

face. Especially during the early years, children are particularly vulnerable to these stressors because (1) stress represents a change from the usual state of health and environmental routine and (2) children have a limited number of coping mechanisms to resolve **stressors**. Major stressors of hospitalization include separation, loss of control, bodily injury, and pain. Children's reactions to these crises are influenced by their developmental age; their previous experience with illness, separation, or hospitalization; their innate and acquired coping skills; the seriousness of the diagnosis; and the support system available. Children also expressed fears caused by the unfamiliar environment or lack of information; child–staff relations; and the physical, social, and symbolic environment (Samela, Salanterä, and Aronen, 2009).

Separation Anxiety

The major stress from middle infancy throughout the preschool years, especially for children ages 6 to 30 months, is separation anxiety, also called **anaclitic depression**. The principal behavioral responses to this stressor during early childhood are summarized in Box 19-1. During the stage of **protest**, children react aggressively to the separation from the parent. They cry and scream for their parents, refuse the attention of anyone else, and are inconsolable in their grief (Fig. 19-1). In contrast, through the stage of **despair**, the crying stops, and depression is evident. The child is much less active, is uninterested in play or food, and withdraws from others (Fig. 19-2).

Box 19-1

Manifestations of Separation Anxiety in Young Children

Stage of Protest

Behaviors observed during later infancy include:

- Cries