Treating Childhood Traumatic Grief

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Tasks of Childhood Bereavement

• Experience the deep pain associated with death
• Accept the permanence of death (varies according to developmental level)
• Reminisce about the deceased and accept the totality of this person—good and bad
• Convert the relationship from one of interaction to one of memory
Tasks of Childhood Bereavement - 2

- Incorporate important aspects of the deceased into the child’s own self-identity
- Commit to new relationships
- Reestablish a healthy developmental trajectory

Childhood Traumatic Grief

- May occur after a death from traumatic (shocking, sudden, unexpected) circumstances
- PTSD symptoms (re-experiencing, hyper arousal, avoidance/numbing) impinge on above tasks
Childhood Traumatic Grief

- Unresolved grief symptoms (yearning; can’t accept the death)
- Depression symptoms (emptiness, meaninglessness)
- Functional impairment
- Child is “stuck” on the traumatic aspects of the death and unable to reminisce without traumatic memories
• UCLA/BYU Expanded Grief Inventory (EGI)
• Self-report instrument includes a 24-item CTG scale answered on a 1-5 Likert scale
• Sample question: “I try not to think about the person who died because it brings up upsetting memories and feelings.” (never, rarely, sometimes, often, almost always)
• Available from www.nctsn.org
TF-CBT Model: PRACTICE Components

- Psychoeducation
- Parenting Skills
- Relaxation Skills
- Affective Modulation Skills
- Cognitive Coping Skills
- Trauma Narrative & Processing
- In vivo Mastery
- Conjoint Sessions
- Enhancing Safety
TF-CBT for CTG

• Crash of USAir Flight 427 9-8-94 added grief-focused components to TF-CBT
• Provided these to children with CTG symptoms
TF-CBT for CTG

- Revised after 9/11 terrorist attacks
- Pilot study through NCTSN
- Revised to 12-session model, second pilot study through NCTSN
- Pilot RCT following September 11th, 2001 for children who lost uniformed service fathers in WTC
- New Orleans in quasi-controlled trial
Psychoeducation

- Provide information about common reactions to child’s traumatic experiences
- Provide information about PTSD or other disorders/symptoms
- Normalize the child’s and parent’s reactions
- Provide hope for recovery
- Identify trauma reminders
Parenting Component

- Parents receive parallel interventions for all of the PRACTICE components
- Parenting skills including:
  - Optimal use of praise
  - Contingency reinforcement schedules
- Connect the child’s behavioral problems to trauma experiences
Relaxation Skills

- Individualized relaxation strategies for physical effects of trauma including:
  - Focused breathing
  - Progressive muscle relaxation
  - Exercise
  - Songs, dance, blowing bubbles, reading, prayer
  - Mindfulness, yoga
  - Use with trauma reminders
Affective Modulation Skills

- Affective identification and expression
- Problem solving
- Anger management
- Present focus
- Obtaining social support
- Use with trauma reminders
emotional BINGO

by Marjorie Miltin, MSW; illustrated by Joe Madden

FOR TEENS
Ages 12 to 18

W-335

IN ENGLISH AND SPANISH

NCTSN
Traumatic Stress Network
Cognitive Coping Skills

• Cognitive Triangle: connections among thoughts, feelings and behaviors
• Cognitive restructuring: replacing thoughts with more accurate/ more helpful ones
Is it accurate?
Is it helpful/does it make me feel better?
Trauma Narration and Processing

- Gradually develop a detailed narrative of the child’s traumas
- Process these events using cognitive strategies
- Share with parent/caregiver as narrative is developed
In Vivo Mastery of Trauma Reminders

• To be used for generalized fears to innocuous stimuli
• Develop fear hierarchy, use relaxation and affective modulation skills to gradually master feared situation
Conjoint Child-Parent Sessions

- Joint sessions with the child and parent/caretaker
- Activities may include sharing the child’s trauma narrative; developing a family safety plan; discussing healthy sexuality (sexual abuse); enhancing communication
Enhancing Safety and Future Development

- Individualize additional components as needed for each child
- Safety plans continued for individual situations
- Social skills, problem solving, drug refusal, etc.
Grief Psychoeducation

- Assist the child and caregiver to talk about death (start bereavement tasks after resolution of trauma reminders)
- Correct misconceptions about death
- Disaster-related deaths may pose special issues (e.g., bodies not recovered, mutilation, etc.)
- Cultural considerations related to death
Grieving the Loss ("What I Miss")

