Children & Adolescents Grief Seminar

Apr. 29, 2021

>> KATE SAMPLE: Dr. Erica Sirrine has spent the last decades of her career working with children: the forgotten griever is in their grief and she brings with her such expertise in taking complex issue and making it practical and applicable food so I hope you enjoyed the session Dr. Sirrine, the floor is yours.

>> DR. ERICA SIRRINE: I am so honored to be with you if you were with my last session and you're journeying with me for this session thank you it is truly a privilege and honor to be here and share with you all, here is the deal we are going to talk about supporting grieving children and adolescents in one hour and I usually do 2 trainings on this to give you all the content possible. Erica@hopeandgrief.com.

Here's our disclosure to make sure you're practicing within your scope of practice and doing your own research about interventions as well.

Judi's House rated a child bereavement estimation model and according to this model an estimated 5.2 million children in the United States, which is about 1/14, will experience the death of a parent or sibling by the age of 18. Perhaps what is even more shocking about the statistic is when we look to the age of 25 and we know, those of us who are clinicians, know the frontal cortex is still developing. And at the age of 25, at 5.2 million more than doubles to 13.2 million. I encourage you to go to Judi's House website and look at the childhood bereavement estimation model because you can see there some information related to your own state if you are living in North America so they have specific statistics for each state so some have a better statistic but this is the overall average for the US. What the child bereavement estimation model is doing is shed light on the impact on individuals and communities so have great work resources on their website so you can educate others in your community as well.

These are resources that are great sites, The National Alliance for Grieving Children as well as The National Center for Grieving Children and Families and you have an entire reference list from providing a lot of resource I will share today. So these have tip sheets and practical

resources, interventions and activities so after you leave your if you have more questions about things I encourage you go to those websites.

We will talk about? From the perspective of death loss but I want you to keep in mind but children are affected by non-death losses as well which create feelings of grief and loss in those children. For example you will see some of them here on the slide. But this list is not comprehensive. Those of you who are partition nurse practitioners know you could mad add many more to these non-death losses. We are seeing a lot of behaviors and have weak ever associated those with maybe grief and loss? Maybe that is what is happening with these children may be Nb want to intervene from that perspective. Before we go too far these are the dictionary definitions and every grief educator defines these in their own way so I will show you what the dictionary says. It says that grief is really deep sorrow, those are the internal thoughts, feelings and reactions following a loss. But mourning is the outward expression an act of sorrow. It is the "doing" of our grief so to heal and reconcile our grief we must and get it out and so we want to do with children is create spaces that are safe so children can have healthy ways to mourn and facilitate that mourning process big

I want to introduce this concept I spoke up of in the last seminar called Reconciliation. So many times even clinicians use the words "get over it we do live in this death avoidance and grief avoidant culture and we do not necessarily like to talk about unpleasant emotions or feelings but let alone feel them. That is a whole different level.

So we do not tend to talk to people about this and so often people feel stigmatized in their grief especially teenagers and adolescents and so I encourage you to think about this idea of reconciliation which is the process finding a way to make two different ideas or facts exist to be true at the same time. And so this is saying yes, I've experienced out grief loss and I am forever changed. And I can invite hope and joy and love and meaning into my life if I choose. Two very different ideas on loss and they can exist to be true at the same time prudent that leads us to the idea but maybe grief is a human response to loss. I was on a webinar this morning where someone spoke about reminding us that grief is not a pathology. He does not need to be pathologist, it is a normal human response to loss. And in that vein, Sherman and Mitchell have done advanced study and research in the field of death and dying but they wrote a position paper in 2020, that they published on the Dougy Center site, so you can look this up and reference this later and I will provide a brief overview of what they have said. But what they talked about is that it is important for clinicians to begin to view grief as a normal human response. And so I will read a direct quote from their position paper in 2020 because I just love it. They say, "It is time that we as a nation take a stand and acknowledge grief for what it is, a natural and normal response to loss that is interwoven into a sociocultural context." They go

on to say that grief is not an experience that needs to be silenced, treated or pathology eyes. Grief -- and all the many complications imposes on the griever, is an expense that needs and deserves understanding, support and community. And so that is the words of Sherman and Mitchell. So all the types of loss mentioned earlier including death loss and Pat loss. It is a loss, it is a death of a pet. All those types of losses, we can have grief as a result of them.

