Best practice guidance

Supporting suddenly bereaved children and young people

This report highlights research and best practice as presented at two Brake seminars run through its Sudden initiative, on supporting suddenly bereaved children and young people, in October and November 2014. The seminars were sponsored by Slater and Gordon Lawyers. This report is produced for the benefit of Sudden subscribers and event participants.

To subscribe to Brake’s Sudden initiative for free, and receive regular e-bulletins with the latest research and initiatives relevant to caring for people bereaved by sudden death, as well as updates and discounts on events and resources, go to sudden.org.
Brake’s work supporting suddenly bereaved children and young people

Anna Kilshaw, helpline supervisor, Brake

Brake’s support services include a freephone, accredited helpline [0808 8000 401] and range of literature for people who have been bereaved or seriously injured in road crashes and professionals working with them. See brake.org.uk/support.

Brake also operates Sudden, an initiative sharing best practice, research and tools among professionals working with people following any type of sudden bereavement. This includes providing literature on coping with grief for adults and children bereaved by any type of sudden death, such as murder or drowning. See sudden.org.

I’d like to start by explaining briefly how sudden and traumatic bereavement impacts on children. I’ll focus on what Brake is doing to support bereaved children, particularly through our literature, but also through our helpline for road crash victims. Finally, I’ll outline some of the ways you might be able to offer support within your role when the worst happens.

Sudden’s mission

Sudden is an initiative by Brake, the road safety charity, which aims to:

• increase awareness and understanding of the suffering of suddenly bereaved people and their support needs;

• help professionals and carers provide best practice services for suddenly bereaved people that meet their support needs, by sharing guidance, initiatives and research and running training, networking and professional development opportunities;

• support and encourage partnerships and sharing of best practice between organisations caring for specific groups of suddenly bereaved people, such as murder victims, suicide victims, and road death victims; and

• help suddenly bereaved people access specialist care through the provision of free information and advice.

Sudden death and the impact on children

A sudden death is devastating for children and their families. There is no time to prepare or say goodbye. In many cases the death is violent and horrific; such as when someone dies in a road crash, or commits suicide. In many cases the person who dies is a parent, brother or sister, leaving behind a bereft family.

Like adults, children affected by road death and injury need loving support and information. It is often better to tell children things through honest discussion and involve them in decision making rather than keep them in the dark and leave them excluded in an effort to protect them from the truth.

During the first few days and weeks after someone dies suddenly it is normal to suffer awful shock. Children and young people respond to shock in a similar way to adults, but they may express these emotions differently, which can be linked to both their developmental stage as well as their limited experience in dealing with traumatic situations. They will also grieve in different ways at different times.

They may cry, get angry, be quiet, be noisy, talk about the person who died, not talk about them, and play or behave as though nothing has happened. They may suddenly switch from one reaction to another. All these reactions and many more are normal responses in sudden bereavement.

The types of reactions children may experience include:

• Difficulty comprehending death – particularly, depending on the age of the child, it can be hard to understand the finality of death and the fact they will never be able to speak to their loved one again.

• Denial - it’s not uncommon for someone suddenly bereaved to wake in the morning and forget their loved one has died, only to have to remember and re-experience it all over again. This is part of the shock response.

• Shock and physical symptoms – Given children’s limited life experience, particularly young children, they are unlikely to have experienced shock to this degree, which can make it even more frightening. Things like feeling cold and shivery, having no appetite, or feeling physically sick could be particularly distressing and feel very abnormal to a child, despite being a ‘normal’ response to shock.

• Need for information – just as adults often want to know the ‘who’, ‘what’, ‘where’, ‘when’ and ‘whys’ surrounding a death, so do children. This is why clear and open discussions with children are so important following a sudden bereavement.
Amy and Tom books

Brake produces two children’s books and an accompanying guide for each featuring the characters Amy and Tom.

The first is a road crash-specific book aimed at children who have lost a loved one in this way, *Someone has died in a road crash*. Brake had for a long time produced a guide for adults, handed to families by police following every UK road death. *Someone has died in a road crash* was developed to make sure children were not excluded from the grieving process by providing them with their own ‘support guide’. Given Brake’s expertise in the area, and the positive response received on the book, this was then adapted into a book for children affected by any type of sudden death, *Someone has died suddenly*.

The books encourage discussion and honesty within families. They provide opportunities for adults to share information and children to share their thoughts and feelings. The books suggest ways children and their parents or carers can support each other. They give practical tips for ways children can help themselves feel better and remember the person who has died.

