

DEATH AT SCHOOL

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All across America young children and adolescents are stunned as they witness the shootings of classmates and teachers in their school. Children who witness the death or physical injury of another person may have repetitive thoughts and images of the sights and sounds of their experience. These children may react with heightened emotion or physical complaints as they think about the experience. Children's expectations and decisions about the future may be altered. They may have acute difficulty concentrating in school. Children may feel guilty for being alive, for having endangered someone in some way, or for not having been able to intervene. Guilt has been shown to increase the number of traumatic symptoms and to complicate recovery.

Studies have shown that children whose close friends are killed and children who directly witnessed the crime are more likely to have an aggravated and prolonged grief reaction.

The interaction of trauma and grief makes recovery more complex. Children not only grieve, but also are frightened and disturbed by the intensity of their own grief reaction. Thoughts of the deceased may become reminders of the trauma surrounding the death. Sadly, many are not invited to talk about what happened, because their ability to alternate play or activities with grieving causes people to assume they are coping better than they really are.

The UCLA Prevention/Intervention Program has established services for children exposed to violence, trauma or sudden bereavement. They distinguish between grief reactions and post-traumatic stress reaction in children.

In children with post- traumatic stress reaction, anxiety over the trauma takes a psychological priority over mourning.

For example, disturbing intrusions of specific, vivid images or sounds may disturb normal life experience. Those who witnessed injury or death and or heard cries for help are especially vulnerable.

- ≈ **Traumatic dreams of the event can include repetitions of life threat and may interfere with restful sleep or make the child afraid to go to sleep.**
- ≈ **Young children may repeat traumatic themes in play.**
- ≈ **Traumatized children may show a decrease in participation in enjoyable activities.**
- ≈ **They can become distant and withdrawn.** They may fear being overwhelmed by their feelings, so may avoid allowing themselves to feel at all.
- ≈ **Other new behaviors may include exaggerated startle responses, nervousness, and clinging.** They may avoid reminders of the event, such as the location where the death or injury occurred.
- ≈

Now that we know this lets say there has been a crisis at school. The crisis team has been dispatched to do their assigned jobs. Now what do we do with the children, teachers, school counselors, administrators? How do we help THEM through the crisis?

Sitting in a room with tissues is not enough. Teachers, school nurses and counselors are frequently willing to assume the surrogate parent role when a death or violent act occur at school, but most feel insecure when confronted with death. They may be afraid that they will say or do “the wrong thing”.

The school professional's goal in dealing with death should be three fold.

- 1. To acknowledge the death honestly**
- 2. To allow children to ventilate their feelings**
- 3. To offer an outlet for the children's desire to help.**

Pynoos and Nader suggest the following tasks for school professionals when trauma occurs at or near a school.

Administrators

- ≈ After the initial emergency response, administrators need to meet immediately with mental health professionals to review what has happened.
- ≈ Responding to the psychological needs of both staff and students (and don't forget the administrator of that school) as soon as possible is the best prevention for the development of post traumatic stress.
- ≈ Mental health professionals or crisis response teams trained to handle trauma can be very beneficial in enabling the school staff to ventilate their own grief and face personal repercussions.
- ≈ Open communication among all school staff and sensitivity to the impact of the trauma is critical to the implementation of a school-wide program.

Support Staff

The school nurse plays a critical role in monitoring reactions of traumatized children because the children often report somatic complaints following trauma. In addition, severe stress increases the likelihood of illness.

- ≈ A flow chart to keep track of the frequency of visits and complaints by each affected child may help in identifying children in continued distress. It is important for children to be told that grief has physical manifestations, which vary in length and intensity for each person.

The school counselor or other mental health worker needs to be systematic in approach.

- ≈ It is important to note common traumatic reminders among the student, frequent distortions of the facts about the trauma, common intrusive recollections, and how the trauma is integrated by children at different levels of cognitive and affective development. As these are noted, they may be dealt with in-group settings. A new role for counselors may become that of bridging any feelings of estrangement or tensions, which emerge among different groups of school personnel.

Teachers

Children carefully observe their teacher's response to a traumatic event.

