# Resilience in Children in the Aftermath of Disasters: A Systematic Review and a New Perspective on Individual, Interpersonal, Group, and Intergroup Level Factors

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#### Abstract

Disasters can impact upon individuals, families, and communities in multiple ways. Research has mainly focused on risk and protective factors relating to the child (individual level) and the family (interpersonal level), not taking into account the processes at the level of social groups. The present review aims to (a) review psychological research on disasters determined by natural events in childhood, (b) distinguish individual, interpersonal, group, and intergroup levels, (c) emphasize the importance of considering resilience as a key outcome. We reviewed 294 studies (in addition to 28 reviews-meta-analyses, and 29 naturalistic interventions), and identified factors at the individual (e.g., demographics, exposure, individual differences), interpersonal (e.g., parent-child relationship, family and school environment), group (e.g., social identity, group membership), and intergroup (relations between different groups) levels. We argue that an integrated model of these factors and their interplay is needed to design interventions to enhance resilience in children and their communities. We extend previous theorizations by providing a wider conceptualization of distress and resilience, and by considering the interplay between factors at different levels. A multidimensional approach to the consequences of disasters in children is crucial to understand their development and well-being, and to design effective interventions.

Keywords: disasters; children; PTSD; social identity; resilience; distress

Disasters, which occur almost every day all over the world, can take many forms such as earthquakes, floods, or tsunamis. They affect many people simultaneously and cause detrimental psychological consequences such as distress, behavioral problems and, for a minority, trauma (Masten & Osofsky, 2010; Wolmer, Laor, & Yazgan, 2003). The impact of a disaster cannot be defined by the magnitude of the disruption alone: its consequences are dependent upon the interplay of the hazard and the context (social, economic and political processes) which define the vulnerability of a community (Tanner & Seballos, 2012).

It is estimated that 11% of individuals have been exposed to a disaster before 16 years of age (Copeland, Keeler, Angold, & Costello, 2007). This is particularly worrying, because children may find threatening events especially distressing due to the challenge of dealing with rapid emotional and psychological development, fewer coping resources, and high dependence on caregivers for protection (Baggerly & Exum, 2008; De Young, Kenardy, & Cobham, 2011).

Many psychiatric and somatic symptoms have been reported in children following traumatic events (Drury, Scheeringa, & Zeanah, 2008; Farooqui et al., 2017), including the development of post-traumatic stress disorder (PTSD) symptoms (Bokszczanin, 2007), posttraumatic stress symptoms (PTSS) (Furr, Comer, Edmunds, & Kendall, 2010), depressive reactions (La Greca, Silverman, & Wasserstein, 1998; Tang, Liu, Liu, Xue C., & Zhang, 2014), separation and generalized anxiety (Costa, Weems, & Pina, 2009), externalizing behavior problems (De Young et al., 2011), and general impaired quality of life (e.g., Copeland et al, 2007). These symptoms may persist over time (La Greca, Silverman, Lai, & Jaccard 2010; Lai, La Greca, Auslander, & Short, 2013) and interfere with children's functioning in different domains (Samuelson, Krueger, Burnett, & Wilson, 2009; Schoeman, Carey, & Seedat, 2009).

Children's vulnerabilities have been described as a function of interacting factors, such as age, gender, geographical location, exposure, family characteristics, ethnicity, socio-economic status, disability, health status, and social networks (Gordon-Hollingsworth, Yao, Chen, Qian, & Chen, 2015; Peek, 2008). The ability of a child to react positively depends on internal factors, but also on how much the adult world is able to accompany them in the traumatic experience and the extent to which this experience is managed and elaborated by the adults themselves. For this reason, parental and, more in general, social support could be critical protective factors and work as moderators of negative outcomes in children exposed to distressing experiences (Cheng, Liang, Zhou, Eli, & Liu, 2019; Danielson et al., 2016). We argue for the importance of identifying all the variables playing a role in children's reactions to disasters and specifically in resilience.

Typically, research on disasters has largely focused on the individual and, partly, on the interpersonal level, mostly focusing on factors relating to the child as an individual and their immediate social network, such as the family. However, what characterizes a disaster is its *collective* nature. Distress produced by disasters is distinct from distress experienced at an individual level, as it can also include factors such as discrimination against minority groups, shared and vicarious distress, and threats to the child's social identity, all of which can be fueled by the disaster and in turn exacerbate its effects. In other words, distress can also depend (at least in part) on factors related to individuals' group of belonging. As an example, highly prejudiced majority group children may be reluctant being categorized in a common group (e.g., the group of disaster survivors) including the discriminated minority outgroup, since it may threaten the need for intergroup distinctiveness (Jetten & Spears, 2003). Again, observing the others' distress,

therefore experiencing it vicariously, may add to own distress and produce a sense of helplessness which reduces the chance of recovering.

However, social identities can also act as buffers, or even as motivating factors leading to resilient responses in emergencies and disasters (Vezzali, Andrighetto, Drury, Di Bernardo, & Cadamuro, 2017). In fact, while distress because of unique personal experiences may create barriers toward the others since it concerns the individual only, distress following a disaster can be perceived as a shared experience, fostering a common response and understanding. Distress and trauma are experienced collectively (Kaniasty & Norris, 1999), and only by taking into account all the components that reciprocally interact in a community (and beyond) at the individual, interpersonal, group, and intergroup level, it is possible to understand how to build personal and collective psychosocial resilience.

Note that there is a substantial body of literature available from different disciplines that has focused on the impact of disasters, also focusing on vulnerable populations. This literature places importance on the child's socio-ecological context in determining the impact of disasters. Disasters impact upon mental and physical health in particular among children belonging to certain social groups, i.e., groups with certain demographics and social vulnerabilities such as ethnic minority status, gender, and disability (for an overview, see Peek, Abramson, Cox, Fothergill, & Tobin, 2018). Children are embedded in a social ecological system consisting of microsystem (direct relations with the family, peers, schools, institutions), mesosystem (dyadic relations between two microsystems), exosystem (indirect relations in the social system which influence the child such as media or parents' workplace), macrosystem (culture the child lives in, such as ideologies and socioeconomic status), and chronosystem (changes over time such as parent's death or disasters) (Bronfenbrenner, 1979). These factors of person, context, time and

processes interact with each other (Bronfenbrenner, 2005). In other words, existing literature from different fields recognizes the importance of factors that go beyond the individual, and highlights the relevance of the larger social context. In order to provide a systematization of these indications, our review considers studies demonstrating from a psychological point of view the impact of these different factors, differentiating them in levels (individual, interpersonal, group, and intergroup), and argues for the importance of considering their complex interplay (see Figure 1).

The present review has three aims. First, it provides a systematic review of psychological research on disasters in childhood, and specifically on disasters determined by natural events. Second, extending previous work which has mainly focused on individual-level outcomes, we distinguish between individual, interpersonal, group, and intergroup levels. We argue for an integrated model in which these levels interact in determining psychological outcomes. Third, in contrast to most previous research that has focused on negative outcomes, we argue that the final outcome of the model should be resilience. With this review, we hope to stimulate future research that examines disasters in their social context.

# **The Present Review**

Computerized searches were conducted between 26 and 30 June 2020, by using the PsycINFO database, using the following keywords and their combinations: child\*, natural disaster\*, earthquake, flood, hurricane, tornado, tsunami. Studies were selected based on four inclusion criteria: (1) include children up to 12 years old in the sample (as childhood is defined to end at the age of 12; cf. Shaffer & Kipp, 2009); (2) be in English, (3) concern disasters; (4) be quantitative (since we are interested in statistical effects of identified factors, in addition to their interactions; see Table 1 in online supplemental material – OSM).

After initial article identification, the title and abstract of each article were read to determine if the article met inclusion criteria. In so doing, we generally referred to criteria provided by PRISMA guidelines for systematic reviews (Moher, Liberati, Tetzlaff, Altman, & The PRISMA Group, 2009); see Figure 1 in OSM. Each study was coded by the first author.

The literature search yielded 2,055 records. After removing duplicates, books, editorial, letters, book reviews, work written in languages other than English, sample age over 12 years, (n = 1020) articles were screened by title and abstract. Of these, (n = 572) were selected for full text review for relevance. The inconsistencies were discussed by the team of authors.

After removing articles not meeting inclusion criteria, 294 eligible articles published before 30<sup>th</sup> June 2020 were included. Studies were coded according to several characteristics, including disaster type, number, type and age of participants, country, study design, level of analysis (individual, interpersonal, and group, intergroup), variable type (independent, mediator, moderator, dependent), time-points of assessment and dependent variables. Studies coded according to these characteristics are shown in Table 1 in OSM. In addition, in order to provide a fuller picture of literature of the field, we also included two additional tables in OSM of articles/studies not included in the 294 studies reported in Table 1 in OSM: in Table 2 in OSM we report 28 reviews-meta-analyses, in Table in OSM 3 we report 29 naturalistic interventions.

Finally, we include tables in OSM taking into account specific study characteristics: type of disaster (Table 4), frequencies of study design (Table 5), level (Table 6), independent (Table 7) and dependent (Table 8) variables, and finally the geographical distribution of the studies (Table 9).

From the analysis of the selected literature, it was possible to evaluate the number of studies divided by type of disaster. As can be seen in Table 4 in OSM, the majority of the studies

examined children in the aftermath of earthquakes (126) followed by hurricanes (92) and tsunami (27), while few studies were related to cyclones, lightning-strikes, tornadoes, volcanoes and storms. These numbers could be explained by the frequency of these phenomena, or by the destructive impact that earthquakes and hurricanes have on a large part of the population (that makes them an especially interesting target of research). Given the characteristics of the territories, consistent with the type of disasters, the research was carried out mainly in the United States (41%), followed by China (17%), Turkey (6%), Japan (6%), Southeast Asia (5%), and Australia (3%) (Table 9 in OSM). It is also worth noting that most of the studies (62%) employed a cross-sectional design (Table 5 in OSM). Importantly for our purposes, most studies focused on individual-level factors (59%), whereas a lower number took into account interpersonal-level (37%) and intergroup-level factors (2%); a very small number of studies (3%) included two or more levels (Table 6 in OSM). It is also interesting to note that, although there are various relevant reviews in the field (Table 2 in OSM), these had a more narrow focus, for instance referring to one type of disaster or focusing on one specific level (e.g., individual), resulting in a smaller number of studies reviewed, while our work provides a more comprehensive overview.

After presenting the outcome variables examined by research, we will review the individual, interpersonal, group, and intergroup level factors that impact upon children. Then, we will argue for the need of a new integrated perspective that takes into account how these factors interact and can lead to resilience.

# **Consequences of Disasters for Children**

Overall, the dependent variables most frequently investigated concern children's psychological well-being (cf. Table 8 in OSM). As also acknowledged by other reviews (Furr et

al., 2010), disasters cause psychiatric and somatic symptoms. Post-traumatic stress disorder (PTSD), one of the most studied outcomes (40%), may persist for months or years. Other consequences include major depressive disorders (15%), generalized anxiety disorders (8%), adjustment disorders (7%), post-traumatic stress symptoms (7%); internalizing/externalizing problems (5%), and different types of behavioral and emotional problems (4%).

Disasters, in addition to impacting upon relations between individuals, can also inhibit family functioning and disrupt many other aspects of life, at the level of peer groups, schools, neighborhoods, communication systems, the economy, and international relations (Masten & Obradovic 2008; Terranova, Morris, Myer, Kithakye, & Morris, 2015).

In sum, research has generally focused on consequences at the individual level, mostly related to health outcomes; less work in psychology has investigated consequences at the interpersonal and even less at the community level (including group and intergroup levels theorized in this review). Notably, these consequences were generally negative. Studies considering the group and intergroup levels sometimes find positive effects of disasters, such as increases in the desire to meet and help other survivors (Vezzali et al., 2017). We argue that future research should examine wider consequences of disasters, to investigate how they impact upon relations at the interpersonal, group, and intergroup level.

#### **Individual Level**

Research has mainly focused on individual factors as predictors of psychological outcomes, which we broadly distinguish in terms of demographic factors, level of exposure, coping, theory of mind and other individual differences (cf. Table 7 in OSM).

Demographic factors such as age and gender are amongst the most frequently investigated factors (45% and 47% respectively). Studies examining *gender* showed mixed

results: while the majority of studies revealed greater stress and depression in girls than boys (Furr et al., 2010; Kronenberg et al. 2010; Silwal, Dybdahl, Chudal, Sourander, & Lien, 2018), some found a prevalence in boys than girls (Eksi et al., 2007) and others did not reveal any gender effect (e.g., Catani, Jacob, Schauer, Kohila, & Neuner, 2008; Tao, Duan, & Shi, 2014).

Gender was also found to influence children's defensive style and coping, the availability and use of social support, and expectations for response and recovery, with girls generally reporting more self-blaming, depression and rationalization compared to boys (Han, Zhang, & Zheng, 2012).

Studies examining *age* as a predictor of trauma symptoms also showed mixed results, with some studies finding no age differences (e.g., Hensley-Maloney & Varela, 2009; Marsee, 2008; Weems et al., 2007), and others showing that older children display greater PTS than younger children (e.g., Saylor, Cowart, Lipovsky, Jackson, & Finch, 2003). However, most of the studies revealed that younger children are more at risk than older children for developing PTSD symptoms (Kronenberg et al., 2010; Osofsky, Osofsky, Kronenberg, Brennan, & Hansel, 2009).

Other demographic factors are related to *socioeconomic status and living conditions*, with individuals with lower socioeconomic status or worse living conditions more likely to develop distress (Kar et al., 2007).

Table 1 in OSM suggests that differences in context or type of disaster are not sufficient to account for inconsistencies in effects found for age and gender. Other individual variables such as levels of exposure or previous emotional difficulties, or interpersonal variables such as social support (see next section), may interact with these variables and allow a clearer understanding of the direction of the effects.

An individual predictor considered by the majority of studies (57%) is the *level of exposure* to the disaster, including objective and/or subjective elements of the child's disaster experience (Tang, Xu, Li, Lu, & Xu, 2018). Regarding objective elements, only a few studies (9% of all the studies considered) found that *proximity* to the disaster was associated with distress (Catani et al., 2010; Feo et al., 2014), while others have found limited effect for this variable (Evans, & Oehler-Stinnett, 2006). Furr and colleagues (2010) found a small to medium effect of disaster exposure on PTS in children and youth, with greater effects observed for disasters characterized by greater loss of life, perceived threat, and loss of a loved one (Usami et al., 2019). Felix et al. (2011) found no difference in PTSD rates between exposed and nonexposed samples in the aftermath of a disaster; in contrast, exposed children revealed greater major depression, social phobia, and separation anxiety.

Note that perceptions of exposure can be critically dependent on other variables, like age. For instance, older children experienced greater adversity, possibly because of greater awareness of what is happening, greater mobility, higher direct exposure to community effects and media exposure (Masten & Osofsky, 2010).

It is also possible that child proximity offers only a simplistic measure of exposure, and what matters more at the psychological level is the perception of the disaster impact (e.g., Pfefferbaum et al., 2000). Consistently, there is considerable evidence that subjective exposure to the disaster and related elements (e.g., perceived life threat) systematically impact on healthrelated outcomes (La Greca et al., 2010) and can be more relevant in determining children's post-disaster response (Silverman & La Greca, 2002).

Another individual-level variable, relevant to understand how people respond to the disaster, is *coping style* (8%). The effects of coping with the consequences of disasters differ

depending on the type of coping children were able to adopt, with negative coping (venting negative feelings, ruminating, and avoiding stressors) generally showing negative, and active coping (cognitive restructuring, emotional regulation, social support) showing positive effects on health-related, but also on cognitive (e.g., cognitive performance) variables (Cadamuro, Versari, Vezzali, Giovannini, & Trifiletti, 2015; Terranova, Boxer, & Morris, 2009).

*Individual differences* in Theory of Mind (ToM), mental health and cognitive skills also play a relevant role. ToM, that is the ability to understand others' mental states and to understand and share emotions with others, appears to buffer the negative outcomes of disasters. For example, ToM mediated the effect of coping style and was associated with better cognitive performance (Cadamuro et al., 2015).

Sprung (2008) reported that 5- to 8-year-old children who had more developed ToM skills displayed stronger intrusive thoughts after Hurricane Katrina, but were also more receptive to learning strategies to cope with them. Greater competency beliefs promoted more post-traumatic growth in children aged 6 to 15 who were exposed to Hurricane Floyd (Cryder, Kilmer, Tedeschi, & Calhoun, 2006).

The level of anxiety or the tendency to experience negative emotions are risk factors that have been linked to the development of PTSD. *Pre-existing child anxiety and depression* have been shown to significantly predict post-disaster PTSD (Weems et al., 2007). Furthermore, cognitive (e.g., general intelligence, cognitive flexibility) and self-regulation skills are protective factors for children in disasters (Masten & Obradovic 2008). For example, Terranova et al. (2009) reported that effortful control abilities (shifting, planning, and inhibiting unwanted behaviors) buffered children's PTSD symptoms after Hurricane Katrina.

Importantly, the above individual factors may interact with other factors to ultimately determine the impact of disasters. For instance, children from minority groups (e.g., with disabilities) or living in poverty may be more exposed to negative consequences at physical, psychological, and educational level that may aggravate the impact of disasters (Peek & Stough, 2010; Takada, 2013). Therefore, it is important to also consider factors relating to the social context in which children live. Children live within a family system (interpersonal level) that is integrated into a community (group level) within a cultural and ethnic context (intergroup level).

# **Interpersonal Level**

Several factors regarding relations with relevant other individuals contribute to determining children's responses to disasters, such as parents (parents' reactions, parental coping, relations between parents), social (school) environment, and social support (Table 7 in OSM).

The first important determinants of child's adjustment in disaster settings are the *parents*, in particular the quality of interactions within a family and the family's reactions (Hausman, et al., 2020; Hlodversdottir, et al., 2018; Kessel et al., 2019). Osofsky and colleagues (2009) reported higher levels of post-traumatic stress symptoms among young children who had been separated from caregivers during the hurricane. Children and their parents respond to each other's stress, and parents serve as role models for coping, therefore different studies (15%) have examined adaptation to disasters on a family level. Parents' reactions to the disaster and their ability to make the child feel secure are critical factors impacting upon the child (Mikyung, Sehwa, & Lee-jin, 2020) Especially, children's emotional and behavioral problems and their distress are associated with irritable, depressed, distressed, dysfunctional, and overprotective families (Cadamuro, Versari, Vezzali, & Trifiletti, 2016). Parents and caregivers with such

characteristics may therefore be unable to provide adequate support as they face their own challenges in dealing with the effects of potentially traumatic events (Felix, Kaniasty, You, & Canino, 2015). Finally, parental conflict has deleterious effects on children's responses. Wasserstein and La Greca (1998) found that higher parental conflict after Hurricane Andrew was associated with more stress symptoms among children, possibly because it lowered reciprocal help among family members.

Health and psychological effects on children can manifest even years later, starting from prenatal exposure to disaster. Research has demonstrated associations between various types of prenatal maternal objective exposure (e.g., financial loss) or psychological distress (anxiety, depression, psychological distress, stress), and children's anxiety symptomatology (internalizing behaviors, anxiety symptoms) and cognitive development (intellectual, language and functional play) (Buthmann et al., 2019; Li et al, 2019; Nomura et al., 2019; Simcock et al., 2019; Strahm et al., 2020).

Among the protective factors for children offered by communities in the aftermath of disaster are schools and other *safe environments* for children to play and learn (Le Brocque, et al., 2017). Schools can provide a stable, supportive environment for children and a sense of safety and security (Mooney, Tarrant, Paton, Johnston, & Johal, 2020). These institutions serve to re-establish routines in a child's life, and may provide respite for parents, opportunities for peer interaction, constructive activities, and connections to relevant adults (e.g., teachers) or peers. Interventions realized in the schools have helped children to articulate their feelings, process grief, regulate emotions (Powell & Holleran-Steiker, 2017), improve coping skills and peer relationships (Amin, Nadeem, Iqbal, Asadullah, & Hussain, 2020; Hansel, Osofsky, Osofsky, & Speier, 2019).

Disasters tend to damage children's social networks (La Greca et al., 2010). It is not surprising then that *social support*<sup>1</sup>has been the main protective factor identified by research (12%), being associated with positive outcomes for health and well-being (Kroska, Miller, Roche, Kroska, & O'Hara, 2018; Usami et al., 2019) ) (cf. Table 8 in OSM). Further indirect evidence for the role of social support on health and well-being comes from studies examining the effects of social exclusion. Being excluded or rejected by other people (especially in threatening situations like after a disaster) can lead to lower self-esteem, loss of control, anxiety, depression, and neurological responses associated with physical pain (Shelton, Richeson, & Vorauer, 2006). Social support and self-esteem are closely linked and can be intended as coping mechanisms in stressful situations (Taylor & Stanton, 2007).

