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NATIONAL ORGANIZATION FOR VICTIM ASSISTANCE®

# Working with Grieving Children After Violent Death:

## A Guidebook for Crime Victim Assistance Professionals

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**OVC**

Advocating for the Fair  
Treatment of Crime Victims

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## About the Organizations

### National Organization for Victim Assistance

The National Organization for Victim Assistance is a private, non-profit membership organization of victim and witness assistance practitioners, victim service programs, criminal justice professionals, researchers, former victims, health and mental health professionals, clergy members, and others committed to the recognition and implementation of victim rights. NOVA's activities are guided by four purposes: national advocacy, providing direct crisis services to victims, serving as an educational resource to victim assistance and allied professionals, and promoting better communication among its membership. For information about NOVA or other NOVA publications, contact:

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## **Working with Grieving Children After Violent Death:**

### **A Guidebook for Crime Victim Assistance Professionals**

*Jim was twelve years old and Terry was nine when their single-parent mother was shot and killed on the way home from work.*

*Shelley was eight years old and Bobby was two when their mother was shot and killed by their father before he killed himself.*

*Vanessa was fourteen when she was stabbed and killed by an older teenage boy in her school yard. Her friends were witnesses.*

*Kenny was six when his older brother Mason was killed along with three other kids in a drunk driving crash.*

*Time stopped for them all when violent death tore their young lives apart in a pain that will live forever.*

# I. Introduction

Jim, Terry, Shelley, Bobby, Vanessa and Kenny are representative of the hundreds of thousands of children who experience traumatic death each year. It is estimated that as many as twenty percent of today's children will have survived the death of a parent by the end of high school; eleven children a day are killed by guns in accidents, suicides, and murders; an average of four students a year die in a school system of 6,000 students; and that a child by the age of 14 will have witnessed 18,000 deaths—mostly violent murders on television. (Linda Goldman, *Life and Loss: A Guide to Grieving Children*, 1994) These figures do not begin to account for the additional deaths of friends or loved ones caused by drunk driving crashes or violent deaths witnessed in the streets of our cities.

Victim assistance professionals deal with crime, violence and trauma routinely as part of their everyday work. Many respond to crisis calls at the scenes of crime and most have caseloads in the criminal justice system. Training and education is critical in order to provide them with the knowledge and skills they need in order to provide quality service. It is also important for their own mental health as they confront the pain and anguish caused by crime.

Perhaps some of the most difficult cases for victim assistance professionals are those in which they provide assistance to children and adolescents. Crime seems particularly cruel when it is perpetrated on the young. The devastation left in its wake after the murder of a friend, family member or acquaintance of children can last a lifetime. Victim assistance professionals are not expected to provide therapy or long-term grief counseling for children who have survived traumatic death, but some help with death notification and many provide guidance and comfort as children talk about their reactions, begin the mourning process and develop ways of remembering their loved ones.

This guidebook is *not* a training manual.

- It is designed to serve as a *quick reference* for victim assistance professionals in their work with children, parents, school teachers and counselors, clergy members and others as they address the needs of grieving children.
- It summarizes the state of knowledge on *grief and trauma reactions of children*, suggests methods and activities for intervention and supportive counseling, and presents sample age-specific support group curricula.
- It outlines a *sample protocol* for victim assistance programs and others who work with children to use to establish guidelines for responding directly to grieving children.
- It includes a *bibliography* of further resources for victim assistance professionals and their allies as well as a bibliography of useful readings for children.

*The term “caregiver” is used throughout this guidebook to denote a person providing support to the child, because while victim assistance professionals are its primary audience, its message is designed for those who work in cooperation with them as well.*

## II. Background

*“Nobody is born with a genetic diathesis to psychic trauma. If you scare a child badly enough, he will be traumatized — plain and simple. But if you combine the trauma with a death or a new disability, then you will see depression, paranormal thinking, and/or character change — count on it.” — Lenore Terr*

Death is a difficult concept to understand and accept for adults and children alike. The end of life can be conceptualized in many ways, but the permanency of loss and the dying process cannot be explained until it is experienced. When a natural death occurs at the end of a long life, it may be expected and preparations made to adjust to the ultimate loss. Grief over the deceased may be painful and prolonged, but there has been time before death to consider its consequences for those who continue to live. When death is sudden and complicated by trauma, there is no time to adapt to the shock and pain of separation and finality. Sorrow may be a fundamental experience but the experience of extraordinary crisis may be equally overwhelming. The inability to make sense out of the death, to understand why it happened, and to comprehend how it has interrupted life can frustrate, anger and drive survivors to despair.

Children are particularly susceptible to the impact of traumatic death for several reasons. Children do not deny trauma; rather, they tend to record its full horror and impact. Trauma is terrorizing to them, rendering them helpless and unprotected. Death is unfamiliar. Their coping skills are often underdeveloped. They are still in the process of developing their own personalities and identities. They often do not have spiritual resources on which to rely.

Adult caregivers are critical in helping children through the trauma of violent death as well as the grieving process. Yet, many adults are unprepared for violent death themselves. Adult caregivers must consider their own reactions to death and trauma carefully before working with grieving children.

After caregivers consider their own reactions, they should learn as much as they can about the reactions of children, and explore resources and techniques to provide assistance to the grieving child.



### III. Preparation of the Caregiver

This section is not designed as a primer on grief and trauma reactions. It is expected that caregivers who are working with children will have basic education and training on grief and trauma issues. Rather, the section is included in this guidebook to assist caregivers in clarifying their own responses to grief and trauma.

#### A. Grief and Loss

Most adults have lived through the death of someone they know. They realize the shock of recognition that they will never see that person again and often have endured disturbing thoughts concerning the dying process. But many consciously put aside their sorrow in order to “go on” with life and to maintain everyday functioning. As a result, many adults carry with them the pain of unresolved grief. Such grief may erupt unexpectedly when an individual is exposed to situations that remind him or her of the death and the loss. Even when individuals have made an effort to confront past deaths and actively mourn their losses, potent memories may be resurrected when they encounter other deaths. It is both unrealistic and undesirable to try to extinguish such memories and their consequences. The wisdom of Deitrich Bonhoeffer is compelling on this point—

*“Nothing can make up for the absence of someone whom we love, and it would be wrong to try to find a substitute; we must simply hold out and see it through. That sounds very hard at first, but at the same time it is a great consolation, for the gap, as long as it remains unfilled, preserves the bonds between us. It is nonsense to say that God fill the gap; he does not fill it, but on the contrary, he keeps it empty and so helps us to keep alive our former communion with each other, even at the cost of pain.”*

Caregivers should take the time and effort to explore their own losses and the consequent grief in order to be able to control possible intrusive recollections which may interfere with their ability to be helpful to those they are trying to help in the present. To facilitate this exploration, the following process may be useful. The process can be used with caregivers in training as a group or by individual caregivers in private. Caregivers should try to put their thoughts or memories into verbal or written responses because it helps give concrete form to their emotions and reactions.

1. *Remember* at least one of the most significant deaths in your lifetime. [It is useful for caregivers to identify all significant deaths they have survived, if they remember more than one.] With each death, try to:

a. *Remember* where you were when you were notified of the death. Describe the place.

b. *Remember* how you were told or how you learned of the death. Describe the words you read or heard.

c. *Remember* reactions you had when you learned of the death. Describe those reactions.

d. *Remember* what you and others did in the first twenty-four hours after you learned of the death. Try to develop a chronology of what happened. Describe any particularly powerful memories and the impact of those events.

e. *Remember* what you did from the time of notification until the funeral, burial or memorial service. Try to develop a chronology of what happened. Describe any particularly powerful memories and the impact of those events.

f. *Remember* what has happened since the death and how that death affects your life today.

2. As you think or talk about your memories, ask yourself how those memories relate to what is known as a common pattern of grief.

a. *Denial*— Did you or others find the death hard to believe or accept?

b. *Confusion and Protest*— Did you or others become angry about the death or try to argue about its reality? Did you or others become angry with what happened after the death? Did you or others feel anger at yourselves because of how or why the person died, or because of guilt or relief at the person's death?

c. *Despair*— Was there a time when you or others were so sad that life didn't seem worth living?

d. *Detachment*— Was it difficult to find energy to do things or to become emotionally involved with other people or current events in your life?

e. *Integration or Resolution*— Do you remember a time when you realized that you could acknowledge what happened and knew that you were going to go on with life? Did you make changes in your attitudes, values, goals, behaviors, or lifestyle because of the person's death?

3. *Describe* ways you mourned for the deceased.

4. *Identify* thoughts, reactions, or feelings about the death that bother you now.

a. Are there regrets that you have about how the person died?

b. Are there regrets that you have about your relationship with the person at the time of death?

c. Did the death help to affirm or raise questions about beliefs you had about life and death before the person died?

5. *Describe* how the death of that person affects you today.

a. Possible *negative* effects.

- Anxiety about your own death or the deaths of loved ones.
- Fear for or over-protectiveness of your children.
- Nightmares, thoughts or daydreams of death.
- A sense that you or others will die soon.
- Avoidance of death-related thoughts, images or rituals.
- Withdrawal from relationships with others.

b. Possible *positive* effects.

- A renewed sense of the meaning of life and its continuity.
- Increased enjoyment of everyday life and experience.
- A sense of connection with the deceased person.
- Comforting memories.
- Increased desire to become involved with others.

6. Describe your understanding of death—your beliefs, concerns or fears.

7. Describe how you have planned for your own death.

8. Describe how your experience of death affects the way you live your everyday life today.

## **B. Trauma and Violence**

*“Traumatic events are extraordinary, not because they occur rarely, but rather because they overwhelm the ordinary human adaptations to life.”*

—Judith Herman

While most adults have experienced death in their lifetimes, many but not all adults have experienced a violent, traumatic event or series of events. Violent trauma ruptures an individual’s psychic equilibrium and social environment. It fractures everyday existence and leaves the individual in a state of chaos and fear. It requires individuals to go beyond their normal resources to regain a sense of order and equilibrium and to restore value and meaning to their lives.

Caregivers who have experienced trauma may have sought help or found internal resources that gave them the strength to reconstruct their senses of safety, autonomy, trust, self-esteem, and ability to establish relationships with others. Caregivers who have not experienced trauma may yet have their lives tested. In either case, before caregivers begin to help trauma survivors, it is important to review their understanding of the impact of trauma and the processes of recovery. For those caregivers who have experienced trauma, it is also critical to identify vestiges of the traumatic experience that may interfere with their ability to provide care or non-judgmental support to victims.

The following exercise can be helpful in understanding and identifying trauma issues which may concern the caregiver. As indicated above, the exercise can be used with caregivers in training as a group or by individual caregivers in private. Caregivers should try to put their thoughts or memories into verbal or written responses because it helps give concrete form to their emotions and reactions.

1. *Remember* a violent event that was traumatic for you or someone you loved. As you remember, try to:

a. *Describe* where you were, who you were with, and what you remember seeing, hearing, smelling, touching, or doing in your immediate reaction to the trauma.

b. *Describe* what happened immediately following the traumatic event and your reactions and thoughts.

c. *Develop* a chronology of what happened and describe any particularly powerful memories and the impact of those events.

d. *Describe* what has happened since the trauma and how those events have affected your life today.

2. As you think or talk about your memories, *ask* yourself how those memories relate to what is known as a common pattern of trauma reactions.

a. *Shock and disbelief*— Did you immediately understand what had happened? Did your sense of time change; e.g., did things seem to happen slowly or very quickly?

b. *Anger*— Were you angry at what happened, who did it, people who came to help you, or others?

c. *Fear*— Were you frightened? Did you fear for your life or the lives of others? Was there a particular point in time when you were most fearful? Was there a particular point in time when you believed you were safe again?

d. *Confusion or frustration*— Did you become confused about what to do? Was there a period of time that went by when you didn't know what had happened, how it had happened or why it had happened?

e. *Guilt or self-blame*— Was there ever a time when you thought that something you had done or hadn't done had contributed to the traumatic event? Did you ever worry that you had survived or been less injured than someone else?

f. *Shame*— Did you ever think that somehow the event made you a bad or undesirable person? Did you ever think that someone else would think less of you for being traumatized?

g. *Grief*— Were you very sad about what happened? Were you unhappy and sorrowful because of what you lost?

3. *Describe* ways that helped you get through everyday life.

4. *Describe* things you did or thoughts you had that helped you to begin to help others again.

