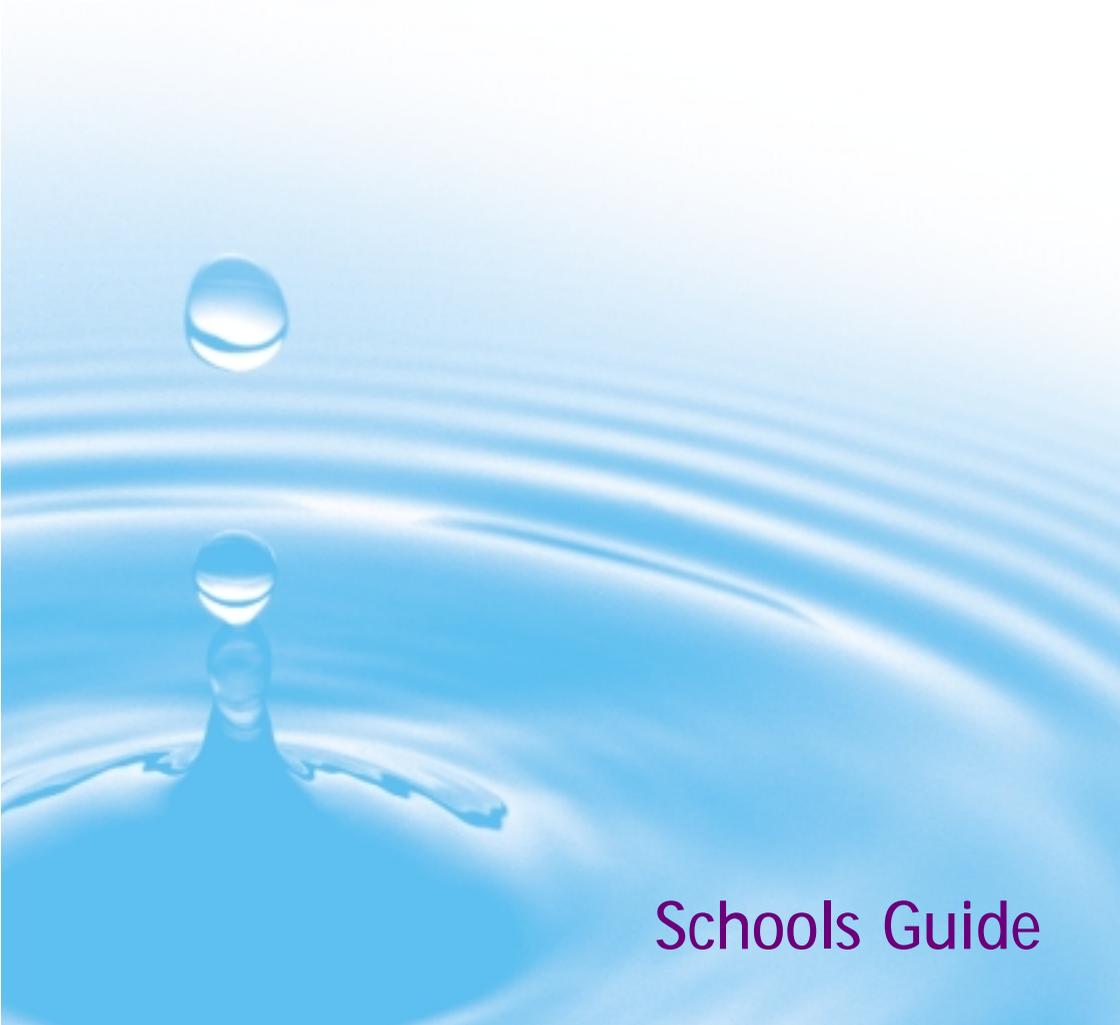


# Traumatic grief in early childhood

## Ages 0-5



Schools Guide

This booklet has been produced by:

The ROYAL  
HOSPITALS

EHSSB

Learning Together  
  
SOUTH EASTERN EDUCATION  
AND LIBRARY BOARD

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

© SG/03/02



## 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 depths 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 sleeping or going on a voyage)** – they may wonder when the person who died is coming back, why everyone doesn't die when they go to sleep, or become reluctant to sleep themselves.

**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 reenact 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 the 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 or 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 largest influence on the rate and extent to which a child cope with a traumatic death. The more disturbed the adult 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 school or play group and link with home.
- Maintain a routine as far as possible and prepare the child for any changes to this – where changes are necessary they should be planned and predictable for the child.
- Be alert to the child's needs and provide emotional reassurance as necessary.
- Listen to what the child has to say and address their anxieties and concerns (these can be very important to a young child).



