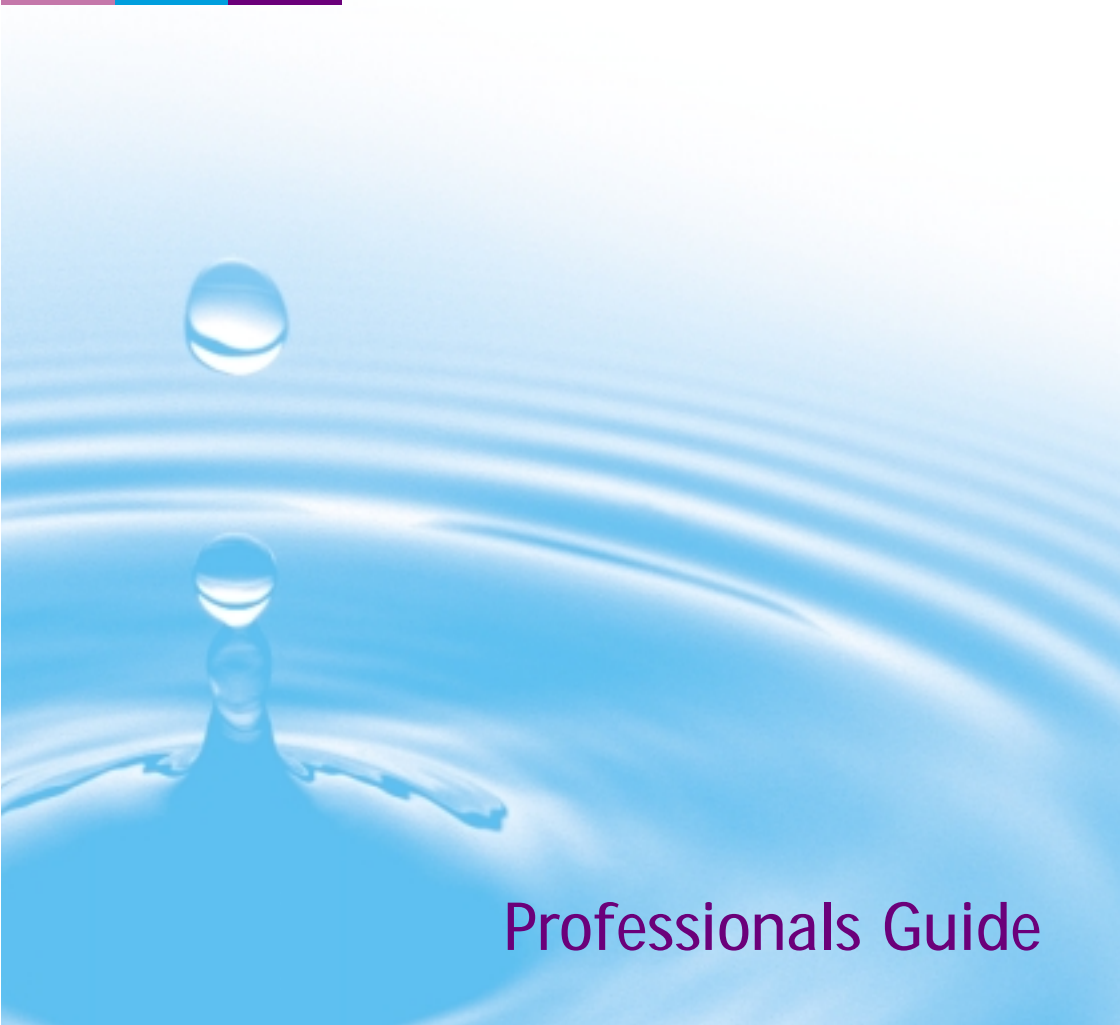


Traumatic grief in early childhood

Ages 0-5



Professionals Guide

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The ROYAL
HOSPITALS



Victims Unit: Office of the First Minister and Deputy First Minister



General development

Young children undergo almost constant physical and mental change – and are learning to move, communicate, and understand the world all for the first time. They also begin very early on to form attachments to parents or parent figures, and so are capable of grief (although maybe not in the way adults understand it).