The accompanying guides offer a step-by-step guide for adults, explaining the content of the children’s books and offering suggestions on how they can support a grieving child.

The books feature two main characters, Amy and Tom, who have been bereaved. By explaining their experiences, Amy and Tom can help bereaved children feel less alone. The books begin with an introduction to death, shock and sadness. It is difficult for children to comprehend the enormity of death, and to understand why it has happened. The books encourage frank discussions between children and their carers about how the person died and what happens to the body.

These are all things that adults affected by the death might be talking about and having to deal with. However, they are often the kind of topics adults want to protect children from, which can exclude children from the grieving process and be damaging. Children can overhear snippets of conversation and, given their active imaginations, they can imagine things that are even worse than the truth. The chance to have things explained to them in language they can understand is important, along with the opportunity for them to ask questions as they try to process complex information and their emotions.

Within each book there is a section called “Your feelings matter more than anything”, which offers non-prescriptive advice to children about some of the different emotions they may or may not experience, while explaining that these emotions are normal.

It tackles various emotional states and situations, including:

- crying;
- anger and ways to channel this safely;
- guilt and blame, with reassurance that they weren’t to blame;
- isolation, and assuring them they are not alone, as well as making sure that these feelings are not compounded by being excluded by other children;
- things that other people may say, to help make children resilient to sometimes unhelpful comments; and
- not wanting to do anything, helping and encouraging children to be happy and active.

Both Amy and Tom books are available from the Brake shop.

Coping with grief

Brake’s *Coping with grief* booklet is another free resource adapted from our long-running road crash bereavement packs, which is appropriate for adults and young people bereaved through all types of sudden death. It is highly acclaimed in feedback from victims and professionals working with them. It explains common reactions following a sudden death and helps to normalise the way people feel.

It also provides practical advice on how to cope. While it’s not designed for children, it can be a useful way for adults supporting children to understand the emotional impact of sudden death and is suitable for use by older teenagers and young people. Copies of this booklet are available for free from the Brake shop.
**Brake support for road crash victims**

Where a sudden death is as a result of a road crash, Brake can provide a wide range of specialist help and support to families and professionals working with them. We can do this through our literature; our support packs for bereaved families are handed out by police following every UK road death and can be accessed at brake.org.uk/support.

We also offer a range of support through our helpline. This includes:

- providing a listening ear, so callers can talk about what they are going through;
- providing advice on how to cope with the terrible shock and trauma;
- helping callers understand procedures, such as how to seek legal help and court cases;
- liaising with officials on callers’ behalf so their voice can be heard;
- helping callers access face to face support and counselling from appropriate experts;
- putting callers in touch with other support groups (both national and local); and
- advising professionals working with bereaved and injured road crash victims, to help them ensure they are supported.

While we are mainly talking directly to the adults affected, a lot of our calls are from bereaved adults seeking help and advice on how to best support children.

**Other sources of support and info:**

There is a range of specialist child bereavement charities that provide support nationally. There are also in most areas local support services. Through our helpline, Brake often signposts, refers and aids access to additional services, after assessing needs and while providing as much help as we can directly. Helping a family access services appropriate to their needs not only means they get the right support, it can also save that family time trying to research services for themselves at a time when they already have so much to deal with.

Some charities specialise in certain types of sudden death, such as Brake’s work with road crash victims. Often a Google search will provide you with this information and enable you to find out what extra support might be available. If you are signposting families, it is always worth checking the details first. Unfortunately, many charities have had to cease their work or make drastic cuts and this is not always reflected in information online. If you make that initial call, it saves the family the frustration of mentally preparing to talk about their experience only to ring up and find out the service is no longer available.

Some service providers you may be able to refer families to include:

- Childhood Bereavement Network
- Child Bereavement UK
- Grief Encounter
- Rainbows GB
- Hope Again (Cruse Bereavement Care)
- Winston’s Wish
- SAMM [Support After Murder and Manslaughter]
- Victim Support’s Homicide Service
- Survivors of Bereavement by Suicide

**Case study:** Tina Woods, Brake bereaved volunteer

Tina Woods is a Brake volunteer whose son, Finlay, was tragically killed in a car crash in September 2008, aged one, leaving behind Tina and her husband Roger, and their three children: Livvy, who was seven at the time, Dillan, five, and Harvey, four.

It was the end of the school day and Tina and her mum were on their way to pick the children up from school. Finlay was in his pram, which Tina’s mum was pushing. Harvey was holding the pram handles and walking alongside.