They talk about being normal and it is natural and normal and inevitable, it is a universal screens and they say it is nonpathological that it is actually an adaptive response. I love this, the ladies wrote grief is complex and complicated because people and relationships are complex and complicated. They talk about it being woven into the sociocultural context influenced by our cultures and social systems. And historical factors as well. But it challenges our identity and it is disruptive and challenges our assumptions about the world, it is a healthy adaptation fostered by supportive relationships with others, need social support around us. They go on to say that it is person-centered, meaning and they use the words, the duration intensity and experience, our unique for every individual. I believe you saw Doctor Kessler's prior slides with the talk about grief as a person's fingerprint and that is a beautiful way of saying no two people experienced this in the same way.

They say it cannot be captured, it is c-diamide on dynamic. And it cannot be forced to go into different phases. Right now there is no universally acceptable way to grieve. So non-finite meaning grief is ongoing and that will be one of the important things to us. Sometimes children the -- Baystate children grief throughout a lifetime and there are developmental stages they go through and we will give some voice to that today. So let's talk through some of the distinctions tween adults and children.

Kate alluded to this and said they are referred to as these forgotten sometimes that's how the literature refers to them. Kids have a unique ability to go play or hang out with her friends and they sometimes reconciliation better than adults do and I think because we see that in them we often assume they are not hurting. But what we forget is they may just mourn and express that internal grief in a way that is different from an adult and so it does not mean they are not feeling and it does not mean they are not grieving it just means they are expressing it in a different way. The attachment theorist taught us that children are impacted by cognitive development so if someone responds to an age of the child I always refer to a developmental age and not chronological age. And we know children are impacted by adults. In a great way. An adult can help or hinder children cope and we know research demonstrated that caregiver support and positive parenting is a positive impact on things like bereaved youth coping and their symptoms of grief and an impact on their posttraumatic growth or resilience which is what we really want to see in children we are serving.

Children also use play to cope and that's their natural way of expressing themselves. So anytime you can use an intervention that incorporates play especially for some of the younger children it can be helpful to their healing, this is not a seminar on major children's brief interventions because we have one hour and that is a whole two day thing but I love using things like art and play and music, music is a beautiful thing to use for people who have experienced grief and loss because think about this for a second. Music moves us from our heads to our hearts.

Think. So this is, grief is not a cognitive rational journey it is Attorney of the heart. It is our emotions and love and our attachment. If you were to attend a wedding and the bride or Graham or to walk down the aisle and there was no music, I think we wouldn't have as many tears or how many have attended a memorial service or funeral or graduation ceremony, that's a great example because were almost at graduation time even though many cannot participate in those rituals. These are other parts of the grief summit but can you imagine graduation with a bunch of high school kids just walking out two music? No it is not the same. But when you are here and washing and hear the sound watching and hear the music, it moves you. So interventions like that are helpful to the client so we want to be creative especially when working with children but I would argue we need to be creative when working with adults also.

Reno that bereaved youth are impacted by the social status and their peer relationships and a lot of bereaved children say they do not want to be different or have unwanted attention drawn to them. So that can sometimes be problematic for them when they are returning to school or things like that following a loss.

There are, they are impacted by their cognitive development so I want to give notice to these four concepts and there is 1/5 that is talked about sometimes also the literature. And if you are a mental health practitioner you most likely had these on a paragraph one page in the textbook at some point in your experience and you may have just taken a test on it and let it go but these are describing how children learn about death concepts. And this is the work of they wrote about it in 1984 and the 1996. But this is things like universality. This is where children begin to understand that death happens to all people and all living things and they learn it is inclusive and it is unpredictable. And right now with the pandemic we've experienced, even if a child has never experienced a death for themselves they most likely know someone at this point who has died as a result of COVID 19, someone in their community have Back Bay heard about it. So it brings the idea of unpredictable and inclusive it brings this to the forefront of children's minds. And there's the concept of irreversible fertile this is the concept of magical thinking which is the

