

However, temper tantrums, bedwetting, or other behaviors may also be expressions of anger, a physiologic response to stress, or symptoms of illness.

Because preschoolers are more secure interpersonally than toddlers, they can tolerate brief periods of separation from their parents and are more inclined to develop substitute trust in other significant adults. However, the stress of illness usually renders preschoolers less able to cope with separation; as a result, they manifest many of the stage behaviors of separation anxiety, although in general, the protest behaviors are more subtle and passive than those seen in younger children. Preschoolers may demonstrate separation anxiety by refusing to eat, experiencing difficulty in sleeping, crying quietly for their parents, continually asking when the parents will visit, or withdrawing from others. They may express anger indirectly by breaking their toys, hitting other children, or refusing to cooperate during usual self-care activities. Nurses need to be sensitive to these less obvious signs of separation anxiety in order to intervene appropriately.

Later Childhood and Adolescence

Previous research, usually based on adult recollections, indicated that the family does not play as important a role for school-age children as it does during the toddler and preschool years. However, in a recent study that asked children about their fears when hospitalized, children listed their greatest fears regarding hospitalization as being separated from family and friends, being in an unfamiliar environment, receiving investigations or treatments, and losing self-determination or choices ([Coyne, 2006](#)). In a qualitative study of children 5 to 9 years old, children described hospitalization in stories that focused on being alone and feeling scared, angry, or sad. These children also described the need for protection and companionship while hospitalized ([Wilson, Megel, Enenbach, et al, 2010](#)).

Although school-age children are better able to cope with separation in general, the stress and often accompanying regression imposed by illness or hospitalization may increase their need for parental security and guidance. This is particularly true for young school-age children who have only recently left the safety of the home and are struggling with the crisis of school adjustment.