RESPONDING TO CRITICAL INCIDENTS
Advice and Information Pack for Schools
Foreword

I am delighted to have the opportunity to emphasise the importance of this resource pack for schools, which has been produced by the National Educational Psychological Service (NEPS). The aim of the pack is to help schools to respond to unexpected and possibly traumatic events. The advice and information contained in it is based on research in the area of critical incidents and is further enriched by the experience of psychologists and schools who have been involved in this difficult work.

The number of critical incidents experienced by schools appears to have increased in recent years. Research indicates that the key to managing critical incidents is forward planning. This pack aims to assist schools to plan for crises before they happen. I urge all schools to engage in this planning process, in the hope, of course, that they may never have to put their plans into practice.

In times of tragedy, young people need support from the adults who know them best. Their teachers have invaluable experience, competence and skills in dealing with children and young people and, in partnership with parents, are the best people to provide this support. The pack provides practical step-by-step guidelines for teachers and principals on how to respond when a tragedy occurs. It offers support to schools at a potentially overwhelming time.

I would like to express my appreciation of the work of NEPS and particularly on the development of this resource pack. I know that schools will benefit greatly from this highly accessible advice and information.

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Minister for Education and Science
Acknowledgements

In devising the packs we have drawn from a wide number of sources. We are fortunate to have had such resources available and appreciate the willingness of other individuals and agencies to share their work with us. This has made things a lot easier for us. We would like to acknowledge particular publications from which we have drawn:

- Pat Donnelly (Barnardos), *Someone to Talk to: A Handbook on Childhood Bereavement*;
- Health Promotion Service NWHB, *In the Event of a Tragedy*;
- INTO/Ulster Teachers Union, *When Tragedy Strikes: Guidelines for Effective Critical Incident Management in Schools*;
- Luke Monaghan, *Suicide Bereavement and Loss*;
- North Eastern Health Board, *Coping with Tragedy*;
- Michael Ryan, *Suicide Bereavement and Loss: Perspectives and Responses*;
- Somerset Educational Psychology Services, *Critical Incidents in Schools*;
- Noreen Tehrani and Robert Westlake, *Debriefing Individuals Affected by Violence*;
- Irish Association of Suicidology, National Suicide Review Group, *Suicide Prevention in Schools: Best Practice Guidelines*; and
- Wiltshire County Council Psychological Services publication.

We are appreciative for the feedback and suggestions from colleagues in NEPS and have attempted to incorporate all of this material into the packs.
Section 1
INTRODUCTION

The National Educational Psychological Service, NEPS considers that it has a role to play when a school experiences a tragic event. The NEPS psychologist assigned to the school will exercise that role in consultation with the Principal and by extension, with the Board of Management of the affected school. The Principal is regarded as exercising the pivotal role in a school’s response to a critical incident.

NEPS has developed this Advice and Information Pack for Schools in an effort to build awareness amongst Principals and school teaching staff as to the potential impact disasters and critical incidents can have upon a school community. The pack endeavours to outline the preparation that schools should undertake in order to ensure an effective response to crisis situations. It emphasises the importance of having effective emergency plans in place before an incident occurs.

The pack also includes handouts, guidelines, frequently asked questions and sample letters to help the school community respond effectively and efficiently should they experience a critical incident.

The general approach which NEPS will follow in relation to a critical incident is, as in any human tragedy, initially to extend sympathy to the Principal and to the school community and then to offer any assistance and advice which is deemed appropriate by the school. This can include participation in the assessment of the significance and impact of the event and assistance to the staff in drawing up a plan of action. NEPS psychologists may also offer to meet staff and parents and may engage in short-term counselling of students.

In the event of any tragic incident, NEPS psychologists would wish to act in collaboration with the Health Board, especially in the arrangement of long-term support for particular individuals.

NEPS has a general remit to promote mental health in schools. In this context, psychologists might assist the Principal and staff members in drafting a school policy on responding to critical incidents within the framework of whole school planning.
Section 2

DEVELOPMENT OF A CRITICAL INCIDENT MANAGEMENT PLAN

While very few schools will experience a major crisis, most schools at some time or other experience traumatic situations such as the sudden death of a student or teacher due to an accident or illness. The key to managing a critical incident is planning. Schools that have developed a Critical Incident Management plan, report being able to cope more effectively in the aftermath of an incident. Having a plan enables staff to react quickly and effectively and to maintain a sense of control. It may also ensure that normality returns as soon as possible and that the effects on students and staff are limited. It is therefore important for all schools to prepare a Critical Incident Management Plan.

In the development of a plan the Principal might take the following steps:

Creation of a coping, supportive and caring ethos in the school
This can be done in the following way:
- Creating a physically and psychologically safe school through the development of areas such as an anti-bullying policy, peer support programmes, suicide awareness programmes, fire drills, equipment and buildings checks.
- Inclusion of SPHE programmes in the curriculum, covering such areas as communication skills, self esteem, decision-making, bereavement, stress management, and coping skills.
- Creating pastoral care structures and reviewing their effectiveness.
- Accessing training for staff to deal with critical incidents.
- Developing links with outside agencies and procedures for referral.