idea that a child has, that they could have done something to change the outcome of the death or they could do something now to change it and sometimes they even believe they themselves caused the death and so somebody who may be had a father who died in the middle of the night and said brush her teeth and I will see you in the morning and they do not brush their teeth and they cero goodness, I just need to brush my teeth and daddy will come home because they do not understand the death happens when the body stops working which is nonfunctionality. Young children will all often say is mommy coming home today. And daddy has to re-emphasize that mommy cannot come home because she died in these are wobblies concrete terms. Non-functionality, death happens because the body stops working and causality is helping kids understand there are different causes of death and as children grow and develop mental age they can understand more detailed explanations of death. If we had a lot of time to get a big talk about how to explain really complex things to children like homicide or suicide or illness, cancer but we do not have that much time to do that in this hour so you can go to another trainer and find information about it on the websites I provided earlier however I will give you an example of how causality understands in understanding changes. So a child might say my mommy died because her heart stopped beating and she understood that as a 6-year-old but maybe when she gets into, maybe fourth or fifth grade she hears about something called a heart attack and she says oh mommy died, is that why her heart stopped beating? And yes, mommy had a heart attack. And then we might learn later because maybe we are in science class and we learn there is something called arterial sclerosis and we say oh my goodness is that how mommy died, is that what caused her heart attack? So our ability to understand the context of the death changes. This is why people say kids mourn grieve throughout a lifetime because they ask those questions at different developmental stages.

The authors have added non-corporeal continuation. So they are saying there is 1/5 phase that sometimes is in books and adjustments when children are starting to articulate what happens to life or what happens to a body or soul after death and so these are the afterlife concepts that they want to include in that. Some textbooks have that and some do not but I wanted you to know that it is something they have added to their own literature and contribution. In addition most research says that developmental age of seven most kids can understand these four phases and I would say -- you see magical thinking, most textbooks will say that ends around five or six but it is based on scaffolding of knowledge. What type of experience has a child has with death before and we want to use things like a pet death to help educate children about the concept so when the extremes the death of a person or someone they love they are more prepared and able to understand the concepts better so don't replace the goldfish, acknowledge the loss of the goldfish and we want to use that teacher children about death. So let's talk about the common grief emotions children might experience. I said this in my last presentation if you were there, the word emotion as the word motion in it and it means her grief emotions required movements and we have to mourn them from the inside to outside. So we want to help our children and teenagers talk openly and share some of these feelings. New

Concord we want to encourage the dialogue that it can be difficult to do that when we live in a culture that does not affirm that as much. And we have to be mindful, all families are different and so our clients are coming from all different cultures and as these researchers have pointed out grief is very much sociocultural and so the thing I find happens with practitioners is the way they believe it should be done and relearn it is unique as a fingerprint because the way they think it should be done and may be the way there client is experiencing it are different things that we have to respectful that everyone processes grief in unique ways and recognizing again it's a normal response to loss. These are some of the most common reactions we see in children and we will talk to some of these difficulty concentrating, their brain is taking in my was always alive, how could you not be alive now? Our brain perceives that is a lie what you think for a minute some of the denial, that is a protective mechanism. So think of these as primal and instinctual behaviors. Too much in my life has changed. I might throw this desk in the class now because I'm angry about my situation I am angry that my brother died. Now you're telling me something I need to do and I feel like everything is out of control. And I need to take as much control as I can. We also ceased physical symptoms see physical symptoms of grieving. A poll was done of 531 bereaved children and teenagers. Under the age of 18. About 75% said that sadness really was the primary emotion they felt but anger was a close second. Feeling overwhelmed. Feeling worried 73% of the kids in the study said they think about their loved one every day and we see some of these things on the slide like regressive behaviors. If we had a lot of time would unpack all of these but with regressive behavior I view those as flags kids are waving that say I am struggling here and am having a feeling I don't know how to verbalize it to you so I'm going to do a limp noodle in the morning and refused to put my clothes on or get dressed even though I've been doing it on my own for two years or I might start wetting the bed again at night.

We can take a regressive behavior away. But sometimes schedule find another one. So instead we get to the root of some of these reactions and help kids mourn and process the grief they are having that because some of these reactions you see things we want adults to know about our grief and I got the idea at the Dougy Center has a bill of rights which you can look up. But I showed up to support group one night many moons ago and have you facilitated a group where everyone is in a bad mood. We're just mad at the world. But very mad at their adult caregivers who brought them to group. To be honest, the children in this particular group were coping and expressing their feelings of grief better than the adults that brought them. I don't know what activity I was supposed to do that night but when I sat down I said you guys are barred up to they were complaining about each person and I said it seems like you had some rights violated they said what I said well there is a center in Portland and they had teenagers develop a Bill of Rights. I pulled it up on my phone and we read this Bill of Rights for grieving teens. Have any of you had any rights violated I used to travel around and talk to adults about things like this and so is that what do you want adults to know about your grief I could tell the practitioners and maybe we can tell the parents and guardians we work with. So I got note

