

A guide for schools and colleges to help children and young people who are struggling



# Welcome

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Fergus Crow CEO, Winston's Wish We warmly welcome you to this guide we have created for schools and colleges to help support children and young people experiencing a traumatic bereavement.

Children and young people can experience a traumatic bereavement at any time, caused by the trauma of the death blocking the normal grieving process. More children and young people are likely to experience a traumatic bereavement because of the extra deaths from the coronavirus and how restrictions impact bereavement.

These children and young people need additional support to process the trauma of the deaths of their loved ones, so that they can grieve their loss.

This guide for schools and colleges has been produced by the UK Trauma Council in collaboration with the Childhood Bereavement Network, Child Bereavement UK and Winston's Wish, with the generous support of the UK Government's Coronavirus Community Support Fund distributed by The National Lottery Community Fund.



# Who is this guide for

This guide has been written to help adults in schools and colleges identify and support children and young people experiencing a traumatic bereavement.

Although bereavement is always difficult, most children and young people learn to adjust and live with their loss over time. However, in a traumatic bereavement, the way children and young people experience or understand the death can lead to lasting distress and impact on their everyday life.

# The challenge

Traumatically bereaved children and young people experience significant distress and difficulties, over and above a more typical grief. It is vital that these children are identified and given the appropriate help and support. However, identifying and understanding the impact of traumatic bereavement and how to support children and young people can be a challenge. The number of extra deaths due to he coronavirus and how restrictions can impact the grieving process mean more children and young people are likely to experience a traumatic bereavement.

# **Traumatic bereavement and schools**

Schools and college are very well-placed to facilitate the support for traumatically bereaved children and young people working in partnership with specialist bereavement or mental health services and help them regain a sense of safety.

# Traumatic bereavement resources

<u>The resources</u> were developed in close consultation with education, bereavement and mental health professionals across the UK as well as with children and young people.

We recommend you start by <u>watching the animation</u> and then read the guide.

There are links to the tools, videos and handouts throughout the guide.



# The Animation

The animation <u>"Traumatic bereavement:</u> <u>helping children and young people who</u> <u>are struggling</u>" introduces what traumatic bereavement is and what schools and colleges can do to help.



# This Guide

A detailed overview of traumatic bereavement and a 6-point support plan that can be followed to help identify if the bereavement is traumatic and provide effective support.



# Tools

Printable templates for monitoring and referrals, and guidance for having sensitive conversations with children and young people and their parents or carers.



# Handouts

Printable guides on traumatic bereavement written for children and young people and parents and carers.



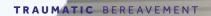
# Videos

To learn more about traumatic bereavement and how to use the 6-point support plan, watch interviews with bereavement practitioners, school pastoral leads and a young person.

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# DIFFERENT FACES OF GRIEF Introducing our fictional characters

Wesley, Cara and Prisha are fictional characters featured in the animation <u>'Traumatic bereavement: helping children and</u> <u>young people who are struggling'</u> which gives an introduction to supporting a child or young person with traumatic bereavement. They are included in this guide to bring the ideas to life and to make them easier to understand and apply when providing support to children and young people struggling with their bereavement.



Age14HobbiesBasketballFamilyBirth familyDeathFather after<br/>short illness

# Wesley Stuck in his grief

Wesley was a confident pupil and strong academically. Restrictions meant only Wesley's mum could be with Dad when he died. Weeks have passed and Wesley's spark has not returned, he isn't playing any basketball and his grades have dropped. He now sees the world as fundamentally different. Wesley is angry at the hospital restrictions because he feels that he let his mum down.

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Age11HobbiesChoir and codingFamilyBirth familyDeathMother through<br/>accident

# **Prisha** More typical grief

Prisha was an easy-going girl with lots of interests. She has felt the loss of her mum deeply. At school she sometimes goes to a quiet place to draw. She can then return to being with her friends, laughing and proudly showing photos of Mum. She steps in and out of her grief, moving from sadness to grief freely.



Age6HobbiesDanceFamilyFoster familyDeathBrother through<br/>suicide

# **Cara** Yet another trauma

Cara was a creative and shy child. Due to domestic abuse at home, Cara and her brother moved into foster care together. He found it very hard to settle and a year later took his own life. Cara is now easily startled, becomes quickly overwhelmed by events and has stopped going to dance class. She perceives her father caused her brother's death and now sees the world as a very scary place and feels fundamentally unsafe.

# What is traumatic bereavement?

In a traumatic bereavement, the way the child or young person experiences or understand the death – the meaning they make of it – results it in it being experienced as traumatic.

The trauma gets in the way of the typical process of grief and blocks the child or young person's ability to process the loss.

A child can experience traumatic bereavement at any age. Any type of death can result in a traumatic bereavement.

Traumatically bereaved children and young people experience significant distress and difficulties, over and above a more typical grief. It is vital that these children are identified and given the appropriate help and support.

When a bereavement is traumatic: meaning making

# Identifying traumatic bereavement

# How is traumatic bereavement different to more typical grief?

Children and young people, like adults, can experience a broad range of emotions when grieving. Although they can be intense and difficult to manage at times, typically the emotions do not impact everyday life persistently.



Young people often grieve in puddles, dipping in and out of their grief, experiencing strong feelings and then going off to do their usual things in between.

For most children and young people, as they come to understand the death of someone close to them and how they feel about it, the intensity and frequency of difficult emotions reduce and they learn to live with their loss. In traumatic bereavement, children and young people experience very strong emotions because of the meaning they make of the death. Feelings such as fear, anxiety, guilt, anger or shame block their ability to grieve and adapt to their loss. This often comes with upsetting and overwhelming images, thoughts, and sensations which appear in their minds and bodies in a way that feels out of their control. This can result in difficulties in behaviour and relationships which impact everyday life persistently, in school as well as elsewhere.



The grief becomes more like a well than a puddle and much harder to step out of.

These metaphors and descriptions can help to notice how a child or young person is responding after a death and to try and identify traumatic bereavement. However, these are not completely distinct categories and developing an understanding of the child or young person's individual response will take time.

# Do the circumstances of the death lead to traumatic bereavement?

Circumstances such as a sudden or violent death or death by suicide can increase the likelihood of traumatic bereavement. Research<sup>1</sup> tells us that restrictions such as those imposed during the coronavirus pandemic can make a bereavement more likely to be traumatic, for example, not being able to say goodbye or attend a funeral.

In situations like a pandemic, when much is unclear even to adults, it can be more difficult for a child or young person to make sense of a death or for the adults around them to give them accurate information. Research<sup>2</sup> tells us that if a child is not given the facts about a death, they may 'fill in' the missing information by imagining what happened. Without the facts it is more likely that the meaning the child or young person makes of the death will be overwhelmingly confusing or frightening and they are more likely to experience the death as traumatic.