5. *Identify* thoughts, reactions, or feelings about the trauma that bother you now.

a. Are there situations that you avoid or about which you have anxiety because they remind you of the trauma?

b. Are there people whom you avoid or about whom you have anxiety because they remind you of the trauma?

c. Are there times when the memories of the event are particularly difficult to live with?

6. *Describe* how the trauma affects you today.

7. *Describe* how the trauma affects your view of the future.

## **C. Alphabet of Positive Caregiver Attributes for Working With Grieving Children**

The following list of caregiver attributes and skills is presented alphabetically to help caregivers remember critical elements of supportive counseling for children.

- **A - Advocacy** - The willingness to advocate on behalf of the best interest of the children throughout their trauma and grief.
- **B - Belief** - The willingness to believe what children say and think.
- **C - Communication** - The skills to communicate with children through expressive and verbal techniques in language appropriate to their ages.
- **D - Desire** - The desire to learn from the children and their experiences and perceptions.

- **E - Empathy -** The ability to recognize and sympathize with feelings of children.
- **F - Feedback -** The ability respond to children with validating reassurance.
- **G - Guidance -** The ability to guide children as they clarify their thoughts and concerns.
- **H - Honesty -** The commitment to answer the questions of children as honestly and factually as possible and never to make promises that can't be kept.
- **I - Imagination -** The ability to join in the fantasy and play of children.
- **J - Judgment -** The ability to make good common sense decisions and to judiciously solve problems that children may face.
- **K - Knowledge -** The determination to seek new knowledge and information about childhood trauma and grief.
- **L - Laughter -** The capacity to express a sense of humor and join in the laughter of children.
- **M - Memory -** The ability to remember one's own childhood, traumas, and griefs in order to better understand the reactions of children.
- **N - Non-judgmental -** The ability to put biases, prejudices, and personal values aside in order to support children and their families.
- **O - Organization -** The ability to provide children with organized routines and structures to help them stabilize their world.
- **P - Patience -** The capacity to be patient as children tend to grieve sporadically.
- **Q - Quiet -** The willingness to use silence as a method of communication and to listen quietly and attentively.
- **R - Reliable -** The commitment to being on time and true to your word to help children rebuild their ability to trust.
- **S - Secure -** To have self-esteem and a personal sense of security in order to convey safety and security to children.
- **T - Thoughtful -** The willingness to think through new situations and problems with a child-centered philosophy.

- **U - Understanding -** The capacity to look at things and understand them both in a broad context as well as in the narrow perspective of the moment.
- **V - Values -** A clear knowledge of one's own purpose in life and the consequent values behind one's work.
- **W - Watchful-** The ability to be attentive to the needs and reactions of children.
- **X - XXX -** The ability to know when children need physical comfort (hugs and kisses) and being comfortable with reaching out to children physically (and knowing proper boundaries in providing physical comfort).
- **Y - Youthful-** The maintenance of youthful attitudes and behaviors in response to suggestions and thoughts of children.
- **Z - Zest-** **A capacity for experiencing the zest of life with its joys and sorrows and most of all its hope!**

## IV. The Grieving Child

Trauma overwhelms a person's sense of control, connection and meaning in life. It causes an individual to experience fear, helplessness and isolation. For this reason, any death may be traumatic for a child. The death of an elderly grandfather who was the source of nurturing, caregiving, and protection may be a traumatic event and source of grief for a grandchild while it may be an expected moment of sorrow in the child's parent's life. Violent death is experienced as a *double* trauma. There is the trauma of death and there is the violent trauma that caused the death.

This section explores the typical developmental stages of children and their reactions to trauma, and concludes with a look at how trauma reactions are related to grief reactions.

### A. Development Stages Affect the Trauma and Grief Reactions of Children

Reactions tend to mirror growth stages and focus on the level and nature of the primary needs at the time of the trauma as well as the ability to absorb information and remember. Children need to process their traumas and grief through each developmental stage. If the trauma and grief inhibit, delay, or cause a child to "skip" a developmental stage, there will be a need to go back and revisit that stage in light of the traumatic grief.

Children also process their grief more slowly than adults. This may be due to several aspects relating to their reactions to death. Children do not fully grasp the permanence of death. Children are unable to sustain conscious sadness for long periods of time. Children do not usually deny the trauma of death but they may deny the reality of the death. Further, they do not have an alternative reality that assures them of the possibility of finding new relationships to rely upon.

Children may become "stuck" in one phase of the mourning process for months or years at a time.

*Denial* of death's permanence may result in dreams, daydreams and nightmares of the deceased, waiting for the deceased's return, visions of reunification with the deceased, belief in reincarnations and paranormal behaviors (events that cannot be explained rationally or logically).

*Anger and protest* at death is often displaced on parents, peers, or adults in authority. Parents who have "failed to protect" children or are perceived to have been negligent in their duties may be the targets for rage. They may also become the focus of anger when they fail to exhibit open grief because children sometimes think that such failure means that the parents didn't care about the death. Children often manifest their anger at school or in the neighborhood because parents seem too busy to take notice.

*Despair* may be manifested through extraordinary self-blame and guilt by children over the death. Something they did caused someone else to die — even if the supposed cause is rooted in everyday behaviors or childhood thoughts. Despair can also be a consequence of emotional numbing such that the child sees no reason to live when life has no joy or meaning.



Eventual *resolution* of grief in children is often impeded because they do not know how to think about or plan for a future. They do not know how to develop new relationships and establish connections with others.

## **B. Childhood Developmental Stages**

### **1. Infants and Toddlers (Ages 0-2)**

- Infants have limited verbal capacity to express their needs or emotions. However, they exhibit significant physical distress if daily needs are not met. They also retain physical memories of traumatic events even though they may never be able to articulate these memories or retrieve clear images of the events. A physical memory (or “imprint”) occurs when the body recalls sensory perceptions of traumatic events. Much later, unexplained physical pains can occur that are related to these physical memories.

- Infants initially experience their mothers as extensions of themselves with no clear distinction between self and other. As they grow older, they may become more aware of differentiation but they still see their primary caretakers as existing solely to meet their needs.

- Infants lack a sense of object permanence until around one year of age. When people leave the immediate presence of infants, infants fear that they are gone forever. As infants grow to two years old they begin to explore their own independence and autonomy. However, they need constant reassurance that their adult caregivers will be available when needed.

- Death of a parent is experienced as a critical loss and leaves an infant fearful and anxious. It may also be experienced as absence — the death is defined not by the existence of a parent who is now gone but by the nonexistence of a parent who should be there. Deaths of significant others may also be experienced as loss if the child retains a sensory or emotional memory of that person’s presence. If the infant or toddler is exposed to the traumatic event that caused death, the exposure may leave the child numb and muted. It may impede the initial growth of autonomy and independent functioning.

- The child will have little conscious understanding of the loss or trauma, but as the child grows older may put words to the event as they seek to understand their impressions.

### **2. Pre-School (Ages 2 to 6)**

- Children usually become verbal between two and four. Preschool children often talk well. They can tell about what they eat and toys they play with, but do not understand less tangible concepts. Death may be thought of as a different state but not permanent. Children often believe in and experience visitations from the dead person through ghosts, spirits or reincarnations.

- They may not be able to discuss events or incidents in terms of time and space, because their understanding of those concepts are related only to concrete or personal concerns. If children are asked when something happened — in terms of a month, day, or year, they may not be able

to answer. But if they are asked whether an event happened before or after their birthdays, specific holidays, the beginning of school or other significant events, they are likely to provide a reasonable response.

- The focus for children of this age is on their immediate life. Nonessential details, for them, are often forgotten or perhaps integrated with their own perception of important events.

- Children at this age are actively engaged in discovering a larger world than the home or the immediate family. This role of discoverer is needed to achieve greater independence in physical abilities and relationships, but it is quite challenging. Children must learn that they can trust their environment and their relationships to stay somewhat stable if they are going to venture into new worlds. Trauma and loss interfere with the development of an understanding of trust and security.

- The most common communication device for the preschool child is play. Playing remains a key form of communication for older children as well. It is a nonthreatening language which can mask direct confrontation with nonthreatening issues. But while playing is an important mode of communication for all children, it is extraordinarily important in pre-schoolers. Their verbal ability can be good, but their security remains more intact through “acting-out” than through language.

- Fantasy is an integral part of play. It serves a useful purpose in providing children with an outlet for their fears, hopes and dreams. Fantasy involves magical thinking and vivid imaginings but such thoughts are grounded in observed reality. Lack of conceptual development means that young children can't extrapolate well from concrete to abstract thought. Hence, many of their fantasies involve mimicry, anthropomorphisms, and variations on perceived reality.

- They may also believe that what they think about something can cause it to happen. Such egocentric thoughts may cause young children to believe that something they did or said caused the death of a love one. Children may use magical thinking to construct alternative realities when the world around them is painful. Most can distinguish concrete fact from fantasy but may have more difficulty understanding real versus imaginary causes for event. In today's world, sometimes they may become confused with what is “real” on television and what is real life.

### **3. School-Age Children (Ages 6-10)**

- School-age is marked by rapid cognitive and competency development. Children tend to be able to formulate and articulate concepts, as well as understand multidimensional ideas, even though they may not be able to independently identify such dimensions. For example, they usually have been exposed to death and have thoughts about it, but may still think of it as reversible. Death may be externalized in concrete fears and images of monsters, scary animals or people, or animated inanimate objects. Their thoughts also may be shaped by misperceptions and myths overheard from others or seen in the media.

- Children become less egocentric and develop an ability to see things from another person's perspective. However, this ability may increase conflicted feelings about another person's death. The death of a sibling may cause a child to fear his or her own mortality, feel bad because the sibling is gone, feel angry with parents for their preoccupation with grieving to the exclusion of the surviving child, or feel guilty about wishing the sibling dead at some time.

- School-age children relate much better to time and space. In part this occurs because they begin to develop relationships with other people and things outside of their own home. The fact that they must be at school at certain times and days gives them a more precise frame of reference. Weekdays now become distinguishable from weekends.

- Children become increasingly able to sustain emotional affect but may find it difficult to tolerate the pain of grief for any length of time. Adults may view children's natural need to sporadically distance themselves from sadness as an absence of grief. Children rarely forget their sorrow but visit and revisit in short, intense periods of time punctuated by a determination to distract themselves with other things.

- As children grow older they often become more conscious of right and wrong. Things seem to be black or white. There is little room in their thoughts for the grays. If they think that they did something wrong, guilt may be overwhelming. If they think that others have done something wrong, anger and blame characterize their attitudes toward those persons.

- Play is an important part of communication for school-age children; however, they need to be able to explain the purpose of their play as they become more verbal. School-age children often create "savior" endings when they retell stories of trauma in an effort to reestablish a sense of safety and mastery over an event. As they grow older, they may become more interested in games or play that is governed by rules and conventions. This is a part of their developmental efforts to internalize control and become increasingly independent from adults.

#### **4. Early Adolescence (10-13 for girls, 12-15 for boys)**

- This stage of development may well be one of the most awkward and difficult for most children. The abruptness of physical change along with the related emotional upheavals that accompany increasing needs for independence and greater feelings of insecurity are major sources of stress to children. More children in this age group talk about stress-related symptoms: nausea, headaches, sleep disturbances, frequent crying spells, and so on.

- Preadolescence and adolescence brings with it a solid concept of death. But sudden death may undermine an emerging sense of autonomy at the same time as it may propel children into early adulthood. Death is not equated with imaginary monsters or incarnations but rather is perceived as a biological process. Fears about death may focus on the dying process and the consequences of the death for the living.

- The emotional roller-coaster that a child deals with at this age is manifested in wide mood swings. Their own identity is not clearly established and their self-esteem is shaky. Bravado and aggressive behaviors may be used to disguise their vulnerabilities.

- In early adolescence, children become more preoccupied with peer relationships and begin to distrust adult interpretations of the world.

- There is a tendency to invest emotional intensity in all phases of their lives. Events are often perceived symbolically. Increased abilities to understand abstractions may result in introspective searches for the meaning of life and death.

- Ideals and commitments are viewed as a sacred trust. Betrayal of promises, vows, or relationships is rarely tolerated even when being faithful to them may be harmful to the children who hold them.

- Words mean a great deal to the preadolescent and the adolescent child. Stories, plays, poetry, and music lyrics often serve as a basis for expression — both those written by others and those created by the child.