cards and I give them notecards and I said I would like you to put a few things you want adults to know about your grief so what I want to do I want you to hear from them and while this this may seem like textbook, these are real teens and they matter to mean that another matter to you in a matter to our world. So even though time passes and feels like the death happened just moments ago. I get angry easily because the death changed me. I am entitled to feel angry and sad at times. Like a distracted class by thinking about it. I feel guilty for many things. I loved the person who died the most but sometimes I living hate living with you. Hate living with you. Think of my feelings when you think about remarriage and don't expect me to be fine overnight. I am hurt and it seems like you don't care. It is not easy to grieve. Our family should be getting closer but it seems like we are growing apart.

I didn't ask them for their but this is what they put, I wish I was there when the person died. That I could hear their voice again and that I could talk to the person who died again. I wish it never happened was the person who died was still here to give me wisdom and I wish it was me who died. That was not a suicide threat or ideation that was if you look in the DSM you get what used to be a bereavement exclusion under major depressive disorder and now is a paragraph defining the difference between depression and grief and it talks about death thoughts or rejoining or re-associating but in this young person didn't want to see his family suffer and thought maybe they were suffering more because of who died in his family and so those were the wishes and because we've experienced in Norma's loss in our lives there have to be probably half of you on this call experiencing a current loss and I bet that resonates with you what the teenager said. So while we consider children to be different, they are still grieving and mourning in similar ways to us, they are still having these feelings but they don't usually verbalize it unless we give them notecards and ask them to do it in the support group which is what I did. So wanted you to hear their words and voices another the matter and even if they say they don't want intervention they might still need it and in that study of 531 kids, they say things like you never stop missing the person you love people have to give them special treatment, they want to be treated like everyone else. Yet they are very much impacted by grief so that is what they want you to know about their grief so in the last half hour I want to talk to some school support group grieve meant interventions. And then we will see if I have some time getting to some of these other questions. I also saw one question that one's just came in and would you like to --

'm going to add registered drama therapist. To work with some of the families please give consoles to your therapists. They have extra training in the areas and the other thing I will say is I've consulted with people who are play therapists say I can't file follow this Charlie move child but what if you do this I love to do songwriting or wrap writing with teenagers. So you can consult the experts with this that's the one question I've been able to see so far and it was perfect now since we are moving into just a couple of support group types of inventions. Interventions. Anytime you are providing school-based counseling we obviously want parental

permission and that differs by state law so need to follow state law and agency guidelines. We need to build those relationships with some of the constituents. School guidance counselors, the school social workers. The school psychologists, the school administrative assistants, anybody working on the school we want to build those relationships to best help the children and teens being served there. But the biggest challenge in school-based counseling that I hear colleagues is maintaining confidentiality. And I don't mean it's all we can maintain it but sometimes the setting itself is a struggle so kids and research studies identified things like they want to talk to somebody is school but they know the staff gossip. Information was leaked and I told this important person and they told someone else. So we want to talk with kids and teenagers about confidentiality and its limits. Then we need to give thought to where are we providing services. So I've gone into schools where I have been given a broom closet which is not an exaggeration. And sometimes I get that it can be hard and I had another school to ask me to facilitate a support group, they said the doors had huge windows and it was a high school and people were coming and going and so I said we are going to need to block out these doors and windows because they want to put a sign support group in process but they can see that people are inside in support for grief, because that can be stigmatizing but so sometimes we have to help schools maintain that confidentiality. We want to think about kids and teenagers do not being mind being called out of class but others do. So we need to take in the comfort level of the student and we do want to communicate with parents. Some people say if you are not intervening with parents and you are really not able to help the children as well through their grief but I met understand that some of us live in communities or you might be serving parents where, or children or teenagers with his low parental involvement and so we have to make decisions, are we going to see that Charles without parental involvement because we want to help them as best we can. If you are going to facilitate a support group think about things like the structure if it is open or closed or therapist led, trained clinicians or volunteers or facilitators. Grief centers are split. And I know others that use closed groups with trained therapists so don't know one way is better than another but I think these are considerations you have to give the national island alliance for grieving children in that study of teenagers and kids, 76% of them said they really liked meeting other people were going through their grief and that is what they loved most in the group counseling so we want to provide children and teams opportunities to connect with others. If you are unfamiliar the national alliance for grieving will give you resources for every children's grief center in the US so you can look at your community and see what places in your communities of private provide support to children and adolescents.

