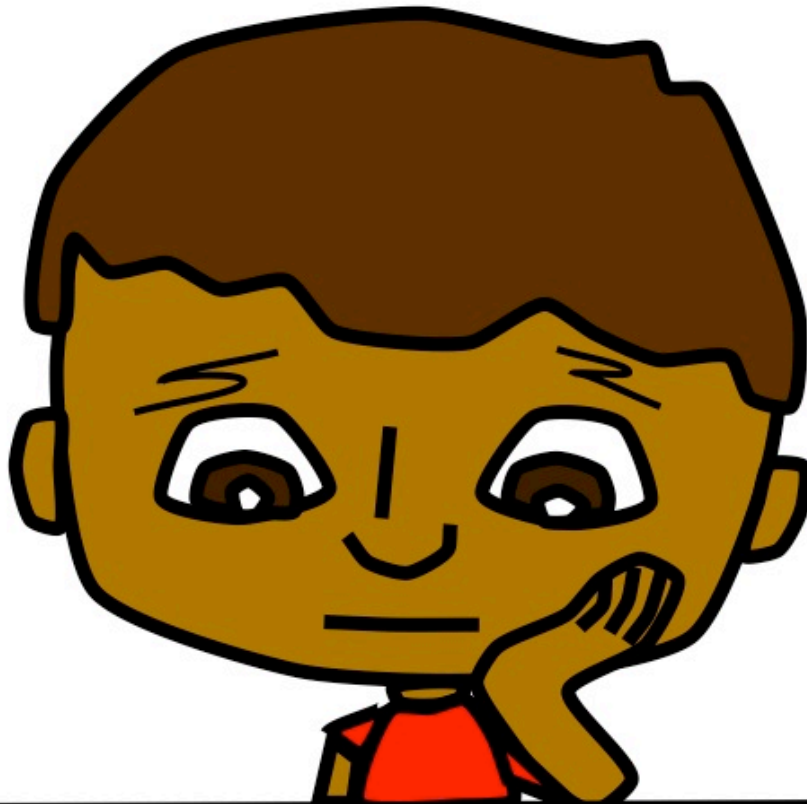


**CHILDHOOD
TRAUMATIC
GRIEF:
WHAT EDUCATORS
NEED TO KNOW**



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Definition

Yearly, 4 out of 100 children will lose a parent.¹ Most children will grieve in an appropriate manner; however, for some children, the process of grieving is complicated by a traumatic experience.

Childhood Traumatic Grief (CTG) occurs when a child loses a parent under subjectively or objectively identified traumatic experiences and symptoms of trauma interfere with the grieving process.² Even if a child experiences a traumatic death, childhood traumatic grief is not a normative response to death.³

¹ (Social Security Administration, 2000, as cited in Brown et al., 2008; Pearlman, D'Angelo Schwalbe, & Cloitre, 2010)

² (Brown et al., 2008; Cohen & Mannarino, 2004)

³ (Cohen & Mannarino, 2004)

Terminology

Bereavement: the state of losing a loved one.

Grief: one's personal reaction to bereavement.

Mourning: how bereavement and grief are expressed in terms of family, religion, and culture.⁴

Uncomplicated grief: children and adults adjust to the death through the "typical" grieving process.

Adult complicated grief: the adult experiences distress and trauma symptoms that stem from separation and loss of the relationship.⁵

Reconciliation: child's adjusting to and accepting life without the loved one; re-involvement in typical day-to-day life.

Children with CTG cannot reach reconciliation because discussing the trauma serves as a traumatic reminder, which develops into traumatic symptoms.⁶

⁴ (Stoebe, Hansson, Stroebe, & Shut, 2001, as cited in Cohen & Mannarino; Genevro et al., 2004, as cited in Pearlman et al., 2010)

⁵ (The Diagnostic and Statistical Manual of Mental Disorders, 4th ed. (DSM-IV-TR), as cited in Cohen & Mannarino, 2004)

⁶ (Wolfet, 1996, as cited in Cohen & Mannarino, 2004)

Terminology, cont.