## 5. Adolescence (13-18)

- Normally, adolescence tends to increase the emotional upheaval of preadolescence. This adjustment period seems designed biologically to help us move to adulthood; however, the world is so complex that such growth still may seem to come too fast. Children often want independence but in reality are unable to work within such independence and hence may simultaneously want more guidance and structure in their lives. This may be particularly true if the child has been abused and feels out of control.

- Their behavior tends to seem inconsistent. Adolescents often love and hate the same person at the same moment. Anger may manifest itself as rage, and sorrow may become suicidal. As a corollary to their need for independence they often have a great need for privacy and hence become very secretive. Confidences may be offered sporadically and may be peppered with untruthfulness when shared with adults.

- The immediacy of death when it affects teenagers is in stark contrast to their desire to see death as a part of a far distant future. Sometimes their activities center around proving themselves more powerful than death. Involvement in risk-taking activities may be exacerbated by the loss of risk-inhibitions due to traumatization.

- They often express themselves by acting out and through experimenting with new behaviors. Violence may be used as an expression of manhood by some young males. Substance use and violation of the law may be perceived as a statement against adult standards or as admission to the adult world.

- Most adolescents are creative and energetic and want control over how those energies are channeled. They are likely to question adult authority and decision-making in which they are not active participants.

- Their creativity increasingly is manifested through the creation of their own symbols, activities and words to express themselves. Slang, fashion fads, dance fads and alternative music styles are all examples of this need for creative expression.

## **C. Children’s Reactions to Trauma at Any Development Stage are Affected by the Impact of “Parent Loss”**

### **1. Actual Loss of Parent(s)**

A violent, traumatic event may cause the death of a parent. Children then must cope with the shock of the event but also with the sudden loss of one of the most important people in the world to them. Parents are normally the source of nurturing, care, and stability. They are the focus of a child’s sense of security and protect their children from harm. If a parent suddenly dies, the child is left feeling scared and vulnerable. Infants and toddlers may only remember fleeting images or feelings associated with the parent, but they may experience the absence of a father or mother as a loss through adulthood. Some older children may regress to infant behaviors in an effort to recapture the time when they felt safe. However, many older children seem to accelerate their maturation process, taking on adult roles and behaviors.

Sometimes traumatic events separate parents from their children or cause them to abandon a child. If children can’t understand why or how the separation occurred, the loss of a parent under such circumstances harms children’s abilities to trust others, and also their self-esteem.

If a parent is the cause of the trauma, through accidental or criminal behavior, the loss of the parent may be complicated by feelings of alienation, betrayal, and even hate. Rage may become a dominant reaction toward the parent as well as others that the child views as conspirators with the parent. Children may blame themselves for their parent’s actions and carry a burden of guilt into adulthood.

### **2. Perceived Loss of Parent(s)**

Children tend to look to significant adult figures in their lives for reassurance about their own reactions and to learn how to grieve. Parents and teachers are natural models of behavior. However, often parents and other significant adults in a child’s life are unavailable to the child after a traumatic event because parents are so involved with other concerns. They may also be perceived to be unavailable because they don’t understand children’s reactions, avoid or deny that such reactions are often intense and complex, or simply don’t observe the reactions.

Parent loss may be experienced when parents become consumed with their own losses or reactions to a trauma. It is often difficult to cope with the impact of violence and to offer comfort to children at the same time. Some parents may even fall into behaviors in which they assume a childlike role while their children take on adult roles in their relationships.

### **3. Actual or Perceived Parent Loss Can be More Traumatic Than the Trauma Event Itself**

Parent loss can affect how children later cope with adulthood. Since children tend to model their own behaviors on parent behaviors, parent loss may have an impact on a child’s own

parenting skills. It may have an impact on how the child deals with other adversities and how children cope with trauma when they are adults.

## **D. Child and Adult Grief Reactions are Exacerbated by Violent Traumatic Loss**

### **1. Intensity of Emotion Increases**

Since most grief reactions are similar to trauma reactions, trauma and grief have a multiplier effect on emotional responses. Anger at the traumatic event or the perpetrators of the event are made more complex by grieving protest over loss. Fear or terror about the vulnerability of one's own life is complicated by the real knowledge of the death of others. Confusion about what happened, how it happened, or why it happened, mirrors confusion about the meaning of life and the meaning of death. There is also grief over the trauma, compounded by the grief over the consequent death.

### **2. Duration of Grief May be Extended for Years**

Grieving reactions following expected death may last for a year or two. Grief spasms — when people are reminded of the death of someone whom they loved — often are felt for a lifetime. Grieving reactions following an unexpected death may be unresolved for five or ten years. The trauma of the loss must be dealt with before normal grieving may begin. This means an individual endures the crisis reaction of shock, disbelief, anger, fear, frustration, shame, guilt or grief in response to the trauma and may suffer long-term stress reactions due to the impact of the trauma. Often, in the process of coping with the trauma, people have little ability to face the finality and impact of death. Their abilities may be impeded because trauma issues are forced to be reexperienced repeatedly because of involvement in the criminal justice system, civil litigation, or reflections by the media. Grief may also be confusing because of the extent of losses. Someone loved has died, but the traumatic event may also have caused the survivor to suffer a loss of faith or trust in the world, a loss of innocence or belief in certain values, a loss of their own sense of identity or purpose, a loss of meaning of life. Each of these losses need to be mourned and marked by conscious remembrance of what existed and now is gone. This grieving process is separate and different from the grief that will be experienced as one realizes the full impact of the loss of a loved one.

## **E. Trauma and Grief Patterns of Children are Similar to Adults But Are Manifested Differently**

### **1. Length of Grieving, Along With Acts of Mourning and Remembrance, Extend Throughout the Developmental Stages**

As children mature, they should reprocess the impact of the trauma and loss in the context of their development. The loss of a father for a young toddler may be grieved over in terms of

the loss of a loving caretaker. The loss of that father for the school-age child must be grieved over in terms of the absence of a teacher, an authority figure, as well as how the father would have been perceived by new friends and peers. The loss of the father for the preadolescent may take on new meaning in the absence of a model for sex roles or in the construction of the child's growing sense of identity. The loss of the father for the adolescent can affect his or her understanding of stability and the growth of independence. A young adult may grieve over the loss of the father in terms of a loving companion and source of friendship. The meaning of the traumatic event may change as well through development. Memories of a sudden trauma are reprocessed in activities and attitudes.

## **2. Grieving is Interrupted by Current Needs or Events**

Children must take time out from grieving to meet new challenges in life, cope with ongoing changes, establish new relationships, participate in school and to play.

## **3. Children's Communication Styles Differ from the Communication Styles of Adults**

Children engage in activities to deal with trauma and grief. With young children, these activities involve spontaneous play, usually with objects or other children who are readily available. Older children and adolescents also engage in activities to express their reactions. These activities may include sports, drama, dance or song. Trauma or grief-related activities may be sporadic and repetitive.

## **4. Some Adults Have Spiritual Beliefs That Help Them to Cope With Trauma and Grief**

Children have not fully developed such beliefs, and trauma or grief intrude upon their conceptions of life and death.

# **F. Traumatic Grief Reactions**

## **1. Loss and Death**

The experiences and concepts of loss and death are closely intertwined. Death is often expressed as the loss of life. Someone who has died has been "lost" to his or her survivors. The end of relationships or certain times in life are often talked about through death imagery: divorce may be experienced as the death of a marriage; memories of the past may be thought of as old, faded or dead. Grief reactions are normal when anything has been lost. When someone or something is gone forever, the grief may seem overpowering. The concept of death for children may be more difficult to understand when there is no tangible or physical evidence of finality. It is also difficult for children to comprehend or accept the permanence of death.

## 2. Denial

Adults often react to notification of traumatic death with denial. They can't believe that someone they love is dead or that they died due to violence or trauma. Denial occurs because the death does not fit into the adult's perspective of normal everyday life. Trauma may not be extraordinary — violence and death happen routinely in today's world — but traumatic death in a particular individual's life is extraordinary to that person.

Children lack the ability to deny trauma and death because they don't have a fully formed perspective of normal life. They live in a temporal world that is the present. What occurs today is reality even if it is an awful reality. If they have had little experience with loss or death, they have little experience in dealing with the emotions that accompany loss or death. They don't deny it, but they may be unable to sustain the sadness or the fears that they face.

Fantasy may be used to cope with those reactions and to escape from their intensity. Imaginary or magical thinking is a key source of emotional and mental processing. Children tend to replay the trauma or death through daydreams as well as nightdreams. They may not be as likely to experience intrusive thoughts or flashbacks about the event as adults. Rather, they let their minds wander into thoughts of the events and imagine ways to restore the past or to try to recreate relationships that might now exist but for the event. Sometimes fantasies are scarier than reality. Images of a loved one buried alive in a coffin, confusion over the state of sleep with death, concern over where the loved one is now are examples of sources of scary fantasies. On the other hand, younger children may create imaginary playmates or substitute parent figures in their dreams to help cope with their loneliness. Older children may idealize memories of the person who has died. Often dreams and fantasies focus on possible reunions. Some children may experience "visitations" by ghosts or spirits of the dead. Others may develop a belief in reincarnation of the deceased. Sometimes fantasy is used to explore alternative roles that they might have played in responding to the trauma or in preventing a death. Fantasy may also be used to imagine different endings to the traumatic event that could have happened and would have had more positive consequences.

## 3. Losses Caused by Death are Concretely Identified in a Child's Life; Explanations About Death and Loss are Often Interpreted Literally

Someone has died. If a child sees the person who is dead, they notice the absence of activity. However, the difference between life and death may not be otherwise obvious. Their concern about the physical aspect of death may be manifested through questions about how someone eats, breathes, or goes to the bathroom when s/he is dead. Since they don't comprehend death's permanence, they may worry about what will happen to the person when they live again. Caregivers need to be alert to behaviors or casual comments that might indicate children have unspoken questions. Simple, straightforward answers or acknowledgments that the caregiver has similar questions is helpful to children.

Because children's perspectives are tied to concrete, factual observations, it is particularly important to involve them in activities that acknowledge the mourning process and provide them with



rituals and symbols that help to memorialize what has happened. Children sometimes think that adults don't care what happened to the deceased because adults do not involve the children in funeral arrangements or memorials and may be uncomfortable with demonstrating their own grief in front of children. Children often resent what they perceive as attempts to replace loved ones or to forget them. When the deceased's clothes or property are removed quickly, children may see that as a betrayal of the deceased.

As children become more aware of the fact that the deceased will not return to their life, they also become more aware of the consequences of the death. They miss the behavior of the deceased—habits, routines, activities that they had learned to expect in their lives. They may miss physical reminders of the deceased, particularly if adults have removed clothes, personal property, or photographs from the child's home or school. They also miss the deceased when they are not a part of their life. If a child's father has died, dinner time may be particularly traumatic because the father doesn't sit in his usual place. Children may long for opportunities to discuss ongoing life events with a person who has died but who served as an advisor or counselor for children during their life.

Loss may also be marked by increased expectations in a child's life, such as role changes or the need to become more mature. Sometimes these expectations are driven by children's own interpretation of the death and their need to act or behave differently in order to become safer or to substitute their own life for the one that has been lost. Sometimes the expectations are defined by family or social connections. A grieving mother may turn to her son after the death of her husband and want him to assume the role of the "man in the family."

## **4. Trauma Reactions are Related to Grief Reactions**

Traumatic death compounds grief but reactions to the trauma often take precedence over grief. There is shock and disbelief about the nature of the traumatic event. Emotional reactions such as anger, fear, frustration, guilt, shame and grief over the traumatic event prolong efforts to begin life again. Grief may be postponed over and over again, but it is also a part of the traumatic reaction. While there are common elements of grief—just as there are common elements of trauma reactions—every child is different. Some reactions may be illustrated in the following.

### **a. Protest or Anger Over the Loss or Death**

Anger may be directed at the person who died—*How could he do this to me? How could he leave me?* It may be directed at parents or adult caretakers who failed to protect themselves or the child. It may be addressed to God or the supernatural—*Why did he have to die and someone else is still alive?* Sometimes it is directed internally by children themselves as they worry about what they might have done to cause the death.

### **b. Sorrow and Sadness About the Loss or Death**

Children need to know that crying is a normal way to express sadness. They need to know that feeling lethargic or uninterested in things around them is also a sign of their grief. Some children misbehave or withdraw from ordinary activities. It is often important to reassure children that it is okay to laugh and play, and that it doesn't mean they didn't love the person who died.

