## Helping Parents Help Their Children Gregory K. Moffatt, Ph.D.

## Play Notes Georgia Association for Play Therapy

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These past many weeks have been difficult for people across the country as we all have struggled to cope with the horrific events of September 11. Like me, I'm sure most of you have been inundated with phone calls from parents seeking direction in helping their children deal with these awful images and unfolding events. I suggest that we consider the following three primary issues.

Differential Intervention By Age. It is imperative that any advice or direction we give parents must first take the child's developmental age into consideration. Children younger than five or six years of age should be shielded from television footage and should not be involved in discussion about terrorism, plane crashes, and war. They are too young to process the information or to understand cause-and-effect relationships. If they see images of planes crashing or buildings falling – if they hear parents or newsmen talking about a terrorist who wants to kill Americans – children at this age will assume planes will crash into "their" buildings and that terrorists are hunting for them personally. Just as you cannot convince a young child that there are no monsters in the closet, once a child begins fearing plane crashes and terrorists, it will be very hard to comfort him or her. Preventing exposure to those issues can save both child and parent a lot of anguish.

For young children who have been exposed to these fears already, parents will need to spend extra hours with them, not only consoling and reassuring them, but also snuggling, reading together, and just being together. For children at this age, their primary sense of security is in the parent-child bond. The stronger that bond, the better a young child can cope with fear. Extra physical time together can strengthen that bond.

For children who are in grades one through five, even if the parent shelters them from current world events, they will hear rumors and gossip from their friends. What is worse, the gossip they hear will most likely be significantly distorted. Therefore, parents of children of this age should proactively discuss current events with their children, providing basic facts about what is happening. Advise parents to address questions about terrorists and war with children of this age like they would address questions about sex – just the basic facts and just enough to satisfy their curiosity. Do not lie to them about events and do not volunteer too much information, either. Children of this age need to be reassured that they are going to be OK and that the parent will protect them. When fear and anxiety arise, provide reassurance and information.

Children who are middle school aged or older need to be well informed. Parents should talk to their middle and high school aged children openly about the issues facing America. These children need to be comforted and assured that war on American soil is unlikely and that as horrifying as the plan crashes were, this has never happened in human history and hour government is working hard to ensure that it doesn't happen again. Terrorism has been around for decades and the chances of being a victim of a terrorist attack are very small. I used these events as an opportunity not only to address the facts with my own teenager, but also to address the resilience of Americans and the stability of our nation and our government. We talked about geography, history, religion, terrorism around the world, and politics, as well as how an adult handles extremely stressful times like these. This is a great opportunity for parents to teach a life skill – coping with stress.

Family Discussions. Family group discussions can be productive as long as very young children are not present. Like group therapy, the family members can express thoughts, fears, and anxieties as well as share strategies for dealing with those discomforts. The parent not only can act as moderator of the group by directing the discussion, but he or she can also participate. This demonstrates for children that we all have fears and worries. They will learn that life is not about the removal of all fear and anxiety, but effectively coping with fear and anxiety. Once again, however, let me remind the reader it is important that young children not be exposed to a "frightened parent."

For families who are involved in a religious body, a discussion of how one's faith can help overcome one's fears or concerns can be very helpful. Reading from holy literature as it pertains to specific concerns can be very comforting to those within a given faith if the references are not too abstract. For example, in the holy writings of Protestants, Catholics, and Jews, Psalms 46 directly and concretely addresses why the believer should not fear wars, tragedies, and disasters. Discussion within the family, whether as a whole group or in parent-child dyads, keep the lines of communication open and let children know that it is acceptable to talk about their concerns. Many parents are afraid to talk about a subject because they don't want to upset the child. Yet the child interprets the awkwardness and silence as an indication that talking is not acceptable. Encourage parents to provide opportunity for the child to talk about his or her thoughts.

Watch For Symptoms. Many children will deal with the tragedy of September 11 and subsequent events with minimal difficulty. There will be some, however, who will need professional intervention. It has been clearly documented that observers of a tragedy can easily suffer PTSD symptoms just as if he/she had experienced it in person. Encourage parents to be aware of the following symptoms: school problems, anger, sleep disturbances, bed-wetting, difficulty eating, mood swings, numbness, avoidance of the topic, diminished interest in normally pleasurable activities, difficulty concentrating, or a sense of foreshortened future. Many of these symptoms are directly reflective of DSM-IV TR diagnostic criteria for PTSD.

Discuss with parents what abreaction in play is and how to spot it, how to use it as a catalyst for conversation, and encourage them to save drawings that might provide valuable diagnostic information to a play therapist. Ensure that parents with whom you are working have several referral options if they need a play therapist. When I provide referrals, even if I suspect a parent will bring the child to me, I always provide several options for him/her so that the likelihood of the child getting professional intervention might be increased. I would rather the child see one of my competent colleagues than to see no one at all. With effective intervention, either provide at home by the parent or in the clinic provided by the therapist, children can overcome their worries and fear and grow stronger from this most difficult time in our history.