Three types of Reminders of Traumatic Grief⁷

1. *Trauma reminders: experiences (including sensory experiences) that trigger the child to remember the traumatic characteristics of the death.*
 - i. *Example: The sound of fireworks reminds the child of the gunshot sounds heard the night his father was shot outside of their home.*
2. *Loss reminders: experiences or memories that cause the child to think of the loved one they have lost.*
 - i. *Example: Running into her best friend and her best friend's mother in the grocery store triggered the adolescent to think about the loss of her mom and of the difficulty she faces as a teen without a mother in her life.*
3. *Change reminders: experiences that cause the child to remember how the death of their loved one has changed their living situation.*
 - i. *Example: Attending a birthday party in his old neighborhood reminds the young boy about what his life was like before the death of his father, which led to the loss of his former house.*

Anticipated death: expected death. (Example: terminal illness)

Unanticipated death: sudden, unexpected death.⁸ (Example: tragic car accident)

⁷ (Pynoos, 1992, as cited in Cohen & Mannarino, 2004)

⁸ (Pearlman et al., 2010)

Children's Perceptions of Death

Table 1: Children's Perceptions of Death⁹

Age	Perception
0-2	<i>Infants are unable to comprehend death because they lack the cognitive capacity to do so. However, they do respond to the loss of the caregiver. They may be unable to understand the absence and may search or seek out their caregiver. The absence may lead to separation anxiety. Infants, like children and adolescents of all ages who lose a caregiver, may regress in terms of development. They may display behaviors they were thought to have outgrown. Infants can also be affected by the way the caregiver responds to the death.</i>
2-5	<i>This age group does not understand the finality of death, which may cause confusion. Therefore, they may ask many questions or display "magical thinking" (believing they are in some way responsible for the death). This age group also may regress in terms of development. They may have trouble managing their emotions and may experience stress. They need help in regulating their feelings and, accordingly, could try to get the attention of caregivers through difficult emotional reactions.</i>
6-9	<i>This age group does understand the finality of death. Like the previous group, they may feel that they, in some way, are responsible for the death. This group could have prolonged thoughts of death and could feel a longing for their lost caregiver. They may ask questions and be fearful that they, or other loved ones, may die. Emotional states may vary and they also may display regressive behaviors.</i>
9-12	<i>This group understands that death is a part of life and can maturely understand death. These children also experience an array of emotions. They may withdraw or feel different from their friends because of the experience. They also may feel guilty or somehow responsible for the death. They, like the previous group, could have concerns about the death of loved ones or their own death.</i>
13-18	<i>This age group has similar reactions to death as that of adults. They may have depressed feelings including feeling sadness and suffering. They may have thoughts about life and its meaning. They may think about their own identity and life purpose. They may think about how their life will be without their loved one. Reactions can fluctuate; some feel they need to be more responsible, others engage in risky behaviors. Their willingness to communicate their feelings about the death is dependent on the individual.</i>

⁹ (Pearlman et al., 2010)

Table 2: How Teachers Can Respond to Child's Perception of Death¹⁰

<i>Level of Schooling</i>	<i>How Teachers Can Respond</i>
<i>Preschool</i>	<i>For preschoolers, sticking to daily routines and assuring caregivers will meet their needs is important, as they need consistency and stability.</i>
<i>Early Elementary</i>	<i>For this age, it is important to be open to the idea that the child may have a unique perspective on the death. Therefore, it is important to gain an understanding of the individual child's perception of death. Teachers also must recognize that students may get behind schedule in terms of their studies. Teachers should be supportive to students during this time and be aware of the difficulties the child may be facing.</i>
<i>Late Elementary</i>	<i>This age group may not completely understand or be able to manage their feelings regarding the death. They may need information, although some may ask questions and others may not; therefore, letting them ask questions and helping them find information is beneficial. It is important to help this age understand that it is okay to feel and express their unique emotions.</i>
<i>Early Secondary</i>	<i>Although this age group does have a more mature concept of death, they still need support from adults. They can understand the death better than younger groups and have ways of managing their emotions; however, they still need to look to adults for guidance and encouragement.</i>
<i>Late Secondary</i>	<i>Cognitively, this group needs to be informed of the facts to help develop their understanding. They also need to feel in control, so giving them opportunities to feel such control is valuable in helping them manage their emotions.</i>