Most communities -- and again sometimes it can be a few hours' drive a lot of places of camps and I have a feeling that we have quite a few grief camp volunteers on the same call and if you aren't one I would recruit you to be one, I'd adore the grief camp that I've been a facilitator at for almost 20 years, we couldn't obviously have camp last year or this year but I hope we have it again soon but it is a wonderful opportunity for children and adolescents who be cannot get

individual counseling or do not have access to support group counseling and can go for a day or weekend or in some case a camp that is one week. Military families also have separate camp so there are a lot of resources available.

Another resource I will share is if you are looking, Sesame Street online on their website they have a lot of neat resources for younger children and even videos that are free so that might be something you want to look into if you are working with a young child and you want more resources and I believe I have that link for you on a subsequent slide. So let's talk about an evidence-based group intervention for you to research more. This was developed by but you might also find it online and it's often referred to by two different names online but that is what it is, family believe bereavement program and this has caregiver and child adolescent programs consist of 12 sessions that are two hours each and they have four sessions include combined activities for the caregivers and the youth who are attending and then they do two on our individual sessions in the caregiver program and those tailored to the needs of the family. See can see this is a family program so they have caregivers and children and adolescents participating in you can see it on your slide this is evidence-based and they've done different studies and they found families involved in the program things like risk and perfect protective factors like increased positive coping and a decreased inhibition of expression of feelings more so than the control group in that study and they did an 11 month follow-up where they found the family bereavement participants reduced the caregiver mental health problems and encouraged emotional expression and adaptive behaviors. They did a six month follow-up and this was interesting finding out their 15 year follow-up, they found it was not originally designed to present suicide but it reduced ideation and intent. So these judge were parentally believed but this is a neat opportunity for you to receive more training if you are interested in developing an evidence-based or facilitating an already evidence-bas

d treatment program in your community. And then this is considered evidence informed, the Pathfinder program that is emerging and newly developed and hopefully it will considered to be evidence-based sand and you can get more information here at Judi's House and I have given you the link to that. What Pathfinder state is they are clear on minimizing pathology. It avoids minimizing or by apologizing so they do not minimize grief, they also do not apologize grief, they are focused on strengths -based and what they do is integrate elements from existing models so they use the family bereavement program but also using some trauma focused cognitive behavioral therapy and the grief and, prevention program it target some of the posttraumatic stress reactions that interfere with grieving and so they use, my art therapist friends use a lot of expressive art activities and group sharing so they work on validating the grief experience and they recognize most bereavement programs either focused on that obligated traumatic grief or peers support and Judi's House tries to find a blend between both of those so we can have some of that support we want to be able to incorporate the aspects that might need some of that CBT or the grief and trauma intervention paid so they focus really

as you can see decreasing disruptive reef reactions and increasing those restorative grief experiences and they do that in three phases throughout the intervention. If you think that you want to work with children, I encourage you to get more training in the area but you want to start a support group and you don't know what topics you want to use these are good weekly session topics you can utilize in your support group. We want to tell our grief narrative and cope and express our different feelings and we need to focus on seeking support and if you were in my last section I showed support circle to help facilitate further support for our clients and we want to talk about the changes, the positive and negative changes that accompany all laws even focusing on self-care or self-compassion want to discuss the memories of the positive and negative and even some of those ambivalent memories and want to honor the loss and be strength-based as part of that.

