

‘Coping with Christmas’ - a group intervention for bereaved children



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Abstract: This paper outlines a day-long group intervention for children over the Christmas period who have experienced the loss of a family member. Christmas can be a painful time for children and families as intense feelings of grief may emerge and can be difficult to manage. Group interventions with bereaved children have been demonstrated to be effective and a group intervention was developed that encouraged Christmas to be seen as a time for remembrance, enjoyment and for the development of coping skills. The content and structure of the group is described. Findings from evaluations are reported and issues about the intervention are discussed.

Keywords: Childhood bereavement, Christmas, coping

Introduction

While managing the loss of a significant person in a child's life is difficult, painful and the feelings associated with this loss, unavoidable, Christmas in particular can be a difficult time for bereaved children and families. Even Christmas messages that rally against the materialism of the season do so by drawing on ideas of the importance of family, simple pleasures, and togetherness as free alternatives to materialist sensibilities. However, for some children, this can be the first, or one of many Christmases when they may experience feelings of grief and loneliness for the person they have lost. When someone important has died in a family, Christmas can feel so very different and hard to manage (Child Bereave-

ment UK, 2017). Healy-Romanello (1993) described that bereaved children can become invisible grievers to the adults around them, and this is never more true than at Christmas.

Below we highlight a group that we set up and facilitated so that children who have lost a family member have the opportunity to acknowledge that Christmas will not be the same, but different, and to develop opportunities to navigate the challenges that this may bring.

Background to service

The intervention was delivered in the context of a Child & Family Bereavement Service that has been providing various levels of bereavement support to children, young people and

families (CYPF) since April 2013. The service works with families when bereavement is impacting on the functioning of the family. We meet with many young people and their experience of grief can be through expected or unexpected deaths, suicide, the death of a friend, parent or grandparent. While some of these CYPF have many commonalities in the challenges they face, there are also important differences, as Worden (2009) highlights, such as who the person that died was, the nature of the attachment, and the mode of death. These are all mediators of the grief experience that are related to the person who died or how they died.

Our framework for children's support group interventions

Group work with bereaved children promotes contact with other bereaved children, helping to normalise experiences and diffuse intense emotional expression, as well as providing a useful social framework and reducing isolation (Stokes, 2004). The advantages of running bereavement support groups for children are well documented elsewhere. For example, Akerman & Statham (2014) found that even children who do not exhibit clinical levels of distress may benefit in the longer term from interventions which normalise their grief and strengthen their coping strategies; however, it is a challenge when the type of bereavement is not the same. In recent years, due to multiple factors, there has been a trend to address psychological difficulties from a transdiagnostic approach (commonalities in cognitive and behavioural processes that maintain symptoms across a range of psychological disorders). While we do not consider grief to be a psychological disorder, we have found this idea useful to consider how we can develop group interventions that address the commonalities between the lived experience of grief. Haine *et al* (2008) highlight a number of evidence-based practices that have been shown to contribute to, or protect children from, poor developmental outcomes following a death. These include: increasing child self-esteem, increasing adaptive control beliefs, improving coping skills, supporting adaptive expression of emotion that the child wishes to express, facilitating a positive parent-child relationship, parental warmth, parent child communication, reducing parental distress, and increasing positive family interactions.

As such, our approach within the service has been to focus on developing individual and group interventions that consider the above child factors, whilst using family, or carer-child dyad sessions to address the above family factors (amongst other interventions). In order to provide a service that meets all needs, we provide individual or family support for interventions that require the privacy and intimacy of a secure worker in the team. However, we also use group interventions to build the children and young people's resilience and provide opportunities for them to learn from each other, and to undertake work that is enhanced through

meeting other bereaved children, for example, normalising grief responses.

