

Trauma and Therapeutic Art resource binder for CAMs

Introduction

This resource binder was created for CAMBU (Las Marias, PR) in anticipation of presenting a workshop there that I put together (included in this binder). I felt that it would be important to help equip this CAM with some basic tools and resources that can help guide volunteers, teachers and parents in their work with youth. I know that CAMBU has a special emphasis on educational, creative and enriching programming for children which is extremely important in a post-disaster landscape where children are adjusting to their new lives, upsetting losses and possible trauma. I see this CAM, and all other CAMs as playing an important role in helping children heal, grow and thrive in post-Maria Puerto Rico and they can be more effective in this work with a trauma-informed lens. I know that this is already understood intuitively by many, so I wanted to get the ball rolling with this resource binder that I hope more folks will contribute to and print from it freely. The current binder focuses on working with youth since that is my own professional background but I hope with more contributors, the binder can expand to cover more mental health topics. It is designed to be a physical binder so that CAMs without electricity or the internet can reference it easily. Some sections consist of handouts for parents and should have multiple copies (I recommend 10 copies of each article) so that volunteers can distribute the information freely without immediately needing a photocopier.

How to reproduce this binder

You will need a three ring binder (ideally with a clear window on the cover to insert the cover page), dividers with at least five tabs, three ring hole punch, stapler and the contents of this folder printed out

Recommended sections are as follows but feel free to add to this or modify

Tab 1: Workshop

Tab 2: Resources for volunteers

Tab 3: Activities for children

Tab 4: Activity books

Tab 5: Articles for parents (each article printed out 10x)

Tips:

-Activity books are too big to staple and may need to be paper clipped

-Staple individual articles together to make browsing easier

-Use a highlighter to write "original" on the last copy of your parent articles. This will not show up on a photo copier and will help volunteers avoid giving away the last copy of the article

Expanding the binder

I welcome collaboration and growth of this binder. Feel free to get in touch with me if you have any questions or ideas about this resource: c.isabellugo@gmail.com

Recursos para trauma y arte terapéutico



información y actividades para niños,
voluntarios y familias

presentado a

CAMBU

**Taller de trauma y arte terapéutico para voluntarios de CAMs
presentado por Cristina Lugo, LCSW
con información adaptada de “Counseling Children After Natural
Disasters: Guidance for Family Therapists” Jennifer Baggerly y
Herbert A. Exum**

Síntomas típicos en niños

Para los niños de 5 años o menos, los síntomas típicos incluyen ansiedad por separación, aferramiento excesivo, llanto, lloriqueo, gritos y comportamiento regresivo, como chuparse el dedo y miedo a la oscuridad. Para los niños de 6 a 11 años de edad, los síntomas típicos incluyen retirada extrema, aumento en la agresión, hiperactividad y falta de atención, miedos irracionales, irritabilidad, interrupción del sueño, rechazo escolar, quejas de dolores de estómago y entumecimiento emocional. Para adolescentes de 12 a 17 años de edad, los síntomas típicos incluyen flashbacks, pesadillas, entumecimiento emocional, evitar recuerdos del trauma, abuso de sustancias y depresión. También pueden tener dolores de cabeza y dolor de estómago, conductas de riesgo, falta de concentración, disminución del comportamiento responsable, apatía y rebelión en el hogar o la escuela.

Aunque muchos niños se recuperarán de estos síntomas típicos con apoyo familiar y escolar básico después de un desastre natural, algunos niños experimentan síntomas continuos que interrumpen su funcionamiento diario.

Los síntomas mas serios de los niños puede resultar en un diagnóstico de desorden de estrés agudo, desorden de estrés postraumático (PTSD), otros desordenes de ansiedad o la depresión. Los indicadores de PTSD infantil incluyen los siguientes síntomas que persisten más de 30 días después del evento: preocupación sobre el evento a través de recuerdos invasivos, pesadillas, juegos repetitivos en los que se expresan temas o aspectos del desastre, aumento de la irritabilidad o hipervigilancia y evitación de cosas relacionadas con el desastre. Las tasas de PTSD en los niños después de un desastre natural varían. Un estudio encontró que el 41% de los niños en su estudio que pasaron por un tornado

severo tenían síntomas de PTSD. Otro estudio encontró que el 30% de los niños en su muestra que experimentaron el Huracán Andrew tenían síntomas severos de PTSD.

Un grupo de investigadores concluyó que los maestros pueden convertirse en consejeros eficientes debido al papel central en la vida de los niños. Los padres también tienen un papel importante en la recuperación de sus hijos porque los niños toman sus señales sobre cómo responder al desastre de sus padres. Si los padres están fuera de control de sus sentimientos y comportamiento, entonces los niños se sentirán más indefensos y asustados. Si los padres están adecuadamente molestos pero mantienen el optimismo y el control de sus sentimientos y comportamiento, entonces los niños se sentirán más seguros. Por lo tanto, es importante enseñarles a padres y adultos cómo mantener una presencia calmada con la aplicación de estrategias auto-calmanes tales como relajar su cuerpo.

Para maximizar las buenas habilidades de comunicación, anime a los padres y cuidadores a programar horarios regulares para hablar con sus hijos sobre sus emociones, preocupaciones y planes para el futuro. Dado que los niños pequeños pueden no ser capaces de verbalizar sus sentimientos, otros modos de comunicación, como jugar, dibujar o cantar, pueden ser más efectivos. Los libros de colorear y los dibujos de flujo libre también son formas útiles para que los niños se expresen. Un libro para colorear de huracanes está incluido en la carpeta

Los padres y maestros deberían ayudar a los niños a identificar o aprender estrategias positivas de adaptación que se ajusten a sus habilidades e intereses. Para los niños, el juego y el ejercicio físico son estrategias de afrontamiento importantes. Los niños también pueden ser animados a leer, dibujar, salir a jugar, hablar con amigos y familiares, pasar más tiempo con mascotas y participar más en pasatiempos. También se debe alentar a los adolescentes a participar en actividades, hacer ejercicio y dedicar más tiempo a conectarse con los demás. También son suficientemente mayores para participar en los esfuerzos de recuperación, como limpiar un parque o leer a los niños más pequeños.

Aguantar espacio

Hacer arte terapéutico puede ser una forma esencial para que muchos niños e

incluso adultos expresen sus pensamientos y sentimientos durante este tiempo difícil. Una cosa que sabemos sobre el trauma es que los recuerdos traumáticos se guarda en el cuerpo, de manera que apenas tenemos palabras para describir. Es muy difícil para muchos adultos describir las emociones viscerales y es especialmente difícil para los niños. El juego y el arte expresivo deben ser considerados como otra forma de comunicación por parte de los niños, son su propio lenguaje que debe honrarse y alentarse tanto como hablar.

Al hacer arte terapéutico, el proceso es la parte más importante, no el producto. He trabajado con un niño que hizo una pieza muy curativa donde utilizó la pintura para crear una escena completa de una familia feliz y luego mezcló todo junto con sus manos y terminó con un papel cubierto de pintura marrón. El niño tuvo una experiencia muy curativa al pasar por el proceso de transformar la imagen feliz de una familia en un desastre marrón porque así es como se sentía acerca de lo que su trauma le hizo a su vida. Cuando realiza este tipo de arte, es importante eliminar el énfasis de cómo termina finalmente tu arte y cambiar el énfasis para dar a conocer lo que sientes mientras haces el arte y dejando que tus "sentimientos tomen el control" y salgan a la página. Una cosa que puede decir es "no hay una forma correcta o incorrecta de hacer esto" o puede recordarles que este arte es solo para ellos y está destinado a ser un espacio seguro para sus emociones.

El concepto de contención también es importante para usted entender. Los sentimientos abrumadores a menudo pueden sentirse fuera de control para un niño y no tienen forma real, son solo objetos tóxicos en la mente que continúan creciendo y se extienden a la vida real. Tenemos que pensar qué es lo que "contiene" las emociones, porque si solo es la mente y el cuerpo del sobreviviente, será muy difícil para ellos controlar sus emociones. Cuando un niño comparte sus sentimientos contigo, entonces te vuelves parte del contenedor y es importante que valides las experiencias y emociones del niño mientras modelas la calma para ellos. Estás reteniendo sus emociones por ellos en el espacio que has creado con tu conexión. Del mismo modo, cuando estás haciendo arte terapéutico, tus materiales de papel o de arte se convierten en el contenedor. Los cuatro lados de la hoja son las paredes. Ayúdelos a imaginar que están vaciando lo que está en su mente, en la hoja de papel. Si siente que van demasiado rápido sin sentir nada, puede alentarlos a reducir la velocidad y tomarse un momento para tratar de recordar cómo se siente la experiencia en su cuerpo, luego intente contener la experiencia en el papel.

Cuando una persona ha hecho arte terapéutico, es fundamental que no intente interpretar su arte. No hagas suposiciones sobre lo que estás viendo. Si el niño dibuja a una persona que come un sándwich al lado de una piscina, entonces debe señalar cada parte y preguntar "¿qué es eso? ¿Qué están haciendo? ¿Qué es lo azul junto a ellos?" ¡Podría ser una persona tocando una armónica junto a una ballena por lo que sabes! Así que no supongas que sabes algo sobre una pieza de arte terapéutico, tendrás que tomarte el tiempo y hacer preguntas. En sus preguntas, todavía no haga suposiciones como decir "¿es usted?", diga "¿quién es esta persona?". En lugar de asumir que están comiendo, pregúnteles "¿qué están haciendo?". Si inserta sus propias suposiciones en este proceso, podría alejarse de la experiencia del niño al hacerlo.

Siempre valide todas las emociones que expresa el niño. Recuerde que no hay emociones buenas o malas, todas las emociones son igualmente importantes. Lo que hacemos con esas emociones es la parte importante. Compartir la emoción contigo a través del arte o las palabras es una forma saludable de expresar emociones, siempre. Si expresan un deseo de lastimarse a sí mismos o a otra persona, esta es una situación diferente. ¿Cuáles son las clínicas o los servicios de emergencia más cercanos aquí? Por favor, lleve al niño para que lo evalúe un profesional. Si un niño dibuja o habla acerca de algo particularmente triste, empatice con ellos y hágales saber que usted está allí con ellos. ¿Cuáles son algunas cosas que puede decirle a un niño para ayudarlo a sentirse comprendido y validado? Para el niño que se siente muy triste, después de validar sus sentimientos, ayúdelos a identificar qué cosas positivas pueden hacer para sobrellevar sus emociones. ¿Cuáles son ejemplos de habilidades de afrontamiento positivas? ¿Habilidades de adaptación negativas? Siempre deje al niño en una situación de arte terapéutico con una orientación positiva. Si están muy tristes o molestos, tómense un tiempo para jugar con ellos y hablen con ellos después de la creación artística para asegurarse de que los dejen seguros y apoyados.

Essay Healing through art therapy in disaster settings

Lancet 2006; 368: 528-529 S Haroon Ahmed, M Naim Siddiqi

The printed journal includes an image merely for illustration

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See Essay Development of children's creativity to foster peace by Ashfaq Ishaq page S26

Give any group of 6-year-old children a set of coloured pens and a few sheets of paper and watch their eagerness to use them. However, in remote areas of Kashmir, where many children have never even seen a marker pen, the opportunity to "spoil" a clean sheet of paper with bright colours would be seized even more gleefully. What would be the reaction of children given this opportunity in the areas devastated by the earthquake of 2005?

Art forms and the purposes they can serve have evolved along with mankind. What art means to people nowadays is entirely different from its significance in prehistoric times. Beautiful carvings, etchings, and sculptures were not merely decorative; they had a mythological basis and were believed to provide protection from the forces of nature. Primitive people depicted prey being struck down by weapons and believed that these symbols of good luck would affect their success in hunting—a form of positive visualisation. The importance of the paintings lay in their functional purpose of aiding the hunters, not in the skill of the painter or the beauty of the work.

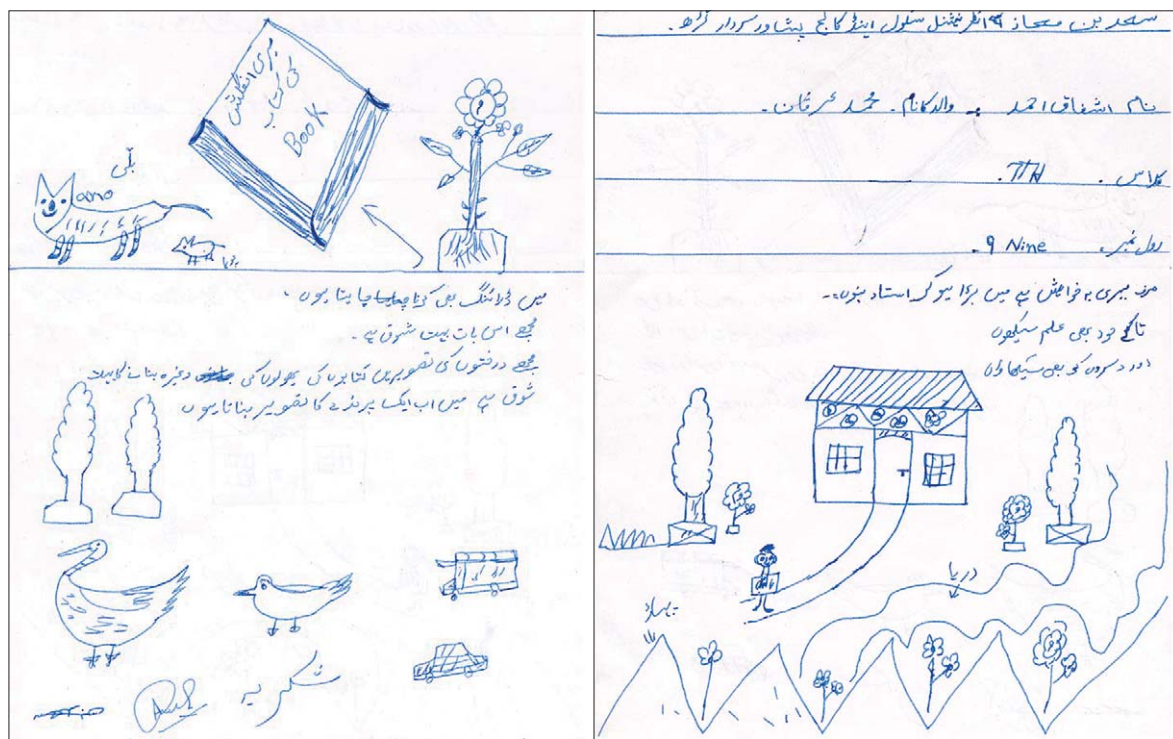
The contribution of Islamic civilisation to art is mainly in architecture and calligraphy, because Muslim theologians have argued that paintings of the human figure usurp the creative function of the Creator. However, there is no specific mention of this matter in the holy Quran. The message is avoidance of idolatry.

Art therapy is part of the play therapy long used for children with mental-health problems. This approach arose from the process of exploring the unconscious mind, which has emphasised the importance of dreams and art therapy. Though differences exist in the interpretation of dreams and paintings, the focus has helped to develop art as a means of communication in education and in diagnosis and treatment of mental disorders.

On Oct 8, 2005, an earthquake of magnitude 7.6 on the Richter scale struck Kashmir and parts of Pakistan's North West Frontier Province. Nearly 3.3 million people were affected. The disaster struck in the morning, when women were at home, children in school, and men out working in the fields. The major casualties were, therefore, women and young children. According to official statistics, more than 100 000 people were killed and 75 000 injured, of whom between 10 000 and 15 000 were left disabled.

Mental-health workers in the state and private sectors organised teams for the disaster zone, but they were inadequate to deal with the problem. Most of the groups that managed to reach the site decided to train local people in basic counselling skills.

The Pakistan Association for Mental Health assembled a team. A manual was prepared that included techniques on active listening, grief counselling, and problem solving. The section for children included brief instructions about



Pen drawings by children from Saad-bin-Maaz School, Peshawar

their physical and nutritional requirements, and the need for closeness to family. In developing countries, especially in south Asia, art therapy is almost non-existent. The artwork generally used in psychiatric clinics and hospitals is part of occupational therapy, and the aim is simply to keep the patient occupied. Therefore the manual specifically mentioned play and art therapy to help the children express their feelings and emotions. No training or instruction was given on interpretation of the children's drawings and paintings.

Within a month, 350 professionals and lay volunteers were trained in Karachi, Islamabad, Abbottabad, Mansehra, Balakot, Muzaffarabad, and Peshawar. We shared our experience with other mental-health professionals. The 14 psychiatrists with whom we interacted were treating the mentally ill, though one had to devote most of her time to physically ill women and children. Five psychologists were providing counselling and training volunteers in basic counselling skills.

One of the non-governmental organisations looking after children was confronting problems in regular teaching classes. To experiment, they started sports (football, cricket) and later provided facilities for drawing, singing, and reciting poems. "They really enjoyed drawing. The programme's positive response was written on their faces."

A psychologist not trained in art therapy used drawing for 100 children aged 8–12 years, divided into smaller groups of 15 each. At first, she found that the children were very guarded. They were afraid to interact or express themselves. As the activity progressed, the children began to talk to each other and also to the volunteers and staff. At the end of each session, each child was asked to speak about his or her drawings. The staff and volunteers assisted each child with the presentation and offered support via affirming feelings and eye contact, hence validating their feelings. "As the time progressed, children exhibited their resilience. However, some also needed therapeutic services. They wanted to take their drawings with them, which of course was allowed. During subsequent sessions, we found that they were sharing their drawings with family members and other children."

Another non-governmental organisation, which is supported by a religious group, was looking after 350 children. In one location, 21 children aged 10–15 years were asked to draw whatever they felt or to write about their feelings. 11 of the 21 drew houses, and ten expressed themselves in writing. Only one drew a human figure, a duck, and a cat. In one group from Muzaffarabad, the worst-hit district, children drew destroyed houses and schools and injured people. 19 of 23 drew, while four expressed their feelings in writing.

Psychotherapy and counselling must be differentiated from each other. Counselling is for mild disorders related to personal, social, and decision-making problems. The focus is educational and developmental concerns. By contrast, psychotherapy deals with serious disorders and



Art therapy for children involved in the Asian tsunami

personality problems. The setting is medical, and the therapy is remedial in nature.

Whereas a psychotherapist needs intensive training, a counsellor needs only basic knowledge of psychological principles and an understanding of normal and abnormal behaviour. Lay counsellors need to know the broad dos and don'ts and must have a facility for referral. But the current professional position is that the art therapist should be a qualified therapist. However, our experience shared by colleagues is that simple expression through art helps children to come to terms with their painful memories.

Artwork consists of a process and a product. The product has interpretive value and is given much importance compared with the process. Maria Petrie, a British artist and art teacher, argues for the healing and regenerative power of art. She says that, unlike the therapist, we should not probe too deeply if we want the healing power of art to take full effect. The most crucial part of training of lay counsellors in art therapy is, therefore, to ensure that the counsellor refrains from interpreting the drawings. The child is the person who should be encouraged to explain his or her drawings.