# **Group and Intergroup Level**

Only recently has psychological research on disasters started taking into account the processes involved when focusing on the individual as a member of social groups, shifting the focus from one-to-one interactions (interpersonal level) to group processes and intergroup relations. Social support can be provided not only in interpersonal interactions (e.g., by an individual teacher), but also in groups (e.g., peer groups), as well as by communities composed of different social groups. Specifically, we consider social support given to individuals *as members of an ingroup category, to be different from that given to outgroup members*, which in turn is different from social support provided to people as unique individuals (i.e., when a social category is not salient). For instance, a child distressed because of the disaster can be helped cope with it individually by a psychologist. In contrast, in order to foster peer support as a means to cope with collective distress after a disaster, the school could organize interventions at the level of the class, explaining the importance of staying together and helping each other to face

the disaster consequences. When however ingroup-outgroup distinctions are salient, especially when conflictual intergroup relations are considered, helping directed at the outgroup (even if the ingroup received the same help) may be perceived as a threat (since one may fear that the ingroup receives less help than it deserves), unless groups are included in a superordinate identity (Gaertner & Dovidio, 2000). However, this research is almost non-existent when children are considered. We argue that processes at group and *inter*group levels can strongly impact upon children, and need to be included in disaster research.

Note that although group and intergroup level can be distinguished, they are conceptually related (and this is why we considered both of them in the same section). The boundary between group and intergroup level may however be subtle. As we argued, for instance, the disaster can lead to a superordinate social identity as a community (group level), that in some cases re-shape relations between former relevant group identities (e.g., multicultural context – intergroup level) by making salient that they belong to a single group (if such a category already exists) or by creating a new emergent group.

In most studies taking into account the role of 'race', researchers investigated the differential impact of the event depending on one's ethnic group, with mixed findings. March, Amaya-Jackson, Terry, and Constanzo (1997) showed that race represents a risk factor for distress: African (both male and female) and Caucasian (female) Americans were more likely to exhibit post-traumatic stress and comorbid symptoms than Caucasians (males). Similarly, following Hurricane Hugo (Shannon, Lonigan, Finch, & Taylor, 1994) and Hurricane Floyd (Pullins, McCammon, Lamson, Wuensch, & Mega, 2005), African American youths reported greater PTSD symptoms than Caucasian children. These findings suggest that children from

ethnic minority groups may have greater difficulty in responding to and recovering from the impact of the disaster.

By contrast, Jones, Frary, Cunningham, Weddle, and Kaiser (2001) assessed the impact of Hurricane Andrew on 212 African American, Caucasian, and Hispanic elementary and middle school children 6 months after the disaster, reporting no race differences. Similarly, Russoniello et al. (2002) found that ethnicity was not significantly associated with PTSD in a sample of 218 children aged 9-12 years after Hurricane Floyd.

Brown, Mistry, and Bigler (2007) showed that group-level factors may also impact on attributions. They found that Hurricane Katrina raised several issues related to race and class: older African American children were less likely than younger African American children to attribute the delayed relief to individual culpability, and slightly more likely to attribute it to racial discrimination. All youth believed in the role of the government, but younger children were more likely to rate it as effective.

The studies reported above considered group-level factors such as race mainly as a demographic variable, testing differences in distress between groups. Other studies instead focused on the different *psychological processes* that members of different groups can activate in response to disasters. When considered in these terms, group and intergroup processes can both be risk and protective factors for children in the context of disasters. On the one hand, disasters can exacerbate the detrimental consequences of intergroup processes. According to social identity theory (Tajfel & Turner, 1979), we seek positive distinctiveness for our social identities, and one of the ways that we might positively differentiate our ingroup from an outgroup under certain conditions is by discrimination against that outgroup. For instance, the risk of discriminating against or excluding the minority group may be particularly relevant when

resources are (perceived as) limited and need to be shared within other groups (Andrighetto, Vezzali, Bergamini, Nadi, & Giovannini, 2016). When intergroup conflict is salient, the perception of limited resources may result in increased competition between groups and lower intentions to help the outgroup; or outgroup behavior can be interpreted negatively, and this negative contact may dampen the desire to support outgroup survivors of one's community (Vezzali et al., 2017).

Furthermore, in the long run categorization may cause segregation and conflict, weakening the community collective response (Andrighetto et al., 2016). In a study with elementary school children in affected areas six months after the 2012 Italian earthquake, categorizing as two groups was associated with Italian children's more negative outgroup attitudes toward immigrants (see Vezzali, Cadamuro, Versari, Giovannini, & Trifiletti, 2015). In addition, different groups have different group norms, which may include hostility and negative stereotypes towards outgroups. When group identities and their negative norms are salient, this would lead to worse intergroup relations and to fewer resilient responses across the community as a whole.

On the other hand, social identities can act as buffers, or even as motivating factors leading to greater resilient responses, such as support and cooperation (Vezzali et al., 2017). Identifying as a member of a group enhances social cohesion and fosters helping among ingroup members (Turner et al., 1987). In a community characterized by several groups (e.g., multiethnic community), individuals can react to disaster threat by categorizing in terms of a specific subgroup (e.g., ethnic group) (Andrighetto et al., 2016). This categorization, that uses group identification as a buffer from threats from other groups, may be beneficial in terms of health outcomes (Shelton et al., 2006). This conclusion is consistent with the social cure approach,

stating that social identities have a positive impact on post-disaster well-being (Jetten, Haslam, & Haslam, 2015). Individuals are better able to cope with stressors if they embrace their group identity and if valued social identities can be maintained or new social identities can be developed (Jetten, Haslam, Haslam, & Branscombe, 2009). The development of new positive and meaningful social identities can be a source of resilience in the face of trauma, and the reaction to trauma is worse if the trauma undermines relevant social identities (Muldoon et al., 2019). However, an important feature of disasters is that they can transform relations between people, including group boundaries. For instance, according to the concept of 'altruism born of suffering', the shared traumatic experience can forge new or reinforce existing relations between individuals (Staub, 2003). In social identity terms, new inclusive shared social identities can develop in disasters as a function of common fate (Drury, 2018). In line with altruism born of suffering (Staub, 2003), self-categorization can be at the superordinate level, including all members of the community irrespective of subgroups. Such identification enables benefits (in particular social support) previously reserved for the ingroup to be extended to outgroup members. In addition to fostering adaptive responses and shielding from negative outcomes typically associated with conflictual intergroup relations, superordinate identification can allow the creation of new or reinforcement of existing ties between individuals and a stronger community response, facilitating collective recovery. Consistent with this argument, among Italian children, higher perceived disaster threat was associated with more positive attitudes toward immigrants, and greater desire to have contact with and help them, via perceptions of belonging to the common group of Italian and immigrant child survivors (see Vezzali et al., 2017).

Interestingly, even when not explicitly framed in terms of intergroup relations, referring to a shared identity can help strengthening community ties. Vezzali et al. (2015, 2016, 2017) found that PTSD symptoms, used as independent variables as a form of subjective disaster exposure, were associated with greater identity fusion with other children exposed to the disaster, and in turn with greater perceptions that children survivors were members of a common group. These common group perceptions were associated with greater prosocial intentions toward other disaster survivors.

Depending on the salience of contextual social identities, responses to the disaster may differ. In some cases (intergroup level), formation of new identities may depend at least in part by recategorization of former groups; in other cases (group level), where other group identities are not salient and/or irrelevant, the only meaningful identity can be that of the community that has been struck by the disaster. In both cases, we argue that what is relevant is taking into account the new group identities stemming from the disaster that can be a strong determinant of attitudes and behaviors within, but also outside the community.

#### Interplay between individual, interpersonal, group, and intergroup levels

We have reviewed evidence that individual, interpersonal, group and intergroup variables can act as risk and protective factors in children in disasters. We propose that the impact of disasters on children is the result of a complex interplay between these levels (Figure 1). Each of them can buffer or enhance the direct (e.g., PTSD) and indirect (e.g., secondary stressors such as discrimination stemming from increased threat perceptions) consequences of the disaster and enhance (or undermine) resilience.

A likely possibility is that the four levels have additive effects, as also shown by studies testing these factors as independent variables within the same study (Felix, You, & Canino,

2013; La Greca et al., 2010) (cf. Table 7 in OSM). However, we argue that a full understanding of the impact of disasters can be understood when taking into account their reciprocal interactions. The aim of this section is to show evidence that factors pertaining to the four dimensions can interact in predicting outcome related to disasters.

With respect to interactions between individual and interpersonal dimensions, for instance, Cadamuro et al. (2015) found that whereas active coping (individual level) was positively associated with ToM abilities (which in turn were associated with better cognitive performance), the association between avoidant coping and ToM depended on perceived social support (interpersonal level), such that avoidant coping was positively associated with ToM only when perceived social support was high.

Furthermore, in a sample of elementary school children and their parents in the aftermath of an earthquake, Cadamuro et al. (2016) found that the indirect association of mothers' PTSD symptoms (interpersonal level) with increased reliance on negative coping (via children's PTSD symptoms), was buffered by ToM (individual level), i.e. this association was significant only when ToM was low. Felix et al. (2015) have shown that parent-child relationship quality (interpersonal level) acted as moderator of the influence of hurricane exposure (individual level) on physical health among children: hurricane exposure had weaker negative consequences when parent-child relationship quality was high.

Looking at characteristics of the school and community microsystem that may affect outcomes in children, Felix, You, and Canino (2013) found that gender (female) and living in poverty, as well as disaster exposure (all individual-level factors) were associated with an increased risk of internalizing psychopathology in children, but these effects were reduced when neighborhood climate was positive and school violence was low (interpersonal level).

In relation to the interaction between individual and group levels, there is no systematic evidence, but we can suggest the process based on the broader literature on disasters. Thus those individuals who identify most strongly with other survivors of an earthquake have been found to be those most likely to be influenced by the sight of supportive behavior to be supportive themselves (see Drury, 2018; Drury et al., 2019).

Regarding the relation between interpersonal and intergroup level, it was found for instance that ethnic group membership (intergroup level) moderated the relation between parental conflict (interpersonal level) and PTSD following a hurricane, with detrimental effects of parental conflict significant for Hispanics, but not for Whites (Wasserstein & La Greca, 1998).

With respect to individual-intergroup interplay, Vezzali et al.'s (2017) results showed that perceived disaster threat (individual level) was indirectly associated with greater contact and helping behavioral intentions toward the outgroup via greater perceptions of belonging to a common group among majority (Italian) but not minority (immigrant) children (moderation by ethnicity: intergroup level).

The scarcity (3%) of studies testing interaction effects between factors related to the different levels in reviewed literature limit our possibility to make predictions about the direction of these interactions, also considering the rather large number of potential factors pertaining to each of these levels. However, from this analysis, it is clear that the different dimensions (individual, interpersonal, group, intergroup) can and do interact; therefore, considering them in isolation, only focusing on their additive effects, may be misleading and limit our capacity to fully understand the impact of disasters in children and how to react to it. In contrast, considering their interplay can also help reconciling mixed findings in literature.

# **Building Resilience**

From the analysis of the literature, it is now well established that exposure to a disaster increases the risk of developing psychological disorders; however, research on traumatized children has revealed wide variations in outcomes. Despite the numerous consequences, children frequently demonstrate their ability to recover from extreme adversity (Jones, 2008). It is therefore crucial to highlight the factors that can protect children, reduce the impact of stressors, promote capacity for mastery, and help to resume normal functioning (Lazarus & Folkman, 1984). In this review we have highlighted the need to include the group and intergroup levels of analysis as well as the interaction between all four levels in future research. We argue that this approach allows to capture the multidimensionality and complexity of this context to fully understand how to promote resilience in children and the communities they live in. This is because adaptation to traumatic experiences is a dynamic process involving multiple interacting systems within the individual organism and many interactions, including relationships with other people and the environment (Masten & Narayan, 2012).

Resilience is defined by the American Psychological Association (2014) as "the process of adapting well in the face of adversity, trauma, tragedy, threats or even significant sources of stress (para. 4)." It refers to the process of adapting well to adversity in life, such as stressful personal life events or disasters, and it can be collective as well as personal (Williams & Drury, 2010). Resilience factors include a host of biological, psychological, social and cultural factors that interact to determine how a dynamic system responds to stressful experiences adapting successfully to disturbances that threaten the viability, the function, or the development of that system (Masten, 2014).

However, from our analysis, it is clear that the interest of researchers has been on a rather narrow definition of resilience, echoing the literature on trauma more generally. This is because

outcome variables mostly relate to individual trauma (e.g., depression, PTSD), and predictors or interventions are largely based on individual factors (Tables 1, 6, 7 in OSM). Similarly, interventions to alleviate stress after disaster exposure are targeted at individual level, e.g., Eye Movement Desensitization and Reprocessing (EMDR) or Group Cognitive-Behavioral Interventions (GCBI) (Brown et al., 2017) (Table 3 in OSM). Although disasters lead to individual distress and trauma, distress and trauma are collective and shared by communities as a whole, and we argue for the need to employ actions that can benefit a large number of people. Such actions should not only be "curative" in the sense of targeting individual distress and disorder but, building on a broader understanding of resilience, should support recovery in the community as a whole, for instance promoting reciprocal help, coping, and collective action aimed at obtaining support from relevant institutions and uninvolved bystanders. We therefore argue for the need to rely on the concept proposed by Drury et al. (2019) of collective psychosocial resilience, referring to survivors that face the disaster *as a group*.

In line with the argument above, the psychological literature on community resilience refers to a network of adaptive capacities, namely community competence, social capital, economic development and communication, that allow the community in which the child lives in to fully recover (Norris et al., 2008). Perceived and actual social support, a sense of a community, collective empowerment and action play important roles in interaction with economic resources or media information. In particular, social capital has been shown to be an efficient source of instrumental and emotional support to establish cohesion. Social capital acts as a bonding source to strengthen existing ties in the family community (Norris et al., 2002; Norris et al., 2008), but also bridges ties to organizations for indirect help, e.g., through church (Hawkins & Maurer, 2009), and links the community with policy makers (Szreter & Woolcock,

2004). Social capital is typically a function of psychological group memberships (Helliwell & Barrington-Leigh, 2012). Note however that literature on community resilience has been generally detached from the disaster literature, and operationalizations of resilience in terms of community were largely absent from the studies that we reviewed.

Our argument is also in line with research in resilience in development. Factors that enhance child resiliency are effective parenting, positive self-concept, self-regulation, social competence, cognitive flexibility, problem-solving skills, communication skills, empathy, assertiveness, humor, group affiliation, and the ability to elicit caretaking behaviors (Masten, 2007). Furthermore, communities are constituted by several groups such as multiethnic communities but also communities with wealth disparities or vulnerable groups, which should be taken into account when designing interventions.

In our article we argue for the importance of combining individual support with the creation and reinforcement of positive relations between individuals (such as families and peers), within groups, and between groups (such as majority and minority groups). Taking into account all the components that reciprocally interact in a community (and beyond) provides a more powerful way to promote resilience at individual *and* collective levels (therefore also capitalizing on a more general concept of community resilience, or collective psychosocial resilience; Drury et al., 2019). In doing so, since group membership has an important effect on behavior, and especially collective behavior, future research should build on findings relating to people's social identities and collective empowerment (Drury, 2018).

#### Conclusion

We argue that disasters have consequences which are a complex interplay between individual, interpersonal, group, and intergroup factors. Each of the levels contains risk or

protective factors that can enhance or buffer the direct and indirect consequences of the disaster and lead to resilience. We provided evidence that these levels interact, and that in order to understand children's responses to disasters considering all of them is of vital importance. Our aim is to provide a new perspective that highlights the relevance of *all* four levels, by offering a wider conceptualization of distress and resilience as determined by multiple individual and social factors. This review hopes to stimulate future research that examines the complex nature of disasters and that eventually allows the development of an integrated model considering all levels. Understanding the consequences of disasters for children is crucial for their development and well-being, as well as for the design of effective interventions that strengthen protective factors in children, families, and the society.

# Footnote

 Note that although an individualistic approach considers social support as an interpersonal variable, this may also be a function of group membership (cf. Vezzali et al., 2017).

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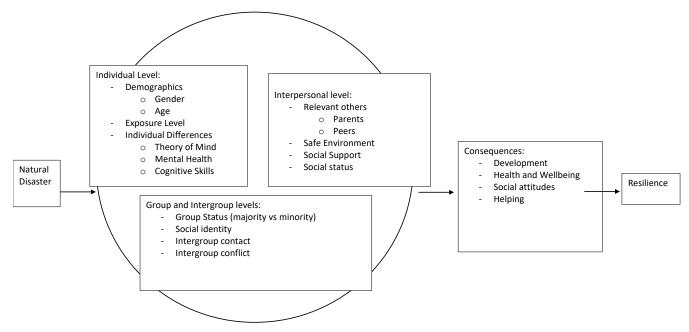
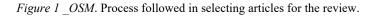
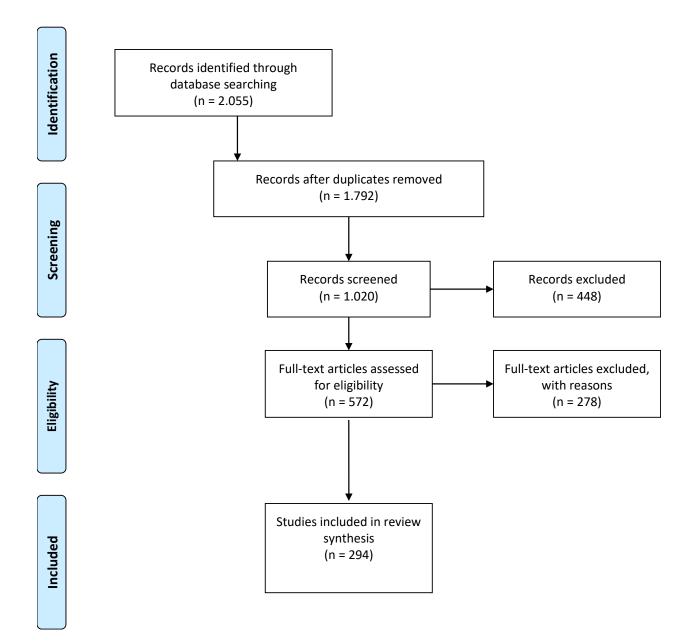


Figure 1. Proposed integrative model.