Young children need the support of adults in learning to express themselves verbally and emotionally – as a result, sometimes the depth of children's understanding or misunderstanding can be underestimated. The young child needs clear and consistent explanations to reduce confusion, and will need repeated explanations over time in order to fully understand what is said.

Young children do not always talk about what upsets them, but use play to process emotionally laden events – this may be because children find it difficult to maintain strong emotional states (such as those associated with separation or grief) for very long periods without tiring. Play offers children the opportunity to explore and understand events they have experienced in their own way and to their own timing, and as such is a normal part of working through children's grief.

Young children with special needs or circumstances have normal responses to traumatic bereavement – however, these responses are influenced by the young child's level of understanding and access to emotional resources over time. With care and understanding, young children can recover from traumatic grief, and will respond best to care-giving which is tailored to meet their strengths and address their fears.

Young children's understanding of death

Young children react to separation instinctively – they are most affected by deaths of parents or parent figures. This is true even if they don't understand what the word death means or aren't capable of sympathising with others. They do understand separation and loss.

Young children do not understand that death is the final and irreversible end of life – they may ask when the person who died is

coming back or think they will be lonely under the ground. This can give rise to fears of burial.

Young children find it difficult to understand euphemisms for death (like 'going on a voyage' or 'sleeping') – they may wonder when the person who died is coming back or why everyone doesn't die when they go to sleep. They may be reluctant to sleep.

Young children believe there can be magical or unseen reasons for death – they can mistakenly believe that people can die because of something that was said or done by the child themselves, or believe that death can be undone by certain actions or people.


Long-term implications of death and permanent separation are unclear – young children may appear unaffected or continue playing after hearing news of the death. However, they are likely to think about the death during quieter, less active times (e.g. at bedtime). The ability to switch off is a useful way for children to cope.

Young children's reactions to trauma

Young children experience trauma as fright – when a child is old enough to recognise a situation as threatening, their bodies react with a pre-programmed fright response. This strong bodily response is unsettling, and can reoccur later when the child feels unsafe. Young children cannot control these reactions very well without the help of an adult. Such fright responses in young children include crying, over-reacting or being easily startled.

Young children can believe there are magical or unseen reasons for trauma – they may believe the traumatic event was caused by something that happened to occur at the same time. They make simple explanations to make meaning of the event.

Young children need to understand what happened – they may ask why the person died, or will re-enact the traumatic events through play (e.g. using dolls or action figures to play roles). Sometimes the trauma or death is avoided or reversed in these re-enactments, as children wish to undo the unpleasant consequences of trauma.



The need to understand is universal. In the absence of an understandable explanation, children's fantasies about what they hope or fear happened during the traumatic death become accepted as reality.

Young children can experience stress – for a time they may show signs of being irritable, easily startled or clingy, nervous of anything that reminds them of the trauma, or otherwise distressed. Alternatively they may surprise parents by returning to routines.

Night-waking, bed-wetting, and feeding difficulties are common signs of stress in young children. Sometimes young children can become either more exaggerated in their behaviours or more withdrawn than they were before the death, but these signs aren't always obvious.

Young children's experience of traumatic grief

Young children's experience of traumatic grief will vary according to how emotionally close or dependant upon the dead person the child was, and also how exposed the child was to the circumstances of death.

Young children react to separation – it is a natural response for young children to be distressed when separated from their care-givers for long periods of time. This means young children can be upset by death even if they do not understand it. In effect, young children experience death as a separation.

Young children will be most upset by the death of a parent or parent figure, as these are the people on whom the child depends most. In addition, they may also react to the distress expressed by the adults around them. Parents at this time may not have the ability to respond to the child due to the stress and practicalities of bereavement.

Young children react to trauma – younger children do not always understand what happens in a traumatic situation but can become intensely frightened by it. Normally intense fright means that the memory of trauma can persist until such time as the child understands and deals with it (see previous section).