1 Harrop, E., Mann, M., Semedo, L., Chao, D., Selman, L. E., & Byrne, A. (2020). What elements of a systems' approach to bereavement are most effective in times of mass bereavement? A narrative systematic review with lessons for COVID-19. *Palliative Medicine*, 34(9), 1165-1181.

2 <u>Cohen, J., Mannarino, A.,</u> <u>Greenberg, T., Padlo, S., Shipley,</u> <u>C. (2002). Childhood Traumatic</u> <u>Grief. Trauma, Violence, & Abuse,</u> <u>3(4), 307-327.</u>





Cara had experienced domestic abuse and her brother was a protective figure. The meaning she made of the death was that their father must have harmed her brother and was responsible for his death. The loss of her closest and most reliable relationship made it deeply frightening and traumatic for her.

# Do previous experiences make it more likely that a bereavement will be traumatic?

Some prior experiences may make it more likely a child will experience a bereavement as traumatic. These include:

- Neglect or abuse
- Domestic or community violence
- Loss of birth family
- Poverty and deprivation
- War or displacement
- Mental health problems
- Neurodevelopmental or learning difficulties

However, it is important to remember that some children and young people in these circumstances or with these previous experiences will not experience a bereavement as traumatic. Similarly, some children and young people with none of these experiences, like Wesley, will experience a bereavement as traumatic.

# What signs are there that a child or young person is experiencing traumatic bereavement?

Every bereaved child or young person's bereavement experience is unique. The table below lists some of the difficulties that may indicate a young person is experiencing a traumatic bereavement. The presence of these difficulties should be thought about alongside the **'Schools traumatic assessment grid'** on page 15.

Energy	• crying often • slow to respond or engage • neglecting their appearance	Tired or cut-off	<ul> <li>staring into space</li> <li>looking blank or absent</li> <li>struggling to concentrate</li> </ul>
Low in confidence Angry	<ul> <li>not speaking up in class</li> <li>saying negative things about themselves or their abilities</li> <li>shouting</li> </ul>	Withdrawn	<ul> <li>not doing activities they used to enjoy</li> <li>isolating themselves from friends or trusted adults</li> <li>struggling to attend school</li> </ul>
	<ul> <li>acting aggressively or destructively</li> </ul>	Hopeless	<ul> <li>not believing things can get better</li> </ul>
Fearful or worried	<ul> <li>being jumpy or very sensitive</li> <li>seeming uncomfortable in their body</li> </ul>		<ul> <li>losing hold of plans or ambitions</li> </ul>
	<ul> <li>suddenly leaving the class or school</li> <li>not managing things they used to be able to such as separating from carers</li> </ul>	At risk	<ul> <li>using drugs or alcohol</li> <li>spending time with risky/ older people</li> <li>self-harming or thinking about suicide</li> </ul>

Difficulties could persist across a child or young person's day or may seem to come out of nowhere. Something in the school environment might have triggered a reminder of the loss or the trauma, leading to a strong reaction in the child or young person's body or mind. There is more information about triggers in the section of the support plan **'Actively Monitor'** on page 23.



Jeannie knew Wesley well before his dad died so was really able to notice the differences in the way things were for him after the death.

# **Delay in response**

The child or young person's traumatic response to a death might be noticed straight away or might emerge later on. Difficulties can arise so long after the death that the connection between their behaviour and their bereavement is not at all obvious. This could be associated with a range of factors, including entering a new developmental stage, such as adolescence. The table below can be used to help distinguish between more typical grief and traumatic bereavement. This may help you to decide when to seek specialist support for a more thorough assessment.

# Schools traumatic bereavement assessment grid

Domain	Description	How it might present
Severity	How much are the emotions and behaviours impacting everyday life?	Wesley is unable to get any enjoyment from socialising or playing basketball and struggles to concentrate on schoolwork.
Frequency	How often does this happen?	Cara becomes distressed in class several times a week.
Duration	How long does the episode last?	When Cara becomes overwhelmed, she can't settle for the rest of the day.
Persistence	How long has the young person been struggling?	Wesley has been withdrawn for several months.
Breadth	How many areas of life does it impact?	It is affecting Cara's learning, her time with friends and her home life.
Risk	Is the impact of their loss putting them at risk?	When Cara becomes overwhelmed, she wants to run away.
Comparison	How is the child or young person managing now compared to before the death? Are things generally getting better or deteriorating?	Wesley was doing very well academically but now his performance and attainment are much lower. He is often alone in the playground rather than joining his friends.

# The 6-point support plan

It is critical that traumatically bereaved children get the right support. Working collaboratively with specialist services and with the child or young person's family, school or college can play a very important role in providing this support.

This section outlines a 6-point plan that can be followed to help identify if the bereavement is traumatic and provide effective support to help the child or young person regain a sense of safety and hope.

This is not intended as a step-by-step guide to follow exactly but to be used in a way that is responsive to the child or young person's particular experience. In addition, schools may already have their own policies or procedures for some aspects of the plan.

The 6-point plan can be used whenever possible traumatic responses are noticed in a bereaved child or young person. This may be directly after the death or they could take a long time to appear.

> A 6-point plan: supporting traumatically bereaved children and young people

(►)

[7]

View the 6-point plan online



# The 6-point support plan

# **1** Build on relationship with trusted adult

Organise regular check-ins for the CYP with a trusted adult. Organise a safe space where the CYP can go to. Ask other teachers to share concerns.

# 2 Support the trusted adult

Identify another staff member to ensure the trusted adult is looking after themselves.

# **3** Keep in contact with home

Establish what the CYP has been told about the death and how. Share information and agree plans to support.

# 4 Actively monitor

Closely monitor and record the CYP's difficulties using the 'School traumatic bereavement assessment grid'

# **5** Refer for specialist support

Traumatic bereavement will usually need specialist support from a bereavement service or NHS mental health services.

# 6 Hold the hope

Help the CYP see there are things to look forward to and help them see a better future.

Build on relationship with a trusted adult

A relationship with a trusted adult is crucial to help the child or young person feel safe and supported after a bereavement.

# The right trusted adult

This does not have to be a dedicated mental health lead, it is often more helpful if it is a class teacher or another adult in school who the child or young person has a trusted relationship or positive connection with. In some cases, it may be more than one adult. It is important for key adult(s) to be available on a regular basis, prepared for difficult conversations and ready to provide support when the child or young person becomes upset or acts out.

