

Substance Abuse and Mental Health Services Administration
SAMHSA
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Tips for Talking With and Helping Children and Youth Cope After a Disaster or Traumatic Event:

A GUIDE FOR PARENTS, CAREGIVERS, AND TEACHERS

Adult support and reassurance is the key to helping children through a traumatic time.

Children and youth can face emotional strains after a traumatic event such as a car crash or violence.[1] Disasters also may leave them with long-lasting harmful effects.[2] When children experience a trauma, watch it on TV, or overhear others discussing it, they can feel scared, confused, or anxious. Young people react to trauma differently than adults. Some may react right away; others may show signs that they are having a difficult time much later. As such, adults do not always know when a child needs help coping. This tip sheet will help parents, caregivers, and teachers learn some common reactions, respond in a helpful way, and know when to seek support.

Possible Reactions to a Disaster or Traumatic Event

Many of the reactions noted below are normal when children and youth are handling the stress right after an event. If any of these behaviors lasts for more than 2 to 4 weeks, or if they suddenly appear later on, these children may need more help coping. Information about where to find help is in the **Helpful Resources** section of this tip sheet.

PRESCHOOL CHILDREN, 0–5 YEARS OLD

Very young children may go back to thumb sucking or wetting the bed at night after a trauma. They may fear strangers, darkness, or monsters. It is fairly common for preschool children to become clingy with a parent, caregiver, or teacher or to want to stay in a place where they feel safe. They may express the trauma repeatedly in their play or tell exaggerated stories about what happened. Some children's eating and sleeping habits may change. They also may have aches and pains that cannot be explained. Other symptoms to watch for are aggressive or withdrawn behavior, hyperactivity, speech difficulties, and disobedience.

- **Infants and Toddlers, 0–2 years old,** cannot understand that a trauma is happening, but they know when their caregiver is upset. They may start to show the same emotions as their caregivers, or they may act differently, like crying for no reason, withdrawing from people, and not playing with their toys.
- **Children, 3–5 years old,** can understand the effects of trauma. They may have trouble adjusting to change and loss. They may depend on the adults around them to help them feel better.

EARLY CHILDHOOD TO ADOLESCENCE, 6–19 YEARS OLD

Children and youth in these age ranges may have some of the same reactions to trauma as younger children. Often, younger children want much more attention from parents or caregivers. They may stop doing their school work or chores at home. Some youth may feel helpless and guilty because they cannot take on adult roles as their family or the community responds to a trauma or disaster.

- **Children, 6–10 years old,** may fear going to school and stop spending time with friends. They may have trouble paying attention and do poorly in school overall. Some may become aggressive for no clear reason. Or they may act younger than their age by asking to be fed or dressed by their parent or caregiver.
- **Youth and Adolescents, 11–19 years old,** go through a lot of physical and emotional changes because of their developmental stage. So, it may be even harder for them to cope with trauma. Older teens may deny their reactions to themselves and their caregivers. They may respond with a routine "I'm okay" or even silence when they are upset. Or, they may complain about physical aches or pains because they cannot identify what is really bothering them emotionally. Some may start arguments at home and/or at school, resisting any structure or authority. They also may engage in risky behaviors such as using alcohol or drugs.

How Parents, Caregivers, and Teachers Can Support Children's Recovery

The good news is that children and youth are usually quite resilient. Most of the time they get back to feeling okay soon after a trauma. With the right support from the adults around them, they can thrive and recover. The most important ways to help are to make sure children feel connected, cared about, and loved.

- Parents, teachers, and other caregivers can help children express their emotions through conversation, writing, drawing, and singing. Most children want to talk about a trauma, so let them. Accept their feelings and tell them it is okay to feel sad, upset, or stressed. Crying is often a way to relieve stress and grief. ***Pay attention and be a good listener.***
- Adults can ask the teens and youth they are caring for what they know about the event. What are they hearing in school or seeing on TV? Try to watch news coverage on TV or the Internet with them. And, limit access so they have time away from reminders about the trauma. Don't let talking about the trauma take over the family or classroom discussion for long periods of time. ***Allow them to ask questions.***
- Adults can help children and youth see the good that can come out of a trauma. Heroic actions, families and friends who help, and support from people in the community are examples. Children may better cope with a trauma or disaster by helping others. They can write caring letters to those who have been hurt or have lost their homes; they can send thank you notes to people who helped. ***Encourage these kinds of activities.***
- If human violence or error caused an event, be careful not to blame a cultural, racial, or ethnic group, or persons with psychiatric disabilities. This may be a good opportunity to talk with children about discrimination and diversity. ***Let children know that they are not to blame when bad things happen.***
- It's okay for children and youth to see adults sad or crying, but try not to show intense emotions. Screaming and hitting or kicking furniture or walls can be scary for children. ***Violence can further frighten children or lead to more trauma.***[3]
- Adults can show children and youth how to take care of themselves. If you are in good physical and emotional health, you are more likely to be readily available to support the children you care about. ***Model self-care, set routines, eat healthy meals, get enough sleep, exercise, and take deep breaths to handle stress.***

Tips for Talking With Children and Youth of Different Age Groups After a Disaster or Traumatic Event

PRESCHOOL CHILDREN, 0–5 YEARS OLD

Give these very young children a lot of cuddling and verbal support:

- Take a deep breath before holding or picking them up, and focus on them, not the trauma.
- Get down to their eye level and speak in a calm, gentle voice using words they can understand.
- Tell them that you still care for them and will continue to take care of them so they feel safe.