### **c. Guilt or Self-blame**

Children often believe that their thoughts or feelings can *cause* things to happen. If they wish that someone was dead and then that person dies, they may feel their thoughts made death happen. They may feel that if they had been better people, God wouldn't have let this happen to them. They may have deep regrets and guilt over times when they were angry or behaved badly towards the deceased.

## **5. Children Face Additional Risks Which Increase the Traumatic Grief Reaction**

They may experience changes in the primary adult or adults who are responsible for their caretaking. They may be forced to relocate their home or to attend a different school because of the impact of the trauma. Sometimes they are sent away to homes of relatives or friends for a temporary time to give parents or significant adults a chance to organize their lives. Excluding children from transition activities and events adds to their sense of abandonment and isolation. Particular activities which children had enjoyed before the trauma may now cease because the person who died was the one responsible for promoting those activities or involving the children in those activities.

## **V. Interventions for Grieving Children**

### **A. Caregiver Communication**

Initial efforts at intervention should focus on communication techniques that are age-appropriate. Children should be encouraged to express themselves in play, artwork, music, dance or drama. Verbal communication through which children explain their activities should also be sought.

- Attention should be paid to helping children develop a narrative or a story of the traumatic death. Key components of such a story include placing the death in the context of time, space, understanding clearly what they observed and clarifying any particular misperceptions, and assisting children as they seek to find a meaning or purpose in what happened.
- Caregivers should remember that children need to take the lead in defining the parameters of discussion or expression. A child's questions should be answered factually and simply when possible. Caregivers should listen carefully to questions so that they don't make assumptions about what the child knows or what he wants to know. Often caregivers fall into the trap of providing too much information in response to a question.
- Behaviors should be non-judgmental with regard to the traumatic event, the traumatic grief reaction, and the child's age-related behaviors.

### **B. Goals of Assistance**

#### **1. Establish Safety and Security**

- a. Respond to and provide opportunities for children to receive positive human physical contact to reaffirm needs for sensory comfort and care.
- b. Help children get enough sleep. This may involve responding to a child's concern about the safety of his bedroom or home, ensuring that someone is readily available to provide assurance after nightmares or sleep disturbances, or providing a soothing and calming environment before bedtime.
- c. Help children develop protective plans of action if another traumatic event were to occur. This may include educating them on what they might do if something happened again and providing them opportunities to practice their trauma response.
- d. Provide them with physical symbols of nurturing, love or remembrance. Teddy bears or stuffed animals are often a source of great comfort to children of all ages. Reestablishing routines and habitual activities gives children reassurance that life has returned to a kind of order. Rituals such as prayers, a regular "memory time", or special ceremonies may also be a source of security.

## **2. Allow Children to Tell What Happened and to Talk About Death**

- a. Encourage them to tell or develop stories that help them explore intense reactions such as anger or fear.
- b. Ensure that children understand differences between life and death.
- c. Reassure them that sadness and grief are a necessary part of surviving the death of someone they loved. Help them to describe and understand reactions to trauma and reactions to the death.
- d. Talk with them about what they observed in the reactions of parents, peers, or other significant adults.

## **3. Predict What Will Happen and Prepare Children for the Future**

- a. Encourage the reestablishment of comforting routines.
- b. Educate children about trauma, death, and loss.
- c. Help them develop reasons for living.
- d. Help them take time to think about their future.
- e. Support adult caregivers in their efforts to react appropriately.
- f. Work to help children solve problems they face because of the trauma.
  - Address what can and can't be done.
  - Help mitigate other changes in their lives.
  - Address estrangement from peers.
  - Help children frame their loss in the context of all of their relationships and their life as a whole.
  - Help children focus on the future.
- g. Give concrete aid and factual information.

## C. Methods of Intervention

Much of what caregivers do when intervening is to try to help children tell the story of what happened and how they feel about it. The following methods can help children feel comfortable telling about their thoughts, emotions and concerns.

### 1. Oral Storytelling

Caregivers encourage children to tell a short story about the traumatic death, the person who died or about themselves. Caregivers can suggest the following types of introductory sentences or phrases:

- “Once upon a time there was a little girl named Mary who was very, very sad because...”;
- “A few days ago I woke up and it was bright and sunny and I was very happy, but then...”;
- “I’d like to tell you a story about my mother who was killed in an automobile crash.”

With younger children, caregivers may need to model telling a short story. It may be useful for caregivers to consider telling a story about their own life when someone they loved died. While this technique is not usually suggested for use with adults, children are often exceedingly curious about adults who have suffered traumas similar to their own.

### 2. Guided Free Play

Traumatized children will often automatically use toys to reenact their trauma and their concerns. If caregivers have a range of toys available in a special box, shelf, or a bag, children can pick and choose their favorite mode of expression. Young children will run to the toys or immediately ask what is in the bag so they can start to play as soon as possible. Caregivers can observe children begin to play without prompting while doing preparatory things such as putting out refreshments, or hanging up coats. They can join the children with neutral questions such as, “That looks interesting. What are you playing?” Toys that are often helpful story tellers are: building blocks, cars, trucks, airplanes, human figures, dolls, stuffed animals, simple puzzles of people or people’s faces.

### 3. Stimulating Discussion

For children who are articulate and verbal, discussions can have a healing effect similar to that experienced by many adults who “talk out” their concerns and reactions. Caregivers can help children begin to discuss the traumatic death by showing photographs of the deceased, showing a video story about death and trauma, reading a short story, poem or parable relating to death and trauma, or presenting a news story or media article about the event for critique.

The videotape that accompanies this guidebook is designed to stimulate discussion about children's reactions, but other videos could be used as well.

## 4. Creative Writing

School age children and adolescents often find it helpful to write about what concerns them. Outlets for creative writing include journals, letters to loved ones, prose, poetry, articles, or memory books. Caregivers can help suggest titles for pages in memory books that may help children express potent feelings. Some ideas are:

- “Mary’s Name” [the child spells Mary vertically down the page and attaches a word to each letter that reflects what Mary meant to the child].
- “The thing I loved most about Mary is...”
- “My saddest memory of Mary is...”
- “My happiest memory of Mary is...”
- “My funniest memory of Mary is...”
- “Mary’s favorite hobby, color, bird, music, food, sport was...”
- “If you had been able to say good bye to Mary, what would you have said?”

## 5. Creative Art

Children love to draw, paint, play with clay, and do crafts. All can serve as useful media for expressing the message of grief and trauma. Finger painting and working with clay are both messy arts but can be particularly helpful because they seem to offer children a more interactive, visceral sense of expression. Clay is often soothing to the touch although some children like to pound or stab it in anger. One imaginative caregiver offered children the opportunity to finger paint shower stalls in the school locker rooms. They had plenty of room and the finished product could be washed away easily. The negative side of using impermanent art is that some children want to keep their creations because the expression of their feelings is so meaningful to them. When working with groups, caregivers might suggest that the group create a community mural.

## 6. Dramatic Enactments

Most children like to play-act, particularly if props, costume or makeup are available to enable them to become totally involved in being another person. Puppets can also be used. Young children may simply use the opportunity to reenact funerals or portions of the trauma stories. Older children and adolescents may want to create their own “mini” plays. Adolescents may also find playing parts or reading scripts from classic and modern tragedies helpful in expressing their concerns over death.

## **7. Music**

Listening to, playing or singing music can be a wonderful release for children. It provides a reconnection to the sense of rhythm as well as the fact that certain musical instruments may echo sounds of grief reactions: anger might be expressed through the sound of drums or a blaring trumpet; reed and string instruments might remind children of weeping or feelings of loneliness; drum rolls and cymbals may reflect tensions, anxieties and fears; harps, flutes, and piccolos often sound like spirits talking, and so forth. Death-related lyrics are found in music as diverse as country-western, rap, opera, or hymns.

## **8. Prayer, Repetitive Meditations, and Chants**

The power of prayers for many children rests in the affirmation of spiritual beliefs, but also in associated relaxation responses triggered by the repetition of familiar and comforting words. They add an air of solemnity and gravity to rituals and memorial activities.

### **D. Sample Questions, Exercises and Activities Useful in Working With Children**

The following questions, exercises and activities have been used with individual children and with groups of children who are grieving after violent death. They draw upon the methods of intervention described above and illustrate how these interventions can be used to address common concerns children may have. To the extent possible, children should be allowed to choose exercises and activities they want to do or to suggest alternatives. It is useful for caregivers who work with grieving children to keep toys, art supplies and light refreshments readily available. If caregivers are responding immediately after a violent death, they should take paper and colored markers or crayons with them to use in talking to surviving children. Most children talk more readily when their hands are busy. When watching a videotape or listening to a story, many children also want to have something to do with their hands. While caregivers want to listen to children's stories and assist them to understand that someone they loved died in the immediate aftermath of violent death, most questions and activities will be addressed or used in the days or weeks following violent death.

# 1. Finding Out the Child's Version of What Happened

*Underlying Questions:* How did [person(s) name(s)] die? What happened when s/he died?

*Activities that Help Address the Questions:*

- ***Drawing or painting images of what happened.***

*Hint:* If children are reluctant to begin drawing or painting, caregivers may begin to draw and encourage the children to add to their drawings. Useful starting points include drawing a face or a person, a house, or the weather for the day.

*Hint:* Children should be encouraged to describe their drawings as they tell what happened. Often, children will add written words to their drawings that help them to articulate their fears.

- ***Guided free play: in working with grieving children who have survived or witnessed violent death, toys that give them an opportunity to play or act out the event may be helpful.***

*Hint:* Toys might include child and adult figures, policemen, firemen, doctors, ambulances, fire trucks, cars, buildings, pets.

*Hint:* Caregivers should ask the children how they might play with them. Often children have caregivers play the “bad guy” or someone with whom they are upset so they can express their distress at a real person.

*Hint:* Children often have an acute memory of the traumatic event and can replay vividly the most frightening part of that event. It may involve loud sounds, angry responses, or sporadic activity. Caregivers should be prepared to cope with such reactions and provide immediate nurturing to children to help them feel safe again.

- ***Dramatic reenactments: older children may want to develop a play to describe what happened, particularly in the weeks or months following the death.***

*Hint:* With older children, caregivers should be prepared to clarify any misconceptions the children may have about what happened when the violent death was a suicide, homicide or an accident.

*Hint:* Dramatic reenactments may be traumatic events for children and caregivers should be prepared to provide crisis assistance if the drama is overwhelming.



## 2. Exploring the Difference Between Life and Death

*Underlying Question:* How do you know that someone or something is dead?

*Activities that Help Address the Question:*

- ***Touching a dead person or animal may help children compare body warmth and identify a difference in the feel of the skin of someone living.***
- ***Listening for the heartbeat of a dead person or animal may help children to compare the heartbeat of someone living.***

*Hint:* Looking at what happens when eyeglasses or a mirror are placed close to the mouth of a dead person or animal and compare the results to what happens when the same things are placed close to someone living. Breath contains moisture that will cause a fog when it comes into contact with a cool pane of glass.

*Hint:* Some children never have the opportunity to see the dead body of a loved one or acquaintance because they are not permitted to attend the wake or go to the funeral home or funeral service. However, it is not uncommon for children to see a dead animal, either a pet or an animal who has died outside (baby birds that have fallen out of trees, for example).

*Hint:* It may be extremely difficult for the parent or other caregiver to assist a child to explore the meaning of death by viewing the body of a dead loved one. It might be easier for someone who works in the funeral home to help the child see and touch the body.

- ***Use an illustrative analogy through a glove exercise.***

*Hint:* Have the children put on a glove and then move their hand — pick up an object, shake hands with another person, or play with a toy. The glove moves with the hand because the hand is the life force within the glove. Have the children take off the glove and lay it on the table. Explain that when the life force is removed, the glove is similar to a dead body which has no life in it. It can no longer move, feel, touch, or play.

- ***Some children may want to see the body of the loved one who died.***

*Hint:* If the death was violent, this may not be possible due to law enforcement policy or parental objection. A viewing of the body is useful, if children are properly prepared for what they will see. If they cannot see the body, it may be important to let parents know that it may take some time for children to absorb the concept that the person is dead and will not return.

### 3. Exploring What Happens to a Person After He Dies

*Underlying Question:* What happens to a person after he dies?

*Activities that Help Address the Question:*

- ***Read a poem or story, or show a videotape about someone or something dying. Ask the children to comment on the ending. What are their beliefs or thoughts about what happened?***

*Hint:* Examples of short stories include: *Arvy Aardvark finds Hope*, a book by Donna O' Toole. More excellent stories will be in the local library.

