




**Child &
Adolescent
Bereavement
Service**

Child and Adolescent Bereavement Service at
Harlington Hospice



Working with Pre and Post Bereaved Children and Young People

Paula Boyle

MA Art Psychotherapist and Service Manager
Child and Adolescent Bereavement Service (CABS)
Harlington Hospice and Michael Sobell Hospice

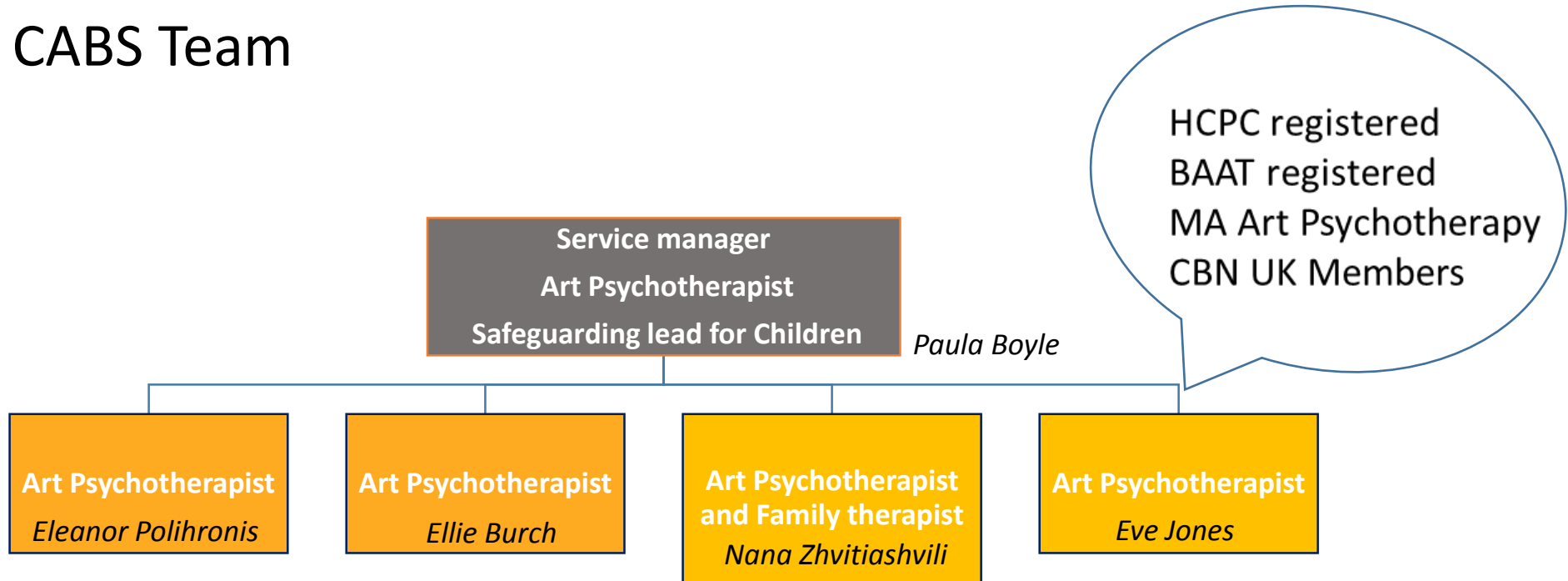


Introduction

- 🌸 Overview of CABS service
- 🌸 Art therapy with children and young people, who are pre - post-bereaved
- 🌸 Working systemically to keep C/YP safe
- 🌸 The impact of Covid-19 pandemic
- 🌸 Outcomes for summer workshops
- 🌸 Concluding