# Check-in times and safe spaces

The trusted adult should plan regular times to meet with the child or young person. Work out with them what they can do if they need to leave class or the playground (a safe space they can go and a way of contacting the trusted adult if they need support). After Wesley's father died, Raffia, the school additional needs lead asked Wesley's teacher, Jeannie, if she would be happy to take a lead role in supporting him, as she knew him quite well and coached the basketball team. Jeannie agreed with Wesley that they would meet every week and that he could come and find her if he was feeling worried or upset or had any difficulty in school.

# Other adults in school check-in

Talk to other teachers and ask that they respond to difficult behaviour in a way that helps the child or young person feel safe, rather than sticking rigidly to behaviour systems. Ask that they share information with the trusted adult when difficulties arise. It is important for trusted adults to model that they are comfortable talking about the death and things they notice about the child or young person. Naming difficult experiences and feelings is not going to make things worse.

# Having difficult conversations

Traumatically bereaved children and young people may find it very difficult to have conversations and are more likely to want to avoid reminders. Let them know their feelings are important, even if talking is difficult.



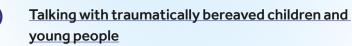
# Checklist

- Regular check-in times set for CYP with trusted adult(s)
  - CYP knows how to find trusted adult(s) at other times
  - Safe space agreed if CYP needs to leave class

# More information & support



Having sensitive conversations with traumatically bereaved children and young people



A young person's perspective on support from school

# 2 Support the trusted adult

The trusted adult(s) should have regular check-in meetings with the school's additional needs or mental health lead. Supporting a child or young person following a bereavement can be difficult and upsetting. This might be more difficult for adults who have had their own experiences of loss or bereavement, especially if this has been recent. These meetings should support staff to look after themselves, notice any changes to their emotional wellbeing and provide practical support.

When Jeannie, Wesley's trusted adult in school, noticed that Wesley's difficulties continued to impact many areas of his life, she became very worried for him. She spoke to Raffia, the school additional needs lead, who suggested this might be a traumatic bereavement. Together they made a plan so that Jeannie could provide the best support. Raffia made sure to provide ongoing emotional and practical support for Jeannie.

# Checklist

Check-in times set with supporting staff member

Sources of self-help or additional support shared

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Following the death of his father, Wesley's trusted adult in school, Jeannie, called his mother and they talked about how he was coping and what could be done to support him. When Jeannie realised that Wesley's difficulties were persisting, she got in touch with his mother again and they agreed it would be helpful to speak at the end of each week to share information about how he was doing.



It is important that adults at school and at home are in contact with one another to share information and agree plans to support the child or young person. This helps to establish whether patterns of difficulties are the same at school and home. It also helps children and young people to know that the adults around them are working together to support them.

# **Complete information about the death**

Knowing what the child or young person has been told about the death and how the family talks about it can help the school to provide more sensitive support. If the parents or carers have given the child or young person incomplete or inaccurate information about the death, this can increase the likelihood of trauma as their imagination fills in the gaps.

Parents and carers may need support from the school and specialist support services to provide more complete and accurate information, particularly if they are struggling themselves.

# **Culture and belief systems**

It is important to understand how the family culture or belief systems shape the way death is understood and responded to. This will help make the support in school more sensitive and might provide important information about the child or young person's experience of the loss.

# Changes at home

It is important to understand how the child or young person's home life may have changed

in other ways – for example, moving home, loss of income, more family arguments. If someone else at home is really struggling, discuss making a referral for support for them.

# Network beyond home

Schools should work with other key adults in the child or young person's network. Explore who this might be with the child or young person and their parent(s) or carer(s) and their preference about how much information is shared. Develop working relationships with social workers, youth workers, faith leaders, other family members and any siblings' nursery, school or college.



# Checklist

	Asked parent(s)/carer(s) what CYP has been told about the death
	Discussed how family culture or beliefs shape response to death
	Agreed language about the death with parent(s)/carer(s)
	Checked other changes to family life since the death
	Agree point(s) of communication with parent(s)/carer(s)
	Considered whether other family members need support
More	support on talking with home
Ø	Having sensitive conversations with parents and carers
	Traumatic bereavement: a guide for parents and carers

Jeannie, Wesley's trusted adult in school, noticed that he found it more difficult to concentrate in the last lesson of the day. When she spoke to him about this, he said that towards the end of the day, he could feel the worry building up about going home and being reminded that his dad wasn't there.

# Actively Monitor

# Check the 'Traumatic bereavement assessment grid'

It is helpful to monitor how the child or young person is doing, using the 'Schools traumatic bereavement assessment grid' on page 15. Keeping a written record will help track how they are doing. Share information with key adults and have discussions with or make referrals to other agencies.

# Compare before and after the death

Monitoring the individual child or young person and comparing their needs and behaviours to how they were managing before their bereavement means that existing additional needs are taken into account.

# Identify patterns and triggers

Closely monitoring can help in spotting patterns in the child or young person's

difficulties. If patterns are noticeable, explore with the child or young person what might be causing this.

It can also help to identify things that trigger trauma responses (overwhelming feelings or difficult behaviours). These might be things that are more predictable, such as Father's or Mother's Day, poppy day, religious occasions, an anniversary of the death or a birthday. However, other triggers might be more difficult to understand if they are linked to the particular meaning the child or young person makes of their bereavement.

If the child or young person continues to have frequent, persistent difficulties that impact on more than one area of their lives, this suggests it may be traumatic bereavement.

# **Consider referral timing**

Differences in individual's responses make it difficult to provide an exact timeframe for the identification of traumatic bereavement or the need for referral for specialist support. Difficulties might arise immediately after a death, have a delayed onset or be revisited at any time after a death, even years later. If the child or young person is at risk (for example from self-harm or suicidal thoughts) then school safeguarding procedures should be followed and a referral made immediately to NHS mental health services (sometimes known as CAMHS).

# Checklist Set up a log to identify patterns and triggers Dates agreed for trusted adults to check in and review More information and Support

Active monitoring log

When Cara's pencil case fell off the table at school, she slammed her fists down and left the classroom. The noise had reminded her of the sound of things being thrown and broken when her father was being violent. Her perception that he had caused her brother's death meant that the noise triggered overwhelming fear and a 'flight' response.

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# **5** Refer for specialist support

Some children and young people experiencing a traumatic bereavement may be able to process their trauma, grieve and adapt to their loss with the support from school and home. However, in many cases the child or young person will need specialist support from a national or local bereavement service or NHS mental health service.

If the child or young person is at serious risk from themselves, it is important that the referral is made directly to NHS mental health services and that this is clear in the referral. The school's internal safeguarding process should also be followed.