*Hint:* Check the local library or video stores for videos that address death that would be appropriate for children of varying ages.

*Hint:* If children are school-age or above, the caregiver may ask them to help read the story.

*Hint:* Caregivers should encourage children to write their own stories about what happened to the body of their loved one and what they believe happens to the spirit of their loved one.

- ***Drawing or painting images of what happens. Common picture themes include:***

- ***Depiction of burial or funeral proceedings.***

- ***Spiritual concepts such as a person going to heaven or being in heaven, ghosts, good or evil spirits.***

- ***Thoughts on where the person is or what he looks like after death.***

*Hint:* Caregivers should be alert to frightening images, self-depictions of the child where the child might be shown in hiding or without important body parts, depictions of the deceased that are distorted or partially drawn, etc.

*Hint:* Caregivers should encourage children to describe the pictures and ask questions about any imagery that is disturbing.

## 4. Exploring Why a Sudden Death has Occurred

*Underlying Question:* Why do you think [person(s) name(s)] died?

*Activities that Help Address the Question:*

- ***Life Cycles Discussion***

Take children on a field trip to observe life and death in the natural world. In a park, children might be able to look at a living tree, a dying tree, and a tree killed by a storm or fire. Insects may be observed living and dead—some suddenly because a child stepped on them. A young animal may be viewed and contrasted with a very old animal.

*Hint:* This discussion is most helpful as an educational tool in preparation for death; however, it can be used in the aftermath of sudden death to try to place all death in perspective.

*Hint:* Caregivers should be prepared for questions about the differences between various kinds of life, how it is decided when life should end, why does someone I love die, etc.

- ***“Finding Answers” Game With Discussion***

*Instructions:* Provide a large sheet of construction paper that is divided into a matrix of three large squares by six large squares. Children are asked to write or draw six reasons they believe helped to cause the death of the person they loved in the first set of vertical squares. Caregivers then verify or correct each of those reasons in the second set of vertical squares. In the third set of vertical squares, caregivers and children together agree on the assessment that it was not the child’s fault.

*Hint:* This exercise explores magical thinking and the possibility that children blame themselves for things they do, think or feel prior to the death of a loved one. Caregivers can reassure children that their job in life is to be a child and that life and death decisions are not under their control.

*Hint:* This exercise also helps children to learn about the facts that surround the death of a loved one and to clarify misconceptions and rumors.

- ***“If I Could Say Good-bye” Exercise With Discussion***

*Instructions:* Ask children to write or to depict what they think their loved one would want them to know if that person would have had an opportunity to tell them they were going to die suddenly. After children express this idea, they are then asked to write or depict what they would have wanted their loved one to know.

*Hint:* This exercise helps children explore issues of abandonment, anger or grief over the sudden loss of a loved one. It also helps children to express their confusion over why death happens.

*Hint:* The second part of the exercise helps children think through how they might resolve these issues and go on living.

## 5. Identifying Trauma or Grief Reactions

*Underlying Question:* What do you remember feeling after you knew or found out that [person(s) name(s)] was dead?

*Activities that Help Address the Question:*

- ***“Color Me Blue” Exercise and Discussion***

*Instructions:* Distribute paper and colored markers and ask children to make a series of self-portraits identifying how they feel when they are angry, afraid, confused, ashamed, guilty, lonely, sad, excited, happy, feeling loved. These can be done on one page or a series of separate pages — one for each type of feeling. Ask children to use a special color for each feeling. After they have drawn those pictures, children are asked to identify which feeling they remember having first after learning of their loved one’s death. Then they are asked to identify other pictures that illustrate additional feelings.

*Hint:* In the initial stages of this exercise, caregivers should use simple, nonthreatening illustrations with younger children of what the various emotions might mean. For example, guilt might be described as “drawing how you might look if you felt bad because you did something wrong but didn’t want to tell anyone.”

*Hint:* Caregivers and children may want to keep these illustrations to use as they continue to meet and talk about traumatic grief. They can become a useful reference point. However, caregivers should note that children may want to change the color of different emotions as their feelings change.

*Hint:* Older children may not want to take the time to draw pictures; however, many may be able to think in terms of colors that correspond to their reactions more easily than naming their reactions. They might be asked if they can think of a color that fits how they felt. Sometimes a video projection of the color wheel might assist them in identifying the nuances of their feelings.

- ***Roadmap of Trauma Exercise and Discussion***

*Instructions:* Ask children to draw a line from the time that their loved one died until the present. Have them mark important events that have happened during that time on the line and indicate whether they were things that felt sad, bad, mad, or glad.

*Hint:* Events may include the first time they returned to school, the funeral, an interview by the police, a life change such as a divorce of parents or the birth of a new sibling, and so forth.

*Hint:* Most events will relate directly to the traumatic death or be interpreted in light of that trauma.

*Hint:* Caregivers should be prepared to talk about the ongoing impact of the trauma, clarify any misconceptions, and help with children’s understanding of ordinary life changes that take place and those that might have been precipitated by the impact of the trauma.

*Hint:* Many things in a child’s life will change as a result of traumatic death. The caregiver may seek to find positive resolutions in those changes, but some negative changes may take place. Caregivers should be prepared to help children cope with consequent and succeeding traumas.

## 6. Coping With Trauma or Grief Reactions

*Underlying Question:* How can you live with your feelings?

*Activities that Help Address the Question:*

- ***Clay-throwing — to Address Anger***

Anger and rage are the most volatile and potentially violent emotional reactions to trauma and grief. Older children may be able to express anger in writing, verbally or through constructive social action. Younger children may find it more difficult to find ways to adequately alleviate their fury. Clay-throwing has been used by some caregivers to assist them. A large plastic sheet or garbage bag is placed on the ground or floor. Unmolded soft clay is given to children. They may shape it or simply roll it in a ball. They are then allowed to throw the clay on the sheet as hard as they can. Each time they throw it down, they are encouraged to express what they are throwing it for.

*Hint:* If done in groups, this activity needs to be closely monitored so that children do not throw the clay at each other.

*Hint:* A modification of this exercise involves using different colors of clay and having children identify different feelings with each color and throwing the colors as they express different feelings.

*Hint:* Ventilation of anger is a useful exercise so long as it is followed by relaxation and defusing exercises so that the anger does not escalate in emotional intensity.

- ***Preparing Safety Plans — to Address Fear***

Children who have been traumatized by violent death need to have ideas about how they can protect themselves in the future. Practical safety plans may not be foolproof but they can provide children with a measure of reassurance. Caregivers should talk to children about their fears and try to provide them with skills to address basic problems. For instance, a child may have heard that they should call the police in an emergency, but they do not know what the number is or how to dial it. That is a simple lesson. The disaster education provided to children in earthquake and hurricane zones are examples of education programs that help children feel more competent when threatened with those disasters. Crime prevention and education programs can help children feel more competent when threatened with violence. Caregivers should also work with significant adults to ensure that children know what will happen to them if another traumatic death occurs in their lives. Where will they go? Who will they live with? How might they continue to be in contact with their friends if they must move to another neighborhood?

*Hint:* Children should be allowed to practice safety skills over and over again until they respond automatically to perceptions of threats.

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*Hint:* Children should be allowed to develop their own safety techniques and try them out to see if they work. If their suggestions or attempts reflect good thinking but need refinement, caregivers should reinforce their efforts. If their suggestions are dangerous or would be futile, they should be encouraged to consider alternatives.

*Hint:* Safety plans should have realistic chances of success. Carrying a good luck charm may provide reassurance, but will not provide a child with safety.

- ***Journal-writing — to Address Confusion***

Keeping a regular journal is something that all school age children can do. For young children this may involve keeping a scrapbook of things with a few printed words that describe feelings and thoughts. Older children can expand their ideas and reactions. The value of journal-writing is that it gives children a chance to narrate their story over and over again as well as to express their reactions. Each narration may help them sort through facts and emotions that confuse them.

*Hint:* Caregivers should assure children that their journals can be kept private but encourage them to share them voluntarily.

*Hint:* Children may find it easier to share the contents of their journals if they think that their experiences will help others who face similar trauma or grief.

- ***I'm OK Affirmations — to Address Shame***

Caregivers can talk to children who feel ashamed of what they did during a traumatic event, having survived a trauma, or how their loved one died to think about the good things they do and the good things their loved ones have done. Children may be asked to list the things that they are proudest of—in themselves or their loved ones—and to keep a chart of each time they do something or remember something that reaffirms that quality or attribute. Children may also feel ashamed of things that happen to them after a trauma. Sometimes children who have been perceived by adults to have been “heroes” during a trauma feel particularly ashamed because they “know” inside that they were scared and felt helpless. Caregivers can talk to children and develop plans for how to respond to embarrassing questions, comments or situations. Writing out “cue cards” that children can carry with them to remind them of how they plan to respond can provide extra security.

- ***Worry Beads — to Address Guilt and Anxiety***

Worry beads are common objects used in prayer and meditation in many parts of the world. In an adaptation of this use, caregivers may ask children to make a set of beads out of papier-mache, old jewelry, glue and paper or other materials. Each bead can be used to symbolize specific worries, guilt feelings or anxieties a child may have. They string and keep them to touch and feel whenever they are thinking anxious thoughts. They symbolize that these thoughts are within their control and can be soothed and calmed by their fingers.

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- ***Ritual: The Burden Basket***

This ritual, drawn from Native American Tribes, where burden baskets were constructed out of cedar to absorb anger and tears to carry everyday burdens, involves creating a basket out of the child's choice of material. The child then writes or depicts feelings that are overwhelming and deposits them in the basket. The basket then is burned and the ashes scattered to help defuse the intensity of the immediate feelings.

*Hint:* Children should be supervised closely if the basket is burned.

*Hint:* Sometimes children want to dispose of the basket in a different way — such as throwing it in a body of water.

*Hint:* Sometimes children might want to keep the basket and its contents and pick a specific time each day or week to look at their burdens and reexamine the issues in a new context.

- ***Ritual: The Healing Circle***

The shamani (natural medicine) tradition throughout the world suggests that a healing circle can help us connect with spirit and affirm our place in the universe. The Healing Circle uses each of the four directions in nature — South, West, North and East to identify specific tasks and processes of development for individuals and communities to attend to in their lives. Children may participate in a ritual adapted from the shamani tradition that uses these directions to address their needs. Music and rhythm can be used to accompany this ritual.

A circle is drawn on the ground and the child stands facing South. This is the direction of the healer. The child asks the winds of the South to help him deal with his trauma and grief. The child tells the south winds of his sorrow and loss as well as any sense of abandonment by the one he loved. A rhythmic drumbeat accompanies the story.

The child then faces West. It is in this direction that the child is asked to talk about his fears and his loneliness. This is the direction of courage. He calls upon the spirits of the West to help him face those fears. A time of silence is used to help the child gather his courage.

The child then faces North to ask for the ability to cope with his anger, fear, and sadness. He asks the spirits of the North to help him reconnect with family and community — to breach the gap the trauma has caused. A dance of remembrance and outreach to others is used to begin this process.

The child finally faces East to find a vision to guide him in the future. The task of deciding how to go on involves freeing oneself from the past so that one can be fully committed to the present and the future vision. Songs of hope accompany the child as he faces this direction.

*Hint:* This ritual should be planned in advance and involve participation and assistance of caregivers. It may be most appropriate for older children because of the complexity of the symbolism. Adolescents may want to create their own rhythm and musical accompaniment.

*Hint:* This ritual may be used in four different discussion sessions with the children involved.

## 7. Memorials and Remembrance

*Underlying Question:* How can you remember the one you loved and express your loss?

*Activities that Help Address the Question:*

- ***Funerals and Formal Memorial Services***

Consistent with the spiritual beliefs of the family, caregivers should encourage parents to include children in funerals and memorial services so they can express their own grief, say good-bye to their loved one and be more connected with the grief of their peers and significant adults. Children may want to bring “gifts” to such services or deposit letters or mementos in the coffin or at the burial site. Often traditional spiritual and mourning rituals help to accomplish the acknowledgment of death and the reaffirmation of life.

- ***Child-centered Memorial Services***

Many times children need to have their own memorial services in addition to the ones planned by and for adult grievers. Such plans should be encouraged and supported.