- = **Teachers need opportunities offered by counselors to ventilate their own grief and frustration.** Proper safeguards need to be implemented to reduce concern that these debriefing opportunities will be ill thought of by superiors.
- = **In order for teachers to provide accurate information to their students and offer opportunities for ventilation of feelings, they must be part of the feedback loop as new information is available.**
- = **Teachers need to be informed of post-traumatic stress symptoms so that they can make appropriate referrals to counselors.** The most common reaction in children may be unexpected aggressive behavior, which, if not linked with the trauma, could lead to premature labeling of child having a conduct disorder. Nonparticipation and avoidance behaviors can also be cause for referral.

Death of a Classmate or Teacher

The death of a classmate or teacher can be almost as devastating as the death of a family member and should be acknowledged as such. If the teacher has died rather than abruptly introducing an unknown substitute, the principal, nurse or counselor should take over the class and assist in transitioning the children to a new and carefully chosen teacher.

1. **The child or teacher's desk should not be removed.** Leaving it as it was for several days will help acknowledge the death. Children may wish to discuss how the desk reminds them of the deceased. Some classrooms have voted to keep the desk through the remainder of the school year. The children then may periodically leave items such as flowers or notes on the desk as memorials.
2. **Get as much information as possible from the family or school officials** and ask their permission to share it with the class. Ask if the family has any objections to students and staff attending the funeral.
3. **Tell the class before telling the rest of the school.** Ask the class if they would like to attend the funeral if their parents give permission.
4. **Tell the truth, allow for ventilation, and affirm all expressions.** Because the classmates knew the deceased classmate or teacher intimately, their initial focus may be on him or her rather than their own feelings. The principal, nurse or counselor, after explaining what happened, might talk about fond memories of the deceased and ask the children to do the same.

Some children, however, will be too numb to reminisce because they are so preoccupied with the death. Some may focus more on their personal loss, such as the child who, after his teacher suddenly died, asked, "Why couldn't she wait until after the field trip?" Such statements are genuine expressions of loss. If the

children won't talk, use the "write a paragraph or draw a picture" exercise to express their memories. Then ask if anyone would like to share their paragraph with the class or explain their picture. Assure them that more time will be allowed so that all will have a chance to talk. Some children are reluctant to talk about their feelings because they fear no one else feels the way they do.

5. **Allow a recess or break after this exercise.** Children grieve intermittently and will not be able to focus on their grieving for extended periods of time. Resume the regular classroom schedule after the break.
6. **The next day, focus on the feelings of the classmates themselves.** Ask for adjectives or phrases to describe how they feel. "I wonder what kind of feelings you or your classmates are feeling now." Affirm all expressions. Putting each adjective or phrase describing a feeling on the chalkboard may help the students feel that their expressions are acceptable. A student may say, "I'm glad it didn't happen to me". That is a very honest response. It should be affirmed, not as being self-centered, but as being honest. If a student begins to cry, let him or her know that it is very normal to feel sad at a time like this. Crying over something that is very sad is not the same as acting like a baby. Sending a tearful child to the office or restroom to regain control may make him/her feel that crying is wrong. It may be more helpful to ask if s/he is crying about the loss and to sit or stand quietly beside the child. If the child indicates a need to leave the room, ask if he or she would like to join you outside the classroom for a few minutes. It is helpful if there are two adults in the room so that the other adult can continue the conversation and provide support for each other. Reassure the child who has left the classroom that it is OK to be quiet for a time when s/he returns.
7. **Discuss the idea of giving the memory pictures or paragraphs to the family** of the deceased classmate or teacher. Point out that many of these memories are unknown to the family because they happened at school. The family will treasure these memories. Those willing may put their name and date on the picture or note and may wish to title what they have created. The class can decide who should deliver them to the family.
8. **Discuss what they will see and hear if the class attends the funeral.** This is especially true for young children. If the school professional is uncomfortable with this task, invite the funeral director to do so. This is a wonderful opportunity for children's questions about the body to be answered.
9. **Later, talk about a memorial for the deceased classmate or teacher.** Placing a photo of the deceased in a prominent place and/or the planting of a memorial tree or flowers may be meaningful.

10. **Watch for trouble signs among the children** such as increased aggression, withdrawal, risk-taking, clumsiness, or regression. After the death of a classmate, one boy began to fall down more frequently. He later explained that he fell to hide his crying because he was sure he was the only one still sad about the death of his classmate.