# Where to refer

The local bereavement service will be in the best position to advise whether they can support children and young people who are showing signs of traumatic bereavement. If they cannot provide appropriate support (such as Trauma Focused Cognitive Behavioural Therapy) they may recommend a referral to the NHS mental health service.

# Involve home

It is very important to involve the child or young person and their parent(s) or carer(s) when you are planning to make a referral. They will need developmentally appropriate information about the service, the reasons for a referral and what they can expect.

If you feel you have enough information to strongly suggest that this is a traumatic bereavement, it can be helpful to discuss this with the child or young person and their parent(s) or carer(s).

It is important to be sensitive to a child, young person's or family's worries that a referral for further support might also result in or be a reflection of prejudice, or lead to disadvantage. These worries are more likely for those who have experienced prejudice and disadvantage before, such as families from minoritised communities. It will be critical to create a space to explore their previous experiences and reservations with systems you are recommending and work closely with

Key adults at Cara's school, along with her foster carer, realised that her difficulties were persistently affecting many areas of her life and her functioning. Discussion with a local bereavement charity helped them to identify that this was a traumatic bereavement. The bereavement service advised that Cara would need trauma-focused therapy and a referral should be made to CAMHS.

the child or young person, their parents or carers and the onward service, to help build confidence in the quality of care available. Provide as much information as possible about the child or young person to the bereavement service or NHS mental health service. Details from monitoring records you have kept will help form the basis of the referral. It is helpful to use plain descriptive language about the child or young person's thoughts, feelings and behaviours, rather than suggesting labels or diagnoses.

# **Continued school support**

When a specialist service provides support, the role of key adults in school or college continues to be very important. Partnership between school, home and bereavement or mental health services is key to supporting the child or young person to rebuild their lives after traumatic bereavement.

The UK Trauma Council has written a clinical guide for therapeutic practitioners working with children and young people experiencing traumatic bereavement. It might be helpful for schools to refer to the clinical guide when contacting bereavement services.

# Checklist

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Initial consultation with local bereavement service



Referral agreed with CYP and parent(s)/carer(s)



Agreed ongoing support in school

Agreed points of communication with service

# More information & support



<u>Referrals for specialist support –</u> key information to include



Having sensitive conversations with parents and carers



Because traumatic bereavement changes the way children and young people see the world so significantly, it can be much more difficult for them to feel hopeful or optimistic about their lives and their future.

Trusted adults in school can 'hold' the hope for the child or young person.

Look ahead to important milestones in the child or young person's life such as school transitions, exams or events relating to their interests. Find ways to remind them that there are things to look forward to and offer them images of themselves finding enjoyment and success in the future. Provide practical support, for example with college applications or helping them to find a local sports club. Help them to see that they will not always feel like this. Jeannie, Wesley's trusted adult in school, gently encouraged him to consider re-joining the basketball team. She reminded him about the tournament he and his team-mates had been training for. She and his mum worked together to make sure he had completed his schoolwork so that he would have time to play if he wanted to. Jeannie contacted local colleges to find out about basketball clubs Wesley might be able to join when he moved to sixth form.

# Check List

 Assure the CYP that with help, things will begin to change for them

 Identify specific things the CYP can look forward to

 Provide practical support to help the CYP achieve goals/milestones

 Help the CYP envisage a positive future e.g. academics, relationships, interests

# Planning for traumatic bereavement

instances of traumatic bereavement are part of a wider bereavement policy and part of a whole school approach to mental health. This will ensure everyone knows what it is and how to offer appropriate support. In times of significant disruption such as pandemics or local potentially traumatic events, this is especially important.

It is important that a school's responses to

Working in partnership with services is key to ensuring children, young people and their families get the right support when they need it. Bereavement services are keen to work with schools to advise and respond to local needs. Identify what is available in your local area and build working relationships with bereavement services so that you can call on these when you need them.

> Relationships between school and local community and faith leaders can support children, young people and their families to access bereavement and mental health services and can help schools and services to provide culturally sensitive and appropriate help.

Information about a whole school approach to mental health can be found at

www.annafreud.org/5steps/

Further information on how to develop a school bereavement policy can be found from the bereavement charities below.



# Additional bereavement and trauma resources

A wide range of bereavement resources for education settings, parents and carers and children and young people are available from national organisations including:

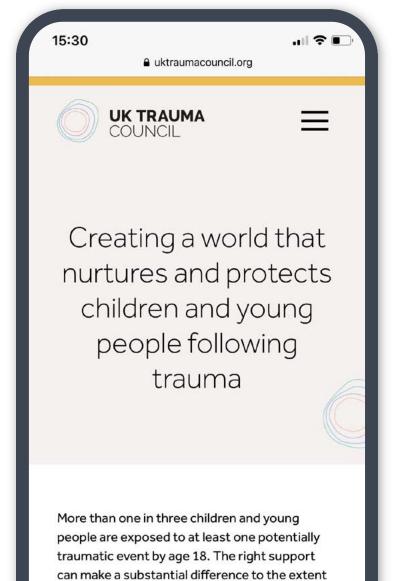
<u> Anna Freud Centre – early years</u>
Childhood Bereavement Network
Child Bereavement UK
Cruse Bereavement Care
<u>Grief Encounter</u>
<u>Winston's Wish</u>
Find your nearest local child bereavement service

A range of trauma resources to support individuals and organisations working to nurture and protect children and young people following trauma can be found at

**UK Trauma Council** 

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The UK Trauma Council (UKTC) creates evidence-based resources to improve

that traumatic events impact on their lives.

# The evidence and further reading

# The evidence

This guide was created using the latest available research on traumatic bereavement. Some of the references are listed below. More information about the evidence and research on traumatic bereavement can be found here.

Alisic, E., Krishna, R., Groot, A., Frederick, J. (2015). **Children's Mental Health and Well-Being After Parental Intimate Partner Homicide: A Systematic Review.** Clin Child Fam Psychol Rev, 18, 328–345.

Cohen, J., Mannarino, A., Greenberg, T., Padlo, S., Shipley, C. (2002). **Childhood Traumatic Grief.** Trauma, Violence, & Abuse, 3(4), 307-327.

Harrop, Emily, Mann, Mala, Semedo, Lenira, Chao, Davina, Selman, Lucy E, & Byrne, Anthony. (2020). What elements of a systems' approach to bereavement are most effective in times of mass bereavement? A narrative systematic review with lessons for COVID-19. Palliative Medicine, 34(9), 1165-1181.

# Suggested reading

These are just a selection of books for children and young people about bereavement and trauma. You may have others that you have used in the past or you may find other recommendations from bereavement services and other sources.

We recommend that you have a look at some of these and read them through, considering whether you want to share all or parts of the book(s) you choose with a child or young person. You might want to just use parts of a book or adapt it to fit with what you know about the child or young person or the circumstances of their bereavement.