As they approached the school, Harvey ran ahead slightly and through the school gates into the playground. Tina skipped ahead to see where he was going because the playground was busy and she was worried about losing him. As Tina passed through the gate she heard a huge crash and found herself propelled through the air. She had been hit from behind and thrown into the playground.

Finlay’s pram was hit by a 4x4, which had crashed through a safety barrier and onto the pavement. It dragged the pram into the pillar of the school gate. Unbelievably, the driver kept on accelerating, despite Finlay being pinned against the post. Tina and other parents pushed in vain to move the car back. Everybody was screaming at the driver to reverse, but she kept on revving forwards. Eventually she had to be pulled from the car. Tina and Finlay were taken to the hospital, but tragically Finlay had died at the scene.

The driver of the 4x4 was drunk and on drugs. She showed no sign of remorse and said to Tina at the scene, “So what? Have I hurt someone then?” She had no tax and was uninsured.

With her children at different ages, they had very different experiences of the attitudes of teachers following Finlay’s death. While some were sympathetic, some gave the impression that they felt that children don’t go through grief.
The reality is that children at different ages grieve in different ways. Events like Christmas and birthdays can trigger a reaction, even years after a death. Unfortunately, teachers in schools didn’t recognise this, and they thought that the children would be fine after a few months.

The process of grieving is a continuous one. As Tina’s oldest son grew older and went to secondary school, and went through puberty, he had more questions, yet didn’t want to ask mum and dad. Life events can be a trigger for experiencing grief. Again, his teachers were not always sympathetic to his needs.

Tina’s experience shows that it is essential for teachers and support staff in school to understand that a death is not simply an event that affects a child for a matter of months, but has an impact for years as the child develops. Teachers must be aware and sensitive to the needs of each individual child, realising that life events can trigger a response and that children might have new questions as they grow. Finally, schools should provide an opportunity for children to ask questions outside of the home.

Case study: Applying knowledge to support a suddenly bereaved child at school

Michelle Johnson, inclusion assistant, Woodmansterne Primary School

I have been working at Woodmansterne Primary School for the last 11 years, as an inclusion assistant and more recently working with children with emotional or home life problems. I am also a bereavement mentor. We recently lost one of our year six pupils and his mother in the summer.

A year ago, I attended a Brake seminar on supporting bereaved children. The speaker who struck a chord with me was a bereaved mother, who spoke about her experiences. She spoke movingly on the lack of support from her surviving child’s school. As well as coming to terms with her own loss, she had to struggle to support her other child. This made me very sad and shocked. I wanted to share the experience in our school so that no other parent would have to go through what she experienced.

No-one expected what would happen to our school, with the death of a pupil and his young mother. But I felt fortunate knowing I had the knowledge and skills to support the children in my school. Furthermore, I was capable of dealing with my own feelings and grief and being kind to myself, hugely important in my role.

I had formed a strong relationship with the pupil who died, helping him deal with his anger issues and his daily school life. As he was about to make the transition to secondary school, I was helping him with this transition.

On a personal note when I realised which pupil had been tragically killed I was in shock and despair. My sadness felt overwhelming but I had responsibilities as a professional to support the children in school, my colleagues and the surviving sibling and his bereaved family.

The school acted immediately as soon as they heard about this tragic event, which happened on a weekend. The immediate steps were:

- Emails sent to all staff in case they hadn’t heard. Many members of staff had already heard on social media, as messages were flying around the community with lots of speculation.
- On Monday morning, there was an urgent meeting of the senior school leadership and governors, followed by a staff meeting. Governors supervised the playground at the start of the school day to allow staff time to digest the news and grieve in their own personal way. However, with all good intentions to accommodate the feelings of all staff, some still had to continue their duties, e.g. breakfast club.
- School recognised that the year six pupils may need extra time, at the start of the school day, to be comforted by their parents. We provided a spare room with refreshments.
- Following conversations with the bereaved family, the headteacher provided an outline script for the teachers. This was to support them in having to tell their class the news. It was paramount that all children were given the same information but at an age-appropriate level. This was so there were no opportunities to gossip and that children would not be fearful around the school if they saw the older children upset.
- The local vicar and educational psychologist (EP) were invited into school to support staff and children. The EP recommended that staff continued to support the children while maintaining some level of normality. This helped to avoid hysteria.
- We invited the Child Bereavement Agency to talk to our year six pupils.
- My colleague, a restorative approach assistant and myself, were on hand at all times to support the children. Children needed the reassurance that we were able to cope with their feelings and to verify that something terrible has changed their lives forever, but that fun things will happen again.
- With a week to go before the end of the summer term, we felt it important that our school events still took place.

