## Effects of War on Children and Child Development

Conclusions from Diverse World Literature by Ann Masten

• War and other massive trauma experiences can have devastating effects because of effects on parents, survival needs, and harm to fundamental systems that nurture and protect child development

• When danger and devastation end and basic needs are met, children show remarkable resilience and recovery from disaster

• Responding to trauma is normal; it is not uncommon for severely traumatized children to appear stunned, numb, unresponsive, mute, hyper-vigilant, hyperactive, or frantic

• The greatest effects on children occur when parents are killed, harmed, terrified, or unable to function and when the child experiences violent harm to self or loved ones, threats of such violence, or engages in harming others

• Responses will vary by the developmental level and personality of the child as well as the situation

• Effects vary by degree of exposure, degree of damage to basic systems for human development, and degree of understanding by the individual child; as well as previous traumatic experiences

• For young children, quality of care is the most important protective factor; caregivers play a critical shielding role as does the lack of understanding or awareness of the full meaning of the situation

• Younger children may show more dramatic immediate effects, particularly if there is temporary separation from parents and other attachment figures, but the lasting impact may be greater for older children and adolescents because their exposure to trauma may be far greater

• For older children, the nature and degree of trauma exposure is also critical, as is their greater understanding of the situation

• Children of all ages will experience anxiety, and in some cases panic, if separated from the people who represent their "secure base" ~ usually parents; older youth (and even "emerging adults" around 18 to 25) will seek contact too, though in more mature forms

• Adults sometimes underestimate the impact of trauma on children and youth

• Resilience is facilitated by meeting survival needs and restoring basic protective systems for child development, by safety, quality parenting, daily routines, opportunities to go to school and play, etc.

• Agency and opportunities for meaningful action are increasingly important as children grow older

## **Examples of Age Differences**

Compiled by Ann Masten

## **Vulnerabilities, Common Symptoms Assets and Protective Factors Infants & Toddlers** Very sensitive to quality of care Responsive to adult care Severe separation distress, crying Comforted by attachment figures Clinging, sleeping and eating problems Likely to elicit adult intervention Sensitive to emotions of caregiver Immaturity limits exposure *Key to intervention: Good care from consistent parent figures* Preschoolers Sensitive to quality of care & change Responsive to adult care Regression & loss of new skills Respond to routine, stability Tolerate some separations Believe they cause bad things to happen Nightmares, fearfulness, vigilance Can talk, understand stories Sensitive to visual images of horror Can express through drawing Play shows trauma themes Can play more independently *Keys to intervention: Good care, stability, routines, play* Awareness of death and injuries Larger network of supports Young Schoolchildren Can gather & use information Growing capacity for worrying Disturbing thoughts and images Hero and rescue fantasies Nightmares, sleeping problems Can seek help more effectively Mutilation and bodily-harm fears Can help others more Anger, aggression, irritability Better at self-regulation Noncompliance, acting out Friends Headaches, stomach aches Structured activities School problems School resources Depression, withdrawal *Keys to intervention: Safety, monitoring, stable care & routines,* opportunities for self-efficacy, control, prosocial activities, peers Much greater exposure risk Adolescents Greater independence, mobility Understanding of now, future Cognitive skills Capacity for hopelessness, despair Physical skills and strength Sensitivity to disillusionment Passion for causes, common good Aggression & antisocial behavior Friends are more capable Risky & reckless behavior Romantic partners Disturbing images, thoughts More means of self-expression Depression risk higher More collective action School problems

Keys to intervention: Meaningful involvement in important tasks; prosocial peer activities; opportunities for expression and validation; taken seriously by adults