Memories and feelings of trauma are hard to forget – these can be frightening and are not always easy to control. They leave children nervous, expecting future traumas and cause important changes in the body's chemical system. This makes children very alert and in need of soothing or reassurance. Traumatic memories may lead children to avoid certain triggers which remind them of the death (e.g. people, places, objects) or they may resurface uncontrollably from time to time (e.g. through vivid dreams or at quiet times such as bedtime).

Young children's bodies become fatigued by fright – prolonged exposure to or experience of fright causes young children's bodies to react in ever stronger ways. Usually, young children who feel safe only experience a moderate jolt of extra energy when they get a fright. However, the fright response becomes stronger the more it is used, so when children are traumatically bereaved they use up a lot of energy when they feel unsafe or experience traumatic memories. Over days and weeks this can drain the body of resources and leave it vulnerable to illness or infection.

What affects the experience of traumatic grief?

Traumatic deaths which are witnessed will have a more direct impact on young children – witnessing a traumatic death is usually stressful for children even if they don't understand what they see. Memories of trauma are multisensory, so young children will be distressed by the memory of what they see, hear, smell, and touch. Children who witness such deaths will most often need reassurance and some degree of explanation as soon as possible, before they can devote time to grief.

Young children create traumatic fantasies to fill in gaps in their knowledge – traumatic deaths that are not witnessed directly or that leave surviving children with unanswered questions about the death (or person who died) often lead to traumatic fantasies. Traumatic fantasies are the explanations young children create to fill in gaps in their knowledge of the events surrounding the death. These might include fantasies that they are ultimately responsible for the death, or that the person who died is angry at them. Traumatic fantasies can be distressing and provoke strong emotional reactions. They usually focus on the worst possibilities, and fade with time as people learn more about what



happened. Young children who have traumatic fantasies need reassurance (with appropriate levels of detail) conveyed in language they can understand.

Young children have private or magical beliefs – they may believe that the death was caused or could have been stopped by them or someone who was involved. However, these beliefs are not always shared openly. Young children may need encouragement to talk openly about their beliefs without fear of reprisal or ridicule, as these are often associated with strong emotions such as anger or fear.

Young children are highly sensitive to the reactions of people around them – they use these reactions, and in particular the reactions of the main parent-figure, to judge how they should react. Young children's acute sensitivity to other people's behaviour during times of crisis and aftermath is often grossly underestimated. Ideally, children need to see the expression of adult grief and sadness in a safe environment where they are free to ask questions etc. rather than witnessing uncontrolled grief or grief out of context.

Young children have shorter spans of attention than adults – young children cannot stay sad, worried, angry, or happy for long periods of time without being distracted. This can make their grief appear less intense, whereas in reality children's grief is painful, but switches on and off very rapidly. Often, young children's grief and trauma reactions occur at times of low activity, such as at bedtime or early morning.

Young children's grief and trauma can be private – they don't always have the words to explain how they feel, or trust that their reactions are normal for their age. As a result, the level of their distress can be underestimated by adults.

Young children can become pre-occupied with safety – in the aftermath of traumatic death, children's fears about safety can be intense. Often, children appreciate concrete reassurance that they are safe (e.g. allowing them to lock doors and windows at night before they go to bed). Helpful reassurance is necessary, especially in the short term, if settings such as home, pre-school, or play groups are connected to the traumatic death.

Young children are sensitive to daily routines – deaths in the family can disrupt this routine, and make the child's world less predictable and secure. Young children feel safest when they are with a trusted adult and know what their daily routine is.

Young children are dependent and sensitive to their carers – the adjustment of the main caregiver is known to be the biggest influence on the rate and extent to which a child will cope with a traumatic death. The more distressed the adults, the less likely the child will cope and vice versa.

Guidelines


It is important to remember that children are more sensitive to their family's emotions than is generally realised. Young children will watch the reactions of those around them much more than is understood by adults. Because even young children will actively grieve, it is important that carers are aware of this fact, and try to understand and meet their needs.