In sudden disasters, the process in art as healer needs closer attention. It includes an unthreatening environment, such as a school not a hospital, a non-interrogative approach, and a group setting. The art therapist distributes paper, coloured pencils, and writing board, gives instruction, encourages the participants during the session, listens to the description of their drawings, and provides reassurance. After several sessions, the confidence shown by the children makes the effort worthwhile.

One common finding from the practice of art therapy in our setting as well as after the Asian tsunami, hurricane Katrina, and other disasters is that it does help expression, provides a medium for communication, and might facilitate the healing of emotional scars. Both the product and process are important, but the product may be more useful where facilities exist for interpretation. The process becomes more important in resource-poor countries like Pakistan. We must keep on thinking innovatively.

Further reading

- Read H. Education through art. New York: Pantheon Books, 1958.
- Petrie M. Art and regeneration. London: Paul Elek, 1946.
- Arnold TW. Painting in Islam: a study of the place of pictorial art in Muslim countries. New York: Dover Publications, 1965.
- Boyd Webb N. Play therapy with children in crises. New York: Guilford Press, 1999.
- Malchiodi CA. Understanding children's drawing. New York: Guilford Press, 1998.

After a Natural Disaster: Coping with Loss

Ronald L. Pitzer, Family Sociologist, and Sharon M. Danes, Extension Specialist and Professor — Family Social Science

Revised April 2009 by Sharon M. Danes; reviewed March 2010.

You've survived a natural disaster. But much of what you care about may not have survived. Perhaps you've lost things of great value to you, irreplaceable things that represent your past and your family's heritage. Perhaps you've lost loved ones or your home, farm, or job. In the face of these losses, you may also have lost self-esteem.

When people experience loss, they also experience grief. Grief is as human and inescapable as growing up and growing old. Understanding the stages of grief, giving into them, and going through them, is key to getting past the disaster and into a fulfilling future. The stages of grief are:

Denial

Anger

Bargaining

Depression

Acceptance

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After a disaster, you will definitely go through the stages of grief. You might not go through each stage only once, and you might not go through them in the order specified. For instance, you might move from anger to bargaining, then back again, before you move on to depression, and finally acceptance.

It is important to remember that not all people move through the stages with the same intensity of emotions, or at the same rate. These differences in how and when individuals experience each stage can add stress to relationships. For example, a husband who is in the anger stage may be very impatient with a wife who is still in denial: "I can't understand why she's still got her head in the sand." She, on the other hand, may be wondering: "Why is he so angry when there's nothing to be angry about?"

The Five Stages of Grieving

Denial: "No, not me, it can't be true." This is a typical reaction when a person faces a loss. This stage functions as a buffer after the unexpected happens. It allows you to collect yourself and, in time, to find a way to cope.

Anger: "Why me?" When the first stage of denial passes, it is likely to be replaced by anger, rage, envy, and resentment. God is often a target for anger, especially in natural disasters. You may also resent people around you who didn't suffer as much loss as you did.

Bargaining: "Yes, me, but..." Once you have gotten the anger under control, you may enter the bargaining stage. You may promise God that you'll be good or that you'll do something in

exchange for what you need. Bargaining can be a positive way to deal with stress. Whether you bargain with God, with yourself, or with your family, it provides comfort for things you cannot control. It allows you to "frame" the crisis so you can manage it. Bargaining may help you cope with feelings of sadness without experiencing deep depression. Good bargaining skills allow people to see the bright side of even the most difficult situation.

Depression: "There is no hope." A crisis entails loss, which is followed by sadness. If you are absorbed by the sadness, you can become depressed. Signs of depression include changes in usual eating or sleeping patterns, constant moodiness or irritability, lack of energy, and feelings of helplessness or hopelessness.

Acceptance: "It's all right now." Once the preceding stages have been completely worked through, you will finally be able to accept what has happened, and you may even be stronger than you were before the disaster occurred.

Decision-Making after Experiencing Losses from Disasters

Decision-making abilities are affected differently at the various stages of loss. For more information, read [Decision Making When Change Is Viewed as Loss \(PDF\)](#) from the *Change: Loss, Opportunity and Resilience* publication.

More About Denial and Depression

Denial: Who will break the silence?

Denial is the first step in the grieving process. Denying a loss helps us protect ourselves when something painful happens. But getting stuck in denial can be dangerous. Pretending the crisis hasn't happened or won't happen encourages you to delay finding a solution to urgent problems. For example, a father may not acknowledge that he has permanently lost his job, so he sees no reason to look for work. Other family members may also seem unwilling to confront the father with the truth, perhaps because they lack the courage or perhaps because they are also in denial. To deal with denial, families must talk about their situation realistically and openly. This may mean sharing fears and tears. Dealing with loss is easier on everyone when you can:

Talk about it. Admit there is a problem. Say what you think, and how things could change.

Do something about it. What can be done to reverse the losses? If nothing, what can be done to move forward? What can be done to make your family work again, day by day? Where can you get information and help?

Accept the loss. If you can't change it, don't keep fighting it. Find alternatives, other options, and paths to where you want to go. It is only when you stop denying you have a problem that you can start dealing with it.

Activity

Think or talk about the following questions:

What is the problem?

We know it won't go away, so what can we do to deal with the problem?

How can we do things differently in the future?

Depression

Depression is an unpleasant stage of grieving. While you may not be able to escape depression completely, there are things you can do to help yourself feel better.

Activity

List the ways you belittle yourself. For example, you may tell yourself, "I'm stupid."

Translate these belittling thoughts into more positive ways of speaking about yourself. Instead of saying, "I'm stupid", say, "I did something stupid, but I'm not stupid. I'll try to do it differently next time."

Answer these questions: Am I ready to let go of being depressed? What benefits do I get for being depressed? What payoffs would I get if I let go of my depression? If I was not depressed, what would I be doing?

Forgive yourself. Often we are much harder on ourselves than we are on others. Imagine being someone else looking at you and the mistakes you may have made. Are your mistakes really so unforgivable? Is there someone whose forgiveness you need to have? Do you need to make amends? What amends can you make?

Learn to like yourself. Often the basis for our depression is the fact that we don't like ourselves. Here are some ways to help you appreciate and like who you are:

Think about one thing you like about yourself.

Make a "good strokes" file. It is almost certain that at some time in your life, people said they liked something about you. Jot down that positive stroke on a scrap of paper and put it in a box. Add letters or cards from people who tell you they appreciate you. When you feel down, look in your good strokes file and let yourself enjoy it.

Think about what you'd like to have that you're not getting. Support? Affection? Acknowledgment? Someone to listen to you? Write down some of the things you are not getting and think of ways you could get what you need. If that list is hard to come up with, perhaps you can do this activity with a friend.

Pamper yourself. Take a soothing hot bath for 30 minutes while listening to your favorite music. Take a walk. Lie under a tree and relax. Think of something you can do each day to pamper yourself.

Get busy doing things you enjoy. Be with friends. Go to a ball game. Take time for a long walk. Indulge in your hobby. You deserve to enjoy life.

Being Stuck in a Stage

Sometimes people can get stuck in a stage of grief. Some people may not be able to move on beyond denial. Others can stay locked in anger, focusing their rage on themselves or someone else whom they blame for their situation and for their suffering. Still others get stuck in depression and isolation. While everyone who survives a disaster needs the support of family and friends, people who are stuck for several weeks or more in serious denial, anger, or depression may also need the helping hand of a professional counselor who can guide them into the next stage of grieving.

If you feel that you might need the helping hand of a professional counselor, you can find a therapist near you through the "Therapist Locator." All counselors on the website are licensed therapists belonging to the American Association for Marriage and Family Therapy. To find a counselor near you, visit TherapistLocator.net. Then click on "Search in the U.S." You select the number of miles within which you want to search.

What is a Crisis?

A crisis has the following features:

Hits suddenly, without warning.

Threatens our security.

Has unpredictable consequences.

Erodes our self-confidence.

Helps us redefine our values.

After a crisis, your life will never be exactly the same again. You may try to deal with the crisis using the same strategies that have always worked for you. But your life has changed dramatically and the strategies that used to work in the past might not work now. You may need to be open to learning new ways to help you and your family cope.

Be a Survivor

People who survive crises well have common characteristics:

They have people who stand by them, support them, and give them a sense of hope.

They understand the magnitude of what they have lost.

They learn to forgive themselves for their mistakes and for surviving.

They learn to accept their own good qualities.

They give themselves a reason to live.

Learn to Cope

Activity

People who cope well after a crisis have certain skills that are listed below. The first line lists a good coping skill. The second asks whether you are using that skill to get through your crisis. Answer these questions yourself or pose them to your partner, spouse, or children. Discuss your answers with each other. Think of ways to use these skills to help yourself or your family.

People who cope well understand the grieving process and how to get through it.

Where are you in the grieving process? Anger, denial, bargaining, depression, or acceptance? (See The 5 Stages of Grieving.) Talk about the stage you are in now and how you see it showing up in your life. What stages are your family members in? What helps you move through the grieving process?

People who cope well have the ability to realistically assess and confront their situation.

Have you completely faced up to your situation? Are you sugar-coating reality or exaggerating the severity of your situation? Have you sought others' perspectives on your situation?

People who weather a crisis well search for solutions for their problems.

Are you actively searching for a solution? In what ways? With what effects or results? Are you willing to discuss your problem with others? Why or why not? Who can help you with your problems? What is keeping you from involving others in your problems? What help do you need in order to find solutions to your problems?

People who cope well don't blame themselves or others.

Who are you blaming for your problems? Does blaming yourself or others help to solve the problems you are facing? How can you refocus blaming into more constructive ways to solve problems?

People who cope well can talk about their situation, their fears, anxieties, and sorrows.

Have you been talking with people, or have you been avoiding others? Are you talking about what's really bothering you, or are most of your conversations superficial?

People who cope well can accept and even ask for help.

Are you comfortable asking for help? Do you let people do things for you?

Staying Resilient in Times of Change

There are five characteristics that help you stay resilient in times of change. View the [Staying Resilient in Times of Change video](#) to find you about those five characteristics of positive, focused, flexible, proactive, and organized. You can also take an interactive resilience assessment to determine [Can You Thrive in Times of Change?](#)

How Do You Help a Friend Who Isn't Coping?

Many people who have trouble coping with loss need help, but don't reach out for it. In these cases you, as a friend, neighbor, or family member, may want to be assertive in freely giving your help. Perhaps you could:

Show you care, by words and actions. Small kind deeds and sincere affection or concern

mean a lot. A friendly arm around a shoulder, a few words of support, or an invitation to talk may be appreciated more than you know.

Help the person accept help. People who have a hard time working through a loss may brush off offers of assistance and persist in the fantasy that everything is fine. Try to make it easy for them to accept help. Be assertive. Ask "When can I come over and help out?" or say "I'll be over at 3 o'clock to help you paint the living room."

Help with everyday tasks. When a person is feeling disoriented and troubled, just keeping up with the routine demands of life can be too much. Maybe you could cook dinner, do the dishes, care for a child, mow the lawn, cook a meal, clean the house, or do the shopping. Don't forget children need attention, too. You may want to take them to the zoo, for a bike ride, a walk in the woods, to a movie, or maybe you could just play games together.

Encourage the survivors to talk. Talking can release pent-up emotions and clear the way for people to confront their loss. Often people can see their situation more objectively when they talk to those who are willing to listen.

Be a good listener. Try to keep your mouth shut and your ears open. Don't advise, analyze, or judge the person by saying things like: "Don't be so emotional," or "That's not worth worrying about," or "I think you should..." Instead say things that encourage the person to keep talking: "Tell me more about that." "How do you feel about that?" "I can see this bothers you." "How can I help you resolve this?" Unfortunately, family members and friends are often poor listeners, not because they don't care, but because they want to make things better, to give advice on, to solve the problem. Instead, follow these rules of good listening. Try not to:

Draw conclusions.

Pass judgment until you have understood what the other person said.

Change what the other person has said.

Interrupt or change the subject.

Dispute the other person's feelings.

Judge the other person's motives.

Finish thoughts or sentences for the other person.

Do "wishful listening" (hear only what you want to hear).

Rehearse your response while the other person is talking.

Rush the other person.

Encourage solutions. Help the person come up with solutions for the near future and encourage them to work toward those solutions. Help them find the resources to cope. Tell them it is a sign of strength and maturity to accept help. You may have to help them get the help they need by making appointments or going with them once appointments are made.

Help survivors have fun. Suggest doing something you know they like to do and make it easy for them to get out and do it. Make a list of activities you both enjoy; choose one activity you can do together each week.

Take Care of Yourself

After a disaster there is so much to do and so many people to take care of that you can easily minimize the importance of taking care of yourself. But remember, it takes physical and emotional energy to rebuild. If you don't take care of yourself first — if you become physically ill or emotionally unbalanced — you will cause more problems than you'll fix.

Do things to assure your physical, mental, and emotional well-being. When you are emotionally drained, you need a healthy body more than ever. The following good health

habits can make your emotional recovery faster and easier:
Getting a good night's sleep; don't take daytime naps.
Eating healthy foods; avoid alcohol, caffeine, and junk foods.
Exercising, even if it is just taking a walk every day.
Just as bodies need nourishment, minds need rejuvenating. This is why it is important to treat yourself to activities you enjoy, like:
Doing fun things with your family.
Doing something by yourself once a day that you find relaxing.
Spending time with friends.
Find people you can lean on. Finding support is crucial to coping with loss. Often the people who can help you most are your friends and family. But no matter how close these people are to you, they aren't mind readers. Before they can help, you have to be willing to explain how you feel and what you need.

Activity

Complete each of these statements out loud. When everyone in your family has completed the first statement, go on to the second, and so on.
Because of what has happened, I feel...
I need...to feel better about my loss.
I will do...to help me cope better with my loss.
I need...from my family to help me cope.
I can do...for my family to help them cope.
Sometimes friends and family members aren't the best people to talk to. Who else can you go to for support?

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Counseling Children After Natural Disasters: Guidance for Family Therapists

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After natural disasters, most children exhibit typical symptoms, which can be mitigated when parents and teachers provide emotional support and facilitate adaptive coping strategies. However, some children may experience clinical symptoms, which require professional counseling. This article guides family therapists in (a) identifying children's typical and clinical symptoms after a natural disaster, (b) training parents and teachers in basic interventions, and (c) implementing developmentally appropriate clinical interventions that integrate play. A multimodal, three-phase approach of Cognitive Behavior Therapy, Play Therapy, and Family Play Therapy is described.

COUNSELING CHILDREN WHO HAVE SURVIVED NATURAL DISASTERS

Natural disasters are a persistent threat to families in North America. In 2005, the Federal Emergency Management Agency (FEMA, 2006) declared 48 federal disasters such as hurricanes, tornados, floods, and fires. The most prominent natural disaster of 2005, Hurricane Katrina, was identified as the costliest hurricane in United States history with over \$81 billion in damage and the deadliest in 77 years with approximately 1,833 fatalities (Knabb, Rhome, & Brown, 2005). A 70% increase in U.S. major disasters has occurred in the last decade from 319 disasters between 1986 and 1995 to 545 disasters between 1996 and 2005. Unfortunately, scientists are predicting high numbers of storms in the next ten years (National Oceanic and Atmospheric Administration [NOAA], 2006). These natural disasters will cause fear and disruption in the lives of countless children and families.

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During natural disasters, children are one of the most vulnerable populations because their neuro-physiological systems are subject to permanent changes and their coping skills are not developed enough to manage catastrophic events (Perry, Pollard, Blakely, Baker, & Vigilante, 1995; Speier, 2000). Most children exhibit typical, temporary symptoms during and after disasters; yet these symptoms can be mitigated when parents and teachers provide emotional support and facilitate adaptive coping strategies. However, some children may experience clinical symptoms, which require developmentally appropriate counseling interventions that integrate play (Baggerly, 2004b, 2004c).

Family therapists must be prepared to provide developmentally appropriate interventions to children who experience distress after natural disasters. However, the literature for family therapists on this topic is sparse. Miller (1999) described treatment for Post-Traumatic Stress Disorder (PTSD) for children and families but does not incorporate developmentally appropriate approaches of play. Wittenborn, Faber, Harvey, and Thomas (2006) discussed integrating play therapy techniques into family therapy but did not address natural disasters. The purpose of this article is to guide family therapists in (a) identifying children's typical and clinical symptoms after a natural disaster, (b) training parents and teachers in basic interventions, and (c) implementing developmentally appropriate clinical interventions that integrate play. A multimodal, tri-phase approach of Cognitive Behavior Therapy, Play Therapy, and Family Play Therapy is described.

TYPICAL SYMPTOMS OF CHILDREN AND ADOLESCENTS

Children's typical symptoms after natural disasters include fear, depression, self-blame, guilt, loss of interest in school and other activities, regressive behavior, sleep and appetite disturbance, night terrors, aggressiveness, poor concentration, and separation anxiety (Speier, 2000). However, symptoms vary from minimum to severe based on a child's developmental level, personal experiences, emotional or physical health, and the responses of parents to the incident (Vogel & Vernberg, 1993). For children 5 years old and younger, typical symptoms include separation anxiety, excessive clinging, crying, whimpering, screaming, and regressive behavior such as thumb sucking and fear of the dark (National Institute for Mental Health, [NIMH], 2001). For children 6 to 11 years old, typical symptoms include extreme withdrawal, increased fighting and aggression, hyperactivity and inattentiveness, irrational fears, irritability, sleep disruption, school refusal, complaints of stomachaches, and emotional numbing (NIMH, 2001). For adolescents 12 to 17 years old, typical symptoms include flashbacks, nightmares, emotional numbing, avoidance of reminders of the trauma, substance abuse, and depression (NIMH, 2001). They may also experience headaches, stomachaches,

risk-taking behaviors, lack of concentration, decline in responsible behavior, apathy, and rebellion at home or school.

CLINICAL SYMPTOMS OF CHILDREN AND ADOLESCENTS

Although many children will recover from these typical symptoms with basic family and school support after a natural disaster, some children experience ongoing symptoms that disrupt their daily functioning. Vernberg, LaGreca, Silverman, and Prinstein (1996) found 55% of elementary school children in their study exhibited moderate to very severe symptoms three months after Hurricane Andrew. In contrast, McDermott, Lee, and Judd (2005) found 22.6% of children in their study had abnormally high emotional symptoms six months after exposure to a wildfire disaster.

Children's clinical symptoms may result in a diagnosis of Acute Stress Disorder (ASD), Post Traumatic Stress Disorder (PTSD), other anxiety disorders, or depression disorders. Indicators of childhood PTSD include the following symptoms that persist longer than 30 days after the event: persistent re-experiencing of the event through intrusive memories, frightening dreams (with or without recognizable content), repetitive play in which themes or aspect of the disaster are expressed, increased arousal such as irritability or hypervigilance, and avoidance of things related to the disaster (American Psychiatric Association, 2000). Rates of PTSD in children after natural disasters vary. Evans and Oehler-Stinnett (2006) found 41% of children in their study who experienced a severe tornado had PTSD symptoms that meet DSM-IV-TR criteria. Vernberg et al. (1996) found 30% of children in their sample who experienced Hurricane Andrew had severe symptoms of PTSD. Conversely, Shannon, Lonigan, and Finch (1994) found 5% of 5,687 school-aged children surveyed who experienced Hurricane Hugo met criteria for PTSD.