Risk Factors for CTG

Risk factors are individual to each child and can be indentified in terms of the following: pre-death, death, and immediate post-death experiences. Post-death risks are presented in the following domains: cognitive, developmental, and familial.¹¹

¹⁰ (Rowling, 2003)

¹¹ (Brown et al., 2008)

- *Pre-death: past trauma or past experiences of significant deaths.*¹²
- *Death characteristics: violent deaths, close relationships with the deceased, witnessing death, or experiencing a perceived life threatening violent act can all be risk factors for CTG. Those who have had previous psychological susceptibility are likely to display more symptoms of CTG as well as show symptoms of earlier issues following the death.*¹³ *Although death can be subjectively identified as traumatic, some examples could include death from: suicide, family violence, murder, natural disasters, war, terrorist attacks, medical issues, etc.*¹⁴
- *Post-Death, in terms of the following domains:*
 - *Cognitive (see page 6; Children's Perceptions of Death): Higher complicated grief scores have been observed in children who perceived that they caused the death or who perceived that others thought they were responsible for the death.*¹⁵

¹² (Pine & Cohen, 2002; Worden, 1996, as cited in Brown et al., 2008)

¹³ (Brent et al., 1995; Salloum & Vincent, 1999, as cited in Brown et al., 2008)

(Brown & Kolko, 1999, as cited in Brown et al., 2008)

(Dyregrov, Nordranger, & Dyregrov, 2003; Kaltman & Bonnano, 2003; Momartin, Silove, Manicavasagar, & Steel, 2004, as cited in Brown et al., 2008)

(Saldinger, Cain, & Porterfield, 2003, as cited in Brown et al., 2008)

(Pearlman et al., 2010)

¹⁴ (Leberman, Compton, Van Horn & Ippen, 2003; Brown & Goodman, as cited in Brown et al., 2008)

(Cohen & Mannarino, 2004)

(Melhem et al., 2008; Yule, 1994, as cited in Pearlman et al., 2010)

¹⁵ (Melham et al., 2007, as cited in Brown et al., 2008)

- *Developmental (see page 6; Children's Perceptions of Death): Death can be traumatic to children in the sense that children are not developmentally prepared to cope.¹⁶*
- *Familial: Children's responses are affected by and related to caregivers' responses to death. It has been shown that parent mental health problems negatively predict resilience in the child.¹⁷ The relationship between parent and child responses may imply the possible need for parent treatment if parents are having difficulty in grieving the death.¹⁸*

Symptoms of CTG

Normal grief reactions:¹⁹

- *"Normal" grief can be intense, but reactions are not related to trauma. Reactions include what one typically associates with grief such as feeling sad, alone, and yearning for the loved one.*
- *Additionally, children may not understand the death. They may experience the previously mentioned reactions but in some ways may also be confused and concerned.*

¹⁶ (Liebman, Compton, Van Horn, & Ippen, as cited in Brown et al., 2008)

¹⁷ (Lin, Sandler, Ayers, Wolchik, & Luecken, 2004, as cited in Brown et al., 2008)

¹⁸ (Pearlman et al., 2010)

¹⁹ (Cohen & Mannarino, 2004; Pearlman et al., 2010)

Symptoms of Childhood Traumatic Grief:

- *As mentioned on page 3, symptoms of trauma impede on the child's ability to grieve the death. The child may avoid experiences that remind them of the death or loved one. Such reminders (trauma reminders, loss reminders, and change reminders) can trigger upsetting or disturbing thoughts. The child may experience other symptoms and may be irritable, distant, anxious, or fearful, may act out, or have difficulty sleeping. Some children may display symptoms of depression²⁰*
- *In addition to experiencing grief reminders, children may experience Post Traumatic Stress Disorder (PTSD) symptoms including reoccurring memories or dreams of the traumatic experience or may feel like the event is occurring again.²¹*
- *The child may have varying perceptions of their relationship with the lost loved one. Some may over identify or under identify with the deceased. Perceptions of death may also vary. Some children may experience guilt and shame regarding circumstances of death.²²*

