

Coping with Crisis--Helping Children With Special Needs

Tips for School Personnel and Parents

National Association of School Psychologists

When a crisis event occurs—in school, in the community or at the national level—it can cause strong and deeply felt reactions in adults and children, especially those children with special needs. Many of the available crisis response resources are appropriate for use with students with disabilities, provided that individual consideration is given to the child's developmental and emotional maturity. Acts of healing such as making drawings, writing letters, attending memorial ceremonies and sending money to relief charities are important for all children.

How adults express their emotions will influence the reactions of children and youth. Further, children with disabilities (e.g., emotional, cognitive, physical, etc.) will react to the trauma and stress based on their past experience and awareness of the current situation. Caregivers and school personnel who know a child well can best predict his or her reactions and behaviors because they have observed the child's response to stress in the past.

Triggers and Cues: Children with disabilities generally have specific "triggers"—words, images, sounds, etc.-- that signal danger or disruption to their feelings of safety and security. Again, these are specific to each child but come from past experiences, association with traumas, seeing fear in adults, etc. Children tend to develop their own "cues" in response to these trigger events, warning signals that adults can "read" to understand that the child is having difficulty. These cues may include facial expressions or nervous tics, changes in speech patterns, sweating, feeling ill, becoming quiet or withdrawn, complaining or getting irritable, exhibiting a fear or avoidance response, etc.

When adults anticipate these triggers or observe these cues, they should provide assurance, support and attention as quickly as possible. If adults miss these cues, children may escalate their behavior to a point where they completely lose control. If this occurs, adults need to remove the child to the safest place available, allow the child to calm down, and then talk to the child about the triggering fears or situation.

Because parents and teachers see children in different situations, ***it is essential that they work together to share information about triggers and cues.*** This is best done on a regular basis, such as during the IEP meeting or a periodic review meeting, rather than in response to a crisis. However, when a crisis occurs, parents, case managers and others who work with the child should meet to briefly discuss specific concerns and

how to best address the child's needs in the current situation.

In the context of prevention and the development of effective IEPs, some children need specific training and interventions to help them to develop self-control and self-management skills and strategies. During the teaching process, these skills and strategies should be taught so they can be demonstrated successfully under stressful conditions (e.g., school crises, terrorism, tornado) so that children can respond appropriately and effectively. Adults should still expect that children will demonstrate their self-control skills with less efficiency when confronted by highly unusual or stressful situations.

Tips for Special Populations

All children benefit from concrete information presented at the proper level of understanding, and maturity. Helping all children to stop and think about their reactions and behavior, especially with regard to anger and fear, is recommended and often necessary in order for them to make "good choices." For some students with behavioral disorders, training in anger management, coping and conflict resolution skills are important additions to a comprehensive intervention program. The following information addresses specific, additional considerations for children with special needs.

Autism: Children with autism pose very difficult challenges to caregivers. It is difficult to know how much information a nonverbal child is absorbing from television and conversations. It is important to pay close attention to the cues they may provide regarding their fears and feelings and provide them with ways to communicate. Remember that any change in routine may result in additional emotional or behavioral upset. If the child's environment must be changed (e.g., an evacuation, the absence of a parent), try to maintain as much of the normal routine (e.g., meals, play, bedtime) as possible—even in the new environment. In addition, try to bring concrete elements from the child's more routine environment (e.g., a toy, blanket, doll, eating utensils) into the new environment to maintain some degree of "sameness" or constancy.

Many students with autism can be helped to comprehend behavior they observe but poorly understand through the use of "social stories." The parent or teacher's explanation of what is happening can be reduced to a social story. A storybook can then be kept by the child to help reinforce the information on a concrete, basic level. For further information on the use of social stories visit the Autism Homepage at <http://members.spree.com/autism/socialstories.htm>.

Verbal children with autism may state a phrase repeatedly, such as, "we are all going to die." This type of statement will serve to isolate the child socially from his peers and other adults. To help the child avoid such statements, it will be necessary to provide very concrete information about the situation and appropriate ways to react and respond that are within the child's skill level.

Cognitive Limitations: Children with developmental or cognitive impairments may not understand events or their own reactions to events and images. Teachers and caregivers need to determine the extent to which the child understands and relates to the traumatic event. Some lower functioning children will not be able to understand enough about the event to experience any stress, while some higher functioning children with cognitive impairments may understand the event but respond to it like a younger child without disabilities.

Overall, children with cognitive limitations may respond to traumatic events based more on their observations of adult and peer emotions rather than the verbal explanations that they may receive. Discussions with them need to be specific, concrete and basic; it may be necessary to use pictures in explaining events and images. These children will need concrete information to help them understand that images of suffering and destruction are in the past, far away (if true) and that they are not going to hurt them. A parent may offer words of reassurance such as, "We are lucky to have the Red Cross in our community to help all the families who were hurt by the flood;" "The boys who brought the guns to school are in jail, they can't hurt anyone else now."

Learning Disabilities: Students with learning disabilities (LD) may or may not need supports that are different from students without disabilities, depending upon their level of emotional maturity and ability to understand the concepts discussed. Many students with LD are able to process language and apply abstract concepts without difficulty, while others have specific deficits in these skills. In particular, some students with LD interpret very literally; therefore teachers and parents need to choose their words carefully to insure the child will not misinterpret. For example, even referring to terrorism as "acts of war" may confuse some children who interpret language literally; they may envision foreign soldiers, tanks and fighter planes attacking America.

If your child or student appears to have difficulty following the news reports and class discussions of the traumatic events and their aftermath, reinforce verbal explanations with visual materials; use concrete terms in discussion; check for understanding of key vocabulary. Remember that some students with LD have difficulty with time and space concepts, and may be confused by what they see on television-- they may have difficulty understanding what happened when, what is likely to happen next, etc. They may also be uncertain as to where these events took place and might benefit from looking at simple maps.

Some students with LD have difficulties with social skills and self-management, and may need additional instruction in anger control, tolerance of individual differences and self-monitoring. Additionally,