

# Facts for Families

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## Helping Children After A Disaster

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A catastrophe such as an earthquake, hurricane, tornado, fire, flood, or violent acts is frightening to children and adults alike. It is important to explain the event in words the child can understand. Parents should also acknowledge the frightening parts of the disaster when talking with a child about it. Falsely minimizing the danger will not end a child's concerns. Several factors affect a child's response to a disaster.

The way children see and understand their parents' responses are very important. Children are aware of their parents' worries most of the time, but they are particularly sensitive during a crisis. Parents should admit their concerns to their children, and also stress their abilities to cope with the disaster.

A child's reaction also depends on how much destruction and/or death he or she sees during and after the disaster. If a friend or family member has been killed or seriously injured, or if the child's school or home has been severely damaged, there is a greater chance that the child will experience difficulties.

A child's age affects how the child will respond to the disaster. For example, six-year-olds may show their worries by refusing to attend school, whereas adolescents may minimize their concerns, but argue more with parents and show a decline in school performance.

Following a disaster, people may develop Posttraumatic Stress Disorder (PTSD), which is psychological damage that can result from experiencing, witnessing, or participating in an overwhelmingly traumatic (frightening) event. Children with this disorder have repeated episodes in which they re-experience the traumatic event. Children often relive the trauma through repetitive play. In young children, upsetting dreams of the traumatic event may change into nightmares of monsters, of rescuing others, or of threats to self or others. PTSD rarely appears during the trauma itself. Though its symptoms can occur soon after the event, the disorder often surfaces several months or even years later.

Parents should be alert to these changes in a child's behavior:

- Refusal to return to school and "clinging" behavior, including shadowing the mother or father around the house
- Persistent fears related to the catastrophe (such as fears about being permanently separated from parents)
- Sleep disturbances such as nightmares, screaming during sleep and bedwetting, persisting more than several days after the event
- Loss of concentration and irritability
- Startled easily, jumpy
- Behavior problems, for example, misbehaving in school or at home in ways that are not typical for the child
- Physical complaints (stomachaches, headaches, dizziness) for which a physical cause cannot be found
- Withdrawal from family and friends, sadness, listlessness, decreased activity, and preoccupation with the events of the disaster

Professional advice or treatment for children affected by a disaster—especially those who have witnessed destruction, injury or death—can help prevent or minimize PTSD. Parents who are concerned about their children can ask their pediatrician or family doctor to refer them to a child and adolescent psychiatrist for an evaluation.

For more information see *Facts for Families*:

- [#4 The Depressed Child](#)
- [#8 Children and Grief](#)
- [#34 Children's Sleep Problems](#)
- [#66 Helping Teenagers with Stress](#)
- [#70 Posttraumatic Stress Disorder](#)
- [#87 Talking to Children About Terrorism and War](#)

See also: [Your Child](#) (1998 Harper Collins) / [Your Adolescent](#) (1999 Harper Collins)

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The American Academy of Child and Adolescent Psychiatry (AACAP) represents over 7,500 child and adolescent psychiatrists who are physicians with at least five years of additional training beyond medical school in general (adult) and child and adolescent psychiatry.

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