Defining a Critical Incident
At the outset of the development of a plan it is important for the school to define what is meant by a Critical Incident. There are many definitions but in general it is any incident or sequence of events which overwhelms the normal coping mechanisms of the school and disrupts the running of the school. It is important for the school to identify potential critical incidents and which procedures to follow in each instance. Some crises affecting schools are listed below:
- The death of a member of the school community through sudden death, accident, terminal illness or suicide.
- An accident involving pupils or staff on or off the school premises.
- A physical attack on staff member(s) or student(s) or intrusion into the school.
- Serious damage to the school building through fire, flood, vandalism etc.
- The disappearance of a member of the school community.
- An accident/tragedy in the wider community.

Creation of a Critical Incident Management Team
A planning team of key personnel should be formed. The personnel selected should be suitable in terms of their personal and practical skills. This team should meet annually to update and review the plan. In the case of small schools, the team may consist of staff members from a number of different schools in the area. By identifying the key tasks that arise in the aftermath of an incident,
the school can decide on the roles and who will be responsible for different tasks. Generally the Principal will play a key role, being responsible for many of the tasks. Certain administrative tasks need to be carried out on an ongoing basis so that communication is speedy and effective in the event of a critical incident.

Key administrative tasks in the Critical Incident Management process are:

■ Maintaining an up-to-date list of contact numbers
  Numbers should be available for:
  • pupils, parents, guardians
  • staff
  • emergency support services (See Emergency Contact List in Appendix 1).
  This should be displayed in the staff room and Principal’s office.

Agreement should be reached about where lists will be kept and responsibility for regular updating should be clearly assigned.

■ Compiling emergency information for school trips
  This should include:
  • list of all pupils/staff involved and teacher in charge
  • list of mobile phone numbers for accompanying teacher(s)
  • up to date medical information on pupils with allergies, epilepsy etc.

■ Identifying roles to be fulfilled at the time of a critical incident
  External liaison with:
  • outside support agencies i.e. emergency service, DES, NEPS, Health Board etc.
  • parents
  • distressed visitors
  • the media.

  Internal care and communication with:
  • staff
  • students in general
  • students more immediately involved or affected.

  Maintaining administration and services such as:
  • telephone (e.g. keeping a line free for outgoing and important incoming calls)
  • rooms for debriefing, parents, quiet room, counselling etc.
  • log of events, letters to parents, telephone calls made and received
  • dealing with normal school business.

It is also advisable to maintain the normal routine as far as possible for classes not immediately affected by the incident.
Development and communication of a Critical Incident Management Plan

In devising the plan, all staff should be consulted and made aware of the school’s critical incident policies and procedures. A plan for evacuation should be included – where do staff/pupils go, what should they take with them.

Once prepared, the Critical Incident Management Plan should be instantly accessible to the personnel who will have the key role in putting the plan into action. All new and temporary staff should also be informed. A copy of the plan of the school building should be displayed in key places, with exits highlighted - this is already required under Health and Safety regulations.
Section 3

PROCEDURES TO BE FOLLOWED IN THE EVENT OF CRITICAL INCIDENTS

3.1 SHORT-TERM ACTIONS (1st Day)

A checklist is provided at the end of this section. The procedures to be followed will depend on the particular incident that has occurred and the particular arrangements in place in a school.

Gather accurate information

It is important to obtain accurate information about the incident, otherwise rumours will take over and add to the distress of those involved.

- What happened, where and when?
- What is the extent of the injuries?
- What is the location of those injured and not injured?
- How many are involved and what are their names?
- Is there a risk of further injury?
- What agencies have been contacted already?

Contact appropriate agencies

(See Appendix 1 & 2 for further details)

- Emergency services
- Medical services
- Health Board Psychology Departments/Community Care Services
- NEPS
- BOM
- DES/Schools Inspector.

Convene a meeting with key staff/Critical Incident Management Team

A list of possible topics to be covered follows.

- Agreeing a statement of the facts for staff, students, parents and the media. If possible there should be a written version of this.
- Delegating responsibilities to the Critical Incident Management Team.
- Appointing someone to handle phone enquiries and to deal with the media.
- Ensuring that a phone line remains open and available for enquiries.
- Organising the timetable/routine for the day. (Adhering to the normal school routine is important if this is possible).
- Organising a staff meeting, if appropriate.
- Organising the supervision of students during any staff meetings.
- Deciding whether an outside professional be invited to the staff meeting.
Arrange supervision of students

Hold staff meeting
All staff should be asked to attend, including auxiliary staff. The areas which might be covered are listed below.

• An account of the facts as known.
• An opportunity for staff to express their views and their feelings.
• Discussion with the staff about how the facts will be shared with the students. (There should be an agreed approach to this if possible).
• An outline of the routine for the day.
• Information for staff about which outside agencies have been contacted, or are involved and the supports that will be put in place for both students and staff.
• A procedure for identifying vulnerable students.
• Distribution of relevant handout material (see Resource Documents in Section 4 of this pack).

Organise timetable for the day

AS FAR AS POSSIBLE MAINTAIN NORMAL ROUTINES.

Inform parents/guardians

Children directly involved:
Parents/guardians should be contacted as soon as possible, and this first contact will need to be handled with great sensitivity. The steps involved are set out below.

• Agree who should share information with parents and how this should be done.
• Make a list of parents/guardians who have been contacted and those who still need to be told to avoid duplication of messages.
• Give parents/guardians relevant and factual information.
• Set a room aside for distressed students to meet their parents/guardians.
• Provide support to parents who are on their own when they arrive at the school.
• Give telephone numbers for enquiries.

Children not directly involved:
The parents of other children in the school should be informed of the incident and that their child may be upset.

