassurance and help them understand the real risk and deal with the big fears.

Dear Friends,

During times of crisis and loss we often find ourselves wondering what to do, what to say, what to look for in our loved ones. This is particularly true when the children of our community are involved. The information contained on these two pages is meant to help you and those you know in addressing these questions. Keeping with our 35 year tradition of service and caring we offer it to you and ask that you share it with others.

Respect older children's desire to understand the truth by helping them learn the facts. For instance, show them on the globe where they live and where the fighting is taking place.

Set aside special time for the child to paint, draw or write about what they are feeling. This can be helpful for adults, too.

Be tolerant with changes in behavior. Accept the manifestation of aggression, anger and other regressive behaviors.

Turn off the news, but respect a child's desire to have accurate information without overloading them on details or adult concerns.

You can't promise them there is nothing to worry about, but you can comfort your children with genuine, reality-based reassurance

Help separate fantasy (superhero versus the villain) from reality.

Help children rebuild trust and faith in the future and the world by reaffirming the future and talking about future events in hopeful terms.

Implement a family preparedness plan. Let older children participate, being careful not to make the whole emergency plan too scary. Children want reassurance that they will not be separated from those they depend on.

Be prepared for children to talk sporadically about the event. You can help them begin talking by asking questions like, "How does your friend feel about..."

Watch for signs of distress and seek professional help if children seem obsessed with violent thoughts, show signs of self-destructive behavior or experience extreme reactions such as sleeping or eating problems, aggression or withdrawal.

For help or more information

Contact any of the Ecumenical Center's Counseling staff at (210) 616-0885, if you, your family, friends or associates need help during this time. Staff counselors are available for consultation or counseling for individuals, couples, families and workplaces. Fee subsidy is available.

Counseling Staff

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Children's Reactions to Trauma

Children react to trauma differently than adults. They also exhibit different reactions at different stages in the developmental process. Following are children's reactions to trauma, provided by Lutheran Disaster Response.

Birth to 2 Years

- High anxiety levels manifested in crying, biting, throwing objects, thumb sucking, and agitated behavior.
- While it is highly unlikely that the child will retain a strong mental memory of the trauma, the child may retain a physical memory.

2 to 6 Years (Pre-School)

- Children may not have the same level of denial as do adults and thus take in the catastrophe more swiftly.
- May engage in reenactments and play about the traumatic event — sometimes to the distress of parents or adults.
- Anxious attachment behaviors are exhibited toward caretakers — may include physically holding on to adults; not wanting to sleep alone; wanting to be held.
- May become mute, withdrawn, and still.
- May manifest a short "sadness span" but repeat sadness periods over and over.
- May regress in physical independence — refuse to dress, feed, or wash self; may forget toilet training; may wet bed.

- May experience sleep disturbances. Nightmares are common.
- May be threatened by any change in daily routines.
- Does not understand death (no one does) and its permanency — reaction to death may include anger and feeling of rejection.

6 to 10 Years

- Play continues to be the primary method of expression; often art, drawing, dance or music may be integrated in the play.
- The sense of loss and injury may intrude on the concentration of the child in school.
- Radical changes in behavior may result — the normally quiet child becoming active and noisy; the normally active child becoming lethargic.
- May fantasize about the event with "savior" ending.
- Withdrawal of trust from adults
- May become tentative in growth toward independence
- Internal body dysfunctions are normal — headaches, dizziness, stomachaches
- May have increasing difficulty in controlling their own behaviors.
- May regress to previous developmental stages.

Pre-Adolescence:

10 -12 (Girls) 12 - 14 (Boys)

- May be very angry at unfairness of the disaster.
- May manifest euphoria and excitement at survival.

- Become more childlike in attitude.
- May see symbolic meaning to pre-disaster events as omens and assign symbolic reasons to post-disaster survival.
- May suppress thoughts and feelings to avoid confronting the disaster.
- May have sense of foreshortened future.
- May have a sense of meaninglessness or purposelessness of existence.
- Psychosomatic illnesses may manifest themselves.

12/14 to 18 Years

- Adolescents most resemble adult post-traumatic stress reactions.
- May feel anger, shame, betrayal and act out their frustration though rebellious acts in school.
- Judgmental about their own behavior and the behavior of others.
- Their survival may contribute to the sense of immortality.
- They are often suspicious and guarded in their reaction to others in the aftermath.
- Eating and sleeping disorders are common.
- Depression may plague the adolescent.
- May lose impulse control and become a threat to other family members and himself.
- Alcohol and drug abuse may be a problem as a result of the perceived meaninglessness of the world.
- Fear that the disaster or tragedy will repeat itself adds to the sense of a foreshortened future.
- May have psychosomatic illnesses.

Ecumenical Center for Religion and Health

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