Support for Grieving Students

A Guide for Educators

from the American Federation of Teachers and the Chicago Teachers Union
Introduction

In spring 2013, the American Federation of Teachers (AFT) offered a grant to Chicago Teachers Union (CTU) to develop a program that would help address the needs of students who are dealing with residual grief and loss. A committee was formed of social workers, school nurses and school psychologists to see where this effort would be most beneficial. Given the well established work of the CPS Crisis Team, the committee felt that these efforts could best be utilized by compiling teacher-friendly professional development materials that look at the long-term follow-up of the effects of trauma and loss. It is our hope that these restorative activities and materials will assist the classroom teacher in supporting the grieving child over the course of the school year. Teachers and staff may find the following materials particularly helpful:

“Tips for talking with and helping children and youth cope after a disaster or traumatic event: A guide for parents, teachers and caregivers.”

Materials located on the National Center for School Crisis and Bereavement website.
www.schoolcrisiscenter.org

This project is being funded by the AFT in cooperation with Dr. David Schonfeld, Director of the National Center for School Crisis and Bereavement (NCSCB.) This packet is a tool developed to help teachers and school staff. School-based clinical support staff are available for consultation and support.

Clinicians Committee Members:

Brian Apollo  Maribeth Doody  Delores Jackson
Paula Leifer  Cathy Mizicko  Connie Senter
Bonnie Smith  Regina Trice Carter
Susan Hickey, Chair

Guiding principles

Working with children who are in the process of experiencing bereavement is both a difficult and rewarding task. While for teachers this is a situation that is often stressful and demands a degree of emotional availability, there are many rewards. The role you play can provide lifelong lessons for the children in your class, and can mean the difference between being able to reach and teach the bereaved child versus facing the behaviors of the angry and disruptive child whose needs have not been effectively acknowledged or addressed. Children need guidance to understand that death is not something they control, that they are not responsible for the death of their loved ones. At the same time, it is our mutual responsibility to move on and adjust, to support each other as we do. This last point, the concept of moving on, is critically important.

Many variables affect the child’s response to death. For children who have experienced multiple traumas, new traumas can open old wounds and exacerbate the healing process. The child’s age and stage of development affects their understanding of and responses to death. Younger children have difficulty understanding the finality of death; they sometimes want to join their loved ones. It is important to help them understand what death means.
The manner of death is another important factor: Has the individual died after a long, lingering illness? Is this a sudden, unexpected and accidental death; or a sudden and violent death? Each presents unique challenges to the child and to the caring professionals who support them.

To better understand the emotional turmoil bereaved children can experience, it might be helpful at this point to consider the framework developed by the late Dr. Elisabeth Kubler-Ross, in her pioneering work on death and dying. Dr. Kubler-Ross was a psychiatrist who described five stages in the grieving process: denial, anger, bargaining, depression and acceptance.

In working with the bereaved child, school staff may observe all or some of these emotional states. Dr. Kubler-Ross was careful to point out that this is a lengthy process and not a very orderly one. Individuals may go back and forth through stages, they may not experience every stage. Another perspective on this process comes from our colleagues at Vitas Innovative Hospice Care: “Sad--Mad--Bad.”

Anger is one of the most common responses to loss, especially in children. It is therefore of great importance to teach and model appropriate vs. inappropriate ways of expressing this anger and other feelings.

Common behaviors in bereaved children include:

- Distractibility
- Anger
- Complaints of physical pain
- Lower grades
- Sleep problems
- Withdrawal, isolative behavior
- Argumentative, irritable
- Risk taking behaviors
- Frequently absent
- Slovenly or careless appearance.

What can the classroom teacher do?

What techniques and strategies can be employed?

- Involve the whole class, this is a community effort. Inspire a trusting, supportive classroom culture where it’s okay to be upset sometimes, where children help each other and, in turn, can accept help themselves. There is no one way to do this and teachers can draw on their own style in doing this.

- Check in / Check out is a model that has been used to address a variety of behavioral concerns: Make the classroom a healing space for all children. The classroom teacher can devote the first/last ten minutes of each day to check on the student’s grief process. Start the day by asking questions concerning student present state of mind. Ex. How was the walk to school? Did you eat this morning (what)? Who is feeling sad and why? At the end of the day check on how they felt the day went? What would have made it better? Take suggestions from the class of some fun things to do after school. Observe who might need more support and refer as needed.