Send a letter to parents stating the facts and brief details of the incident. It may not be appropriate at this point to disclose the names of those involved. (See Appendix 3 for sample letter).

Inform students
Careful preparation is important when meeting students to inform them of a critical incident. Consideration should be given to the age of the pupils and the optimum group size. It is best to do it in class groups or sub-groups. The suitability of the ‘messenger’ should also be considered, remembering that it is generally thought that support is best given by the adults known to the child. Any outside ‘expert’ might help by assisting the people undertaking this task to prepare for it and by providing ongoing advice and support as they manage it. The nature of the event will clearly have an influence on how students are informed.
The key points/actions in the process are listed below.

- Give facts and avoid speculation. This will help to dispel rumours which can cause unnecessary stress.
- Allow pupils to ask questions, tell their story and express feelings.
- Help students realise that overwhelming emotions are natural and normal following a critical incident. (See Resource Documents 4.3, 4.4 and 4.5 on reactions to grief and critical incidents.)

**Make contact with the bereaved family**

**Dealing with the media**

Prepare a written statement to include:

- the facts about the incident
- what has been done already
- what is going to be done
- positive information or comments about the deceased person.

Some points to remember if you are asked to give a live interview:

- consider assigning the task to someone skilled or familiar with dealing with the media
- take some time to prepare
- remember that everything you say is on record and, therefore, **keep it simple, factual and brief**
- decline if you are not ready or think it inappropriate.

Consider setting aside a room for the media. This may help to control their access to staff and students.

Brief staff and students and advise them on dealing with the media.

**Organise the reunion of students with their parents, if necessary**

- Inform students that their parents/guardians will be collecting them as soon as possible.
- Facilitate distressed students and their parents by providing a private room where they can meet following an incident. This could be a very emotional time.
- Where appropriate offer help with transport, especially for younger children.
Summary Checklist for Principals

2. Contact appropriate agencies
3. Convene the Critical Incident Management Team
4. Organise for the supervision of students
5. Inform staff
6. Agree on a statement of the facts
7. Identify high risk students
8. Appoint someone to deal with phone enquiries
9. Organise timetable for the day

**MAINTAIN THE NORMAL SCHOOL ROUTINE WHEN AT ALL POSSIBLE**

10. Inform parents/guardians
11. Inform students
12. Make contact with the bereaved family
13. Organise support
14. Respond to the media.
3.2 MEDIUM-TERM ACTIONS (24 – 72 Hours)

Review the events of the first 24 hours

- Reconvene key staff/Critical Incident Management Team.
- Briefly check out how each person on this team is coping.
- Decide arrangements for support meetings for parents/students/staff.
- Decide on mechanism for feedback from teachers on vulnerable students.
- Have review staff meeting with all staff if necessary. Ensure all staff are kept up to date on any developments.
- Be sensitive as to how all staff are coping on a personal and professional level.
- Establish contact with absent staff and pupils.
- Update media, if necessary.

Arrange support for individual students, groups of students, and parents, if necessary

- Provide a suitable room.
- Hold support/information meeting for parents/students in order to clarify what has happened. Offer advice and reassurance. Inform them about support services and provide relevant handouts. (See Resource Documents at Section 4).
- Give any teacher who feels uncomfortable with involvement in support meetings the choice of opting out.
- Arrange, in consultation with outside agencies, individual or group debriefings or support meetings with parental permission. See Appendix 4 for sample letter for parental consent.

Plan for the reintegration of students and staff (eg absentees, injured, siblings, close relatives etc.)

- Name key person(s) to liaise with above on their return to school.

Plan visits to injured

- Name key person(s) to visit home/hospital.

Liaise with the family regarding funeral arrangements/memorial service

- Designate staff member to liaise with family, to extend sympathy and clarify the family’s wishes regarding the school’s involvement in funeral/memorial service.
- Arrange a home visit by two staff representatives within 24 hours, if appropriate.
- Have regard for different religious traditions and faiths.

Attendance and participation at funeral/memorial service

- Decide this in accordance with parents’ wishes and school management decisions and in consultation with close school friends.

School closure

- Request a decision on this from school management and school inspector.
3.3 LONGER TERM ACTIONS

Monitor students for signs of continuing distress

A referral to the Health Board may be necessary. (See Resource Document 4.5 for Normal Reactions to a Critical Incident).

For example, if over a prolonged period of time, a student continues to display the following, he/she may need assistance from the Health Board:

- uncharacteristic behaviour
- deterioration in academic performance
- physical symptoms — eg weight loss/gain; lack of attention to appearance; tiredness; restlessness
- inappropriate emotional reactions
- increased absenteeism.

Evaluate response to incident and amend the Critical Incident Management Plan appropriately

- What went well?
- Where were the gaps?
- What was most/least helpful?
- Have all necessary onward referrals to support services been made?
- Is there any unfinished business?

Formalise the Critical Incident Plan for the future

- Consult with your NEPS psychologist and/or your local Health Board Critical Incidents Team about this.

Inform new staff/new school pupils affected by Critical Incidents where appropriate

- Ensure that new staff are aware of the school policy and procedures in this area.
- Ensure they are aware of which pupils were affected in any recent incident and in what way.
- When individual pupils or a class of pupils affected by an incident are transferring to a new school, it would be useful to brief the Principal of the new school.