- ***Culturally-sanctioned Ritual: All Saints Day***

In Mexico, All Saints Day is a time to honor the dead. It centers around feasting and offering food to the dead as well as gift exchanges and family reunions. Caregivers could suggest that children and their families adopt a similar ritual — perhaps on the birthday of the deceased loved one or on a day with special meaning for the family.

- ***Culturally-sanctioned Ritual: Buddhist and Shinto Traditions***

Many homes have an altar honoring deceased ancestors. Pictures might be placed there and even an urn containing cremation ashes. Family members may make offerings to their loved ones, ask advice, or state opinions. The connection with the past lives in the present. Children may want to choose a special place in their own home where they feel especially close to a deceased family member and make a habit of communicating their ideas and feelings to that person.

Because children tend to grieve and mourn sporadically over long periods of time, individualized memorial activities should also be supported.

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- ***Treasure Map***

Caregivers can supply children with a large stack of old magazines, scissors, glue and a large piece of construction paper. Instruct children to go through the magazines quickly and find pictures, words, or captions that remind them of their loved one. Ask them to cut out those that catch their eyes. After they have assembled a pile of cutouts, tell them to write the name or draw a picture of their loved one in the middle of the construction paper and then glue the other items around in whatever order they want. They may want to draw lines from each item to the picture or name in the center. Or they may want to draw lines that connect all the items to each other and then end in the center. Whatever the order, the children have created a treasure map of their thoughts and feelings of the loved one.

*Hint:* A variation of this exercise for older children is to take a piece of paper, and in the middle of the paper put the name of the person. Then, they should be instructed to write words around that person's name that they associate with them.

*Hint:* Children may use this as a way to memorialize a loved one. It may also be used to explore unresolved feelings of the child about the deceased.

- ***A Memory Box***

Children may want to save items that remind them of their loved one in a special box that can be looked at when they feel sad or when they want to feel the presence of their loved one. Constructing and decorating an old cigar box or shoe box for this purpose can be creative and comforting work.

- ***Visits to Cemetery***

Caregivers might suggest regular monthly visits to the cemetery where the loved ones of children are. Children can write letters about their current activities in life, poems of remembrance, or choose songs to sing. This activity helps children keep a sense of communion and connection with the spirit of the loved one.

## E. Support Group Activities

The following pages contain sample support group session topics that can be used with grieving children, broken down into age groups by developmental levels. While some caregivers may feel more comfortable if groups are limited to children of similar developmental levels, other caregivers have found mixed ages manageable in one group. Groups should be limited to no more than 20 children to facilitate communication. It is best to have at least two trained caregivers in attendance. Support groups with older children can be facilitated by peers or group members but should have adults available for resource and counsel. Younger groups may be facilitated by adolescents in partnership with adults.

Group sessions should usually last no longer than 1/2 to 1 hour with groups ages 2-6; 1 hour for groups ages 7-11; and 1 1/2 hours to 2 hours for groups over the age of 12. Refreshments should be provided, if possible. It is preferable if groups meet weekly for 6 weeks and then take a break before starting again, if needed. This allows time for the group members to get to know and trust each other, but also allows group members an opportunity to drop out after the first cycle, if the sessions are no longer needed or do not fit into their schedule.

Support groups may center around one particular traumatic event that affected a significant population of children such as a sudden death in a school setting or on the grief of children who have survived the death of a loved one in a variety of traumatic events.

The purpose of the group is:

- To help the children process the traumatic experience, its aftermath and their reactions.
- To identify troubling thoughts or emotions surrounding the experience and the death.
- To provide education for children on trauma, grief, and healthy coping strategies.
- To provide tools and skills for children to use in everyday life as they cope with traumatic grief.

## 1. Ages 2-6

*Setting:* When young children meet in a group it is best if the facilitators arrange for a comfortable environment where they can sit on the floor in a circle. Children may be encouraged to bring a favorite stuffed animal to the group. Alternatively, facilitators might provide the children with such a stuffed toy to hold on to while they participate in the group. Parents may be present but should not participate in the sessions. Parents should be kept informed of the subject matter of each group and any requests for children to do activities at home or bring things from home. Refreshments such as cookies and juice should be provided at the end of the session.

*Tools:* Paper, crayons, glue sticks, pictures cut from magazines, houseplants or flowers, a pitcher and paper cups, ribbon, and a ball.

## Session One (2-6): Introduction; Discussion of Violent Death

### A. *Facilitators Introduce Themselves and Explain the Purpose of the Group sessions.*

*“Good afternoon. I am Suzie Wilson and this is Judy Martin. We are looking forward to talking and playing with you today. Did everyone bring a toy with them? [Alternative: Did everyone get a toy as they arrived?] Can you all hold your toy up for us to see? Thank you. Judy and I are going to play with you every week until Thanksgiving. [Facilitators should identify a holiday or season that corresponds to when the six weeks will end.] Everyone here has known someone they loved who died recently. That is what we want to talk about — what you think about that and how you feel. We also want to get to know you all a little better. So we want you to tell us your name and a little bit about the person you know who died. To help us do that, we are going to play a ball game.*

### B. *List Basic Rules; Tape Them to the Wall to Refer to Throughout the Session.*

#### Rules for Group Participation

- Only one person talks at a time.
- Everyone has a chance to talk but no one has to.
- No one should make fun of anyone else in the group.
- It’s okay to be upset and feel feelings.
- It’s not okay to hit or shove someone else.
- Any question can be asked, not all questions can be answered.

### C. *Ball Game*

Facilitators hold a ball in their hands and give the following instructions.

*“We are going to roll this ball to one of you. You will catch it. When you catch it, we want you to tell everybody your name, the name of your stuffed animal, and the name of the person who died. Then, we want you to tell us when the person died and how she or he died. When you are finished talking, you get to roll the ball back to us and we will roll it to someone else. When you have the ball, you get to talk; when someone else has the ball, you get to listen.”*

Model this activity by rolling the ball to another facilitator and telling your name, the name of your stuffed animal, and the names of persons whom you have known who have died. When the ball is rolled to the children, facilitators should be prepared to help the children remember the questions by asking again, *“What’s your name? Who is your friend [indicate the stuffed animal]? Who did you know who died? Can you tell me when or how it happened?”* Facilitators should respond by saying they are sorry the person died and reassure children that being sad is okay.

### D. *Thinking About Life and Death*

- **Begin** this exercise by saying,

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*“When someone dies, they are dead. They don’t move, eat, sleep, or breathe. Their heart doesn’t beat. When they die, they can’t come back to life. What do you think being dead means?”*

- **Ask** the children to choose a piece of paper and some crayons.
- **Ask** the children to draw a picture of death on one side of the paper.
- **Ask** them to draw a picture of life on the other side.
- **Ask** each of the children to explain their pictures.
- **Clarify** misconceptions and be prepared to answer questions.

**E. Conclusion**

- **Thank** them for being a part of the group and for playing together.
- **Serve** refreshments.
- **Encourage** the children to take their pictures home.
- **Remind** them that they might think about death or the person they loved during the next week and if they want to draw more pictures about what they think or feel, the facilitators would like to see those pictures at the next group session.

## Session Two (2-6): Feelings

### A. Introductions and Purpose of Group Session

Facilitators should begin by reviewing thoughts the children might have had during the week.

*“Hi. It’s great to see you all again. I hope you all brought your friends (the stuffed animals). Did anyone draw any pictures last week that you would like to share? Does anyone have a story of something that happened during the week that you would like to tell?” [If the children answer yes, facilitators should ask each one who wants to show something or tell something to do so.]*

*“This week, we want to learn more about the people you know who died — what they were like and how you feel now that they are gone.”*

### B. Memory Pictures

- **Ask** the children to draw pictures of things their loved one liked or that remind them of their loved one.
- **Suggest** that the children select some pictures from magazines or other publications of common items such as candy, flowers, household appliances, cars, animals or furniture that remind them of their loved one and glue them on the picture paper. [Pre-cut pictures can save time.]
- **Ask** each child to talk a little bit about the memory picture.

### C. Feeling Picturebook

**Ask** the children to draw one picture each of how they look when they experience the following feelings.

*“How do you look when you feel happy?”*

*“How do you look when you feel mad?”*

*“How do you look when you feel afraid?”*

*“How do you look when you feel like you did something wrong?”*

*“How do you look when you feel sad?”*

- **Help** the children staple or tape them together in a book with a cover on it that says “[Child’s Name]’s Feelings Book”.

- **Explain** that:

*“Feelings aren’t wrong or right but they can make us feel good or bad.”*

*“Everyone has different feelings at different times but most of us have similar feelings to each other at some time.”*

— Continued —

*“Sometimes it is hard to talk about what we are feeling because we don’t think other people can understand, but it often helps to talk about what we are feeling because it makes us feel less lonely.”*

- **Explain** that these books can be used every time the group meets to show each other how each child feels that day.
- **Ask** each child which feeling they have right now when they think about their loved one.
- **Use** the ball game to help children take turns talking and listening.

***D. Conclusion***

- **Thank** the children for coming to the session.
- **Serve** refreshments.
- **Ask** the children to remember to draw pictures of what they might feel during the week so that they can bring them to the next session.

## Session Three (2-6): Fear

### A. *Introductions and Purpose of Group Session*

Facilitators should begin by reviewing thoughts the children might have had during the week.

*“Hi. It’s great to see you all again. I hope you all brought your friends (the stuffed animals). Did anyone draw any pictures last week that you would like to share? Does anyone have a story of something that happened during the week that you would like to tell?” [If the children answer yes, facilitators should ask each one who wants to show something or tell something to do so.] Remember our feeling books that you made last week [distribute the feeling books]? Can each of you pick out the picture that shows how you are feeling right now? [As the children pick out their pictures, ask them to tell why they are feeling that way.]*

*“This week, we want to talk about things that we are afraid of. Lots of times when someone we love dies, we get scared about the way they died, how other people treat us, or maybe whether we’re going to die soon, too. Everyone is safe here right now, but I know when I get scared of something sometimes I want to curl up into a little teeny ball and hide.”*

### B. *Scary Pictures*

- **Ask** the children to draw a picture of a scary thing.
- **Ask** each child to explain what it is that is scary in the picture.
- **Ask** the children to try to change the picture to make it less scary. This activity allows children to realize that they have some power over scary things.

### C. *Stuffed Animal Play*

- **Ask** the children to pretend that their stuffed animals are very frightened of something.
- **Allow** each child to describe what their animal is afraid of.
- **Ask** each child to show the group what their animal might do if it were afraid or how they might make the animal feel safe again.

### D. *Houseplant Activity*

- **Fill** a large pitcher with water and label the pitcher with a marker as “Fears”.
- **Give** each child a paper cup.
- **Ask** each child to name something they are afraid of. While the child is talking about it, the facilitators should:
- **Pour** their “fears” from the pitcher into their paper cups. When each child has a cup full of fears:

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- **Ask** the children to pour their fears into a houseplant.

• **Explain** that when we keep our fears to ourselves, they often make us more afraid. When we are able to pour them out, we can feel stronger and they can help us grow — just like the water will help the plant to grow.

***E. Conclusion***

- **Thank** the children for coming to the session.
- **Serve** refreshments.
- **Ask** the children to remember to draw pictures of what they might feel during the week so that they can bring them to the next session.

## Session Four (2-6): Anger

### A. Introductions and Purpose of Group Session

Facilitators should begin by reviewing thoughts the children might have had during the week.

*“Hi. It’s great to see you all again. I hope you all brought your friends (the stuffed animals). Did anyone draw any pictures last week that you would like to share? Does anyone have a story of something that happened during the week that you would like to tell?” [If the children answer yes, facilitators should ask each one who wants to show something or tell something to do so.] Remember our feeling books [distribute the feeling books]? Can each of you pick out the picture that shows how you are feeling right now? [As the children pick out their pictures, ask them to tell why they are feeling that way.]*

*“This week, we want to talk about times when we are angry. Lots of times when someone we love is killed, we get mad at the person who killed them, at people who should have helped them, at other people who don’t understand. Sometimes people tell us we shouldn’t be angry, but no one can help it if they feel angry sometimes when someone dies suddenly.”*

### B. Working With Clay

- **Place** plastic garbage bags in front of each child and give the children balls of clay.
- **Ask** them to make something that makes them angry.
- **Make** something that angers you as well. It helps small children to see facilitators do the same things that they do.
- **Ask** each child to describe what they have made and why.
- **Ask** them what they would like to do with their clay — some may smash it, others may throw it on the plastic as hard as they can, or others may just roll it up.

