

Tragedy Assistance Program for Survivors







The Association for Death Education and Counseling® has deemed this program as counting toward the continuing education requirements for the ADEC CT and FT program.



Welcome

Moderator

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Director, Professional Education

Tragedy Assistance Program for Survivors







Learning Objectives

- Provide an overview of issues specific to military culture and family life.
- Describe two specific models for treating bereaved military children.
- Offer suggestions for families, educators and medical providers.







Continuing Education Credits

- Certificates of Attendance will be provided for those who attend the entire program and complete the evaluation.
- Please check with your state licensing board for your professional discipline requirements for continuing education.







Approved CE Providers

- <u>Chaplains:</u> The Association for Professional Chaplains will accept certificates of attendance for use in reporting continuing education hours.
- <u>Social Workers:</u> This program is approved by the National Association of Social Workers, Provider # 886505639, for 1.0 continuing education contact hours.
- Nurses: Provider approved by the California Board of Registered Nursing, provider # CEP15218, for 1.0 continuing education contact hours
- <u>LPC:</u> Provider approved Licensed Practical Counselor (LPC)
 Credits for 1.0 continuing education contact hours through the
 Grief, Loss and Life Transitions Graduate Certificate Program,
 Counseling Department, The George Washington University,
 Washington, D.C.





Evaluation

- ALL participants seeking continuing education credits MUST fill out the online evaluation within 30 days of the program.
- You MUST provide your state and license number, as well as your email address on your evaluation in order to receive credit. CE certificates will be sent to you via email within 3-7 weeks of completion of the program.
- The evaluation will appear instantly after today's program. The form can also be found on <u>www.taps.org/professionaleducation</u> under the program title.





Certificates and Evaluations

To receive credit or certificate of attendance, fill out an evaluation of today's program at: www.taps.org/professionaleducation

This evaluation must be completed within 30 days. Your CE certificate will arrive in 4-6 weeks via the email you have provided. If you do not receive your certificate, please contact us at education@taps.org







Questions Today

If you have any questions today, please submit them through the webinar toolbar located at the bottom left of your screen. Time at the end of the program will be dedicated toward questions and answers.

To **Download** a copy of today's powerpoint presentation, click on the toolbar to the left of your screen to **PRINT DOCUMENTS** and **VIEW LINKS**.







The Tragedy Assistance Program for Survivors





Our Mission

TAPS provides ongoing emotional help, hope, and healing to all who are grieving the death of a loved one in military service to America, regardless of relationship to the deceased, geography, or circumstance of the death.

TAPS meets its mission by providing peer-based support, crisis care, casualty casework assistance, and grief & trauma resources.









Since it's inception, ANP Shas assisted more than 30,000 surviving family members, casualty personnel and professional caregivers.



FOR MORE
INFORMATION or TO
REFERSOMEONE YOU
KNOW:

www.taps.org or 800-959-TAPS (8277)







Transition, Loss, Grief & Trauma: Exposure to Military Children

- •In times of both peace and conflict, children with parents in the military must cope with unique military related stressors.
- Military children may experience childhood traumatic grief following the death of caregiver from combat or non-combat situations or injury.
- •Given the operational demands, risks of duty, and other stressors experienced by military families and community, military children may endure a higher level of exposure to loss, transition, grief and trauma.





Guest Speakers

Heather Campagna, Ed.S.
Tragedy Assistance Program
for Survivors



Judith A. Cohen, M.D.

Allegheny General Hospital









Military Life

- Active Duty vs. Reserve/National Guard Component
- Military culture
- Children change schools often
- "Where are you from?"
- Media coverage of war
- Life at various stages of deployments
- Children of National Guard/Reserve







The Military Home Front

 1.5 million school-age children have military parents on active duty

49,000 US military families include
 2 parents on active duty

 thousands more have siblings, grandparents, and cousins in the military

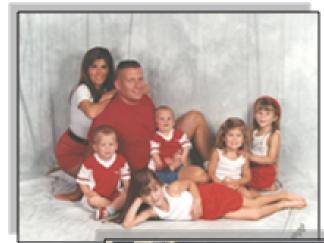






Why losing a loved one in the Military is DIFFERENT

- Death Notification and Military
 Burial these can be very tough
 and take months (Often no body or
 more remains are found)
- Moving away from the military community (off post/base)
 - Change in Origin/Roles of extended family
 - Changing Schools
- Benefits are complex
- Loss of lifestyle the military is a culture and a commitment — TAPS becomes the new military family
- Absence of deployed parent