Decide on appropriate ways to deal with anniversaries (be sensitive to special days and events)

- Anniversaries may trigger emotional responses in students/staff and they may need additional support at this time.
- Acknowledge the anniversary with the family and liaise on any proposed commemoration.
- Be sensitive to significant days like Birthdays, Christmas, Mother’s Day, Father’s Day.
3.4 DEALING WITH THE AFTERMATH OF A SUICIDE OR SUSPECTED SUICIDE

Introduction
When a person dies through suicide, those who know the person experience a deep sense of shock. The unexpectedness of the death and the taboo associated with suicide can leave a school community feeling unsure of how to proceed. Again, the key to this is planning.

The term ‘suicide’ should not be used until it has been “established categorically that the student’s or teacher’s death was as a result of suicide” (ASTI Guidelines 1997). The phrases ‘tragic death’ or ‘sudden death’ may be used instead.

The following is a guide to how a school can support the bereaved family, school staff and students.

Family
• A staff member should contact the family to establish the exact facts and the family’s wishes about how the death should be described.
• Acknowledge their grief and loss.
• Organise a home visit by two staff members.
• Consult with the family regarding the appropriate support from the school e.g. at the funeral service.

Staff
• Convene a staff meeting to brief staff on the above details. It may be necessary to do this in two shifts therefore ensuring staff are available for support to students and for cover at all times. Remember to include auxiliary staff.
• Students need to be with people they know and trust. If possible, it is better if the teachers provide support for the students. The external “expert” visitor should therefore be primarily used to brief the teachers.
• Help teachers to prepare for breaking the news to students. Close friends and relatives of the deceased in the school need to be told first. This needs to be done in a private location.
• Outline the possible reactions.*
• Give them information from the schools pack on dealing with the students in the classroom and on reactions to grief.
• Identify high-risk students and what supports are available.
• Remind them of the school’s critical incident plan.
• Decide on the strategy to deal with queries from parents/guardians. Prepare a letter setting out the facts, how the school is dealing with the events and how parents or guardians can support their child.
• Ensure that a quiet place can be made available for students/staff.
• Hold further staff briefings during the day to update information, to offer support and to further identify high-risk students.

* See Resource documents at Section 4.2 for Reactions to Grief. See also Sample Letter to Parents (1).
Students

- Give the facts as they are known.
- Create a safe and supportive space for the students where they can share their reactions and feelings.
- Advise them on their possible reactions over the next few days (see Resource document 4.5).
- Avoid glorifying the victim and sensationalising the suicide.
- Advise the students of the support that is available to them.
- Take any talk of suicide seriously and provide support or refer on immediately.
- Students may wish to confide in and seek support from each other rather than adults. Facilitate this if appropriate and if it is possible. However, information should be provided about how to get further help if they, or their friends, should need it.

Indicators of high risk students

- Close friends and relatives of the deceased
- Pupils with a history of suicide attempts/self harm
- Pupils who experienced a recent loss, death of a friend or relative, family divorce or separation, break-up with a boyfriend/girlfriend
- Pupils who have been bereaved by a suicide in the past
- Pupils with a psychiatric history
- Pupils with a history of substance abuse
- Pupils with a history of sexual abuse
- Non-communicative pupils who have difficulty talking about their feelings
- Pupils experiencing serious family difficulties, including serious mental or physical illness
- Less able students.

Schools should be vigilant around the time of the inquest and the anniversary of the student’s death.

Assessing for suicide potential

This is a brief note indicating how to go about making an immediate assessment as to whether a student is at risk.

Where there is a serious question mark or concern about a student, then referral should be made to a person trained in risk assessment.

Have a sensitive but direct and open discussion with the student.

If a student has been reported to be talking about suicide, they should be asked openly “Are you thinking about killing yourself?” This will offer the student the opportunity to talk about their feelings and their thoughts. If they affirm that they have been thinking about it, then this should be explored by raising the following issues with the student.

Previous attempt: Has the student attempted suicide before? You might ask “Have you ever tried to harm yourself before?” If the answer to this is “Yes”, then the risk increases.

Personal/family history: The level of risk increases with the number and seriousness of family difficulties e.g. parental separation, recent bereavement, serious illness etc.
Physical/emotional history: A student who has experienced major personal difficulties, whether as a result of physical (recent hospitalisation, chronic illness) or significant emotional difficulties (depression, loneliness, guilt, anger etc.) is more at risk.

Plan: Does the student have a plan, for example, has written suicide notes, has a particular day in mind to carry out the act, has a gun, or pills to take? The more concrete the plan the more serious the threat.

Means: Does the student have the means and place to do it. Are the means available lethal? Will the student be in a place where they can be rescued? For example, do they intend to carry out the action when both parents are at work and their siblings are at school.

The greater the number of “Yes” answers, the higher the risk and the greater the need for immediate onward referral of the student. Parents should be informed at once and asked to bring the student to their GP or to another service. (If a student is under 18 years teachers are obliged to inform the parents even without the student’s consent).
Section 4

RESOURCE DOCUMENTS FOR USE BY SCHOOLS IN THE EVENT OF A CRITICAL INCIDENT

4.1 RESOURCE DOCUMENT

How teachers can support students in school following a critical incident

(Adapted from Critical Incidents: Managing Loss and Trauma in Schools: A Wiltshire Psychological Service and School Improvement and Support Information Booklet.)

General considerations

• Students should be given opportunities to discuss the incident and express their thoughts or feelings in a secure environment. The teacher needs to be aware of the importance of handling the discussion in a confident but sensitive manner. However, normal routines should be returned to as soon as possible.

