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Trauma, Loss, and Grief in Children During the COVID-19 Pandemic: Care Provider Handbook

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The COVID-19 pandemic is a significant threat to the health of people everywhere, particularly those at elevated risk. So far, evidence suggests children are less likely to become seriously ill with the virus. Yet children may be at greater risk for mental health effects of this pandemic, given their limited capacity to understand their surroundings, cope with stressors, and control their environments. Potential stressors may include:

- Illness or death of caregivers, relatives, acquaintances, or community members
- Fear of contracting the virus, or of a loved one contracting the virus
- Exposure to disturbing media content or distressing adult conversations
- Separation from caregivers (essential workers, first responders) who do not want to expose family members to the virus
- Confusion and fear about the virus, including society's measures to contain it
- Economic impact, such as family job insecurity or loss, food insecurity, or disrupted access to healthcare or other support services
- Increased family stress and conflict, abuse, domestic violence, or neglect

These stressors may range in severity and pervasiveness, but how families and children respond depends not only on the nature of the loss or traumatic event, but also of the capacity of individuals and families to adapt and respond to those events.

To complicate matters, children often have difficulty talking about experiences of loss, grief, and trauma stemming from the COVID-19 pandemic. This can make it difficult to know who may be affected the most. The following guidelines are intended to support care providers in identifying and responding to trauma, loss, and grief in children.

Understanding Trauma During the COVID-19 Pandemic

Childhood trauma involves a negative reaction (which we call traumatic stress) following an overwhelming, upsetting, frightening experience (which we call a traumatic event), which challenges the child's ability to cope. Many children are currently being exposed to and reacting to a confusing, stressful and frightening situation during the COVID-19 pandemic, but does this necessarily lead to trauma? Let's look at some definitions.

Traumatic Events

Traumatic events typically involve situations that are out of our control, beyond our usual experience, and cause us to feel as though our lives or the lives of others may be in danger. We often think of events such as experiencing or witnessing abuse, assault, terrorism, natural disasters, serious accidents, etc. as falling into the category of traumatic events.

The COVID-19 pandemic certainly is an unusual, unexpected event that is causing many to worry and even panic. Each child, however, is having a different level of exposure, based on a number of factors. For instance, many children are seeing and hearing frightening news on television. Some have family members or other people they know who are sick or may have died. Children's responses can vary greatly, based on not only different levels of exposure, but also on what is going on around the child. If a child's caregivers are relatively calm and reassuring, this can be a protective factor. If, on the other hand, caregivers are overwhelmed with their own worry, panic or grief, it can be hard to provide the reassurance children need. The way a child reacts may therefore be strongly influenced by how others around them are reacting.



Asking About Trauma

Many care providers are reluctant to ask families or children about their exposure or reaction to traumatic events. This may be due to a concern that simply asking about the events will provoke anxiety or discomfort, or that families will feel offended. Paradoxically, many parents feel the opposite way when they are asked about mental health concerns—they report feeling seen and cared for.

Other care providers forget or neglect to ask about trauma because they believe the incidence to be so low and the signs to be so clear that the few who are affected will be easy to spot. Both of these assumptions are problematic, as childhood psychological trauma is both more common and more difficult to identify than we would like to believe.

Still, other care providers may avoid asking about trauma because they are not sure what they would do if they uncover these concerns. There are many resources for assessing and responding to trauma in young children in most care centers, including people who have the experience and skill to respond if concerns are discovered. The bottom line—the best way to determine a child’s exposure and reaction to traumatic events is the most obvious: **ask!**

Identifying Traumatic Stress

Some level of worry, confusion or sadness during the COVID-19 pandemic is normal, while other emotional and behavioral reactions might indicate traumatic stress. Note that these pointers concern traumatic stress, rather than post-traumatic stress, as the COVID-19 situation is ongoing.