The CABS Team



The Art Therapy Rooms



Harlington Hospice



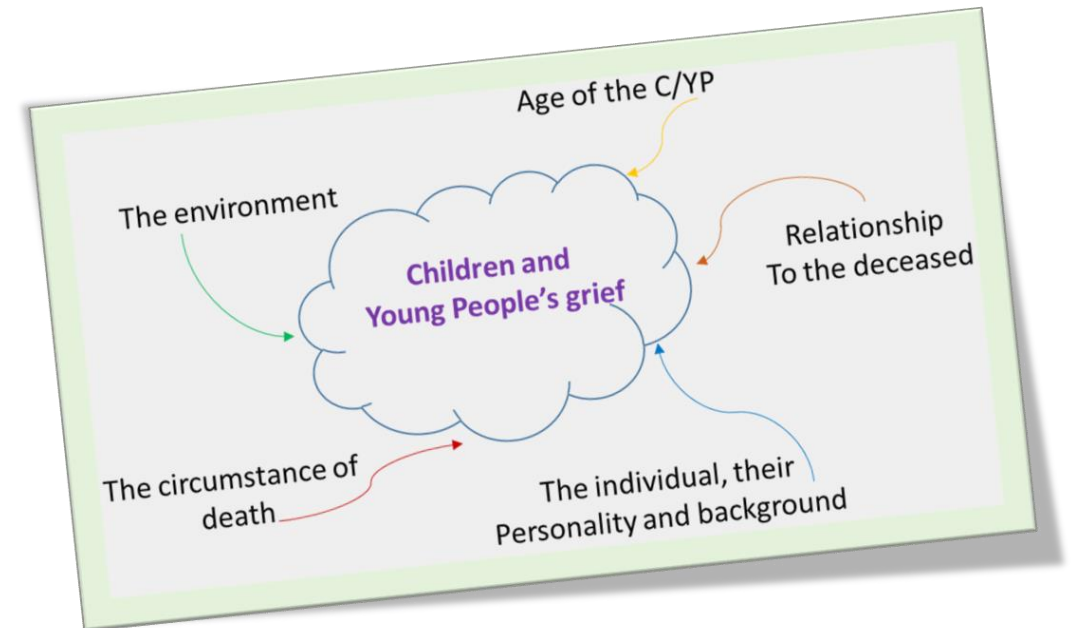
Michael Sobell Hospice



Bereavement Support for children and young people

‘Children's reactions to bereavement are affected by many factors. These may be to do with who has died, how they died, what their relationship was with the person, how the family expresses their feelings, what other things are going on at the same time and whether their school and home community are supportive’.

(Child Bereavement Network - UK)



How can Art Therapy help with grief and loss?

Art Therapy is a form of non-verbal communication that uses art materials that can help express feelings that are often too difficult to put into words. The artwork created in the sessions often helps children and young people discuss their feelings with the art therapist.

The art making in sessions can help shift perspectives and understand feelings with more clarity.

Art therapy is especially helpful with reducing feelings of anxiety, make sense of difficult behaviours, reduce isolation and create memories.



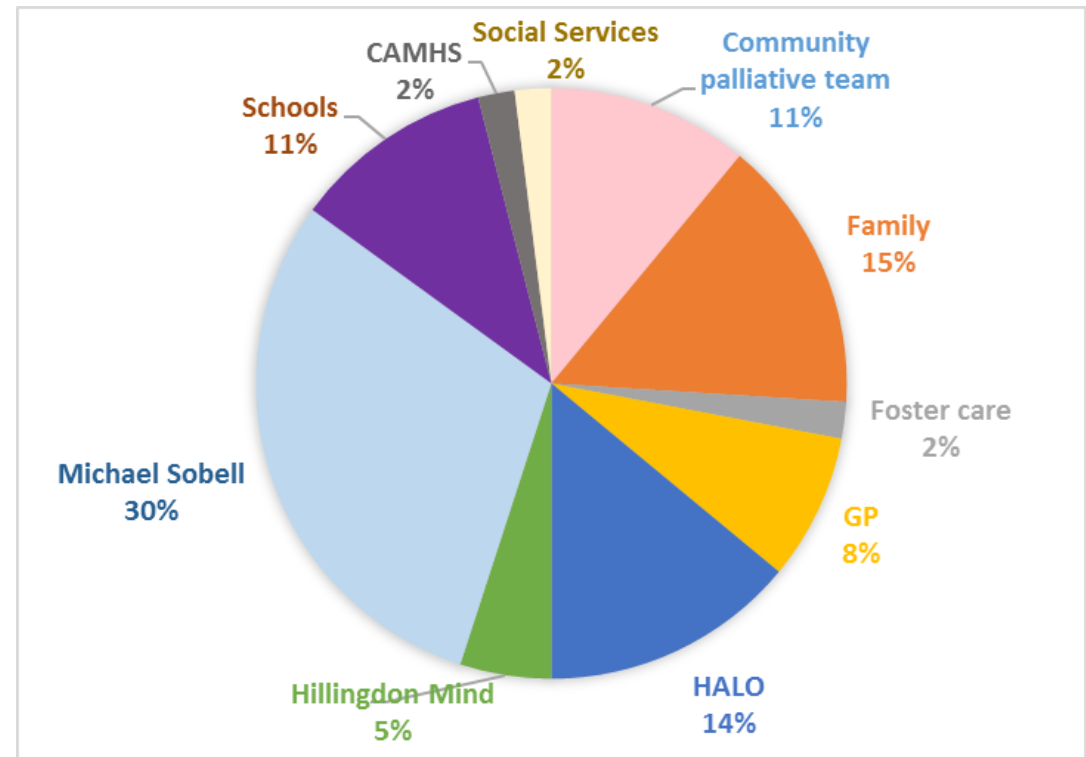
Referral process:

cabsreferrals@harlingtonhospice.org

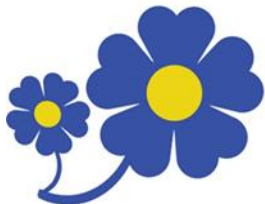
Professionals can make referrals to the above email address

Our quality standard is contact families within 3 working days.

Assessments will be carried out within 2 weeks.



Source of referrals 2020



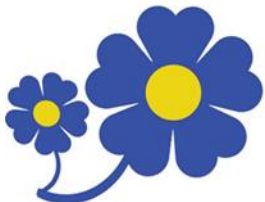
Evidence based practice

- Worry trackers ages 10 - 17
- Emoji trackers ages 4 – 10
- Letters to GP, school family start and close of sessions.
- Adult/parent/carer questionnaire
- Initial assessments
- Summary of sessions sent to GP, School family
- Case review – monthly review of casework
- Clinical illustrative records
- Clinical notes
- Contribution to professional literature BAAT



Reasons for referrals

- Life limiting prognosis
- End of life care
- Sudden death
- **Death of a parent**
- Death of sibling
- Bereavement by suicide
- Death of a grandparent
- Close relative
- Friend

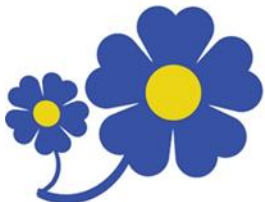


What we offer

- Ages 4 -17
- Individual
- Family sessions
- Groups
- Events
- Workshops
- Parent support
- Advice and support for professionals

Reactions to grief and illness

Sleeping difficulties/bedwetting
Depression
Fearful /hyper vigilant
PTSD
Withdrawn and isolating
Intrusive memories
Separation anxiety from parent/carer
Difficulties eating
Feeling angry, disruptive
Lack of concentration
Physical pain – headaches
Difficulties in school
Feeling to blame



Long term impact of grief:

Bereavement can have a significant impact on a young person's health and wellbeing. The following risks to development have been identified:

- Reduced self-esteem: two years following the death of a parent, self-esteem is significantly lower in comparison to peers. (*Silverman & Worden, 1992*)
- Reduced academic achievement increased risk of offending behaviour (*Liddle & Solanki, 2000*)
- The loss of a parent in childhood increases risk of developing adult depression (*Worden 1996*)
- Children and young people are more vulnerable to reduced engagement and concentration at school. They may display a change in behaviour such as poor attendance, risk-taking behaviour, self harm, mood swings, becoming withdrawn, bullying behaviour or illness (*Child Bereavement UK*).



Working Systemically to keep children and young people safe.