• Students should be encouraged to resume sports and other extra-curricular activities.

• Help students re-establish support systems, identify with them who they go to for different kinds of support.

• It is appropriate that the class curriculum is adjusted or adapted. For example, teachers should avoid presenting new learning material for a while following an incident as concentration may be impaired.

• Use opportunities which arise within ordinary class work, where coping and support can be reinforced.

• Students could be encouraged to discuss how to avoid future crises and lessons learnt from their experiences. There will be opportunities within the school’s personal, social and health education programmes for structured discussion.

Meeting with individual students

• Take your cue from the student. When they feel like talking, try to find the time to listen. If the time they choose is not appropriate, explain that you would like to talk with them and name an alternative time and place.

• Don’t be afraid to mention the incident or the deceased person’s name. It is important to acknowledge what has happened for the student.

• It is alright to ask the student what he/she needs, what helps or what doesn’t help.

• Let the students know that it is normal to laugh and cry. Reassure them it is okay to lighten the mood by remembering old times and stories.

• Believe what the students say. Feelings must be acknowledged, believed and discussed. Try not to make comments such as “you don’t really mean that” or “it will be okay soon”.


4.2 RESOURCE DOCUMENT

A classroom session following a critical incident
(Adapted from Critical Incidents: Managing Loss and Trauma in Schools: A Wiltshire Psychological Service and School Improvement and Support Information Booklet.)

A classroom session is an important intervention following a critical incident that affects large numbers of students. Sessions containing up to 30 students can be effective. It is recommended that the classroom teacher take an active role, if possible. Students may feel safe and secure with their classroom teacher rather than being with an adult they do not know. Teachers may be able to lead these sessions and the NEPS psychologist can act as a co-facilitator. If the teacher feels uncomfortable with this role the psychologist may take more of an active role. Teachers should have the opportunity to opt out of this work if they wish.

A class session needs to be tailored to the developmental level of the class. The time required will vary depending on the class experience and age.

The process involves:
• providing facts and dispelling rumours
• sharing stories
• sharing thoughts and feelings
• normalisation of thoughts and feelings
• empowerment
• closure.

Providing facts and dispelling rumours
State the facts clearly. Talk in concrete rather than abstract terms. Dispelling rumours helps students understand the reality of the events. Helping students hear the facts is an important prerequisite for coming to terms with what has happened.

Sharing stories
Students are asked to tell their story of the event. As a result they will feel less alone because of their common shared experiences. Helping them verbalise their experiences helps their recovery. For those students who find it difficult to verbalise their experiences or for students with learning difficulties it may also be helpful to allow them to express their feelings and recount their experiences in other ways. Writing stories or using art can be particularly helpful, especially for younger students. Give the students a choice as to how they want to represent their experiences. Have a box of tissues at hand.

Sharing thoughts and feelings
Help the students identify what they thought and felt at the time of the incident, or when they first heard of the incident. It may be helpful to share your own feelings, thoughts and fears that you experienced during the crisis or just after hearing the news.
Normalisation of thoughts and feelings
Explain that their reactions are normal responses to abnormal circumstances. Let the students know that in time, for most people, the reactions or symptoms will go away. Inform the class that if the symptoms don’t go away they need to seek help. Distribute handouts on reactions to grief to the students, if appropriate.

Empowerment
Help the students identify strategies that they can use to help manage symptoms. For example, talking to family and friends, getting enough sleep, exercise etc. If appropriate, students can brainstorm ideas that might help prevent a similar situation happening again. Overall, it is important to help the students regain a sense of control.

Closure
End the session by focussing on the future. Depending on the nature of the incident, help the class/group decide what would bring about a sense of closure, for example, organising a memorial, writing cards or letters. Reiterate the message that their reactions are normal responses to abnormal circumstances. Tell students what further supports will be put in place if needed.
4.3 RESOURCE DOCUMENT

Grief
(Adapted from “Grief in Children: Someone to talk to”. Barnardos p. 64 – 65.)

It is acknowledged that while there are distinct stages/phases in the grieving process different people may go through these stages in different sequences and at different paces. Generally the grieving process in adults is thought to take about two years while with children and adolescents it may be over a more extended time-frame with different issues arising as they go through developmental milestones.

Denial, numbness, shock (up to 6 weeks)
- Death of the person may be denied
- Emerging feelings may be suppressed
- Refusal to talk about the death
- Bereaved keeps very busy to avoid thinking about the death
- Bereaved may show signs of confusion and forget everyday routines
- Children in shock may display either silent withdrawal or outbursts of crying/screaming.

Acute grief/searching and longing for deceased (6 weeks to 4 months)
- Acute sadness – crying
- Physical pangs of pain including loss of appetite and disturbed sleep
- Emotional pain accompanied by dejection, hopelessness, lack of concentration
- Fears of life after death, nightmares, ghosts
- Disorganisation
- Strong guilt feelings and questioning of self and others, particularly in the case of a sudden death
- Feelings of anger at the departed for leaving them
- Bereaved may reject offers to comfort them.

Adaptation to life without the deceased (6 months to 18 months)
- People begin to adjust to their lives without the lost person
- Sense of isolation
- Fearful of forgetting the deceased
- Less crying and irritability
- Exacerbation of existing personality problems. Children with low self-esteem may be at a greater risk of emotional behavioural difficulties.