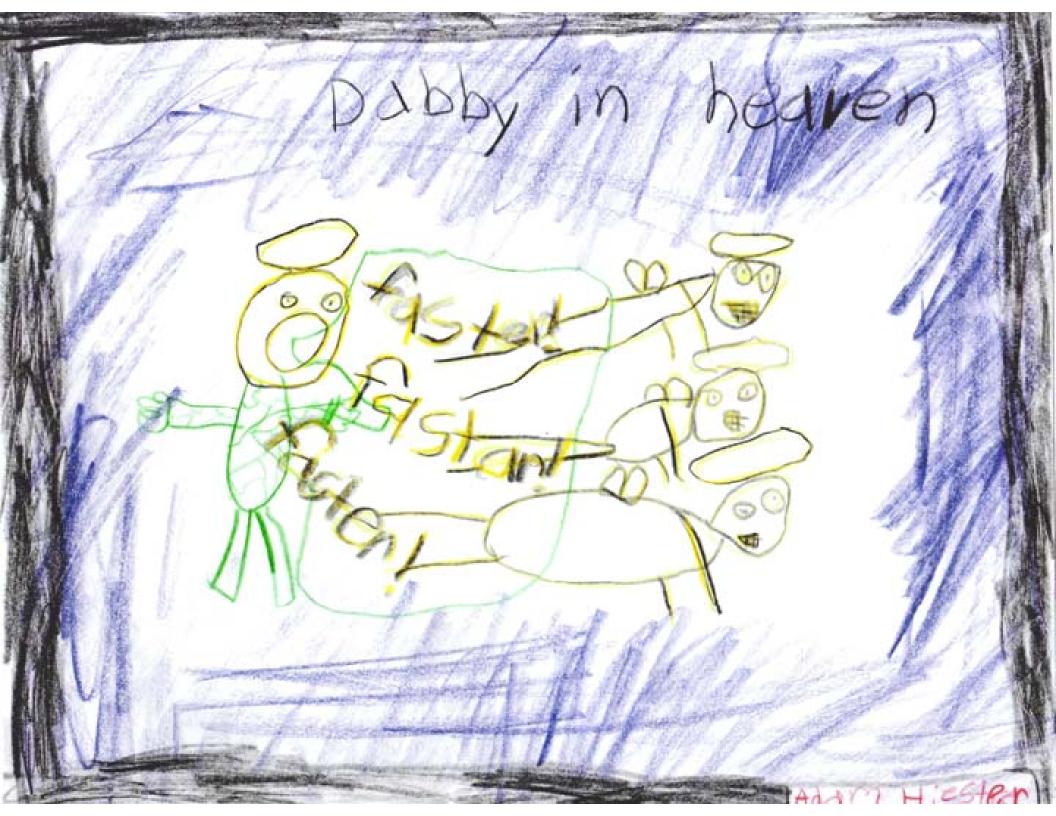




Why losing a loved one in the Military is DIFFERENT

- Media death might have been very public and replayed often
- Loss of identity and status
- Personal/family political and social views on the war and government
- Lack of understanding away from military bases (NG/Reserve families)
- Military rituals and protocol
 - New military ID
- Tremendous pride in loved one's service – this bond is shared







What Does Death Mean to Children?

For children death has profound meaning:

- Loss of the person they love and treasure
- Loss of safety—the child's protective shield
- Loss of belief in the social contract
- Loss of belief in parents as omnipotent—that we have solutions to big problems
- Loss of faith—how could God let this happen?







Making Positive Meaning

- Must make it positive—how?
- Strengthen belief in family, friends, country, faith—something bigger than ourselves and something inside ourselves
- Strengthen resilience
- Military families have unique resources for healing after death







Adaptive and Traumatic Grief

- Traumatic death: nature of the death. All Service deaths are traumatic—unexpected, sudden, shocking
- Adaptive grief: children grieve in a manner that contributes to optimal adaptive functioning
- Traumatic grief: grieve in a manner that impinges on optimal adaptive functioning







Spectrum of Child Grief Responses

Very adaptive ______Very traumatic







Adaptive Grief

- Tasks of adaptive grief (Worden; Wolfelt)
- Experience deep pain of loss
- Accept that the death is permanent
- Remember totality of the person
- Convert relationship to one of memory
- Incorporate important aspects of the person
- Commit to new relationships
- Reestablish healthy developmental trajectory







What Does Adaptive Grief Look Like?