**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.

- If children ask questions about death try to answer as honestly and clearly as possible. Be aware that they may revisit this topic on many occasions.
- 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 by giving clear, consistent explanations when asked.
- Be aware of the families own belief systems and maintain links with the family.

**Make the loss real** – Parents are advised to prepare and encourage young children to participate in rituals surrounding the death, not to hide their own feelings, and to keep mementoes of the dead person for future years.

- The child may participate in rituals (seeing the person who died, attending the funeral). They may need to be prepared for what they see or how they could react to it afterwards.
- Allow the child to remember the person who died (e.g. through drawing, talking, playing, etc.).
- Some children may want to keep a personal reminder of the person who died, and may want to have this with them in school. This is a normal behaviour.
- It is alright to show your own feelings but be aware of the impact of excessive or overwhelming reactions.

## 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

re-enacts 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. Parents are usually encouraged to 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 and talk about photographs and other mementoes if children bring them to school.
- 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 and ensure that if a teacher/classroom assistant is off for the day that a system is in place that the substitute figure will be informed of the situation.
- Ensure that this information is flagged or passed on to the next teacher or school.
- Be prepared for any questions they might have.

**Coping with emotions** – talking with the child about their feelings helps provide reassurance. Share grief with children, but try not to expose them to panicky or uncontrolled outbursts.

- Try to address any issues or anxieties the child might bring up (e.g. anxiety about something happening to their parents or themselves).
- Talk with children about guilt feelings if they express them.
- Be aware that in young children feelings are generally expressed through emotional upset and behaviours (rather than words).
- 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.



**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.

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

**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.

- Children will react to anniversaries and significant occasions.
- Be aware of children's needs – they may become vulnerable or confused.
- Children change their opinions, memories, and worries over time.
- Children may 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.

## Classroom issues

Young children are highly sensitive to the reactions of adults around them. Ideally, their interactions with adults and teachers should be comforting and predictable. Following traumatic bereavement, old family routines are often broken and adults can behave in ways that young children do not fully understand. While parents have the task of explaining what happened, school life can offer the day-to-day stability and structure that children most need at this stage of development. Returning to school following a traumatic bereavement should be planned for:

- Talk with parents about timing, what information to share with classmates, and any specific worries or requests they may have.

- Talk with class or group about what happened (if appropriate). Use age-appropriate explanations and let them know when the bereaved child will be coming back.
- Be prepared for your own reactions – young children will be very sensitive to the reactions of familiar adults in their lives.
- Re-establish simple daily routines but be flexible. Young children may need extra support or consideration in the early stages.
- Be sensitive to special dates (e.g. Mother's/Father's Day), anniversaries, or events where parents usually attend. These will affect the child and their family. If pupils are making Mother's/Father's Day cards, young children should be encouraged to make them for a parent who has died. Allow them to keep these cards or give them to a trusted adult for safekeeping.

Be aware that children will revisit their grief as their understanding grows, leading to possible changes in temperament, capacity, and behaviour which will not always be obviously connected to traumatic grief.

## 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.



*"Little losses which are mourned at the time are preparations for greater losses in the future"*  
– D. Black, 1996\*

## Books for 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

\* 'Helping young people grieve' by Dora Black in Barbara Ward & Associates' Good Grief 2, published by Jessica Kingsley Ltd in 1996, p.31.

## Authors:

|             |                                  |                                 |
|-------------|----------------------------------|---------------------------------|
| P. Donnelly | Consultant Clinical Psychologist | The Royal Hospitals,<br>Belfast |
| G. Connon   | Assistant Psychologist           | The Royal Hospitals,<br>Belfast |

## Editorial Group:

|             |  |   |
|-------------|--|---|
| N. Rooney   | Consultant Clinical Psychologist         | The Royal Hospitals,<br>Belfast                 |
| A. Healy    | Therapist; Director Family Trauma Centre | South and East<br>Belfast HSS Trust             |
| E. Smyth    | Senior Educational Psychologist          | South Eastern<br>Education and<br>Library Board |
| M. McCann   | Director/Counsellor                      | Cruse Bereavement<br>Care                       |
| T. Costello | Senior Social Worker                     | North and West<br>Belfast HSS Trust             |

## 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](http://www.royalhospitals.org/traumaticgrief)