Re-organisation
- Getting on with life
- Returned sense of humour and play
- Able to participate emotionally in new relationships
- Changed relationship with the deceased – able to think of the deceased without pain
- Reduction in physical/emotional symptoms
- Less guilt.
Children’s understanding and reaction to grief according to age
(Adapted from “Children’s understanding of death” Barnardos. p. 28 – 32.)

The following are guides only – children will differ in their reactions and grasp of events for a range of reasons other than age alone.

**Infants (0 – 2 years)**
- Infants do not understand the meaning of death
- They may display anxiety when separated from a loved one
- They may appear upset, subdued and uninterested in their surroundings.

**Ages 2 – 5 years**
- No understanding of the permanency of death
- May search for the missing person
- May feel responsible for the death in some way
- May become apathetic and depressed
- May regress to an earlier stage of development e.g. thumbsucking, bedwetting, tantrums or may become clingy etc.
- May develop fears of going to sleep
- May worry that other loved ones may die.

**How you can help**
- **Continuity of normal routine e.g. mealtimes and bedtime**
- **Offer physical comfort**
- **Explain the death in clear simple language, using words like “dead” and “died”. Do not use terms like “gone to sleep” or “passed away”**
- **You may need to repeat the same information again and again**
- **Permit them to ask questions and be consistent in your answers**
- **Reassure them that they had nothing to do with the death and of the well-being of other family members.**

**Ages 5 – 7 years**
- Beginning to realise the permanency of death, but their idea of life after death is still vague
- May have concerns about how the deceased is feeling or thinking in the grave
- May have a lot of questions about aspects of the death e.g. how the person died, what they looked like, the funeral, heaven, coffins etc.
- The reaction of their peers is important, may feel ‘different’ to them
- Their peers may be awkward about the death and avoid contact
- They may become the target of bullying.

**How you can help**
- **Encourage the child to talk and cry about the deceased if they wish to, otherwise respect their silence**
- **Answer questions and provide as much factual information about the death as possible**
- **Reassure them that thinking and feeling ceases after death**
- **Be vigilant in relation to bullying.**
Ages 9 – 12 Years

• Understand the finality and universality of death
• Awareness of their own mortality and may worry about their own death
• May display psychosomatic symptoms
• May wish to stay at home close to parents
• May display anger.

How you can help

■ Dispel fears about their own health or the health of other loved ones by offering reassurance
■ Encourage them to go to school
■ Allow them to express their anger, offering appropriate ways to do so.

Adolescents

• Fully understand the finality, universality and inevitability of death. Their experience of death is similar to adults
• May feel a range of feelings: guilt, regret, anger, loneliness etc.
• Death adds to the already confused array of emotions
• May appear to not care about the death
• May seek support outside of the family.

How you can help

■ Offer them time to listen
■ Allow them to express their grief in their own way
■ Be prepared for mood swings.

Note: If parents are grieving themselves, they may be emotionally unable to support their other children. In this instance, another supportive adult in the child’s life, e.g. other family members, friends, neighbours may need to offer emotional support.

It should be remembered that for children with special educational needs, their understanding of what has happened will be in line with their developmental age.
The range of ‘normal’ reactions to a Critical Incident
(Adapted from Somerset Educational Service pack.)

Each individual has his/her own way of dealing with feelings, loss and tragedy. There is no right or wrong way to react and any or all of the following can be experienced.

<table>
<thead>
<tr>
<th>FEELINGS</th>
<th>BEHAVIOUR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fear</td>
<td>Bedwetting</td>
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<td>Guilt</td>
<td>Nightmares</td>
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<td>Shame</td>
<td>Thumb sucking</td>
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<td>Anger</td>
<td>Over dependency</td>
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<tr>
<td>Regret</td>
<td>Social withdrawal</td>
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<td>Loneliness</td>
<td>Tantrums</td>
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<tr>
<td>Anxiety</td>
<td>Mood swings</td>
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<tr>
<td>Shock</td>
<td>Loss of concentration</td>
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<tr>
<td>Yearning</td>
<td>Forgetfulness</td>
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<tr>
<td>Numbness</td>
<td>Irritability</td>
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<tr>
<td>Confusion</td>
<td>Tearfulness</td>
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<tr>
<td>Isolation</td>
<td>Insecure feelings</td>
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<tr>
<td></td>
<td>Separation anxiety</td>
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<tr>
<td></td>
<td>School refusal</td>
</tr>
<tr>
<td></td>
<td>Physical/Verbal aggression</td>
</tr>
<tr>
<td></td>
<td>Misuse of drugs, including alcohol</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>PHYSICAL</th>
<th>THOUGHTS</th>
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</thead>
<tbody>
<tr>
<td>Tiredness</td>
<td>Disbelief</td>
</tr>
<tr>
<td>Sleeplessness</td>
<td>Denial</td>
</tr>
<tr>
<td>Headaches</td>
<td>Sense of unreality</td>
</tr>
<tr>
<td>Gastrointestinal Problems</td>
<td>Preoccupation with images of the event/person</td>
</tr>
<tr>
<td>Bowel/Bladder problems</td>
<td></td>
</tr>
<tr>
<td>Loss or increase in appetite</td>
<td></td>
</tr>
</tbody>
</table>
4.5 RESOURCE DOCUMENT for teachers

Guidelines for input with pupils on coping with their reactions to a Critical Incident
This might also be used as a handout for pupils and parents as appropriate.

Coping with a critical incident can be difficult and stressful. It can affect the way we feel, think and behave. The following information will help you understand some of the feelings and reactions you may experience within hours, days or weeks after an event. There are also some suggestions on what may help you during this time.