# Books for children and young people

# Someone I know has Died

- Child Bereavement UK Workbook with activities for young children who want to remember someone who has died.

# **Missing Mummy**

# - Rebecca Cobb

Story about a girl missing her mum and making sense of her grief.

# **Out of the Blue**

# - Winston's Wish

Selection of ideas of activities for young people to remember someone who has died.

# Saying Goodbye: When Someone Special Dies

- Dr Elaine Klewchuk and Dr Susie Willis Online book for children about the death of someone close during the coronavirus pandemic. Some activities are included.

# What on earth do you do when someone dies?

# — Trevor Romain

Book covering key questions a child might have when someone dies. Suitable for older primary or secondary.

# Sad Book

# — Michael Rosen

Book exploring the feelings of sadness when someone is bereaved.

# You Will Be OK: Find Strength, Stay Hopeful and Get to Grips with Grief

#### — Julie Stokes

Suitable for older primary school and secondary school aged children.

# **The Grief Handbook**

— David Trickey and Beck Ferrari A survival guide for 12–18-year-olds helping young people make sense of their grief. (Forthcoming)

# The Grief Encounter Workbook — Shelley Gilbert

A therapeutic creative activity book to help children (5–13 years) with trauma and loss when someone very special dies.

# **When a Friend Dies**

#### — Marilyn E Gootman

Book containing short statements which explore the feelings of grief when a friend dies. Parts can also be useful following the death of someone other than a friend.

# Still Here with Me: Teenagers and Children on Losing a Parent

— Suzanne Sjoqvist and Margaret Myers Collection of autobiographical accounts written by young people about their grief. More suitable for older teenagers.

# Books about sudden death

# Is Daddy coming back in a minute?

# - Elke and Alex Barber

Autobiographical story of a little boy trying to make sense of his father's sudden death from a heart attack.

# What Happened to Daddy's Body?

# - Elke and Alex Barber

Follow on from the above title explaining funerals, burials and cremation.

# **Rafi's Red Racing Car**

- Louise Moir Story about Rafi the rabbit beginning to understand his father's suicide.

# Luna's Red Hat

#### — Emmi Smid

Story of a girl making sense of her mother's death by suicide.

#### **Red Chocolate Elephants**

— Diana Sands A book and DVD to support children bereaved by suicide.

# Books for children with Special Educational Needs (SEN)

#### I Have a Question about Death

 Arlen Grad Gaines and Meredith Englander Polsky

Questions and answers about what death means using clear "Communicate in Print" style symbols and illustrations.

#### **Remembering Lucy**

— Sarah Helton Picture book following the story of classmates in a Special School remembering their friend Lucy who has died.

# **Goodbye Daisy**

#### -Stephanie Nimmo

Picture book to help Daisy's friends to understand what happened when she died from a life limiting condition.

# **Books for adults**

# The Little Book of Bereavement for Schools

#### — lan Gilbert

Personal account of how schools tried to support children in one family after the death of their mother, with fifteen points for schools to follow.

# A Child's Grief

— Winston's Wish Guidebook for parents and professionals.

# Hope Beyond the Headlines

# - Winston's Wish

Guidebook for parents and professionals supporting a child bereaved by murder or manslaughter.

# **Beyond the Rough Rock**

#### - Winston's Wish

Guidebook for parents and professionals supporting a child bereaved by suicide.

# A Special Kind of Grief

#### — Sarah Helton

Practical guide to supporting bereavement in special schools covering issues affecting bereaved pupils with SEND.

# **We All Grieve**

# -Winston's Wish

Guide to how children with SEND grieve and how they can be best supported.

# Books about trauma for children

# When Something Terrible Happens: Children Can Learn to Cope with Grief — Marge Heegard

A 'draw out your feelings' workbook offering opportunities to express emotions visually after a traumatic event.

# The Boy who Built a Wall around Himself

#### — Ali Redford and Kara Simpson

A moving metaphor exploring how children can build barriers to protect themselves from painful experiences and how they might be encouraged to let others support them.

# A Terrible Thing Happened

#### — Margaret M Holmes

A simple picture book about Sherman who tries to forget after he saw something terrible happen. But his bad dreams keep reminding him, so Mrs Maple helps him to talk about what happened.



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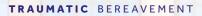
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Printable templates for monitoring and referrals and guidance for having sensitive conversations with children and young people and their parents or carers

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# Having sensitive conversations with traumatically bereaved children and young people

Are you a 'trusted adult' in school supporting a bereaved child or young person and monitoring for the possibility of traumatic bereavement?

This guide is to help you have sensitive conversations with the child or young person following their loss. Much of the advice here comes directly from children and young people who have experienced a bereavement. You will need to use your knowledge of the child or young person to decide what language or other methods of communication to use. The suggestions here may be more or less accessible depending on the child's age and ability – do consider adapting according to the child or young person's needs.

### Acknowledge the death

Mention the death directly and 'don't tread on eggshells'. Without adults opening the door of communication, children and young people may not be aware of who knows and who they can talk to about their grief.

Try and say something straightforward like "I'm sad to hear that your dad died" or "Your head of year told me that your brother died – that is so tough". It can be hard to talk about loss and bereavement, perhaps because of a worry about managing your own feelings or thinking that speaking about it might make the child or young person feel worse. Talking about the death or the person who died does not make it worse.

> 'The worst thing has already happened – anything the teacher says is not going to be the worst thing that has happened'.

You may be worried about saying something in a clumsy or insensitive way, but even this can be better than not saying anything. If you are feeling awkward or anxious when talking to the child or young person about the death, remember they are likely feeling even more vulnerable and uncertain. Try and pay attention to their response to see how they are coping with the conversation.

### Use clear language

Use clear and unambiguous language about death, particularly with younger children.

Talking about them having "lost" someone or someone being "laid to rest" might lead to the child or young person feeling confused, which can add to their worry. If it is spoken in a gentle tone, straightforward language can create a better understanding, which reduces the likelihood of trauma.

Try and avoid phrases that seem reassuring but do not acknowledge the finality of death. For example, "time is a healer" or "when things get back to normal". Instead, talk to children and young people about learning to live with their loss or rebuild their lives and find their way back to things they enjoy.

It can be hard to know that a child or young person you care about is having a difficult time and not be able to solve their difficulties. When someone dies, there is no fix. What you can give them is connection, empathy and acceptance.

