



Section 4 Supporting Students Through Trauma Crisis

4.1 Counselling Response Plan - Role Checklists

Administration

- Flexibility is necessary for the Principal (alternate-Cali Berard).
- Confirm tragedy has occurred with appropriate authorities – ask for details.
- Contact School Counsellor and the Superintendent.
- Call members of the Critical Response Team.
- Contact other community resources as needed.
- Inform staff members – use chain calling if necessary.
- With teachers, identify any in-school victims of the situation such as siblings and extended family members.
- Review location of support centre in school and expand if necessary
- Coordinate initial staff meeting for the purpose of information sharing and distribution of support material.
- In consultation with the Counsellor, determine the method of informing students.
- Consider parent meetings, parent support groups and/or sending home a memo to parents.
- Decide who will be the contact person with the family involved (if other than principal) and discuss their role as prime contact person with the family.
- Coordinate debriefing meeting at the end of day one.

Administrative Assistant

- Arrange for substitute teachers for administration and/or other staff.
- Note students/teachers absent on day one. Arrange with administration who should notify those staff and students absent from the school.
- Copy and distribute the Classroom Teachers checklist as well as sections 4.6, 4.7 and 4.8 for the initial staff meeting.
- Arrange for lunch and refreshments for support personnel.
- Prepare name tags for those coming to the school to help.

Counsellor (Alberta Mental Health - Joeleene Broussard)

- Engage community resources as required.
- In consultation with the principal, decide how best to inform the students of the critical incident.
- Provide ongoing support to teachers and other school staff during the day.
- Be prepared to lead initial or end-of-day staff meeting if required.
- Have students who are in need of more intensive support referred to appropriate outside agency.

Classroom Teachers

- Meet with students by homerooms or grade level to inform of critical incident in accordance with the plan communicated in the initial staff meeting. If the classroom teacher has been directly impacted by the tragedy, a member of the Critical Response Team and/or an administrator will meet with the students.
- If possible, a member of the Critical Response Team should accompany the teacher, as the teacher informs the students of the tragedy. This is particularly advisable if the students in your classroom have been directly impacted by the tragedy.

- Note any students who may be in need of extra emotional support, either on day one, or after the initial crisis. Submit names to administration or Counsellor by the end of the first day - sooner if necessary.

When you meet with the class:

- model calmness.
- inform the students that the school has a Critical Response Plan.
- review the known facts and dispel rumours.
- inform them of the support centre location(s).
- reassure them that resource people are available in the school.

- let them know that everyone needs time to process information in trauma response.
- if a suicide occurred, emphasize the loss of the person rather than the nature of the death.

- encourage them to express feelings in whatever way is appropriate for them - all responses are natural. Tell students it is possible that the death may surface experiences or memories for themselves which they are not aware of.

- discuss possible guilt feelings or feelings of responsibility. Tell students that guilt and anger are common trauma response emotions.

- ask the students to be supportive of one another and to escort any friend who is upset to a teacher or to the crisis center.

- encourage the students to discuss their feelings with their parents.

- inform students of the range of normal grief reactions.

- refer to section 4.6 for further information about helping students with grief.

- refer to section 4.7 for lesson ideas when discussing bereavement with students.

- refer to section 4.8 to further your own understanding of grief and mourning.

4.2 Initial Staff Meeting

Modified Plan

If the tragedy occurs during the school day, administration must initiate the Counselling Response Plan immediately and obtain extra support personnel through the school Counsellor and Superintendent. A staff meeting should be called at the earliest opportunity and then follow the steps of the critical response plan as outlined. Otherwise proceed as follows.

An early morning staff meeting with **all** school personnel is imperative when a tragedy has occurred to someone from the school community. During this meeting, the principal (or designate) will:

1. inform the staff of the tragedy and all known facts of the event.
2. introduce members of the Critical Response Team and assure staff that support is there for them and the students.
3. announce any changes to the school day's schedule.
4. inform staff of the location(s) in the school which are available as support centers.
5. allow time for questions from the staff, utilizing Critical Response Team Members in answering questions that may arise.
6. review sections 4.6, 4.7 and 4.8.
7. announce time of end-of-day staff meeting as a time to debrief and bring closure to day one.
8. refer to the remainder of this manual as deemed helpful.

4.3 Day One

1. Those adults meeting with classes to inform them of the tragedy need to:
 - inform students of facts of the event.
 - dispel rumours.

- answer questions whenever possible. Let them know you will find out the answers if you can - be honest in what you don't know.
- indicate the location of the support centre.
- ask them to be supportive of one another and to escort friends who are upset to a teacher or to the counselling/support areas.
- encourage students to discuss their feelings with their parents.

See section 4.7.

2. Staff should be observant of students requiring additional emotional support and make note of the names of these students in order that follow-up intervention can be provided if needed. These names should be passed on to administration or a counsellor at the end-of-day staff meeting. Characteristics of students who should be monitored include:

- anyone who *experienced* traumatic stimuli (i.e., student who witnesses a school incident)
- immediate family members
- relatives
- close friends
- boyfriend/girlfriend
- team mates
- ex-boyfriend(s)/girlfriend(s)
- classmates
- students with active mental health concerns (i.e., suicidal or homicidal ideation, severe depression, anxiety disorder)
- students who abuse drugs and alcohol
- students with a significant emotional tie with the deceased, positive or negative. (This includes any student who was involved in an adversarial relationship with a victim.)
- students that have experienced a recent loss such as death of a parent, sibling, friend
- students with unresolved abuse/trauma
- leaders or over-responsible students who may blame themselves for “not seeing the signs” or not “knowing what to do”
- any that you intuitively suspect may be ‘at risk’ students.