We needed the children to end a chapter of their lives with some positive memories. I am proud to say that those year six children showed amazing courage and bravery. They attended an Open Evening and spoke to the bereaved family. They sang at their leavers’ assembly and there wasn’t a dry
eye in the audience. A staff member took the initiative to enquire with the local garden centre if they would support us with planting a tree in memory of this child. They were only too willing to donate the tree, which has been planted in the school grounds.

We were aware that children aged 9-13 are much more aware of the finality of death. Furthermore at this age they are aware of the loss they feel in the present but also of the losses they will experience in the coming months and years when they experience their own milestones and won’t be able to share these with the person who had died – for example, the move to secondary school.

We listened to what the year six pupils wanted. Some of them found sharing their grief with their classmates too overwhelming and were allowed to be taken home. Some found comfort among their peers and requested doing memorial posters. Our sensory garden became a beautiful memorial area. We were also mindful that some children in our school had already suffered the loss of a parent. This triggered sad memories for them, but they were able to refer to their memory boxes for comfort.

We felt it equally important to support the year six parents in managing their child’s grief. Parents were provided information about “How do children grieve”. In response to this, we had many positive emails to the school thanking us for the support given to them.

It became evident that sometimes staff were worried about making things worse or causing upset by mentioning the death. So they were reminded that the worst thing that could happen...already has. Most bereaved children will at some point be very glad to have the chance to talk about what has happened, and will appreciate that a teacher or adult in the school cares enough to ask about them and their feelings.

More recently I have been supporting the other son of the bereaved family. We are mindful that he can have good and bad days. For example, last Tuesday his teacher noticed he was quiet. She tried talking to him but he asked if he could see me. Fortunately I had in my drawer hot chocolate and marshmallows, which put a smile on his face. I gave him the opportunity to talk while I asked about his feelings.

He also shared for memories of his mum and brother to me, which made us giggle. He returned to class in a much better frame of mind.

I found the following tips useful for speaking to young people about death:

**Be honest.** It is not an easy subject for anyone. If you are upset too, do not be afraid to admit it. Model the fact that difficult feelings are ok, and totally normal.

**Use clear language.** Trying to avoid the death by using phrases such as “your loss” and “gone to a better place” can frustrate older children and confuse younger ones.

**Expect questions,** but don’t feel pressured to provide immediate answers. I always struggled with what if they ask me the ‘why’ questions. If there are questions that you are unable to answer, feel able to say so, and promise to look into providing an answer at a later point. There may be some questions where you have to admit defeat; this is ok too.

**Recognise** that the way in which a child reacts to death is dependant on their relationship with the person[s] who died. Following the death of this pupil and his mother, we had to be mindful of his younger sibling who still attended our school. Working in partnership with the extended family, we helped to arrange for this little boy to receive bereavement counselling, which takes place at the school. More recently he has found comfort by asking his teacher if he can come and speak to me when he needs to.

**Don’t assume anything.** Ask the child how they feel, rather than projecting feelings that you might expect them to have.

**Allow time and space** to digest the news. For some, this may be their first experience of someone they know dying.

**Allow for quick changes.** As adults we tend to remain in a feeling or thought for a lot longer than children. Children may be distraught one moment then ask “what’s for lunch?” at another.

**Try to normalise** the feeling that a bereaved young person shares with you. They are probably very worried that they are the only person who has ever felt this way.

**Acknowledge** that some days will be better than others.

**Supporting bereaved children in the classroom**

Nigel Adams, Child Bereavement UK and Cruse Bereavement facilitator

Barry Lyonette, Child Bereavement UK facilitator

Child Bereavement UK supports families and educates professionals when a baby or child dies or is dying, or when a child is facing bereavement. Every year we deliver training to around 5,000 professionals, helping them to better understand the needs of grieving families. The charity has experience in delivering direct services at a growing number of locations across the country: Buckinghamshire, Milton Keynes, Cheshire, Cumbria, Newham and West London. We offer:

- individual, couple and family support sessions;
- parents’ support groups for baby and child death and support through a subsequent pregnancy;
- children and Young People’s groups (CHYPS) for children to attend with adult carers;
• a Young People’s Advisory Group (YPAG) for bereaved young people up to age 25; and
• we also offer consultancy and bespoke solutions for organisations looking to address specific local needs.

Our helpline [0800 02 888 40] responds to more than 1,600 calls each year, and our website receives 10,000 visitors a month. We have produced a range of award-winning resources and books. We offer a schools information pack and downloadable information sheets.