Before I take questions I want to share that when I used to finish my sessions whether individual or group I would ask people to share three ways they had grown and work toward reconciliation and weighs their grief had softened and then what area they might need to work on because we are never done growing and changing is children's and I would use rocks to do that and we would talk but the process the rock goes through to become some of my friends in Michigan I hear you have Petoskey stone, maybe him staying maybe I'm saying that wrong, but these are one of the rough rocks we find and maybe in the water or in the ocean if you think about the ocean is stumbling against all the sounded great and it becomes smooth and more polished and we as humans are like those rocks. The extrinsic strawberry difficulties and challenges and we are banged and pushed up against and pressed and in that process can choose healing and to learn and grow from the experiences and the good news is research tells us that resilience is the most common trajectory following the loss. And we know that grief is a normal reaction to loss and so I asked them to share what three ways have you grown or healed? And what's a rough area you still need to work on and then I emphasize strength because sometimes I think it is hard in the grief journeys especially as kids and teenagers to recognize remaking progress and it helps when adults recognize the strengths and capacities and it's helpful when they do that in front of the caregivers and I encourage you to give a token something for them to remember what we used to give these bears and we would give bears and think about, do you think Bob agreeing sweater guy or red sweater guy with these bears. And we would give teddy bears in Reno, I mean I know those teenage boys acted like maybe they didn't care about the teddy bear and we would give it to them to save me this remind you of the work you've done while you've been here. Strength and capacity for growth and change. And when life gets difficult to kill me if remind you can see support. There are always helpers and people who will be there to support you if you search for them and you are open to receiving help. It would give these bears bit and I had a mom call me once and she said that her son took that bear to college with him and she said Erica New York to make budget decisions all the time and maybe it can't be a bear but maybe it can be something. So whatever you can give it can be a token for the work that you've done in these groups. Whether you do a model

like Pathminders or The Family Bereavement Program is there a way that you can help your clients remember their time with you and acknowledge the capacity within them for growth? In their time ways that we have 15 minutes. I will take a few questions but so I have received some and I can see the chat which is very exciting. And I can see some of them on my phone so I am going to try to see if we can answer some of these together.

Can you the effects of pandemic loss on adolescents, especially the class of 2020? Who lost markers and milestones they cannot recall sure recapture like prom and graduation? That is a wonderful question. This group of teens really but even I would -- it happened to everyone people have postponed weddings but the pandemic is really changed a lot of the way we do life and it has changed a lot of the way we mark milestones in our life is the question indicated. So here are things we could do. First I think we want to take her reasonable strategy and help our children and adolescents become flexible and adaptive when things change and shift. But we also want to think, are there ways we can acknowledge this and maybe an unconventional way? So maybe -- and by the way I think we started to do this as a society. If it is someone's birthday what did we do? Drive-by birthdays? People would go by -- we realized this is a milestone and it needs to be celebrated but not in the same way so we need to acknowledge the loss behind that and I just finished completing a study on the effects of loss and the reactions to loss among college students amid COVID 19 found most cited six or seven on average different types of losses they experienced as a result of the pandemic. And occasionally those were death losses but a lot of times they were non-death losses of primary importance with the loss of educational delivery they had to change third educational delivery system in a way they were not happy with an experienced loss and they had to pack up their dorm rooms and just leave and go back and here is the deal. Not all of the college students go back to homes that are safe. Some of the students are in homes that we know they would be safer if they were in school but we need them to be at home right now because of the pandemic.

So there is this grub and the way we support them is that we acknowledge it for it is and say this is loss. And you are experiencing these feelings of grief and some of that will be that anger and frustration and we need to acknowledge that for what it is and we have to help them see -- let's look at reconciliation just because I've experienced this great loss my didn't get to have the party I was supposed to have for the graduation ceremony. In the beginning I saw people say I am not going to do anything until I can have this so I will wait till everything passes and then I will have my party and have fun but we realize we can't pause that long. So instead we say I have experienced a great loss they did not get that my graduation and it looks like they are not going to do it year and that is set in my experience was forever changed and it wasn't what I thought it would be.

I can still have other meaningful expenses and of hope and joy if I choose. But we cannot have the until we acknowledge the reality of the loss. So we want to acknowledge the reality of the loss. So we create space for it and we have to experience the pain of the loss that is in tasks of grief, so we need to allow the adolescents and kids that have been impacted to acknowledge it and experience it and then to learn to reconcile, what does that mean now? How do I continue living in a meaningful way in spite of this loss that occurred in my life whether that is death loss or pandemic loss.

Let's look at others good resources for school-based support for traumatic loss in the school community prayed so some things I want to encourage you to look at if you are interested in traumatic loss, The Center for Complicated Grief and Treatment is a good resource as is a lot of the work of they are doing a lot of grief on trauma right now, drop was my PhD teacher and she's phenomenal in developing doing stepped care alternatives to try to make there be more affordable, she does a lot of CBT and things of that nature. She is a good resource, to look into if you are interested in that.

