

**THROUGH THE EYES OF THE PARENT
HELPING CHILDREN COPE WITH TRAGEDY
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**FIRST IN A SERIES
RAISING BUDDHIST CHILDREN IN AMERICAN SOCIETY**

*Do not look back in anger,
or forward in fear,
but around in awareness.*

—James Thurber

The horror of September 11 has created an outpouring of patriotism juxtaposed with fear, anger and the need for revenge. At the same time, the potential for this to culminate in a teachable opportunity for the children of America is also present. This, in turn, can determine the very values our nation lives by for many generations to come.

In watching the nightly news it appears to me that a void has been carved in the hearts of young people. I see it in their bewildered faces and darting eyes. I've heard that the sound of thunder during a storm since the attack caused schoolchildren to panic in a New York classroom. I've seen teens leave class at Hollywood High, in an eerie quiet where before there would be banter and strutting. Some parents, with a cursory glance at the children, might proclaim, "They will be O.K." It's easy to think that children have very simple lives and that they would not be affected by a single traumatic experience.

Countless psychological studies state the contrary. This recent traumatic incident is replayed hundreds of times on television and in the print media. The news is distorted even more by playmates that have their own fears and are trying to make sense of all the anxiety being displayed by adults in their environment. So there is really no single source triggering the effects of a traumatic event in our modern high-tech society. It is a long way from the days of the Second World War when the local theater ran the news on a black-and-white newsreel and you saw it one time — usually weeks after the event took place.

At all stages of development in children's lives, sets of emotional receptors are constantly tuning in to their environment. Small children are like blank slates that absorb, categorize and interpret what is happening. From this process the human psyche determines whether the world is a safe or hostile place. This information also helps create a hierarchy of what is "good" or "bad." This mechanism is fed from the day of birth, well into early adolescence. The primary input of information comes from one's parents.

There is a saying, "A child learns over the shoulder of the mother." This refers to how women strap their infants on their bodies when they go about their daily activities. When the mother comes across a threatening person or situation, she reacts: her voice changes, her body stiffens. All of this is transmitted to the child on a visual and physical level. What the mother fears, the child will learn to fear; when the mother is angry with someone, the child will learn to feel uneasy around that type of person. The human species is always in this scanning and interpreting mode, especially in the early stages of development.

Today, we are fed with a daily barrage of graphic, disturbing images, and the children are watching our reaction. What are we going to do? How are we going to react? Rage? Revenge? Fear? Bigotry? Hopelessness? America will survive and be greater, but what lessons will we learn about ourselves and what will we transmit to our children? When faced with adversity

what do we do?

Children ask a lot of tough questions about life in general. They do not have a “politically correct” filter that screens out uncomfortable material. Sometimes their questions are actually painfully blunt statements that cause us to think. The questions about terrorism and war are some of the most difficult to answer. Because of the graphic images in the media, parents are concerned about exposing their children to the details of this event. On this subject there is almost universal agreement amongst professionals: listen to your children, speak to your children. Listening is the first step to resolving conflict. By listening, parents are modeling behavior for their children that they can put into use for the rest of their lives. There is a difference between listening to what you want to hear from your children versus what they are actually saying; hearing is physiological while listening is psychological. Try to listen on many levels rather than just to the words.

Listening to your children at this uncertain time in America is crucial to their sense of self and emotional well being. This point in time will impact their view of the world and its people. And because our children are looking to us for cues, we must then speak to them, striving to reconcile the dilemma of first advocating the importance of nonviolence as Buddhists, while explaining terrorism, and why armies are maintained and the act of going to war. No small task, and especially difficult to translate to a young mind. But parents who try, even if they feel inadequate to the task, play a far more positive role than parents who avoid these difficult issues.

A young mother came up to me at a recent Victory Over Violence rehearsal in Los Angeles just five days after the terrorist attack. She was concerned that there were no apparent signs of trauma in her five-year-old child’s behavior and wondered if there was something more serious brewing beneath the surface. The answer: maybe or maybe not.

Children will react to the recent events differently according to their age and their general personality. A four- or five-year-old will see the endless replay of the jet crashing into the World Trade Center and think it’s a new event each time. Children can easily be over-stimulated. They may watch cartoons or play video games and also catch glimpses of the tragedy. They may merge this information and be confused with what is real and what is not. Violent cartoons or video games may trigger fear, where before they were considered funny and enjoyable. Children also may feel extremely anxious just by watching their parents looking fearful at the TV. All of this merging together can be quite overwhelming to a preschooler’s young mind. Regressive behaviors such as bed wetting, clinging to parents or withdrawn behavior may indicate some serious reactions to the recent events.

Primary school-age children can tell the difference between cartoons and news events but still might mix up a movie such as Independence Day with the recent terrorist event. Also the influence of peers and their fears is a strong factor.

Middle school youth want some action to take place to reduce the fear they are feeling, but they may feel powerless and look to adults to do something.

High school youth usually look at the big picture and its impact on them, and the possibility of being part of the armed services, derailing college plans. They might become more self-reflective about life itself with no reassuring clear-cut answers. The use of alcohol and drugs could become more prevalent.

Within each of these very broad categories are thousands of variations according to a child’s temperament. Some children, regardless of age, tend to be more fearful or withdrawn. The national anxiety may intensify these traits.

With all of this information, where do we start as parents? First of all, know that communication is essential at this time. This does not mean to lecture or interrogate our

children about what they are feeling. Let them know what you are feeling and what you are doing about it. Let them know you are chanting, doing volunteer work, giving blood, etc. Ask them if they can think of anything they might do at this time and help them accomplish it. Along with this, tune into their mood. Have there been any changes in behavior since the terrorist attack?