Statistics
• 53 children and young people are bereaved through the death of a parent each day. (Source: Winston’s Wish)
• On average, every school bus will have as passengers two pupils affected by a death. (Source CBN)
• At least one child in every primary school will die as the result of a road crash. (Source DfT)
• One in 100 babies dies at or soon after birth.
• 92% of children and young people will have experienced a significant bereavement by the time they reach 16 years of age. (Ribbens McCarthy, Jessop, 2005)
• With the death of a baby, a stillbirth or miscarriage, the impact is not always acknowledged, but siblings can be devastated and there is a secondary loss in that parents and carers may be unavailable due to their grief.
• There is no hierarchy: even the death of a pet can be important. Most current research concentrates on the death of a parent or sibling; there is little on the death of a peer although for teens/adolescents especially this can be huge.
• More than 70% of schools will have at least bereaved pupil on their roll.
• One in 29 children is bereaved of a parent or sibling – that’s one pupil in every class.

(Information provided by Childhood Bereavement Network and Child Bereavement UK)

Supporting schools
Professionals in schools have a unique role in helping grieving young people.

CBUK offers the following specific support to schools:
- Information and training, including a schools’ information pack
- School liaison
- E-learning package

The way children are treated when someone important in their lives dies has a profound effect on their future ability to manage their lives. Many people acquire baggage when they are young due to a death that was not dealt with properly. Dealing with this is a big responsibility and can be scary for teachers who have little training in the area.

But do not be put off. In many cases, bereaved children and young people do not need expert help, they just need adults who care and who are prepared to share their journey. People who work in schools already have the skills to do this.

The guiding principles
• Children need, want and deserve honesty, truth and choices. Choices include things like attending a funeral or seeing a body. Their school may not be able to provide ‘honesty’, as this is sometimes a parental choice (e.g. telling a child how a person died), but they can point out to a parent the difficulties not being honest may cause, such as schoolmates seeing things on Facebook and the child then feeling deceived.
• You cannot “fix it”. You cannot take away the pain, much as you would like to, but you can be alongside a child and share their journey. This can be emotionally hard, but just by letting them know that you are there for them and able to talk and listen is immensely helpful in itself.
• Grief is a normal, healthy response to loss, but bereavement can make a child feel different. If they are treated differently this can compound their feelings.

Responses to grief
Responses to grief can be physical, educational, social and emotional.

Returning to school
A child returning to school following a bereavement can present certain challenges, such as:
• Working out who knows about the death and who may need to be told
• Their sense of being different
• Possibility of bullying
• Possibility of emotional outbursts
• Possibility of getting behind with work
• Inability to concentrate
• Other impacts on school life
• Possibility of difficulties taking exams

Flexible framework for schools
A school should have a flexible framework or policy to deal with pupil bereavement. Dealing with bereavement on an ad hoc basis becomes stressful for staff and can negatively impact on the child. CBUK have a schools’ information pack that can assist with putting together a framework or policy, as well as offering training at inset days or twilight sessions.
Toolbox
A toolbox is a practical set of tools to have at hand in the event of a death. It can help as something concrete to ground you when all about is a bit of a whirlwind.

For further ideas about how you can support pupils please visit the Child Bereavement UK website.

How understanding of death and effects of bereavement change at different ages

Stephen Regel, director, Centre for Trauma, Resilience and Growth, Nottinghamshire Healthcare NHS Trust

Bereaved families often need support. This is not necessarily counselling, although this might be part of the support they are offered – they need structured social support.

People are often reluctant to seek help if they haven’t been physically affected. Furthermore, where does a GP send a person who is bereaved? There is no easy place for them to fit into the service. People often don’t understand their own reactions to traumatic deaths. It is never a straightforward response – and there are always complications.

It is well known that adults commonly:
• underestimate children’s experiences of bereavement;
• protect the child from further upset by not initiating discussions; and
• avoid discussions because of own distress.

Aged two and under children are usually too young to grasp the concept of death. Children between two and two-and-a-half to three have a slight understanding. Between four and six, they develop a biological rather than psychological understanding; at school age they develop and understanding that life depends on the functions of the body. This biological understanding is a prerequisite for understanding that the body’s organs sustain life and if organs fail than we may die. While there is this increase in cognitive maturity, children of school age find it difficult to understand that death is universal and final.

Children are used to repetition and routine. They have a concrete understanding of death, understanding it in its physical aspects rather than the abstract. This is reflected in the questions that they ask. If they are given information and the opportunity to ask questions, they can demonstrate a more sophisticated understanding.