**** It is essential that all staff be informed of this list of students.***

3. Some staff may require additional support, such as:

- a) having a team member with them when they discuss bereavement with the class or,
- b) a referral for counselling.

4. Teachers are encouraged to allow for the expressing of grief in their classes in whatever way and to whatever extent they are comfortable. Teachers are encouraged to return to the normal routine as soon as possible, recognizing that students may periodically need to debrief again.
5. Students may initiate a class discussion about the situation each time a new class meets and students are regrouped. They may need the catharsis of talking as a group to come to terms with their shock and grief. At the beginning of each class, teachers may allow a few minutes for students to talk about their reactions to the event. Teachers should provide a clear transition point before resuming the normal class routine. Students unable to do this should be escorted to the nearest support centre for additional assistance.
6. Students who have been identified as requiring additional emotional support should be contacted by a counsellor.
7. The counsellor or administrative staff coordinates the phone calls to the parents of individual students who are particularly upset during the day. This is ideally done by guidance staff who can explain the student's reaction to the parents and give appropriate advice as to how the parents should handle their son/daughter. (Some may be asked to take the student home for the day.)
8. Whenever possible, clarification of the details surrounding the event should be done through the police, Victim Services or the hospital. Questions that must be clearly responded to are: the cause of death and an explanation of the situation. When a death occurs, either accidental or suicidal, it is essential that contact be made with the bereaved family at the first appropriate opportunity. A designated school **contact** should offer condolences and support to the family. Ongoing communication by the designated **contact** must be maintained with the family to offer continued support. Details of support services available through the school should be relayed to the family through this **contact**.

End-of-Day

Staff Meeting

This meeting is mandatory for all staff members. It should be led by the principal if possible. The school counsellor must be present. The following items should be addressed:

1. Review events of the day.

2. Discuss any new information.
3. Collect names and relevant information for students who may need additional emotional support.
4. Review plans for next day.
5. Ensure support is available for particular teachers who may require assistance.
6. Put Critical Response Team and any other support staff involved on call for day two.

Debriefing

This meeting should follow the staff meeting and be voluntary for staff members. It should be led by a CAPE school counsellor and may follow aspects of the defusing process.

Counselling Response Personnel need to debrief with administration immediately following the staff meeting and debriefing meeting.

4.4 Day Two to Day Four

Day 2

Administration

1. Contact additional resource personnel who were put on-call from day one, as required.
2. Continue to inform staff of new information relating to the event.
3. Relate details of funeral arrangements if known.

Critical Response Team Members

1. Continue meeting with students as individuals and in small groups for support.
2. Follow up on students who were identified as needing additional support the day before.
3. Call parents of these students, if appropriate.
4. Be aware of other students who are showing delayed reactions to the event.
5. Hold a debriefing session for front line staff who have been dealing directly with the crisis. This would usually occur at the end of the day.
6. For students with homicidal ideation, activate the threat/risk protocol (Section 2). For students with suicidal ideation, refer to a counsellor.

Day 3

Administration

1. Phone all parents of additional students identified as requiring extra support.
2. Continue to inform staff of any new information relating to the event. Relate details of funeral arrangements, if known.

Critical Response Team Members

1. Continue to follow-up with identified students.
2. An informal debriefing for front line staff should be arranged if necessary at end of day.

Day 4

Critical Response Team Members

1. Counselling of students continues.
2. Staff members should be individually contacted to provide support.
3. An opportunity should be provided for front line staff who have been dealing directly with the crisis to meet for the expression of feelings and mutual support.

4.5 *Counselling Response Plan – Scenarios*

This section summarizes ten situations in which a response to a death or near death is required. For day-by-day details see the following two sections.

Situation	Response
1. Student death <ul style="list-style-type: none"> • sudden, accidental; • after school or on weekend 	Initial response: <ul style="list-style-type: none"> • implement Counseling Response Plan Longer term issues: <ul style="list-style-type: none"> • acceptance of the death is often difficult and may take a longer time to accept • memorial is appropriate (in the context of what the school may have done in the past) • issues related to our own (and students’) vulnerability may arise
2. Student death <ul style="list-style-type: none"> • sudden, accidental; • during school hours 	Initial response: <ul style="list-style-type: none"> • implement Counseling Response Plan • call staff together to inform them of known details at the earliest opportunity • inform students as soon as possible • hold staff meeting at the end of the day Longer term issues: <ul style="list-style-type: none"> • acceptance of the death is often difficult and may take a longer time to accept • memorial is appropriate (in the context of what the school may have done in the past) • issues related to our own (and students’) vulnerability may arise
3. Student suicide	Initial response: <ul style="list-style-type: none"> • implement Counseling Response Plan • may not have accurate information initially, but it is important to tell students and staff what is confirmed by police or police spokesperson, as soon as possible • when confirming to students that a death has been a suicide, include the message that suicide is never an acceptable alternative to problems Longer term issues: <ul style="list-style-type: none"> • memorial service at school is generally not advised • students and staff may experience a variety of emotions over a fairly long time period – confusion, guilt, anger, etc.