The nature of children's grief is considerably different than grief displayed by adults as children do not always have the language or cognitive ability to understand loss and express how they feel about bereavement (Webb, 2005). Therefore our children's groups will always include creative activities which can help children to express feelings or experiences which they may not be able to verbalise (Crenshaw, 2005). Creative activities also address some of the difficulties encompassed by having children and young people with different cognitive capacity and understandings at the group. Creative activities can also aid children and adolescents in fostering feelings of control through choosing colours, materials and designs (Edgar-Bailey & Krees, 2010) and can also enhance emotional regulation (Crenshaw, 2007).

As highlighted earlier, the principle of resiliency is a core element of our service. Newman and Blackburn (2002) state that a resilient child is one who exhibits positive adaptation in circumstances where one might expect, due to levels of stress, or multiple stressors (commonly seen after a bereavement), a significant reduction in coping skills to take place. Group interventions can have an important role in the process of resiliency, as the ability to make and sustain intimate friendships, and the availability of support networks of friends, siblings and other important social ties have been associated with resilience, both in childhood and later life (Newman & Blackburn, 2002). Resilience in childhood is associated with a number of positive outcomes including improved mood (Hjemdal *et al*, 2007) and fewer behavioural issues (Naglieri, Goldstein & LeBuffe, 2010).

A further idea that contributed to the development of the service rationale for group work was Stroebe & Schut's (1999) dual-process model of grief and their proposal that those who have been bereaved need to focus on (or oscillate between) both grieving and restoration in order to grieve 'well'.

The 'Coping with Christmas' Group

This framework of ideas was applied to creating an intervention that would help children and their families both prepare for and cope with the Christmas season. This led to a series of activities to foster resilience and build a number of coping strategies, whilst being an open and safe space for children to feel able to share their story of bereavement if they wished. The group, which runs over the course of a day, has now run, in the first week of December, for three years. In that time, although the basic approach remains, it has developed to be an important part of our service that helps maintain links with our clients and has helped them develop friendship networks with each other. The structure is described below.

Demographics of those invited

The service covers Cardiff, Wales, UK, a city with a population of approximately 350,000 with a primarily white Welsh/British population as well as non-white ethnic groups. Each year we have invited all children who have been actively involved with our service in the year prior to the group who we believed would benefit from the group. This would mean they had received at least an assessment from us and possibly individual or family support prior to the intervention. On average, 14 children each year have attended the group (minimum 12 to maximum of 18) ranging in age from five to 16 years old.

Although we did not have any specific criteria for the group in terms of the type of bereavement which the children had experienced, the majority of children and young people had experienced the death of one or both parents or a grandparent, and the two most common causes were through cancer or suicide. There have been multiple family groups and the time since experiencing bereavement has ranged from four months to six years, although the majority of the deaths had occurred within the two years prior to the group. The children and young people attending the groups have reflected the complexity often seen in the service, in that there are often other factors, e.g. a history of social services involvement, parental mental health diagnosis and/or developmental delay which may be compounding the impact of bereavement.

As mentioned earlier, thought was given to whether each child would benefit from attending the group, whose core focus was on coping and resiliency at Christmas time. Exclusion criteria considered were how recent the death had been (as the service also provides immediate advice, signposting and information for families on very recent bereavements) and any issue that would impact on the child's ability to utilise a group setting (e.g. considering the impact of any sensory processing issues for children with autism spectrum disorders, or recent difficulties with anger displayed in school settings). Cause of death was not an exclusion criteria, as the group was designed to acknowledge the challenge of a Christmas without a family member, rather than processing and navigating the particular challenges raised by cause of death. This included children who had lost a parent by suicide. It was up to the child if they choose to disclose how their loved one died (as it was for all participants) and it was hoped that any such statement would serve to make the nature of death something that can be acknowledged and discussed rather than be stigmatising or a source of shame.

Outline of activities covered

The therapeutic setting for the delivery of the group is focused on creating a safe and accepting environment where the group facilitators are sensitive to each child's feelings and perspective, helping each child and adolescent to feel

that they can participate in the activities if they wish to do so and to begin to build a trusting relationship with the facilitators and the other children within the group. The Coping with Christmas group is held in a community venue inside 130 acres of parkland and landscaped gardens. This particular venue was chosen due to the opportunities for the children to go for walks outside or to play games outside during the break in order to allow some physical distance between 'play time' at break and time spent inside the venue talking about bereavement.

