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Article 5

Children's Responses to Disaster From Moral and Ethical Reasoning Perspectives

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Hurricane Katrina, the most destructive and costly natural disaster in history, resulted in the largest displacement of individuals in U.S. history (FEMA, 2006a) and forced more than 270,000 people into shelters along the U.S. Gulf Coast. According to FEMA reports (FEMA, 2006b), 113,000 individuals in Alabama applied for federal and state assistance and about 40,000 in the state sought services at FEMA centers. Herein, we respectfully disclose the reactions of third-grade children in Mobile, Alabama to Hurricane Katrina one month following the storm. Children in Mobile represent families that experienced a wide range of losses as a result of the hurricane and thus offer a unique snapshot of children's cognitive processes following disaster.

The College of Education (COE) at the University of South Alabama (USA) partnered with the Mobile County District School system and other agencies immediately after the hurricane to facilitate comprehensive recovery efforts for the school system. This study's authors were intensely involved in the collaboration. Millner was the Chair of the COE Hurricane Katrina Disaster Task Force and Clark interrupted her sabbatical at USA to serve as a school counselor

and resource point person in the school system. One of the first collaborative efforts between the Mobile County School System's Student Services System and COE was the co-sponsorship of a crisis intervention program for school counselors, social workers, nurses, and other social agents who work in the school system as well as school counselors from neighboring Mississippi counties.

The purpose of this study was to understand children's lived experiences following a major disaster. The findings could have immediate relevance for school professionals following a disaster.

Method

Procedure

Immediately following the presentation and one month subsequent to Hurricane Katrina, a school counselor used an intervention she learned from the previously described crisis intervention program. After soliciting the permission of teachers in five third grade elementary classrooms, she asked the children to write "Dear Katrina" letters as part of a language arts lesson in their unit on writing a friendly letter. The archival data was given to the authors two weeks following the activity. IRB approval was obtained to review retrospective data, and both student assent and parental/guardian consent forms were collected.

Participants

Of the 122 children who participated, 100% provided consent. Five children were excluded because their gender category was unspecified, resulting in a sample of 117 (53 females; 64 males).

Data Analyses

This work is approached from both a qualitative and quantitative perspective, an appropriate method for human development research (Yoshikowa, Weisner, Kalil, & Way, 2008). Data analyses took over 18 months. During this time, the authors maintained a research journal to monitor personal assumptions and

blind spots. The data was coded and re-coded according to emerging themes. The study has ample process validity and reliability. The materials were analyzed by each researcher over 100 times over a span of 18 months.

Quantitative analysis added to the depth and breadth of identified qualitative themes. To analyze gender differences, chi square analyses were run on all variables greater than 15% frequency. An alpha level of .05 was set.

Results and Discussion

Piaget's Cognitive Theory of Development

From the outset of this analysis, Piaget's cognitive theory of development (1973) rose to the forefront. The first of Piaget's stages, the pre-operational stage, usually ends by about ages six or seven and is characterized by concepts such as egocentrism, i.e., maintaining the perspective of self (Siegel, Brodzinsky, & Golinkoff, 1981). One-fourth of the letters demonstrated egocentrism, e.g., *I hate you for destroying the second and third graders field trip* (Respondent 50).

The concrete operations stage, which appears at about ages six or seven, is basically a system of internalized actions which permits the child to do in his or her mind what previously could have been done only in a three-dimensional plane. In the concrete operational stage, children are learning vocabulary and forming concepts based on experience. Their descriptions bear this developmental process: *You are a big pimple planted on earth* (Respondent 10). Approximately 85% of the third graders in this study fell into the concrete operations stage using concrete descriptions to explain their reactions.

Moral Reasoning

Moral reasoning, the second major theme to emerge, relates to the ways individuals think about and justify their behavior (Kohlberg, 1984). Kohlberg (1966, 1984) classified moral reasoning

into six stages that become increasingly less egocentric and more abstract over time and his theory focused primarily on justice. Kohlberg's stages are related to Piaget's cognitive development theory in that individuals cognitively struggle with moral issues and their reasoning changes in developmental sequence that allows them to eventually resolve moral conflicts more effectively.

During stages 1 and 2, the preconventional level, children's thinking is very concrete and self-focused. Forty-five percent of this study's children reflected self-interest, e.g., *Why did you take my power away so I couldn't play my playstation 2?* (Respondent 106). Another hallmark of stages 1 and 2 reasoning is the focus on obeying authority, and therefore rules, for the purpose of avoiding punishment. Nine percent of the children believed that the hurricane should be punished as suggested by the following: *How dare you turn off the power for almost a week! How would like it if tore some of your roof off?! You smashed a ton of cars. Can I come over and pumbel your yard?* (Respondent 55).

Stages 3 and 4 are found at the conventional level, embody interpersonal cooperation and include a "good boy-good girl" line of reasoning. Twenty percent of the children viewed the hurricane as "bad" or "mean." For example, *Don't you know how mean that was for you to do that? Very mean!* (Respondent 5).

Stage 5 is the social-order-maintaining orientation and involves respect for societal laws as a means to ensure societal order for all. Stage 6, the final stage, is the universal ethical principle orientation. This highest stage is defined by ethical principles of conscience and global reasoning that consider all human beings with respect and consideration. Seven children provided examples of what could be considered higher levels of moral reasoning. For example, one child wrote: *During the Hurricane several people lost there loved one's. I don't really hate the hurricane because hurricans are a part of life. I know that Katrina was for a resion. And I know that the world will be back together soon! P.S. Hopefully, It was for a reasian!* (Respondent 42).