#### **Creating a safe context**

Traumatic bereavement can result in children and young people feeling very unsafe so the help that school offers should be planned



Cara's teacher knew that she loved painting and she and Cara agreed that they would work on an art project together for 20 minutes each week during the lunchtime break. This created a relaxed and creative context in which they could talk as much as Cara was able to. around creating a sense of safety. Conversations with children and young people might happen during regular scheduled check-ins or at other times. It can be helpful to create a relaxed context in which to talk, with a focus other than conversation. Respect the child or young person's privacy and find a time and a space that is separate from other children and adults.

> 'We don't want to be made to feel different or get upset in front of our friends.'



Jeannie asked Wesley to meet her on Thursdays before everyone else arrived for basketball club. They worked together to make sure the courts were clear and the equipment was organized. This gave them something to focus on and allowed private time for as much or as little talk as Wesley wanted.

# What if the child or young person does not want to talk?

Children and young people who have experienced trauma often want to avoid thinking or talking about the difficult thing that has happened. They might put a lot of effort and energy into avoiding reminders of the death, the person who died or the meaning they have made of their loss. It can help to acknowledge this by saying something like "it seems like it is really hard for you to talk about your dad and what happened when he died". Look out for whether talking gets easier over time. If the child or young person remains adamant that they do not want to talk or goes to some lengths to avoid it, this might suggest that their bereavement has been traumatic.

Show them that you continue to value them and are not going to give up on them. Recognise their efforts, thank them for spending time with you and praise them for achievements, such as getting some homework done or making it to choir practice.

> 'Just having my teacher ask what I had for breakfast helped to feel connected without pressure to talk about difficult things.'

### **Planning for reminders**

Look out for things that might remind children and young people about the person who died or the circumstances of the death. If a lesson or assembly might have something upsetting in it, speak to the child or young person in advance and let them know what might be difficult. Ask or make suggestions about how they would like you to help them with this. 'I really appreciated it when my geography teacher took me aside to tell me that we would be watching a film that might trigger reminders of the death of my family member. They said I could sit out of that lesson.'

### **Responding to difficulties**

Name the things that you or others have noticed about the child or young person's difficulties. When they have become upset or acted out at school, explore with them what kinds of thoughts and memories they are dealing with – for example, "I can see you were feeling really upset earlier, can you tell me what was going through your mind?"

This can help you think about whether their difficulties are part of a 'typical grief' response or signs of a traumatic bereavement – which will make it easier to provide or find the right help.

'It would help if trusted adults pay attention to how we are thinking and feeling under the surface. And to let us know that it is ok to say if we are struggling.' A helpful question might be "are you worried about thoughts or feelings you are having?" This shows that you accept that things might be more difficult than they seem and trust that the child or young person can make helpful judgments about their own wellbeing. Younger children might find it easier to understand something like "sometimes I think you work really hard to make everyone think you are OK – even when you are not – does that sound right? What is that like for you?"

It can take huge effort and energy for children and young people to appear to be OK and they might be completely drained or unable to keep this up.

If you notice that they are doing well with something, acknowledge and encourage this but perhaps also acknowledge that this might take a lot more effort than it used to – make space for them to name this.

### Keep in contact with home

'Even when things seemed better at school, it felt like I was wearing a mask all day that I could only take off when I got home. It was exhausting.'

Bear in mind that following a death in the family, home can be the most difficult place to be. Let the child or young person know that you are in contact with their parents or carers and that they can talk about home if they want to.

### Hold the hope

Look out for ways to help the child or young person rediscover things that they enjoy. Make sure that you can envisage ways that things can get better for them – talk with confidence about positive things you can imagine in their future and help them to organise themselves around important events, school transitions or college or university applications.

# Further reading & resources for adults

1	<u>The Grieving Child in the Classroom:</u>
	A Guide for School-Based
	Professionals by Sue Trace Lawrence
7	<u>Resources to help children and young</u>
2	Resources to help children and young people understand how they would
2	

# Active monitoring log

This template can help you log and structure the information that will help you identify if the child or young person is experiencing a traumatic bereavement and will help decide about when to make a referral. This should be completed by the primary trusted adult

Ι.	Contacts	and time	points
	<b>O</b> onicae co		

#### Agreed check in with child or young person

Day	Time	Location
	L	L

#### Agreed contact with child or young person's teachers

Teachers	Frequency	Method

#### Child or young person

#### Agreed contact with parents / carers

Date of first contact \_\_\_\_\_

Agreed frequency of contact\_\_\_\_\_

Method of contact \_\_\_\_\_

Trusted adult(s)

Start date for this log

# II. Weekly log

To be completed after every check-in with child or young person

Check-in date: \_\_\_\_\_

			Evidence	Frequency	Severity	Duration	Breadth
ls the child or young person:	Yes	Νο	What has been noticed and by who (inc. the CYP)?	When in the day / week? Patterns? Clear triggers or explanations?	1 to 10 with 10 being most severe	How long do these difficulties last each time?	Impacting learning, relationships, interests, hobbies, home?
Low in mood or energy							
Angry							
Fearful or worried							
Tired or cut-off							
Low in confidence							
Withdrawn							
Hopeless							
At risk							
Any other concerns							

# III. Four weekly log (adults in school)

To be completed and reviewed with the person supporting the trusted adult every four weeks

Date:

Difficulty	<b>Frequency</b> Is this difficulty happening more or less?	<b>Severity</b> Has this difficulty worsened or improved?	<b>Persistence</b> Is this difficulty continuing to impact several areas?	<b>Breadth</b> How long has the difficulty continued?
		1		

#### IV. When to refer

Individual differences in the response of children and young people makes it difficult to provide an exact timeframe for the identification of traumatic bereavement or the need for referral for specialist support. Difficulties might arise immediately after a death, can have a delayed onset or can be revisited at any time after a death, even years later. It might also help to hold in mind that the support at school will not continue through the holidays, which might make a referral more important well in advance of long breaks. If the child or young person is at risk (for example from self-harm or suicidal thoughts) then school safeguarding procedures should be followed and a referral made immediately to NHS mental health services.

The following might provide some guidance to help inform decision-making about when a referral for specialist support is indicated:

Level of difficulty	Timeframe	What to do
High level of risk- self harm, suicidal thinking	Immediate consultation between trusted adult and supporting adult	Immediate referral to NHS mental health service
Severe persistent difficulties strongly suggesting traumatic bereavement	Monitor for at least four weeks	Refer to NHS mental health service and /or consult with bereavement service about their level of service provision
Difficulties causing more negative impacts than a typical grief response and persist or that worsen over time	Continue to monitor to identify level and breadth of impact. Review every four weeks and consider referral at each review	Refer to NHS mental health service and /or consult with bereavement service about their level of service provision



# Referrals for specialist support – key information to include

In many cases, a child or young person experiencing traumatic bereavement will need specialist support from a national or local bereavement service or NHS mental health services. When there is an indication that the child or young person is at risk due to self-harm behaviours or suicidal thinking, an urgent referral should be made directly to NHS mental health services and school safeguarding procedures followed. Depending on the organisation receiving the referral, schools may be able to make referrals directly or to share information to support referrals made by others (for example, by a GP). Once a referral has been picked up, schools will have an ongoing role to play in supporting the child or young person and working in partnership with bereavement or mental health services providing specialist help.