Middle School and High School

While the same philosophy of dealing with grief holds true for middle and high school students, procedures may differ because of frequent classroom changes. Also, older children are not as open with their feelings as younger children. They may be embarrassed about expressing their feelings, especially boys.

After a death, a teacher, nurse or counselor who is especially close to the bereaved child might tell the child privately that they would like to talk with him or her. It is not enough to say, "If you ever need to talk, let me know." Try instead "I know what has happened, and I know it must be very difficult for you. Even though you may not agree, I think it's important that we talk about it to be sure you're going to be okay. These are the times I can spend with you. Which do you prefer?". If the teacher or counselor has difficulty getting the student to talk about it, a back door technique is to ask how the student's parent, sibling, or friends are handling the death.

Most youth do not talk about their grief at home because they don't want to upset others. They may feel that they have to be strong and take care of their parents who may be more open with their grief. Therefore, close ties with supportive adults at school are very important. If the youth is relating well with an adult outside of the school, the professional might ask frequently if they are still talking about the death and their feelings about it with that person.

Asking to see a photo or looking through a yearbook together might facilitate interaction with a reluctant student. Photos carry underestimated power as symbolic representations of the people we love. They can offer a welcome point of emotional focusing and a break from the strain of direct one-on one conversation. They may also generate sadness and start tears, offering an opportunity to affirm the cleansing and healing nature of grief. Special attention to the possibility of teen suicide following the death of a friend or teacher needs to be addressed.

Pynoos have outlined children's responses to trauma and the "first aid" needed based on age groupings as follows:

Preschool Through Second Grade

Response to Trauma	First Aid
1. Helplessness and passivity	1. Provide support, rest, comfort, food, Opportunity to play or draw.
2. Generalized fear	2. Reestablish adult protective shield.
3. Cognitive Confusion (Do not understand that the danger is over)	3. Give repeated concrete clarifications
4. Difficulty identifying what is	4. Provide emotional labels for common

- Is bothering them.**
- 5. Lack of verbalizations-**
selective mutism, repetitive nonverbal
Traumatic play, unvoiced questions
 - 6. Attributing magical qualities to**
Traumatic reminders
 - 7. Sleep disturbances-**
Night terrors, fear of going to
Sleep, fear of being alone
 - 8. Anxious attachment-**
Clinging to parents
 - 9. Regressive symptoms**
Thumb sucking, enuresis, baby-talk
 - 10. Anxieties related to incomplete**
Understanding about death,
Fantasies of “fixing up” the dead
- Reactions.**
- 5. Help to verbalize general feelings and**
complaints.
 - 6. Separate what happened from physical**
reminders
 - 7. Encourage them to talk with parents**
and school notify parents
 - 8. Provide consistent caretaking**
 - 9. Tolerate regressing symptoms in a**
time limited manner.
 - 10. Give explanations about the physical**
reality of death.

Third through Fifth Grade

- Response to Trauma**
- 1. Preoccupation with their own actions**
During the event; issues of guilt and
Responsibility
 - 2. Specific fears, triggered by traumatic**
Reminders
 - 3. Retelling and replaying of the event**
 - 4. Fear of being overwhelmed by their**
Feelings- crying or being angry
 - 5. Impaired concentration and learning**
- First Aid**
- 1. Help to express their secretive**
imaginings about the event.
 - 2. Help to identify and articulate**
traumatic reminders and anxieties;
Encourage them not to generalize.
 - 3. Permit them to talk and act it out;**
Address distortions, and acknowledge
Normality of feelings and reactions
 - 4. Encourage expression of fear, anger,**
sadness, in your supportive presence.
 - 5. Encourage letting teachers know when**
Thoughts and feelings interfere with
Learning