Children's development of PTSD is influenced by the following five factors: (a) exposure to traumatic events during and after the disaster, (b) pre-existing demographic characteristics, (c) occurrence of major life stressors, (d) availability of social support, and (e) type of coping strategies used to manage disaster-related stress (Vernberg et al., 1996). These researchers also found that children's symptoms persisted due to interactions between daily life hassles and the severity of the disaster, stressful life events, e.g., parent's divorce or loss of employment, and loss of support from overburdened community systems and schools. In addition, McDermott, Lee, and Judd (2005) found that younger children and children with higher levels of exposure and threat had higher prevalence of PTSD than older children and children with lower levels of exposure and threat.

When diagnosing children, counselors should ask parents, other relatives, and teachers whether children's behaviors would be considered "normal" for a given child prior to the disaster. To assess the impact of trauma

in children, Ohen, Myers, and Collett (2002) suggest several different assessments. When a diagnosis of PTSD is the goal, they suggested the clinician-administered scales of the *Children's PTSD Inventory [CPTSDI]* (Saigh et al., 2000) or the *Clinician-Administered PTSD Scale for Children [CAPS-C]* (Nader et al., 1996). If clinician administered assessments are too time consuming, then Ohen et al. (2002) recommended the self-reported *Child PTSD Symptom Scale [CPSS]* (Foa, Johnson, Feeny, & Treadwell, 2001) for a quick first screen or the culturally sensitive *Children's PTSD-Reaction Index [CPTS-RI]* (Frederick & Pynoos, 1998) or the *Impact of Event Scale-Revised [IES-R]* (Weiss & Marmar, 1996). The *Trauma Symptom Checklist for Children – Alternative [TSCC-A]* (Briere, 1996) assesses for trauma and more general psychopathology, which provides for helpful follow along over time. For younger children, the *Angie/Andy Cartoon Trauma Scales [ACTS]* (Praver, DiGiuseppe, Pelcovitz, Mandel, & Gaines, 2000) for ages 6 to 12 or the *Pediatric Emotional Distress Scale [PEDS]* (Saylor, Swenson, Reynolds, & Taylor, 1999) for ages 2 to 10 were recommended. Since accurately diagnosing children with PTSD is very difficult due to their limited cognitive and expressive skills (Cohen, Berliner, & March, 2000), counselors are advised to provide treatment even if symptoms do not meet a formal diagnosis of PTSD.

PARENT AND TEACHER INTERVENTIONS

Due to the large number of children that will experience typical symptoms after a natural disaster, family therapists can maximize their efforts by training parents and teachers to provide supportive responses and basic interventions for their children (Harper, Harper, & Stills, 2003). In a study by Wolmer, Laor, Dedeoglu, Siev, and Yazgan (2005), children exposed to the 1999 earthquake in Turkey who received teacher led interventions had significantly higher functioning compared to a matched control group. These researchers concluded that teachers may become efficient clinical mediators due to the central role in the lives of children. Parents also play an important role in their children's recovery because children take their cues on how to respond to the disaster from their parents (FEMA, 2004a). If parents are out of control of their feelings and behavior, then children will feel more helpless and scared. If parents are appropriately upset but maintain optimism and control of their feelings and behavior, then children will feel more secure. Therefore, it is important to teach parents and teachers how to maintain a non-anxious presence by enacting self-soothing strategies such as relaxing their body (Rank & Gentry, 2003).

Family therapists should help parents and teachers focus on maximizing children's protective factors of good communication skills, strong self-efficacy, and positive coping skills (Vernberg et al., 1996). To maximize good communication skills, encourage parents and teachers to schedule



regular times to talk with their children about their emotions, concerns, and plans for the future. Since young children may not be able to verbalize their feelings, other communicative modes, e.g., playing, drawing, or singing, may be more effective (Webb, 2004). Coloring books and free flow drawings are also useful ways for children to express themselves (Corder and Haizlip, 1996). A hurricane coloring book that helps children express their own story, feelings, thoughts, and behaviors is available on the web at <http://www.state.sc.us/dmh/schoolbased/hurricane.htm>. A parent and child coping workbook, entitled *After the Storm* (La Greca, Sevin, & Sevin, 2005), also offers playful activities.

To maximize children's sense of self-efficacy, parents and teachers should reassure children that symptoms of nightmares, crying, etc. are typical and usually temporary. Providing a handout of typical children's cognitive, emotional, physiological, behavioral, and spiritual symptoms will help parents and teachers focus on the normalcy of children's responses, rather than seeing them as pathological. (Please see Figure 1). Children's self-efficacy can also be enhanced by quickly re-establishing a routine that is stable and manageable (FEMA, 2004a). During the early phases of a natural disaster the normal rules, expectations, and responsibilities at home and at school are usually relaxed (Haizlip, 1999). However, parents and teachers should remember that they do need to reestablish normal structure as much as possible. For example, parents could re-establish routines of reading bedtime stories or saying nightly prayers to comfort and reassure their children. Teachers can resume regular classroom routines of readings, projects, and limited homework. In addition, parents and teachers can promote children's self-efficacy by encouraging them to participate in social and school activities as well as community rebuilding activities.

Parents and teachers should help children identify or learn positive cognitive, emotional, physiological, behavioral, and spiritual coping strategies that fit their unique coping style (Please see Figure 2). Felix, Bond, and Shelby (2006) recommend playing a game of "Go Fishing for Coping Skills" in which children discern adaptive from maladaptive coping skills by matching categories of cards with adaptive coping skills and discarding maladaptive coping skills. For teenagers, positive coping strategies will include group interventions that process emotions through expressive arts, drama, and rapping/singing. Teens can also write letters to encourage survivors, first responders, and political leaders and participate in recovery efforts such as cleaning a park or reading to younger children.

Disturbing Dreams

Counselors may need to train parents and teachers how to respond to their children's disturbing nightmares related to the natural disaster. Younger children's dreams related to the distressing event may change into generalized



<p>Thoughts</p> <p>Confused Can't think Can't remember Mean thoughts Scary thoughts Always thinking about it Always remembering what happened Always looking around</p> 	<p>Feelings</p> <p>Scared Sad Mad Don't feel anything Crying Guilty Embarrassed Don't want to feel Really, really angry Too much all at once</p> 				
<p>Things We Do</p> <p>Sit alone Always looking around Can't trust anyone Yelling Hitting Fighting Crying Can't do homework anymore Not hungry or always hungry Can't sleep or always sleep Clumsy Can't sit still</p>	<p>Body and Brain</p> <p>Staring off in the distance Stomachache Headache Dizzy Sweaty for no reason Cold for no reason Jumpy Nightmares</p>				
<p>God</p> <table border="0"> <tr> <td>Think God left</td> <td>Mad at God</td> </tr> <tr> <td>Confused with God</td> <td>Don't want to pray, sing, or go to church</td> </tr> </table>		Think God left	Mad at God	Confused with God	Don't want to pray, sing, or go to church
Think God left	Mad at God				
Confused with God	Don't want to pray, sing, or go to church				

Developed by Jennifer Baggerly, 2004; Adapted from Jim Norman, 2001.

FIGURE 1 Normal things that happen to normal kids after something scary.

nightmares of monsters or of rescuing others. Children in middle to late childhood are more likely to experience sleep disturbances as they begin to understand the finality of loss (NIMH, 2001).

To help children effectively process disturbing dreams, parents and teachers can learn Dahlen's (1999) Traumatic Dream Defusing Process (TDDP) of creating a safe sleeping environment and giving voice to specific details, feelings, and thoughts from the dreams. Parents and teachers help children defuse the strength of the dream and regain sense of control by helping them record the dream in a journal. For younger children, parents and teachers encourage children to draw or color their dreams and then bury them in a structured ceremony. This symbolic burial gives children the power to bring an end to the significance of the dreams. Another method is

<p><u>Thoughts</u> Write things down Decide to do one thing at a time Ask for help Think about what you need Think of a plan Ask questions Think of a nice place to be Think of nice people Yell stop when you have bad thoughts</p> 	<p><u>Feelings</u> It is O.K. to cry It is O.K. to feel angry Say what you feel Talk about your feelings to your family and friends Laugh Remember happy feelings</p> 
<p><u>Things We Do</u> Play with others Cuddle with family Help others Ask for help Have fun Relax, relax, relax Go outside Read books Sing and dance</p>	<p><u>Body and Brain</u> Run and jump Ride bike Don't eat too many sweets Drink water Take deep breathes Blow bubbles Tense like a tin man, relax like a rag doll</p>
<p><u>God</u> Pray Read spiritual books Sing Go to church or synagogue or mosque Talk to your parents and priest, minister, or Rabbi about God</p>	

Developed by Jennifer Baggerly, 2004; Adapted from Jim Norman, 2001.

FIGURE 2 Things you can do to feel better.

to ask children to blow their fearful dreams into a balloon and then release the inflated balloon. This activity helps children feel more in control as they see their dreams disappear.

COUNSELING INTERVENTIONS

For children who experience typical symptoms after a natural disaster, family counselors should provide parent and teacher consultation as described above along with supportive counseling, crisis intervention, and resources and referrals to meet basic needs (Harper et al., 2003). However, if children continue to experience persistent symptoms that disrupt their functioning weeks after the natural disaster is over, then more intensive counseling is warranted. Herman (1997) recommends a three phase trauma recovery approach of (a) establishing safety, (b) retelling the trauma story, and (c) reconnecting

with others. When working with children after natural disasters, we recommend applying Herman's approach via a multimodal three-phase approach as follows: (a) establish safety and manage symptoms through Cognitive Behavior Therapy, (b) facilitate the child's retelling of their trauma story through play therapy, and (c) reconnect the child with others through family play therapy.

Cognitive Behavioral Therapy

Cognitive Behavior Therapy (CBT) has been proven to decrease children's symptoms related to ASD, PTSD, other anxiety disorders, and depression (Cohen et al., 2000; Compton et al., 2004). When working with children after natural disasters, CBT procedures that incorporate play therapy techniques can be used to establish safety and manage symptoms (Knell, 2000; Shelby, 2000). To increase children's sense of safety, family therapists should create a child friendly environment by providing toys. In addition to inviting children to play with the toys, family therapists can ask children to (a) play a game of identifying indicators that they are safe at the present time, (b) draw a picture of a safe place, and (c) develop a safety plan for future disasters.

To manage hyper-arousal symptoms, family therapists can teach children self-soothing relaxation techniques to calm their bodies and deactivate their "fight or flight response" (Perry et al., 1995). These procedures include (a) taking deep breathes through playful activities such as blowing soap bubbles or pinwheels; (b) progressive muscle relaxation by tensing muscle groups like a toy soldier and relaxing like a rag doll; and (c) focusing on positive images by drawing happy places, engaging in mutual story telling with a positive ending, or meditating on peaceful places (Baggerly, in press).

Family therapists should teach children methods of managing intrusive thoughts of disaster related events that are encoded in their implicit memory (Perry et al., 1995). These procedures include (a) "changing the tape" by replacing negative thoughts with a predetermined positive song, story, or saying such as "I'm safe right now and I know it because I have . . ." and (b) grounding activities such as rubbing stomach and hands together (Shelby, Bond, Hall, & Hsu, 2004). Family therapists can also amend Baranowsky, Gentry, and Schultz's (2005) 5-4-3-2-1 sensory grounding and containment procedure by asking children to play a 3-2-1 game. For this game, ask children to identify three objects above eye level, three sounds everyone can hear, and three things they can touch; then two things they see, hear, and touch; followed by one thing they see, hear, and touch.

To help children manage avoidance of disaster related stimuli, family therapists should implement systematic desensitization procedures of pairing relaxation with a step-by-step hierarchy of exposure to the stimuli (Wolpe, 1969). For example, a child may be afraid to take a bath after a hurricane because of the association that occurred when the family sought shelter in

the bathtub during the hurricane. The family counselor should teach the child to relax and then ask him to wipe his face with a wet wash cloth, gradually progressing to washing in a sink, then near the tub, etc. (Baggerly, Green, Thorn, & Steele, in press). Parents will need to be involved with these procedures and provide positive reinforcements for each accomplished step.

Due to their egocentric and concrete cognitions, some children may misattribute the cause of natural disasters to their bad dreams or someone's bad behavior. Family therapists should identify their misattributions and give accurate information. Procedures to correct misattributions include (a) making a Q-sort of possible reasons for the disaster and asking children to sort them as true or untrue; (b) creating a blame box for younger children to put in drawings of who or what they blame and then drawing the correct reason together; (c) developing a puppet show in which puppets ask about misattributions and another puppet gives accurate reasons; and (d) acting out a radio show of people calling in with questions and an expert giving correct information (Shelby et al., 2004). Many of the play-based procedures described above are demonstrated in a video by Baggerly (2006) available at <http://www.emicrotraining.com/child.html#038>

Play Therapy

After helping children establish a sense of safety and manage symptoms, family therapists should help children retell their trauma story. Since children ages two to ten years old are still in the cognitive developmental stage of pre-operations or concrete operations, the most developmentally appropriate way for young children to communicate their trauma story is through play (Kottman, 2001; Landreth, 2002). Landreth stated "Play is the child's symbolic language of self-expression. . . . Play is children's way of working out balance and control in their lives . . . that is essential to children's emotional development and positive mental health" (Landreth, 2002, p. 18).

Children often repeatedly reenact a specific traumatic event in their play in an attempt to create a concrete narrative of traumatic events so they can master frightening images (Baggerly, 2005c; Terr, 1990). For example, a 5-year-old boy who experienced Hurricane Katrina named a toy dinosaur "the sea monster." He spun the sea monster in circles and repeatedly knocked down the doll family and furniture in the doll house. Later, he used the army men to kill the sea monster. Clearly, the boy was re-enacting his hurricane experience in order to gain mastery of a scary situation.

Play therapy helps children process their trauma narrative, aids in resolving symptoms, builds resiliency, and resumes the process of normal development (Gil, 1991; Shelby, 2000). During play therapy, the family counselor should provide selected toys such as bendable doll families, zoo animals, rescue vehicles, medical kits, etc., as recommended by Landreth (2002), so children can express their trauma narrative through play. While children are

playing, family therapists should provide therapeutic responses of reflecting content and feelings, facilitating decision making, encouraging, enlarging the meaning, and facilitating accurate understanding (Baggerly, 2005c; Landreth, 2002). These play therapy procedures are demonstrated in a video by Baggerly (2005a) available at <http://www.emicrotraining.com/playtherapy.html>. After each play session, consult with parent and provide them helpful responses to their child's concerns. If the child wants to play out their resolved trauma story for their parents, instruct the parents to reflect their child's feelings and strengths and provide reassurance of their support.

There is a long history of using play therapy to treat traumatized children, beginning with Anna Freud's work with children after London was bombed in World War II (Freud & Burlingham, 1943). The effectiveness of play therapy was revealed in Bratton and Ray's (2000) comprehensive literature review of 82 play therapy research studies and a meta-analysis of 94 play therapy outcome research studies, which showed a large positive effect of .80 on treatment outcomes (Ray, Bratton, Rhine, & Jones, 2001). Recently, Shen's (2002) research with Chinese children who experienced earthquake related trauma symptoms revealed that children who received 10 sessions of child-centered play therapy had significantly lower anxiety and suicide risks than did control group children. Given these positive results of play therapy and its unique developmentally appropriate approach, family therapists are encouraged to obtain play therapy training. Play therapy training information is available at www.a4pt.org and www.cpt.coe.unt.edu.

Family Play Therapy

The final phase in trauma recovery is reconnecting children with others. To accomplish this, family therapists can integrate play into family therapy so that parents can enter their children's world and develop emotional connectedness (Gil, 1994; Wittenborn et al., 2006). "Play techniques can engage parents and children in enhanced communication, understanding, and emotional relatedness" (Gil, 1994, p. 42). Play in family therapy can also help children and parents make sense of their lived traumatic experience, solve problems, and build resilience as a family unit.

These goals can be facilitated through family play activities that utilize a variety of mediums. If a sand tray and numerous miniatures are available, ask the family to use these to create their world before the disaster, after the disaster, and how they hope it will be in the future. Afterwards, the family counselor should ask each family member to share their thoughts and contributions to their sand tray world (Carey, 1999). If puppets are available, ask each family member to choose and name two puppets. Then ask the family to make up a story that has a beginning, middle, and an end. Afterwards, the family counselor should interview each puppet to process feelings, perceptions, strengths, and problem solving strategies (Gil, 1994).

Family art activities accomplish the above described goals in a medium that is available to most family therapists (Gil, 1994). Provide three large, poster-size pieces of paper, crayons, and markers and ask families to make a mural of their life before the natural disaster, afterwards, and in the future. Family members can enhance the murals by pasting images from magazines, if available. After the mural is complete, lead the family in processing feelings, perceptions, strengths, and problem solving strategies. Another art activity is to provide one large piece of paper and ask each family member to draw a special place where they would like to live (DeTrude, 2003). Ask them not to talk until everyone is finished. Then ask each family member to describe the sights, sounds, and smells of their special place. Finally, ask family members to make one positive comment about each person in the family. This activity helps families focus on hopes and dreams, giving them a sense that there is life after a disaster.

CONCLUSION

Recognizing children and adolescents' typical and clinical traumatic stress symptoms after natural disasters will guide family therapists in providing needed therapeutic interventions. Since most of the recovery takes place at home and at school, family therapists must teach parents and teachers to understand symptoms and intervene with reassurance of normalcy, extra attention and nurturance, re-establishing routine, open communication, and facilitating adaptive coping strategies. If children experience clinical symptoms, family therapists are encouraged to follow the model of (a) establishing safety and managing symptoms through Cognitive Behavior Therapy, (b) facilitating the child's retelling of the trauma story through play therapy, and (c) reconnecting the child with others through family play therapy. In doing so, counselor will help children, families, and communities develop resilience after natural disasters.

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Simple Activities for Children and Adolescents

Activities that require limited supplies for daytime or lighted areas:

- ___ Crumble up a wad of paper and play a ball game (basketball, baseball, blowing the ball across a table into a goal).
- ___ Play "Marbles." If no marbles are available use rocks or pebbles. Draw a circle and see who can knock the marbles out of the circle using their marbles.
- ___ Play "Hangman." Choose one person to be the "host" who chooses a secret word. Draw a short blank line for each letter in the word. Have players start guessing letters to fill in the blanks. Draw part of the "hangman" for each wrong guess. Whoever guesses the word before the entire hangman is drawn gets to pick the next word.
- ___ Make paper airplanes, origami, hats, paper doll chain, or paper boats.
- ___ Trace a child's hand or draw a random shape, and see what animals you can make out of it.
- ___ Write letters to friends or family.
- ___ Play "Tic-Tac-Toe." Make a three by three grid on a piece of paper. One person is the "X" and the other is the "O." The player who succeeds in placing three of his symbols in a row wins.
- ___ Play "Hidden Words." Have everyone agree on a key word, which is at least seven letters long. Then have players try to find as many smaller words inside the key word by rearranging the letters. For example, if kitchen is your key word, hidden words inside of that would be itch, it, kit, etch, etc.
- ___ Play "Find a Word." Make a grid of random letters interspersed with horizontal, vertical, and diagonal words and have the child circle the words when they find them.
- ___ Play "Five Questions." Write down five questions such as:
 - * What is your favorite color?
 - * What is (or was) your favorite subject in school?
 - * What is your favorite song?
 - * What is your favorite food?
 - * What is your favorite book?
 Each person has to answer the questions. Once the first set of questions have been answered let another player come up with the next set of questions.