Immediate needs

Promote a safe environment – it is very important for young children to feel as safe as possible both immediately after a traumatic death, and in the long term. Ideally, daily routines with trusted adults should be re-established for the child as soon as appropriate. Avoid unnecessary separations, give affection, and adopt a flexible approach to reassuring children of their safety.

- Work for continuity in home or play group.
- Avoid unnecessary separations – where separations are necessary they should be planned and predictable for the child.
- Give hugs and cuddles for emotional reassurance
- Allow children to share a bed or leave a light on at night.
- Develop a concrete safety plan which addresses the young child's concerns about safety.

Clear communication – young children need simplified and consistent explanations to reduce their confusion about death. Death is best explained as meaning that a person stops moving and thinking. Their hair and



fingernails don't grow and they don't breathe or feel any pain. Families need to use their own beliefs to explain that whatever happens to people after death, once a person dies they cannot come back to life. Young children can be taught about death directly or by using simple stories.

- Explain the meaning of death as early and immediately as possible, and be prepared to repeat this explanation when children need to revisit the topic.
- Use language you know young children will understand – clear and not misleading.
- Give explanations suitable to the age and level of understanding of the child.
- Reduce confusion – give clear, consistent explanations.
- Use the families own belief systems to explain death.

Make the loss real – prepare and encourage young children to participate in rituals (e.g. funeral), do not hide your own feelings or the feelings of others, and keep mementoes of the dead person for future years.

- Let the child participate in rituals (seeing the person who died, attending the funeral). They may need to be prepared for what they see.
- Encourage the child to do something individual for the person who died (e.g. putting a drawing, letter, or present for the person who died on the coffin).
- Keep reminders of the dead person present (some children may want to keep a personal reminder of the person who died).
- Do not hide your own feelings but be aware of the impact of excessive or overwhelming reactions in parents.

Long-term needs

Children need to understand – allow questions and short conversations, time for the child to repeat questions on confusing topics, and play that reenacts the trauma or events associated with it. Although this may be upsetting to watch, it is normal for children to use play to explore confusing or emotional topics. Let the child visit the grave or other location which was relevant to the child and person who died. Looking at photo albums can also be helpful.

- Allow questions and conversations – some questions will be asked repeatedly since young children cannot understand death fully. These should be answered as clearly and consistently as possible.
- Accept that children may only want short conversations.
- Look at albums and photographs.
- Let the children visit the grave or other relevant places.
- Accept children's play.


Inform relevant people – other people who are important in the child's life will need to be told about the death and the young child's reaction. Teachers and care-givers can provide support to children in returning to social settings such as school and playgroups. They can also answer questions of other children with whom the bereaved child has to interact, and prepare for the bereaved child's return.

- Inform relevant adults in school or playgroup settings.
- Inform relevant adults in the neighbourhood or community who will have contact with your child.
- Be prepared for any questions they might have.

Coping with emotions – talk with the child about their feelings. In the days and weeks following the death, confront children's fears and provide reassurance. Share grief with children, but try not to expose them to panicky or uncontrolled outbursts.

- Talk with children about their anxiety about something happening to their parents or themselves.
- Talk with children about persisting guilt feelings. Be aware that anger can be expressed through irritability and emotional upset.
- Provide soothing and reassurance that what children feel is normal.
- Be aware that it is easier to access children's thoughts and feelings through play.

Re-establish routines or build new ones – young children become disturbed by a change of routine alone and therefore feel more secure when these are re-established. Young children like predictability in people, places, times, and activities. Routines should include:

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- Bedtime routines: predictable activities leading up to bedtime (stories, brushing teeth)
 - Mealtimes planned at same time and place each day
 - Plan for a return to playgroups or other activities
 - Encourage play with friends

Deal with reminders – unsettling reminders of the death or trauma can come at random or in response to triggers in the life of the young child. Managing reminders and triggers can provide the child with more stability and a sense of greater emotional control.