Situation	Response
<p>4. Staff death</p> <ul style="list-style-type: none"> • sudden, accidental; ^a after school or on weekend 	<p>Initial response:</p> <ul style="list-style-type: none"> • implement Counseling Response Plan • make special note of other staff who are close to that person and may need extra support (e.g. subs, relief from classes) • inform other schools that have students who may be impacted <p>Longer term issues:</p> <ul style="list-style-type: none"> • some type of memorial service or tribute may be planned • staff who need help with bereavement issues (EAP possible resource)
<p>5. Staff death</p> <ul style="list-style-type: none"> • sudden, accidental • during school hours 	<p>Initial response:</p> <ul style="list-style-type: none"> • implement Counseling Response Plan • call staff together to inform them of known details at the earliest opportunity • inform students as soon as possible • hold staff meeting at the end of the day • administration or other staff member could assume responsibility for affected classes • inform other schools that have students who may be impacted; support will be needed for them <p>Longer term issues:</p> <ul style="list-style-type: none"> • some type of memorial service or tribute may be planned • staff who need help with bereavement issues
<p>6. Staff Suicide</p>	<p>Initial response:</p> <ul style="list-style-type: none"> • implement Counseling Response Plan • may not have accurate information initially, but it is important to tell students and staff what is confirmed by police or police spokesperson, as soon as possible • when confirming to students that a death has been a suicide, include the message that suicide is never an acceptable alternative to problems • take special note of other staff who are close to that person and may need extra support (e.g. subs, relief from classes) • the class(es) of the teacher who has committed suicide will need coverage plus emotional support • inform other schools that have students who may be impacted; support will be needed for them <p>Longer term issues:</p> <ul style="list-style-type: none"> • memorial service at school is generally not advised • staff may need help with bereavement and other emotional issues (EAP possible resource) • may be continuing emotional confusion among students and staff

Situation	Response
7. Staff death occurring at school	<p>Initial response:</p> <ul style="list-style-type: none"> • implement Counseling Response Plan • special support for students who may have witnessed the death • take special note of other staff who are close to that person and may need extra support (e.g. subs, relief from classes) • inform other schools that have students who may be impacted
	<p>Longer term issues:</p> <ul style="list-style-type: none"> • some type of memorial service or tribute may be planned • staff who need help with bereavement issues
8. Staff or student death following a lengthy illness	<p>Initial response:</p> <ul style="list-style-type: none"> • implement Counseling Response Plan • may be confusion of feelings, e.g. relief mixed with sadness • grieving process may have been happening for a long time before the person died • may be denial – people act as if nothing happened
	<p>Longer term issues:</p> <ul style="list-style-type: none"> • memorial is appropriate • support with bereavement issues for staff and students
9. Death of former staff or student	<p>Initial response:</p> <ul style="list-style-type: none"> • Counseling Response Team’s discretion as to the extent to which Critical Response Plan is implemented • Important that students and staff have accurate information; principal (and staff) decide how that information will be related. • If suicide, include that message that suicide is never an acceptable alternative to problems
	<p>Longer term issues:</p> <ul style="list-style-type: none"> • some type of memorial action may be planned at school if the death has not occurred by suicide • schools may want to establish a policy for this
10. Sudden death (or suicide) of family member of a current student	<p>Initial response:</p> <ul style="list-style-type: none"> • Counseling Response Team’s discretion as to the extent to which the Critical Response Plan is implemented • Important that students and staff have accurate information • If a suicide, include the message that suicide is never an acceptable alternative to problems • Provide support to friends of the student experiencing the death

Situation	Response
	<p>Longer term issues:</p> <ul style="list-style-type: none"> • help with bereavement issues for affected student(s)
<p>11. Death of a close family member of staff</p>	<p>Initial response:</p> <ul style="list-style-type: none"> • immediate supervisor may consult with School Counsellor • immediate supervisor offers any number of the following: <ul style="list-style-type: none"> • Class coverage/substitute • Victim services • immediate supervisor informs other staff members and students if appropriate • Critical Response Team’s discretion as to the extent to which Counseling Response Plan is implemented • possible referral to the Employee Assistance Program (EAP) for counseling.

SPECIAL NOTE

Violent incidents that happen in the community may strongly impact students

- Students and/or staff may experience issues of fear for personal safety.
- A variety of issues may emerge.
- It is important to convey a message that reinforces the highly unusual nature of the incident to allay unwarranted fears.
- An “out of proportion” reaction may be seen from those students experiencing abuse or violence in their own lives.

4.6 *Helping Students with Grief*

4.6.1 Initial Response

Our society has tended to isolate or insulate children from death. However, there are many ways in which teachers can talk about death in a natural, sensitive and helpful manner. Teachers and parents can help grieving students face their feelings about death in many ways.