A 'shape' to the day has evolved to create a structure, and, although activities may vary, the shape is now settled. The structure and activities are described below and this is followed by a narrative account of a typical group. The group runs from 10.00 AM until 3.00 PM. All service members assist in the running of groups and we also have psychology students and volunteers assist to achieve a desired staff:child ratio of 1:3.

1. **Introduction and warm-up activities:** these serve to help the group feel comfortable and get to know each other. Activities include 'name games'/other group games and setting boundaries to the day by involving children in constructing 'rules' for the day which commonly include items such as being able to take 'time out' from any activity, confidentiality and being considerate to others. There is also the opportunity to speak about the person who has died. The emotional component of this involves building trust and communication and reducing stigma and isolation.
2. **Group activities:** this has involved activities such as remembering and planning for Christmas, for example, looking at positive expectations of Christmas, possible triggers for difficult feelings and potential coping strategies for feelings. We have also used storytelling as an activity that can evoke both positive and negative feelings and provide a springboard for drama activities exploring feelings. These activities aim to help children understand both positive and negative emotions and develop adaptive emotional regulation strategies and coping skills.
3. **Coping strategies:** the main coping strategy promoted by the day is communication. Kissane and Bloch (2002) have highlighted how higher levels of communication in families is associated with better family functioning and the aim of our service is always to provide family interventions in addition to individual interventions. At the end of the group, young people are given scripts of all the coping strategies discussed on the day to share with their parents as a bridge between what had been discussed in the group, and what could be discussed and put into action at home. Coping strategies discussed on the day are generated by young people's own ideas of what worked for them, with additional ones added by the facilitators of the group. These have covered areas such as relaxation and self-care

- exercises, positive self talk, and how to utilise the resources around them (e.g. friends, family, school).
4. **Shared lunch and break:** lunchtime has involved time away from the formal group space allowing time for outdoor games and play and then a shared meal together. This period allows for more informal interaction between staff and children and for children with each other.
 5. **Individual 'linking' object-making:** activities that encourage active remembrance of the deceased person and involve making something that can be taken home and shared with the family. This encourages communication between the child and staff about the loss and between family members and the child about the person over the Christmas period. This has included making a 'bauble' for the Christmas tree and making a candle from rolled sheets of beeswax. These activities usually take place in small groups, allowing for the child to talk about their grief and staff to then offer support and possible coping strategies and skills.
 6. **Concluding activities, 'ending the day':** the day finishes with games and activities such as Santa arriving with gifts or singing Christmas songs (with the help of a singing teacher). Parents/carers are also invited to arrive for the last hour where they are offered some seasonal refreshments, the purpose of the day is explained to them and they can receive individual feedback about their child's participation. We can reinforce the message of both remembering the person and also enjoying the festive season as being part of the process of grief. Family members have the chance to network with each other and to join the children for traditional Christmas activities of 'Santa' or singing.

Narrative

Following an initial period of 'ice-breaker games' and constructing a group agreement to help ensure that the children feel safe and supported throughout the day, activities such as drama or co-operative games are used to explore both positive and negative emotions safely. Children are encouraged to join in but have the option to opt out and it is not untypical that one or two individuals will opt out possibly because they may be unsure or feeling unsafe or it may be due to other issues. For example, one child with Autism Spectrum Disorder found group activities quite stressful at times. If children do want to sit out, there is a quiet space with some support from staff available. Usually children quickly re-engage with group activities.

The lunch break with games outside (weather permitting) and a walk around the park allows staff and children to get to know each other better and 'chat' with each other. These conversations develop over lunch together.