Feelings and thoughts

You may experience:

**Shock** at what has happened. Things may feel unreal. Shock sometimes causes people to deny what has happened. This doesn’t mean you don’t care. You may feel like withdrawing, crying or becoming hysterical.

**Fear** about the unpredictability of everything especially life, of a similar incident happening again, of breaking down or losing control, of being alone.

**Guilt** – feeling responsible in some way for what has happened even though you are being told you could not be, for not being able to make things better or not being able to help others, for being alive or better off than others.

**Shame** for not reacting as you thought you should, for needing support from others.

**Anger** at someone or something, wanting to blame someone or something for what has happened, at the injustice of the event.

**Confusion** about the event, about how you should react, about having mixed feelings about everything.

**Pain** at the loss of the person, of associating this with other incidents, bereavements or losses that you may have experienced before.

**Left out by people** not acknowledging your involvement in the incident or your relationship with the person who is injured or deceased.
Physical and behavioural reactions

It is quite normal to experience tiredness, sleeplessness, nightmares, headaches, loss or increase of appetite, bowel/bladder problems, loss of concentration, irritability. Sometimes people feel generally unwell.

Remember:
- You need to look after yourself
- You are normal and are having normal reactions to an abnormal event
- There are people you can talk to
- You may not experience any of the above feelings.

There is little you can do to avoid these uncomfortable feelings and thoughts but there are things you can do to help you recover.

What can help?
- **Talk** – Try to talk about what happened and how you feel. Don’t bottle things up. Sharing your experience with others who have had similar experiences may help. Let someone know if you are not coping well. If it is difficult to talk, keep a journal of how you are feeling or draw your experiences or emotions.
- **Thinking over the incident** – You need to process the incident and allow it more into your mind over time. With time you may need to talk about it, write about it. You may find that you dream about it over and over again. All this eventually helps you to accept what has happened.
- **Attending memorials** – Going to the funeral or service.
- **Eating properly** – Try to eat a regular meal three times a day.
- **Exercise and relaxation** – Make sure you take some exercise and also find ways to relax and rest.
- **Be careful not to use drink or other drugs to help you cope** – They may numb the pain temporarily but will lead to other problems.

Seek help if, four to six weeks after the event,
- you cannot cope with or feel overwhelmed by your feelings
- you (continue to) have nightmares
- you experience sleeplessness
- intrusive thoughts about the event persist
- you begin to have problems in school
- you have been using excessive drinking, smoking or other drugs to help you cope since the event.
4.6 RESOURCE DOCUMENT for schools

Guidelines for meeting with parents

When a critical incident occurs, many parents are very anxious about how their child will react and what they can do to help. It is often useful for the school to arrange a meeting after school to allay parents’ fears. It also reduces the number of individual calls and visits to the school from concerned parents. It is recommended that the Principal heads the meeting and the psychologist attends to talk about the psychological impact of trauma. The following are recommended areas to be covered at the meeting.

1. Acknowledge what has happened, offer condolences and give space for sharing of feelings and emotions if appropriate.

2. Outline what has been done to date and a plan for the next days and weeks. (How the students are reacting in general. What help has been provided and by whom and what help will be provided in the future).

3. Outline what are the normal reactions to a critical incident and provide handout.

4. Go through Children’s Understanding of Grief and provide handout.

5. Suggest ways in which they can help their child (Give Frequently Asked Questions by parents).

6. Give time for people to vent their concerns and provide answers, if possible.

7. Advise that you will all be available at the end of the meeting for 15 minutes if anyone has any further concerns or questions.
Section 5
FREQUENTLY ASKED QUESTIONS

5.1 SCHOOL PRINCIPALS

Q. What do I do first on hearing news of the incident/death?
A. If the source of the news is the affected family, express condolences and get as many facts as possible – sensitively. If it is from another source, check for veracity, obtain the facts, the numbers injured etc. Ascertain who is to contact the next of kin. The Gardaí may have already undertaken this role.

Q. Whom do I contact for help?
A. If the school is closed (weekends/days off) contact members of the Critical Incident Team with a view to a meeting. Contact the Board of Management and/or outside agencies e.g. NEPS/Health Board. If the public examinations are in progress, contact the State Examinations Commission Branch (SEC) (0902-74621) as soon as possible, in order to alert the Examination and Assessment Manager (EAM) for the school.

Q. What should I do first thing on the first morning back at school?
A. Call a meeting of the Critical Incidents Team, if the school has one. If not, call a meeting of the BOM and Senior Management.

Q. What should be on the agenda for this meeting?
A. 1. A statement of the facts as known
   2. Delegation of responsibilities
   3. Preparation of what to say at staff meeting
   4. Preparation of what to say to students
   5. Preparation of a letter to parents.

Q. How do I handle all the phone calls?
A. Staffing the telephone will be a stressful task. Assign one or two suitable people to take calls. Clear guidance should be given to those involved on what is appropriate to say. An agreed factual statement should be available to the telephone operators.

Q. How do I keep staff up to date?
A. The staff room is a very important room for teachers on this day. Informal briefings can take place during the breaks.

Q. How do I dovetail the school’s part in the funeral/religious ceremonies with the wishes of the parents?
A. The school chaplain will be the main link person here. Ensure that the parents’ wishes are respected and that participation of any students or friends is agreed with them.
Q. How do I handle staff members who want to opt out?
A. All staff would be expected to attend meetings held to disseminate information. However, it should be made clear to staff at these meetings that opting out of support type work is completely acceptable. Be aware that some staff may be particularly vulnerable and watch out for them.