#### **Online Supplementary Material**





# Running head: RESILIENCE IN CHILDREN AFTER NATURAL DISASTERS

Table 1	OSM. Studies	included in the Review	(N = 294  studies)

Authors and year	Type of disaster (country)	Method	Level(s)	Population	Independen t Variable(s)	Mediator( s)	Moderator( s)	Assessment(s) (months postdisaster)	Dependen t Variable(s )
Adebäck, P., Schulman, A., & Nilsson, D. (2017).	Tsunami (Thailand)	Longitudin al	Individual	210 Swedish children aged 10-15 years	Disaster exposure, gender, age, education and living situation			8 years post disaster	PTSS, depression, anxiety thoughts or attempted suicide, physical symptoms or daily functionin g
Agustini, E. N., Asniar, I., & Matsuo, H. (2011).	Tsunami (Indonesia)	Longitudin al	Individual and Interpersona 1	482 adolescent aged 11-19 years	Gender, loss of parents, low support level and heavy somatic response age, school grade, traumatic experience			4.5 years post disaster	PTSD
Andrades, M., García, F. E., Calonge, I., & Martínez- Arias, R. (2018).	Earthquake (Chile)	Cross- sectional	Individual	325 children aged 10-15 years	Disaster exposure, age, gender, city of residence at the time of the earthquake,	Ruminatio n		12 months post disaster	Posttrauma tic Growth PTSD

Andrades, M., García, F. E., Reyes-Reyes, A., Martínez- Arias, & R., Calonge, I. (2016).	Tsunami (Chile)	Cross- sectional	Individual	393 children aged 10-15 years	and city of current residence Disaster exposure age, gender, city of residence	20-30 months post disaster	Posttrauma tic Growth PTSD
Anthony, J. L., Lonigan, C. J., & Hecht, S. A. (1999).	Hurricane (USA)	Cross- sectional	Individual	5664 children and adolescent aged 9-19 years	Anxiety, degree of disaster exposure	3 months post disaster	PTSD
Arnberg, F. K., Gudmundsdót tiR., Butwicka, A., Fang, F., Lichtenstein, P., Hultman, C. M., & Valdimarsdótt ir, U. A. (2015).	Tsunami (Sweden)	Longitudin al	Individual and Interpersona l	8762 adults 3742 children 864 088; unexposed adults; 320 828 unexposed children aged 12 years	Disaster exposure, pre-tsunami psychiatric disorders, age, gender, parental pre- tsunami disorders, socioeconom ic characteristi cs	3 and 11 months post disaster (T1-T2) 23 and 60 months post disaster (T3-T4)	Psychiatric disorders suicide attempts
Asarnow, J., Glynn, S., Pynoos, R. S., Nahum, J., Guthrie, D., Cantwell, D. P., & Franklin, B. (1999).	Earthquake (USA)	Cross- sectional	Individual	63 children (8.59-18.60 years) Preselected for depression, attention- deficit	Disaster exposure, predisaster depression, predisaster anxiety disorder, pre disaster psychiatric disorder,	12 months post disaster	PTSD

Austin, M-P., Christl, B., McMahon, C., Kildea, S., Reilly, N.,	Flood (Australia)	Longitudin al	Individual and Interpersona 1	hyperactivity disorder and siblings not preselected for the presence of psychopatho lgy 131 families and 230 women	social impairment, coping strategies Prenatal maternal stress	Maternal emotional availability	12 months post disaster 16 and 30 months	Language and cognitive developme nt
Yin, C., Simcock, G., Elgbeili, G., Laplante, D. P., & King, S., (2017).							post-partum	
Ayub, M., Poongan, I., Masood, K., Gul, H., Ali, M., Farrukh, A., Shaheen, A., Chaudhry, H. & R., Naeem, F. (2012).	Earthquake (Pakistan)	Cross- sectional	Individual and Interpersona 1	1100 children, aged 7-16 years	Age, gender, demographic , socioeconom ic factors, family trauma related factors, psychologica l morbidity		18 months post disaster	PTSD and behavioura l and emotional problems
Azarian, A., Miller, T. W., & Skriptchenko- Gregorian, V. (1996).	Earthquake (Armenia)	Cross- sectional	Individual	90 children aged 15-48 month	Disaster exposure, gender		6 months post disaster	Memory functionin g Physical stimuli

Azarian, A., Skriptchenko- Gregorian, V., Miller, T. W., & Kraus, R. F. (1994).	Earthquake (Armenia)	Cross- sectional	Individual	839 children aged 3-17 years	Disaster exposure		6 months post disaster	Emotional, somatic and behavioral symptoms
Bahrick, L. E., Parker, J. F., Fivush, R., & Levitt, M. (1998).	Hurricane (USA)	Cross- sectional	Individual	100 children aged 3-4 years	Disaster exposure, age		2-6 months post disaster	Young children's memory for a natural disaster
Bal, A. (2008).	Earthquake (Turkey)	Cross- sectional	Individual	293 children and adolescents aged 8-15 years	Disaster exposure, gender, age		3 years post disaster	PTSD
Bal, A., & Jensen, B. (2007).	Earthquake (Turkey)	Cross- sectional	Individual	293 children and adolescents aged 8-15 years	Disaster exposure, age, gender		3 years post disaster	PTSD
Bauer, P. J., Burch, M. M., Van Abbema, D. L., & Ackil, J. K. (2007).	Tornado (USA)	Cross- sectional	Individual	29 mother- child dyads aged 2.6– 11.8 years	Disaster exposure, age		4 months and 10 months post disaster	Mother's and children's contributio ns
Bauer, P. J., Stark, E. N., Lukowski, A. F., Rademacher, J., Van Abbema, D. L., & Ackil, J. K. (2005).	Tornado (USA)	Longitudin al	Individual	29 mother- child dyads aged 2.6- 11.8 years	Disaster exposure, age		4 months and 10 months post disaster	Mother and children use of internal states language

Belter, R. W., Dunn, S. E., & Jeney, P. (1991).	Hurricane (USA)	Cross- sectional	Individual	260 children, aged 3-5 years	Disaster exposure, demographic information		5 months post disaster	Depression PTSD Adjustmen t
Bhushan, B., & Sathya- Kumar, J. (2007).	Tsunami (India)	Cross- sectional	Individual	130 children aged 10-16 years	Gender, age Type of family, loss of family members,		12 months post disaster	Emotional distress and posttrauma tic stress in children
Blanc, J., Bui, E., Mouchenik, Y., Derivois, D., & Birmes, P. (2015).	Earthquake (Haiti)	Cross- sectional	Individual and Interpersona l	96 children aged 7-13 years	Social support vs no social support (control group)		12 months post disaster	PTSD and depression
Bödvarsdóttir, Í., Elklit, A, & Gudmundsdót tir, D. B. (2006).	Earthquake (Iceland)	Cross- sectional	Individual	67 exposed and 73 no exposed children aged 10-15 years	Disaster exposure, demographic information, stressors relating to the disaster, academic skills and behavioural adjustment in class, social support		3 months post disaster	PTSD Psychologi cal distress
Bokszczanin, A. (2008).	Flood (Poland)	Cross- sectional	Individual and Interpersona l	533 children and adolescents age M = 15.96	Gender age place of residence, exposure to trauma	Parental support, family conflict, overprotecti veness	28 months post disaster	PTSD

Bradburn, I.	Earthquake	Cross-	Individual	22 children	Experience	 	6-8 months	PTSD
Bradburn, 1. S. (1991).	(USA)	cross- sectional	Individual	aged 10-12 years	Experience of and proximity to loss, family reactions previously traumatic event		o-8 months post disaster	PISD
Brown, C. S., Mistry, R. S., & Bigler, R. S. (2007).	Hurricane (USA)	Cross- sectional	Individual and Intergroup	77 african americans children aged 6 -14 years	Attributions	Age victim group (race class) socialization	within 3 months post disaster	Type of attribution, aid and effectivene ss of the governmen t
Bulut, S. (2013).	Earthquake (Turkey)	Cross- sectional	Individual	191 children aged 12 years	Gender PTSD		12 months post disaster	Emotional and behavioral disorders
Bulut, S. (2006).	Earthquake (Turkey)	Cross- sectional	Individual	400 children aged 9-12 years	Disaster exposure		11 months post disaster	PTSD
Bulut, S., Bulut, S., & Tayli, A. (2005).	Earthquake (Turkey)	Cross- sectional	Individual	200 children 4th and 5th grade	High-impact trauma and low-impact trauma groups		11 months post disaster	PTSD
Burke Jr, J. D., Borus, J. F., Burns, B. J., Millstein, K. H., & Beasley, M. C. (1982).	Storm (USA)	Longitudin al	Individual	64 children age M = 6,5 years	Storm- related problems, age, time		6 months post disaster 5 months post disaster	Externalizi ng behaviour School Behavior Anxiety

Burke Jr, J.	Flood	Cross-	Individual	47 children	Disaster	10 months	Distress
D., Moccia,		sectional		5th graders	exposure,	post disaster	
P., Borus, J.	(USA)				flood vs no-		
F., & Burns,					flood,		
B. J. (1986).	II.	C	Individual	00.1.11	gender		Б
Burnham, J.	Hurricane	Cross-	Individual	98 children	Age,		Fears
J., Hooper, L.		sectional		aged 6-12	gender, disaster		
M., Edwards,	(USA)			years			
E. E., Tippey,				147 children	exposure		
J. M., McRaney, A.				and			
C., Morrison,				adolescents			
M. A., &				aged 6-18			
Woodroof, E.				0			
K.				years			
K. (2008).							
Buthmann J,	Storm	Cross-	Individual	198 children,	Maternal	4 years after	Electroder
Finik J,	(USA)	sectional	Interpersona	3-4 years old	prenatal	storm	mal
Ventura G,		sectional	1	5 Tycuis old	depression	storm	activity
Zhang W,			1		Prenatal		uctivity
Shereen AD,					exposure to		
Nomura Y.					the disaster		
(2019)					Ethnicity		
					Maternal		
					anxiety and		
					PTSD		
					Maternal		
					education		
					and marital		
					status		
Buthmann, J.,	Storm	Cross-	Individual	380 pregnant	Maternal	before, during	Child
Ham, J.,	(USA)	sectional	Interpersona	women	state anxiety,	and 6 months	Temperam
Davey, K.,			1	380 children,	stressful life	after storm	ent
Finik, J.,				6 months old	events,		(Negative
Dana, K.,					prenatal		Affect,
Pehme, P.,					depression,		Emotion
Nomura, Y.					postnatal		Regulation
(2018)					depression,		,
					the number		and
					of birth		Surgency)

Cadamuro,	Earthquake	Cross-	Individual	147 children,	complication s, maternal age, parity, education attainment, endocrine disorders and infections. Child birthweight gestational age at birth, sex Objective and subjective disaster- related stress, and gestational timing of exposure Parent's	Children's	ТоМ	6 months	Negative
A., Versari, A., Vezzali, L., & Trifiletti, E. (2016).	(Italy)	sectional	and Interpersona l	aged 6-8 years, 294 parent's	posttraumati c stress symptoms	posttrauma tic stress symptoms	Abilities	post disaster	Coping
Cadamuro, A., Versari, A., Vezzali, L., Giovannini, D., & Trifiletti, E. (2015).	Earthquake (Italy)	Cross- sectional	Individual and Interpersona l	517 elementary school children aged 7-12 years	Coping styles	Theory of mind	Social support	6 months post disaster	Cognitive Performan ce
Cao, X., Laplante, D.	Ice Storm	Cross- sectional	Individual and	89 children	Maternal distress,			5 years post disaster	Neuromoto r function

P., Brunet, A., Ciampi, A., & King, S. (2014).	(Canada)		Interpersona 1	age M = 5,5 years and their mothers	timing of exposure, level of exposure, major life events, gender, trimester of pregnancy, socioeconom ic status			
Catani, C., Gewirtz, A. H., Wieling, E., Schauer, E., Elbert, T., & Neuner, F. (2010).	Tsunami, War and Family Violence (4 Studies) (Sri Lanka)	Cross- sectional	Individual	1398 children aged 9-15 years	Severity of disaster exposure, economic status, family loss, war experiences, family violence, exposure to other traumatic experiences, multiplicity of risks		1 month post disaster (study 3) and 12 months post disaster (study 4)	Adaptation score (Physical Health, Functionin g, Mental Health, School performan ce)
Celebi Oncu, E., & Metindogan Wise, A. (2010).	Earthquake (Turkey)	Experiment al (with control group)	Individual	103 children aged 9 years	Disaster exposure, group,	Gender	20 months post disaster	Trauma- related symptoms
Celebi Oncu, E., Akman, B., Guler, T., & Karaaslan, T. (2009).	Earthquake (Turkey)	Cross- Sectional	Individual	64 children aged 6 years	Disaster exposure			Emotions in drawings
Cénat, J. M., & Derivois, D. (2015).	Earthquake (Haiti)	Cross- sectional	Individual	872 children aged 7-17 years	Peritraumati c distress,			PTSD Depression

Chen, J., & Wu, X. (2017).	Earthquake (China)	Longitudin al	Individual	757 children 9- 16 years old	disaster exposure, socio- demographic characteristi cs Gender Age Educational level Disaster Exposure		between 8 and 20 months after the earthquake	Posttrauma tic stress disorder (PTSD) and posttrauma tic growth (PTG)
Chen, W., Wang, L., Zhang, X. L., & Shi, J. N. (2012).	Earthquake (China)	Cross- sectional	Individual	156 children age M= 11 years	Disaster exposure, emotional focus, coping strategy	Emotional coping strategy Self- esteem	6 months post disaster	PTSS
Cheng, J., Liang, Y., Fu, L. & Liu, Z. (2018)	Earthquake (China)	Longitudin al	Individual and Interpersona 1	301 children aged 9.6- 14.6 years	Disaster exposure, gender, grade, parental relationship, PTSD and depression (T1,T2,T3)		4-29 months post disaster (T1-T2) 40-52 months post disaster	PTSD Depression and comorbilit y
Cheng, J., Liang, YM., Zhou, YY., Eli, B., & Liu, ZK. (2019)	Earthquake (China)	Longitudin al	Individual Interpersona 1	304 children, 9- 17 years old	Trauma exposure Quality Parental relationships Grade Gender Social support		1.5, 6, 12, 24 and 48 months after the earthquake	PTSD

Cobham, V. E., & McDermott, B. (2014).	Cyclone (Australia)	Cross- sectional	Individual and Interpersona l	874 children aged 8–12 years and their parent's	Parent's altered parenting, parental disaster- related distress, children disaster exposure, child age, child gender		3 months post disaster	PTSS
Cryder, C. H., Kilmer, R. P., Tedeschi, R. G., & Calhoun, L. G. (2006).	Flood (USA)	Cross- sectional	Individual and Interpersona l	56 children aged 6-15 years	Social support, disaster exposure	Competenc y beliefs Ruminativ e thinking	1 year post disaster	Posttrauma tic growth
Danielson, C. K., Cohen, J. R., Adams, Z. W., Youngstrom, E. A., Soltis, K., Amstadter, A. B., & Ruggiero, K. J. (2016)	Tornado (USA)	Cross- sectional	Individual Intepersonal	352 children 12-17 years old	Disaster Impact Social Support Parent-child conflict Trauma History Distress Tolerance Risk-Taking Substance Use Depression Sex Age		9 months after tornado	PTSD
Danzi, B. A., & La Greca, A. M. (2017).	Hurricane (USA)	Cross- sectional	Individual	327 children aged 7-11 years	Gender, age, race/ethnicit y, disaster exposure,		8 months post disaster	PTSD

					hurricane related life stressors, impairment		
Dass- Brailsford, P., Thomley, R. S. H., Talisman, N. W., & Unverferth, K. (2015).	Earthquake (Haiti)	Cross- sectional	Individual	59 children aged 9-12 years	Distance from the epicenter (urban vs. rural), children displayed or not	12 months post disaster	Psychologi cal consequen ces (depressio n, anxiety, and trauma)
Dawson, K. S., Joscelyne, A., Meijer, C., Tampubolon, A., Steel, Z., & Bryant, R. A. (2014).	Tsunami (Indonesia)	Cross- sectional	Individual	110 children aged 7-13 years	Religious belief, disaster exposure, cognitive avoidance, age	5 years post disaster	PTSD, depression, grief
Delamater, A. M., & Applegate, E. B. (1999).	Hurricane (USA)	Longitudin al	Individual	175 children aged 3-5 years	Disaster exposure, PTSD, age, gender, ethnic status, marital status, and highest grade completed by mothers	12 and 18 months post disaster	Child Developm ent
Demir, T., Demir, D. E., Alkas, L., Copur, M., Dogangun, B.,	Earthquake (Turkey)	Cross- sectional	Individual	321 children and adolescents aged 2-15 years	Gender, age, location where the earthquake	1-155 days post disaster	PTSD, acute stress disorder adjustment disorder

& Kayaalp, L.					was			
(2010).					experience,			
<b>`</b> ,					degree of			
					losses,			
					bodily			
					injuries,			
					damage to			
					the residence			
Derivois, D.,	Earthquake	Cross-	Individual	128 children	Age, gender,		4 years	PTSD,
Cénat, J. M.,	1	sectional		and	disaster		post disaster	anxiety
Joseph, N. E.,	(Haiti)			adolescents	exposure,		F	depression
Karray, A., &	()			aged 7-18	life events,			
Chahraoui, K.				years (living	peritraumati			
(2017).				on the	c distress,			
(_017).				streets)	reason for			
				succes)	living in the			
					street			
Derivois, D.,	Earthquake	Cross-	Individual	540 children	Age, gender,		16 to 18	PTSD
Mérisier, G.	1	sectional	and	and	level of		months	
G., Cenat, J.	(Haiti)		Interpersona	adolescents	education,		post disaster	
M., &			1	aged 2-18	religion,		1	
Castelot, V.				years	health			
(2014).				5	conditions,			
<b>`</b> ,					trauma			
					exposure,			
					others			
					traumatic			
					events,			
					post-			
					earthquake			
					situation and			
					the			
					peritraumati			
					c distress,			
					social			
					support			
Dollinger, S.	Lightning-	Longitudin	Individual	38 children	Gender, race		1 months	Emotional
J. (1985).	Strike	al	and	aged 10-12			post incident	effects
			Interpersona	years			-	
	(USA)		1					

							9 months post incident (T2)	Adjustmen t reactions Sleep disturbanc
Dollinger, S. J. (1986).	Lightning- Strike (USA)	Cross- sectional	Individual	38 children aged 10–12 years	Disaster exposure, fears of storms, death and dying, separation from parents		1-2 months post incident	e. Sleep disturbanc es and somatic complaints
Dollinger, S. J., O'donnell, J. P., & Staley, A. A. (1984).	Lightning- Strike (USA)	Cross- sectional	Individual and Interpersona 1	87 children aged 10-13 years	Age, gender, socio economics status, disaster exposure, fears of storms, separation from parents, death and dying		1-2 months post incident	Sleep disturbanc es and somatic complaints
Durkin, M. S., Khan, N., Davidson, L. L., Zaman, S. S., & Stein, Z. A. (1993).	Flood (Banglades h)	Pre post (without control group)	Individual	2667 children aged 2-9 years, (pre disaster) 162 children (post disaster)	Disaster exposure		6 months pre disaster 5 months post disaster	Behaviour al disorders in children

Dyb, G., Jensen, T. K., & Nygaard, E. (2011).	Tsunami (Southeast Asia)	Cross- sectional	Individual and Interpersona l	319 parents and adolescents aged 6–18 years	Disaster exposure (parents and child), parent's level of posttraumati c stress	Parental PTSD	6–8 months post tsunami	PTSD
Earls, F., Smith, E., Reich, W., & Jung, K. G. (1988).	Flood (USA)	Cross- sectional	Individual and Interpersona l	Parents and 32 children and adolescent aged 6-17 years	Disaster exposure, preexisting psychiatric disorders, parent's reactions to the flood		12 months post disaster	PTSS
Ekşi, A., Braun, K. L., Ertem-Vehid, H., Peykerli, G., Saydam, R., Toparlak, D., & Alyanak, B. (2007).	Earthquake (Turkey)	Cross- sectional	Individual and Interpersona l	160 children and adolescents aged 9-18 years	Demographi c characteristi cs, ethnic, religious background, occupation of parents, (1) pre- disaster factors: gender, age, trait anxiety score, and pre- existing family problems (2) disaster factors:		6-20 weeks post disaster	PTSD depression

					injured, family member injured, lost (3) post- disaster response factors: reaction, feelings, relocation			
Endo, T., Shioiri, T., Someya, T., Toyabe, S., & Akazawa, K. (2007).	Earthquake (Japan)	Cross- sectional	Individual and Interpersona l	756 children including 170 pre- school (<7 years old) and 586 school- children (>7 years old)	Demographi c information, parents and children's physical state after the earthquake (injury and illness), damage to house		5 months post disaster	Behavioral changes in children
Evans, L. G., & Oehler- Stinnett, J. (2006).	Tornado (USA)	Cross- sectional	Individual	152 children aged 6-12 years	Age, gender, ethnicity, disaster exposure		1-year post disaster	PTSD
Evans, L. G., & Oehler- Stinnett, J. (2008).	Tornado (USA)	Cross- sectional	Individual	88 children aged 7-12 years	Age, gender, ethnicity, disaster exposure, PTSD			PTSD Internalizi ng symptoms and adjustment
Exenberger, S., Ramalingam, P., & Höfer, S. (2016).	Tsunami (Southeast Asia)	Cross- sectional	Individual	177 South Indian children aged 8-17 years	PTSS, growth, gender, age		4 years post disaster	Posttrauma tic Growth (PTG) PTSD

Exenberger, S., Riedl, D., Rangaramanuj am, K., Amirtharaj, V., & Juen, F. (2019)	Tsunami (India)	Cross- sectional	Individual Intepersonal	80 mothers and 164 children 8 - 17 years old	mother's PTSD symptoms living arrangement age, gender religion		4 years post tsunami	PTSD
Fan, F., Long, K., Zhou, Y., Zheng, Y., & Liu, X. (2015).	Earthquake (China)	Longitudin al	Individual and Interpersona l	1573 adolescents aged 12-16 years	Demographi cs, disaster exposure, exposure, gender, age, severity of negative life events, social support, coping style		6 months post disaster (T1) 12 months post disaster (T2) 24 months post disaster (T3)	PTSD
Felix, E. D., You, S. K., & Canino, G. (2013).	Hurricane (Puerto Rico)	Cross- sectional	Individual and Interpersona l	1637 children and adolescents aged 6 -17 years and parents	3 age groups, gender, perception of poverty, disaster exposure, school violence, teacher's attitudes, neighborhoo d climate, neighborhoo d monitoring, community violence, violence, exposure	School microsystem s (violence), Poor teacher attitudes, Community characteristi cs (neighborho od climate)	12-27 months post disaster	Internalizi ng psychopath ology