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| 6. Sleep disturbances
Bad dreams, fear of sleeping alone | 6. Support them in reporting dreams, provide information About why we have bad dreams |
| 7. Concerns about their own and others Safety. | 7. Help to share worries, reassure with Realistic information |
| 8. Altered and inconsistent behavior there
Unusually aggressive, recklessness | 8. Help to cope with the challenge to own impulse control (acknowledge- "It must be hard to feel so angry.") |
| 9. Somatic complaints | 9. Help identify the physical sensations They felt during the event and link When possible |
| 10. Hesitation to disturb parent with Own anxieties | 10. Offer to meet with children and parent, to help children let parents Know how they feel. |
| 11. Concern for other victims and their Family's | 11. Encourage constructive activities on behalf of the injured or deceased |
| 12. Feeling disturbed, confused and Frightened by their grief responses, Fear of ghost's | 12. Help to retain positive memories as they work through the more intrusive traumatic memories |

Adolescents (sixth grade and up)
Response to Trauma

First Aid

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| 1. Detachment, shame, and guilt | 1. Encourage discussion of the event, Feelings about it, and realistic Expectations of what could have been Done |
| 2. Self-consciousness about their fears, Sense of vulnerability, fear of being Labeled abnormal support | 2. Help them understand the adult nature of these feelings, encourage peer understanding and |
| 3. Post-traumatic acting out behavior- Drug use, delinquent behavior, and sexual behavior as an effort to numb their responses to, or to voice their anger Over, the event | 3. Help to understand the acting out
Drug use, delinquent behavior, and sexual behavior as an effort to numb their responses to, or to voice their anger Over, the event |

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| <p>4. Life threatening reenactment, self-Destructive or accident prone behavior</p> <p>5. Abrupt shifts in interpersonal Relationships</p> <p>6. Desires and plans to take revenge</p> <p>7. Radical changes in life attitudes which Influence identity formation</p> <p>8. Premature entrance into adulthood- (Leaving school, getting married), or Reluctance to leave home
the</p> | <p>4. Address the impulse toward reckless behavior in the acute aftermath, link It to the challenge to impulse control Associated with violence</p> <p>5. Discuss the expectable strain on relationships with family and peers</p> <p>6. Elicit their actual plans of revenge- Address the realistic consequences of These actions, encourage constructive Alternatives that lessen the traumatic Sense of helplessness</p> <p>7. Link attitude changes to the event's impact</p> <p>8. Encourage postponing radical decisions in order to allow time to work through their responses to Event and to grieve</p> |
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Family

These suggest how “first aid” may be administered to children in the family and could be mailed home to families after a trauma.

- 1. Give children special and directed support by keeping things fairly structured and adjusting for fears, especially at bedtime.**
- 2. Help re-establish a sense of safety by assuring that the house is locked, and that the child know the parents whereabouts at all times. This may mean transporting to and from school for a while.**
- 3. Offer reassurance when traumatic reminders intrude thinking, feeling, or behavior.**
- 4. Validate the expression of all feelings by tolerating them and not dismissing them.**

Predict and Prepare

Preparation for handling deaths at school, before a trauma happens, is essential. It is the only way to assure rapid and sensitive handling of deaths invading the psychological sanctity of schools. Mental health professionals might be engaged to teach small group techniques to teachers, so that student groups could be quickly organized with skilled leaders if a tragedy occurs. In-service training programs like this for teachers

on handling grief and loss should be elevated to necessity rather than choice. Teachers can learn how to use art, musical expression, poetry and storytelling as expressive outlets for grieving or traumatized children.

No one formula will fit all children all the time. School professionals must be patient and flexible, understanding that grief and recovery from trauma take a long time and could easily resurface as holidays and celebrations arise. It is not easy for children and it is not easy for the adults who work with them. Expect some children to exhibit trouble signs for weeks and months. Above all, continue to communicate honestly and provide the children with a model for expressing their feelings openly. To do so is to offer them a treasure.

Books for Children

About Grief

Lifetimes – Bryan Mellonie and Robert Ingpen
When People Die- Joanne Bernstein
Kids Book about Death and Dying – Eric Rolfes

About Death of a Friend

Dusty was my Friend – Andrea F. Clardy
Bridge to Teribithia- Katherine Paterson

Books for Adults

No Time for Goodbyes: Coping with Sorrow, Anger, and Injustice After a Tragic Death - Janice Harris Lord
Beyond Sympathy: How to Help Another Through Injury, Illness, or Loss – Janice Harris Lord
How Do We Tell the Children? – Dan Schaeffer and Christian Lyons
Talking about Death: A Dialogue Between Parent and Child- Earl A. Grollman