- Develop a plan to avoid or minimise unnecessary exposure to reminders which are unsettling
- Significant dates such as anniversaries or birthdays should be prepared for in advance.
- Develop a plan to deal with reminders and triggers when they arise
- Provide reassurance that reminders and triggers will become weaker and less frequent over time.

Facilitate the coping of the main caregiver – the wellbeing of the main carer is essential to the wellbeing of the child. Adults need to take time and accept support to manage their own reactions to trauma and grief.¹

- Seek support for adult caregivers in their own right.
- Be aware of the impact of the main carer's coping on the child.

Look to the future – be prepared for new feelings and understandings of death to emerge as children grow and realise more about the world. Keepsakes and anniversaries will be special to children in the future.

- Involve children in anniversaries and significant occasions
- Be aware of children's needs – children will need to continue to invest in new friendships and to find meaning or strength from their experience instead of vulnerability
- Let children change their opinions, memories, and worries over time.
- Hold onto mementoes and keepsakes
- Be prepared for the child to have new questions about the death again in the future as their understanding grows.
- Encourage optimism about the future.

Outcomes

Most children will recover from traumatic grief, but there is no set response to trauma or bereavement that is successful. There is no definitive timetable for the conclusion of grief, indeed bereavement is often seen as a lifelong influence on development.

Young children who are traumatically bereaved can be helped to manage their difficulties, to reduce their confusion about death, and to form healing emotional bonds with parents and others. In this way, the most acute consequences of traumatic grief can be worked through relatively quickly.

Young children can work through the effects of traumatic grief with the support of their family, a stable caring environment, and enough good information. However, parents must be prepared for children to revisit their trauma and bereavement again throughout childhood as they understand more about themselves and the world.



Books for professionals and teachers

“Grief in children” by Atle Dyregrov.

Publisher: Jessica Kingsley. ISBN1-85302-X

“Helping children cope with separation and loss” by Claudia Jewett.

Publisher: Free Association Books. ISBN 0-7134-7766-0

“Good grief: exploring feelings, loss and death with under elevens” by Barbara Ward and associates. Publisher: Jessica Kingsley. ISBN 1-85302-161-X

“Good grief: exploring feelings, loss and death with over elevens and adults” by Barbara Ward and associates. Publisher: Jessica Kingsley. ISBN 1-85302-162-8

“Coping with bereavement: a handbook for teachers” by John Holland.

Publisher: Cardiff Academic Press. ISBN 1-899025-057

“Wise before the event” by William Yule & Anne Gold. Publisher: Calouste Gulbenkian Foundation. ISBN 0-90331-966-7

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What else?

There may be a need, from time to time, for specific help to manage or control certain excessive intrusions or distress. These are best discussed with your GP, health worker, or social services representative, who will be able to consider your options and information available to you. Referral to bereavement/trauma groups and voluntary agencies can also be arranged through these sources.

Professionals guide

Traumatic grief in early childhood
Ages 0-5

Traumatic grief in middle childhood
Ages 5-10

Traumatic grief in adolescence
Ages 10-18

Traumatic grief in adults

Traumatic grief
Anger management

Traumatic grief
Dealing with intrusions

Sleep disturbance in adults
and adolescence

Sleep disturbance
in children under 10 years of age

Self care for workers supporting
the traumatically bereaved

Guidelines for the immediate response
to children and families in traumatic
death situations

Relatives Guide

Dealing with sudden death in early
childhood Ages 0-5

Dealing with sudden death
in middle childhood Ages 5-10

Dealing with sudden death in adolescence
Ages 10-18

Dealing with sudden death for adults

Sudden Death
Anger management

Sudden Death
Dealing with intrusions

Sudden Death
Insomnia and sleep disturbance
in adults and adolescents

Sudden Death
Sleep disturbance
in children under 10 years of age

The Coroner

Schools Guide

Traumatic grief in early childhood
Ages 0-5

Traumatic grief in middle childhood
Ages 5-10

Traumatic grief in adolescence
Ages 10-18

Sudden death
Information for pupils

Individual booklets are available from your local health centre, library or school
The full series can be downloaded from www.royalhospitals.org/traumaticgrief