Concern for others was a major theme of moral reasoning in

this study and is also applicable to Gilligan's (1977, 1982) theory of moral reasoning care. As another way to view the children's expressions of concern for others, Gilligan, unlike Kohlberg (1966, 1984), emphasized (a) focus on one's own needs, (b) focus on self-sacrifice associated with concern for others' needs, and (c) balance of one's own and others' needs. In this study, 78% of the children identified concern for others. Moreover, there was a statistical difference in the frequency of females' expressions of concern for others compared to those of males: females were more than one and one-half times more likely than males to express concern for others.

Empathy-Related Responses

The third theoretical body of research that emerged in our analyses was associated with expressions of empathy and sympathy. Empathy is the comprehension of another's emotions and the experience of a feeling similar to what the person might be feeling (Eisenberg, 2005). Empathy can occur vicariously, that is, by either direct or indirect exposure to another's situation. Sympathy, an emotional response in reaction to another's emotional state or condition, may or may not reflect the other's emotions accurately, but does involve concern for others or sadness (Eisenberg, Wentzel, & Harris, 1998).

Consideration of others reflects a higher level of moral reasoning. Empathic responses were reflected in 37% of the children's responses as demonstrated by the following: *Your not what we needed. Now were just sad and hurt! You killed thousands of people! Gas prices are higher, with people needing gas to be lower! It was $2.45, not it's $5.95! People need help and God. No family needs this, all we need to do is hope, pray, praise, love, help and think of others!* (Respondent 83).

Both empathy and sympathy are a result of cognitive perspective-taking and extend this process (Eisenberg et al., 1998). Reasoning about the rightness or wrongness of an action reflects various levels of cognitive and moral reasoning but becoming personally distressed through feeling empathy or sympathy is an

added response. An empathic person can feel sorrow and concern for others that lead to feelings of personal distress (Batson, 1991). Eighteen percent of the children expressed empathy or sympathy coupled with distress as in the following: *" . . .you have killed thousands of people in Louisana and New Orleans. It is heartbearking to watch. You make me sick to my stomach!* (Respondent 119).

Altruism, a type of prosocial behavior, is considered the "essence of the prosocial personality" (Eisenberg et al. 1999, p. 360), i.e., voluntary behavior motivated by the desire to help others (Eisenberg, 1986). An example follows: *A lot of people lost their houses, boat and other stuf. I am glad that I was ok but others are no ok. Some people have lost everything . . . I am glad to give money, Clothing, food, and supplies to Hurricane Katrina victims* (Respondent 65). Eight children (6.8%) expressed some form of prosocial behavior.

Implications for School Counseling Professionals

The following insights gained from this study's results may help in applying the cognitive and moral perception of children to the coping skills and processing necessary during and after such crises. The respondents' letters are poignant, invaluable directions toward a better understanding of interventions needed for school-age children following a period of crisis and/or disaster. All involved in the health and safety of children, especially school counselors, need specific education about disaster or trauma.

The best preparation for any life experience is the presence of accessible personal resources such as those found in the family, the community, and in personal strengths (Brock, 2002). For children, these resources are often found within the school experience (Robinson, 2006). If the school counseling program is strong and based on tenets of the American School Counseling Association National Model (ASCA 2004, 2005), students have the opportunity to develop academic, personal, and social skills needed to face life

experiences. The school counselor, in coordination with the classroom teacher, can offer opportunities for growth in the academic, career, and social-personal domains. For students who need more support in any area, the school counselor works with teachers and community, providing resources and referring children who need help outside the school. Through such referrals students may receive counseling, academic support, or mental health support from private social workers or licensed counselors, psychologists or psychiatrists, medical personnel, or counselors in government or social agencies in the community.

Interventions With Children

In the case of disaster, the first form of help involves physical safety. Sometimes in this stage, counselors are involved as volunteer workers, as agents of social institutes or rescue entities, or school personnel (Kennedy, 2005).

Once safety is established, screening for serious mental health issues is important. Schools can partner with local mental health agencies to help screen for potential post-traumatic stress disorders or other serious mental and emotional problems. One type of recommended treatment by mental health professionals is some form of cognitive behavioral treatment (Cook-Cottone, 2004; Goenjian, Karayan, & Pynoos, 1997; March, Amaya-Jackson, Murray, & Schulte, 1998; Perrin, Smith & Yule, 2000; Yule, 2001). Yule (2001) suggests that this combination intervention works because it desensitizes children to their "triggers" – whether these are thoughts, behaviors, images and memories, or socio-environmental circumstances. The treatment uncouples the cognitive pairing between the traumatic events and the cognitive memories attached to them (Cook-Cottone, 2004). As discussed earlier, these cognitive memories are often accompanied by specific affective and/or behavioral reactions.

For children not identified with severe trauma symptoms and who remain in the classroom, there are several alternatives and many can be incorporated in the school curriculum. It is helpful to

remember that children understand, perceive, and express in concrete terms. Creative expression has been used effectively, along with verbal communication, in small group or individual situations. These activities often include writing activities such as the "Letter to Hurricane Katrina," drawing, or play therapy (Biswas, 1995; Maitra, Ramaswamy, & Sirur, 2002) and may be administered by a range of school counseling professionals trained in the use of helping children express and process their feelings and experiences (White, 2005).

The point where cognitive development and emotions intersect is the place where children try to process their feelings by merging them with thought. This is especially true when the child is recounting something in their past: "every operation of the memory of evocation includes a reorganization" (Piaget, 1973, p. 43). In essence, this means that every time a child retells a story, an event from their past, or memory of something they have seen or experienced in some way, they reframe it cognitively.

To summarize, the current research is a critical contribution to the body of literature related to helping children who experience disaster. The integral relation of thinking and perceiving, alongside the expression of emotion in a safe environment, demonstrates the best of counseling and classroom instruction.

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