Play Tic-Tac-Toe

Simple Activities for Children and Adolescents

- ___ Play "House of Cards/Blocks/Coins." Using a deck of cards, blocks, coins, choose a flat surface and have each person build a house. Whichever house stands the longest wins.
- ___ Play "Tug of War." Find a level, grassy area and make a center line on the ground. Get a long rope and mark its center; put the rope's center on the center line you created on the grass. Form two lines, one on each side of the center line. Each line or team will grab their side of the rope. At a start signal, each team will pull their hardest to try to get the other team across the center line.
- ___ If a ball is available, play toss, softball, kickball, or another game that a ball is needed for.
- ___ Have a treasure hunt where you write down clues on slips of paper that lead children to a "treasure."
- ___ Have a scavenger hunt where you make a list and have children compete to collect the most items.
- ___ Have an impromptu camp out using sheets or blankets to make tents over furniture.
- ___ Play "Guess the Object." Select an object and hand it to a child under a cloth while her eyes are closed or blindfolded. She feels the object to determine what she is holding. When she guesses correctly, offer another object to guess. If she has difficulty, give clues or allow her to ask questions about what they feel.
- ___ Play "Guess the Person." Give one word to describe a family member or friend. Ask the child to guess who it is. If the child guesses wrong, give another word that describes that person and then allow for another guess. Continue this process until the child guesses correctly.
- ___ Play battery powered games.
- ___ Play card games, board games, or dominoes.
- ___ Perform simple magic tricks.
- ___ Play musical instruments or create musical instruments.

Play Tug of War



Art Activities Help Children Recover from Natural Disaster

August 27, 2007 • By Peg Dunn-Snow, PhD, ATR-BC, LPAT, LMHC, NCC

In 1992, after Hurricane Andrew hit South Florida, I contributed to an article a list of art activities that children could do at home to help them process their thoughts and feelings after their hurricane experience. The activities are still relevant today, not only as a way to process a hurricane experience but to prepare for one by taking a more proactive approach. The activities in the original article were listed and categorized under the following headings.

Activities that Acknowledge and Validate Children's Feelings

Draw a protest poster against hurricanes.

Draw the scariest event that occurs during a hurricane.

Draw the worst event that occurs during a hurricane.

Draw a picture or make a collage of what your [anger](#) looks like during a hurricane.

Illustrate and complete the following statements:

I feel out of control during a hurricane when . . .

I feel in control during a hurricane when . . .

I feel angry during a hurricane when . . .

Draw a picture or make a collage of what your sadness looks like during a hurricane.

Choose from the following list of feelings and illustrate them: guilt, grief, denial, hopelessness, confusion, hope, growth, anger, nervousness. (Note: This activity is most appropriate for older children and teenagers.)

Draw or paint a picture of anything that makes you feel happy after a hurricane.

When you are tired of thinking about hurricanes, illustrate what you do or think about that [makes you happy](#).

When you are feeling OK inside, draw or paint a picture of how you could help others who experience going through a hurricane.

Make a magazine collage of items of necessity and luxury.

Activities That Help Promote Feelings of Trust and Safety

Design a medal of honor for your parents or guardians in your life, indicating a positive action they perform before, during, or after a hurricane.

When you cannot sleep at night, draw or paint a picture of what you would like your mom or dad to do to help you feel relaxed and safe.

When you cannot concentrate at school, draw, or paint a picture of what you would like your teacher to do to help you focus.

If you feel angry with [God or your faith](#) because of hurricanes, draw or paint a picture, and illustrate why.

Draw or paint a picture of the person and/or place you think about that helps you feel calm and safe when you feel upset.

Draw or paint a picture of the people and/or pets you need. Illustrate how you help and support them.

When adults fight, illustrate what you do to make yourself feel safe.

Activities That Promote Problem Solving

Draw or paint a picture of what you know about yourself as a result of your hurricane experiences.

Draw or paint a picture of the advice you would give to someone on how to survive a

hurricane.

Design a 3-D trophy for yourself illustrating a positive behavior you exhibit during a hurricane. Draw the action or behavior you exhibit during a hurricane that makes you feel responsible. If you could teach the world one thing about your experience during a hurricane, what would it be? Your answer may be an idea, a skill, or an attitude.

Draw or paint a picture of a challenge or difficulty you are facing in your life right now. Next, draw or paint a picture showing how you would like your life to be.

Construct a 3-D survival kit for your life that is specific to your needs and wants.

Recall an [unhappy dream or nightmare](#) (as the result of a hurricane experience) and draw a new ending to your dream that you choose.

Activities That Help Children Live in the Here and Now

Draw an important possession of yours that was lost in a hurricane. Draw an important possession of yours that survived in a hurricane.

Fold a piece of drawing paper in two parts. Draw items you need now and items you would like to have in the future.

Draw a picture of when you feel safe now. Include a place in your picture.

Activities That Help Children Promote Hope for the Future

Make a timeline of your past, present, and future and how hurricane season, each year, affects it.

Draw or paint a picture of an event or situation that is still the same in your life and does not change after hurricanes.

Draw or paint a picture of how people help each other after hurricanes.

Draw or paint a picture of two goals you have for the next year.

Fold a piece of drawing paper in quarters. Draw a picture for each of the following, one picture per section: Where am I? Where am I going? What is in my way? How can I meet the challenge? (Note: Include images of others who will help you with what you're exploring in each picture.)

Draw a picture of something you can do well that you could not do a year ago.

Draw a picture of how your holidays (Halloween, Thanksgiving, Christmas, Chanukah) will be the same this year after hurricane season.

Draw a picture of what is positive after hurricane season each year.

[Art therapy](#) is an effective treatment for children to foster self-awareness and to reconcile emotional conflict through verbal and nonverbal expression and art experiences. Art therapy allows children to express themselves through drawing, painting, collage, and clay work as well as verbally. Engaged in the creative process helps children define inner strengths that help them function and cope with the experiences in their everyday lives.

Art expression can also help children define hidden difficulties they experience with family and relationship issues, personal trauma, grief and loss. These may include divorce, difficulties related to [medical illness](#), anxiety, depression, and other mental and emotional issues.

Children with developmental disorders, such as [autism](#), can benefit from the a nonverbal, visual art outlet. Art is our first language when words are not enough to express ourselves. Art therapy serves all children including those who are at-risk and who have special needs.

Reference:

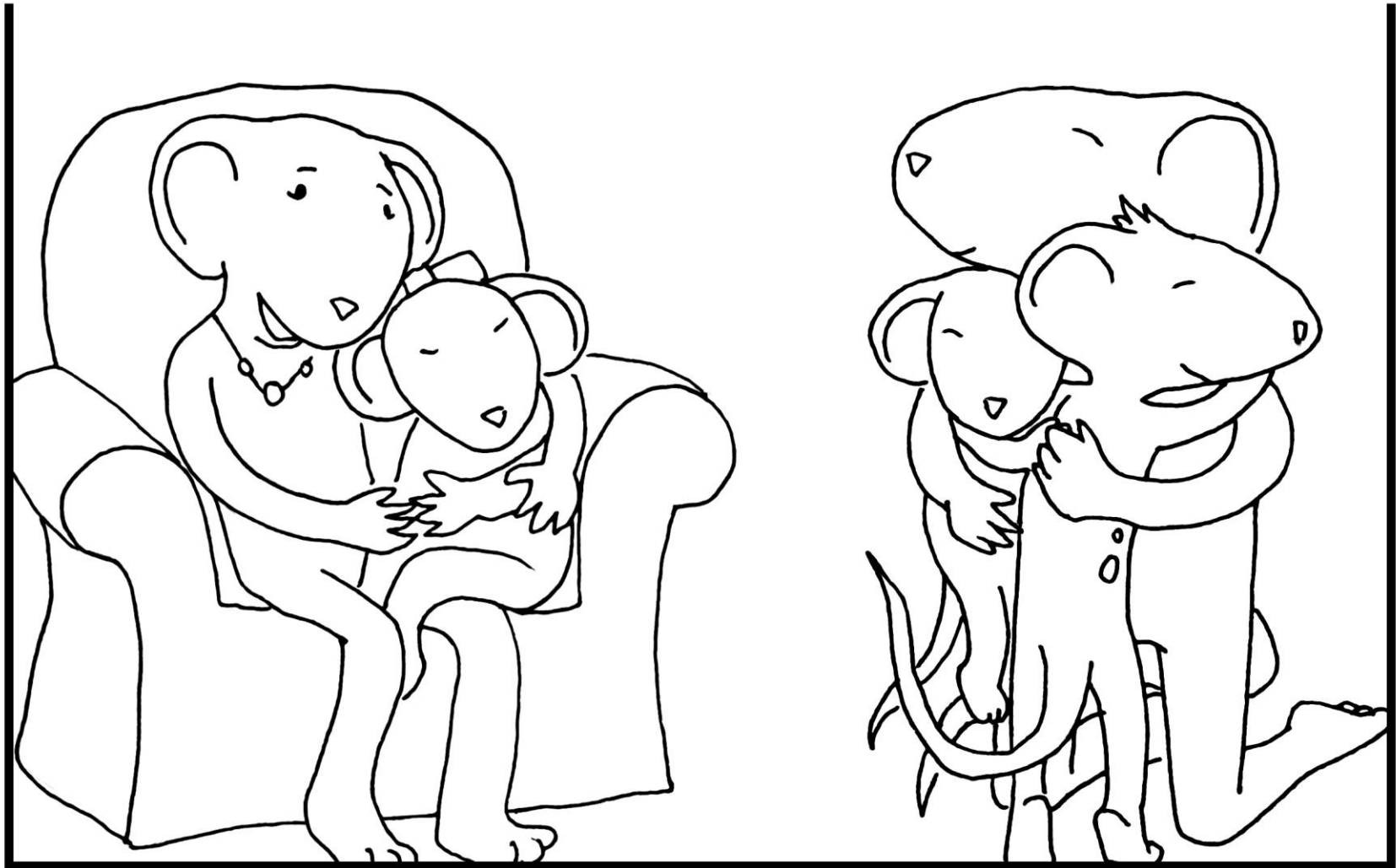
Bush, J. and Dunn, P. (1992). *Art therapy has healing power: Art activities help students*

through the storm. Sun Times FDLRS- South 14 (1), 10-11.

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Trinka y Juan

en un día de mucho viento y lluvia



Trinka y Juan en un día de mucho viento y lluvia

Un cuento elaborado por
Chandra Ghosh Ippen e
Ilustrado por Erich Ippen, Jr.

La Guía para los Padres en la versión en inglés
fue elaborada por
Chandra Ghosh Ippen y Mindy Kronenberg

Cuento y guía traducidos y adaptados al
español por Carmen Rosa Noroña,
María Carolina Velasco-Hodgson,
Y Chandra Ghosh Ippen

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El cuento fue elaborado en colaboración con la Red Nacional para el Estrés Traumático Infantil, la cual es una organización miembro de la Red Nacional para el Estrés Traumático Infantil.

Fue creado para ayudar a que niños pequeños y sus familias puedan comenzar a conversar sobre los sentimientos y preocupaciones que puedan tener luego de haber experimentado un huracán.

Para mayor información sobre cómo ayudar a los niños que han experimentado desastres naturales u otros eventos traumáticos dirigirse a la página Web
http://nctsn.org/nccts/nav.do?pid=ctr_aud_spanish_bie

Para mayor información sobre el cuento, el uso del cuento y el equipo que creó el cuento dirigirse a la página Web:
<http://piploproductions.com/stories/trinka-and-sam/>

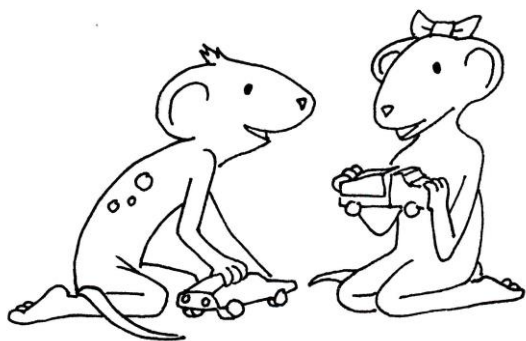
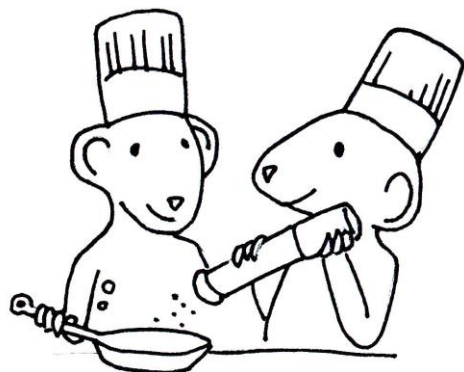
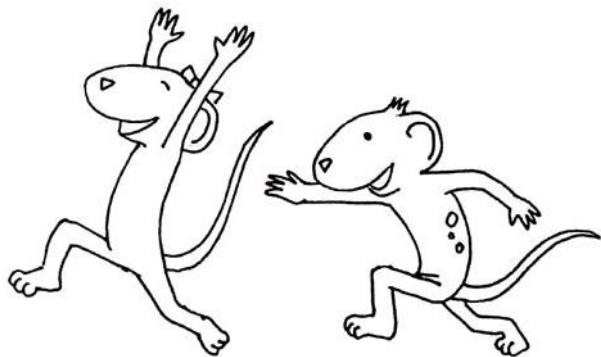
Para los niños y las niñas de la Costa del Golfo de México y todas las familias que han sobrevivido huracanes.



Ésta es Trinkka.



Y éste es Juan.



Trinka y Juan son vecinos
y les gusta mucho jugar juntos.



En el verano construyen castillos de
arena en la playa.

---- Ven Juan.



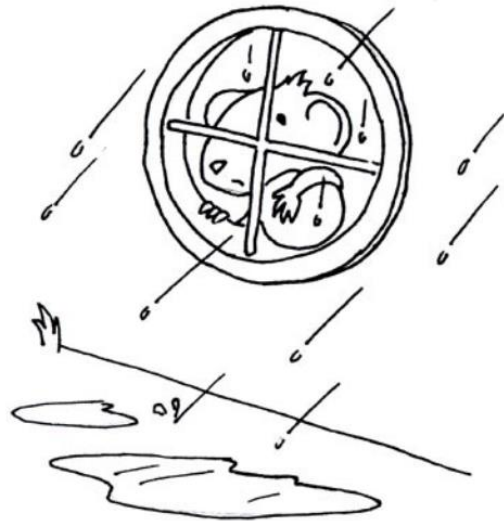
En el invierno juegan con el agua de la lluvia.

Ya voy.

Vamos Trinkka. - - -



Y siempre obedecen cuando es momento de dejar de jugar. . .
bueno . . . casi siempre obedecen.



Pero un día llovió tanto que no pudieron salir a jugar.

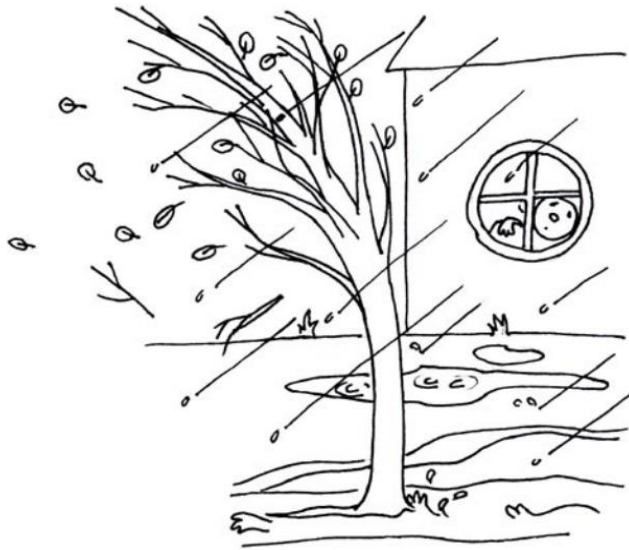
Este no es un buen clima para salir a jugar.



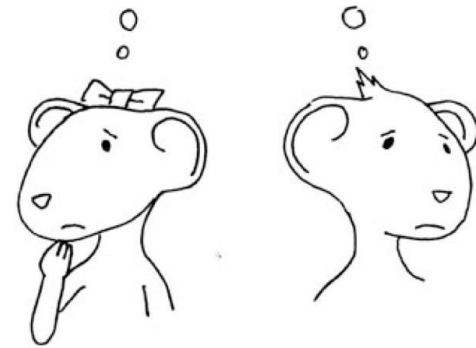
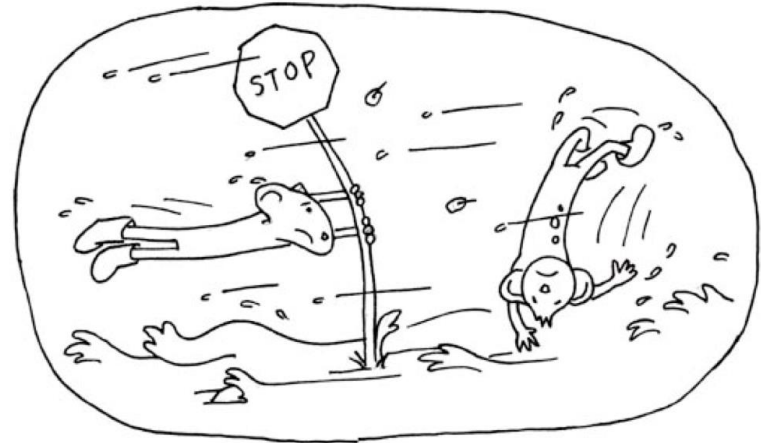
Lo siento querida.



Trinka y Juan estaban tristes y desilusionados.



Siguió lloviendo y luego empezó a correr un viento muy fuerte. No sólo un viento que te despeina y hace que las hojas de los árboles vuelen.



Sino un viento que te empuja al suelo y que aúlla. Ahora Juan y Trinkka no solamente estaban tristes, también estaban asustados y preocupados. Ellos tenían miedo que cosas malas pudieran pasar.



“¿Qué pasa si ocurre de nuevo?” dijo Trinká. “¿Te acuerdas del día del huracán? ¿Qué pasa si tenemos otro huracán?”



Juan le quitó el juguete a su hermano.



Y no escuchó a su papá.

Juan no dijo nada pero sintió como si el viento estuviera corriendo en su estómago.



Dio un gran portazo.