A behavior change is not necessarily a bad thing. We all have to grieve, be angry, cry, be fearful; but then we need to move on and rebuild our psyches and our country. With a traumatic event such as this it is somewhat normal for a person to experience what is called acute stress disorder (see sidebar). It will be of more concern if after five weeks there are still signs of stress. This is called post-traumatic stress disorder (see sidebar). If these signs become present, it is important to seek professional help.

Now is also the time to talk to our children about the tenets of Nichiren Daishonin's Buddhism and SGI President Ikeda's view for youth in the twenty-first century. President Ikeda states in his book *The Way of Youth*: "Those of you who live in the United States have a unique opportunity. America offers you freedom on a grand scale, but at the same time it has its dark clouds. With all its good points and bad points, in a way it reflects the state of our present world as a whole. So the problems you who live in America face are in that sense the problems of all people everywhere. And your success is the hope not only of America but also of the entire world.

"The problems you confront in your young years can hardly be solved in a day. But no matter how hopeless they seem, if you face up to them with courage, I am confident you can overcome them in time.

"Keep on learning, keep on trying, keep on till you have turned defeat into final victory — that is the true way of youth."

Positively speaking, we now have a historic window of opportunity to educate the next generation about the dignity of life. George Bernard Shaw once said, "Perhaps the greatest social service that can be rendered by anybody to the country and to humankind is to bring up a family." This is at the very core of our peace movement as SGI Buddhists. World peace begins with the parents who educate their child about the dignity of human life. However, at this time in our nation's history, it would be a mistake to parrot empty slogans or rhetoric. Guiding youth must manifest in the day-to-day actions and reactions to ever-changing world events. The best tool for peace-builders is dialogue — whether at the level of nations or families. As President Ikeda wrote in response to the recent terrorist attacks: "The importance of dialogue cannot be overestimated." The danger is obvious; the opportunity is subtle and fleeting. Our children are watching and listening.

CRITERIA FOR ACUTE STRESS DISORDER

- A.** The person was exposed to a traumatic event in which both of the following were present:
 - 1.** The person experienced, witnessed or was confronted with an event(s) that involved actual or threatened death or serious injury, or a threat to the physical integrity of self or others; and
 - 2.** The person's response involved intense fear, helplessness or horror. [In children, this may be expressed as disorganized or agitated behavior.]
- B.** Either during or after the distressing event, the person has three or more of the following symptoms:
 - 1.** A subjective sense of numbing, detachment, or absence of emotional responsiveness;
 - 2.** Reduced awareness (e.g., "being in a daze");
 - 3.** Derealization;
 - 4.** Depersonalization;
 - 5.** Dissociative amnesia.

- C. Traumatic event is persistently re-experienced in at least one of the following ways: (e.g., recurrent images, thoughts, dreams, flashbacks or distress on exposure to reminders of the traumatic event).
- D. Marked avoidance of stimuli that arouse recollection of trauma (e.g., thoughts, feelings, conversations, activities).
- E. Marked symptoms of anxiety (e.g., difficulty sleeping, irritability, poor concentration, hypervigilance, exaggerated startle response).
- F. Disturbance causes significant impairment of social, occupational or other important areas of functioning.
- G. Disturbance lasts for a minimum of two days and a maximum of four weeks, and occurs within four weeks of the traumatic event.
- H. Disturbance is not due to a substance (e.g., drug abuse, medication).

CRITERIA FOR POST-TRAUMATIC STRESS

- A. The person was exposed to a traumatic event in which both of the following were present:
 - 1. The person experienced, witnessed or was confronted with an event(s) that involved actual or threatened death or serious injury, or a threat to the physical integrity of self or others; and
 - 2. The person's response involved intense fear, helplessness or horror. [In children this may be expressed as disorganized or agitated behavior.]
- B. The traumatic event is re-experienced in one or more of the following ways:
 - 1. Recurrent distressing recollections of the event, including images, thoughts or perceptions; [In young children, repetitive play expressing themes or aspects of the trauma.]
 - 2. Recurrent distressing dreams; [In children, there may be frightening dreams without recognizable content.]
 - 3. Acting/feeling as if the traumatic event were recurring (e.g., a sense of reliving the experience, illusions, hallucinations, flashbacks). [In young children, trauma-specific reenactment may occur.]
 - 4. Intense psychological distress at exposure to internal or external cues that resemble the trauma (e.g., violent video games or cartoons); or
 - 5. Physiological reactivity on exposure to internal or external cues that resemble the trauma.
- C. Persistent avoidance of stimuli associated with the trauma and numbing of general responsiveness, as indicated by 3 or more of the following:
 - 1. Avoiding thought, feelings, or conversations associated with the trauma;
 - 2. Avoiding activities, places or people associated with the trauma;
 - 3. Inability to recall important aspects of trauma;
 - 4. Diminished interest in significant activities;
 - 5. Feeling detached or estranged from others;
 - 6. Restricted range of affect (e.g., unable to have loving feelings); or
 - 7. Sense of foreshortened future (e.g., doesn't expect a career, marriage, children or normal life span).
- D. Persistent symptoms of increased arousal as indicated by two or more of the following:
 - 1. Difficulty falling or staying asleep;
 - 2. Irritability or outbursts of anger;
 - 3. Difficulty concentrating;
 - 4. Hypervigilance; or
 - 5. Exaggerated startle response.

**In certain cases there is a delayed onset where symptoms do not begin until 6 months after the trauma.*

— adapted from DSM-IV, American Psychiatric Association

For more information: www.mentalhealth.com or www.aboutourkids.org