### C. Physical Activity

- **Guide** angry activity and teach children to connect their feelings with safe physical expression.
- **Adapt** the children’s song, “If You’re Happy and You Know It Clap Your Hands” to provide a safe outlet for anger. Teach the children the song using “If You’re *Angry* and You Know It” as a substitute for “*Happy*”. Encourage children to clap their hands, stomp their feet, and sing loudly in anger.

### D. Stuffed Animal Play

- **Explain** to children that it is okay to be angry at someone, but it is not okay to hurt or hit someone with whom we are angry.

— Continued —

- **Ask** the children to pretend they are very angry at their stuffed animal and then to demonstrate what they might do to show their pet they are angry.

- **Explain** that hitting or throwing is not a good way to be angry.

- **Encourage** them to alternatively deal with anger by not playing with the animal, drawing a picture of their anger and showing it to the animal, or by picking up their clay, making an animal likeness and smashing it.

*E. Conclusion*

- **Thank** the children for coming to the session.

- **Serve** refreshments.

- **Ask** the children to remember to draw pictures of what they might feel during the week so that they can bring them to the next session.

## Session Five (2-6): Grief and Mourning

### A. Introductions and Purpose of Group Session

Facilitators should begin by reviewing thoughts the children might have had during the week.

*“Hi. It’s great to see you all again. I hope you all brought your friends (the stuffed animals). Did anyone draw any pictures last week that you would like to share? Does anyone have a story of something that happened during the week that you would like to tell?” [If the children answer yes, facilitators should ask each one who wants to show something or tell something to do so.] Remember our feeling books [distribute the feeling books]? Can each of you pick out the picture that shows how you are feeling right now? [As the children pick out their pictures, ask them to tell why they are feeling that way.]*

*“We’ve talked a lot about the way we feel after someone we love is killed, but often the main thing we feel is sadness. There are a lot of reasons to be sad and most of them have to do with missing the person who is gone. Today we are going to talk about how we can remember the person we love so that their memory can be with us always.”*

### B. Funeral Activity

- **Explain** to children that many adults participate in memorial services and funerals to remember the person who died.
- **Find** out from the children if they attended such a service or funeral for their loved one.
- **Ask** them if they have any questions about the funeral and try to clarify any misconceptions or concerns.
- **Ask** them to draw a picture of things they remember at the funeral or memorial.
- **Ask** them to tell the story of the picture.

### C. Memory Stories

- **Explain** to the children that one way of remembering someone they love is to tell stories about them to people they meet.
- **Encourage** them to practice telling stories about the person they love by telling a story to their stuffed animal for the group.

### D. Color Memories

- **Explain** to the children that often certain colors remind us of other people. Sometimes the color was the favorite color of the person who died. Sometimes the color is a color that you saw on the day of the funeral.
- **Show** the children a color chart or box of colored markers and ask them to pick the color that reminds them of the person who has died.

— *Continued* —

- **Ask** the children to explain why the color reminds them of the deceased. If the color is associated with good memories, the child should be encouraged to do an entire picture in memory of the loved one in that color. If the color is associated with bad memories, the facilitator should talk to the child about how the color might be changed and the memory might be shaded in favor of a good memory. Example: A child may pick a red marker because he saw his mother killed and remembers the blood. The facilitator may be able to encourage the child to think about a good memory of his mother such as when they played in the sun. The facilitator can then take a yellow marker and show the child how to change red to orange to represent the sun rather than the blood.

***E. Conclusion***

- **Thank** the children for coming to the session.
- **Serve** refreshments.
- **Ask** the children to remember to draw pictures of what they might feel during the week so that they can bring them to the next session. Since the next session will be the last session, ask the children to look around during the week for something — a memory object — that they can bring to the group that reminds them of their loved one.

## Session Six (2-6): Going on With Life

### A. *Introductions and Purpose of Group Session*

Facilitators should begin by reviewing thoughts the children might have had during the week.

*“Hi. It’s great to see you all again. I hope you all brought your friends (the stuffed animals). Did anyone draw any pictures last week that you would like to share? Does anyone have a story of something that happened during the week that you would like to tell?” [If the children answer yes, facilitators should ask each one who wants to show something or tell something to do so.] Remember our feeling books [distribute the feeling books]? Can each of you pick out the picture that shows how you are feeling right now? [As the children pick out their pictures, ask them to tell why they are feeling that way.]*

*“Today is the last time that we will meet before Thanksgiving. It’s been very special getting to know each of you. But it’s time to say good-bye for a while. So today we want to talk about what each of us is going to do as you continue to grow up and get older. First, I want to see what memory object you brought to show us.”*

### B. *Memory Objects*

- **Bring** to the group a roll of ribbon and pre-cut hearts at least two inches in size. (Heart doilies can also be used.)
- **Allow** each child to show the memory object, describe it and tell why it is important.
- **Cut** a piece of ribbon and attach it to a heart. As the child says the name of the person who died:
- **Write** the name in block letters on the heart. (Allow the child to do this if he or she knows how to print.)
- **Attach** the heart to the memory object.
- **Tell** the children that in many cultures, people keep memory objects in their home or carry them with them to continue to feel that they can talk to their loved ones.

### C. *Looking Into the Future*

- **Ask** the children to draw a picture of what they want to be when they grow up.
- **Ask** them to tell the story of the picture.
- **Provide** them with encouragement and validation of positive personality attributes that are reflected in their dream.

— Continued —

***D. Conclusion***

- **Thank** the children for coming to the sessions.
- **Give** each child a special memento to take home from the group (Examples: a large gold star with the group's name and the child's name, a certificate, a set of color crayons and paper, a small toy, and so forth).
- **Serve** refreshments.

## 2. Ages 7-11

*Setting:* Children should be seated in chairs around a table in a comfortable environment with the facilitators. Paper, crayons, and markers should be available on the table. Refreshments such as chips, cookies, fruit and juice or soda should be provided at the end of the session.

*Tools:* Paper, crayons, markers, name badge maker with colored paper, and assembly materials (alternatively: name tags with plastic holders), stickers, old magazines, paper bags, glue sticks, flip chart.

### **Session One (7-11): Introduction;**



## Discussion of Violent Death

### **A. Introduce Yourself to the Children and Explain Purpose of the Group Sessions.**

*"Good afternoon. I am Suzie Wilson and this is Judy Martin. We are looking forward to talking with you today. Judy and I are going to be here on Thursday afternoon every week for the next six weeks. Everyone here has known someone they loved who was killed recently. Violent death is a terrible thing and we're sorry that it has happened in your lives. That is what we want to talk about — what you think about homicide and murder and how you've been feeling. During these sessions there are some basic rules to follow so that everyone feels comfortable and has an opportunity to talk if they wish."*

### **B. List Basic Rules; Tape Them to the Wall to Refer to Throughout the Session.**

#### **Rules for Group Participation**

- Only one person talks at a time.
- Everyone has a chance to talk but no one has to.
- No one should make fun of anyone else in the group.
- It's okay to be upset and feel feelings.
- It's not okay to hit or shove someone else.
- Any question can be asked, not all questions can be answered.

### **C. Name Game**

*"We also want to get to know you all a little better. So we want you to tell us your name, something about the people who died and how they died. To help us get acquainted, we have handed out two name signs — one is a badge for you to wear and the other is a sign to place in front of you at the table. We want you to write your name on each, but we also want you to think about a picture or symbol that you think describes you or your loved one and to draw it or choose a sticker or cut out a picture that represents it and put that on the badge and sign as well."*

After the children do this, go around the circle and ask each child to say their name, and describe the symbol or picture.

### **D. Videotape**

- **Tell the children:**

*"Many children have had parents, siblings or friends who were killed. These facts don't make it any easier to live with a personal loss but it may help to hear how other children have thought about violent death. The videotape was prepared to help children tell other children what they have felt after someone they loved had been killed."*

— Continued —

- **Show** the videotape.

*“You have seen some of the reactions of kids who have suffered a violent death among their families or friends. Everybody reacts differently. Each of you have your own stories. We want to hear those stories to learn more about how we are different and how much we are the same.”*

### ***E. Telling the Story of Violent Death***

- **Ask** the children to take a piece of paper and some colored markers. Ask them to think about the day their loved one was killed, and what they remember. Facilitators can prompt their thinking by asking some of the following questions depending upon the event(s) group members have experienced.

- *Where were you when it happened?*
- *How did you find out what happened?*
- *What do you remember seeing?*
- *What do you remember hearing?*
- *What do you remember smelling?*
- *What did you do?*

As they are thinking about the day, **ask** them to draw a picture of the worst memory they have about that day. After they have completed their drawings, ask for volunteers to show their pictures or to tell the story of those bad memories.

- **Ask** the group try to remember if there was any good part of the day.
- **Ask** them to draw a picture of the best memory they have about the day.
- **Ask** for volunteers to show or tell those stories.

### ***F. Thinking About Life and Death***

Facilitators should begin this exercise by saying, *“What does it mean to be dead?”* Then ask the children to choose a piece of paper and some crayons. Ask them to draw a picture of death on one side of the paper. After they are finished, ask them to draw a picture of life on the other side. When they are through drawing, ask each of the children to explain their pictures. Facilitators should help to clarify misconceptions and be prepared to answer questions.

### ***G. Conclusion***

- **Thank** them for being a part of the group.
- **Serve** refreshments.
- **Encourage** children to take their pictures home.
- **Remind** them that they might think about death or the person they loved during the next week and if they want to draw more pictures about what they think or feel, the facilitators would like to see those pictures at the next group session.

## Session Two (7-11): Feelings

### A. *Introductions and Purpose of Group Session*

- **Review** thoughts the children might have had during the week.

*“Hi. It’s great to see you all again. Did anyone draw any pictures last week that you would like to share? Does anyone have a story of something that happened during the week that you would like to tell?” [If the children answer yes, facilitators should ask each one who wants to show something or tell something to do so.]*

*“This week, we want to learn more about the people you know who died — what they were like and how you feel now that they are gone.”*

### B. *Memory Pictures*

- **Ask** the children to create pictures of things their loved one liked or that remind them of their loved one.
- **Suggest** that children look through the magazines and cut out pictures of things that remind them of their loved one and glue them on the picture paper.
- **Ask** each child to talk about the memory picture.

### C. *Feeling Picture Book*

- **Ask** the children to draw one picture each of how they look when they experience the following feelings.

*“How do you look when you feel happy?”*

*“How do you look when you feel mad?”*

*“How do you look when you feel afraid?”*

*“How do you look when you feel like you did something wrong?”*

*“How do you look when you feel sad?”*

- **Help** the children staple or tape the feeling pictures together in a book with a cover on it that says “[Child’s Name]’s Feelings Book”.

- **Explain** that:

*— Feelings aren’t wrong or right but they can make us feel good or bad.*

*— Everyone has different feelings at different times but most of us have similar feelings to each other at some time.*

*— Sometimes it is hard to talk about what we are feeling because we don’t think other people can understand, but it often helps to talk about what we are feeling because it makes us feel less lonely.*

*— Continued —*

- **Explain** that these books can be used every time the group meets to show each other how each child feels that day.

- **Ask** each child to demonstrate a feeling that they have now when they think about their loved one.

***D. Conclusion***

- **Thank** the children for coming to the session.

- **Suggest** that they take their memory pictures home.

- **Keep** the “Feeling Books” until the next session.

- **Serve** refreshments.

- **Ask** the children to remember to draw pictures of what they might feel during the week so that they can bring them to the next session.

## Session Three (7-11): Fear

### A. *Introductions and Purpose of Group Session*

- **Review** thoughts the children might have had during the week.

*“Hi. It’s great to see you all again. Did anyone draw any pictures last week that you would like to share? Does anyone have a story of something that happened during the week that you would like to tell?”*

- **Ask** for volunteers who want to show or tell something.
- **Distribute** the Feeling Books.
- **Ask** children to pick out a picture that shows how they feel right now.
- **Ask** for volunteers to tell about the picture they chose.
- **Introduce** the topic for the day.

*“This week, we want to talk about things that we are afraid of. Lots of times when someone we love dies, we get scared about the way they died, how other people treat us, or maybe whether we’re going to die soon, too. Everyone is safe here right now, but I know when I get scared of something sometimes I want to curl up into a little teeny ball and hide.”*

### B. *What Makes You Scared?*

- **Ask** each child to name something that scares them and to tell why it scares them.