Felix, E. D., You, S., & Canino, G. (2015)	Hurricane (Puerto Rico)	Cross- sectional	Individual and Interpersona l	582 children aged 4-10 years and adolescent aged 4-17 years	Family environment , disaster exposure, parent–child relationship quality, age	Family environme nt Parent relationshi p quality (mediated for adolescent s)		18 months post disaster	Ataques de nervios
Felix, E., Hernández, L. A., Bravo, M., Ramirez, R., Cabiya, J., & Canino, G. (2011).	Hurricane (Puerto Rico)	Longitudin al	Individual	1886 children (T1) 1788 children (T2) aged 4-17 years	Disaster exposure, gender		Age	18-30 months post disaster	Internalizi ng, externalizi ng
Felix, E., Kaniasty, K., You, S., & Canino, G. (2015).	Hurricane (Puerto Rico)	Cross- sectional	Individual and Interpersona l	1886 parent- child dyads aged 4-17 years	economic status, age, exposure time, parent– child, relationship quality		Parent–Child Relationship Quality	18-30 months post disaster	Physical health
Felix, E., You, S., Vernberg, E., & Canino, G. (2013).	Hurricane (Puerto Rico)	Cross- sectional	Individual and Interpersona 1	1886 dyads Two ages groups: 4-10 and 11-17	Disaster exposure, age	Family Environme nt., Parent- child relationshi p quality	Parental history of mental health problem	18 months post disaster	Psychopat hology:inte rnalizing disorder in children

Felton, J. W., Cole, D. A., & Martin, N. C. (2013).	Flood (USA)	Pre-post (without control group)	Individual	239 students aged 10-15 years	preflood rumination, depressive symptoms, flood-related experiences	Preflood rumination Preflood depression	Age	6 months pre-disaster (T1) 10 days post disaster (T2)	Depressive Reactions Postflood rumination Postflood depression
Feo, P., Di Gioia, S., Carloni, E., Vitiello, B., Tozzi, A. E., & Vicari, S. (2014).	Earthquake (Italy)	Cross- sectional	Individual and Interpersona 1	1839 children aged 3-14 years	socio- demographic , health, family data, proximity to the epicentre, damages to the house, internally displaced condition. parent's loss of job, gender, age			12 to 17 months post disaster	Psychiatric symptoms
Fivush, R., McDermott Sales, J., Goldberg, A., Bahrick, L., & Parker, J. (2004).	Hurricane (USA)	Longitudin al	Individual	100 children aged 3-4 years	Time, stress group, phase of hurricane			Few months post disaster (T1) 6 years post disaster (T2)	Recall of Hurricane
Foa, E. B., Johnson, K. M., Feeny, N. C., & Treadwell, K. R. (2001).	Earthquake (USA)	Cross- sectional	Individual	75 children aged 8-15 years	Age, gender			2 years post disaster	PTSD Depression Anxiety
Fujiwara, T., Mizuki, R., Miki, T., &	Earthquake (Japan)	Cross- sectional	Individual	23 children aged 6-8 years	Children's facial emotion reactivity				PTSD

Chemtob, C. (2015).					while watching video, number of disaster experiences, age, gender			
Fujiwara, T., Yagi, J., Homma, H., Mashiko, H., Nagao, K., Okuyama, M., & Children Study Team. (2017).	Earthquake / Tsunami (Japan)	Longitudin al	Individual and Interpersona l	490 children aged 5-8 years	Disaster exposure, maternal psychologica l distress, number of trauma events, parenting practice, gender, time	Depression in mother and children	2 years post disaster (T1) 3 years post disaster (T2)	Suicide risk
Fujiwara, T., Yagi, J., Homma, H., Mashiko, H., Nagao, K., Okuyama, M., (2017).	Earthquake (Japan)	Longitudin al	Individual	280 children aged 5-8 years	Age, gender, disaster exposure, number of earthquake- related events, exposure to other trauma before the earthquake, clinical problems, economic status	Depression in mother and children Parenting practice	2 years post disaster (T1) 3 years Post disaster (T2)	Suicide risk
Galante, R., & Foa, D. (1986).	Earthquake (Italy)	Experiment al pre-post (with control group)	Individual	300 children 4 <sup>th</sup> -6 <sup>th</sup> grade	Disaster exposure, treatment: gradual series of		6 months (T1) 18 months post disaster	Risk for developing neurotic or antisocial problems

					steps that led to a replaying of the earthquake	(1 after pretesting)	
Garrison, C. Z., Bryant, E. S., Addy, C. L., Spurrier, P. G., Freedy, J. R., & Kilpatrick, D. G. (1995).	Hurricane (Florida)	Cross- sectional	Individual, Interpersona l and Intergroup	370 parent- adolescent pairs: 158 hispanics, 116 black 104 white aged 12-17 years	Disaster exposure, gender, ethnicity, household income, lifetime exposure to undesirable events parent fear, parent PTSD symptoms	6 months post hurricane	PTSD
Ge, F., Yuan, M., Li, Y., Zhang, J., & Zhang, W. (2019)	Earthquake (China)	Longitudin al	Individual	1623 primary and secondary school children	socio- demographic characteristi cs PTSD	2 weeks, 3 months and 6 months after the earthquake	PTSD
Giannopoulou , I., Smith, P., Ecker, C., Strouthos, M., Dikaiakou, A., & Yule, W. (2006).	Earthquake (Greece)	Cross- sectional	Individual	2037 children and adolescents, aged 9-17 years	Age, gender	6-7 months post disaster	Post- traumatic stress reactions. PTSD
Giannopoulou , I., Strouthos, M., Smith, P., Dikaiakou, A., Galanopoulou	Earthquake (Greece)	Cross- sectional	Individual	2037 childre n and adolescents aged 9-17 years	Different types of exposure, objective and subjective	6-7 months post disaster	PTSD, anxiety and depression symptoms

, V., & Yule, W. (2006).					aspects of exposure to the earthquake, age, conder		
Gil-Rivas, V., & Kilmer, R. P. (2013).	Hurricane (USA)	Longitudin al	Individual and Interpersona l	68 caregiver- child dyads age M= 8.5 years	genderCaregiverPTSS anddepressivesymptoms,copingadvice,childperceptionsof caregiverdistress,unavailability,warmth,caregiver-childconflict	12 months post disaster (T1) 6–10 months later (T2)	PTSS depressive symptoms
Goenjian, A. K., Pynoos, R. S., Steinberg, A. M., Najarian, L. M., Asarnow, J. R., Karayan, I., & Fairbanks, L. A. (1995).	Earthquake (Armenia)	Cross- sectional	Individual	218 children Spirak (n = 63, M=13.7) Gumri (n = 94, M=13,1) Yerevan (n = 61, M=12.1)	Age, gender, disaster exposure, extent of loss of relatives and destruction of residence	18 months post disaster	PTSD depression separation anxiety disorder
Goenjian, A. K., Walling, D., Steinberg, A. M., Roussos, A.,	Earthquake (Armenia)	Cross- sectional	Individual	48 parentally bereaved adolescents and	Parentally bereaved and a comparison group after a	Six and an half year post disaster	Depression and PTSD symptoms

Goenjian, H. A., & Pynoos, R. S. (2009).				44 subjects with no parental loss, aged 11-16 years	catastrophic natural disaster, loss of both parents, loss of father, loss of mother, no parental loss			
Gökçen, C., Şahingöz, M., & Annagür, B. B. (2013).	Earthquake (Turkey)	Cross- sectional	Individual and Interpersona 1	450 children aged 12-14 years	Gender, family type (traditional or core), previous traumatic experience personal, family history of psychiatric disorders		6 months post disaster	PTSD
Gomez, C. J., & Yoshikawa, H. (2017).	Earthquake (Chile)	Experiment al (with control group)	Individual and Interpersona l	698 children exposed and 720 children no-exposed aged 53 months	Disaster exposure, earthquake related stressors, gender, age, parent's education, child prior experience in an early education setting, socio- economic status,		3-12 weeks post disaster	Cognitive function skills Early language, pre- literacy, mathemati cs and executive function outcomes

					classroom- level teacher's, parent's earthquake related- stressors			
Green, B. L., Korol, M., Grace, M. C., Vary, M. G., Leonard, A. C., Gleser, G. C., & Smitson- Cohen, S. (1991).	Flood (USA)	Cross- sectional	Individual and Interpersona 1	179 children aged 2-15 years	Age, gender, disaster exposure, parental functioning, family atmosphere		2 years post disaster	PTSD
Groome, D., & Soureti, A. (2004).	Earthquake (Greece)	Cross- sectional	Individual	178 children aged 9-14 years	Pproximity to the epicentre, exposure to threat, gender, age		5 months post disaster	PTSD Anxiety
Hafstad, G. S., Gil-Rivas, V., Kilmer, R. P., & Raeder, S. (2010).	Tsunami (Thailand)	Longitudin al	Individual and Interpersona l	105 morwegian children aged $6-17$ years and their parents (N = 67)	Subjective exposure and concurrent PTSS, objective exposure, parent ptg		6 months post disaster (T1), 10 months (T2), 2,5 years post disaster (T3)	Posttrauma tic Growth
Hafstad, G. S., Kilmer, R. P., & Gil- Rivas, V. (2011).	Tsunami (Southeast Asia)	Longitudin al	Individual	105 norwegian children aged 6-17 years	Age gender prior adversity exposure objective tsunami-		10 and 30 months post disaster	Posttrauma tic Growth

					1.4.1			
					related			
					exposure			
					subjective tsunami-			
					related			
					reactions,			
					tsunami-			
					related			
					traumatic			
					events,			
					post			
					traumatic			
					symptoms			
Hall, A., &	Earthquake	Cross-	Individual	2032	Age, gender,		12 months	Health and
Kirby, H.		sectional	and	children	enrolment		post disaster	nutritional
(2010).	(Pakistan)		Interpersona	5–14 years	status,			status
			1		socio-			
					economic			
					characteristi			
					cs			
Hambrick, E.	Tornado	Longitudin	Individual	50 children	Disaster		12 months	Happiness,
P., O'connor,		al		aged 8-12	exposure,		post disaster	upset and
B. M., &	(USA)			years	life-		(T1)	nervousnes
Vernberg, E.					threatening			s
M. (2016).					experiences,		3 montsh after	
					disruptive		(T2)	Perception
					life			s of
					experiences			research
					during and			100000000
					after the			
					tornado,			
					PTSS			
					severity,			
					time			
					unic			
Hambrick, E.	Tornado	Cross-	Individual	50 children	Children's		1 week after	PTSD,
P., Vernberg,	(USA)	sectional	marviauai	8-12 year-	processing		tornado	depression,
E. M.,		Sectional		olds	in trauma		lonado	and
Greenhoot, A.				and their	recollections			anxiety
F., &				mothers				anxiety
1., a				momers	,			

Hendrickson, M. L. (2017) Han, L., Zhang, Y., & Zheng, Y. (2012).	Earthquake (China)	Longitudin al	Individual	188 children aged 11-15 years	level of exposure, Family income, Age Gender Verbal ability Time, gender		2 weeks and 12 months post disaster	Mental health and coping styles
Hansel, T. C., Osofsky, J. D., Osofsky, H. J., & Friedrich, P. (2013).	Hurricane (USA)	Cross- sectional	Individual	795 children and adolescents (5 <sup>th</sup> -12 <sup>th</sup> grades)	Age (3 groups), relocation groupings, disaster exposure		4 years post disaster	Longer- term psychologi cal symptoms: trauma, depression, and posttrauma tic stress
Hausman, E. M., Black, S. R., Bromet, E., Carlson, G., Danzig, A., Kotov, R., & Klein, D. N. (2020)	Hurricane (U.S.A.)	Longitudin al	Individual Intepersonal	347 pairs mother-child 9 years old	Family's stress exposure Predisaster symptom		1 year before hurricane,. 8 weeks after the hurricane	depression anxiety
Hensley- Maloney, L., & Varela, R. E. (2009).	Hurricane (USA)	Cross- sectional	Individual	302 children 6th and 7th graders (T1) 110 children 6th and 7th graders (T2)	Anxiety sensitivity, gender	Trauma exposure	5–8 months post disaster (T1) 17–18 months post disaster (T2)	Panic symptoms

Hizli, F. G., Taskintuna, N., Isikli, S., Kilic, C., & Zileli, L. (2009). Hlodversdottir	Earthquake (Turkey) Volcanic	Cross- sectional	Individual and Interpersona l Individual	1999 children and adolescents, aged 8-18 years	Socio- demographic characteristi cs, loss of source, and loss of social support, fear and avoidance, post- earthquake life events, impact of earthquake		4 years post disaster	PTSD Depression physical
, H., Thorsteinsdott ir, H., Thordardottir, E. B., Njardvik, U., Petursdottir, G., & Hauksdottir, A. (2018)	eruption (Iceland)	sectional	Interpersona l	and their children	level gender age education level marital status house damage Parental mental health		after the eruption 3 years after eruption	and mental health symptoms
Houlihan, D., Ries, B. J., Polusny, M. A., & Hanson, C. N. (2008).	Tornado (USA)	Cross- sectional	Individual	95 students 3 <sup>rd</sup> - 12 <sup>th</sup> grade	Disaster exposure, home relocation, PTSD symptoms		5-6 weeks post disaster	Level of life satisfaction Total behavior problems

Hsu, C. C., Chong, M. Y., Yang, P., & Yen, C. F. (2002).	Earthquake (Taiwan)	Cross- sectional	Individual	323 adolescents aged 12-14 years	Disaster exposure, PTSD		6 weeks post disaster	Internalizi ng behaviors, and externalizi ng behaviors PTSD
Huzziff, C. A., & Ronan, K. R. (1999).	Eruptions (New Zealand)	Longitudin al	Individual and Interpersona 1	187 students age M=10 years	PTSD. disaster exposure, demographic s, home factors, negative, cognitive and emotional style coping, time		1 month post-disaster 3 months post-disaster	Coping
Itagaki, S., Harigane, M., Maeda, M., Yasumura, S., Suzuki, Y., Mashiko, H., & Mental Health Group of the Fukushima Health Management Survey. (2017).	Earthquake (Japan)	Cross- sectional	Individual	10824 children aged 6-15 years	Gender, age, place of residence, exercise category, treatment for illnesses and experienced the nuclear reactor accident		12 months post disaster	Mental health

Iwadare, Y., Usami, M., Suzuki, Y., Ushijima, H., Tanaka, T., Watanabe, K., & Saito, K. (2014).	Earthquake and Tsunami (Japan)	Longitudin al	Individual	3795 children (5 <sup>th</sup> - 6 <sup>th</sup> grades) and adolescents (8 <sup>th</sup> -9 <sup>th</sup> grades)	Age, gender, degree of disaster experienced	8-20 months post disaster	Posttrauma tic symptoms
Jeney- Gammon, P., Daugherty, T. K., Finch Jr, A. J., Belter, R. W., & Foster, K. Y. (1993).	Hurricane (USA)	Cross- sectional	Individual and Interpersona l	257 children 3 <sup>rd</sup> - 5 <sup>th</sup> grade	Children's coping styles, cognitive restructuring , seeking social support, social withdrawal, self-blame, emotional regulation	5 months post disaster	Depressive symptoms
Jia, Z., Tian, W., He, X., Liu, W., Jin, C., & Ding, H. (2010).	Earthquake (China)	Cross- sectional	Individual	596 children aged 8-16 years	Disaster exposure, utilization of mental health services, health- related quality of life	15 months post disaster	Mental health and quality of life
Jieling, C., & Xinchun, W. (2017).	Earthquake (China)	Cross- sectional	Individual and Interpersona l	618 participants (aged M=12.26)	Disaster exposure, social support	8 months post disaster	Post- traumatic stress symptoms. Post- traumatic growth

Jones, R. T., Frary, R., Cunningham, P., Weddle, J. D., & Kaiser, L. (2001).	Hurricane (USA)	Cross- sectional	Individual	<ul> <li>142</li> <li>elementary</li> <li>school</li> <li>children</li> <li>aged 8-11</li> <li>years,</li> <li>69</li> <li>adolescents</li> <li>aged 12-15</li> <li>years</li> </ul>	Gender, age and race appraisal of the severity of the event, life threat, loss/injury factor		6 months post disaster	Psychologi cal effects: intrusion and avoidance
Jurgens, J. J., Houlihan, D., & Schwartz, C. (1996).	Tornado (USA)	Cross - sectional	Individual	62 adolescents 12-18 years	School relocation, disaster exposure, age		3 months post disaster	PTSD Self efficacy Future orientation Academic achieveme nt
Juth, V., Silver, R. C., Seyle, D. C., Widyatmoko, C. S., & Tan, E. T. (2015).	Earthquake (Indonesia)	Cross- sectional	Individual and Interpersona 1	397 parent- child dyads aged 8-17 years	Disaster exposure, parent's pts symptoms, children's pts symptoms	Parent's or children's genders	3 years post disaster	Children and Parent's psychologi cal distress
Kalantari, M., & Vostanis, P. (2010).	Earthquake (Iran)	Cross- sectional	Individual and Interpersona l	166 children aged 7-13 years	Parental loss vs intact families, parent's psychopatho logy, gender, age, socioeconom ic status,		4 years post disaster	Behaviour al and emotional problems

					housing status			
Kar, N., Mohapatra, P. K., Nayak, K. C., Pattanaik, P., Swain, S. P., & Kar, H. C. (2007).	Cyclone (India)	Cross- sectional	Individual and Interpersona l	447 children aged 7-17 years	Disaster exposure, educational level, socioeconom ic status, disaster related experiences		12 months post disaster	PTSD
Kelley, M. L., Self-Brown, S., Le, B., Bosson, J. V., Hernandez, B. C., & Gordon, A. T. (2010).	Hurricane (USA)	Longitudin al	Individual and Interpersona l	381 children aged 8-16 years and parent	Disaster exposure, levels of child PTSD at T1	parent distress and negative parenting practices,	3-7 months post disaster (T1) 4-17 months (T2) post-disaster	PTSD risk
Kessel, E. M., Nelson, B. D., Finsaas, M., Kujawa, A., Meyer, A., Bromet, E., Klein, D. N. (2019)	Hurricane (USA)	Cross- sectional	Indivudual Interpersona l	74 children, 9 years old	parenting styles and hurricane- related stress		8 months before 6 weeks and 9 months after Hurricane	neural reactivity
Kessel, E. M., Nelson, B. D., Kujawa, A., Hajcak, G., Kotov, R., Bromet, E. J., & Klein, D. N. (2018).	Hurricane (USA)	Pre-post (without control group)	Individual	77 children aged 9 years	Disaster exposure		8 months pre disaster 9 months post disaster	Neural Reactivity to negative stimuli
Kiliç, C., Kiliç, E. Z., & Aydin, I. O. (2011).	Earthquake (Turkey)	Cross- sectional	Individual and Interpersona l	104 children aged 8-15 years and parents	Parental psychopatho logy, disaster exposure		4 years post disaster	Traumatic stress and depression

Kılıç, E. Z.,	Earthquake	Cross- sectional	Individual	102 children	Anxiety	5 years	PTSD
Kılıç, C., & Yılmaz, S.	(Turkey)	sectional		aged 8-15 years	sensitivity, disaster	post disaster	
(2008).	(Turkey)			years	exposure,		
(2000).					age, gender		
Kiliç, E. Z.,	Earthquake	Cross-	Individual	49 children	Parental	6 months	PTSD,
Özgüven, H.	1	sectional	and	aged 7-14	psychopatho	post disaster	depression
D., & Sayil, I.	(Turkey)		Interpersona	years 35	logy and		anxiety
(2003).			1	mothers and	family		
				35 fathers	functioning,		
					age, gender,		
					general		
					health,		
					depression,		
					PTSD of		
					parents, pre-existing		
					vulnerability		
					factors		
King, L. S.,	Hurricane	Longitudin	Individual	4154	Age, gender,	6 years post	PTS
Osofsky, J.	Oil Spill	al	and	children and	minority	disaster	
D., Osofsky,	_		Interpersona	adolescents	status,		
H. J., Weems,	(USA)		1	aged 8-18	disaster	1 year post oil	
C. F., Hansel,				years	exposure,	spill	
T. C., &					oil spill		
Fassnacht, G.					stress		
M. (2015).					lifetime		
					trauma and loss		
King, S., &	Ice Storm	Cross-	Individual	141 children	Time of	2 years	Intellectual
Laplante, D.		sectional	and	aged 2 years	exposure,	post disaster	, language
P. (2005).	(Canada)	sectional	Interpersona	ugea 2 years	prenatal	post disuster	and
			1		exposure,		functional
					prenatal		play
					maternal		developme
					stress level		nt
Kiser, L.,	Earthquake	Pre-post	Individual	416 Children	PTSD,	Before	PTSD
Heston, J.,		(without		(3 <sup>rd</sup> graders)	disaster	disaster	
Hickerson, S.,	(USA)	control		and	exposure	(T1)	
Millsap, P.,		group)		adolescents			

