Office of Superintendent of Public Instruction
Tough Topics Series
Learning and Teaching Support
Issue 2

Helping Kids Cope with Stress

While some stress in life is normal and even healthy, kids today seem to be confronted with a myriad of experiences that can create tension and make coping with life a challenge. Common examples of these stressors include: lack of basic needs (food, clothing, and shelter), divorce, death, illness, incarceration, foster care placement, family substance abuse, domestic violence, extended separation from a parent or loved one, or physical, sexual, emotional abuse.

Spectrum of Stressors

Ordinary → → → → **Severe**

- At the ordinary end of the spectrum are events which occur to most children in our society and for which there are fairly well-defined coping patterns.
- A short distance along the spectrum are the stresses which occur when children have only one parent in the home or when they live in multiple-parent, multiple dwelling households.
- Toward the severe end of the spectrum are stresses caused by extended separation of children from their parents or siblings.
- At the severe end of the spectrum are those stresses that are long lasting and require kids to make major behavioral, emotional, and/or personality adaptations in order to survive.

Signs of Stress

	Behaviors	Reactions	Communications	Interaction
Infants to 5 years	Fussiness; uncharacteristic crying; neediness; generalized fear; heightened arousal and confusion	Helplessness; passivity; avoidance of stress related reminders; exaggerated startle response; regressive symptoms; somatic symptoms; sleep disturbances; nightmares	Cognitive confusion; difficulty talking about stressors; lack of verbalization; trouble identifying feelings; unable to understand events; anxieties about change/loss	Clinging; separation fears; grief related to abandonment by caregivers
6-11 Years	Spacey; distracted; changes in behavior, moody, personality; regressive behavior; aggressive behavior; angry outbursts	Reminders trigger disturbing feelings; responsibility; guilt; safety concerns; preoccupation; obvious anxiety; general fearfulness; somatic symptoms; sleep disturbances; nightmares	Confusion and inadequate understanding of events; magical explanations to fill in gaps of understanding; withdrawn; quiet	Worry and concern for others; separation anxiety; repetitious traumatic play and retelling of events; loss of ability to concentrate; school avoidance; loss of interest in activities
12-18 Years	Self conscious; sadness; depression; stress driven risk-taking and acting out; recklessness; substance use/abuse	Efforts to distance from feelings; wish for revenge and action-oriented responses; life threatening re-enactment; decline in school performance; sleep and eating disturbances	Increased self-focus; social withdrawal; avoidance	Flight into driven activity/involvement with others OR retreat in order to manage inner turmoil; rebellion at home and school; abrupt shift in relationships

Age Specific Strategies to Help Kids Cope with Stress

Infant to 2 ½ Years

Maintain calm atmosphere; keep familiar routines; avoid unnecessary separations; minimize exposure to reminders of stress; expect temporary behavior regression; help give simple names to big feelings; talk briefly and openly about stressful event; provide soothing activities.

2 ½ to 5 Years

Maintain familiar routines; do not introduce new and challenging experiences; avoid nonessential separations; tolerate retelling of stressful events; help name strong feelings during brief conversations; respect fears; expect regressive behavior; protect from re-exposure to stressful events; provide opportunities and props for play; if nightmares, explain they aren't real to help subside.

6-11 Years

Listen and tolerate re-telling of events; respect fears; give time to cope; increase awareness and monitor play; set and enforce limits; permit to try new ideas to deal with fears and feel safe; reassure that all feelings are normal after stressful events.

12-18 Years

Encourage discussions with peers and trusted adults; reassure that strong feelings (guilt, shame, embarrassment, desire for revenge) are normal; provide healthy outlets for emotions; encourage spending time with supportive friends/peers; help find activities that offer opportunities to experience mastery, control, and self-esteem.

Tips for Educators

Educators are often faced with the challenge of supporting kids who are coping with stressful life circumstances. The guidance provided by an educator can make the difference in whether or not kids feel completely overwhelmed by their stressors or are able to develop healthy emotional behavioral and psychological coping skills. The following are helpul strategies to assist educators in supporting kids coping with stress:

Be a role model – Set an example and keep in mind that kids learn from watching the adults in their lives.

Connect with kids – Pay attention to their fears; respect their wish to not talk until ready; help them keep stressors in perspective.

Foster open communication – Speak in terms that are easy to understand; reassure and provide opportunities for them to express their thoughts and concerns in safe ways; answer questions as openly and honestly as possible.

Maintain consistency – Expect and respond to changes in behavior; maintain consistent academic and behavioral expectations.

Foster resilience – Help kids interpret what has happened and make sense of it; help them explore positive ways of coping with fears and anxieties.

Be alert to special needs – Spend extra time with kids if necessary; make referral to school or community counseling for additional support if needed.

Open lines of communication with parents and caregivers – Coordinate information between school and home; provide parents with helpful suggestions and information about available school and community resources.

For more information: http://www.k12.wa.us/OperationMilitaryKids/

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Information for this article adapted from *Helping Children Cope with Stress* by Avis Brenner; Operation: Military Kids *Ready, Set, Go! Training Manual*, 4-H Army Youth Development Project; and SAMSHA National Mental Health Center, www.mentalhealth.samsha.gov