- Different depending on developmental level
- Children grieve deeply:
- Miss the deceased, deep sadness at loss
- Young children have short emotional span → may be very sad, then be playing as usual
- Longing for the person
- Transient changes in functioning
- Adjust to loss with intact adaptive functioning







Example of Adaptive Grief

- Tara, 7 years old, father killed in Iraq
- Grieved deeply, cried, couldn't sleep, couldn't pay attention in school
- Went to funeral, didn't sleep in own room for several weeks
- Wanted to hear stories and see picture of father
- Sad when saw father's buddies, wanted to see them
- Accepted P uncle and later, mother's boyfriend as comforting presences
- Dedicated 2nd grade graduation to "daddy, my hero"







Childhood Traumatic Grief

- Child gets "stuck" on the traumatic nature of the death
- Trauma symptoms impinge on tasks of adaptive grief
- Trauma symptoms may be PTSD, depression, anxiety, anger, and/or other MH problems
- These interfere in an ongoing or serious way with adaptive functioning—family, friends, school, self-care





What Does Traumatic Grief Look Like?

- Intrusive thoughts of how the person died, nightmares, fears, anxiety
- Avoidance, e.g., won't go to cemetery, look at pictures, listen to stories -> upsets family
- Increased physical arousal: irritable, angry, sleep problems
- More extreme sadness depression, suicidal
- More extreme behavior problems—tantrums, fighting







- Joe, 4 years old, single mother killed in training accident, lives with grandparents
- Casualty Assistance Officer (CAO), a large man, came to grandparents' home
- GM became hysterical as did Joe

 Joe started kicking and biting him, couldn't be comforted
- Refused to attend preschool; GM kept him home
- 1 year later: Joe tantrums when sees uniforms or large men; still out of school







- Krista, 12 years, father killed in Afghanistan
- CAO was "honest" about details of death:
- "Father's leg was shot off, hung by a thread while artery pumped the life out of him"
- Krista has nightmares, intrusive thoughts
- Afraid to run cross country—will "break my leg and die"
- Withdrawn from social activities and friends
- Refuses to go to cemetery or reminisce.





- George, 8 years old, father killed in Iraq, kept getting additional body parts, having gory nightmares
- Father was buried in cemetery directly across from school—trauma and loss reminder
- Had trouble concentrating in school, could not pay attention, irritable, angry outbursts
- Teacher and principle said "get over it"
- Became increasingly angry, fighting in school—>
 suspended, out of school







Why Identify Child Traumatic Grief?

- If grief responses are on a spectrum, why distinguish between adaptive and traumatic grief responses?
- Children are suffering
- Children have MH problems and impairments in adaptive functioning
- Effective help is available







Military Child Traumatic Grief: Interventions

- Tragedy Assistance Program for Survivors
- Trauma-Focused Cognitive Behavioral Therapy (TF-CBT)







What TAPS Provides

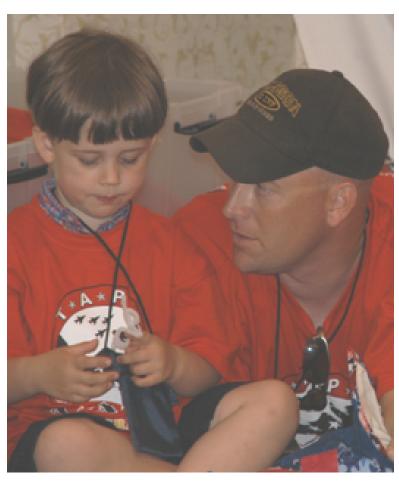
- TAPS Seminars and Good Grief Camps
- Peer support network
- Support for ALL those who have lost a loved one in the military
- Grief Resources
- Crisis Intervention 800-959-TAPS
- TAPS Caseworkers
- Publications (quarterly magazines, Journey of Grief for 5-12 year olds, Teen guided journal)
- Online support through chats and forums
- Bereavement Resource Reports