Nunn, W., & Pruitt, D. (1993).				(10 <sup>th</sup> graders)			6-8 weeks post disaster (T2)	
Knight, L. A., & Sullivan, M. A. (2006).	Tornado (USA)	Cross- sectional	Individual	52 children. aged 8-12 years	Disaster exposure, trauma attribution		12 Months post disaster	PTSD
Kolaitis, G., Kotsopoulos, J., Tsiantis, J., Haritaki, S., Rigizou, F., Zacharaki, L., & Liakopoulou, M. (2003).	Earthquake (Greece)	Cross- sectional	Individual	163 children, 4 <sup>th</sup> - 5 <sup>th</sup> - 6 <sup>th</sup> grades	Disaster exposure, gender, native vs. immigrant status, where the child was at the time of the earthquake, child injured, others injured, property damage, previous disaster exposure, age, education level of the father, mother's reaction		6 Months post disaster	PTSD Depression Anxiety
Kopala- Sibley, D. C., Danzig, A. P., Kotov, R., Bromet, E. J., Carlson, G. A., Olino, T. M., &	Hurricane (USA)	Pre-post (without control group)	Individual	332 children aged 3 years	Disaster exposure, temperament	Early childhood temperament negative emotionality and its facets Temperamen t	7 years pre disaster 6 years post disaster	Depression and anxiety symptoms

Klein, D. N. (2016).									
Kreuger, L., & Stretch, J. (2003).	Flood (USA)	Experiment al (without control group)	Individual	3876 children and adolescents 4 <sup>th</sup> - 5 <sup>th</sup> and 12 <sup>th</sup> grades	Disaster exposure, stayed/ evacuated residence, ability of family to recover				PTSD
Kronenberg, M. E., Hansel, T. C., Brennan, A. M., Osofsky, H. J., Osofsky, J. D., & Lawrason, B. (2010).	Hurricane (USA)	Longitudin al	Individual	387 children aged 9-18 years	Time, disaster exposure, gender, age, life stressor			2-3 years post disaster	Outcome Trajectorie s Depression PTSD
Kroska, E. B., O'Hara, M. W., Elgbeili, G., Hart, K. J., Laplante, D. P., Dancause, K. N., & King, S. (2018).	Flood (USA)	Cross- sectional	Individual Interpersona l	103 mothers who were pregnant when disastrous occurred	Pprenatal maternal stress, cognitive appraisal of the flood consequence s, timing of in utero exposure	Offspring birthweigh t	Social support	30 months post disaster	Childhood body mass index
					maternal depression				

Küçükoğlu, S., Yıldırım, N., & Dursun, O. B. (2015).	Earthquake (Turkey)	Cross- sectional	Individual	304 children aged 7-12 years	Disaster exposure, demographic characteristi cs		Within the 3 months post disaster	PTSS
Kujawa, A., Hajcak, G., Danzig, A. P., Black, S. R., Bromet, E. J., Carlson, G. A., & Klein, D. N. (2016).	Hurricane (USA)	Longitudin al	Individual	260 children aged 9-12 years	Late positive potential, electroencep halogram, hurricane- related stress, prehurricane internalizing and externalizing symptoms and child, gender		8 weeks post disaster 8 months post disaster	Children's internalizin g and externalizi ng symptoms
Kumar, M., & Fonagy, P. (2012).	Earthquake (India)	Experiment al (with control group	Individual	Exposed children sample (n=48), riots sample (n=37) control sample (n=42) 3 age groups: 8-9 years 10-11 years 12-13 years Above 14 years	Trauma groups			Attachmen t styles psychologi cal adjustment

Kumar, M., & Fonagy, P. (2013).	Earthquake (India)	Experiment al (with control group)	Individual	299 children aged 8-15 years Three groups: highly exposed earthquake sites $(n = 128)$ and riot sites (n = 171) Control sample of 351 no-trauma exposed	Type of disaster	3.4 years post disaster	Adjustmen t difficulties PTSD
Kuwabara, H., Araki, T., Yamasaki, S., Ando, S., Kano, Y., & Kasai, K. (2015).	Tsunami (Japan)	Cross- sectional	Individual	1102 children and 1157 adolescents	Age, gender, high impact group, lower- impact group (effect only for PTSS)	6 weeks post disaster	PTSS PTSD, depression
La Greca, A. M., Danzi, B. A., & Chan, S. F. (2017).	Hurricane (USA)	Cross- sectional	Individual	327 children aged 7-11 years	Gender, ethnicity, age, dsm-IV, dsm-V and ICD-11	8 months post disaster	PTSD, anxiety and depression
La Greca, A. M., Lai, B. S., Joormann, J.,	Hurricane (USA)	Cross- sectional	Individual and	116 children aged 8 years	Gender, age, race,	8 months post disaster	PTS and epression

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Jaccard, J. (2010).				aged M=8.74 years 245 children			21 months post disaster (T2)	
La Greca, A. M., Silverman, W. K., Vernberg, E. M., & Prinstein, M. J. (1996).	Hurricane (USA)	Longitudin al	Individual	(T2) 442 Children, 3 <sup>rd</sup> - 5 <sup>th</sup> grades	Disaster exposure, preexisting child characteristi cs (e.g, ethnicity), characteristi cs of the post disaster recovery, environment : major life stressors, social support	Coping	3 months post disaster (T1) 7 months post disaster (T2) 10 months post disaster (T3)	PTSS
Lack, C. W., Sullivan, M. A., (2008).	Tornado (USA)	Cross- sectional	Individual	102 children aged 8-12 years and 96 parents	Initial disaster exposure, attributions about the disaster, coping style		13 months post disaster	Long-term posttrauma tic distress
Lai, B. S., Kelley M. L., Harrison, K. M., Thompson, J. E., & Brown, S-S. (2014).	Hurricane (USA)	Longitudin al	Individual and Interpersona l	353 mother- child dyads aged 8-15 years	Levels of disaster stressor agreement among mother- child dyads, social support from parents		3-7 months post disaster (T1) 14–17 months post disaster (T2)	PTS in children PTS in mothers

Lai, B. S., Beaulieu, B., Ogokeh, C. E., Self- Brown, S., & Kelley, M. L. (2015)	Hurricane (USA)	Longitudin al	Individual and Interpersona 1	353 mothers- children dyads aged 8-16 years	or a classmate/fri end disaster related experiences, actual life threat Trauma exposure		3-7 months post disaster (T1) 14-17 months post disaster (T2)	PTS symptoms
(2015). Lai, B. S., La Greca, A. M., & Llabre, M. M. (2014).	Hurricane (USA)	Cross- sectional	Individual	204 children aged 7-11 years	Impact of a natural disaster, disaster exposure, recovery stressors, gender	PTS symptoms activity	(T2) 8 months post disaster	PTS symptoms Sedentary activity
Lai, B. S., La Greca, A. M., Auslander, B. A., & Short, M. B. (2013).	Hurricane (USA)	Longitudin al	Individual	277 children (between 8.70 and 9.40 years)	Disaster exposure, recovery stressors, time		8 months post disaster (T1) 15 months post disaster (T2)	PTSD and depression
Lai, B. S., Osborne, M. C., Piscitello, J., Self- Brown, S., & Kelley, M. L. (2018).	Hurricane (USA)	Longitudin al	Individual and Interpersona l	426 children aged 8-16 years	Social support, time		3-7 months (T1) 13-17 months (T2) 19-22 months (T3)	PTSS

Lai, B. S., Tiwari, A., Beaulieu, B. A., Self- Brown, S., & Kelley, M. L.	Hurricane (USA)	Longitudin al	Individual and Interpersona l	283 mother- child dyads aged 8-15 years	Mothers posttraumati c stress symptoms, disaster exposure,	25-27 months (T4) 3-7 months post disaster (T1) 13–17 months	PTSS depression anxiety
(2015).					traumatic life events, social support, time 1	post disaster (T2) 19-22 months post disaster (T3)	
						25 – 27 months post disaster	
Laor, N., Wolmer, L., Kora, M., Yucel, D., Spirman, S., & Yazgan, Y. (2002).	Earthquake (Turkey)	Cross- sectional	Individual	303 children aged 8 years	Disaster exposure, gender, age, past trauma experiences, predisaster functioning, grief, dissociation	4 months post disaster	PTSD
Laplante, D. P., Brunet, A., Schmitz, N., Ciampi, A., & King, S. (2008).	Ice Storm (Canada)	Cross- sectional	Individual and Interpersona l	89 mothers- child dyads aged M=5.5 years	Disaster exposure, maternal psychologica l functioning, maternal life event postpartum depression,	5 years post disaster	Intellectual and language performan ce of children

					time of utero exposure, demographic factors		
Laplante, D. P., Zelazo, P. R., Brunet, A., & King, S. (2007).	Ice Storm (Canada)	Cross- sectional	Individual and Interpersona l	52 children aged 2 years	Prenatal maternal stress, trimester of pregnancy, maternal and pregnancy factors, maternal anxiety and depression, parental socioeconom ic status	2 years post disaster	Functional play
Lee, O. (1999).	Hurricane (USA)	Cross- sectional	Individual and Intergroup	1274 and 5 <sup>th</sup> grades	Ethnicity, socioeconom ic status, gender	18 months post hurricane	Science knowledge , world views, informatio n sources
Li, G., Wang, L., Cao, C., Fang, R., Cao, X., Chen, C., Elhai, J. D., & Hall, B. J. (2019)	Earthquake (China)	Cross- sectional	Individual, Intergroup	13.438 children 6- 18 years old	Trauma exposure Quality of life Sex Age Ethnicity		PTSD Executive dysfunctio n symptoms
Li, X., Huang, X., Tan, H., Liu, A., Zhou, J., & Yang, T. (2010).	Flood (China)	Cross- sectional	Individual and Interpersona l	3698 families Children aged 7-15 years	PTSD in parents, flood exposure level of the children	18 months post disaster	Children PTSD

					age, gender, parental attitudes, class suspended			
Li, Y., Li, H., Decety, J., & Lee, K. (2013).	Earthquake (China)	Experiment al (with control group) longitudina 1	Individual	60 children pre-disaster group, 60 children 1 month post disaster 60 children 3 years post disaster aged 6 years	Disaster exposure	Age	1 month Post disaster (T1) 3 years later (T2)	Children's altruistic giving
Li, Y., Li, H., Decety, J., & Lee, K. (2013).	Earthquake (China)	Experiment al (with control group)	Individual	<ul> <li>65 children</li> <li>experimental</li> <li>condition</li> <li>58 control</li> <li>condition</li> <li>128 children</li> <li>from a no-</li> <li>disaster area</li> <li>aged 6-9</li> <li>years</li> </ul>	pictures of property damage and human suffering, area	Age empathy	3 years post disaster	Children's altruistic giving
Liang, Y., Cheng, J., Zhou, Y., & Liu, Z. (2019)	Earthquake (China)	Longitudin al	Individual	301 children, 9-14 years old	Trauma exposure Prequake trauma gender, age grade		4, 16, 29, 40 and 52 months after the disaster	PTSD
Liao, T. L., Chen, Y. S.,	Earthquake	Longitudin al	Individual and	12.111 adolescents	Gender,		2 years post disaster	Internalizi ng and

Chen, C. Y., & Chien, L. Y. (2014).	(Taiwan)		Interpersona	(high school)	urbanization level, primary caregiver's gender, education level and occupation level, impact of the earthquake, family member died or severely injured, length of time to restore the home, affected and	(T1) 4 years post disaster (T2)	Externalizi ng Behaviours
Liu, K., Liang, X., Guo, L., Li, Y., Li, X., Xin, B., & Li, Y. (2010).	Earthquake (China)	Cross- sectional	Individual	118 children and adolescent aged 5-18 years. 3 age groups: (2.7 years, 8-11 years and 12-15 years)	unaffected groups Socio- demographis , disaster related variables, disaster exposure, gender, age	Within 1month post disaster	Acute stress disorder
Liu, M., Wang, L., Shi, Z., Zhang, Z., Zhang, K., & Shen, J.	Earthquake (China)	Longitudin al	Individual	330 students ranged from grade 3 <sup>rd</sup> to 5 <sup>th</sup> grace	Age, gender and grade, disaster exposure	6 months post disaster 12 months post disaster	Mental health problems Anxiety,

(2011).								depression and PTSD
Liu, X., Yang, H., Tang, B., Liu, Y., & Zhang, L. (2017).	Earthquake (China)	Cross- sectional	Individual, Interpersona l and Intergroup	591 children and adolescent aged 12-16 years	Gender, age, ethnicity, religious faith, chronic disease history, residential area, family resident population, main source of income for the family, disaster related experiences, psychologica l counselling and training		6 years post disaster	Physical and mental health status
Lochman, J. E., Vernberg, E., Powell, N. P., Boxmeyer, C. L., Jarrett, M., McDonald, K., & Kassing, F. (2016)	Tornado (USA)	Pre post (without control group) and longitudina 1	Individual	360 children aged 9 -11 years and parents	Severity and duration of disaster exposure and loss, gender, parental depression, 3 cohort of coping power program	Pre-tornado, levels of anxiety	Pre disaster (T1) 6 months post disaster (T2) 12 months post disaster (T3)	Child psychologi cal and behavioral adjustment Aggressive behavior Internalizi ng behavior
Lonigan, C. J., Shannon, M. P., Finch Jr, A. J.,	Hurricane (USA)	Cross- sectional	Individual	5687 children aged 9-19 years	Disaster exposure, gender, ethnicity		3 months post disaster	Anxiety and PTSD

Daugherty, T. K., & Taylor, C. M. (1991).								
Lonigan, C. J., Shannon, M. P., Taylor, C. M., Finch Jr, A. J., & Sallee, F. R. (1994).	Hurricane (USA)	Cross- sectional	Individual	5687 children 3 age groups: preadolescen ts aged 9-12 years early adolescents aged 13-15 years and late adolescents aged 16 years or older	Disaster exposure, anxiety, age, sex, race			PTSD
Lowe, S. R., Godoy, L., Rhodes, J. E., & Carter, A. S. (2013).	Hurricane (USA)	Pre-post and Longitudin al	Individual and Interpersona 1	184 mothers and 251 children aged 5-10	Age, sex, disaster exposures and related experiences, stressor	Maternal psychologi cal distress School mobility	12 months pre disaster (T1) 12 months post disaster (T2) 3 years post disaster (T3)	Child symptoms (internalizi ng, externalizi ng)
Ma, X., Liu, X., Hu, X., Qiu, C., Wang, Y., Huang, Y., & Li, T. (2011).	Earthquake (China)	Cross- sectional	Individual and Interpersona l	3645 adolescents aged 12-18 years	Demographi c data, disaster exposure, cognitive status, social supports		6 months post disaster	PTSD Post- trauma stress symptoms

Madkour, A. S., Johnson, C. C., Clum, G. A., & Brown, L. (2011).	Hurricane (USA)	Pre-post and Longitudin al	Individual and Intergroup	5267 adolescents aged 12-18 years	Time, age, gender, race/ethnicit y	2 years pre disaster (T1) 4 months pre disaster (T2) 2 years Post disaster (T3)	Violence- related behaviors
Martin, N. C., Felton, J. W., & Cole, D. A. (2016).	Flood (USA)	Pre-post (without control group)	Individual and Interpersona l	239 adolescents aged 10-15 years	Disaster exposure, predisaster levels of negative life events, depressive symptoms, rumination and negative friendship interactions	Pre disaster (T1) 10 days post disaster (T2)	PTSS
Mashiko, H., Yabe, H., Maeda, M., Itagaki, S., Kunii, Y., Shiga, T., & Niwa, S. I. (2017).	Earthquake (Japan)	Cross- Sectional	Individual	15.274 children aged 4-15 years	Age, gender, evacuation zones	10 months post disaster	Mental health status
McDermott, B. M., & Cobham, V. E. (2012).	Cyclone (Australia)	Cross- Sectional	Individual and Interpersona l	145 families children aged 8-12 years	Post-disaster family functioning,	3 months post disaster	Family functionin g PTSD

McDermott, B. M., Cobham, V. E., Berry, H., & Stallman, H. M. (2010).	Cyclone (Australia)	Cross- Sectional	Individual and Interpersona 1	568 children aged 8-15 years	disaster- related variables threat to self , family health and/or dysfunction, age, gender Family resilience, event-related factors, previous child mental illness, social connectedne ss, disaster exposure,		3 months post disaster	PTSD
McDermott, B., Berry, H., & Cobham, V. (2012).	Cyclone (Australia)	Cross- Sectional	Individual and Interpersona 1	804 children aged 8-13 years	age, grade Age, gender, school system, trauma exposure, threat perception, new social connectedne		3 months post disaster	PTSD
McDermott, B., Cobham, V., Berry, H., & Kim, B. (2014).	Cyclone (Australia)	Longitudin al	Individual and Interpersona l	71 children And 191 adolescents grades 5 <sup>th</sup> - 10 <sup>th</sup>	ss Disaster exposure, social connectedne ss, PTSD, age, time		3 months post disaster 18 months Post disaster	PTSD

McDonald KL, Vernberg EM, Lochman JE, et al. (2019)	Tornado (USA)	Longitudin al	Individual Interpersona 1	346 4th-6th- graders and their caregivers	Predisaster individual and family characteristi cs Disaster exposure	Positive parenting and pretornado caregiver trauma exposure	4 years after tornado.	PTSS
McFarlane, A.C. (1987)	Bushfires (South Australia)	Longitudin al	Individual and Interpersona l	150 children (T1-T2) 101 children (T3) and parents (T2-T3) aged 6-13 years	Disaster exposure	Family functions: - irritable distress - involvement Overprotecti on	2 months post disaster 8 months post disaster (T2) 26 months post disaster (T3)	Emotional and behavioura l problems Children disorders
McLaughlin, K. A., Fairbank, J. A., Gruber, M. J., Jones, R. T., Osofsky, J. D., Pfefferbaum, B., & Kessler, R. C. (2010).	Hurricane (USA)	Longitudin al	Individual	576 children and adolescents aged 4-17 years	Stressors experienced in the hurricane, ongoing stressors		<ul> <li>5-7 months post disaster (T1)</li> <li>7 to 10 months post disaster (T2)</li> <li>15-19 months post disaster (T3)</li> </ul>	Emotional functionin g in children Emotional disturbanc e
McLaughlin, K. A., Fairbank, J. A., Gruber, M. J., Jones, R. T., Lakoma, M. D., Pfefferbaum, B., & Kessler, R. C. (2009).	Hurricane (USA)	Cross- Sectional	Individual and Interpersona 1	797 children aged 4-17 years	Hurricane- related stressors, demographic s, family factors		18-27 months post disaster	Emotional disturbanc e

McLean, M. A., Cobham, V. E., Simcock, G., Elgbeili, G., Kildea, S., & King, S. (2018)	Flood (USA)	Cross- sectional	Individual Interpersona 1	230 mothers and 118 children 4 years old	prenatal maternal stress maternal socioeconom ic status, education, income, and marital status. Major life events. Infant birth weight and gestational age	Timing of flood exposure during pregnancy and child sex	12 months postflood	Children Anxiety
Meyer, A., Danielson, C. K., Danzig, A. P., Bhatia, V., Black, S. R., Bromet, E., & Klein, D. N. (2017).	Hurricane (USA)	Pre-post and Longitudin al	Individual	223 children, aged between 3.00-4.09 years and theirs mothers	Age, temperament al fear, biomarker of risk for anxiety, fearfulness, hurricane stressors, ern (error- related negativity)		3 years of age, 6 years of age, and 9 years of age (pre disaster assessment) 6 weeks post disaster	Internalizi ng symptoms
Mikolajewski, A. J., & Scheeringa, M. S. (2018)	Hurricane (USA)	Cross- sectional	Individual	36 children 3–6 years old	Age Respiratory Sinus Arrhythmia		19 to 681 days before disaster 8 months to 3 yars after disaster	PTSD
Mikyung, J., Se-hwa, L. & Lee-jin, K. (2020)	Earthquake (Nepal)	Cross- sectional	Individual Intepersonal	200 pairs parents and children 6–17 years old	PTSD and internalizing and externalizing problems in parents		24 months after earthquake	PTSD internalizin g and externalizi ng problems in children

					Education Occupation		
Miller, P. A., Roberts, N. A., Zamora, A. D., Weber, D. J., Burleson, M. H., Robles, E., & Tinsley, B. J. (2012).	Wildfire And Tornado (USA)	Cross- Sectional	Individual and Interpersona l	24 parents and 44 children aged 5-17 years 32 parents and 63 children aged from 6 weeks to 18 years	Coping activities, prior and current disaster exposure levels, family coping, social support	Within 4 days of each disaster	Psychologi cal impact of disasters on children
Milne, G. (1977).	Cyclone (Australia)	Cross- Sectional	Individual	649 children aged 5-16 years	Evacuated or not, age, gender		School problem Fearful, regressive, and aggressive behaviour Injuries, diseases and infections Emotional and physical disorders
Moore, K. W., & Varela, R. E. (2010).	Hurricane (USA)	Cross- Sectional	Individual and Interpersona l	156 children aged 9-14 years	Gender, disaster exposure, parent support,	33 months post disaster	PTSS