- Let the bereaved child know that you are aware of the death. Offer to inform other classmates, teachers, and friends if the student wishes.
- Be open and honest with your own feelings. Create an atmosphere of open acceptance that invites questions, discussion and expression of feelings. It is natural to cry, to be sad or to be angry. Normal grief responses may seem inappropriate (e.g. giggling, joking, withdrawal, seeking attention).
- Recognize that physical symptoms and psychological symptoms are a normal part of grief. These can affect the quantity and quality of a student's work.
- Recognize that students may attempt to deny feelings of grief, fear and anger. The normal grieving process may be delayed or distorted for some students.
- Many bereaved students feel uncomfortable talking to their friends about the death. Isolation from friends and withdrawal from normal activities may occur. This isolation should be monitored.
- If you and the recipient are comfortable with touch, do not be afraid to hug.
- If the bereaved person seeks you out to talk, be available and really listen. Hear with your ears, your eyes, and your heart.
- Acknowledge the reality that grief hurts. Do not attempt to rescue the grieving person from that hurt. Be supportive and available.
- Use correct terminology related to death. Avoid euphemisms, such as, "going on a long journey" and "gone to sleep".
- Share your own feelings and talk about your own memories, without idealizing the person who has died.
- Children should be invited, but never forced, to participate in a discussion about death.
- Grieving students need some unstructured time to deal with their grief. It may not be appropriate to force a "regular" structured day upon them. When in doubt, allow them the freedom to express their needs.

4.6.2 *Helping Students with Grief - Longer Term Considerations*

- Offer choices of activities that will allow students to tangibly express their grief. Memorials, letters, poems, pictures, a scrapbook, and planting a tree are all suitable examples.
- Identify children who face emotional problems as a result of the death and make appropriate referrals.
- Encourage other students to think about how they will help a bereaved classmate when he/she comes back to school.
- Bereaved students are concerned about stares from peers, what the other students will say, and how they should respond. They also have concerns about how much information the other students have about the death. Meet with students before they return to your class to let them know what information has been shared. Be certain to inform students who were absent as soon as they return.
- Try not to single out the grieving child for special privileges. Temper your expectations with kindness and understanding.
- The grieving student may also experience other life changes (e.g. a family move that may increase their stress).
- Seek the assistance of friends and colleagues to help you and your class through this stressful time.

The Halton Board of Education (1989); The Compassionate Friends.

4.6.3 *Age-Appropriate Reactions to Death*

1. **Preschool Reactions to Death**

A preschool child may not believe that death is final. Death is like sleep: you are asleep and then you awaken again. A child experiences some aspects of what he or she considers “death” when a parent goes to work or to the supermarket. One moment you are here and the next you are not. Death is seen to be reversible.

To a child, death is usually thought of as accidental. One dies when run over by a car or attacked by robbers. Death is not inevitable - people may live forever if they are fortunate and careful.

2. **Five to Nine Year Old Reactions to Death**

In mid-childhood youngsters are better able to understand the meaning of physical death because of their developing life experiences. For some there is a strong tendency to consider death as a physical manifestation in the form of a person or spirit (e.g. angel of death, boogie man).

At this stage, youngsters neither deny death nor accept its inevitability. A compromise is made. Death is “real”, but only to others, namely, the aged.

3. **Reactions to Death: Nine Years and Older**

Children now formulate realistic concepts based on biological observation. Death is not a person but a perceptible end of bodily life. A dog runs into the street and is hit by a car. The animal can no longer get up to play. Dead is dead. It is very final and universal. It is brought about by natural as well as accidental causes. Death is that inevitable experience which happens to all, including the child. (It is necessary to point out that many adolescents and even adults have childlike views of death. They “know” death is final, but their daily attitudes and actions are more consistent with the conviction that personal death is an unfounded rumour).

Reference - Earl Grollman

Teachers may wish to make copies of this section available to parents

4.7 **Discussing Bereavement with Students – Lesson Ideas**

4.7.1 **Introduction**

- Review the known facts about the death. Discuss loss reactions in general.
- We tend not to talk about death in our society. This does not help us in situations such as this.
- Grief is an expression of love or caring for someone.
- There is a wide range of “normal” feelings.
- If you examine how you feel at this moment, you may feel relieved that someone is talking about emotions and death.
- You may be feeling really angry that you have to sit here and listen to this stuff about loss and death. You may feel insulted that we are even talking about this. These are normal feelings.
- Everything from being numb to being very angry and acting out is normal.
- You may move away from the numbness to some other feelings.
- Anger is an emotion that all of us experience with death, and the anger may be for any number of reasons.

4.7.2 **Dealing with Your Own Feelings**

What are your reactions to death and loss? Are you able to talk freely? With whom? When? It is important that you allow yourself to deal with it. It is okay to cry - you may need to cry.

How are you going to look after yourself while experiencing a loss?

- Let yourself talk to someone else.
- Write a journal.
- Acknowledge your feelings.
- You will need to talk, reminisce, share treasured moments and laugh at experiences shared with the individual.
- Verbalize as much as possible. Music, situations, clothing, pictures may trigger feelings - allow yourself to experience them.
- Be willing to be comforted. Parents and friends can help you through their experiences.
- Grieving is normal and healthy. When you are through it, reach out to others who need a friend like you.

4.7.3 Helping Others Deal With Loss

Each of us experiences a loss from our own perspective. Those who have had a recent loss may react to this situation in different ways.

You need to recognize how you feel, and you need to look at how others feel also. It is going to be really important for all of you to support one another. How are you going to care for each other in the next little while?