²⁰ (Cohen & Mannarino, 2004)

²¹ (Cohen & Mannarino, 2004)

²² (Nader, 1997; Pynoos & Nader, 1990 as cited in Cohen & Mannarino, 2004)
(Cohen & Mannarino, 2004)



Misconceptions

· *CTG and PTSD are the same. False. Although there is a high correlation between CTG and Post Traumatic Stress Disorder, they are not the same. Therefore, treatment that focuses on both trauma and grief symptoms may be necessary for effectively treating CTG.*²³

· *The nature of death may lead some to believe that knowing about the death would make a child more prepared to grieve in a typical manner. On the contrary, findings have shown that neither expected nor unexpected death has been found to have a greater influence on the child's response to death.*²⁴

· *Childhood traumatic grief is not a typical response to death, even if a traumatic death was experienced.*²⁵ False.

· *Talking about the deceased in a positive light, will not trigger CTG. False. Any conversation can be traumatic for children with CTG and can trigger grief reminders and symptoms of PTSD.*²⁶

²³ (Brown et al., 2008; Cohen & Mannarino, 2004)

²⁴ (Cerel et al., 2006; Dowdney, 2000; Saldinger, Cain, Kalter, & Lohnes, 1999, as cited in Pearlman et al., 2010)

²⁵ (Cohen & Mannarino, 2004)

²⁶ (Cohen & Mannarino, 2004)

Adversities

- *Children will attempt to avoid situations that remind them of the traumatic experience, which may lead to detachment and avoidance of everyday activities that may serve as reminders. Therefore, school, activities, friendships, and family relationships can all be affected by the grief.²⁷*
- *The child may experience secondary adversities following bereavement. The family may have to move or experience other changes as a result of altering finances. Such hardships can be additional contributors to CTG as the child is adapting to additional life changes in the face of the traumatic death.²⁸*
- *The child may be left with unresolved grief for years if traumatic grief is left unrecognized. Experiencing trauma during childhood may lead to emotional or behavioral symptoms later in life.²⁹ Moreover, “the presence of significant childhood PTSD symptoms place children at risk for developing other serious psychiatric conditions, including depression, substance abuse, and borderline personality disorder, which may last into adulthood and beyond.”³⁰*

²⁷ (Cohen & Mannarino, 2004; Center for Traumatic Stress in Children and Adolescents, as cited in Kerr, 2008)

²⁸ (Cohen & Mannarino, 2004)

²⁹ (Cohen, Mannarino, & Deblinger, 2006)

³⁰ (American Academy of Child and Adolescent Psychiatry [AACAP], 1998, as cited in Cohen et al., 2006, p. 18)

What Does Childhood Traumatic Grief Look Like?

Examples of CTG:

Eric, an eleven-year-old boy, and his father were driving to Eric's baseball game one evening. A driver coming in the opposite direction fell asleep behind the wheel and crashed into their vehicle. Eric's father died on impact and Eric received minor injuries. Since his father's death, Eric has experienced symptoms of childhood traumatic grief. He has not been able to grieve his father's death because of his traumatic symptoms. Eric feels guilty and responsible for the death because he perceives that his father would still be alive had he not been driving to Eric's baseball game that evening. Eric is often anxious and has difficulty sleeping. He fears something will happen to his mother and sister and has anxiety anytime they travel in the car. His emotional troubles have extended into problems in school, as he has difficulty concentrating due to traumatic reminders and memories of the accident and the loss of his father. Since the death, Eric has quit the baseball team and rarely spends time with his teammates. Consequently, his friendships have been strained, as the majority of his friends are his teammates. Baseball, his former outlet for enjoyment and stress relief, has now become an unpleasant reminder of the death.