Mordeno, I. G., Galela, D. S., Nalipay, M. J. N., & Cue, M. P. (2018)	Typhoon (Philippine )	Cross- sectional	Individual	225 children 9-17 years old	classmate support, teacher support friend support immediate loss disruption continued loss and disruption negative events Centrality of Event	Sensory- based trauma memory quality			Acute Stress Disorder Depression
Moss, K. M., Simcock, G., Cobham, V., Kildea, S., Elgbeili, G., Laplante, D. P., & King, S. (2017).	Flood (Australia)	Longitudin al	Individual and Interpersona l	145 mothers	Prenatal maternal stress, maternal severity of flood exposure subjective stress reactions cognitive appraisal		Timing of exposure	12 months post disaster 16 months postpartum	Child cognitive and motor developme nt
Mouchenik, Y., Marty- Chevreuil, A., Marquer, C., Joseph, N. E., Ducasse, J. W., Ryswick,	Earthquake (Haiti)	Cross- Sectional	Individual	166 children aged 3-6 years	Demographi c aspects, gender, age, trauma exposure			11 months post disaster	Psychologi cal disturbanc e

C., & Baubet, T. (2014). Mumper, E. E., Dyson, M. W., Finsaas, M. C., Olino, T. M., & Klein, D. N. (2019)	Hurricane (USA)	Longitudin al	Invidual	392 children 3 years-old	Sex Age behavioral inhibition	Life stress events and natural disaster exposure	7 year before hurricane, six weeks after hurricane and 2 years after the hurricane	Anxiety
Muris, P., Meesters, C., Merckelbach, H., Verschuren, M., Geebelen, E., & Aleva, E. (2002).	Hurricane (Antilles)	Experiment al (with control group)	Individual	161 Antillean children disaster exposure 185 Belgian control group aged 8-11 years	Age, gender, different forms of fear related and not related to disasters			Fear of storms
Najarian, L. M., Goenjian, A. K., Pelcovttz, D., Mandel, F., & Najarian, B. (1996).	Earthquake (Armenia)	Cross- Sectional	Individual	74 children aged 11-13 years	Trauma exposure, relocation		2.5 years post disaster	PTSD, Depression , behavioral difficulties
Navarro, J., Pulido, R., Berger, C., Arteaga, M., Osofsky, H. J., Martinez, M., & Hansel, T. C. (2016).	Earthquake Tsunami Hurricane (USA)	Cross- Sectional	Individual	827 children and adolescents aged 8-17 years	Type of disaster		4 months post disaster	Depression PTS

Neuner, F., Schauer, E., Catani, C., Ruf, M., & Elbert, T. (2006).	Tsunami (Sri Lanka)	Cross- Sectional	Individual	264 children, aged 8-14 years	Objective and subjective disaster exposure, previous traumatic exposure		4 weeks post disaster	PTSD
Nomura, Y., Davey, K., Pehme, P. M., Finik, J., Glover, V., Zhang, W., Ham, J. (2019)	Storm (USA)	Cross- sectional	Individual Interpersona 1	310 pairs mother-child 6 months old	Maternal depression Maternal education, marital status, race, smoking, and child's sex Disaster exposure	In utero level of exposure	Immediately after the disaster and after 6 months	Infant temperame nt (emotion dysregulati on and distress)
Nygaard, E., Jensen, T. K., & Dyb, G. (2010).	Tsunami (Southeast Asia)	Cross- Sectional	Individual and Interpersona l	38 norwegian sibling pairs and 38 nonsibling pair aged 6-17 years	sibling vs nonsibling, gender, children exposure		6 months post disaster	PTSD
Nygaard, E., Jensen, T. K., & Dyb, G. (2012).	Tsunami (Southeast Asia)	Longitudin al	Individual	133 children norwegian and adolescents aged 6-17 years	Disaster exposure, distress and posttraumati c stress reactions, general mental health problems		10 months post disaster 2.5 years post disaster	Posttrauma tic stress reactions

Ortiz, C. D., Silverman, W. K., Jaccard, J., & La Greca, A. M. (2011).	Hurricane (USA)	Experiment al (with control group)	Individual and Interpersona 1	248 children from a hurricane prone region 63 control group (neutral film) 185 exposure to disaster media aged 7-12 years	Life event, anxiety depression social support and use of coping strategies	Grade Sex		State anxiety
Osofsky, H. J., Osofsky, J. D., Kronenberg, M., Brennan, A., & Hansel, T. C. (2009).	Hurricane (USA)	Cross- sectional	Individual	7258 children aged 7-19	Disaster exposure, demographic variables		2 years post disaster	PTSS
Osofsky, J. D., Osofsky, H. J., Weems, C. F., Hansel, T. C., & King, L. S. (2014).	Gulf Oil Spill and Hurricane (USA)	Pre - post (without control group)	Individual	1730 children and adolescents aged 3-18 years	Level of oil spill stress, preexisting PTSD symptoms, previous hurricane exposure, gender minority status		1 year Pre-disaster 1 year post disaster	PTSD
Osofsky, J.D., Kronenberg, M., Bocknek, E., & Hansel, T. C. (2015).	Hurricane (USA)	Longitudin al	Individual and Interpersona l	914 children aged 3-5 years	Attachment, caregiver disruption, nonhuman losses, disaster exposure		During the first year post disaster (T1) After 1 year (T2)	Children's long-term post- hurricane psychologi cal outcome

							After 2 years (T3) After 3 years (T4)	
Pina, A. A., Villalta, I. K., Ortiz, C. D., Gottschall, A. C., Costa, N. M., & Weems, C. F. (2008).	Hurricane (USA)	Pre-post (without control group)	Individual	46 youth (M= 11.43)	Disaster exposure, social support, discriminatio n and coping		Pre-disaster 6-7 months post disaster	PTSD, anxiety, and depression
Piotrowski, C., & Dunham, F. Y. (1983).	Hurricane (USA)	Experiment al (withour control group)	Individual	269 Children 5 <sup>th</sup> grade from city hit by the hurricane 194 in the city not hit	Disaster exposure	Locus of control	5-8 months post disaster	Perception of the hurricane concept "hurricane"
Ponnamperum a, T., & Nicolson, N. A. (2016).	Tsunami (Sri Lanka)	Cross- Sectional	Individual and Interpersona l	414 adolescent aged 12-16 years	Negative appraisals, lifetime traumatic events, ongoing adversity, social support		3 years after the tsunami	PTSS, internalizin g Symptoms Negative appraisal score
Prinstein, M. J., La Greca, A. M., Vernberg, E. M., & Silverman, W. K. (1996).	Hurricane (USA)	Cross- Sectional	Individual and Interpersona l	506 children in the 3 <sup>rd</sup> , 4 <sup>th</sup> and 5 <sup>th</sup> grades of elementary schools	Children's social support, coping emotional processing and distraction, coping		7 months after hurricane Andrew	PTSD

Proctor, L. J., Fauchier, A., Oliver, P. H., Ramos, M. C., Rios, M. A., & Margolin, G. (2007).	Earthquake (USA)	Pre-post (without control group)	Individual and Interpersona l	117 two- parent exposed families Children aged 4-5 years	Predisaster parenting behaviors and postdisaster, parental stress, earthquake impact	Post parental stress	Pre- earthquake parental behaviors	8 months after the earthquake	Parental stress and children's distress
Pullins, L. G., McCammon, S. L., Lamson, A. S., Wuensch, K. L., & Mega, L. (2005).	Hurricane and Flood (USA)	Cross- Sectional	Individual	<ul> <li>612 children aged 5-19 years</li> <li>248 children and 86 parents participated in the evaluation phase</li> </ul>	Grade, severity of exposure, race, gender				Adjustmen t problems in children
Pynoos, R. S., Goenjian, A., Tashjian, M., Karakashian, M., Manjikian, R., Manoukian, G., & Fairbanks, L. A. (1993).	Earthquake (Armenia)	Cross- Sectional	Individual	231 children aged 8-16 years	Gender, proximity to the epicentre, severity of posttraumati c stress reaction			18 months post disaster	PTSD
Raccanello, D., Burro, R., & Hall, R. (2017).	Earthquake (Italy)	Experiment al (with control Group)	Individual	127 children aged 7-10 years	Group (experimenta l, control), class level (2 <sup>nd</sup> to 5 <sup>th</sup> graders), gender			2 years post disaster	Children's emotional competenc e: Understan ding, regulating and

Roberts, Y.	Hurricane	Pre-post	Individual	43 children	Disaster-		Before the	expressing emotions Knowledg e of earthquake s Depressive
H., Mitchell, M. J., Witman, M., & Taffaro, C. (2010).	(USA)	(without control group) and longitudina l		and adolescent aged 11-18 years	related variables, demographic information		disaster 1 year post disaster 2 years postdisaster	, Anxious PTSS
Roussos, A., Goenjian, A. K., Steinberg, A. M., Sotiropoulou, C., Kakaki, M., Kabakos, C., & Manouras, V. (2005).	Earthquake (Greece)	Cross- Sectional	Individual	1937 children and adolescent aged 9–18 years, of two differentially exposed cities (ano liosia, at the epicenter, and dafni, 10 kilometers from the epicenter)	Objective and subjective features of earthquake exposure, gender, school level, postearthqua ke difficulties, death of a family member, thoughts of revenge		3 months post disaster	Posttrauma tic stress and depressive reactions
Roysircar, G., Colvin, K. F., Afolayan, A. G., Thompson, A., & Robertson, T. W. (2017).	Earthquake (Haiti)	Cross- sectional	Individual	131 children and adolescent aged 6-15 years	Age, gender, year, location			Resilience and vulnerabili ty

Russell, J. D., Neill, E. L., Carrión, V. G., & Weems, C. F. (2017).	Hurricane (USA)	Cross- sectional	Individual	786 children aged 8-13 years and adolescent 14-18 years	Severity symptoms, symptom indices	36 months post disaster	Network structure of PTSD
Russoniello, C. V., Skalko, T. K., O'brien, K., McGhee, S. A., Bingham- Alexander, D., & Beatley, J. (2002).	Hurricane and Flood (USA)	Cross- Sectional	Individual, Interpersona l and Intergroup	218 children aged 9-12 years	Experiencin g flooding at home, gender, coping, social support, race	6 months post disaster	PTSD symptom
Şahin, N. H., Batıgün, A. D., & Yılmaz, B. (2007).	Earthquake (Turkey)	Longitudin al	Individual and Interpersona 1	Study 1: 420 children aged 6-11 years Study 2: 948 adolescents aged 12-16 years	Gender, location, impact of the disaster, separation from family, losses, injuries, disaster exposure, school performance , reasons for living, future expectation	5 months post second earthquake (T1) 3 months after the first data Collection (T2)	PTSS Psychologi cal symptoms
Sales, J. M., Fivush, R., Parker, J., & Bahrick, L. (2005).	Hurricane (USA)	Longitudin al	Individual	35 children aged 3-4 years	Low, moderate, and high- stress groups	Immediately post disaster (T1) 6 years later (T2)	Recall and PTSD
Salloum, A., & Lewis, M. L. (2010).	Hurricane (USA)	Cross- sectional	Individual and	42 African American children	Disaster exposure,	5-8 months post disaster	Children's coping strategy

			Interpersona 1	aged 7-12 years and 38 parents	parent's coping strategy				
Salloum, A., Carter, P., Burch, B., Garfinkel, A., & Overstreet, S. (2011).	Hurricane and Exposure to Communit y Violence (USA)	Cross- Sectional	Individual and Interpersona l	122 children aged 7-12 years	Disaster exposure		Prior experiences with hurricane Katrina Exposure to community violence		PTSS and depression
Saylor, C. F., Swenson, C. C., Stokes Reynolds, S., & Taylor, M. (1999).	Hurricane (USA)	Cross- Sectional	Individual	475 children aged 2-10 years	Disaster exposure, different type of trauma, age, gender			14 months post disaster	PTSD Emotional distress
Scaramella, L. V., Sohr- Preston, S. L., Callahan, K. L., & Mirabile, S. P. (2008).	Hurricane (USA)	Pre-post and longitudina l	Individual and Interpersona 1	2 groups of low-income mothers and their children aged 2 years pre-disaster: n=55 post- disaster: n=47		Mother's depression Parenting efficacy Perceived financial strain, Neighborh ood violence Number of adults in the home		<ul> <li>1 to 2 years pre disaster (T1)</li> <li>6 months post disaster (T2)</li> <li>18 months post disaster (T3)</li> </ul>	Child problem behaviour

Scheeringa, M. S. (2014).	Olis Spill and Hurricane Katrina (USA)	Cross- Sectional	Individual	284 children aged 3-6 years	Type of disaster: oils spill, disaster exposure repeated traumas (cumulative number of events)			PTSD
Scheeringa, M. S., & Zeanah, C. H. (2008).	Hurricane (USA)	Cross- Sectional	Individual and Interpersona l	70 preschool children ages 3-6 and their caregiver	Disaster exposure and experiences, groups (stayed/evac uated, separated/no t separated, black/non- black and boy/girl			PTSD Comorbid Disorders
Schwind, J. S., Formby, C. B., Santangelo, S. L., Norman, S. A., Brown, R., Hoffman Frances, R.,  Karmacharya, D. (2018)	Earthquake (Nepal)	Cross- sectional	Individual Interpersona l Intergroup	62 children 8–17 years old and parents	Earthquake exposures age gender marital status household identifed religion household identifed ethnic group level of education occupation		1 year after disaster	Depression , PTSD Resilience

Self-Brown, S., Lai, B. S., Harbin, S., & Kelley, M. L. (2014).	Hurricane (USA)	Longitudin al	Individual and Interpersona 1	423 mother- child dyads Children aged 8-16 years	number of members in household Maternal posttraumati c stress disorder symptom trajectories	3-7 months post disaster (T1) 13-17months post disaster (T2) 19-22 months post disaster (T3) 25-27 months post disaster (T4)	PTSS
Shannon, M. P., Lonigan, C. J., Finch Jr, A. J., & Taylor, C. M. (1994).	Hurricane (USA)	Cross- sectional	Individual and Intergroup	5687 school-aged children aged 9-13 years	Disaster exposure, race, gender, age	3 months post disaster	PTSD School performan ce
(1991). Shaw, J. A., Applegate, B., & Schorr, C. (1996).	Hurricane (USA)	Longitudin al	Individual	30 school children aged 7-13 years	Disaster exposure, gender	2 months post disaster (T1) 8 months post disaster (T2) 21 months post disaster (T3)	PTSS and psychologi cal morbidity
Shaw, J. A., Applegate, B., Tanner, S., Perez, D., Rothe, E.,	Hurricane (USA)	Longitudin al	Individual	106 school children aged 6-11 years	High and low impact groups	8 weeks post disaster (T1) 32 weeks	PTSS

Campo- Bowen, A. E., & Lahey, B. L. (1995).							post disaster (T2)	
Silwal, S., Dybdahl, R., Chudal, R., Sourander, A., & Lien, L. (2018).	Earthquake (Nepal)	Cross- Sectional	Individual	893 students aged 11-17 years	Age, gender, ethnicity, parent's education and prior exposure to trauma, disaster exposure and experience	Gender	12 months post disaster	PTSS and depressive symptoms
Simcock, G., Cobham, V. E., Laplante, D. P., Elgbeili, G., Gruber, R., Kildea, S., & King, S. (2019)	Flood (USA)	Longitudin al	Individual Interpersona l	86 mother and children, 3-4 years old	Prenatal maternal stress Maternal marital status, socioeconom ic status and education level Maternal cognitive appraisal		12 months post- flood 30 months and 48 month after flood	sleep, attention anxious/de pressed symptoms
Simcock, G., Elgbeili, G., Laplante, D. P., Kildea, S., Cobham, V., Stapleton, H., King, S. (2017)	Flood (Queenslan d)	Cross- sectional	Individual Intepersonal	126 mother and children 6 months old	Prenatal Maternal Stress Mather exposure, subjective stress, Cognitive appraisal, school level,	infant sex, timing of the flood in gestation, and mother's emotional response to the disaster.	3–10 months after flood	Infant temperame nt

appraisal         Age of         gestation         exposure to         the flood.         Maternal         depression         and anxiety         Maternal         socioeconom         ic status         Maternal         education         level.         Child         gestational         age, birth         weight, and
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					circumferenc e			
Siqveland, J., Hafstad, G. S., & Tedeschi, R. G. (2012).	Tsunami (Southeast Asia)	Longitudin al	Individual and Interpersona 1	68 parents and their 105 norwegian children	Parent's disaster exposure, child- disaster exposure		6 months post disaster (T1) 10 months post disaster (T2) 30 months post disaster (T3)	PTG in parents PTSS in parents and children
Siswa Widyatmoko, C., Tan, E. T., Conor Seyle, D., Haksi Mayawati, E., & Cohen Silver, R. (2011).	Earthquake (Indonesia)	Cross- sectional	Individual	3115 children aged 6-14 years and teachers	Children symptoms identified from teachers,		2 years post disaster	PTSS
Soysa, C. K. (2013).	Tsunami War (Sri Lanka)	Longitudin al		War sample: 60 youths aged 9-16 years olds Tsunami sample: 60 adolescent aged 12-14 years	Trauma exposure (war or tsunami)		3 months post a major war-related event 3 months post tsunami	PTSD
Spell, A. W., Kelley, M. L., Wang, J.,	Hurricane (USA)	Cross- sectional	Individual and	260 children aged 8-16 years and	Child disaster exposure	Global maternal psychologica	3-7 months post disaster	Children's Psychologi cal

Self-Brown, S., Davidson, K. L., Pellegrin, A., & Baumeister, A. (2008).			Interpersona 1	their mothers		l distress and maternal posttraumati c stress disorder		distress: child internalizin g and externalizi ng symptoms
Sprung, M. (2008).	Hurricane (USA)	Cross- sectional	Individual	<ul> <li>183 children aged 5-8 years:</li> <li>145 from the hurricane Katrina disaster area,</li> <li>95 from Coastal Mississippi, and 50 children were from Hattiesburg, Mississippi.</li> <li>38 children composing the control group from Boston area.</li> </ul>	Gender, age, ethnicity, socioeconom ic resources, higher or low levels of understandin g of the mind		7 months post disaster	Intrusive thoughts and level of cognitive functionin g
Sprung, M., & Harris, P. L. (2010).	Hurricane (USA)	Cross- Sectional	Individual	165 children aged 5-9 years	Level of exposure: proximity to the hurricane and the loss- disruption		7 months post disaster	Intrusive thoughts Attention Knowledg e about thinking: i.e.,

Sriskandaraja h, V., Neuner, F., & Catani, C. (2015).	Tsunami (Sri Lanka)	Cross- Sectional	Individual and Interpersona 1	359 children aged 7-11 years	Age, gender, socioeconom ic status, disaster exposure, type of disaster, family functions	Parental care	7 years post disaster	theory-of- mind or meta- cognitive competenc ies General language abilities Internalizi ng behavior problems Externalizi ng behavior problems
Stoppelbein, L., & Greening, L. (2000).	Tornado (n.d.)	Experiment al (with control group)	Individual	226 children and adolescents aged 7-17 years: - 39 bereaved group -118 disaster group - 69 non- trauma control group	Age, gender, type of stressors: (bereved, disaster), daily stressors, parent PTSD		Tornado group 1 year post disaster bereaved group an average of 3 years post their loss	PTSD Emotional adjustment Depression
Strahm, A. M., Bagne, A. G., Rued, H.	Flood (USA)	Cross- sectional	Individual Intepersonal	56 pairs mother-child 9 years old	cortisol concentratio n in mothers	Flood distance	3 months and 9 years after Flood	cortisol concentrati

A., Larson, K. J., Roemmich, J. N., & Hilmert, C. J. (2020)					Socioecono mic status maternal age, child sex		on in children
Sullivan, M. A., Saylor, C. F., & Foster, K. Y. (1991).	Hurricane (USA)	Pre-post (without control group)	Individual and Interpersona l	238 families 278 children aged 1,11- 6,3 years	Pre-post hurricane behavioural problems	6-8 weeks post disaster	Post- hurricane adjustment of pre- schoolers
Sun, X. Y., Fan, H. M., Bai, B., Song, H. T., Tao, F. Y., Song, Z. X., & Zhang, L. Y. (2014).	Earthquake (China)	Cross- Sectional	Individual	1828 children aged 6-16 years	Affected vs. non-affected group, age, gender	2 weeks post disaster	Psychosom atic symptoms
Sun, Y., & Yan, T. (2020)	Earthquake Tsunami (Japan)	Cross- sectional	Individual Interpersona l Intergroup	498 parents 35 children	City of residence Age Marital status Household composition Gender Education Economic status Impact of event Peer support	4 years post disaster	mental health
Swenson, C. C., Saylor, C. F., Powell, M. P., Stokes, S. J., Foster, K.	Hurricane (USA)	Experiment al (with Control Group)	Individual and Interpersona 1	161 children aged 2-6 years hurricane group	Exposure vs no exposure mothers' distress	14 months post disaster	Emotional and behavioral problems