You can be of help to others by:

- being supportive.
- modelling good listening skills. It will encourage others to do the same.
- sitting and listening. Give others an opportunity to use your ear.
- do not judge. Acknowledge their feelings and allow them to live through their own pain.
- being sincere. Do not pretend or exaggerate your feelings.
- keeping in mind that everyone deals with loss in the only way they know how – sometimes we think others are acting/reacting in inappropriate ways.

4.7.4 Other Places to Get Help

You can go to many places to get help:

- family and friends

- adults you trust - relatives, friends of the family, coach, scout leader, etc.
- family doctor
- teachers
- school counsellor
- minister
- Teen Line **403-264-8336**
- Children's Services Crisis Unit **1-800-638-0715**
- Distress/Drug Centre 24 Hour Crisis & Suicide Line **1-833-456-4566**
- Mobile Response Team Crisis Line contact is the Community Safety Unit:
403-529-8451
- Mobile Response Team Direct Line accessed directly through Mental Health at
403-529-3500
- Alberta Mental Health General **403-529-3500**
- Medicine Hat Regional Hospital **403-529-8000**
- Kids Help Phone **1-800-668-6868**

4.7.5 *Saying Good-Bye*

It is important to say good-bye in a manner that you find appropriate. One way is to attend the funeral.

- For many bereaved students, the funeral will be a new and frightening experience.
- Public recognition of the deceased heightens the reality of death.
- Funerals make it okay to show emotions related to death.
- The funeral signals the end of death. After the funeral, people try to get back to normal. However, family and friends often need extra support after the funeral when the support system tends to disappear.
- A funeral can be a source of strength because friends and relatives gather.
- Viewing the body is one of the hardest parts of grief. It may be a healthy thing to do. Seeing is believing. (You may or may not have the opportunity to do this).
- You can go to the funeral to support your friends, even if you did not know the deceased.

If you can not go to the funeral, other ways to say good-bye are:

- observe 2 minutes of silence
- send a card
- write a letter to family or friends of the deceased
- write a letter to the deceased, say good-bye, let them know how you feel
- keep a journal

4.7.6 Things to Say to People Who Have Had a Loss

In an effort to find the right thing to say, we often say nothing at all to a grieving person. The best things to say are simple, honest and straight-forward:

I'm sorry about your _____'s death.

I've heard about your loss and want you to know that I am concerned and want to help you.

I hurt for you.

I don't know what to say.

You have my deepest sympathy.

Avoid clichés and easy answers. Do not attempt to minimize the loss. Just your presence and being there is important. Avoid saying things like:

It will be okay.

Time heals everything.

God took her/him home.

I know just how you feel.

4.7.7 Helping Someone to Get on With Normal Life

Going through the grief process after a death is a growing experience. Encourage the person to focus on life and not death by involving them in day-to-day activities. Loss generates a lot of energy, and if all that energy is turned inward, it can be destructive.

Be there for the person several weeks and months after the funeral. This is the time you will be needed and appreciated the most.

Later areas of concern for the person may include:

- anniversary of death
- birthdays
- holidays
- guilt
- dating a new person
- fear of death

Slowly, eventually, the pain eases and the person enters the stage of acceptance. Living begins, again, to carry small joys. The loss is still deep, but the sharpest pain is gone.

4.8 General Information About Grief

Grief is unique to each individual and therefore has no rules, time frames, order or expectations. Society has inhibited our ability to grieve in a healthy manner by discouraging talking about the deceased and by putting time limits on our grief. We are a society that connects emotional strength to our ability to suppress emotions and maintain a calm exterior. The damage of such behaviour is evident throughout society. The ability to express our emotions in an open, healthy, non-destructive manner is far more worthy of the “strength” label.

Each person will have a different experience based on their relationship, perceived relationship and emotional connection with the deceased. Often people feel scattered, cheated or fearful in response to the death of a loved one. Emotions are often escalated where a suicide death is involved.

Certain events, images or activities will remind the person of the deceased for years to come. The more traumatic the death, the more difficult it is to replace the tragedy or negative images with positive experiences and memories. Avoid making light of the experiences, associations or emotions any person may be experiencing in dealing with the suicide death. It is possible that the death has triggered other memories or experiences which we may be unaware of. These may be regarding the personal thoughts or experiences of the person or a loss or difficult event from their past.

4.8.1 Points to Remember

A suicide death can spark other suicidal thoughts or behaviours in some cases for several months to follow. We need to always be aware of this potential reaction.

Deaths caused by illness or accidents can create anxiety about death because many young people feel they are immune to death. They see it as an old person’s destiny, not a youth’s.

4.8.2 Assisting the Survivor

- Your actions and energy speak louder than words - calm, compassion, caring, *acceptance*, *patience*, and presence are grounding and healing for the person in pain.
- Remember that, initially, they are in shock, and that this early response includes denial, disbelief, and numbness as well as emotional extremes.
- Do not be afraid to mention the loved one's name or to ask about the death or loss; bereaved persons usually want to talk about what has happened. Ask how they are coping.
- It is important to use exact terms when referring to death, especially when dealing with children. Words such as killed, suicide, died, dead, funeral etc., help the survivor begin to face the reality of the death.
- Don't worry about upsetting them - they are already upset and this is to be expected at such a time. It is therapeutic for them to have a chance to express their feelings but people often shy away from providing that opportunity for them.
- Encourage open discussion and communication among family members about the event. Secrecy can become a destructive pattern that impedes healing.
- Talking about normal grief symptoms reduces fear and anxiety. Difficulty sleeping, reduced appetite, various physical symptoms and a wide range of emotions are normal at this time.
- Respect the uniqueness of grief - each survivor copes with major psychological trauma in their own way.
- Help them find up-to-date information about support programs, resources, and services that are available in your area. Put information, directions and appointments in writing.
- Explain that not all family members and friends will be able to offer emotional support when it is most needed. They are grieving too.