How do we work with grief in a situation where there's no real closure because of a missing persons case. I've worked with families that experienced this. Sometimes that would be considered an ambiguous situation where we don't know is the person alive or not alive in BC similar responses when maybe we don't have a body or perhaps it happens and things like fire or certain military deaths, natural disaster would be another thing where we have an ambiguity where we know the person is not here but our brain hasn't seen evidence of it and so it makes it challenging. But I encourage is for you to create those rituals, so we need to do letter writing or create a ritual where acknowledge loss and reality and process the reality and figuring out how to embark on our continued life. And as a part of that we have to remember the tasks of grief the different educators wrote about but overall -- and this is a conversation and maybe it was the keynote talk ebbing talking about making meaning as well but we count that greeted my opinion that is a great loss and often times a missing person loss depending on the circumstance is very impactful and just as impactful as death only be do not have closure and that can be struggle for families what if the person comes back and they are not alive so we have to process that as a loss maybe it's not a death loss but we are still experiencing grief as a result of it.

How do you work with resistant kids to get them to get something out of sessions? Such as teen boys? I have a great example but I don't know if I've time to give it. I think it is important to give them power and control in some way over the session so sometimes I have taken a deck

of cards and said by the way you don't include all the cards. So maybe I include the six sevens and eights are the two's, threes and fours and I say pick a card and whatever you get are the meaningful things I want you to contribute. Thereafter defined meaningful but you give the control back to them and you say there are three things I would like to talk about can you choose the one you are most comfortable speaking about today, give the power back. A teenager once refused to talk to me. Is it I'm not talking to you because I know how you all work. And I said are you really not going to talk? This is the first time ever met him and all the other therapists walked away and left when ever he said this in my first thought is I have a lot of kids to see on a waiting list and he doesn't want to see me my thought there might be a reason he doesn't want to see me maybe he needs to see me. So I said are you really not going to talk and he said not at all. I said listen, you might if I ran to my car and I'll be right back -- I said I have to magazine over been wanting to read for a long time and I blocked off in our for this are you really not going to talk, if you're going to talk I will get in the but if inequity took him going to get that magazine. And he said what? So I sat there with my magazine and I would say look at this person I can't believe this and he finally talked because he didn't want to just watch me look at my magazine I gave the power to him, if you don't want to talk don't have to talk and I respected that and him and by the way he did not talk about the person who died first session at all, took a little bit about the person who died the second session but didn't give me details and by the third session I found that what he didn't want to talk and that is because he had intense magical thinking that he had somehow caused the death that happened 10 years earlier so of course he doesn't want to tell me that Peter would want to tell someone if I felt responsible for someone else's death, there was a reason for that silence so if you can engage in things to give some sort of control to the person in that situation and display respect that I'm not going to just leave you I will give attitude back with you because you have a right to not speak sometimes as practitioners it is easy for us to forget and easy for us to forget how hard it is for a generation of people look at their phones and can disengage really quickly by looking down and you go to the grocery store and you know you don't want to talk to someone you look down and you think about how to be creative in our interventions to help our adolescents mitigate with us when they've easily had an out and this eye contact thing can be threatening and difficult and has cultural and historical implications as well. So in some way we have to display respect and am a social worker so I go back to the tenant that clients are worth respect in our lives and that helps me with my work.

Let me try another question, these are great questions coming in. What are other symptoms to know that children experience grief --? This might've come in before the slide they put up about different grief reactions but children sometimes will tell you and you won't necessarily see excessive crying but you will see regressive behaviors like leaning in this cleanliness sometimes people see toileting disruptions or eating disruptions that indicate they know something about their environment is changed maybe mom is nursing me right a sibling that plagued with me and not here anymore so we will see a lot of the different behaviors I

illustrated on the slide and things like a decreased in grades but sometimes we see an increase because we see a hyperfocus on school so they don't deal with the other things unfeeling related to the age of the client we are serving. So I want to leave you with a quote that I think captures a lot of what the grieving children and teens might feel and captures my gratitude for being here with you today and by the way it's the famous Winnie the Pooh, if there's ever a tomorrow and we are not together there is something you must always remember you are braver than you believe stronger that then use even smarter than you think but the most important thing is even if we are part I will always be with you and that's part of that connection to love after loss continuing bonds to our loved ones but also I want you as mental health partners working with these children to know that you are braver than you believe. You are stronger than you seem and smarter than you think your heart is equipped to do this job, seek out more training in this area and continue to impact the lives of your client because we need you and they need you. Thank you for inviting me to be a part of this today and if you want to read more please visit my blog post and thank you for your time it's been an honor to share the space I hope you have a wonderful day and enjoy the rest of the grief summit, thank you so much for joining us.