Y., & Belter, R. W. (1996).				170 children aged 2-10 years no- trauma group with classroom behavior problems				Anxiety and withdrawal
Takada, S. (2013).	Earthquake (Japan)	Cross- Sectional	Individual	8000 families with pre-school children and 466 families with disabled children Aged 4-6 years	Disaster exposure, house damage, disabilities		12 months post disaster	PTSD
Tang, W., Lu, Y., & Xu, J. (2018)	Earthquake (China)	Cross- sectional	Individual	6132 children 9- 18 years old	Sleeping problems Negative life events Earthquake exposure Age Gender		3 years after earthquake	PTSD Depression Anxiety
Tang, W., Xu, D., Li, B., Lu, Y., & Xu, J. (2018)	Earthquake (China)	Cross- sectional	Individual	5.563 children, 9- 20 years old	Earthquake exposure Age Gender	depression sleep anxiety PTSD		Suicidal ideation
Tang, W., Zhao, J., Lu, Y., Yan, T., Wang, L., Zhang, J., & Xu, J. (2017).	Earthquake (China)	Longitudin al	Individual, Interpersona l and Intergroup	435 children age M = 13,7 years	Age, gender, ethnic group, school grade, disaster exposure,		12 months post disaster 30 months post disaster	PTSD Depression Anxiety

					socioeconom ic characteristi cs				
Tang, W., Zhao, J., Lu, Y., Zha, Y., Liu, H., Sun, Y., & Xu, J. (2018).	Earthquake (China)	Cross- Sectional	Individual	5505 children and adolescent 10-18 years	Child abuse and neglect, disaster exposure, gender, age, type of earthquake exposure	PTSD and depression		3 years post disaster	Suicidal behaviors
Tang, W., Zhao, J., Lu, Y., Zha, Y., Liu, H., Sun, Y., Xu, J. (2018)	Earthquake (China)	Cross- sectional	Individual	6.132 children 10– 18 years old	level of earthquake exposure, physical and emotional abuse and neglect age, gender		PTSD and depression	3 years after the earthquake.	suicide risk
Tao, T., Duan, X., & Shi, J. (2014).	Earthquake (China)	Cross- Sectional	Individual	311 children and adolescents aged 10-17 years.	Mental health, age, gender			11 months post disaster	Posttrauma tic stress symptoms
Tatsuta, N., Nakai, K., Satoh, H., & Murata, K. (2015).	Earthquake (Japan)	Pre-post (without control group)	Individual and Interpersona l	412 mother- child dyads	Two groups: pre-post disaster, electrocardio graphy, age, birth, weight, child gender,			6 months post disaster	Child's intelligenc e quotient Behavioral problems

Tees, M. T., Harville, E. W., Xiong, X., Buekens,	Hurricane (USA)	Longitudin al	Individual and Interpersona 1	288 mothers	maternal age at parturition, birth order delivery type, drinking and smoking habits during pregnancy maternal and paternal education, levels and annual family income, cord blood and maternal blood, home environment Ddisaster exposure, maternal mental		During the disaster 2 months	Early infant temperame nt
P., Pridjian, G., & Elkind- Hirsch, K. (2010).					health: - PTSD - depression post-partum - hostility		post disaster 12 months postpartum	Activity, adaptabilit y, approach, intensity, and mood scales
Terranova, A. M., Boxer, P., & Morris, A. S. (2009).	Hurricane (USA)	Longitudin al	Individual	152 children (23 participants missing at T2)	Disaster exposure, gender and ethnicity peer	Regulatory abilities: (effortful control)	<ul><li>1.5 months post disaster (T1)</li><li>8 months post disaster</li></ul>	PTSD (T1- T2)

				M age= 11.52	victimization , prosocial behaviour, fear reactivity, effortful control, negative coping, PTSD (t1)		Negative coping	(T2)	
Terranova, A. M., Morris, A. S., Myers, S., Kithakye, M., & Morris, M. D. (2015).	Hurricane (USA)	Pre-post (without experiment al group)	Individual and Interpersona 1	118 children 47 aged from 4 years (pre and post) 71 aged from 4-6 years (post)	Family functioning: (parental separation) child characteristi cs, disaster exposure	Parental depression Parental functionin g Parental hostility		Pre disaster 5 months post disaster	Internalizi ng symptoms, aggressive behaviors and fewer prosocial behaviors in children
Thienkrua, W., Cardozo, B. L., Chakkraband, M. S., Guadamuz, T. E., Pengjuntr, W., Tantipiwatana skul, P., & Tappero, J. W. (2006).	Tsunami (Thailand)	Longitudin al	Individual	371 children aged 7-14 years	Living in camps displaced, disaster exposure, age			2 months post disaster 9 months post disaster	PTSD depression
Thomson, J., Seers, K., Frampton, C., Hider, P., & Moor, S. (2016).	Earthquake (New Zeeland)	Longitudin al	Individual	12014 children aged 4-5 years post- disaster	Time, gender, socio- economic status, exposure			Pre disaster, september 2010 (T1)	Behaviour al and emotional problems

				Parents Teachers		Between september 2010 and february 2011 (T2) february- december 2011 (T3)	
Tian W, Jia Z, Duan G, Liu W, Pan X, Guo Q, Chen R, Zhang X. (2013).	Earthquake (China)	Longitudin al	Individual	596 children and adolescent aged 8-16 years	Socio- demographic s, disaster exposure and experience, mental health status	15 months post disaster 36 months post disaster	Health- related quality of life
Uemoto, M., Asakawa, A., Takamiya, S., Asakawa, K., & Inui, A. (2012).	Earthquake (Japan)	Longitudin al	Individual	8800 school children exposed and control subjects were 1886 control group 3 <sup>rd</sup> , 5 <sup>th</sup> , or 8 <sup>th</sup> grade	Disaster exposure, grade, gender, time	3 and 6 months post disaster (T1-T2) 1 and 2 years Post disaster (T3-T4)	PTSD
Usami, M., Iwadare, Y., Kodaira, M., Watanabe, K., Aoki, M., Katsumi, C., & Tanaka, H. (2012).	Earthquake and Tsunami (Japan)	Cross- sectional	Individual	12524 children in kindergarten s, elementary schools and junior high schools in	Disaster exposure, bereavement , experience and life in evacuation centers, gender	8 months post disaster	PTSS

Usami, M., Iwadare, Y., Ushijima, H., Inazaki, K., Tanaka, T., Kodaira, M., Saito, K. (2019)	Earthquake (Japan)	Cross- sectional	Invividual	262 children, 1-4 years old	Gender, age, damage to environment al conditions (house damage, evacuation conditions, and bereavement experience)	8, 20, 30, and 42 months after earthquake	PTSS
Usami, M., Iwadare, Y., Watanabe, K., Kodaira, M., Ushijima, H., Tanaka, T., & Saito, K. (2014).	Earthquake and Tsunami (Japan)	Longitudin al	Individual	11639 children aged 10 years	Time from disaster	8 months post disaster (T1) 20 months post disaster 30 months post disaster	PTSS PTSD Depression
Valenti, M., Ciprietti, T., Di Egidio, C., Gabrielli, M., Masedu, F., Tomassini, A. R., & Sorge, G. (2012).	Earthquake (Italy)	Pre-post and Longitudin al	Individual	<ul> <li>18</li> <li>participants</li> <li>with ASD</li> <li>exposed</li> <li>42</li> <li>participants</li> <li>with ASD</li> <li>no exposed</li> </ul>	Exposed and non-exposed participants, age, exposure effect, time effect	A few days before the disaster 6 months post disaster 12 months post disaster	Adaptive behaviour of participant s with ASD
Vernberg, E. M., La Greca, A. M., Silverman, W. K., & Prinstein, M. J. (1996).	Hurricane (USA)	Cross- Sectional	Individual and Interpersona 1	568 Elementary, 3 <sup>rd</sup> , 4 <sup>th</sup> and 5 <sup>th</sup> grade	Exposure to traumatic events, child characteristi cs, access to social support, children's coping	3 months post disaster	PTSD

Vezzali, L., Cadamuro, A., Versari, A., Giovannini, D., & Trifiletti, E. (2015).	Earthquake (Italy)	Cross- Sectional	Individual and Intergroup	517 children aged 7-12 years	Perceived disaster threat exposure	Two- groups representat ion One-group representat ion Positive outgroup attitudes	Participant's group of belonging	6 months post disaster	Contact behavioura l intentions Helping behavioura l intentions
Vezzali, L., Drury, J., Versari, A., & Cadamuro, A. (2016).	Earthquake (Italy)	Cross- Sectional	Individual and Interpersona l and Group	517 children aged 7-12 years	PTSS	Inclusion Of The Other In The Self One-Group Representa tion		6 months post disaster	Contact intentions Helping intentions
Vigil, J.M., Geary, D.C., Granger, D.A., Flinn, M.V. (2010).	Hurricane	Experiment al study (with control group)	Individual	62 adolescents aged 12-19 years 52 adolescents (control group)	Levels of cortisol, gender, exposed vs not exposed		SNS activity	2 months post disaster	Psychologi cal functionin g hypothala mic- pituitary- adrenal activity
Vijayakumar, L., Kannan, G. K., & Daniel, S. J. (2006).	Tsunami (Southeast Asia)	Cross- Sectional	Individual and Interpersona l	230 children aged 11-14 years	Disaster exposure, tsunami- related factors demographic s,			12 months post disaster	PTSD

Worz M	Easthqualta	Cross-	Individual	571	pre-existing psychopatho logy of the children, family mental health Gender			PTSD
Wang, M., Armour, C., Li, X., Dai, X., Zhu, X., & Yao, S. (2013).	Earthquake (China)	Sectional		adolescent aged 12-17 years	Gender			
Wang, Wei; Fu, Wei; Wu, Jin; Ma, Xian- cang; Sun, Xue-li; Huang, Yi; Hashimoto, Kenji; Gao, Cheng-ge; (2012).	Earthquake (China)	Cross- Sectional	Individual	1841 students aged 11-20 years	Age, gender, grade, disaster exposure, impact of event, personal experiences during the earthquake, living environment		10 months post disaster	PTSD Depression
Ward, M. E., Shelley, K., Kaase, K., & Pane, J. F. (2008).	Hurricane (USA)	Cross- Sectional	Individual	Pre- kindergarten to 12 <sup>th</sup> grade students	Demographi c characteristi cs, displaced vs no displaced		in the first two years post disaster	Achieveme nt and behavior
Wasserstein, S. B., & La Greca, A. M. (1998).	Hurricane (USA)	Cross- Sectional	Individual, Interpersona l and Intergroup	89 elementary School children 4 <sup>th</sup> to 6 <sup>th</sup> grades	Gender, ethnicity, perceived parental conflict, anxiety level,		3 months post disaster	PTSD Anxiety

					disaster exposure			
Weems, C. F., Pina, A. A., Costa, N. M.,	Hurricane (USA)	Pre-post (without control	Individual	52 youths age M= 11.35	Pre-disaster child trait anxiety,		Pre-disaster 6-7 months	PTS Anxiety
Watts, S. E., Taylor, L. K., & Cannon, M. F. (2007).		group)			gender, elevated negative affect		post disaster	disorder symptoms
Weems, C. F.,	Hurricane	Cross-	Individual	1048 youths	Disaster	Level of	36-65 months	PTSD and
Russell, J. D., Graham, R. A., Neill, E. L., & Banks, D. M. 2014	(USA)	sectional		from 3 <sup>rd</sup> to 12 <sup>th</sup> grades	exposure, age, gender, anxiety control	exposure Gender Age (less anxiety control in younger- on	post disaster	Generalize d Anxiety Disorder
Weems, C. F., Scott, B. G., Banks, D. M., & Graham, R. A. (2012).	Two Hurricane (Gustav and Katrina) (USA)	Longitudin al	Individual	141children from 4 <sup>th</sup> to 8 <sup>th</sup> grades	TV viewing of disasters, perceptions of Self- harm, fear during the disaster	PTSD) PTSD symptoms at Time 1 and Time 2	<ul> <li>6 and 12 months before Gustav and</li> <li>1 month post Gustav</li> <li>24 months post Katrina (T1)</li> <li>30 months post Katrina (T2)</li> <li>1 month post Gustav (T3)</li> </ul>	PTSD
Weems, C. F.,	Hurricane	Longitudin	Individual	202 children	Disaster		24 months	Anxiety
Scott, B. G.,		al		aged 8-15	exposure,		post disaster	
Taylor, L. K.,	(USA)			years	distress,		(T1)	PTSD

Cannon, M. F., Romano, D. M., & Perry, A. M. (2013).					PTSD symptoms, anxiety, time		30 months post disaster (T2)	Achieveme nt
Weems, C. F., Taylor, L. K., Cannon, M. F., Marino, R. C., Romano, D. M., Scott, B. G., & Triplett, V. (2010).	Hurricane (USA)	Longitudin al	Individual	191 african american aged 8-15 years	Age, gender, exposure to traumatic experiences, time		24 Months post disaster (T1) 30 Months Post disaster (T2)	PTSD
Xie, Y., Wu, J., & Shen, G. (2019)	Earthquake (Tibet)	Cross- sectional	Indivudual	850 children 11 - 20 years old	Age, gender, grade, ethnicity, level of exposure, PTSD, depression		6 years after the earthquake	posttrauma tic growth (PTG) and posttrauma tic stress disorder (PTSD)
Xu, J., Xie, L., Li, B., Li, N., & Yang, Y. (2012).	Earthquake (China)	Cross- Sectional	Individual	21652 children aged 7-15 years	Gender, age, cultural differences, disaster exposure		12 months post disaster	Anxiety symptoms
Yagi, J., Fujiwara, T., Yambe, T., Okuyama, M., Kawachi, I., & Sakai, A. (2016).	Earthquake (Japan)	Cross - Sectional	Individual and Interpersona l	94 children, aged 5-7 years	Social capital, traumatic events, age	Care givers mental health, Child PTSD	2 years post disaster	Behavior problems
Yang, R., Xiang, Y. T., Shuai, L., Qian, Y., Lai, K. Y., Ungvari, G.	Earthquake (China)	Longitudin al	Individual	100 children Aged 9-13 years and 14-17 years	PTSD group (34 adopted) vs no PTSD group (66 orphan)		4 months post disaster (T1) 12 months post disaster	Executive functions

S., & Wang, Y. F. (2014).					exposure		(T2)	
Yeung, N. C., Lau, J. T., Yu, N. X., Zhang, J., Xu, Z., Choi, K. C., & Lui, W. W. (2016).	Earthquake (China)	Longitudin al	Individual	3577 students 5 <sup>th</sup> - 12 <sup>th</sup> grade	Exposure to earthquake- related imagery, content, perceptions and emotional reactions related to the disaster, prior traumatic experience, gender, age		1 month post disaster (T1) 6 months after the T1 (T2)	PTSD
Ying, L. H., Wu, X. C., & Chen, C. (2013).	Earthquake (China)	Cross- Sectional	Individual	3052 children aged 8-19 years	Age, gender, post-trauma experience, severity of disaster exposure		1 year post disaster	PTSD and depression
Ying, L., Wu, X., Lin, C., & Jiang, L. (2014).	Earthquake (China)	Cross- Sectional	Individual	788 adolescent aged 12-19 years	Severity of disaster exposure, trait resilience, age, gender	Resilience	12 and 18 months post disaster (T1-T2) 24 and 30 months Post disaster (T3-T4)	PTSD depressive symptoms
Yorbik, O., Akbiyik, D. I., Kirmizigul, P., &	Earthquake (Turkey)	Cross- Sectional	Individual	35 children aged 2-16 years	Age			PTSD

Söhmen, T. (2004).							
Yoshida, H., Kobayashi, N., Honda, N., Matsuoka, H., Yamaguchi, T., Homma, H., & Tomita, H. (2016).	Earthquake (Japan)	Cross- Sectional	Individual	3337 children aged 9-15 years Parents Teachers	Experience of the disaster, prior traumatic experience, children's attitude toward memories of the disaster (rumination) , gender, grade	31 months post disaster	Posttrauma tic growth Children PTSS
Zhang, J., Zhu, S., Du, C., & Zhang, Y. (2015).	Earthquake (China)	Longitudin al	Individual	2299 children aged 8-19 years	Age, ethnicity, gender, PTSD, symptoms, time	3 months post disaster (T1) 6 months Post disaster (T2)	PTSD somatic symptoms
Zhang, W., Rajendran, K., Ham, J., Finik, J., Buthmann, J., Davey, K., & Nomura, Y. (2018).	Hurricane (USA)	Longitudin al	Individual and Interpersona l	318 mother- child dyads	Objective exposure, subjective stress reaction	6 and 12 months post disaster (T1-T2) 18 and 24 months post disaster (T3-T4)	Developm ental trajectory of temperame nt
Zhang, X., Liu, M., Zhu, M., Shi, J., & Cheng, L. (2010).	Earthquake (China)	Cross- Sectional	Individual	196 pre disaster and 116 post disaster orphans	Personality, impact of event	6 months post disaster	PTSD

				aged 8-18 years			
Zhang, Y., Kong, F., Wang, L., Chen, H., Gao, X., Tan, X., & Liu, Y. (2010).	Earthquake (China)	Cross- Sectional	Individual and Interpersona 1	423 children and adolescents, aged 11-16 years	Highly exposed area and a lowly exposed area, disaster situation, exposure degree, family situation, times of experiencing other stressful events	12 months post disaster	Post- traumatic psychologi cal reactions Coping styles
Zhang, Y., Zhang, J., Zhu, S., Du, C., & Zhang, W. (2015).	Earthquake (China)	Cross- Sectional	Individual	3053 children aged 8-19 years	Age, ethnicity, gender, disaster exposure, impact of event, PTSD	3 months post disaster	Somatic symptoms
Zhou, P., Zhang, Y., Wei, C., Liu, Z., & Hannak, W. (2016).	Earthquake (China)	Longitudin al	Individual	197 Students from 4 <sup>th</sup> to 8 <sup>th</sup> grade	Acute stress disorder, disaster exposure	2 months post disaster (T1) 6 months post disaster (T2) 12 months post disaster (T3)	PTSD

Zhou, X., & Wu, X. (2016).	Earthquake (China)	Longitudin al	Individual	310 adolescents aged 12-19 years	Event- related rumination, time	Intrusive and deliberate rumination (At T2)	6 months post disaster (T1) 12 months post disaster (T2) 18 months post disaster (T3)	Post- traumatic Growth PTSD
Zhou, X., & Wu, X., Wenchao, W., Tian, Y. (2017).	Earthquake (China)	Longitudin al	Individual and Interpersona l	303 children 12-19 years	Social support, PTSD, posttraumati c growth		6 months post disaster (T1) 12 months post disaster (T2) 18 months post disaster (T3)	PTSD Post- traumatic Growth
Zhou, X., Wu, X., & Zhen, R. (2017).	Earthquake (China)	Cross- Sectional	Individual and Interpersona I	309 adolescents aged 12-18 years	Disaster exposure, social support, emotion regulation	Cognitive reappraisal Expressive suppressio n.	6 months post disaster	PTSD Post- traumatic Growth
Zhou, X., Wu, X., & Zhen, R. (2018)	Earthquake (China)	Cross- sectional	Individual	591 children 11- 19 years old	age, sex, traumatic exposure.		1 year after the earthquake	Posttrauma tic stress disorder (PTSD) and posttrauma tic growth (PTG)
Zhou, X., Wu, X., Zhen, R.,	Earthquake (China)	Longitudin al	Individual	391 youth aged 12-19 years	Disaster exposure, age		12 and 18 months post disaster	PTSD

Wang, W., & Tian, Y.					gender		(T1-T2)	
(2018).							24 and 30 months post disaster	
						 	(T3-T4)	
Zhou, X.,	Earthquake	Cross-	Individual	736 children	PTSD and	primary	1 year after	Academic
Zhen, R., &	(China)	sectional		12-19 years	control	control	the	burnout
Wu, X. (2017)				old	beliefs	beliefs	earthquake	
					Gender		_	
					Age			