Death and crisis at different developmental levels

Pre-school
• most helpless and passive;
• reduced capacity for understanding;

• heightened sense of anxiety concerning separations and rejections, more vulnerable after the death of primary carer;
• intense emotional demonstrations;
• regressive behaviour e.g. wetting and soiling, sleep disturbances;
• to some extent protected by reduced capacity to understand; and
• helped by their natural openness.

School age
• decreasing dependence on parents and increasing contact with external world;
• larger repertoire of coping strategies, greater autonomy;
• able to make cognitive ‘plans of action’;
• may be more vulnerable as more may be demanded of them to ‘be strong’;
• schoolwork affected;
• low mood: poor concentration, isolation, reduced cognitive functioning;
• anxiety, guilt, and identification with the lost person; and
• denial and suppression/avoidance seems to increase with age.

Adolescence
• greater autonomy, friends more important;
• many biological, social, psychological, sexual changes, which may be negatively impacted by loss and crisis;
• death of a parent may be stigmatising;
• intensity of feeling may lead to more repression or avoidance of confrontation; and
• increase in risk-taking behaviours may lead to confrontation with parents/authority figures.

Children’s reactions to bereavement

The immediate reactions to bereavement are diverse. Reactions can range from no reactions to strong emotional outbursts. It is not unusual for pre-school children not to react. Some may be so shocked by the idea that someone may be dead or dying, the reaction is one of apparent apathy. If they are present at the death, they may stay at the bedside or scene.

Secondary reactions can include:
• anxiety and fear, including separation anxiety;
• sleep disturbances;
• anger and attention seeking;
• withdrawal and isolation;
• sadness, longing and loss;
• guilt and self-blame;
• play connected to the event;
• disturbing fantasies and reliving of events; and
• thoughts about meaning.

**Risk factors and gender**

Some circumstances or situations present particular risks for the child. These include if the child witnessed a death (particularly one that was due to the violence of another person). A child could have difficult home circumstances – through neglect, or a lack of emotional intelligence – or the parents or carers could be experiencing mental health problems.

Many parents spontaneously mention differences between children of different genders surrounding a bereavement. These differences are more pronounced as they get older, particularly in adolescence. Research suggests that girls acknowledge grief and crisis reactions to a greater extent than boys. Girls have higher levels of expressed emotion, greater difficulty concentrating, became jumpy, etc., whereas boys are more prone to avoidance of thoughts. Grief studies indicate that girls are more sensitive to stress in the family, more concerned about family members and feel more responsibility within the family.

**Support for children following bereavement**

Following bereavement, children can be supported in the following ways:

• use of physical contact and closeness;
• encourage expression of thoughts and questions, accept reactions or lack of reactions;
• importance of giving the child information and facts about the death, contributing to concrete understanding;
• deal with misunderstandings, misconceptions and magical thinking;
• help the child to find personal meaning;
• allow the child to talk, play, re-enact events;
• return to routine and rituals at home and school; and
• communication between school, parents, other services.

**Responses to traumatic bereavement**

Some of the common responses to a traumatic bereavement are:

• sadness, anger and rage, shock, numbing, guilt;
• anxiety, tension and restlessness;
• pervasive fear associated with dread of anticipated violence toward self/others, sense of vulnerability;
• compulsive behaviours of self protection, hypervigilance; and
• compulsive need for a tangible reassurance of family presence and safety of other family members;
• behaviours and emotions directed towards retribution;
• reconstructed memories of an event not witnessed;
• difficulty sleeping, impaired concentration, irritability; and
• mental and behavioural avoidance.

**Early intervention**

The support that families need may include the following:

• providing a structure – creates safety
• stimulate family sharing – provision of factual information
• sharing facts – coherent narratives
• family meaning making
• stimulating open communication – developmentally appropriate – narrative will change with time
• support and guidance – reassurance about immediate distress, future access to support
• information about the likely course of reactions – what they can you expect as individuals and as a family

**Legal and financial support for families following a sudden death**

**Paul Kitson, Slater and Gordon**

For a child or young person, the death of a parent is a truly devastating event. Entitlement to compensation only arises if the death was caused by the negligence of a third party. The situation in the UK for the families of vulnerable road users is different from many other countries: elsewhere, it is usually the case that vulnerable users don’t have to prove negligence, whereas in the UK they do.

