

# Grief Matters for Children

## The issue

The death of someone close brings change and challenge into the life of a young person, and can be devastating. Around 1 in 29 children and young people currently of school age have experienced the death of a parent, brother or sister<sup>1</sup>: that's around one per class.

Around 1 in 16 have been bereaved of a friend, and many more are affected by the death of someone else close: 78 per cent of 11- to 16-year-olds report that at least one of their close relatives or friends has died<sup>2</sup>.

A wide range of interrelating factors affect how a particular child responds to bereavement, including their previous experiences and characteristics, the circumstances of the death, their beliefs and culture, their social relationships and the support available to them<sup>3</sup>. The death of someone close affects many aspects of their lives, sometimes for a very long time. As they get older and develop their understanding of the meaning a death has in their lives, young people often revisit their grief, experiencing and expressing it in new ways, particularly at times of further change or loss<sup>4</sup>.

Ideally, children's needs are met in a stable and supportive family, with the help of their usual networks such as school and community groups. Children's outcomes are closely related to how their surviving or bereaved parent is coping<sup>5</sup>. Yet while parents are grieving themselves it can be a huge



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The Childhood Bereavement Network brings together those who work with children and young people when someone important has died. Our Grief Matters for Children campaign wants to make sure that all children, young people and their families can access high quality bereavement support easily, wherever they live and however their special person has died. This paper outlines the support that should be available in each local area.

strain to continue routines and remain available to their children. Following the death of a partner, they will be adjusting to new responsibilities of life as a single parent: the death of a child poses different challenges. When a child's main carer dies, they may have to move to be brought up by a more distant family member or friend, which brings additional pressures.

When children and young people's support needs go unrecognised, bereavement and the changes that accompany it can make them more vulnerable to poor outcomes, particularly in disadvantaged circumstances<sup>3</sup>.

## Risks of bereavement

### Health

Many children experience **anxiety** following a death and they are at increased risk of **depressive symptoms**.<sup>2</sup> Those bereaved of their parent experience more **physical health symptoms, accidents and serious illnesses**<sup>5</sup> than their peers. They are more likely to take **risks with their health**<sup>6,7</sup> and to **die early**.<sup>8,7</sup> They have an increased risk of **mental disorder, suicide attempt and hospitalization for a psychiatric disorder**.<sup>9</sup>

There is increasing evidence of a 'late effect' of bereavement in childhood, with differences between them and their peers more apparent two years after the death than in the early months.<sup>5</sup> Bereavement may have impacts into adulthood as well as childhood.

### Education and employment

Children, parents and teachers report **difficulties at school** arising from poor concentration, lack of interest or bullying. Bereaved children have **lower average exam scores**<sup>11</sup> than their peers, and are more likely to be **unemployed at 30**.<sup>12</sup> However, 'opposite effects' may emerge as some young people strive particularly hard to succeed.<sup>3</sup>

### Criminal and disruptive behaviour

Bereaved young people are **overrepresented in the criminal justice system**.<sup>13</sup> The death of a parent by the age of 26 increases the risk of a criminal **conviction for a violent offence**.<sup>9</sup>

'Family bereavement had continuous, cumulative effects on children's emotional and social well-being, long after the event happened'.<sup>10</sup>

## What is needed

In each area, local children's and health services should work with other services to make sure:

- I they know how many children and young people have been bereaved of a parent or carer, brother or sister that year, and what services they need
- I all children, young people and their families can access high quality services before and after the death of someone close (see **figure 1**)
- I adults who work with children and young people get training and support to understand how they might help someone who has been bereaved, and when and where to find extra support.

To play their part, each school should have:

- I sensitive and flexible people and systems that provide support and information for pupils and staff when someone dies
- I opportunities to learn about death and bereavement as part of life.

## Numbers

No official data is collected on the numbers of children and young people bereaved each year, but we have made estimates based on mortality statistics and local data, which can be found at <http://www.childhoodbereavementnetwork.org.uk/research/key-statistics.aspx>

## High quality services

All services working with children and families and with death and dying have a role to play in supporting grieving children and those caring for them. This includes schools, children's centres, hospitals, hospices, GPs, CAMHS and specialist childhood bereavement services.