EARLY CHILDHOOD TO ADOLESCENCE, 6–19 YEARS OLD

Nurture children and youth in this age group:

- Ask your child or the children in your care what worries them and what might help them cope.
- Offer comfort with gentle words, a hug when appropriate, or just your presence.
- Spend more time with the children than usual, even for a short while. Returning to school activities and getting back to routines at home is important too.
- Excuse traumatized children from chores for a day or two. After that, make sure they have age-appropriate tasks and can participate in a way that makes them feel useful.
- Support children spending time with friends or having quiet time to write or create art.
- Encourage children to participate in recreational activities so they can move around and play with others.



- Address your own trauma in a healthy way. Avoid hitting, isolating, abandoning, or making fun of children.
- Let children know that you care about them—spend time doing something special with them, and make sure to check on them in a nonintrusive way.

A NOTE OF CAUTION: *Be careful not to pressure children to talk about a trauma or join in expressive activities. While most children will easily talk about what happened, some may become frightened. Some may even get traumatized again by talking about it, listening to others talk about it, or looking at drawings of the event. Allow children to remove themselves from these activities, and monitor them for signs of distress.*

Helpful Resources

Substance Abuse and Mental Health Services Administration Disaster Technical Assistance Center (SAMHSA DTAC)
Toll-Free: 1-800-308-3515
Website: http://www.samhsa.gov/dtac

Treatment Locators

Mental Health Treatment Facility Locator
Toll-Free: 1-800-789-2647 (English and español)
TDD: 1-866-889-2647
Website: http://findtreatment.samhsa.gov/MHTreatmentLocator

MentalHealth.gov
Website: http://www.mentalhealth.gov
MentalHealth.gov provides U.S. government information and resources on mental health.

Substance Abuse Treatment Facility Locator
Toll-Free: 1-800-662-HELP (1-800-662-4357)
(24/7 English and español); TDD: 1-800-487-4889
Website: http://www.findtreatment.samhsa.gov

Hotlines

National Suicide Prevention Lifeline
Toll-Free: 1-800-273-TALK (1-800-273-8255)
TTY: 1-800-799-4TTY (1-800-799-4889)
Website: http://www.samhsa.gov
This resource can be found by accessing the Suicide Prevention Lifeline box once on the SAMHSA website.

Disaster Distress Helpline
Toll-Free: 1-800-985-5990 Text "TalkWithUs" to 66746
Website: http://disasterdistress.samhsa.gov

Child Welfare Information Gateway
Toll-Free: 1-800-4-A-CHILD (1-800-422-4453)
Website: http://www.childwelfare.gov/responding/how.cfm

Additional Behavioral Health Resources

National Child Traumatic Stress Network
Website: http://www.samhsa.gov/traumaJustice
This behavioral health resource can be accessed by visiting the SAMHSA website and then selecting the related link.

Administration for Children and Families
Website: http://www.acf.hhs.gov/

When Children, Youth, Parents, Caregivers, or Teachers Need More Help

In some instances, a child and his or her family may have trouble getting past a trauma. Parents or caregivers may be afraid to leave a child alone. Teachers may see that a student is upset or seems different. It may be helpful for everyone to work together. Consider talking with a mental health professional to help identify the areas of difficulty. Together, everyone can decide how to help and learn from each other. If a child has lost a loved one, consider working with someone who knows how to support children who are grieving.[4] Find a caring professional in the **Helpful Resources** section of this tip sheet.

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[1] National Center for Statistics and Analysis. (n.d.). Traffic safety facts, 2003 data: Children. (DOT HS 809 762). Washington, DC: National Highway Traffic Safety Administration. Retrieved from http://www-nrd.nhtsa.dot.gov/Pubs/809762.pdf.

[2,4] National Commission on Children and Disasters. (2010). National Commission on Children and Disasters: 2010 report to the President and Congress. (AHRQ Publication No. 10-M037). Rockville, MD: Agency for Healthcare Research and Quality. Retrieved from http://archive.ahrq.gov/prep/nccdreport/nccdreport.pdf.

[3] Children's Bureau. (2010). Child maltreatment 2009. Washington, DC: Administration on Children, Youth and Families; Administration for Children and Families; U.S. Department of Health and Human Services. Retrieved from http://www.acf.hhs.gov/programs/cb/resource/child-maltreatment-2009.

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