The activity that aims to create a 'linking object' with the person who died takes place after lunch, by which time there is a comfortable and relaxed atmosphere. Children feel safe enough with each other to approach the potentially

painful task of remembering. In the bauble making activity, children select an empty transparent bauble from a Christmas tree which is to be decorated. They each tell the group who the bauble is for, for example, 'This bauble is for my Mum who died four years ago'. One of the aims with this activity is to let the children know that everyone in the group (including the facilitators) has had experience of bereavement, to help promote feelings of 'sameness' and understanding and to encourage children to begin to form relationships within the group. Often the facilitators go first in this activity to 'break the silence' and to model talking about their own experience of bereavement.

The baubles are decorated by the children in memory of the person in their life who has died. This activity is strongly influenced by the continuing bonds model and the baubles are seen as 'linking objects' which can provide a feeling of connection between the child and the person who has died (Andrews & Marotta, 2005). The use of a Christmas bauble as a linking object is a way of ensuring that the child's memory of past Christmases spent with their loved one are preserved (Neimeyer, 1999) and can be reflected upon at each Christmas when the bauble is brought back out to be placed on the tree.

After the Christmas bauble activity, parents and carers are invited into the room to join with their children to see what their children have produced. This aims to promote conversation about the person who has died. It is hoped that this activity will allow parents to see how comfortable children are in celebrating the person who has died, and encourage conversation within the family about them at this time of year. Ways of coping are also discussed and this is reinforced by giving a 'coping script' summarising ideas discussed in the group. The children are encouraged to discuss this with their parents after the group (as talking and communicating will have been covered as a helpful coping strategy).

Finally, traditional activities, along with parents and carers, bring the group to a conclusion. They often bring an emotional poignancy to the group where such activities, usually associated with the 'joys' of Christmas, can take on a different tone as. Again we work to validate and support anyone who may be visibly upset. Our experience is that, even though such moments are painful, the experience of being in a group where such feelings are understood is helpful.

Evaluation

At the end of the group, participants are asked to fill out a short evaluation questionnaire. The responses have supported the rationale for introducing children to other bereaved children, as many of the children have stated that the best thing about the group is meeting other children and making new friends. One child put it that the best part of the group was 'being around people who are going through

the same thing'. One of the aims of the group is to provide the children and young people with coping skills which they can utilise outside of the group setting, and 93% of the children have stated that they felt that the group helped them to cope better. The psycho-educational elements of the group appeared to have been of benefit to the children and young people, with 79% of children stating that they felt that they had a greater understanding of bereavement at the end of the group.

A more limited evaluation of parents'/carers' views of whether the group was helpful to the children, taken one month after the event, was done following the most recent group in December 2016. There was a 100% response that the group was beneficial for the children, with the activities and meeting other children being seen as the most helpful aspects. There were also high levels of agreement that the group helped the children's understanding of bereavement and some parents expressed that they found the meeting with other parents helpful. Of course, more formal evaluation of the intervention would give a better indicator of the efficacy of the groups but these informal evaluations strongly suggest that the group is helpful to children and a more thorough evaluation would be justified.

Discussion

Peer group support which contains an element of psycho-education has been shown to normalise children's grief, thus helping to reduce anxieties (Hope & Hodge, 2006) and therefore our activities include opportunities for the group facilitators to provide information on common feelings such as anxiety, anger and guilt and some of the reasons why we experience these feelings. The coping skills activity aims to foster resilience and increase a child's resources to cope with difficult feelings after a bereavement. Research has indicated that participating in new experiences and learning how to cope differently can increase children's resilience and their belief in themselves to deal with challenging situations (Gillespie, Chaboyer & Wallis, 2007).