4.8.3 Children/Adolescents and Grief

1. Providing the following conditions are met, children can integrate losses just as well as an adult:

- the child had a reasonably secure relationship with his or her parents before the loss
- the child receives prompt and accurate information about what happened, is allowed to ask questions, and receives honest answers
- the child participates in family grieving, including the funeral or their rituals, which must be explained to them in advance

- the child has the comforting presence of a trustworthy parent or adult who he or she can rely on in a continuing relationship

2. Positive approaches caregivers and parents can take include:

- Prepare before the fact by sharing ideas about loss and dying after the death of an animal, plant or a tree, or by discussing a film or television show that explores the topic.
- Children need immediate reassurance that they will not be left alone, and that their needs will be met. This helps alleviate separation anxiety.
- Allow children to grieve in their own way, which may include "acting out" feeling/playing. Children express grief through behaviour and play.
- Encourage the child to talk and to verbalize emotions about the loss, particularly guilt, anger and fear. They can also release emotion through stories, drawing, coloring or play.
- Respect the child's privacy and respect their personal process. Don't expect them to change suddenly.
- Share your feelings about the loss with the child including crying, sadness, laughter and so on. Remember that grieving is learned behaviour.
- Provide multiple supports for the child such as older siblings, other family members, and neighbours that the child trusts.
- As much as possible, maintain the child's daily routine.
- Remember that your behaviours may be more important than what you say. Few words are needed when you reassure children with accepting love. They need the reassurance that they will not be abandoned and that it is not their fault.
- Avoid euphemisms or figures of speech because the child may take them literally.

3. Signs that children may be having difficulty with grief:

- sudden personality changes
- extreme denial
- brooding months later

- fantasies of reunion
- refusing to admit the person is dead
- extensive depression, withdrawal, listlessness
- recurring psychosomatic headaches or stomachaches
- losing friends through aggressiveness or withdrawal

Seek a professional opinion if one or more of these signs appear.

4.9 Frequently Asked Questions About Suicide

1. Why do people commit suicide?

There is never any one cause or reason for suicide; however, some people who commit suicide choose to do so because they can not see any other solution at that time. They may feel hopeless, helpless and alone even though there are often many other solutions to their problems. Sometimes revenge is the motive for suicide, yet it is often accompanied by other issues. Fatigue, loneliness, alcohol, drug use or depression are frequent factors with suicide related deaths. Recent studies reveal a correlation between suicidal thoughts and behaviours and the menstrual cycle or PMS. Other factors may include reactions to various stresses in life (school, home, financial, relationship, legal, physical, health, etc.). It is different with each individual.

2. Is it true that people attempt suicide as a cry for help?

The suicide attempt is often a conscious or an unconscious method for getting others to recognize just how badly the individual is feeling. They may not know more appropriate ways of getting help or communicating their feelings at that time in their lives. A suicide attempt is not necessary to gain support or assistance in dealing with a problem or stress no matter how big or hopeless it may seem. There is always someone who can help. Sometimes it may take the assistance of a friend or family member to find the right help, but it is always available.

3. If someone in the family has committed suicide, are others in the family apt to suicide when they have problems?

Suicide is not genetic or inherited. It may seem like an accepted method of solving problems when modelled by a family member, friend, mentor or

acquaintance. Sometimes the suicide death and alternative means of dealing with problems are not often discussed amongst family members. Suicide grief is extremely difficult and often prolonged as support services are not commonly available or equipped to deal with the unique issues of a suicide death.

4. Do people ever attempt suicide to get attention or to get others to feel sorry for them?

Anyone who attempts suicide in order to draw attention to their pain or situation is indeed in desperate need of attention and should therefore receive support and help. As mentioned earlier, they may not realize that self harm is not the appropriate way to ask for help or attention. They will need support in learning more effective and less dangerous means of communicating their needs and feelings and solving problems.

5. If a person attempts suicide what is the likelihood of them trying again?

People who attempt suicide are at an increased risk of attempting or completing suicide if they do not receive the help they need to overcome whatever the issue it is that led them to engaging in suicidal behaviour. Most people who think about or attempt suicide do so only once in their lives and with the right help and resources often go on to live healthy productive lives without further suicidal behaviours. Very few people are chronically suicidal as this is often a symptom of mental health issues such as chronic depression. People who have attempted suicide require assistance in exploring positive problem-solving skills and alternatives.

6. Is it true that people who kill themselves or attempt to do so do not really want to die?

Most people who attempt or complete suicide are ambivalent about whether to live or die right up to the moment of death. They often do not really want to die. They just do not want to go on living the way they are. Sometimes they just cannot see any other way to change their circumstances even though there are always alternatives to suicide.