These local specialist child bereavement services offer direct support to children and families as well as ancillary services such as training and consultancy. Some work with particular groups (eg the children of patients at a particular hospice), while others work with all children, whatever the cause of death, be it anticipated, sudden, violent or traumatic.

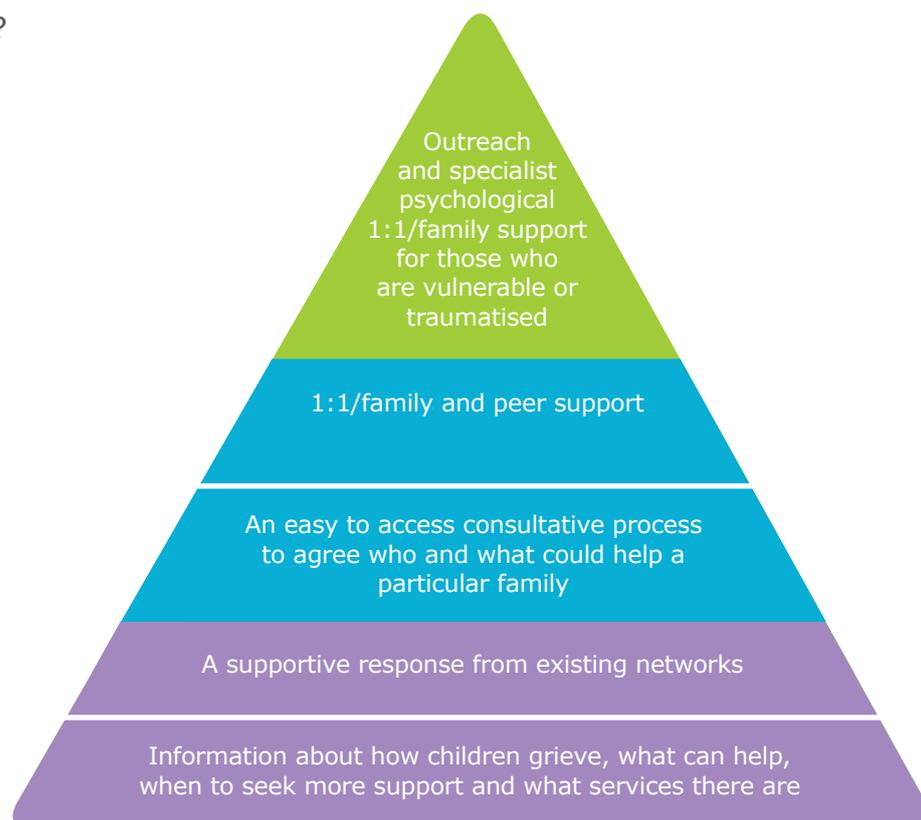
Services work with families to assess how the children are doing, whether extra help is needed, and what type of support would be best. This tailored support builds on families' strengths and prevents difficulties from escalating. For children or parents with mental health difficulties that pre-date or accompany their bereavement, onward referral to psychological therapy services may be most appropriate.

Figure 1 outlines the support that should be available, who is likely to need it, and who should provide it. This maps on to the 3-component model of support recommended in the NICE guidelines.

Figure 1: What good provision for bereaved children and young people and their parents and carers looks like

Who will need this?

- 3 **Few**
- 2 **Some**
- 1 **All**



Children, young people and their parents are clear about the benefits which specialist childhood bereavement services can bring: helping them to make sense of what has happened and what is happening now; supporting them to communicate and understand one another's grief; and helping them to feel less isolated and more in control. Most services are based in the voluntary sector and provision is patchy. Even where services exist, they rely heavily on donations, fundraising and volunteers, often struggling to keep their services afloat and they may not be able to cope without extra resources if their profile rises and referrals and demand increase. For details of services, and for guidance in setting up a new service, visit [www.childhoodbereavementnetwork.org.uk](http://www.childhoodbereavementnetwork.org.uk)

Local children's services and health services should

- | include bereaved children and young people among potentially vulnerable groups whose diverse needs should be assessed
- | plan and commission services in response to the needs identified
- | include bereavement support in plans for children who are already vulnerable (e.g. those in custody, those in public care).