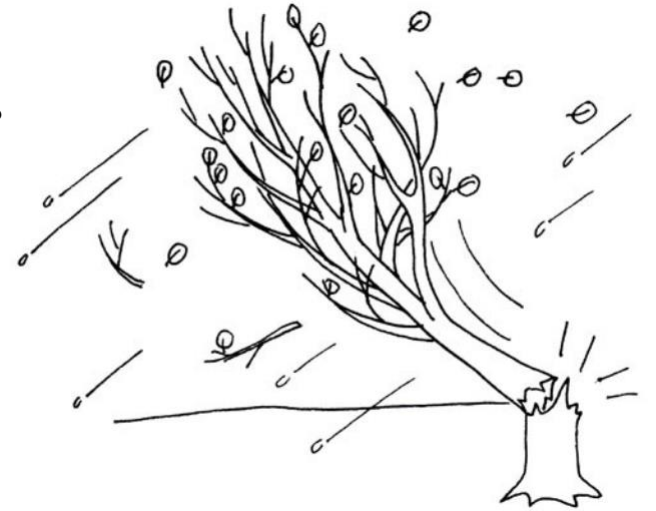
La mamá de Trinka estaba cansada pero entendió lo que Trinka necesitaba.



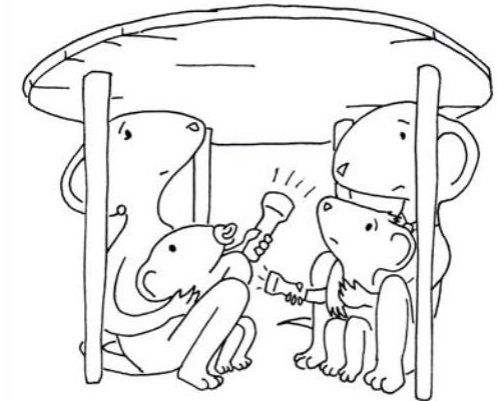
El papá de Juan estaba enojado pero también entendió lo que Juan necesitaba.



Los árboles
se cayeron.

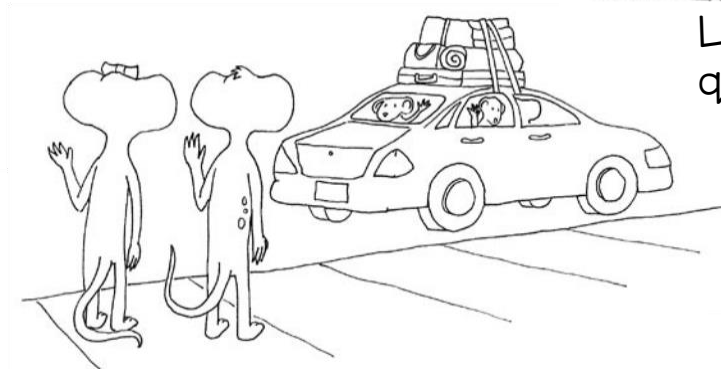


Las casas se dañaron.



Ellos estaban asustados.

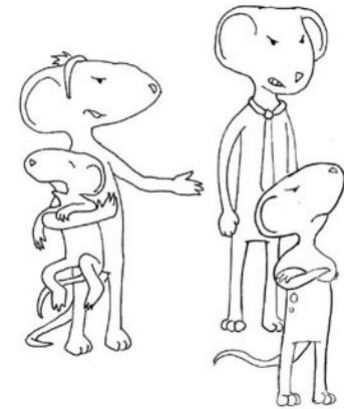
Todos recordaron el miedo que sintieron el día del huracán, cuando el viento se volvió grande y aterrador.



Algunos amigos se mudaron.



Las casas y escuelas quedaron dañadas.



Todos estaban enojados.

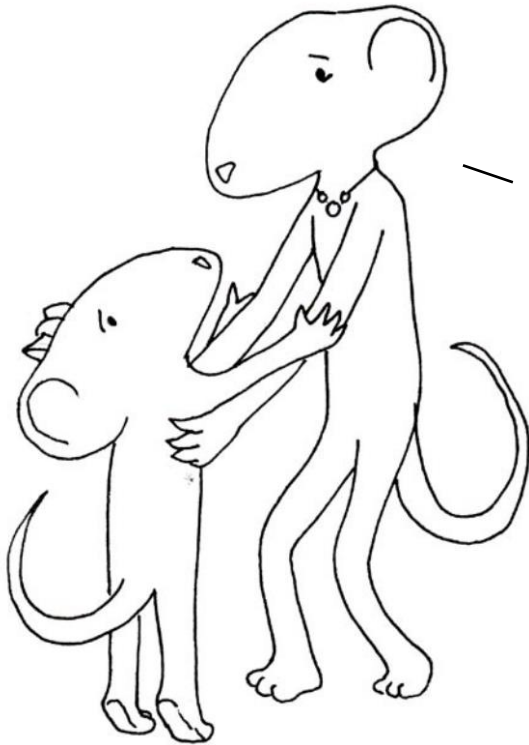
Todos recordaron lo difícil que fue la vida después de que la lluvia y el viento se detuvieron.

Creo que
estás
preocupada y
asustada.

Esta vez es diferente.

Nos van a avisar si
tenemos que irnos.

Nuestra familia
tiene un buen
plan.



La mamá de Trinkka la tomó en
brazos.

Te quiero mucho Trinkka.

Si el viento vuelve
a ser fuerte,
vamos a irnos a
un lugar seguro.

— Estamos bien.



Trinka se acurrucó en los brazos
de su mamá.

El viento me da mucho miedo y me hace sentir mal.

Yo sé que da miedo Juan.

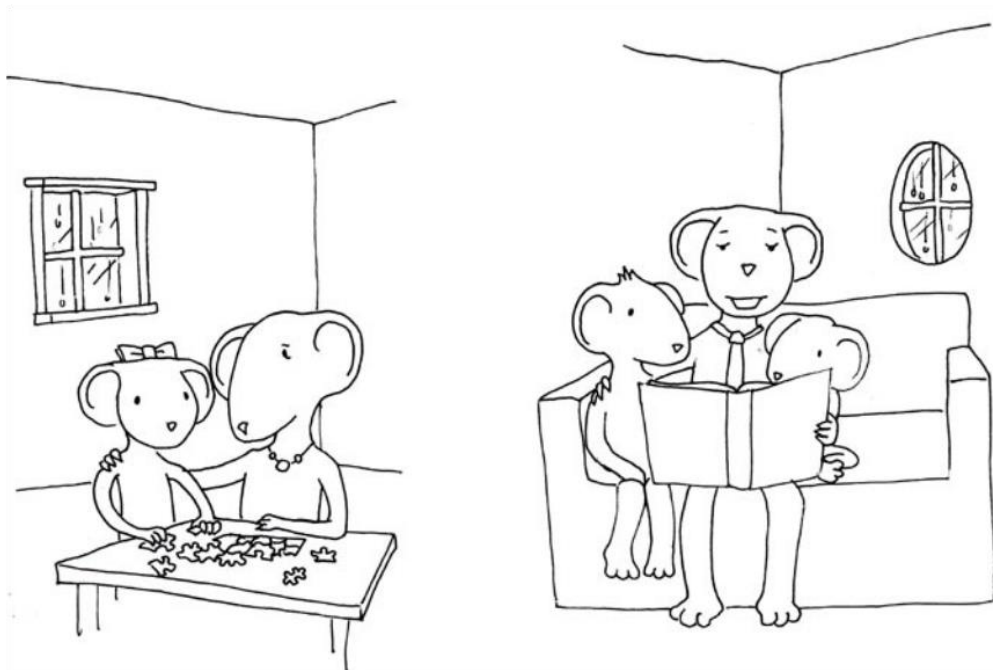


El papa de Juan preguntó: “¿Está el viento en tu cuerpo? Entonces hagamos que salga, corramos. alrededor igual como lo hace el viento.”

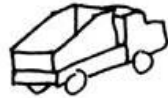
Corrieron y Juan se sintió mucho mejor. Su hermano pequeño y su papá también se sintieron mejor.



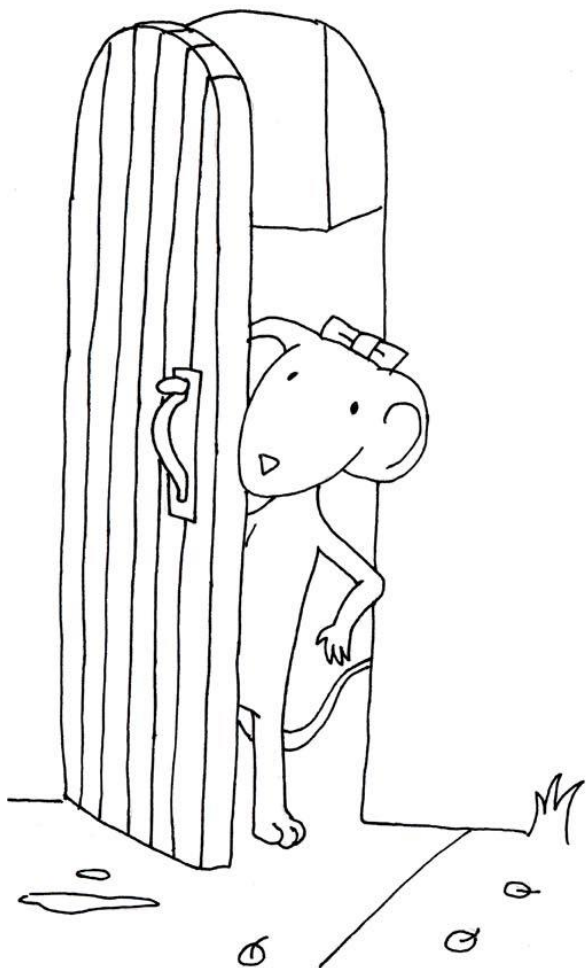
Llovió por un rato y el viento
sopló.



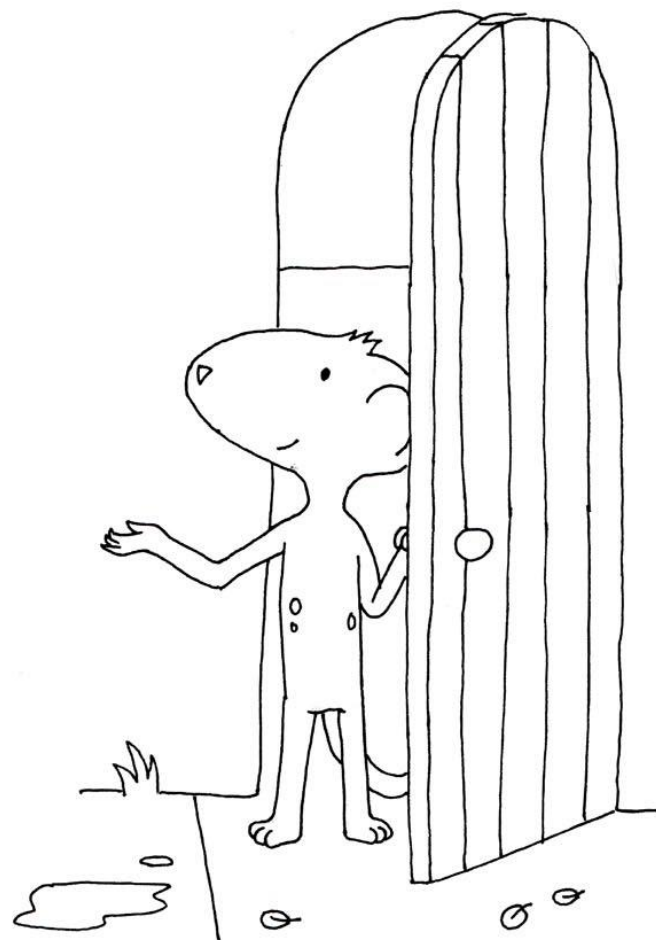
Todos estaban asustados pero
estaban juntos.



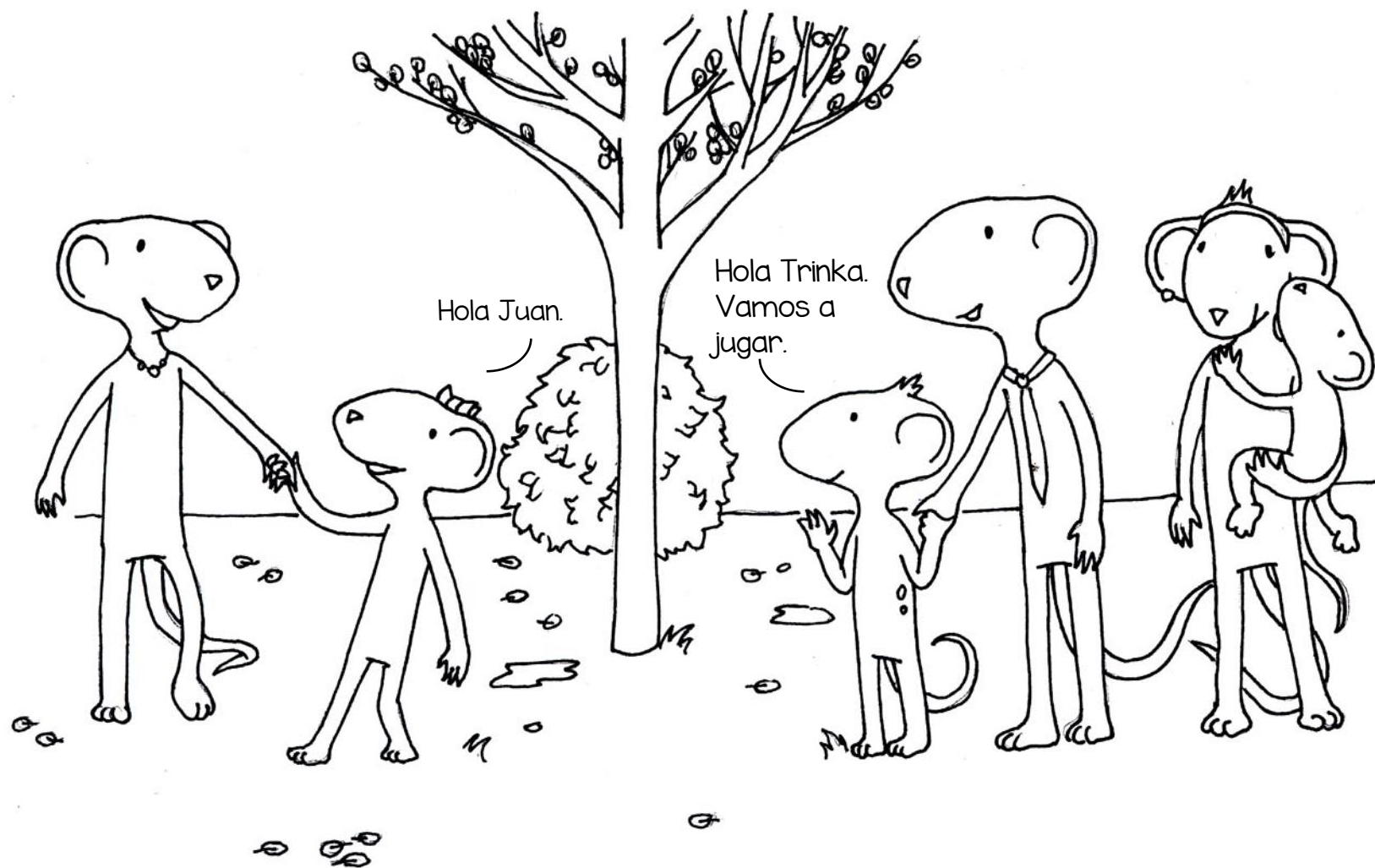
Después de un rato dejó de llover y el sol volvió a salir.



Trinka abrió la puerta.



Juan abrió la puerta.



Hola Juan.

Hola Trinká.
Vamos a
jugar.

Y todos salieron a jugar.

Mi Cuento

Mi Cuento

GUÍA PARA PADRES

El propósito de este cuento es ayudar a que los niños¹, que han pasado por un huracán puedan enfrentar sus temores y preocupaciones. Como muestra el cuento, usted puede ayudar a su niño dejándole saber que él está seguro y a salvo, y que es querido.

Maneras en que se puede utilizar este cuento

1) Lea y converse con su niño sobre el cuento

- Mientras están leyendo en cuento juntos, guíese por lo que le interesa a su niño.
- Algunos niños querrán detenerse para hablar sobre algún tema en particular del cuento. Permítales hacer esto, así es como comenzarán a expresar cómo se sienten y lo que recuerdan.
- Algunos niños pueden preocuparse o asustarse mientras usted lee el cuento y puede ser que sea necesario que deje de leerlo momentáneamente. El hecho de que los niños se preocupen o asusten al leer o hablar acerca del huracán no indica que sea malo hablar sobre esto. Usted puede decirles algo como: “Es difícil también para mi hablar del huracán. Esta bien si quieres tomar un descanso y lo hablamos después”.

2) Utilice el cuento para colorear

- Colorear es entretenido y relajante.
- Los niños pueden usar diferentes colores para expresar diferentes sentimientos (emociones). Por ejemplo, en la página 11, cuando Trinka y Juan están tristes y desilusionados porque ha comenzado a llover, los niños pueden colorear esta imagen de color azul. Cuando Juan está enojado, los niños pueden pintar esta imagen de color rojo. Cuando Trinka y Juan están asustados los niños pueden elegir un color que

represente el susto o miedo y colorear con ese color todas las partes del cuento que les asusten. Hacer esto les ayuda a empezar a pensar en diferentes sentimientos (emociones). Así pueden aprender a reconocer sus sentimientos (emociones).

- Mientras los niños están coloreando es posible que comiencen a hablar de lo que ellos piensan, recuerdan o sienten.
 - Algunos niños pueden querer rayar sobre las imágenes del huracán para mostrar lo enojados (frustrados) que se sienten y lo mucho que no querían que esto sucediera. Aunque normalmente quisiéramos que los niños cuidaran sus libros y no los rayen, ésta puede ser una ocasión en la que podríamos permitirselos ya que esto puede ayudarles a compartir sus sentimientos.
- #### 3) Utilice el cuento para hablar de lo que pasó en la familia durante el huracán.
- Las historias y los cuentos son importantes para los niños pequeños, les ayudan a entender lo que pasó.
 - Cuando usted lea este cuento, su niño sabrá que puede hablar de lo que sucedió con usted y hacerle preguntas sin problemas.
 - Cada familia se verá impactada de diferente manera. Utilice este tiempo para conversar con su niño de manera simple sobre la experiencia particular de su familia durante el huracán.
 - Si su niño lo vio afectarse durante el huracán, hable sobre aquello. Está bien admitir que usted también estaba asustado y angustiado. Ayude a su niño a ver que usted ya está mejor, que usted es fuerte y que hará todo lo posible para mantener segura a la familia.
 - Un evento traumático, como un huracán, puede afectar los comportamientos de su niño. Por ejemplo, esto puede verse en el cuento cuando Juan le quita un juguete a su hermano y no escucha a su papá. Al hablar sobre lo que pasó, los niños comparten sus

¹ En este texto las palabras niño y niños se utilizan para nombrar tanto a niños como a niñas.

sentimientos y preocupaciones. Al expresar sentimientos, los problemas de comportamiento pueden mejorar. Por ejemplo, puede ser que su niño se haya vuelto más miedoso, retraído o agresivo luego de haber sobrevivido un huracán. Hablar y/o colorear sobre sus sentimientos y preocupaciones puede ayudar a que su niño vuelva a ser como era antes del huracán.