7. Will a person who is deeply depressed always become suicidal?

While it is true that suicidal feelings often develop in a person who is deeply depressed (about 2/3 of all people who die by suicide are clinically depressed), the fact that one is depressed does not mean that the person will become suicidal. People experience depression and sadness differently. Some people, for example, are tired and find they want to sleep all of the time, while others cannot sleep at all. The same goes for eating habits and other behaviours.

8. Does anyone ever impulsively attempt suicide and then become sorry for their actions later on?

At a particular moment of the suicide attempt, the person may have become overwhelmed by emotions and circumstances that they found intolerable. In that short time period, an impulsive suicide attempt may occur. In retrospect, they may regret the decision when they realize they have other options. They may also feel ashamed or embarrassed following an attempt. This may inhibit their willingness to seek help as they may try to minimize the attempt, thus increasing the risk of further suicidal behaviours if they do not get the help they need.

9. Does taking drugs or consuming alcohol increase the chance of a person becoming suicidal?

Alcohol and drug use can exaggerate feelings and distort perceptions of situations to a point where they seem intolerable. Alcohol and drugs also impair one's ability to think rationally or clearly, thus reducing, in their mind, the number of options and resources available. Alcohol is a depressant which often adds to the feelings of despair and sadness, yet some people use alcohol with hopes of cheering up when the opposite is true.

10. How can one help a person who is suicidal?

Many people who are suicidal feel worthless and unimportant. If you can demonstrate caring and concern, the person at risk of suicide may begin to feel accepted and listened to. Most importantly, never be the sole support or resource for the person at risk of dying by suicide. It is important to get others involved i.e.: a trusted knowledgeable adult, friends, parents, family, school counsellor or teacher, medical professional, etc. Never promise not to tell anyone else. Be careful not to be judgmental. Listen carefully to how they are feeling. Get help.

11. How does talking about suicide help prevent it?

Over 80% of all people who die by suicide have given warning signs prior to committing suicide. Some warning signs are difficult to detect unless we learn more about what they are. People who are contemplating suicide are often relieved when someone notices just how desperate they are feeling and that suicide is a consideration. Talking about suicide openly gives permission to those who may be thinking about killing themselves to reach out for help and talk about what they are thinking and feeling. It creates a climate of caring and helps break through the loneliness the person is experiencing.

12. *Is suicide or attempted suicide against the law?*

No. In the late 1970's the law was changed as it was recognized that suicide is not a legal issue but rather an emotional mental health issue. It is now illegal to coach, coax or assist someone in ending their life.

13. *Is a person who attempts suicide mentally ill?*

The majority of people who commit suicide or attempt suicide are not mentally ill. They are often experiencing difficulty coping with stresses or pressures in their lives. Many suicidal people feel alone, overwhelmed, worthless and just do not see any other way out of their situation. Poor self esteem seems to contribute to most suicidal behaviours. Some suicidal people are angry in reaction to an event or several events that are causing additional stress, confusion, anguish or pressure. Others are deeply sad but not necessarily mentally ill.

14. *What effect does a suicide death of a loved one have on the family, friends and relatives?*

The survivors of suicide often experience a great deal of struggle in dealing with complex emotions such as anger, denial, guilt, shock, blame, shame, despair, confusion, depression and many others. Suicide grief is believed to be the most difficult to cope with. Many people who grieve the suicide death of a loved one claim one never "gets over it" but does eventually learn to live with the great void in their lives. Family members and friends find a suicide death places great strain on remaining relationships and family dynamics. They need a tremendous amount of support, understanding, patience and permission to grieve at their own pace and in their own way.

15. *Why do some people keep a suicide death in the family a secret?*

Some people fear being blamed, ostracized, ridiculed or judged by others following the suicide death of a family member or friend. Although things have improved, stigma, taboo and myths still exist in society where suicide is concerned. Historically, suicide has been linked with criminal behaviour, severe mental disorders or sinful and shameful behaviour. Family members and friends are often plagued with guilt, believing that somehow they are to blame. They may feel like they should have been able to recognize that suicide had become an option for the person who died by suicide, and that they could have stopped it from happening.

While we do know that about 80% of all people who die by suicide give warning signs of their intentions to kill themselves, 20% give no clues. Most people do not

know the warning signs or where to turn for help. Sometimes suicide warning signs are vague or difficult to link with suicide. Hindsight is 20/20. Many people discover which behaviours may have been indicators of suicide ideation or plans after the death has occurred. This can add to the feelings of guilt and despair and, in some cases, increase their own risk of suicide.

16. *Is there any particular group of people who are more likely to suicide?*

Suicide occurs despite of race, religion, income level, affiliation, gender, age, etc. Statistics do indicate a higher rate among Aboriginal people and with people who are most isolated. The danger in narrowing our concerns to one or two higher risk factors is that we will miss others at risk of death by suicide. Regardless of the beliefs, practices or influences that culture, faith, money or status may bring, no group seems to be protected from suicide. It is important to be aware that even the people thought to be the most unlikely to commit suicide, as they seem to have everything going for them, may indeed be at risk of taking their own lives.