TAPS National Good Grief Camps



- Held every Memorial Day Weekend in Washington DC with around 375 children from all over the country who suffered a loss in the military
- Trained Group Leaders for every age group (1 experienced Military Leader with TAPS experience and 1 Leader with a mental health/education background preferably military affiliation)
- Provides a safe environment to grieve and tell their story with same aged peers – Lets them know "They are Not Alone"
- Every child is paired up with a trained military mentor who acts as a "big Brother/Sister" for the weekend.
- Therapeutic not therapy





TAPS Regional Good Grief Camps

- Going to major military bases/posts along with states that have high losses and holding Good Grief Camps for children along with Survivor Seminars for Adults
- Approximately 2 Survivor Seminars and Good Grief Camps every month
- Provides a safe environment to grieve with same aged peers (usually groups of 10-20 children)
- One day camps with experienced and trained Group Leaders with a military background along with uniformed military members acting as mentors for the day (often wounded warriors)









Background

- 9 year old white male
- Dad was in National Guard
- PTSD Diagnosis

1st Good Grief Camp (National)

- Paired with incredible mentor
- Was unable to stay in group for more than 1 hour

2nd Good Grief Camp (National)

- Participated in most activities
- Interacted with other children

3rd Good Grief Camp (Regional)

 "led the group" in discussions and asked other children relevant questions to elicit participation





Trauma-Focused CBT

- Evidence-based treatment for child trauma
- Pilot tested for children of uniformed service members after 9/11 and for other types of traumatic death
- Improves children's traumatic grief, PTSD, behavior problems, depression, anxiety
- Improves parent's PTSD and depression in 12 sessions







TF-CBT Model

Trauma-focused components: PRACTICE, for more information www.musc.edu/tfcbt

Grief-focused components: CTG Web

Grief psychoeducation

Grieving the loss and addressing ambivalent feelings

Preserving positive memories

Redefining the relationship and committing to present relationships

Treatment closure issues

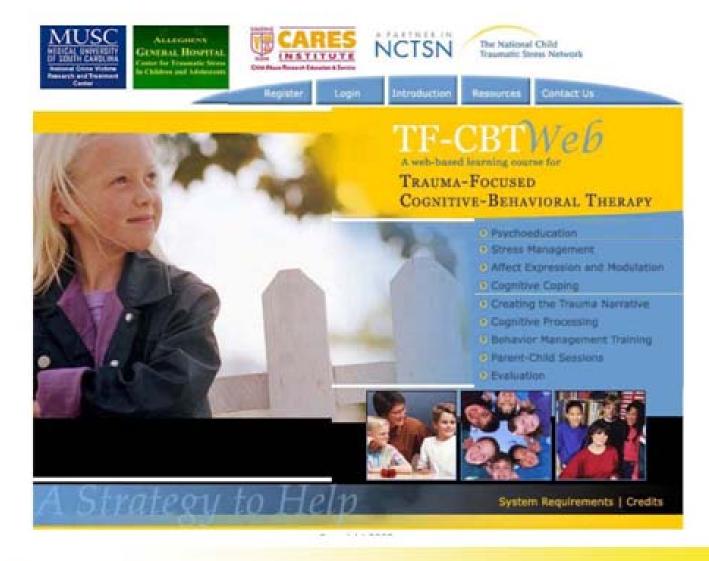






www.musc.edu/tfcbt

TF-CBT Web is a web-based, distance education training course for learning Trauma-Focused Cognitive-Behavioral Therapy (TF-CBT).







TF-CBT Case Description

- George described above
- Psychoeducation about traumatic grief for George, mother and school
- http://www.nctsnet.org/nccts/nav.do?pid=typ_tg6
- Get back to school
- Positive parenting for mother—she decided not to receive additional body parts
- Coping skills for George's anger and anxiety, e.g., karate breathing, visualization, talk to school SW







Coping with Reminders

- Can Do Duck: http://thecandoduck.com
- We say we can, We make a plan
- We get right to it, And then we do it."
- Consistent with military family resiliency
- Pairing coping skills with reminders of father
- George's improved regulation and school's improved understanding > improved response to reminders







George's Narrative

- Developed the story of his life with his father, and then addressed his father's death.
- Included his maladaptive cognitions: "I was at a friend's house and didn't come home to talk to him the last time he called."
- Omen formation: "It snowed in October, never did that, I should have known it was a sign."
- Shared with mother, helped her understand