Typical reactions following a traumatic event will vary depending on a child's age, developmental level, degree of social support, coping skills, among other factors. Some children show signs of traumatic stress in response to stressful events, while others do not. Some typical reactions that children may exhibit following a traumatic event include:

- **Unwanted Thoughts or Images.** Children may replay certain thoughts or images in their minds or have an increase in nightmares (which may or may not be clearly related to the traumatic events). Children often describe feeling unable to control these thoughts or images. Some children may draw, write, talk or play about the event(s) repeatedly.
- **Negative Feelings.** Children may struggle with a range of negative feelings including sadness, hopelessness, irritability and anger, or numbness. Some children may become overwhelmed by their feelings and act silly or younger than their age. Others may become anxious, especially when separated from caregivers. Children may display behaviors they had previously outgrown, such as becoming clingier, bedwetting, separation anxiety, sleep difficulties, etc.
- **Avoidance of Reminders.** Children may avoid, or become agitated or distressed if unable to avoid, people, places, and things that remind them of what happened, or what is happening.
- **Problems with Attention.** Children may have a hard time concentrating on schoolwork or other activities. They may seem more forgetful or seem like they are daydreaming.
- **Arousal Symptoms.** Children may startle more easily or feel like there is danger or threat present. They may have an increase in stomachaches, headaches, other bodily aches and complaints, or have a change in appetite. They may also have difficulty falling or staying asleep.

When to Refer for Additional Help

Research has shown that while some children exhibit signs of stress in reaction to traumatic events, these symptoms will likely resolve within a few days or weeks. Others may have more lasting impact. If you are concerned about any of the following, consult with or refer to a mental health professional:

- If symptoms do not decrease in 2-4 weeks after the event.
- If the family is unable to meet the needs of the child, including if caregivers are struggling because of the traumatic event(s) and want or need support.
- If symptoms are severe or significantly interfere with daily routines, the ability to socialize, or do schoolwork.
- If the child has been previously exposed to trauma, previously diagnosed with a mental health disorder, or struggles with anxiety or other mood problems. These children are more vulnerable for developing ongoing traumatic stress problems.

Consult with or refer to a provider with knowledge of trauma and evidence-based or evidence-informed treatments for treating traumatic stress. Many child psychologists and psychiatrists are providing virtual evaluations and treatment during COVID-19.

Helping Children Cope

Providing developmentally appropriate information to children will help with coping. You can give the following advice to caregivers of the children in your care:

- Depending on their age and developmental level, children are likely to have some information, but this information may be incomplete or inaccurate. Ask children what they have heard and whether they have questions. Provide concrete explanations and use child-friendly language.
- Limit media exposure as it can be overwhelming and confusing for young children to be repeatedly exposed to images or information.
- Be mindful about talking about the event with others when children are present.
- Create opportunities to check in with children. This doesn't have to be a formal sit down conversation but can casually check-in while doing other things, or at dinner or bedtime.