*Note*. Although some studies have been classified as experimental, most of them have a quasi-experimental design, since assignment to conditions was not completely random but determined by exposure or not to a disaster. PTSD= Posttraumatic Stress Disorder; PTSS= Posttraumatic Stress Symptoms; PTS = Posttraumatic Symptoms; GAD= Generalized Anxiety Disorder; ASD= Autistic Spectrum Disorder

Table 2\_*OSM*. Reviews and meta-analyses (N = 28)

Study	Disaster	Туре	Number of studies considered	Predictor(s)	Moderator(s)	Dependent Variable(s)
Brown, R. C., Witt, A., Fegert, J. M., Keller, F., Rassenhofer, M., & Plener, P. L. (2017)	Man-made and natural disasters	Meta-analysis and systematic review	36 studies		Profession of treatment providers Treatment setting (individual or group) Assessment method of PTSD	Efficacy of Psychosocial interventions for children, (CBT, EMDR, KIDNET and classroom- based interventions)
Cartwright, C., Hall, M., & Lee, A. C. K. (2017)	Earthquake	Review	152 studies			
Drury, S. S., Scheeringa, M. S., & Zeanah, C. H. (2008)	Hurricane	Review	7 studies			
Farooqui, M., Quadri, S. A., Suriya, S. S., Khan, M. A., Ovais, M., Sohail, Z., et al. (2017)	Earthquake	Review	77 studies			
Forman- Hoffman, V. L., Zolotor, A. J., McKeeman, J.	Accidents, natural disasters, war	Review	25 studies			

L., Blanco, R., Knauer, S. R., Lloyd, S. W., & Viswanathan, M. (2013) Fu, C., & Underwood, C. (2015)	Natural and/or man-made disaster.	Meta-analysis and review	11 studies (4 from natural disasters and 7 from conflict- affected areas)			Effectiveness of school- based mental-health and psychosocial interventions on PTSD
Furr, J. M., Comer, J. S., Edmunds, J. M., & Kendall, P. C. (2010)	Natural and Man-Made Disasters	Meta-analysis	96 studies	Gender, disaster exposure and study methodology (i.e., measurement quality, informant, timing of assessment)		PTS
Gordon- Hollingsworth, A. T., Yao, N., Chen, H., Qian, M., & Chen, S. (2015)	Natural Disaster	Meta-analysis	59 studies	Age, gender, father level of education, urban versus rural residence, experience of prior trauma, bereavement, having a family member injured, knowing someone other than a family member injured or killed, witnessing someone get injured or killed, suffering personal injury during the trauma, becoming trapped or buried, house damage, loss of property, trauma severity, perceived threat or fear during	Type of disaster, first evaluative time-point, disaster severity	PTSD

				the natural disaster, positive coping, displacement, social support	
Jackson, S. F., Fazal, N., Gravel, G., & Papowitz, H. (2017)	Natural Disasters	Review	16 studies		
Kar, N. (2011)	Various type of disaster	Review	31 studies		
Lai, B. S., Lewis, R., Livings, M. S., La Greca, A. M., & Esnard, A. M. (2017)	Natural or man-made disaster	Review	8 studies		
McLean, M. A., Cobham, V. E., & Simcock, G. (2018)	Various type of disaster	Review	13 studi		
Mercuri, A., & Angelique, H. L. (2004)	Natural, Technological, Na-Tech Disasters	Review	22 studies		
Murphy, S. A. (2010)	Mass Disaster and Terrorist Attacks	Review	10 studies		
Norris, F. H., Friedman, M. J., Watson, P. J., Byrne, C. M., Diaz, E., & Kaniasty, K. (2002)	Natural, Technological, Mass violence	Review	160 studies		
Pfefferbaum, B., Newman,	Disasters and Terrorism	Review	85 studies		

E., & Nelson, S. D. (2014) Pfefferbaum,	Accidents,	Meta-analysis	24 studies	Type of disaster		Intervention Effects on
B., Nitiéma, P., & Newman, E. (2019)	natural disasters, terrorism, war			Income Type of intervention Lenght of the intervention		Depression and/ or Anxiety
Pfefferbaum, B., Nitiéma, P., Tucker, P., & Newman, E. (2017).	Natural and Man-Made Disasters	Review	11 studies			
Pfefferbaum, B., Varma, V., Nitiéma, P., & Newman, E. (2014)	Disasters and Terrorism	Review	48 studies			
Pfefferbaum, B., Weems, C. F., Scott, B. G., Nitiéma, P., Noffsinger, M. A., Pfefferbaum, R. L., et al. (2013)	Terrorist attacks, Tsunami, Hurricane	Review	165 studies			
Pine, D. S., & Cohen, J. A. (2002)	Natural and Man-Made Disasters	Review	32 studies			
Rubens, S. L., Felix, E. D., & Hambrick, E. P. (2018)	Natural Disasters	Meta-Analysis	88 studies	Disaster exposure	Countries with a medium Human Development Index	Internalizing and Externalizing Problems
Saulnier, D. D., & Brolin, K. (2015)	Natural and Man-Made Disasters	Review	47 studies			
Tang, B., Liu, X., Liu, Y., Xue, C., &	21 articles on earthquakes,	Meta-analysis	31 studies on adults, 7 on children	For adults: female; not married; holding religious beliefs; poor		Depression

Zhang, L.	7 on			education; prior	
(2014)	hurricanes/tornadoes/typh oons, 2 on tsunamis, and 1 on floods.			trauma; experiencing fear, injury, or bereavement during the disaster; or losing employment or property, house damage	
				For children: prior trauma; being trapped; experiencing injury, fear, or bereavement during the disaster; witnessing injury/death during the disaster; poor social support.	
Tolin, D. F., & Foa, E. B. (2006)	Natural and Man-Made Disasters	Meta-analyses	290 studies	Gender	PTSD
Udomratn, P. (2009)	Tsunami	Review	25 studies		
Vogel, J. M., & Vernberg, E. M. (1993)	Natural and Man-Made Disasters	Review	33 studies		
Wang, C. W., Chan, C. L. W., & Ho, R. T. H. (2013)	Natural Disasters	Review	60 cross sectional studies; 25 longitudinal studies		

*Note.* PTSD = Posttraumatic Stress Disorder; PTS = Posttraumatic Symptoms; CBT = Cognitive-Behavioural Therapy; EMDR = Eye Movement Desensitization and Reprocessing

Table 3\_OSM. Studies on interventions (N = 29 studies)

Study	Disaster	Population	Independent variable(s)	Assessment(s) (months postdisaster)	Dependent variable(s)
Adúriz, M. E., Bluthgen, C., & Knopfler, C. (2009) Amin, R., Nadeem,	Flood (Argentina) Flood (Dakistan)	124 children 4-17 years 75children 7 13 years old	One-session group eye movement desensitization and reprocessing (EMDR) Support for Students Exposed to Trauma (SSET)	3 months after flood, 3 months follow-up evaluation session 2 years after flood, 6 months follow, up	Distress Child's Reaction to Traumatic Events PTSD resilience
E., Iqbal, K., Asadullah, M. A., & Hussain (2020)	(Pakistan)	7-13 years old	Exposed to Trauma (SSET) program	6 months follow-up evaluation session	social support
Bahar, Z., Ozturk, M., Beser, A., Baykara, A., Eker, G., & Cakaloz, B. (2008).	Earthquake (Turkey)	187 students 7th grade	Socioeconomic status Gender Age	6 months after the earthquake	Depression
			Problem-based group therapy and occupational therapy		
Berger R, & Gelkopf M. (2009)	Tsunami (Sri Lanka)	166 students 9-15 years	Intervention (ERASE Stress Sri Lanka') vs control group or waiting list Exposure and previous	1 week prior and 3 months after the intervention	PTSD, Functional problems Somatic complaints Depression
			traumatic experience Content of Intervention: psychoeducational material, cognitive-behavioral skills, meditative practices and bio- energetic exercises utilizing		

			art therapy and narrative techniques		
Catani C, Kohiladevy M, Ruf M, Schauer E, Elbert T, & Neuner F. (2009)	Tsunami (Sri Lanka)	31 children 8-14 years	6 sessions Narrative Exposure Therapy for children (KIDNET) or 6 sessions of meditation- relaxation therapy (MED- RELAX)	Intervention few weeks after tsunami 1 month post-test/ 6 months follow-up	PTSD Level of functioning Physical health
Chemtob, C. M., Nakashima, J., & Carlson, J. G. (2001)	Hurricane (Hawaii)	32 children 6-12 years	3 sessions of EMDR Experienced hurricane- related symptoms PTSD	3, 5 years after hurricane Pretreatment, Posttreatment, and Follow- Up 6 months	PTSD Anxiety Depression
Fernandez, I. (2007)	Earthquake (Italy)	22 children, 6 years	3 sessions of EMDR PTSD	1 month, 3 months and a year after the event	PTSD
Field, T. M., Seligman, S., Scafidi, F., & Schanberg, S. (1996)	Hurricane Florida	60 children 1st–5th graders	Massage therapy or video attention group (control group)Hurricane impactPTSDAnxietySalivary cortisol levels		Anxiety Depression Mood state Salivary cortisol levels
Fu C, Leoutsakos JM, & Underwood C. (2013)	Earthquake (Sichuan)	4120 children 6-16 years	Sociodemographics factors	1 year after disaster	PTSD

Garfin, D. R., Silver, R. C., Gil- Rivas, V., Guzmán, J., Murphy, J. M., Cova, F., Guzmán, M. P. (2014)	Earthquake (Chile)	117 children 7–8 years,	Earthquake-related risk exposure Resilience Exposure Family Context School- Based Mental Health Program Gender	9 months post-earthquake	PTS Earthquake-related worry
Giannopoulou, I., Dikaiakou, A., & Yule, W. (2006)	Earthquake (Athens)	20 children 8-12 years	<ul> <li>6 weeks Group cognitive- behavioural intervention</li> <li>Group 1 (N = 10), which started treatment 2 months after the earthquake and Group 2 (N = 10), which started treatment after 4 months</li> <li>PTSD</li> </ul>	Intervention:2 months and 4 monthsafter earthquakeAssessment:before treatment (T1),immediately aftercompleting the treatment(T2), at firstfollow-up18 MONTHS(T3) and at the secondfollow-up4-year follow-up.	PTSD Depression Psychosocial functioning.
Goenjian, A. (1993)	Earthquake (Armenia)	582 children 6-12 years	Mental Health Relief Programme	3-6 months after earthquake	PTSD Major depressive disorder
Graham, R. A., Osofsky, J. D., Osofsky, H. J., & Hansel, T. C. (2017)	Hurricane (Louisiana)	112 students 8-17 years	Cognitive Behavioral Intervention for Trauma in Schools (CBITS) Individual treatment at school including: relaxation,	4 months after Hurricane	Anxiety Depression Anger PTS Dissociation

			coping, and problem solving skill development; trauma narratives; and cognitive restructuring		
Hansel, T. C., Osofsky, H. J., Osofsky, J. D., & Speier, A. H. (2019)	Hurricane (USA)	4.593 children 7-14 years old	School-based trauma interventions		PTSD
Ho, R. T. H., Lai, A. H. Y., Lo, P. H. Y., Nan, J. K. M., & Pon, A. K. L. (2016)	Earthquake (Sichuan)	112 children Grade 4	Gender Self-Efficacy, Peer Support, and Anxiety Arts and play support program (promotion of self-efficacy, peer support positive thinking and problem solving) Control group	Baseline:1 year after the earthquake Post test: 2 years after	Self-Efficacy Peer Support Anxiety
Jarero, I., Artigas, L., & Hartung, J. (2006).	Hurricane (Mexico)	44 children 8-15 years	EMDR Integrative Group Treatment Protocol	1 months after hurricane	Distress
Karairmak, Ö., & Aydin, G. (2008).	Earthquake (Turkey)	166 elementary school students 4 <sup>th</sup> -8 <sup>th</sup> grade	Gender Group (victims vs non victims) Activity-based cognitive fear reduction (ABCF): understand that natural disasters would occur and develop coping skills and strategies for normalization		Earthquake-related fears
Klontz, B. T., Bivens, A., Michels, S., DeLeon, P. H., & Tom, L. (2015).	Hurricane (Hawaii)	179 children 5-16 years	School-based behavioral health services: Mokihana Program	1 year follow up after treatment	Behavioral problems and adaptive functioning

Liu, Z., Zhu, Z., Kao, H. S. R., Zong, Y., Tang, S., Xu, M., Wang, R. (2014)	Earthquake (China)	Experiment 1: 210 children Experiment 2 80 children	Focus on responding to the needs of the child and family Behavioral problems and adaptive functioning Group Calligraphy Intervention Group Control Gender Age Time	1 year after exposure to natural disaster Post intervention assessment: after 15 days	Intrusion Avoidance Hyperarousal symptoms PTSD Salivary cortisol
		11 years		after 30 days	
Pityaratstian, N., Piyasil, V., Ketumarn, P., Sitdhiraksa, N., Ularntinon, S., & Pariwatcharakul, P. (2015).	Tsunami	36 children 10-15 years who had been diagnosed with PSTD 4 years after the tsunami were randomly allocated to either	Diagnosis with PSTD 4 years after tsunami CBT (cognitive behavioural therapy) or wait list	Posttreatment and 1-month follow up	PTSD
Powell, T. M., & Bui, T. (2016).	Tornado (Oklahoma)	110 youth 11-15 years	Journey of Hope Intervention group Control group	9 months after the tornado	Coping skills Self-efficacy Prosocial behaviors,
			Coping skills self-efficacy, prosocial behaviors, distress.	1 month after post-test	Distress
Powell, T., & Thompson, S. J. (2016)	Tornado (Alabama)	102 students 8-12 years	Journey of Hope (JoH), a school-based intervention Control group Coping skills peer relationships	5-8 months after the disaster	Coping skills Peer relationships
Rousseau, C., Benoit, M., Lacroix, L., & Gauthier, M. F. (2009).	Tsunami (South Asia)	105 children 4-6 years	Sandplay program Group Control Group Socio-economics factors	Pretest just before the tsunami Posttest 6 months after disaster	Emotional and behavioral symptoms Anxiety Depression Distress Social Impairment

					Burden for others
Salloum, A., & Overstreet, S. (2008)	Hurricane (New Orleans)	56 children 7-12 years	Group community-based grief and trauma interventionGroup individual interventiondisaster-related exposureDemographic informationTime of assessmentPTSDDisaster-relatedExposureDepressionTraumatic griefDistress	<ul><li>4 months post-Hurricane</li><li>preintervention,</li><li>postintervention,</li><li>3 weeks follow-up</li></ul>	PTSD Depression Traumatic grief Distress
Shen, Y. J. (2002)	Earthquake (Taiwan)	65 children 8-12 years	Child-centered group play therapy Control group	Pretests and posttests within 2 weeks of the treatment.	Anxiety Depression Adjustment
Stasiak, K., Merry, S. N., Frampton, C., & Moor, S. (2016)	Earthquake (New Zealand)	42 children 7-18 years old	Online cognitive behaviour therapy (CBT)	14–20 months after the earthquake	Anxiety Depression Health-related quality of life
Trentini, C., Lauriola, M., Giuliani, A., Maslovaric, G., Tambelli, R., Fernandez, I., & Pagani, M. (2018)	Earthquake (Italy)	332 children 5 -13 years old	EMDR Integrative Group Treatment Protocol (EMDR-IGTP) Time Elapsed Age Gender	3 weeks after earthquake	Distress, Anxiety, Depression, Anger Need Help
Vijayakumar, L., Kannan, G. K., Ganesh Kumar, B., & Devarajan, P. (2006).	Tsunami (Asia)	135 children 11-14 years	Socio-demographic factors Exposure Psychopathology of the children Family mental health Psychosocial intervention	1 year after tsunami before and after intervention (9 months after the initial assessment)	PTSD Hyperactivity

Wolmer, L., Laor,	Earthquake	287 children	School Reactivation Program	3.5 years after the	PTSD
N., Dedeoglu, C.,	(Turkey)	9-17 years	Socio-demographic	earthquake	Grief
Siev, J., & Yazgan,			information	_	Dissociation
Y. (2005).			Stressful/traumatic episodes	post-intervention	
			before and after the	assessment 3 years later	
			earthquake	-	
			Exposure		
			Academic performance,		
			Social behavior		
			PTSD		
			Time		

*Note.* PTSD = Posttraumatic Stress Disorder; PTS = Posttraumatic Symptoms; CBT = Cognitive-Behavioural Therapy; EMDR = Eye Movement Desensitization and Reprocessing

DISASTER	
Earthquake	1126
Hurricane	92
Tsunami	27
Flood	20
Tornado	15
Cyclone/ Typhoon	8
Ice Storm	4
War/Violence	3
Lightning Strike	3
Gulf Oil Spill	2
Storm	5
Eruption	2

Table 4\_OSM. Frequency of natural disasters (N = 294 studies)

*Note.* The sum is higher than the total number of studies, because some studies included the analysis of two or more types of disasters.

Table 5\_OSM. Study design (N = 294 studies)

DESIGN				
Cross-sectional	182			
Longitudinal	78			
Pre-post without control group	13			
Experimental with control group	11			
Pre-post and longitudinal	6			
Experimental without control group	2			
Pre-post with control group	1			
Experimental (with control group)	1			
longitudinal				

Table 6\_OSM. Level of analysis (N = 294 studies)

LEVEL	
Individual	172
Individual and Interpersonal	108
Individual and Intergroup	5
Individual, Interpersonal and Intergroup	6
Individual, Interpersonal and Group	1
Individual, Interpersonal, Group and	1
Intergroup	

*Note.* Studies included in one category are not included in other categories.

Table 7\_OSM. Frequency of main independent variables (N = 294 studies)

INDEPENDENT VARIABLES	
Exposure	
Gender	
Age	
Stress/Distress	
Support	
Time	
Social Level (Status, Living Conditions, Demographic, Socioeconomic factors)	
Type Of Disaster	
Coping/Appraisal/Resilience	
Parental Stress	
Family Functioning	
Ethnicity	
PTSD	
Impact of Event	
Anxiety	
School Grade	
Material Loss	
Parental Loss	
Depression	
Prenatal Exposure	
Parents Level of Education	
Previous Traumatic Experiences	
Disaster Relocation	
Children Pre disaster disorders	
Life Threat	
Child Level of education	
Rumination	
Social Connection	
Parents Pre disaster Disorders	
Religion	
Injury and Illness	
Academic Skills	
Abuse/Neglect	
Sleeping Problems	
Verbal Ability	
Children's Trauma Recollections	
Marital Status	
Maternal Prenatal Depression	
Maternal Anxiety	
Parental Conflict	
Maternal Cortisol Concentration	
Maternal Contisol Concentration Maternal Prenatal Stress	

Substance Use	1
Parent-Child Conflict	1
Maternal Age	3
Birth Complications	2
Stressful Life Events	4

*Note.* PTSD=posttraumatic stress disorder. The sum is higher than the total number of studies, because some studies included two or more independent variables.

Table 8\_OSM. Frequency of main dependent variables (N = 294 studies)

DEPENDENT VARIABLES	
PTSD	119
Depression/ Thoughts of Suicide	43
Anxiety (GAD)	30
Adaptation Score, Adjustment Disorder	22
PTSS	21
Internalizing/Externalizing Problems	15
Post Traumatic Growth	14
Behavioural and Emotional Problems	12
Physical Health (Somatic Symptoms, Ecc.)	12
Coping/Appraisal	11
Psychological Impact and Reactions	9
Distress	9
Mental Disorders	9
Parental Health	6
Cognitive Functions	7
Temperamental and Personal Characteristics	8
School Performance	4
Rumination and Intrusive Thoughts	3
Family Functioning	3
Memory Functions	2
Social Problems Risk	2
Tom and Metacognition	2
Psychiatric Disorders	2
Contact and Helping Intentions	2
Child Cortisol Concentration	1

Child Motor Development	1
Resilience	1
Neural Reactivity	1
Electrodermal Activity	1

*Note.* PTSD= Posttraumatic Stress Disorder; PTSS= Posttraumatic Stress Symptoms; GAD= Generalized Anxiety Disorder. The sum is higher than the total number of studies, because some studies included two or more dependent variables.

Table 9\_OSM. Frequency of the geographical distribution of the studies (N = 294 studies).

GEOGRAPHICAL DISTRIBUTION OF THE STUDIES		
USA	122	
China	50	
Turkey	18	
Japan	17	
Southeast Asia	15	
Australia	10	
Italy	8	
Haiti	7	
Armenia	6	
India	5	
Sri Lanka	5	
Puerto Rico	5	
Greece	5	
Canada	4	
Chile	3	
Nepal	3	
Pakistan	2	
Iceland	2	

Taiwan	2
Canada	4
Chile	3
Nepal	3
Pakistan	2
Iceland	2
Taiwan	2
Poland	1
Bangladesh	1
New Zealand	1
Iran	1
Antilles	1
Tibet	1

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