Grief Components

Grieving the loss: name anagram

G: great football teacher

E: eating watermelon together

O: outside all the time

R: running shoes—had millions of them

G: gave me all his love

E: even though he's gone I still feel him here







Grief Components

- Ambivalent feelings: angry that he left me, but proud that he served
- Preserving positive memories: made a collage with mother with pictures and mementoes
- Converting relationship to one of memory: Balloon exercise
- Committing to positive relationships: began to talk to one male teacher who was reaching out to him, this started positive adjustment
- Treatment closure issues: planning for Father's Day,
 Circle of Life





take walks with king
10 day built with him
90 to games exects to
ride anyour sholoword
talk to you
Exel your
Cours anxing

May footboll

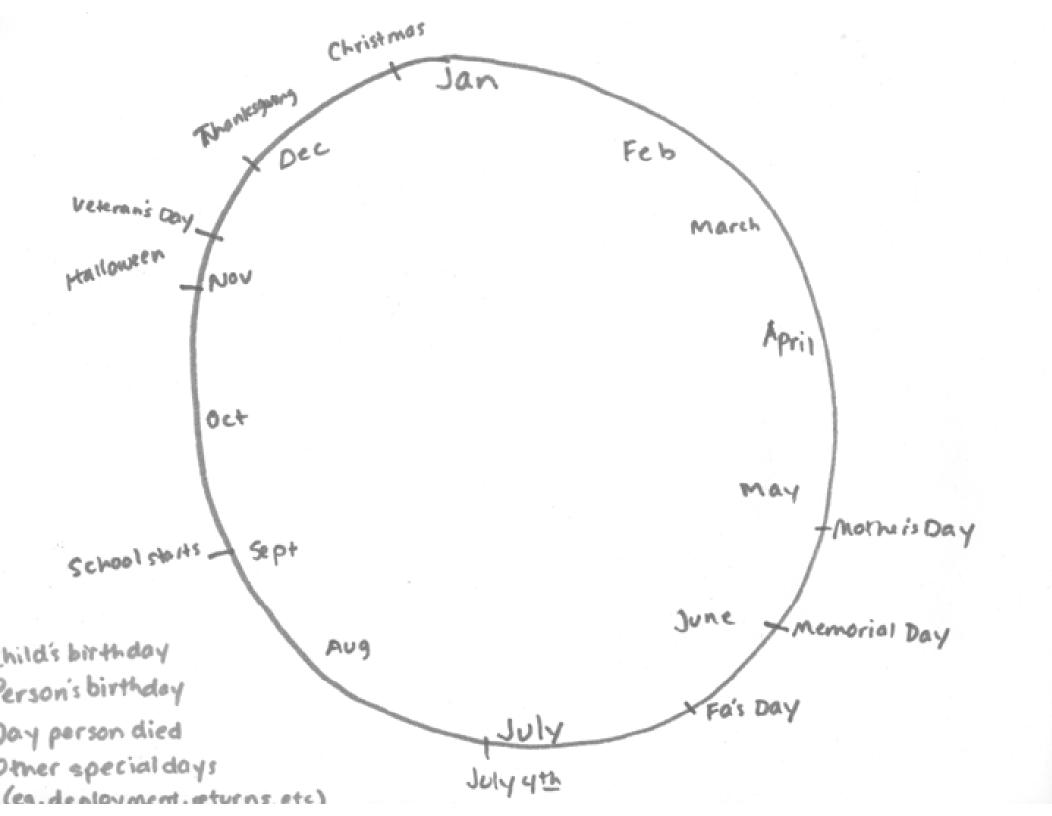
his pictures

play base ball

walk on hands

Play vieter shows

his love





CTG Web www.musc.edu/ctg







Summary

- Most military children grieve adaptively
- Some experience traumatic grief
- Recognize, respond, refer when needed
- www.taps.org, www.nctsn.org
- www.musc.edu/tfcbt, www.musc.edu/ctg
- Courage to Remember: www.samhsa.gov
- Military Child Traumatic Grief products





For more information and resources for support, please contact TAPS at 1-800-959-8277 or www.taps.org





Thank You for Joining Us

Please join us for our next webinar on Thursday, January 20, 2011, 12 PM-1PM EST featuring:

Craig J. Bryan, PsyD

"Cognitive-Behavioral Models for Suicide Prevention"
For more information and to register:

www.taps.org/professionaleducation