17. *How many people die by or attempt suicide in Alberta each year?*

In 2003, there were 455 deaths by suicide in Alberta, 128 of which occurred in the Calgary Region. This is the number of people whose cause of death was proven to be a suicide. This does not include the high numbers where suicide is suspected but not proven. Out of the 455 suicide deaths, 17 were people between the ages of 10 years and 19 years of age, and approximately 3/4 were males.

For every 1 completed suicide there are over 100 attempted suicides. Individuals in their 50's continue to be the age group in Alberta with the highest suicide rates. Although the Alberta rate of teen suicide has dropped in recent years, some communities continue to experience a high rate of teen suicide deaths. The Headwaters Health Authority Region reports ranking as the seventh highest suicide rate out of the seventeen regions in Alberta.

18. *Does everyone think about suicide at least once in their lifetime?*

Two studies (Ramsey & Bagley 1985; Moscicki 1989) looked at suicidal ideation over a one year time period. They concluded an estimated average of 6% of the population have suicidal thoughts per year. This estimate is likely conservative. In 1994, this works out to about 162,890 people (1 in 17) with thoughts of suicide. Most will have fleeting thoughts of suicide in response to a major stress in their lives yet not act on those thoughts i.e: attempt or complete suicide.

4.10 Sample Letters

4.10.1 Announcement of Death of a Student

Date _____

One of our students, _____ in Grade _____, died on _____. It is a tragedy and something
(date)
many of us have trouble understanding and coping with.

If there are any students who are having difficulty or need to talk to someone, there will be a session dealing with bereavement at _____ this morning in the _____.

In addition, counsellors will be available throughout the day if you wish to talk to one.

For those who have parental permission to attend the funeral, funeral services will be held on _____ at _____.

Funeral Home Address:

or

When details of the funeral are available, staff and students will be notified.

We extend sympathy to family and friends.

4.10.2 Sample Letter re: Death of a Student

Date

Dear Parents:

It is with great sadness that I write this letter to inform you that _____ passed away on _____. _____ is a grade _____ student at CAPE School. I'm sure that you will join with me in conveying condolences to the _____ family.

All students were told of (his/her) death this morning. They were given the facts as we know them and an opportunity to ask questions and make comments. The grade _____ students were given some guidelines about responding appropriately to a classmate's grief and time to prepare a token of their sympathy, i.e. a card, poem, or picture to give. _____, our School Counsellor, was an integral part of the process and remained available for the remainder of the day for support.

Your child may arrive home with a desire to talk further. Children will vary in how this will affect them. If you require further guidance as a parent in dealing with this, please contact the classroom teacher, a School Counsellor or an administrator.

We will let you know about funeral arrangements as we hear. Students have been advised that their attendance at the funeral is a family decision.

Yours truly,

This letter should not necessarily be sent out in all circumstances. It may be sent out following consultation with Critical Response Team and with the family's permission

4.10.3 Sample Letter re: Death of a Parent

Date

Dear Parents:

It is with great sadness that I write this letter to inform you that _____ passed away on _____. _____ is the (father/mother) of a grade _____ student at CAPE School. I'm sure that you will join with me in conveying condolences to the _____ family.

All students were told of (his/her) death this morning. They were given the facts as we know them and an opportunity to ask questions and make comments. The grade _____ students were given some guidelines about responding appropriately to a classmate's grief and time to prepare a token of their sympathy, i.e. card, poem, or picture, to give. _____, their School Counsellor, was an integral part of the process and remained available for the remainder of the day for support.

Your child may arrive home with a desire to talk further. Children will vary in how this will affect them. If you require further guidance as a parent in dealing with this, please contact the classroom teacher or administration.

We will let you know about funeral arrangements as we hear. Students have been advised that their attendance at the funeral is a family decision.

Yours truly,

4.10.4 Sample Letter re: Death of a Parent

Date _____

Dear Parents of Grade _____ Students:

It is with great sadness that I write this letter to inform you that _____ died on _____ . I am sure that you join with me in conveying condolences to the _____ family. _____ is the mother of _____ a grade _____ student here at CAPE School in _____'s classroom. _____ was a very active parent volunteer in _____'s classroom during grades _____ and so many of the children knew her.

All of the grade _____ students were told of her death this morning. They were given the facts as we know them and some guidelines about responding appropriately to a classmate's grief. They were given the opportunity to ask questions, make comments and prepare a token of their sympathy (i.e. card, poem, picture) to be given to _____ at a later date. Our School Counsellor was an integral part of this process and remained available to children for the remainder of the morning if additional support to them was required.

Your child may arrive home with a desire to talk further. Children will vary in how this will affect them. If you require further guidance as a parent in dealing with this, please contact myself, the classroom teacher or _____, our School Counsellor.

The funeral will be at _____ Funeral Home on _____ with refreshments to follow at the _____. We have advised the children that their attendance at the funeral is a family decision.

Sincerely,

4.11 Parents and Trauma Response

As the impact of trauma response can extend as far as a three-mile radius of the school, parents and community members should be included in the expression of emotion over the trauma. Parental or community meeting(s) may be needed in order to give parents entitlement to their emotions regarding the trauma. A parent meeting could happen before or after the classroom intervention. The school can also help with parent support groups. Delayed response to trauma is predictable. Therefore, parents and community members need to become empowered in order to help their children through the recovery stage of trauma response.

TO BE UPDATED ANNUALLY