- Para ayudar a que su niño comience a hablar, usted puede preguntarle qué cosas recuerda del día del huracán. También puede preguntarle si alguna vez se ha sentido como Trinká y/o Juan. Asimismo puede compartir lo que usted recuerda del huracán. Es importante que usted esté dispuesto a contestar las preguntas de su niño. Para contestar las preguntas de su niño recuerde dar respuestas que él pueda comprender de acuerdo a su edad. Por ejemplo, un niño podría preguntar: “¿qué pasa si morimos en el próximo huracán?” Éste es un momento para hablar sobre los miedos de su niño, las creencias de su familia acerca de la muerte y para confirmarle a su niño que usted hará lo posible por mantenerlo seguro.
- Algunos niños no quieren hablar sobre sus sentimientos y preocupaciones y prefieren hablar sobre lo que les pasa a otros niños de su edad o sobre personajes de cuentos e historias como en este caso Trinká y Juan. Si usted ha observado que su niño tiene reacciones o conductas similares a Trinká y/o Juan, usted puede utilizar esas partes del cuento. Por ejemplo, luego del huracán, Juan está enojado. Frecuentemente los niños pequeños se molestan con sus padres y los culpan por lo ocurrido aunque no sea responsabilidad de los padres. Esto ocurre porque los niños pequeños creen que sus padres son fuertes y poderosos y por lo tanto, si no hicieron algo es porque decidieron no hacerlo. En el caso de Juan, fue muy importante que su papá no reaccionara de manera

agresiva pero que reconociera que Juan estaba muy asustado y necesitaba de su papá.

- Si los niños parecen estar enojados con usted, el hablar sobre lo que les sucede a Trinká y a Juan, cuando están molestos, puede ayudar a que los niños comiencen a hablar de sus sentimientos (emociones).
- 4) Puede usar este cuento para comenzar a hablar con su niño sobre los huracanes.
- Es posible que los niños pequeños tengan muchas preguntas sobre los huracanes, y como son pequeños puede ser que no sepan cómo preguntar. Abajo encontrará algunas de las preguntas que los niños pueden tener:
 - ¿Qué es un huracán?
 - ¿Va a pasar otra vez?
 - ¿Cómo sabremos si vuelve a pasar?
 - ¿Cuándo volverá a pasar algo así?
 - ¿Qué vamos a hacer si vuelve a pasar?
 - Cuando se les contestan las preguntas de los niños ellos sienten menos asustados. A pesar de que puedan seguir teniendo miedo, sabrán que no están solos, sabrán que pueden hablar con usted.
 - A continuación encontrará información que puede ayudarle a conversar con su niño acerca de los huracanes. Para empezar esta conversación usted puede decir algo como esto: “Lo que te voy a contar nos va a ayudar a aprender más sobre los huracanes”
 - Los huracanes se forman en el océano. En los Estados Unidos esto sucede habitualmente entre junio y noviembre, cuando el agua está más caliente. En otras épocas del año esto normalmente no sucede.
 - Los huracanes son grandes tormentas con viento fuerte y mucha lluvia. Algunas veces estos vientos se quedan en el océano. Si los vientos llegan a la tierra puede que al principio sean fuertes, pero luego se vuelven cada vez más suaves y en algún

momento terminan. La lluvia hace grandes pozas (charcos). Si llueve mucho es posible que haya inundaciones.

- Algunos huracanes son muy fuertes y pueden hacer volar los techos de las casas. Cuando los huracanes son así de fuertes las personas tendrán que evacuar.
- Evacuar quiere decir que puede ser que tengamos que irnos de un lugar que no es suficientemente fuerte para resistir huracanes, hacia un lugar seguro. Estos lugares seguros se llaman refugios. Los refugios pueden estar en subterráneos de edificios, casas o escuelas. Un refugio es cualquier lugar que fue construido para resistir grandes huracanes y por tanto es un lugar muy seguro.
- Otros huracanes no son tan fuertes y puede que sólo tumben/boten al suelo árboles y cercas. En estos huracanes no es necesario evacuar.
- Los meteorólogos son científicos que estudian el clima. Alguna de la información que tienen los metereólogos la reciben de satélites que están en el cielo. Los satélites pueden tomar fotos de la tierra y de nuestro clima y esto ayuda a los metereólogos a saber con anticipación si un huracán viene en camino, si será grande o chico, y también si será necesario evacuar.
- Si fuera necesario evacuar, el meteorólogo que aparece en la televisión o habla por la radio, informará qué hacer y hacia donde ir. También informará cuando es seguro salir de los refugios.

Puntos Importantes

- Un desastre natural, como un huracán, puede continuar afectándonos aún después de haber ocurrido. Esto puede ser incluso luego de meses o años.
- Es posible que muchas cosas le recuerden a usted y a su niño acerca del huracán.

- La lluvia
- Las separaciones
- Cuando las personas están angustiadas o llorando
- A menudo los niños pequeños no pueden contarnos las cosas que recuerdan y demuestran su temor a través de su comportamiento. Por ejemplo, Trinkka quiere que la tomen en brazos y Juan corre por toda la casa después de haberle quitado los juguetes a su hermano. Estos comportamientos están expresando el miedo que estos personajes del cuento sienten. Asimismo, algunos niños tienen dolores de estómago o berrinches (rabietas).
- Cada niño puede reaccionar de manera distinta. Trinkka está asustada y se aferra a su mamá. En cambio Juan se porta mal. Los dos están demostrando sus sentimientos a través de su comportamiento.
- En el cuento, los padres se sienten angustiados y frustrados con el comportamiento de sus niños, pero tratan de entender por qué sus hijos están actuando de esa manera.
- Aún cuando los niños se sientan asustados, enojados o tristes, es important ayudarlos a que no actúen agresivamente. Es fundamental que usted establezca reglas claras con sus niños respecto a cómo demostrar sentimientos sin comportarse agresivamente, ya que esto ayudará a que ellos se sientan seguros.
- Con frecuencia, los niños hacen las mismas preguntas una y otra vez. Esto no se debe a que olviden lo que usted les dijo o explicó, sino a que ésta es la forma como ellos tratan de saber y entender lo que pasó. Sus niños necesitan que usted conteste las mismas preguntas una y otra vez de la manera más paciente y cariñosa que le sea posible.

- Los niños se benefician al expresar su experiencia ya sea en palabras, jugando, o a través del arte.
- Comuníqueles a sus niños que aunque cosas atemorizantes hayan ocurrido en el pasado, ellos y usted están seguros ahora. Recuérdeles que su familia tiene un plan para mantenerse seguros.

Ahora Pensemos en su Niño

- ¿Desde el huracán, su niño se comporta de una manera diferente?
- ¿Qué cosas le asustan a su niño?
- ¿Cómo sabe usted cuando su niño está asustado?
- ¿Cómo se comporta su niño cuando está asustado o estresado?
- ¿Qué cosas pueden hacer usted y su niño que ayuden a que él se sienta mejor?

Sugerencias para Ayudar a su Niño

- Ayude a que sus niños hablen con usted acerca de lo que pasó.
- Ayude a que sus niños identifiquen sus sentimientos y déjeles saber que es normal sentirse de esa manera después de haber pasado por algo muy difícil. Por ejemplo, al nombrar sus sentimientos usted puede decir: “entiendo que estás enojado o triste”.
- Ayude a que sus niños se sientan seguros.
 - Los niños pequeños se sienten seguros cuando usted los abraza.
 - Los niños se sienten seguros cuando
 - Tienen rutinas predecibles
 - Tienen horarios y rutinas regulares para comer y dormir

- Saben qué va a pasar a continuación: cuándo las personas van y vienen
- Haga un plan familiar para prepararse frente a un desastre, a fin de que sus niños sepan qué hacer si ocurre otro huracán. Incluya en su plan:
 1. El lugar en el que se encontrarán (en casa, en la escuela, en la iglesia).
 2. El lugar a dónde irán (al sótano, a un refugio, a la casa de un amigo)
 3. Las cosas que llevarán si hay tiempo (juguete favorito, medicinas, documentos)
 4. Lo que pasará con las mascotas.

Sugerencias para adultos

Los desastres naturales también pueden afectar a los adultos. Es posible que usted esté asustado y se siente triste, enojado o culpable acerca de todo lo que ha ocurrido.

- Para poder ayudar a sus niños de la mejor manera es importante que usted se cuide. Los niños, especialmente los más pequeños, se dan cuenta cuando los adultos a su alrededor no se sienten bien.
- El primer paso para poder cuidar de usted mismo es tomarse el tiempo necesario para manejar sus propias reacciones y sentimientos.
- Pregúntese...
 - ¿Cuándo pienso acerca del desastre, esto afecta mi capacidad para hacer lo que quiero o lo que tengo que hacer?
 - ¿Estoy tratando de no pensar acerca del desastre? (Si usted evita pensar acerca de lo que pasó y esto interfiere con cómo siente las emociones así como con las relaciones con sus amigos y familia, puede ser un síntoma de trauma)

- ¿Me estoy sintiendo ansioso, distraído o irritable?
- ¿Me estoy sintiendo muy triste o deprimido?
- ¿Estoy haciendo cosas que pueden crearme problemas, como ignorar lo que necesito hacer o hacer cosas que no son buenas para mí?
- ¿Qué cosas positivas estoy haciendo para mí mismo? (Por ejemplo, darse tiempo para hacer las cosas que a usted le gustan).
- ¿Qué cosas positivas estoy haciendo para mi familia? (Por ejemplo, mantener las rutinas, compartir tiempo juntos, hacer algo divertido o relajante, hablar de los sentimientos).
- Si usted se da cuenta que tiene reacciones intensas a causa del desastre:
 - Hable con amigos o con miembros de su familia.
 - Dese tiempo para hacer cosas que usted disfruta.
 - Trate de permanecer saludable: coma bien; haga ejercicio y duerma lo suficiente.
 - Dese permiso para sentirse triste y vivir los sentimientos de duelo que acompañan a las pérdidas grandes o significativas.
 - Intente volver a su rutina normal.
 - Si se siente muy abrumado, intente dar pequeños pasos para enfrentar los problemas grandes.
- Muchos adultos se sienten culpables al enfocarse en sí mismos o cuidar de sí mismos, pero recuerde que los niños se sienten mejor cuando saben que usted está bien.

Recursos en Español por Internet

Información sobre el trauma y estrategias para padres y tutores/cuidadores

- La Red Nacional Para el Estrés Traumático Infantil (National Child Traumatic Stress Network)
www.NCTSN.org
- Pipro Productions: “Una Vez Tuve Mucho Mucho Miedo,” un cuento escrito para ayudar a los niños y adultos (padres, maestros y otros adultos importantes) a entender cómo el estrés puede afectar a los niños y cómo ayudarlos: <http://piploproductions.com/nuestros-cuentos/una-vez/>

Desastres Naturales Familias, Niños y Adolescentes

- Sesame Street – Preparemos
<http://www.sesamestreet.org/parents/topicsandactivities/toolkits/ready/spanish>
- Secretaria del Decenio Internacional para la Reducción de los Desastres Naturales (DIRDN)
<http://helid.desastres.net/en/d/Jdnd25/9.html>
- Cruz Roja
<http://www.redcross.org/disaster/masters/familymodule/famcd-hurricanes-17.html>
- FEMA
<http://www.listo.gov/ninos/parents/>
- Ready.gov
<http://www.ready.gov/es>

Sobre la Crianza de Niños (etapas del desarrollo, sugerencias para manejar comportamientos difíciles, disciplina, cuándo buscar ayuda, etc.)

- Zero to Three
www.zerotothree.org
- All Family Resources
www.familymanagement.com



Hurricane

A Coloring Book



Dear Teacher:

The recent hurricane left memories with students that may surface during this school year. You may observe in you students behavior that reflects anxiety or a change from their previous behavior.

It's common to feel shock, disbelief, anger or depression after a disaster. Most children will work through these feelings in time, but some children need adult help in dealing with their hurricane experiences.

Following are some behaviors that children may display. Also listed are some ways you may respond to them.

Reactions:

- overly conscious and fearful of bad weather
- constantly looking out the window
- hesitating to go outside in stormy weather
- repeating questions about hurricane shelters
- changing normal activity level
- becoming alarmed by loud noises, high winds or heavy rains
- showing difficulty concentrating
- displaying increased irritability
- fear of being alone or of being without parent or adult
- displaying separation anxiety when they first return to school
- resisting walking home or taking the school bus and demanding that parents collect them at school
- showing more childish behavior
- maintaining close physical proximity to you during free periods

Suggestions:

- present scientific facts about hurricane formations
- include a hurricane weather unit in your ongoing curriculum
- ask a weatherman, science teacher or weather reporter to speak to your class
- involve the student and yourself in activities with other students
- recognize and reinforce the student when you see them acting more independently
- find opportunities for students to exercise independence, such as completing special tasks and errands
- allow children to express anxiety, although you may be tired of hearing about it
- listen when children express their tornado fears and experiences
- encourage students to draw pictures of their tornado experiences

- share your own feelings and fear with your students

While fear is normal reaction to any danger, you can help prevent permanent emotional damage to your students because you are a key figure in their lives. They need reassurance both in your words and actions.

You should be understanding as well as firm, but, above all, be honest, because hurricanes are a reality.

Dear Parents:

The hurricane is gone...but not forgotten!

The hurricane that recently hit South Carolina left memories with our children, loved ones, friends and neighbors. These memories may surface during any unusual weather that may occur in the future.

Please remember that after a hurricane or other disaster, it's perfectly normal to feel anxious or uncomfortable. It's common to feel shock, disbelief, anger and depression, especially when there is a thunderstorm. These unpleasant feelings go away in time.

If you sense that your children seem anxious about dark clouds, wind or rain or anything else with they may associate with a hurricane, talk with them about how they feel and help them learn to tell the difference between signs of a hurricane and a storm.

We have designed this coloring book to assist you. By allowing children to draw their thoughts and ideas and share them with you, we hope this coloring book will help those children who have a hard time expressing their feelings.

The loss of possessions and places causes hardships for the whole family. Rebuilding the old neighborhood or moving to a new place adds to the confusion. Losing important, irreplaceable personal belongings, like a favorite teddy bear, can be especially painful to children.

Listening, understanding and giving a little extra care can help ease troublesome feelings.

If you feel you need support for you and your children, we would like to help. There is a community mental health center located near you. Give them a call.

This book belongs to

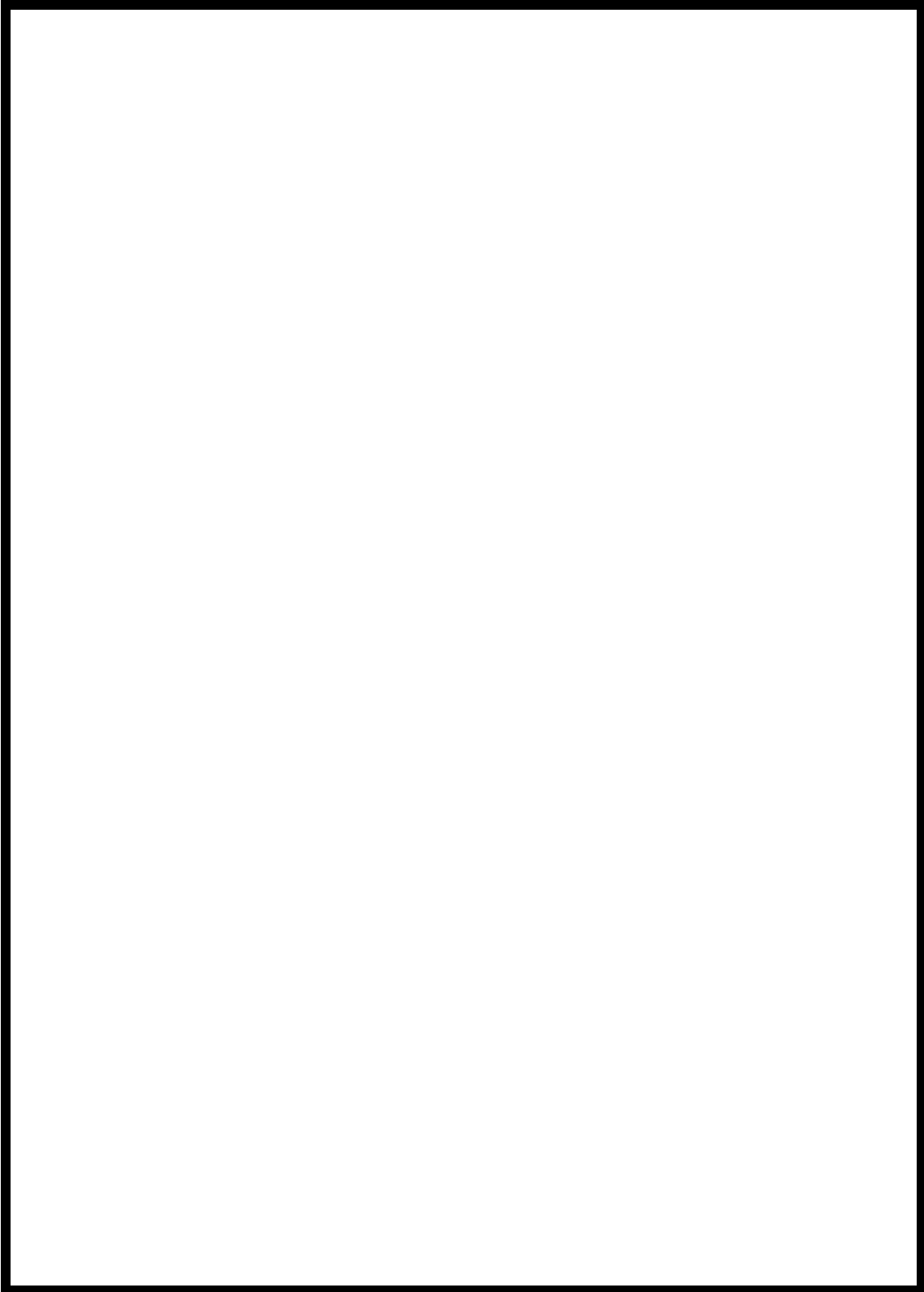
Name _____

Age _____

School _____

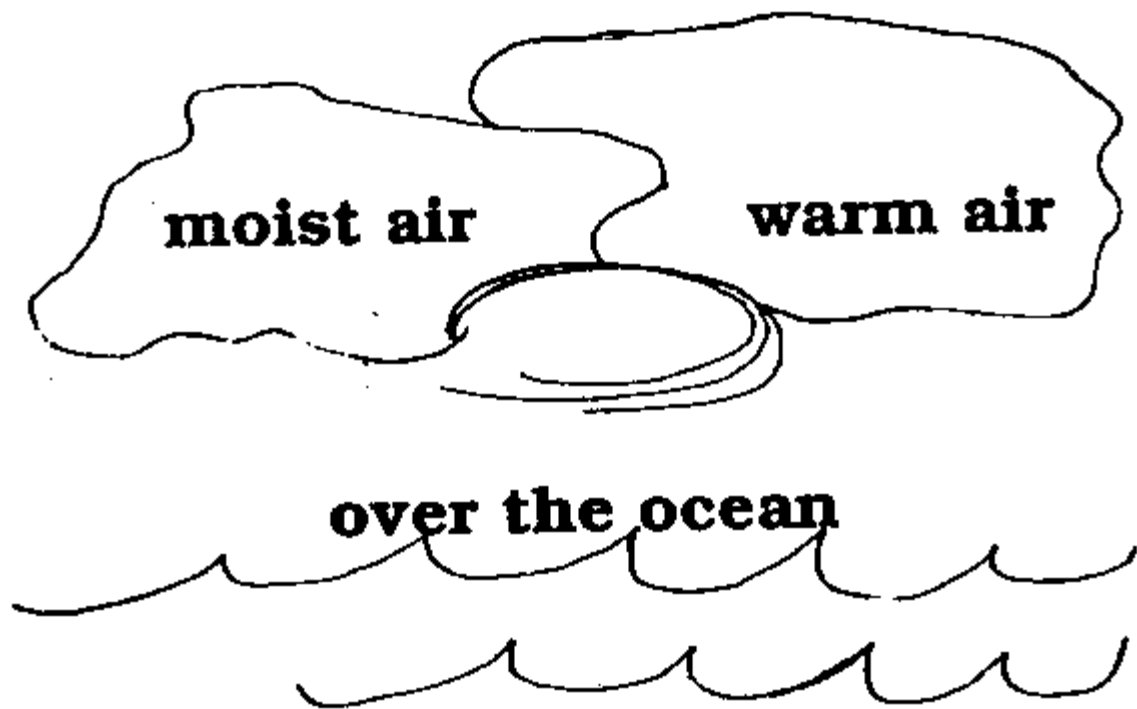
Teacher _____

Draw how you felt during the hurricane.