### Making a good referral

Make sure the referral is discussed with the child or young person and their parents/carers before it is sent. It is important to share their views and include any information they provide. Be sensitive to worries that a referral might result in diagnosis, as there can be prejudice associated with mental health problems.

There are geographical and organisational differences in referral systems, procedures and forms and schools will need to understand the referral requirements of the service in their area. However, there are some general principles that apply to writing a good referral. NHS mental health service clinicians from across the four nations have suggested that the following is helpful to include in a written referral:

Background information	<ul> <li>History - information about the child's home life and any previous losses or traumatic experiences (including changes of carers, living with domestic abuse, parental mental ill-health or substance use)</li> <li>Circumstances of the death that have made</li> </ul>
	it more frightening or disturbing
Presenting problem	<ul> <li>Details about the specific difficulties you see in school and have heard about from your contact with parents/carers</li> </ul>
	<ul> <li>Information about the duration, severity, frequency, persistence and impact of the difficulties that you have gained from actively monitoring</li> </ul>
	<ul> <li>Anything you notice that you think differs from a more typical grief reaction (e.g. particular patterns, triggers, avoidance, unusual behaviour, thoughts or feelings you have picked up on)</li> </ul>
Previous support	• What you have tried and how the child or young person has made use of your help
Risk	<ul> <li>Self-harm</li> <li>Suicidality</li> <li>Risk-taking behaviours</li> <li>Safeguarding concerns</li> </ul>
CYP voice	<ul> <li>Most NHS mental health services will seek to find out the CYP's perspective on their difficulties and their preferred option for</li> </ul>

support



# Having sensitive conversations with parents and carers

Are you a 'trusted adult' in school or college supporting a bereaved child or young person who is struggling and monitoring for the possibility of traumatic bereavement? This might help you to have sensitive conversations with their parent(s) or carer(s). Keeping communication going between home and school or college can help in understanding what might be making it so hard for the child or young person and how to best support them.



"It would be really helpful to catch up with you to talk about Wesley because we want to make sure we understand what is going on for him. Would Thursday afternoon work for you?"

## Setting up regular check-ins

Agree on regular times to talk by telephone or in person (ensuring that this does not go beyond what you can fit into your role). The family may be grieving too so be sensitive to this when considering the timing, length and depth of the conversations.

Suggest an initial conversation and explain why you think it will be helpful. This enables the parent or carer to have time to emotionally prepare themselves. They may be struggling at times so predictability and flexibility will be important to ensure these conversations are possible.

Some children and young people find it really difficult to think that they are being talked about without knowing what is said or having a chance for their voice to be heard. Consider whether you could include the child or young person in all or some of the conversations with the parent or carer. Agree this with them and their parent or carer in advance.

### **Asking questions**

While you may feel awkward or anxious when talking about the death with the parent or carer, remember they are likely feeling even more vulnerable and uncertain. Try and make sure questions are not perceived as judgemental – families are navigating unfamiliar territory and might be sensitive to thinking that they are getting it wrong for their child. Try and pay attention to the parent or carer's response to see how they are coping with the conversation.

# Exploring what the child or young person has been told about the death

You may already know a lot about the circumstances of the death but hearing it from the parent or carer can help you understand what it was like for the family. In contrast you may know very little so would benefit from understanding a bit more. Sometimes parents and carers are able to talk



"I wonder whether you could help me understand a bit about what Cara knows about her brother's death and what has made it so hard for her since then."

openly about the death and may welcome this opportunity. This can be difficult and you may feel uncertain about how to respond. Seek help from someone else at school if you are left feeling worried or upset.

Sometimes parents and carers are more private or not yet emotionally ready to have a conversation about the death. It is important to respect this and to keep monitoring the child or young person in school.

Clarify what has been said at home about the death so that you can develop a better understanding of the meaning the child or young person has made.

If you think that the way the death has been explained to the child or young person might have left them feeling confused or left important gaps that they might fill with their imagination, it can be helpful to raise this with the parent or carer.

It is important that a conversation like this is supported by someone who is experienced and confident enough to know how to help. Bereavement services have lots of resources and can provide help with explaining a death to a child or young person even if it happened in difficult circumstances.

# Exploring how the child or young person is doing at home and whether the parent or carer is worried

Gently explain what school staff have noticed about how the child or young person is doing at school. Check in about how they are doing at home to help build up a more comprehensive picture.

It can be helpful to give the parent or carer examples of the child or young person's difficulties that have been noticed at school and to ask directly whether these are also present at home. This is also a chance to ask about things like how the child or young person is sleeping, eating, communicating with family and peers, how emotionally expressive or avoidant they seem and whether anything at home seems to make them particularly upset. You might also want to ask about how they and other family members are managing, being careful not to make them feel judged, to help you understand about the emotional environment at home. It might be that one child in the family is responding to the loss quite differently to another, which can

#### TRAUMATIC BEREAVEMENT

be confusing or worrying to parents or carers. Assure parents that this does not reflect how much each child loved the person who died, the closeness of the relationship or how they have been supported since.

Taking time with these conversations can help the family to process the information in stages and to understand that you are not jumping to conclusions. They are the experts on their own child so finding out about their perspective is key.

Many parents and carers will be relieved to share concerns about their child and to know that the school is looking out for them. Sometimes the school relationship with the family is not so well established and this can make it harder to talk about. Giving parents or carers a clear rationale for why you want to seek specialist advice can be helpful.

# Exploring previous experience of services

On occasions, parents and carers might be reluctant to access outside support. They may be unfamiliar with other agencies and may be anxious about 'professionals' becoming involved. They may have had poor experiences previously. It is important to be sensitive to worries that a referral might result in prejudice and disadvantage, especially if the family is from a minority community and have experienced this before. Explore their experiences and reservations, working closely with them to help build confidence in the quality of care that can be accessed.

It might be agreed that school and home continue to monitor and review over time (unless the child or young person is at immediate risk, in which case make an urgent referral in line with safeguarding procedures).



"Thank you so much for finding the time to talk with me. Let me know what you can manage today, I don't want to add to the pressure you are under. I'm hoping we can have a think about how Wesley has been coping both at home and school since his dad died. That will really help us make sure we are giving the best support we can."