• Naming what has been lost with the death
• May accomplish this in many ways
• One way is through the use of a name anagram:
  Made cakes with me
  Always in my heart
  Ran cross country races
  Yellow was her favorite color
Resolving Ambivalent Feelings
(“What I Don’t Miss”)

• May be because of relationship conflict (e.g., abuse, developmental; unresolved anger)
• Stigma/shame re: cause of death (e.g., drug OD, drunk driving, suicide, AIDS)
• Anger at “unnecessary death” (e.g., didn’t get medical care, “hero, didn’t think of me”)
• Write an imagined letter to/from deceased
Preserving Positive Memories

• Once trauma issues and ambivalence addressed, can tolerate memories and start to reminisce more fully
• Use family, siblings, friends of deceased
• Make something enduring to preserve positive memories (collage, video, etc.)
• Child may want to have another memorial service
Converting the Relationship From Interaction to Memory

- “Person gone but relationship lives on”
- Use the past tense when referring to the deceased; encourage the parent to do so and help the child to do so
- Balloon exercise
- Identify what the child still has and what the child must relinquish
Committing to Present Relationships

- Challenges for the child and parent in committing to present relationship
- Assisting both to move forward towards present and future relationships
Treatment Closure Issues

- Preparing for future trauma and loss reminders: Perpetual Calendar
- Making meaning of traumatic grief
- Death is different from other endings: treatment closure issues for CTG
• Post-disaster: at what point does it become clear that missing people are dead?
• Therapists who are also traumatized—how can they provide optimal care to children and families and also care for themselves?
• Making a future family disaster preparedness plan becomes more complicated if your family member died
• Educating teachers/classmates how to optimally interact with children with CTG
TF-CBT Web is a web-based, distance education training course for learning Trauma-Focused Cognitive-Behavioral Therapy (TF-CBT).

Launched on October 1, 2005
TF-CBT Web

www.musc.edu/tfcbt

• Web-based learning
• Learn at your own pace
• Learn when you want
• Learn where you want
• Return anytime

• 10 hours of CE

TF-CBT Web is offered free of charge.
Each module has:
- Concise explanations
- Video demonstrations
- Clinical scripts
- Cultural considerations
- Clinical Challenges

TF-CBT Web was developed through grant No. 1-UD1-SM56070 from the Substance Abuse and Mental Health Services Administration of the U.S. Department of Health and Human Services.
**CTG Web**

www.musc.edu/ctg

CTG Web is a follow-up course that teaches how to apply TF-CBT to cases of child traumatic grief.

CTG Web is offered free of charge.

6 hours of CE

CTG Web was launched on September 1, 2008.
TF-CBT Consult

www.musc.edu/tfcbtconsult

Follow-up to TF-CBT Web. Provides online consultation for therapists using TF-CBT

Funded by the Anne E. Casey Foundation

Launched November 1, 2010
TF-CBT Consult
www.musc.edu/tfcbtconsult

Query Page

What is your question?

Enter a question or set of keywords

Answer Pages

Can TF-CBT be used with children or youth who live in institutional settings, such as residential treatment centers, group homes, or juvenile justice facilities?

In what situations should the trauma narrative not be shared with the parent?

How many sessions should be spent on developing the trauma narrative?

What are some signs that children may need to stop doing a trauma narrative?

How can therapists tell when children are ready to move to the next TF-CBT component?

How can the cognitive components of TF-CBT be used with very young children?

What are helpful relaxation strategies for young children?

What are helpful relaxation strategies for teenagers?
Resources

- **TF-CBT Web**: [www.musc.edu/tfcbt](http://www.musc.edu/tfcbt) : free online training course; 10 free CE credits
- **CTG Web**: [www.musc.edu/ctg](http://www.musc.edu/ctg): free online training course; 6 free CE credits
- **TF-CBT Consult**: [www.musc.edu/tfcbtconsult](http://www.musc.edu/tfcbtconsult): free consultation program
- **Treating Trauma and Traumatic Grief in Children and Adolescents** [www.guilford.com](http://www.guilford.com) or [www.amazon.com](http://www.amazon.com): TF-CBT treatment book
- **[www.nctsn.org](http://www.nctsn.org)**: printable resources on CTG, sibling loss, unconfirmed death, military CTG
THANK YOU!

Maya Angelou: The world is saved one child at a time.

Thank you for all you do to help traumatically bereaved children.
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