Child development research has highlighted the importance of children and adolescents developing supportive peer relationships (Armstrong, Birnie-Lefcovitch & Ungar, 2005) and peer support can have a significant positive or negative influence on a child's adjustment to the death (Sandler *et al*, 2003). Bereaved children who talk to their friends about the death tend to display higher levels of self-esteem and report feeling more connected to the person who has died (Worden & Silverman, 1996), although bereaved children do report numerous difficulties in accessing support from their peers, such as isolation or rejection (Sethi & Bhargava, 2003), a fear of being 'different' from their peers (Worden & Silverman, 1996) or bullying (Metel & Barnes, 2011), leaving children feeling isolated and alone. This can lead bereaved children and adolescents to seek out support from peers who have also experienced a

bereavement in the hope of receiving greater understanding and support from these peers.

Our own experiences of running the group also reinforces our belief that it is a powerful way of helping children, and, to a lesser degree, their families in dealing with grief, particularly with the additional pressures that Christmas can bring. This has led to the group becoming a permanent part of our service. It also has led to the development of other family days that take place throughout the year. These take place in correspondence with the four seasons and we use the pattern of seasons continually changing through darkness and light and death and new growth as a metaphor for grief. We invite families to spend the day together engaging in both fun and social activities as well as having the opportunity for remembrance. The support that both adults and children give to each other is evident in their interactions and the feedback we have received.

Getting the right balance between creating an environment that is playful and enjoyable balanced against potentially painful remembrance activities is a matter of constant reflection. It would certainly be possible to increase the 'therapeutic' content of the day. However, the feedback received indicates that it is important that the day is not too emotionally tense or demanding and keeping a focus on fun helps create a sense of safety. We are also aware that although we live in a primarily Christian context where Christmas is a major festival, many of the families with whom we work come from different religious backgrounds. We invite all families we work with to our group but as yet have not had any non-attenders on religious grounds as far as we know. Even the invitation to the day offers an opportunity to reflect on issues such as dealing with festivals and events. However, the absence of non-Christian families from the event may reflect a cultural bias and we look for opportunities to explore with families of all backgrounds the meanings of rituals and festivals for them. We have also found that Christmas is seen as a family occasion and holiday even if not seen as a religious holiday by some and not marked at all for others. It would be interesting to consider whether a similar intervention would be appropriate for festivals such as Eid or Diwali.

We also are looking to involve parents and carers in more formal groups looking at developing coping skills and thinking about parenting in the context of loss. Feedback suggests that this certainly appeals to some parents and carers who gain support from each other but there is another group who would prefer not to have this kind of support. Another issue is that has been harder to engage teens in the group and those that we have had have been mixed in their engagement.

In summary, our 'Coping with Christmas' day-long group intervention has been a successful and apparently helpful way of supporting children in dealing with the stresses that Christmas can bring to a grieving family. The

feedback we have received has been highly positive and it has led to further family interventions.

Practical considerations

One of our hopes in writing this paper was to provide ideas for other services that may be considering the creation of a similar group. With this in mind, we've summarised some of the ideas which we found important to consider:

- Comprehensive debriefing was organised for staff members to counteract the emotional impact of a full-day group. This included an informal debrief at the end of the day, and a formal debrief in the following week which was facilitated by the operational manager of the service.

- We found that having a venue where we could utilise outdoor space was key in providing a separate physical environment which could be a direct contrast to the room where the therapeutic activities took place as the atmosphere in the room could at times feel 'heavy' and 'emotionally charged'.

- As a follow-on to utilising available outdoor space, we also built in time for outdoor activities and guided walks into the group. The need for this became apparent during the first year, when we discovered that young people began to talk unprompted to each other about their experiences of bereavement and coping during an unstructured walk. As one of our key aims for the group was to promote young people sharing their experiences with each other, we resolved to continue to promote this in subsequent groups.

- Due to the high number of children and young people attending the group, a buddy system was implemented so that each staff member was responsible for between three and five children and young people throughout the day. This included practical responsibilities such as facilitating toilet breaks, but also included being a named member of staff whom the child could seek out if they needed a short break from an activity or if they became distressed.

- Parents and carers were often involved in the group during the closing activity. We also found it helpful to brief parents and carers prior to the group that their child might have additional questions or reflections about their experience of bereavement or their loved one following the group.

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