- The family
- Schools
- CAMHS
- GP's
- Social Services
- Hillingdon Hospital (Pediatrics/ adult care)
- Hillingdon Mind (Parent Support)
- Macmillan
- Halo Children's Foundation
- Michael Sobell inpatient unit (Doctors/Nursing team)
- Harlington Hospice Day Care
- Community Palliative care team



Safeguarding children and young people

Themes of safeguarding:

- **Online Safety:** Isolation in grief, restrictions during covid, peer abuse and intimidation.
- **Gender dysphoria** – leading to subsequent bullying and severe abuse from peers, resulting in School refusal
- **Education:** Vulnerabilities of grief and loss, leading to bullying in school & absence.
- **Mental Health concerns:** Self harm/ Suicidal ideation
- **Disruptive family dynamics**
- **Neglect** – absent parent/carer in grief
- **Child protection:** attending team around the family meetings



Response to Covid19 Pandemic

Recruit two part time therapists to meet the increased need for bereavement support in the borough.

We proposed:

- Reducing Anxiety
- Remembering a loved one
- Overall improvement in wellbeing including



Letter writing and memory making work



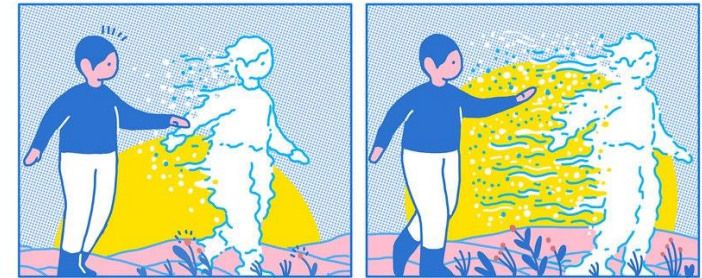
The impact of Covid- 19 Pandemic

- Social isolation
- Heightened Anxiety
- Worry about family members getting ill
- Missing important cultural rituals
- Not getting to say goodbye
- Self harm
- Online safety
- Increase in abuse and neglect
- Agoraphobia
- Poverty
- Fear
- Mental health



Being honest

- *“I feel angry that no one told me, I could have spent more time with mum instead of being a stropky teenager in my room alone, I feel very guilty now and I get very upset and I have a lot of regrets. I wish I could go back and spend more time with her, I wont get that time again. **M, aged 17.***
- *I knew my father wasn't well, but I didn't realise he was going to die. It came as a very big shock when I went to the hospital with my brother and were told he had died'. **B aged 13***
- *I wasn't told that my father was terminally ill, and it was very traumatic when he died. My mother told me my grandfather is unwell, but I don't know if it's serious or he will recover. I don't think I trust that I will be told the truth'. **C aged 12***
- *I wasn't' allowed to go to my baby brother's funeral – my dad said I should go to school and spend time with my friends. It's not fair that I didn't get to say goodbye. I think he thought it would be too upsetting for me. **A aged 11.***





The importance of adequate information


- Age-appropriate language (“He has died”, not “He has left us”)
- Enough information without overwhelming a child
- Honesty – sometimes the answer may be “I don’t know”
- With traumatic death – to provide information in stages over weeks and months (giving some facts at first)
- Some aspects of death may need to be repeatedly explained to younger children
- Explanation about the physical reality of death (irreversible transition from one state to another)
- Consider and respect spiritual or religious beliefs about death
- Preparation if someone close to a child has terminal illness (a chance to say Goodbye, visiting dying relatives, talking to them, making things for them)
- Thinking about neurodiversity and special needs



Feedback from families

 “I wanted to let you know that I got my A level results today and thought you would like to hear that I did really well. I got AAB and will be going to the Uni I wanted. Thank you for all your help in the past months. The sessions really helped me get through my A levels and means a lot to me”. *17 year old girl suffering panic attacks.*

 “I don’t feel as angry now, my emotions are not as high. Talking about my feelings in the therapy sessions has benefited. I have learned a lot about myself also, not everyone thinks or grieves the same way, I expressed my feelings with anger and thought this was weird, but now I know it was part of my grieving and I know myself more”. *15 year old boy grieving the loss of his grandmother.*

 “Since working with you, my son has had very positive experiences at school, is a lot calmer and shows less anger. His relationship with his brother has also improved greatly. This has been a very positive experience and has been really good for him” – *Mother of bereaved boy, aged 9.*



Thank you for listening

To make referrals please contact:

Cabsreferrals@harlingtonhospice.org

Visit our webpage

<https://www.harlingtonhospice.org/cabs>