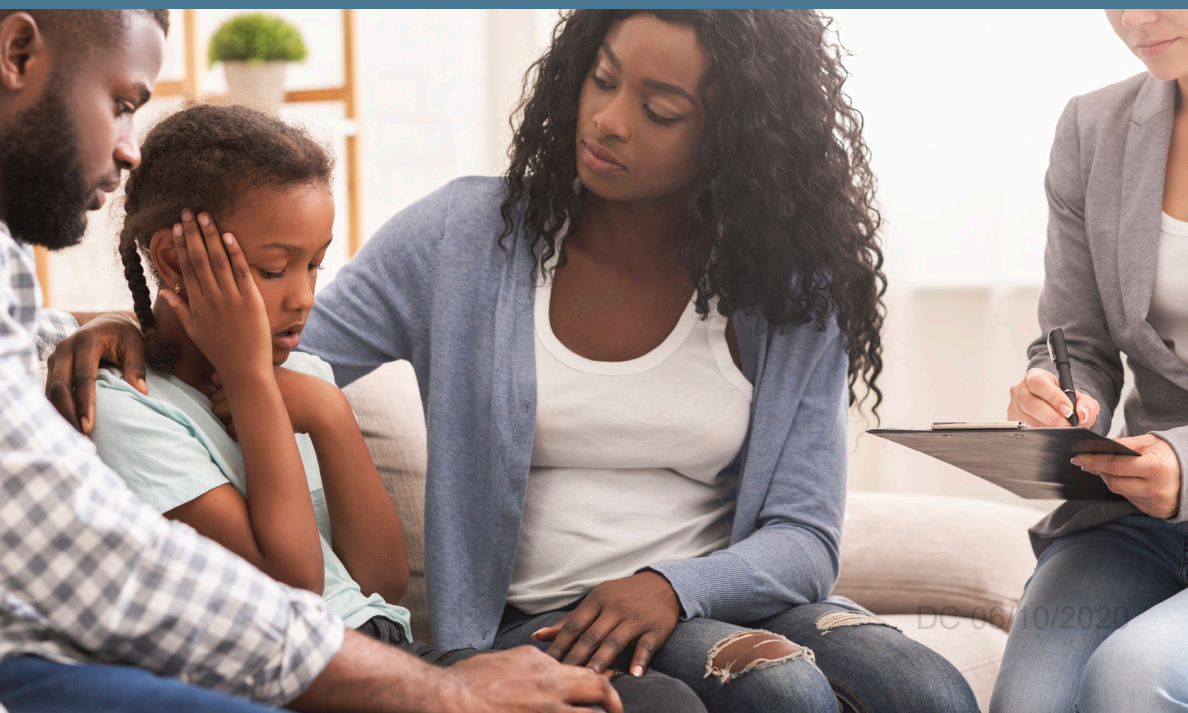
- Children likely have concerns about their safety and the health and safety of those close to them. Provide concrete reassurance about what you are doing in the present and immediate future to keep them safe. Masks and gloves may be frightening, so make sure children understand these are to keep us all safe.
- Be prepared that children may ask the same question or bring up the same concern repeatedly. Try to give a brief, but honest response.
- Teenagers may want to have more information and may need to talk more. Alternatively, they may act as though nothing is bothering them and may say they do not want to talk. Give them space, but also keep a close eye on how they are coping, and create opportunities for discussion.
- If children have difficulty calming themselves, give them simple strategies such as deep breathing, thinking about a happy memory, using a stress ball, etc.
- Young children are tuned into their parents' reactions. Parents can briefly share how they are feeling and they manage difficult feelings. It is important to model healthy expression of emotion.
- If parents feel overwhelmed by their own reactions, they should seek consultation or help from others or from mental health providers.
- Children may feel a range of emotions following a traumatic event. Some children are more able than others to identify how they are feeling. You can help your child by labeling their feeling and providing validation. For example, "It makes perfect sense that you are feeling worried. Lots of people are getting sick, but we are doing everything we can to stay safe and healthy."
- Young children may blame themselves, even if the events are out of their control, or have other inaccurate thoughts about what happened. Help your child come up with more helpful thoughts and coping statements (e.g., "I did the best I could").
- In order to best support your children, you must take care of yourself, too. Make sure you get the sleep and exercise you need. You can use the same self-soothing strategies that you are helping your children practice. Find ways to get support from family and friends and if you are involved in a spiritual group or community organization, stay connected during this difficult time.

Helping Children and Families with Loss and Grief During the COVID-19 Pandemic

It will be all too common in the current COVID-19 crisis that children and families will be confronted with the death of a loved one. More common still will be news of a death in their extended social contact, and it is virtually unavoidable that they will learn of deaths in the community. While news of deaths in extended social circles or in the community may well cause difficult feelings, including anxiety and sadness, children are likely to feel the most intense grief in response to the loss of immediate or extended family members.

The death of a loved one is one of the most painful experiences we can endure. Even under normal circumstances, such a death triggers many feelings, including sadness, longing, fear, and anger.

As painful an experience as it is, it can be helpful to remind families that the death of a loved one is a universal experience that we will all face at one time or another, and it is an experience that we are equipped to manage. It may be reassuring for parents to know that the process of grieving usually happens on its own. For most, all that is needed is the support of loved ones. Every child, and person, may differ specifically in what they feel in response to a death. There is no one right or normal way that children are meant to experience their grief, and there is no one right way for parents to offer support.



Below are a variety of suggestions to provide families dealing with loss and grief during the COVID-19 Pandemic:

Sharing Sad News with Children

- When learning that a loved one has died, children should be provided the essential facts about the death and the circumstances and have an opportunity to ask questions—as often as necessary.
- Graphic details should be omitted. The goal is to provide an age-appropriate understanding of what happened so that children can begin to come to terms with the finality and consequences of the death.
- Young children may need some explanation about what death means. There are no right words, but it's important to convey that it's a permanent state and that people can't come back from it.
- Also, it's important to use the words “*death*” or “*died*”, rather than other language like “passed away” as this may leave room for confusion about what has happened. Some examples of how to communicate to younger children what death is may include that it happens when one's body gets very sick (not like a cold!) and stops working, that it doesn't breathe anymore or need to eat, it doesn't hurt anymore, and that it means that it can't come back. The specific words don't really matter, it's the message that counts.