### C. *Letter Writing*

- **Ask** the children to write a letter to someone whom they think is very important or powerful and tell them in the letter what they should do about the scary thing. (Examples of people to write to include: The President, God, a policeman, a teacher, their parents.)

### D. *Action Planning*

- **Divide** the children into small groups of 3-5.
- **Tell** them to talk and think about three things they want to know how to do that would make them feel safer.
- **Ask** each group to list those three things on a piece of paper.
- **Ask** each group to report their list to the full group.

— Continued —

- **Identify** things that children can learn in order to feel safer.
- **Demonstrate** how to do simple things. Examples include:
  - *How to use a fire extinguisher.*
  - *How to call the police or emergency services.*
  - *What to do if there is an earthquake (or tornado or hurricane or flood, etc.).*

***E. Conclusion***

- **Thank** the children for coming to the session.
- **Serve** refreshments.
- **Ask** the children to remember to draw pictures of what they might feel during the week so that they can bring them to the next session.

## Session Four (7-11): Anger

### A. *Introductions and Purpose of Group Session*

- **Review** thoughts children might have had during the week.

*“Hi. It’s great to see you all again. Did anyone draw any pictures last week that you would like to share? Does anyone have a story of something that happened during the week that you would like to tell?”*

- **Ask** for volunteers to show or tell something.
- **Distribute** the Feeling Books.
- **Ask** for volunteers to choose a picture to show how they feel right now.
- **Introduce** the topic for the day.

*“This week, we want to talk about times when we are angry. Lots of times when someone we love is killed, we get mad at the person who killed them, at people who should have helped them, at other people who don’t understand. Sometimes people tell us we shouldn’t be angry, but no one can help it if they feel angry sometimes when someone dies suddenly.”*

### B. *Puppet Play*

- **Distribute** paper bags, markers, colored paper, scissors and glue to the children.
- **Ask** them to make a paper bag puppet of their favorite animal.
- **Ask** the children to name the puppet.
- **Make** a paper bag puppet of yourself or an animal.
- **Use** your paper bag puppet to ask the question of each child’s puppet —  
*“What makes you really, really mad?!”*
- **Ask** the puppets: *“What do you do when you get mad?”*
- **List** all the ways that the puppets respond on the flip chart.
- **Distribute** handout on good ways to be mad and bad ways to be mad.
- **Talk** to the children about good ways to be mad and bad ways to be mad.

— Continued —

### ***C. Physical Activity***

Anger creates energy that needs to be released. Facilitators can guide that activity and teach children to connect their feelings with safe physical expression.

- **Give** the children a piece of paper and a pencil or marker.
- **Ask** the children to write or draw about the thing that makes them angry.
- **Tape** a large piece of paper with a big red circle on the wall.
- **Ask** the children to wad their anger [paper] into a ball.
- **Ask** the children to throw their anger at the circle on the wall.
- **Allow** them to pick up the paper balls and throw them again and again.

### ***D. Conclusion***

- **Thank** the children for coming to the session.
- **Serve** refreshments.
- **Ask** the children to remember to draw pictures of what they might feel during the week so that they can bring them to the next session.



## Session Five (7-11): Grief and Mourning

### A. *Introductions and Purpose of Group Session*

- **Review** thoughts the children might have had during the week.

*“Hi. It’s great to see you all again. Did anyone draw any pictures last week that you would like to share? Does anyone have a story of something that happened during the week that you would like to tell?”*

- **Ask** for volunteers to show or tell something.
- **Distribute** Feeling Books.
- **Ask** for volunteers to choose a picture to show how they are feeling right now.
- **Introduce** topic for the day.

*“We’ve talked a lot about the way we feel after someone we love is killed, but often the main thing we feel is sadness. There are a lot of reasons to be sad and most of them have to do with missing the person who is gone. Today we are going to talk about how we can remember the person we love so that their memory can be with us always.”*

### B. *Funeral Activity*

- **Explain** to children that many adults participate in memorial services and funerals to remember the person who died.
- **Ask** the children if they attended such a service or funeral for their loved one.
- **Ask** them if they have any questions about funerals.
- **Clarify** any misconceptions or concerns.
- **Divide** the children into small groups.
- **Ask** each group to plan a funeral or memorial.
- **Reconvene** the children as a large group and ask each group to tell or demonstrate the funeral or memorial they planned.

### C. *Memory Stories*

- **Explain** to the children that one way to remember someone they love is to tell stories about them to people they meet.

— Continued —

- **Read** a short story about someone who has died.
- **Ask** the children to write a short story about the person they loved.
- **Ask** for volunteers to read their stories when they are finished.

***E. Conclusion***

- **Thank** the children for coming to the session.
- **Serve** refreshments.
- **Ask** the children to remember to draw pictures of what they might feel during the week so that they can bring them to the next session. Since the next session will be the last session, ask the children to look around during the week for something—a memory object—that they can bring to the group that reminds them of their loved one.

## Session Six (7-11): Going on With Life

### A. *Introductions and Purpose of Group Session*

- **Review** thoughts the children might have had during the week.

*“Hi. It’s great to see you all again. Did anyone draw any pictures last week that you would like to share? Does anyone have a story of something that happened during the week that you would like to tell?”*

- **Ask** for volunteers to show or tell something that happened.
- **Distribute** the Feeling Books.
- **Ask** for volunteers to choose a picture and describe their feelings right now.
- **Introduce** topic for the day.

*“Today is the last time that we will meet before Thanksgiving. It’s been very special getting to know each of you. But it’s time to say good-bye for a while. So today we want to talk about what each of us is going to do as you continue to grow up and get older. First, I want to see what memory object you brought to show us.”*

### B. *Memory Objects*

- **Have** a roll of ribbon and pre-cut hearts at least two inches in size. (Heart doilies can also be used.)
- **Allow** each child to show the memory object, describe it and tell why it is important.
- After each child tells about the memory object, the facilitators should **cut** a piece of ribbon and **attach** it to a heart.
- **Allow** each child to write the name of the loved one on the heart.
- **Tie or glue** the ribbon and heart to the memory object.
- **Explain** that in many cultures, people keep memory objects in their home or carry them with them to continue to feel that they can talk to their loved ones.

### C. *Looking Into the Future*

- **Ask** the children to think about what they want to be when they grow up.

— Continued —

- **Divide** the children into small groups and ask them to talk with each other about what they want to be and plan how to “act out” their future for the whole group.

- **Reconvene** the children as a large group. Ask each small group to “act out the dreams” of each group member.

***D. Conclusion***

- **Thank** the children for coming to the sessions.

- **Give** each child a special memento to take home from the group (examples: a photograph of the group together, a card with autographs from each group member, a poem or quotation.)

- **Serve** refreshments.

### 3. Ages 12-18

*Setting:* Youth should be seated in chairs around a table in a comfortable environment with the facilitators. Paper and pencils should be available on the table. Refreshments such as chips, cookies, fruit and juice or soda should be provided at the end of the session.

*Tools:* Paper, crayons, markers, name badge maker with colored paper, and assembly materials (alternatively: name tags with plastic holders), stickers, old magazines, small notebooks, glue sticks, flip chart.

## Session One (12-18): Introduction; Discussion of Violent Death

### A. *Introduce Yourself and Explain Purpose of the Group Sessions.*

*“Good afternoon. I am Suzie Wilson and this is Judy Martin. We are looking forward to talking with you today. Judy and I are going to be here on Thursday afternoon every week for the next six weeks. Everyone here has known someone they loved who was killed recently. Violent death is a terrible thing and we’re sorry that it has happened in your lives. That is what we want to talk about — what you think about homicide and murder and how you’ve been feeling. During these sessions there are some basic rules to follow so that everyone feels comfortable and has an opportunity to talk if they wish.”*

### B. *List Basic Rules; Tape to the Wall to Refer to Throughout the Session.*

#### Rules for Group Participation

- Only one person talks at a time.
- Everyone has a chance to talk but no one has to.
- No one should make fun of anyone else in the group.
- It’s okay to be upset.
- It’s not okay to hurt someone else.
- Any question can be asked, not all questions can be answered.
- Nothing said in the group should be repeated to others except for general ideas.

### C. *Name Game*

*“We also want to get to know you all a little better. So we want you to tell us your name, something about the people who died and how they died. To help us get acquainted, we have handed out two name signs — one is a badge for you to wear and the other is a sign to place in front of you at the table. We want you to write your name on each, but we also want you to think about a picture or symbol that you think describes you or your loved one and to draw it or choose a sticker or cut out a picture that represents it and put that on the badge and sign as well.”*

After the youth do this, go around the circle and ask each person to say their name, describe the symbol or picture.

### D. *Videotape*

- **Tell** the youth:

*“Many kids have had parents, siblings or friends who were killed. These facts don’t make it any easier to live with a personal loss but it may help to hear how others have thought about violent death. The videotape was prepared to help kids tell other kids what they have felt after someone they loved had been killed.”*

— Continued —

- **Show** the videotape.

*“You have seen some of the reactions of people who have suffered a violent death among their families or friends. Everybody reacts differently. Each of you have your own stories. We want to hear those stories to learn more about how we are different and how much we are the same.”*

### ***E. Telling the Story of Violent Death***

- **Ask** the youth to close their eyes and think about the person who has died and when they first learned about the death.

- **Ask** them to think about the following questions:

- *Where were you when it happened?*
- *How did you find out what happened?*
- *What do you remember seeing?*
- *What do you remember hearing?*
- *What do you remember smelling?*
- *What did you do?*

- **Ask** them to open their eyes and ask for volunteers to tell what they thought about.
- **Record** common crisis reactions on the flip chart.
- **Explain** the pattern of trauma and grief reaction.
- **Distribute** handouts on trauma and grief reactions (see Appendix I).
- **Ask** the youth to take a piece of paper and draw a straight horizontal line across it. Tell them to mark the start of the line and indicate that the start of the line will symbolize when the death happened. The end of the line will symbolize today. Now ask them to mark on the line any significant events that have taken place since the death— indicate those things that were unhappy events or sad times underneath the line and those that were positive or good events above the line.
- **Show** the youth an example of such a line on the flip chart.
- **Ask** for volunteers to describe what they have drawn on their paper.

### ***F. Thinking About Life and Death***

- **Begin** this exercise by asking—  
*“What does it mean to be dead?”*  
*“What happens when you die?”*

— *Continued* —

II).

- **Distribute** poem, “*Dirge without Music*” by Edna St. Vincent Millay (see Appendix II).
- **Read** the poem and ask the group for comments and thoughts on their own perspectives of death.

- **Ask** the group to help you list the most common conceptions of death. Include:

- *Death as an ultimate finality — with no afterlife.*
- *Biological decay of the body.*
- *Death as a release of the spirit.*
- *Death with an afterlife in which there is a heaven, purgatory and hell.*
- *Death with an afterlife through reincarnation.*
- *Death with an afterlife in heaven.*

### **G. Recording Your Thoughts and Reactions**

- **Distribute** small notebooks to each person.
- **Ask** them to write or draw about thoughts or reactions they have about the person who was killed during the next week. Tell them that the notebooks are to be confidential but everyone will be given an opportunity to read or show what they have recorded if they choose to do so.

### **F. Conclusion**

- **Ask** the group to each bring a photograph or picture of the person who was killed to the next group session.
- **Thank** them for being a part of the group.
- **Serve** refreshments.



## Session Two (12-18): Trauma and Grief Reactions

### A. *Introductions and Purpose of Group Session*

- **Review** thoughts the youth might have had during the week.

*“Hi. It’s great to see you all again. Did anyone make any journal entries last week that you would like to share?”*

- **Introduce** topic for the week.

*“This week, we want to learn more about the people you know who were killed — what they were like and how you have been reacting since their death.”*

### B. *Picture Collage*

- **Ask** the youth to create a collage of things their loved one liked or that remind them of their loved one.
- **Have** group members select a piece of colored construction paper.
- **Glue** the photograph or picture of the loved one on the paper.
- **Suggest** that group members look through the magazines and cut out pictures of things that remind them of their loved one and glue them around the picture.
- **Ask** each young person to talk about the picture collage and describe their loved one.

### C. *Reaction Exercise*

- **Tape** six sheets of colored construction paper with different reactions written on them in different locations around the room. The six reactions should be:

Red - Anger  
Yellow - Fear  
Green - Guilt  
Orange - Shame  
Blue - Sadness  
Pink - Happy

- **Explain** that:

*— None of these reactions are wrong or right but different reactions can make us feel good or bad.*

*— Continued —*

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