From the Center for Traumatic Stress in Children and Adolescents:

Children with traumatic grief get "stuck" on the traumatic way their loved one died, such that whenever they try to remember happy times with their loved one, their memories veer off into thoughts about the terrible way the person died. Since these thoughts are not happy or comforting but instead frightening and upsetting, these children usually avoid thinking about the person who died. Alternatively, they cannot stop thinking about the person who died, but instead of these thoughts becoming comforting and healing, the thoughts continue to be hurtful, upsetting and even terrifying. As a result of being "stuck" on the traumatic aspects of their loved one's death, these children are not able to remember their loved ones in comforting, healing ways. Children with traumatic grief may develop sleep problems, difficulties with school, irritability, ongoing anger, sadness, or avoidance of friends, family and memories of the loved one. If these difficulties do not get better over time, they may interfere with important things that children need to do like schoolwork, extracurricular activities, making and keeping friends, and spending time with family members. These children may also develop a psychiatric condition related to childhood traumatic grief called Posttraumatic Stress Disorder, which can be associated with more serious problems if left untreated.³¹

³¹(The Center for Traumatic Stress in Children and Adolescents, as cited in Kerr, 2008, p. 153-155)

Grief in the Classroom: What Educators Can Do

Although mental health professionals are responsible for identifying and treating CTG, teachers can be influential in helping children who are grieving. Whether the child is experiencing CTG or not, there are many strategies teachers can use to help children who have experienced a death. Teachers are especially important in offering social support outside of the family. After a trauma, an absence of support from the family and other support systems has been shown to be a risk factor for psychopathological symptoms.³² Parents may be suffering from their own grief and may not be able to offer complete emotional availability to their children.³³ Therefore, teachers could be a valuable source of support. Although teachers do not have access to all the informative factors needed to identify CTG, (an assessment that includes evaluating the child's and family's past, the child's perception of the death, symptoms of PTSD, and the affects of PTSD symptoms on the child's grieving)³⁴ teachers can monitor students' behavior and identify steps needed to find outside support if they feel the child is having difficulty grieving or coping with the loss.

What Educators Can Do³⁵

- Provide a safe and supportive classroom environment for all students.
- Be aware of the child's individual development and provide appropriate assistance. Recognize that each child will perceive and handle a death differently and provide individualized support to each child. Be prepared to meet the needs of all children—regardless of age, gender, culture, religion, ethnicity or ability.
- Have strategies in place to help a child who may be grieving:
 - If upset, allow the child to leave the classroom.
 - Pair the student with a classmate so they have a consistent peer support.
 - Ask the student how they are doing during a time that does not bring classmates' attention to the child.
- When discussing bereavement, keep the focus on grief and loss rather than death.
- Form relationships with community agencies so supports are established in times of crisis.
- Encourage open communication with families. Communicate in order to find out how to be supportive and how and if the family would like the school to participate in rituals.
- Participate in trainings on grief and loss.

³² (Pine & Cohen, 2002, as cited in Cohen & Mannarino, 2004)

³³ (Cohen & Mannarino, 2004)

³⁴ (Cohen & Mannarino, 2004)

³⁵ (Rowling, 2003)

- *Promote mental health as a proactive and preventative strategy.*
- *Be open to communicating with the child, answering their questions, and understanding behaviors and reactions that may stem from grief.*
- *Refer to the chart on page 7 of this booklet on how teachers can support children in regards to different levels of schooling*



Resources

- The National Child Traumatic Stress Network:

www.nctsn.org

For specific information on traumatic grief:

http://www.nctsn.org/nccts/nav.do?pid=typ_tg

Two specific videos are highlighted:

*“The introductory video, *It’s Okay to Remember* (Child Traumatic Grief Committee, 2005b), was developed as a basic informational, educational, and stand-alone tool for the general public. The training video *The Courage to Remember* (Child Traumatic Grief Committee, 2005a) along with the print training curriculum guide are intended for practitioners who wish to enhance skills in providing services to traumatically bereaved children.”³⁶*

- The American Academy of Child and Adolescent Psychiatry offers resources in English as well as other languages:³⁷

http://www.aacap.org/cs/root/facts_for_families/children_and_grief (English)

http://www.aacap.org/cs/root/facts_for_families/facts_for_families (Facts for Families page; after choosing a language preference, one can navigate to children and grief)

- The Center for Traumatic Stress in Children and Adolescents:

<http://www.pittsburghchildtrauma.org/>

³⁶ (Pynoos et al., 2008, p. 390)

³⁷ (Kerr, 2008)

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