The role of the lawyer is to attempt to place a financial value to the loss of a parent. Entitlement to compensation is statutory rather than based upon common law principles. There are two types of claim:

**Law Reform (Miscellaneous Provisions) Act 1934** – brought by the Estate. Pain, suffering and loss of amenity [date of injury to date of death].

Under this Act, a financial claim [special damages] may cover the following costs, from the date of the injury up to the date of death:

• clothing/possessions;
• loss of earnings;
• medical expenses;
• care claim; and
• travelling expenses.

It also covers funeral expenses and probate fees.
Fatal Accidents Claim 1976 – brought by the dependents of the deceased.

This type of claim may include:
- funeral expenses;
- a fixed-amount bereavement award - £12,980;
- past and future dependency based on deceased’s earnings;
- dependency on gifts or luxury items, e.g. birthday and Christmas presents; and
- past and future loss of services, including child minding, help with homework, coaching with sports, and services around the home.

Bereavement award
The law on this is harsh, rigid and unfair. The basic principle of this compensation is to put the claimant back in the same position they would be in if the incident hadn’t occurred. However, the bereavement award is an oddity, and fixed under statute.

By law, the bereavement award is fixed at £12,980. It can be claimed by the wife, husband, or civil partner of the deceased. It cannot be claimed by children, and it cannot be claimed by people who aren’t married or in a civil partnership. The unfairness of this can be illustrated by comparing with other jurisdictions: In England, JW was killed while riding his bicycle. He had a partner, with whom he had two pre-school age girls; however, he was not married to his partner.

The bereavement award was zero. Contrast this to a case in France, where LN was killed riding her bicycle. LN had a partner, but was not married; they had no children. The bereavement award in this case was 30,000 euros for the partner, 30,000 euros for LN’s mother, and 20,000 euros each for her brother and sister.

The unfairness of this means there is an urgent need for reform. The Civil Reform Bill of 2007 proposed reform, but was scrapped by the coalition government.

Secondary victims
If a close relative, or a child, was present at the time of death or in the immediate aftermath, they can claim for their psychiatric injuries. For example, if a relative sees the body of their loved one in the road, this can cause significant trauma and can be claimed as a secondary victim. This is separate from any bereavement award. It covers psychiatric treatment, counselling, and loss of earnings.

Dependency under the FFA 1976
This is normally the most significant aspect of the claim in the event of a fatal crash. It is brought by the dependents of the deceased. It can be claimed by a current or former spouse/civil partner, cohabitee living with the deceased as husband or wife in the same household for two years prior to a death, parents and children. It can include any person who, while not the deceased’s own child, by reason of marriage and civil partnership was treated by the deceased as a child of the family.

In many respects, the law is harsh, and artificial; it is reducing the emotional loss to, in the words of Lord Wright Davis, “a hard matter of pounds, shillings and pence.” As a rule of thumb, it is assumed that a typical family spends its income as 25% for him, 25% for her, 25% on the children, and 25% on joint expenses.

There can also be a financial claim by a child based on the loss of services of a parent. This can be difficult to quantify, but can include items like housework, the school run, and helping with homework (see case study below).

Only one claim can be brought under the Fatal Accidents Act 1976. Damages are apportioned between the surviving spouse and children. Usually the bulk of the award goes to the spouse, because he or she will spend the award for the benefit of his/herself and the children. The amount set aside for the children is invested by the Court until the child reaches maturity.

However, the nature of the award means that, unless the deceased was a very high earner, these claims rarely exceed £1 million. If the deceased was without dependents, the claim will have a very modest value indeed.

Case study: Legal and financial support for families following a sudden death

Steve Hill and Linda Yen Fox, Slater and Gordon

Amy (not her real name) was born at an extremely low birth weight very early in the pregnancy. As a result, she had very severe cerebral palsy. She uses a wheelchair, she had no use of her left arm, is registered blind, had severe learning difficulties and had epilepsy. Amy was cared for by her mum, who she lived with in a council bungalow.

When Amy was 19, her mum died in a car crash. Her aunt was willing to step in to support Amy, but as Amy was over 18 then she couldn’t legally be adopted by her aunt. In any event, her aunt is now terminally ill. As Amy didn’t have the capacity to care for herself, she lost the council bungalow. Amy was moved into a unit for the severely disabled, most of whom were in their fifties or older. It was not a suitable place for a teenage girl.