People cannot start or stop a hurricane.

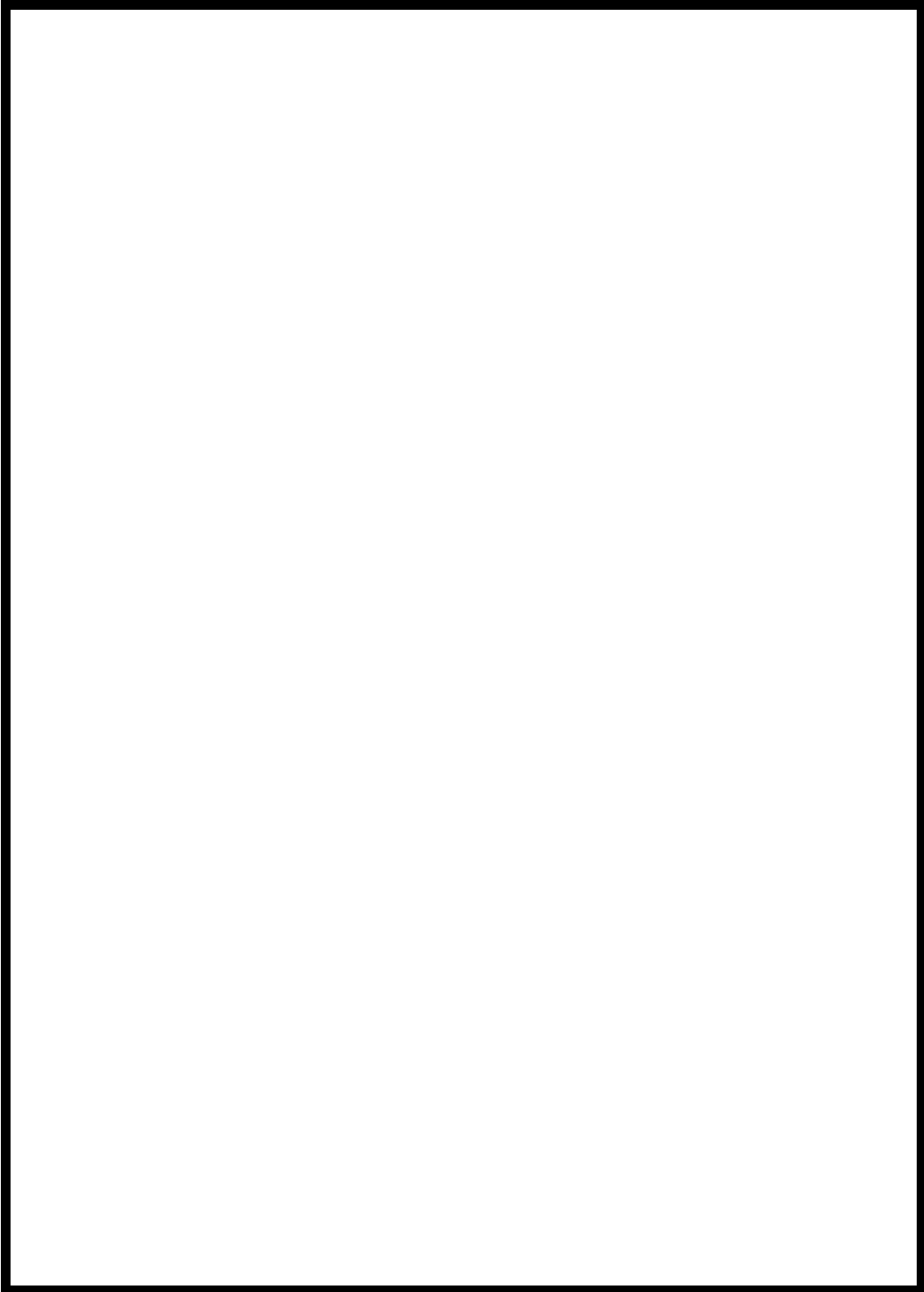


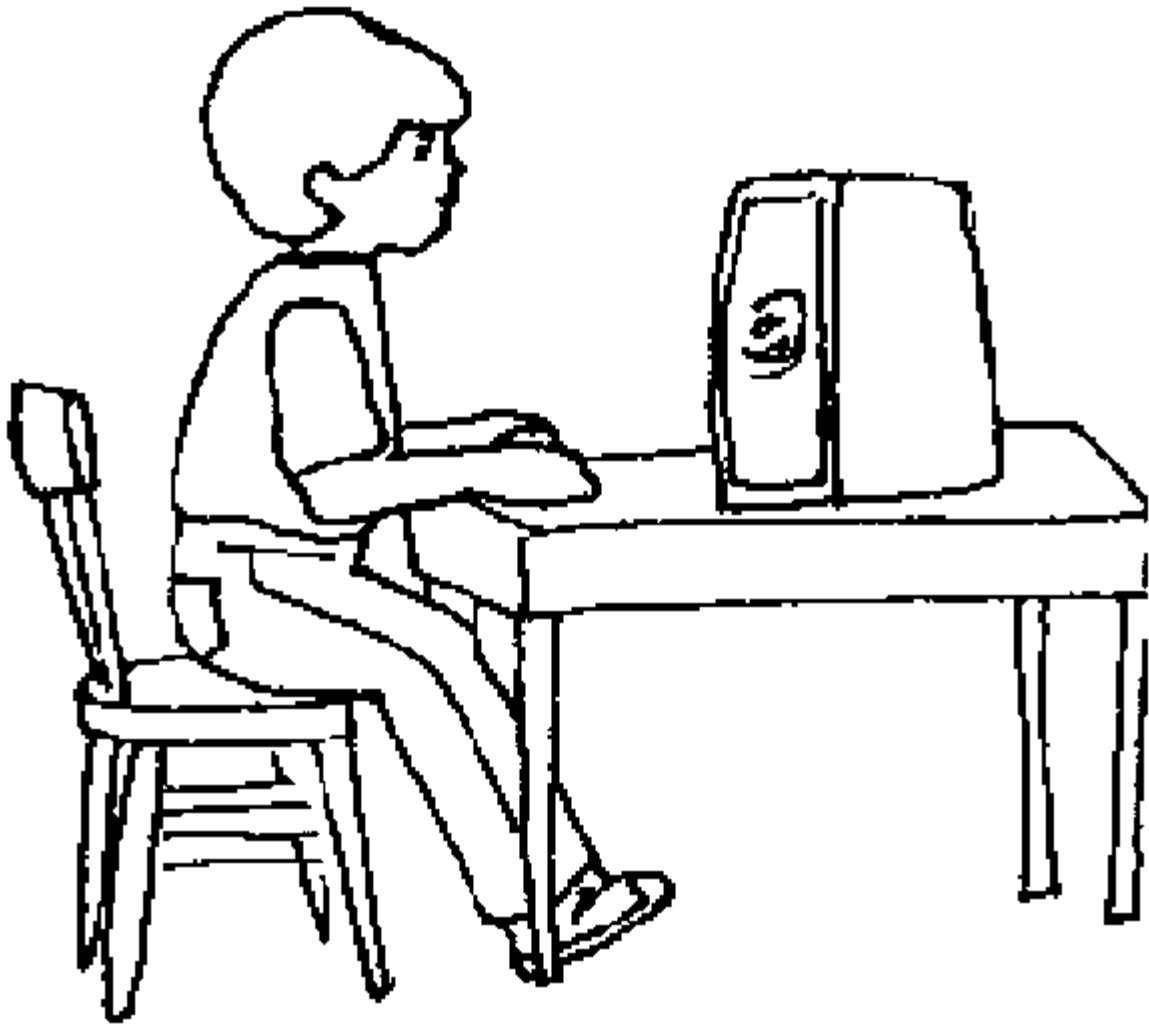
What causes a hurricane?



Strong winds and heavy rain come with a hurricane.

Draw a picture of a hurricane.



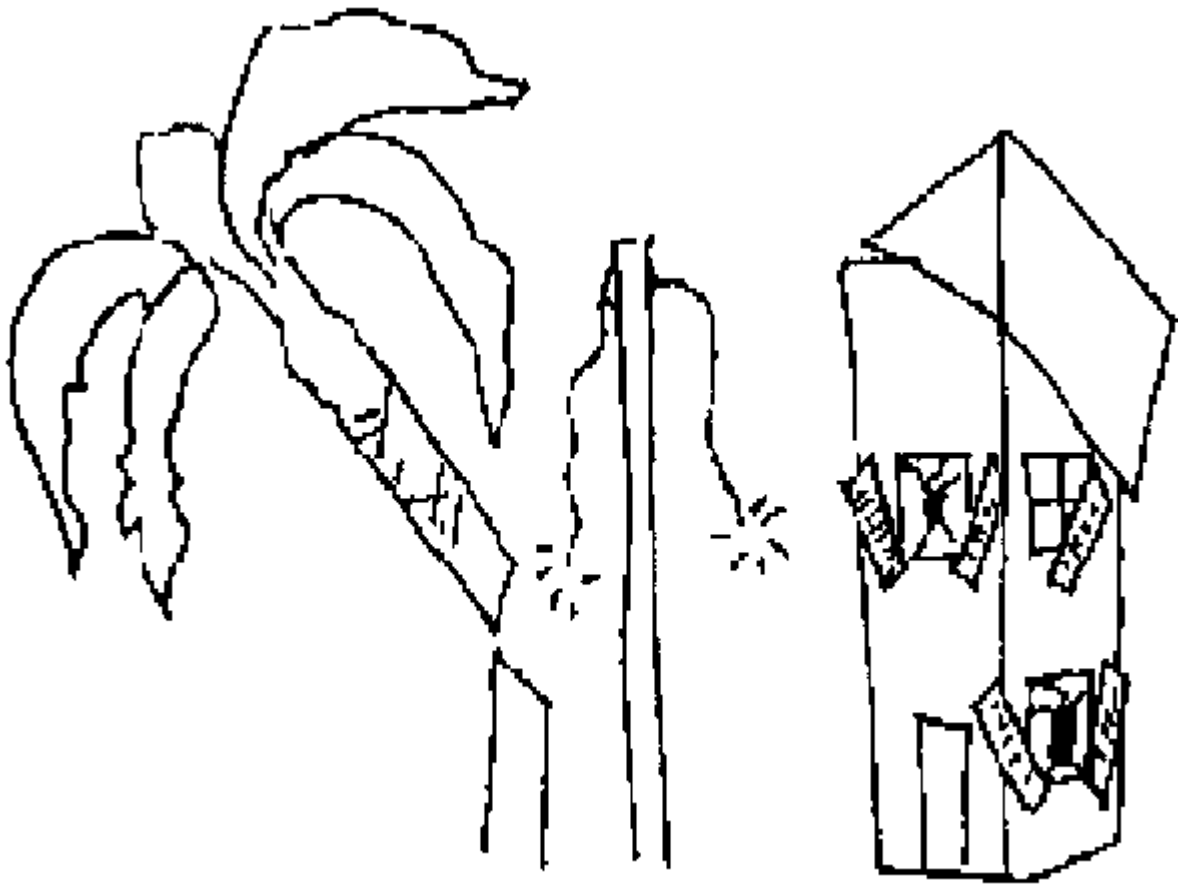


Listen to the radio or television for warning signals and instructions.

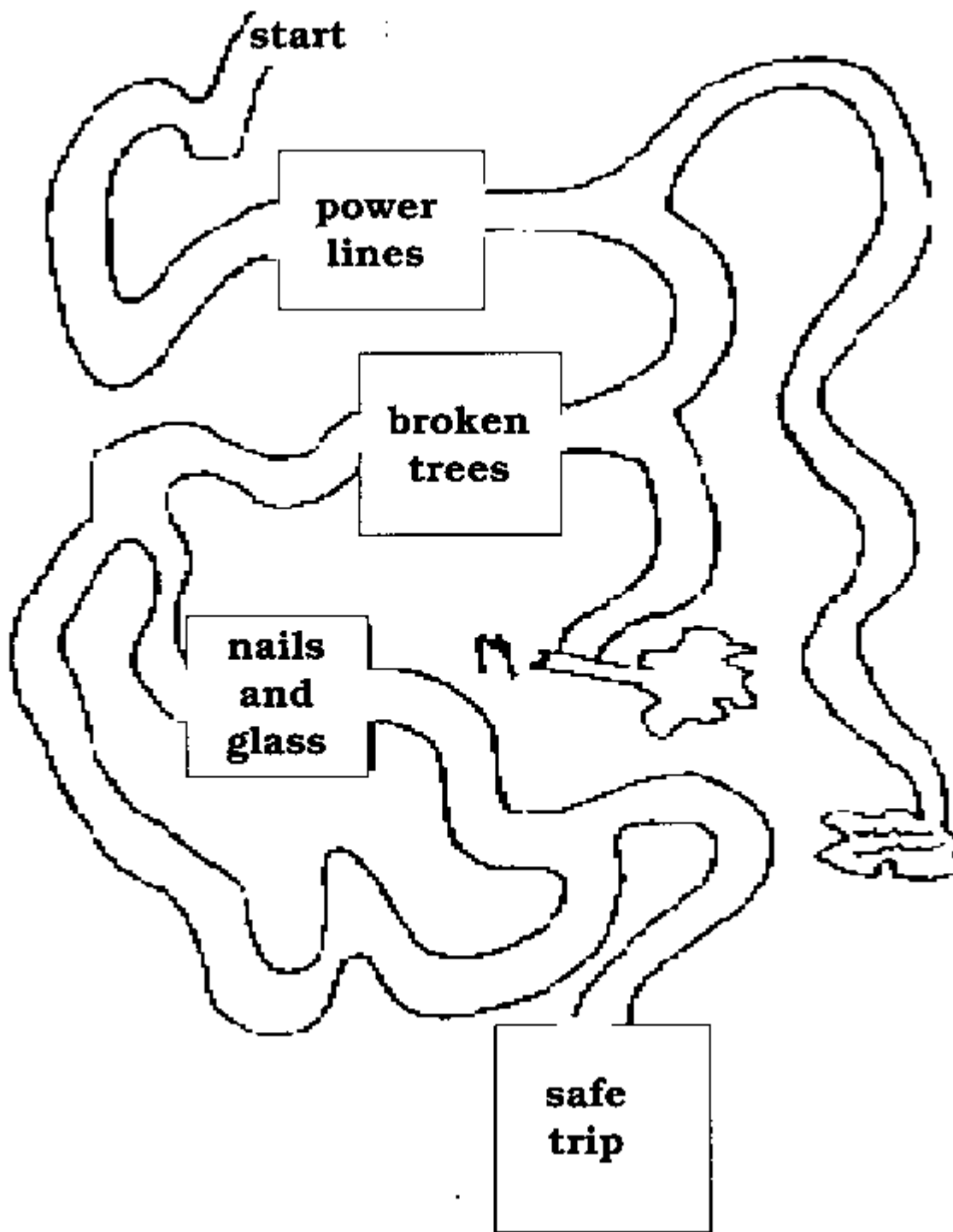
School Gym



**Sometimes you have to leave your home
and go to a shelter.**



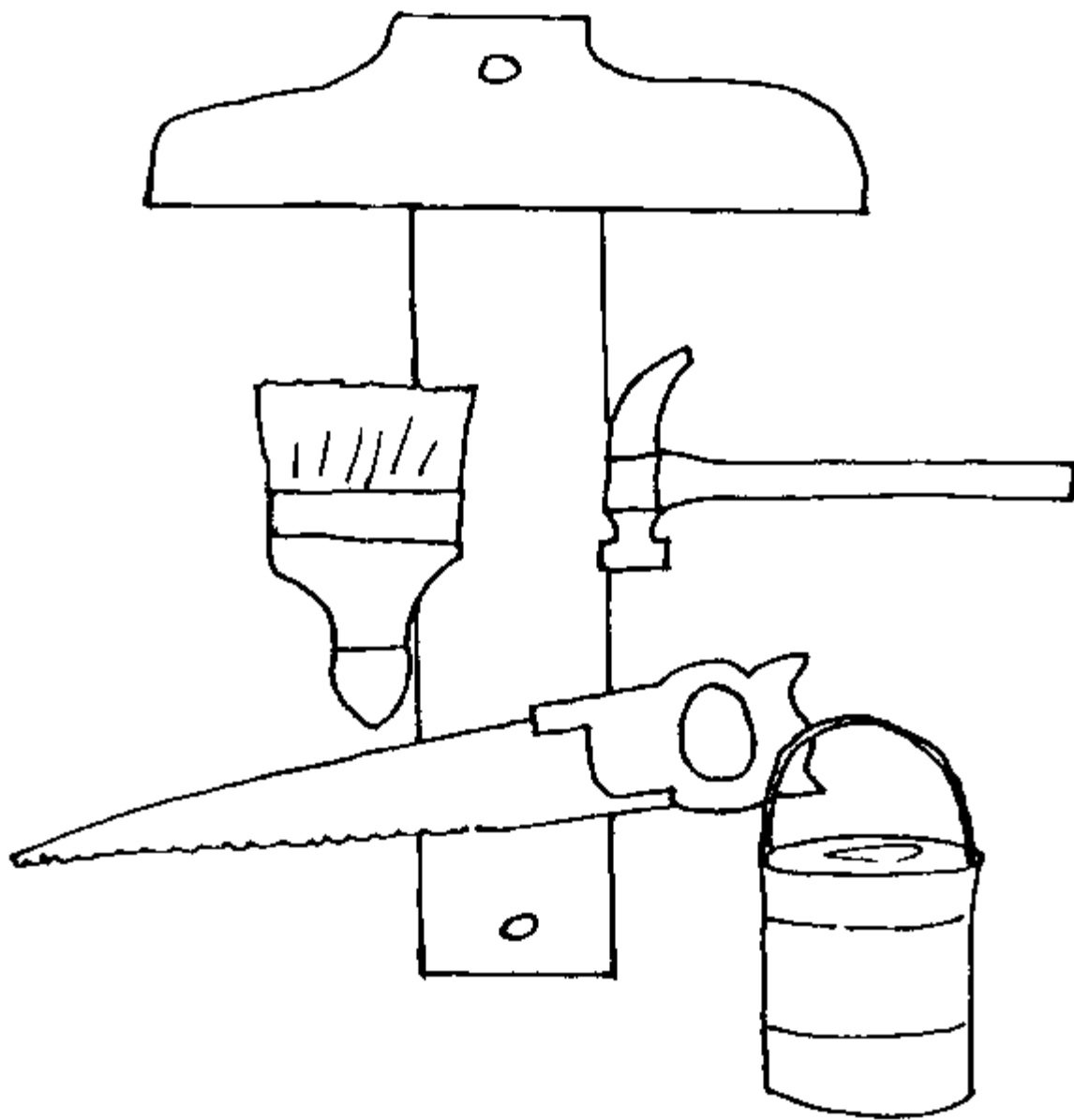
See what the hurricane did!