Inspection frameworks for children's services should examine how well bereavement support is provided locally.

**We're unbelievably good at coping when we get help.**  
(Bereaved young person)

## Training for the children's workforce

Anyone working on a day-to-day basis with children and young people is likely to come into contact with those who are facing or who have experienced bereavement. Adults are often anxious about how to respond to children before or after a death in the family, and may worry about making things worse. If this inhibits them, it can mean that children miss out on support and are left alone with their fears and feelings.

Training and support increases practitioners' understanding of bereavement in childhood and their knowledge of practical ideas for offering support in particular settings, complementing their existing skills in working with children. This increases their confidence and prepares them to respond appropriately to the diverse needs of bereaved children and families, including making referrals to childhood bereavement services whose staff will have had more in-depth training.

Initial training frameworks for the children's workforce should include an awareness of bereavement, and continuing professional development opportunities should be available in every area.

**I had a good strong family, we all pulled together and grieved as a family, but I feel for young people and children who might not have this and will need help in other ways.** (Bereaved young person)

## What do we mean by high quality support?

All Childhood Bereavement Network members believe that all children and young people have the right to information, guidance and support to enable them to manage the impact of death on their lives. We believe that any information, guidance and support offered to children should:

- | acknowledge the child's grief and experience of loss as a result of death
- | be responsive to the child's needs, views and opinions
- | respect the child's family and immediate social situation, and their culture, language, beliefs and religious background
- | seek to promote self-esteem and self confidence, and develop communication, decision-making and other life skills

If this information, guidance or support is offered as a service by an organisation or in a professional context, it should be:

- | provided by people who have had appropriate training and are adequately supported
- | provided in an appropriately supportive, safe and non-discriminatory context
- | regularly monitored, evaluated and reviewed.

## Pastoral support in school

Up to 70 per cent of primary schools have at least one recently bereaved pupil on their roll.<sup>14</sup> To promote the well-being of bereaved children and young people, a lead person should take responsibility for ensuring that pastoral support is proactive, flexible and involves:

- | checking with the child and their family how they would like support to be provided
- | a system for managing and communicating important information about a bereavement, including across transitions from one class or school to another
- | bereavement being included in relevant plans and policies
- | staff training and support to increase their awareness and confidence, helping them understand how to respond helpfully, and where to get extra support
- | swift and easy referral to a range of specialist provision

Schools which have experienced a death in the school community often wish they had been better prepared. Setting out clearly how the school will respond to the death of a pupil, parent or staff member or a critical incident can be very helpful if and when it happens.

## Death education

Given the numbers of children who will experience bereavement during childhood, there is a strong case for them to learn about common feelings and reactions to loss, coping strategies, and where to seek help. This could improve peer support between children, reducing the isolation – and outright bullying – which some can experience following a bereavement, and helping children to find help for themselves or their friends.

Children and young people are naturally interested in death and bereavement and often raise questions about this issue. Many young people – including those who haven't been bereaved – are keen for death and bereavement to be incorporated into the curriculum although they are clear that this needs to be handled sensitively. 75% adult respondents to a CBN survey said they wished their school had taught them about coping with bereavement.

These topics can be covered in Personal, Social, Health and Economic education (PSHE): other opportunities exist in the RE, citizenship, English and biology curricula.

As with other sensitive topics, teachers are often anxious about addressing death and bereavement in the classroom. Lesson plans, guidance and training are available from local and national child bereavement services, which can help staff deliver lessons effectively and confidently.

Bereaved young people's suggestions about what could help to make school a good place to learn about death and bereavement included teachers checking with young people who've recently been bereaved whether they are happy to join in the lesson, no pressure to talk about personal experiences, somewhere quiet to go or someone to talk to after the lesson if they are feeling upset, telling them where they can get further help and support.

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