For a solicitor, what could be done to help Amy? Amy’s mum was her full time carer and had no income of her own. Amy was not financially dependant upon her mother in the sense that she relied upon her earnings. However, the lawyers identified that Amy’s mum was actually providing a total package of accommodation and support for Amy. The claim would need to provide for the following:
Best practice guidance

• housing [to replace the bungalow];
• 24 hour carers – as Amy has epilepsy, she needs care through the night. While her mum could care for her on her own, for paid-for support then two carers are needed. Working time regulations, manual handling regulations plus the holidays of carers, means that a team of carers is required;
• an adapted vehicle, plus a driver;
• a financial deputy, as Amy is not capable of making her own financial decisions; and
• a case manager, to employ the carers and ensure that staff are replaced and emergency cover provided when staff are ill or on holiday, manage appointments and physical therapy.

Amy would have been cared for by her mother until the end of her mother’s natural life. At that point she would have probably moved into state supported living. This requires a large team of people needed to support Amy now that her mum isn’t there, and this is the support that the lawyers are looking to achieve for this bereaved teenager. The case is currently progressing in the High Court in London.

Supporting bereaved children with special educational needs

Rebekah Lawson, family services team lead, Winston’s Wish

A relationship never dies, even if a person does. For bereaved children, it is essential to find a new way for them to love the person who has died.

Acknowledgement must be made of the actual relationship felt by the child, not the relationship as seen from outside. For example, if a child has a carer who dies, this can be a very significant loss even if they are not related. There could be secondary losses following a bereavement, such as the loss of home, finances, family, or interests.

Children with learning difficulties face additional challenges following a bereavement:
• attachment issues;
• cognitive and emotional difficulties;
• cognitive rather than emotional age;
• cascade of events and secondary losses; and
• disenfranchised grief.

Developmental stages of understanding

Zero – two years common reactions:
• experience death as a separation;
• don’t understand concept of death;
• can miss presence of primary care-giver;
• may react to loss with crying or altered sleeping or eating patterns; and
• may become detached and withdrawn.

Three - five years common reactions:
• experience death as a separation;
• don’t understand concept of death;
• don’t understand physical aspects of death;
• expect return of dead person;
• magical thinking / egocentric - sense of responsibility;
• take explanations literally;
• feelings may be acted out in behaviour and play; and
• may ask questions over and over.

Six – nine years common reactions:
• begin to understand death is forever;
• believe death only happens to others;
• curious and confused;
• magical thinking – may think they have caused the death;
• feel ‘different’ to peers;
• strong feelings of loss but may lack vocabulary to express feelings; and
• death as something spooky/scary/fascinating.

Nine - 12 years common reactions:
• understand finality of death;
• curious about physical aspects of death;
• feel ‘different’ to peers;
• death as something spooky/scary/fascinating; and
• have vocabulary to express feelings but may need encouragement to do so.

13 -18 common reactions:
• have an adult understanding of death;
• adult-like expression of grief;
• understand permanence and consequences;
• more aware of future absence of deceased;
• question ‘meaning of life’;
• dependence vs. independence;
• importance of peer group and ’fitting in’;
• all this on top of turmoil of adolescence;
• often thrust into role of comforter; and
• may get involved in risk-taking behaviours.

When talking to a child with learning difficulties about death and bereavement, there are a number of issues to explore:
• Who should be the key worker working with the child and the family? Inform parents who this person is, and keep in contact with the keyworker.

• Where is the child most receptive to new ideas? It might be a quiet room, a pool, or outside. Use this space for talking with the child.

• What should be talked about? Agree with the parents so that you are using the same language and ideas as the family to avoid confusing the child.

• How is new information usually given? Through signs, verbally, or through pictures? Use the same format to talk about illness, death and bereavement.

You will probably need to repeat information a number of times over a long period.

It is essential to proceed at a level, speed and language appropriate to the child. Information given in bite-sized chunks will be easier to absorb. Information has to be repeated as many times as is needed. Watch for reactions to show the child understands, and modify and repeat as needed. Follow the child’s lead: if they indicate they need to talk or have their feelings acknowledged, then this should be encouraged as appropriate. Use consistent language with the child, across home and school for example, to reduce confusion.

Help the child identify and communicate emotions. This can be through games, worksheets, and identifying the feelings of emotions in their body.

For mementoes of the deceased, don’t rely on purely visual mementoes, but include tactile items as well. This could include a ‘comfort cushion’ from scraps of fabric belonging to the person who has died (shirts, dresses, blouses etc.). It is also possible to have a photograph of the person printed on the cushion. The child can cuddle this when they are feeling sad.

To subscribe to Brake’s Sudden initiative for free, and receive regular e-bulletins with the latest research and initiatives relevant to caring for people bereaved by sudden death, as well as updates and discounts on events and resources, go to sudden.org.