"What are things like when you are both at home? This might feel like a difficult question to answer but I have been wondering how you have been doing since your husband died?"



We've noticed that Wesley has withdrawn from his friends. Even at lunchtime, he hasn't been spotted sitting with his group. He's not been coming to basketball club either. Has he told you anything about this? Do you know if he's been in touch with friends outside school?

If the child or young person continues to struggle and your concerns remain, revisit the conversation with their parent or carer about specialist advice. If the family seems able to manage these conversations, it can be helpful to mention mental health difficulties – for example mentioning a level of anxiety, low mood or trauma responses if this seems clear.

This process may take some time – the family is trying to cope with a lot and it does not help to put them under additional pressure. Sometimes advice can be gained from a bereavement organisation or NHS mental health service anonymously, without the need to share the name of the child or young person – this might be an appropriate next step that the family are happy to agree to.

Whilst it can be very helpful to make a timely referral for specialist help, parents or carers' consent will be needed. This may take time and on rare occasions may never



We'd like to get some professional advice to make sure we are doing the best we can for Wesley. Our local bereavement service might be able to help. They are really experienced in helping children struggling after someone dies. Sometimes when there has been a traumatic bereavement children or young people can need additional help. I'd like to explore whether that would be helpful for Wesley. How does that sound? be given. When a referral is not possible, do not underestimate the value of maintaining a supportive relationship with the child or young person and their family.



We've been keeping a close eye on Wesley and we are quite worried about him. We know that all grief is individual, it's just that this seems to be particularly hard for him. Sometimes when grief is trickier to manage, it can be called traumatic bereavement. Children and young people who experience this can feel a bit stuck. They find it harder to have better moments and can struggle to cope. Does this match what you're seeing?



Last time we talked about how Wesley was getting on and signs that he was really struggling. We are still worried. Sometimes, the support from those around a child is enough to help them adjust and begin to manage. Other times, they need extra help and without this may struggle in the long term. We don't want that for Wesley.



Printable guides on traumatic bereavement written for children and young people and parents and carers

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a guide for parents and carers	56





# A guide for children and young people

This guide explains traumatic bereavement and might help if you are worried about yourself or someone else.

### What is traumatic bereavement?

It is really hard when someone important in your life dies – you might get filled up with lots of different feelings. Even though you may be really sad, you might sometimes be able to have some fun and enjoy things.

Grief is the word that explains all the feelings of missing the person who died. It can be helpful to think about grieving as like stepping in and out of puddles. When someone steps into their puddle of grief, they remember all the sadness of the death of the important person. When they step out of the puddle, they find they can still have some fun. The sadness hasn't gone, it is just that they are not in the grieving puddle all the time.

When you have a traumatic bereavement, it is extra hard, and your feelings might fill you up so much that they keep overflowing. As well as feeling very sad, you might feel unsafe, angry, worried or frightened.

What happened might be so hard to think about that you spend a lot of time and energy trying not to think or talk about it. This can get in the way of having fun and doing the things you used to enjoy.



With traumatic bereavement it can feel as though the puddle is so deep it is more like a well and they are stuck in a deep place with lots of difficult thoughts and feelings. This makes it really hard to cope.

### What makes a bereavement traumatic?

What makes a bereavement traumatic is different for

everyone. It is not because the person died in a particular way or at a particular time. It is what the death means for the person who is grieving and how this affects the way they see things. This can have a significant impact on their life. Although everyone in a family might be grieving for the same person, each person's grief may be very different. Someone in the family might need extra support, others might not. It is not your fault if you are struggling and you need extra help.

## Where can I get help?

If you feel that bereavement is extra hard for you or someone you know and you or they are finding it difficult to manage most of the time, you should talk to an adult you trust. Ask the adult to help you find out where you can get support.

These are some suggestions:

- Child Bereavement UK
- Cruse Bereavement Care
- Grief Encounter
- Winston's Wish
- Childhood Bereavement Network map of local services
- NHS mental health services
- Your GP





# A guide for parents and carers

Are you a parent or carer of a child or young person who is struggling following a bereavement? This guide explains traumatic bereavement and helps you to consider if this is what your child is experiencing.

### **Typical grief**

After someone important to a child or young person dies, they will probably experience many difficult emotions and have some days that feel really bad. Over time, most children and young people learn to adjust and their grief subsides as they learn to live with the loss. They may continue to feel very sad at times, but they begin to have some good moments, or even good days when they can enjoy things and get comfort from their memories of the person who died.

One way to think about a more typical grieving process is to imagine a child or young person stepping in and out of puddles of grief. When they step into a puddle, they remember all the sadness of the death. When they step out of the puddle, they find they can still have some fun and connect with the people around them. The sadness hasn't gone, they are just not in the grieving puddle all the time.

### **Traumatic bereavement**

For some children and young people, the way that they understand or think about a death leaves them feeling very unsafe – they experience their loss as a trauma. The trauma gets in the way of the grieving process and blocks their ability to adjust. This is a traumatic bereavement. If a child or young person experiences a traumatic bereavement it will be even more difficult for them and their emotions will be overwhelming more of the time. As well as feeling very sad, they might often feel unsafe, angry, worried, guilty or frightened. What happened and how they understand it may be so hard for them to think about that they spend a lot of time and energy trying not to think or talk about it. This can get in the way of doing things they used to enjoy. It might be hard for them to have better days, or even better moments.

Instead of a puddle of grief, traumatic bereavement can feel more like a well and the child or young person is stuck in a deep place with lots of difficult thoughts and feelings. You might notice that they are struggling to get on with people, to manage strong feelings, to cope at school or that they are feeling very low or anxious.

Being stuck with overwhelming and difficult feelings makes everyday life really tough and can impact mental health. It can be hard for children and young people to get out of the 'well' without extra support.

What makes a bereavement traumatic is very individual. It is not because the person died in a particular way or at a particular time. It is what the death means for the individual and how this meaning affects their life. Although everyone in a family might be grieving for the same person, their grief may be very different. While some in the family might need extra support, others might not. It is not your child's fault if they find this especially difficult and need support.

### Where can I find out more?

If you are worried about your child and feel that they are struggling to manage a lot of the time, you should not try and cope with this on your own.

Look for extra support from a local bereavement service or make an appointment with your child's GP. Ask them to make a referral to NHS mental health services (sometimes known as CAMHS) who can help if the difficulties are impacting on your child's mental health.

If you are also struggling, you can seek help from services including:

- Child Bereavement UK
- Cruse Bereavement
   Care
- Grief Encounter
- Winston's Wish
- Childhood Bereavement Network map of local services
- NHS mental health services
- Your GP







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