**After a hurricane, you must be careful
where you walk!**



We must work together to clean up.



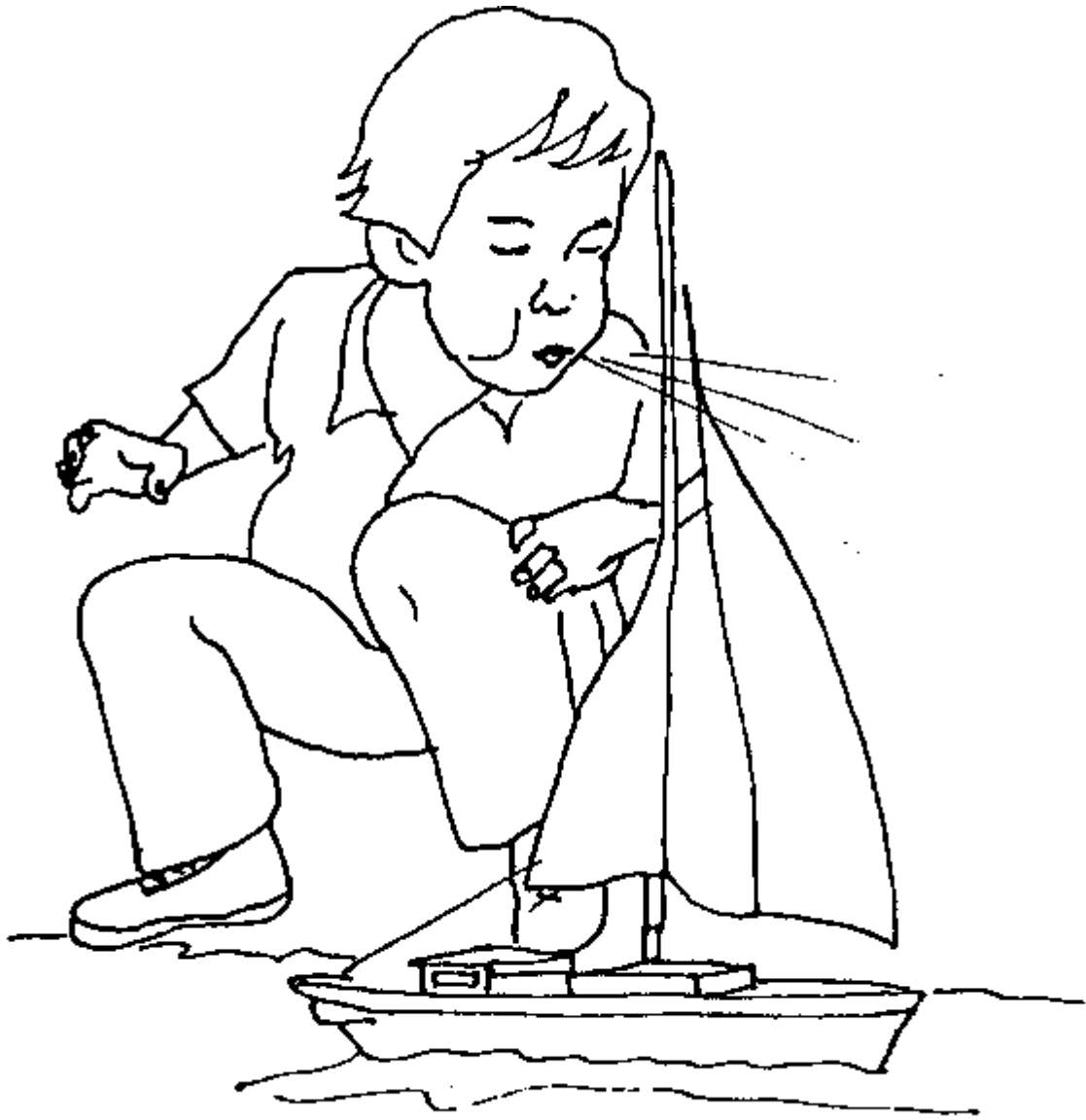
**Some people must build a new house, and
some must move.**



**At school we can talk about what we did
during the hurricane.**



**We can make new friends and share with
people who lost things.**



Most of the time wind makes us feel good.



**Rain makes the flowers, plants and trees
grow.**



**Talk to your parents or other grownups
about your feelings.**

Después de Pasar por La Experiencia de Un Huracán: Ayudando a Nuestros Niños a Sanar

Los niños pequeños, niños que comienzan a caminar, niños de dos o tres años, y hasta bebés y recién nacidos saben cuándo algo malo ha ocurrido y recuerdan las experiencias por las que han pasado. Después de pasar por una experiencia de miedo, vemos frecuentemente cambios en el comportamiento de los niños. Lloran más, no se quieren despegar de su mamá o su papá, no quieren que sus papás se aparten de ellos, hacen berrinches, se vuelven agresivos, tienen problemas para dormir, tienen miedo de cosas que antes no les molestaban, pierden habilidades que ya habían adquirido. Estos cambios son señales de que ellos necesitan ayuda. Estas son una de las maneras en que usted les puede ayudar:

Seguridad –Enfóquese primeramente en mantener la seguridad de su niño. Su niño se siente seguro cuando usted...

- Lo abraza y le permite estar cerca de usted.
- Le dice que usted lo va a cuidar y proteger cuando haya situaciones difíciles o que causan miedo. Con los niños que empiezan a hablar, use palabras simples como: "Papi está aquí"
- Manténgalo alejado de imágenes atemorizantes en la televisión o conversaciones alarmantes.
- Haga cosas familiares, rutinarias, como cantarle una canción que a ambos les gusta o contarle un cuento
- Hágale saber lo que está pasando y lo que ocurrirá (basado en la información que usted tenga)
- Establezca una rutina para que el niño sepa lo que va a ocurrir, al menos a la hora de dormir, como leer o contar un cuento, rezar o abrazarlo.
- Cuando usted tenga que salir de casa o alejarse de su niño, déjelo con personas que él conozca y con quien él se sienta seguro
- Díglele a dónde va y cuándo regresará.

Permítale Expresar sus Sentimientos

- Los niños a veces "se portan mal" cuando están preocupados o tienen miedo. Los niños suelen "comportarse mal" como una manera de pedir ayuda. ¡Recuerde! Cuando el niño tenga sentimientos difíciles, también tendrá comportamientos difíciles.
- Ayúdele a su niño a que identifique y describa cómo se siente: "feliz", "enojado", "con miedo", "triste". Díglele que está bien sentirse de esa manera.
- Demuéstrele a su niño la manera apropiada de comportarse, diciéndole: "Es normal sentirse enojado, pero no está bien que me pegues".
- Ayúdele a su niño a expresar su enojo sin lastimar, usando sus palabras, a través del juego o dibujando.
- Hable con su niño de las cosas buenas que están sucediendo que le ayudan a usted y a su niño a sentirse mejor.

Siga la iniciativa de su niño:

- Cada niño es diferente y por lo tanto necesitará cosas diferentes. Algunos niños necesitan correr y moverse mucho y otros necesitan que se les cargue o se les abrace.
- Escuche a su niño y observe su comportamiento para entender qué es lo que el niño necesita.

Deje a su niño contar la historia de lo que paso durante y después del huracán.

- Contar la historia de lo que ocurrió le ayudará a su niño a entender lo que pasó y a poder manejarlo mejor.
- Los niños usan el juego para contar su historia de lo que pasó. Por ejemplo, ellos pueden tirar bloques de madera o de plástico para demostrar los efectos del huracán.
- Ellos pueden usar animales de juguete y separarlos para expresar como ellos se separaron de usted.
- Participe con su niño en demostrar y decir lo que ocurrió paso a paso, y también en decir cómo se sintieron ambos.
- Al relatar la historia de lo sucedido, siga la iniciativa de su hijo. Cuando contar la historia sea difícil, su niño puede necesitar descansos tales como: correr, querer que usted lo abrace, o jugar algo diferente. Esto está bien. El regresará a contar la historia cuando esté listo.
- Puede ser difícil para usted ver o escuchar a su hijo contando su historia del huracán. Obtenga apoyo de otras personas si es muy difícil para usted escucharlo sin sentirse muy alterado o triste.

Establezca contacto: Conéctese con personas que le puedan brindar apoyo, con la comunidad, con su cultura y sus rituales

- Cosas simples y familiares como leer un cuento a la hora de acostarse a dormir, cantar, orar u otras tradiciones familiares le pueden recordar a usted y a su niño de su estilo de vida y puede darle esperanza.
- Si pertenece a un grupo, como de la iglesia, por ejemplo, trate de buscar maneras de reconectarse con ellos.
- Lo mejor que usted puede hacer para ayudar a su hijo es cuidarse a usted mismo. Obtenga apoyo de otras personas cuando lo necesite.

¡Su niño lo necesita! Esto es lo más importante que usted tiene que recordar.

- Tranquilice a su niño y asegúrele que usted estará con él.
- Es muy común que los niños estén muy apegados y no quieran separarse de usted y que se preocupen si usted se aleja de ellos.
- Si necesita dejar a su niño, hágale saber por cuánto tiempo se ausentará y cuándo usted va a regresar. Si es posible, déjele alguna pertenencia o foto suya, que el niño pueda tener en su posesión.
- Solamente estar con su niño, aun cuando no pueda arreglar lo que pasó, le ayuda a su niño.

Guia Para Los Padres Para Ayudar A Los Ninos Despues De Un Huracan

Estar en un huracan puede ser muy aterrador y los dias, las semanas y los meses despues de la tormenta pueden ser muy estresante. La mayoría de la familias se recuperan con el tiempo, especialmente con el soporte de familiares, amigos y de su comunidad. Pero cada familia podria tener diferentes experiencias durante y despues de un huracan y el tiempo de recuperacion dependeria en que aterrador fue la experiencia del huracan y/o la evacuacion y la intensidad de los danos y perdidas. Algunos familiares volveran a su rutina normal bastante rapido, mientras que otros podrian tener dificultades con los daños a sus lugares, pertenencias, cuidado medico y presion financiera. Algunos familiares podran tener perdida de un ser querido o una mascota. La recuperacion de la familia podria tambien estar fuertemente afectada por el cierre de las escuelas o cambio en el horario en las escuelas. Los niños podrian reaccionar de forma diferente a un huracan dependiendo de sus edades, nivel de desarrollo y experiencias previo. Los padres deberian esperar que cada niño podria reaccionar de forma diferente en una situacion y deben ser comprensivos y entender las diferentes reacciones.

Las reacciones de los niños a un huracan estan fuertemente influenciados por la forma en como los padres, maestros y otros encargados reaccionan durante y despues de la tormenta. Ellos frecuentemente se dirigen a estos adultos para obtener informacion, consuelo y ayuda. Hay muchas reacciones a los huracanes y otros aterradores eventos que son comunes entre los niños. Estos generalmente desaparecen con el tiempo, pero conociendo que estas reacciones son probables – y normal – pueden ayudar a los padres a estar preparados.

Reacciones Comunes

- Sensaciones de ansiedad, miedo y preocupacion de su seguridad y la de otros (incluyendo mascotas):
 - Los niños podrian aumentar sus miedos y preocupaciones de la separacion de sus seres queridos
 - Los niños mas pequeños se aferran a sus padres, hermanos y maestros
- Miedo al regreso de otro huracan
- Aumento de ansiedad a los avisos de futuros huracanes
- Cambios en la conducta:
 - Aumento en el nivel de actividad
 - Disminuye en el nivel de atencion y concentracion
 - Aumento en el nivel de irritabilidad
 - Se aislan
 - Arranques de ira
 - Agresion

- Aumenta en las quejas físicas (e.g. dolores de cabeza, de estómago, y otros dolores)
- Cambios en el rendimiento académico
- Tensión prolongada en los eventos del huracán (e.g. el hablar continuamente sobre el huracán, niños pequeños imitan eventos del huracán en el juego)
- Son más sensibles a los ruidos (e.g. al trueno, viento, y otros sonidos fuertes)
- Cambios en el patrón del dormir
- Falta de interés en actividades usuales, incluyendo el jugar con amigos
- Conductas regresivas en niños pequeños (ejemplo, hablar como un niño de menos edad, el orinarse en la cama, berrinches)
- Posibilidad de conductas de alto riesgo en adolescentes (ejemplo, abuso de sustancias, bebidas alcohólicas, conductas autodestructivas)

Como Puedo Ayudar A Mi Niño

- Hable con su hijo sobre lo sucedido. Esto le deja saber a su hijo de que está bien hacer preguntas y expresar sus preocupaciones. Porque posterior a un huracán surgen constantes cambios de eventos y los niños podrían hacer preguntas más de una ocasión. Los temas en cuestión podrían discutirse en más de una ocasión. Debería ser flexible y dispuestos a aclarar y contestar nuevas preguntas.
- El tomar el tiempo para estas conversaciones es de suma importancia. Una forma de hacerlo es utilizando una hora familiar, (como durante la hora de cena) para discutir lo que está sucediendo en la familia y en la comunidad. Debería contestar de forma breve y honestamente pero también preguntarles a su hijo por su opinión e ideas acerca de lo discutido

Cosas Que Yo Puedo Hacer Para Mi Mismo

- Cuidarse. Asegurarse que usted se está cuidando físicamente incluyendo el alimentarse y dormir bien y recibir el cuidado médico apropiado.
- Durante este tiempo los padres y otros encargados deberían escucharse y darse apoyo mutuamente.
- Posponga el hacer decisiones importantes. Evite la toma de decisiones innecesarias durante este período estresante posterior a un huracán que pudiese alterar su vida.
- El coger un tiempo libre. Trate de no hacer mucha limpieza después del huracán. Estas actividades incluyen el levantar artículos pesados o trabajar por largos períodos de tiempo. Usando la moderación al completar semejante trabajo puede reducir daños físicos .

Cosas Que Puedo Hacer Para Mi Hijo

- Servir de modelo. Cambios en las condiciones de vida pueden ser extremadamente estresante para los niños. Ellos imitan a sus padres en como manejar situaciones. El mostrar la calma durante tiempos caóticos es importante.
- Dele ánimo a sus niños. Anime a sus niños a que se cuiden ellos mismos fomentándole a obtener el reposo, dieta y ejercicios apropiados. Asegúrese que el niño tenga un balance entre las actividades físicas y de tranquilidad.
- Reforzarle al niño que está seguro. Tal vez tenga que repetirle esto al niño varias veces después del huracán. Usted podría pasar más tiempo con su hijo y permanecer unidos.

No importa si estan jugando afuera, leyendo juntos o simplemente mimandolos. Asegurase de decirle a sus niños que son amados.

- Mantenga rutinas. A pesar del caos y cambios los niños se sienten seguros y protegidos al tener una rutina y estructura. En lo que sea posible mantener las rutinas diarias (incluyendo la hora de comer, dormir, etc.)
- Mantenga la esperanza. Continúe las reglas familiares, como las reglas de buena conducta y respeto a los demás.
- Limite la exposición a los medios de comunicación. Es importante proteger a su niño de la exposición excesiva de imágenes del huracán, incluyendo las del periódico, internet o televisión.
- Calmar las preocupaciones de su hijo acerca de la seguridad de sus amigos. Al servicio telefónico ser interrumpido, la comunicación se dificulta. Tranquilice a su hijo comunicándole que sus amigos son cuidados por sus padres de la misma forma en que ellos son cuidados por usted.
- Comuníquese acerca de la recuperación de la comunidad. Asegúrele a su hijo de los esfuerzos hechos para restablecer los servicios de electricidad y agua, remover escombros y ayudar familias a encontrar vivienda permanente.
- Anime a sus niños a ayudar. Los niños al sentirse que están ayudando tienen mejor disposición de bregar con la situación y pronta recuperación. Encuentre oportunidades en que el niño pueda contribuir posterior al huracán. Dele tareas pequeñas y actividades familiares. Darle al niño actividades no relacionados con el huracán después de completar tareas de limpieza. Esto podría incluir juegos, leer un libro, jugar a las cartas, etc..
- Reduzca el aburrimiento. Muchos niños podrían quejarse de aburrimiento. Sus actividades diarias han sido interrumpidos como ver televisión, jugar en la computadora o jugar con amigos. Sus actividades extracurriculares como el deporte, baile, etc. han sido interrumpidos. Es importante en ayudar al niño en pensar en actividades alternas durante este tiempo. Trate de conseguir programas en la comunidad que tengan actividades que su niño pueda participar.
- Sea paciente. Los niños podrían beneficiarse de un poco más de atención y paciencia durante este tiempo. Ellos podrían necesitar recordatorios y ayuda adicional con las tareas del hogar y de la escuela una vez que comiencen las clases ya que podrían estar más distraídos.
- Dele apoyo a la hora de irse a dormir. Los niños podrían tener ansiedad cuando están alejados de sus padres, particularmente al acostarse. Primero, trate de pasar más tiempo con su hijo a la hora de acostarse en actividades como leyendo un libro. Está bien en que su hijo duerma con usted temporariamente, pero bajo la condición que entiendan que regresarán a su patrón normal de dormir en un futuro cercano.
- Monitorear las conversaciones adultas. Este consiente de lo que se dice durante y después del huracán. Los niños podrían malinterpretar lo escuchan y aterrorizarse innecesariamente acerca de algo que ellos no entienden.
- Busque ayuda profesional. Un profesional de salud mental podrá evaluar a su hijo si tiene dificultad más de seis meses después del huracán.
- Sea optimista. Aun en los momentos más difíciles, es importante identificar aspectos positivos y tener esperanza hacia el futuro. El tener una actitud positiva y optimista ayuda a los niños a tener una mejor disposición ante el mundo que les rodea. Esta actitud les ayuda a sobrellevar estos tiempos tan retantes.