Helping Children Express their Feelings About Loss

- The experience of sadness and longing at the death of a loved one, while painful, is essential to go through. As much as we want to protect children from this pain, it's really impossible to do and isn't advisable. Experiencing these emotions is in fact one of the most important things that children, and all of us, need to do when a loved one dies.
- Meet children in whatever they are feeling, to provide a chance to talk about the person who died and their feelings about the death, and to validate and normalize their experience.
- Usually sadness and longing are relatively easy to validate. Other emotions, like anger, including at the person who died or at their relatives, can be more challenging to validate but are no less important. These feelings are part of a normal grief response and parents should strive to be accepting of them. Usually, these feelings evolve over time and become less distressing as children begin to reengage in other aspects of life.
- Parents should check-in intermittently so that children understand that they can talk at any time about anything that is upsetting them about the death, but they should not be forced to talk about their grief or the person who died if they don't want to.

Helping Children Cope with Loss and Grief

- Following a death, and especially in the context of this crisis, children may worry about what may happen to them or their surviving loved ones and others in the community.
- Parents should provide reassurance whenever possible about the precautions that are being taken to keep them and their loved ones safe.
- When satisfying reassurances are not possible, instead focus on the steps that are being taken by your family, and in the community, to cope with the challenges at hand.
- The vast majority of children—and adults—will be able to come to terms with the death and resume a life that has the potential for joy and satisfaction.
- Parents should keep family routines as intact as possible, and also make sure to plan opportunities for fun or other positive experiences, either together as a family, or for their child with peers (virtually of course!).
- Positive experiences, fun and enjoyment, are very important in supporting the child's adjustment to a death in the family, and should be encouraged, letting them know that life will continue and that it is okay to have fun and to laugh. The COVID-19 crisis presents new obstacles in this process, but the activities and opportunities for fun need not be extraordinary—shared activities with siblings or family members, and even solitary engagement in other pleasant or enjoyable activity can be helpful.
- Keep in mind that youth, especially younger children, may spend more time engaged in play rather than overt grieving. A helpful rule of thumb is that children who appear to be coping well are likely coping well!
- Caregiver well-being is the most important factor in supporting children through the death of a loved one, and parents themselves should be encouraged to seek any support they need for themselves.



Grieving in Unprecedented Times

During the COVID-19 crisis, many families will face the additional pain in an already heartbreaking situation of being unable to say goodbye to a loved one who is dying, to be together in such difficult times, or to go through the usual rites, like a funeral. Find alternative ways to come together to say farewell and to commemorate the person who died. Families may conduct a ritual or ceremony, an acknowledgement at a meal, or multiple meals, or virtual gathering, and of course a plan for after the crisis breaks to gather in-person for the same purpose.

Getting Additional Help

The death of a loved one can be a profoundly painful experience and in the immediate time afterward it can be hard to distinguish between what is within the norm and what may need attention of a mental health professional. In the vast majority of cases, grieving children, and adults, will be able to cope with the support of their loved ones and will not need professional support.

While some of signs of depression and anxiety are commonplace in grief response, caregivers should watch for signs that the sadness about the loss is having a broader impact on the child's outlook on life or has seemed to impact his or her ability to participate in or enjoy other aspects. If a child's grief seems not to have eased after a period of 6 months, they may benefit from extra support. Similarly, shorter periods of disruptions in sleep, eating habits, or attention to personal hygiene, may also signify the need to extra support. Finally, the emergence of suicidal thinking or self-harming would indicate a need for consultation with a professional.

Additional Resources

- [NYU Langone | Stress, Trauma and Resilience Treatment Service](#)
- [National Child Traumatic Stress Network | Resources for Parents and Caregivers](#)
- [National Institutes of Health \(2012\) “Talking to children about death”](#)
- American Academy of Pediatrics
 - [Childhood Grief: When to Seek Additional Help](#)
 - [After a Loved One Dies—How Children Grieve - And how parents and other adults can support them](#)



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