- Incorporate healing strategies into everyday classroom activities. Suggestions include: writing short essays or stories that include the lost member of the class/family; drawing and use of crafts that express feelings for the joy the lost member brought to their life/or how they remember them now; producing a memorial, children may find it easier to express themselves through art.

- Model appropriate vs. inappropriate ways of handling anger. Do activities with the class to brainstorm and role play stress and anger management strategies. Students should practice expressing their feelings in appropriate ways with positive redirection when needed. Practice/plan what to do with anger or when someone says things you do not like. Have students practice what they should do instead of discussing what students should not do.

- Most importantly, be an active, empathic listener. Sometimes a grieving student simply needs a sympathetic ear. Remember students spend a majority of the day in school. The school/classroom is viewed as familiar and supportive. The teacher can allow the whole class to process loss together. The teacher understands developmental issues and can provide support beyond the family. The teacher should take advantage of teachable moments in the class that benefit the classroom or the individual student. The classroom intervention can make the student feel less isolated, focus on academics, and talk with and receive support from peers.

- The classroom teacher should develop a schedule to check on the student’s social/emotional well being. After the crisis, check the classroom 30 days after, perhaps 60 days afterward, and then annually to keep communication open as it relates to loss. If there are changes in academics, attitude, behavior and grades take the student aside to find out what’s wrong.
When should a teacher seek special help for a child?

Immediately seek help if you suspect suicidal or self-harming behaviors.

Beyond the issue of self-harming behaviors, children can become “stuck,” unable to progress or move forward due to prolonged, extreme or complicated grief. What are the indicators that a child is experiencing complicated grief and may require therapeutic intervention?

The following is a list of potential symptoms of adjustment reactions provided by National Center for School Crisis and Bereavement. In their most extreme form, these could lead to development of post traumatic stress disorder. Consult with your school counselor, social worker, psychologist, occupational therapist, or nurse when you observe these or other maladaptive behaviors over an extended period of time in an affected student:

- Sleep problems, including nightmares
- Separation anxiety and school avoidance
- Anxiety and trauma-related fears
- Extreme Anger and irritability
- Difficulties with concentration
- Deterioration in academic performance
- Regression (acting younger than their actual age)
- Depression; Avoidance of previously enjoyed activities
- Substance abuse
- Somatization

Your school counselor, social worker, psychologist, occupational therapist, or nurse will be able to refer the child to a community agency. They are your best resource.

Resources

“Tips for talking with and helping children cope after a disaster or traumatic event,”
www.samhsa.gov/dtac/docs/KEN01-0093R.pdf

Just for me: Healing activities for children and teens.
campbell.k12.va.us/tes/wpuckette/media/justforme.pdf

National Center for School Crisis and Bereavement: www.schoolcrisiscenter.org

National Alliance for Grieving Children
www.nationalallianceforgrievingchildren.org


“After a Loved One Dies-How Children Grieve”
www.nylgriefguide.com

National Child Traumatic Stress Network
www.nctsnet.org

CPS Crisis Intervention Manual, June 2012
cpsdiverselearner.org/index.php?option=com_docman&gid=331


Safe Start Center: website looking at children’s exposure to violence.
www.safestartcenter.org
About this pamphlet

We know that students in our public schools too often face violence and loss. As adults who work with and care for these children, we are acutely aware of the toll these tragedies take on them, including difficulty learning and difficulty controlling behavior. This brochure is for you to use as a resource when you are faced with students who are dealing with loss and grief issues.

The Chicago Teachers Union was asked by the American Federation of Teachers to be part of this pilot project to support educators dealing with student bereavement. We proudly incorporated a committee of rank-and-file clinicians—school nurses, psychologists, occupational therapists and social workers who are actively serving students—to develop a plan for providing these resources in the 2013–14 school year. Their first event at the beginning of the school year was a presentation by Dr. David Schonfeld from the National Center for School Crisis and Bereavement to all clinicians on the topic of long term effects of grief on students. We have developed this booklet in support of the second phase of our project, in which our committee members hold workshops in every school to share this valuable information and answer questions for educators who care for students undergoing grief.

As educators who work every day with students in our public schools you are the experts on teaching and learning. I want to thank the many clinicians who contributed their knowledge in producing this work. We are proud to tap the expertise of our own members so that we may share it as sisters and brothers.

Karen GJ Lewis, NBCT
President, Chicago Teachers Union
American Federation of Teachers Local 1