Q. How do I handle the media?
A. Delegate one suitable person to deal with the media.
   Prepare a written statement.
   • State that it is a difficult time for the school community.
   • Emphasis should be on what is being done to support staff and students.
   • The ‘Media Guidelines on the portrayal of suicide’ (1999) suggest that the media can help prevent copy-cat suicides by: not mentioning specific details of the suicide e.g. location and method used; not using colourful phrases to romanticise it; not citing causes of suicide and thereby indirectly suggesting suicide as an option. These guidelines should be adhered to by the school in any communication with the media.
   • Allow limited and controlled access to the media by providing a press room.
   • The Communications office of the DES or the SEC can help, if appropriate.

Q. What/When should I tell staff/students about the incident?
A. Give the facts, as you know them. This is the best way to counter rumour and fantasy. It should be done as soon as possible to prevent staff and students hearing from other, sometimes inappropriate, sources.

Q. What if I feel upset myself and find it difficult to talk?
A. It is very important to let children know that it is natural and acceptable to be upset and to cry. It is better to share feelings with them than to hide them so don’t worry if you get upset. You should also seek and accept support for yourself while dealing with this difficult event.

Q. What if some students do not appear to grieve?
A. Don’t assume that because overt signs are absent, the person is not grieving. Each individual has his/her own personal way of grieving. It is important that these different individual ways are respected and seen as normal. Repression of grief because of the fear of ‘losing face’ in front of friends is an inappropriate coping strategy, as it can lead to difficulties later.

Q. How long does it take to come to terms with bereavement?
A. There is no definite answer to this. Each individual progresses at his/her own pace and there are enormous variations. See Resource document 4.2.2 for Stages of Grief.
5.2 PARENTS

Q. This critical incident which occurred in the school has upset my daughter/son. As there are many rumours circulating, I would like to know what really happened. How can I find that information?
A. You will receive a letter from the Principal, which will deal with this. The information conveyed to you has been carefully gathered and is factual. The letter may also detail the school’s plans to keep you informed in the immediate aftermath of this incident.

Q. Will help be available to the students in the school?
A. This will depend on the particular situation. Some possibilities are:
   - The school has already embarked on a response to the incident by activating its Critical Incident Team.
   - Various outside agencies have been contacted so help will be available from…

Q. How can I help my child?
A. You are the natural support for your child. He/she may want to discuss some feelings and thoughts with you. You can help by listening carefully, restating what you hear them say so they know you are really listening. You should tell them it is OK to feel the way they do, that people react in many different ways and that they should talk rather than bottle things up.

Q. Since the incident occurred my child has difficulty in sleeping, headaches etc. Can I be sure these are related to the incident?
A. Grief can affect one physically as well as emotionally and these and other symptoms may be part of a grief reaction. If they persist, consult a doctor for a check up.

Q. How long will the symptoms of grief last?
A. There is no quick answer to this. It varies from individual to individual and according to circumstances. It will also be affected by the closeness of the child to the event or to person who died.

Q. If my child remains very upset what should I do?
A. If your child remains very distressed after six weeks or so, he/she may need additional support, but there is no fixed rule about the length of the grieving process. It is best to seek more help through your GP/Health Board.

Q. In what ways are adolescents different from other children?
A. During adolescence young people have very confused feelings about themselves and the world around them. Grief tends to heighten these feelings and increase the confusion. At this time too the individual may be orienting more towards his/her peers and away from family, so do not feel rejected if they look to friends for their support and comfort. Just be available and tell them so.
5.3 TEACHERS

Q. I would like to opt out of support type work for personal reasons. Is this OK?
A. Because students need to be with people they know and trust, it has been found that their teachers are the best people to support them in school in times of distress. Accordingly, all teachers and other school staff members are encouraged to help the students at these times. However, nobody should be obliged to do this work and people should feel free to opt out of it if they so desire. You would need to be in attendance at staff meetings where information is disseminated in relation to the incident, in order to stay in touch.

Q. I have no qualifications to help out in this area. Don’t you think the job should be left to the experts?
A. You probably have more skills here than you realise. Your experience, competence and skills as a teacher and as an expert in dealing with children and young people are invaluable. Most importantly, the students know you. Experience shows that people grieve best with someone they know. Pupils need a safe environment in which to grieve and that security is often provided by the familiar face of the teacher in the first instance.

Q. What should I do in the classroom that could be helpful?
A. You should acknowledge the situation and clarify the facts, as they are known. Honesty is essential. Encourage questions so that the students have a clear understanding. You should try to establish normal routines as soon as possible – but balance this with allowing students opportunities to discuss the incident and to express their thoughts and feelings. Encourage them to resume extra-curricular activities and help them to identify where they can go to for support. Encourage them to be supportive of one another.

Q. What are the signs of grief that I may notice in students?
A. After bereavement a student may become withdrawn or aggressive, show anger, have mood swings or lack concentration. Try to handle all these changes with patience, do not seem surprised by them and do not get cross (See Appendix 4). If pupils come from a background where there is family breakdown, serious illness, alcohol or drug related difficulties, then you need to watch out for them.

Q. What skills do I have that are important?
A. Listening skills are probably the most important as people who have experienced loss or trauma generally feel that talking helps them to cope with their feelings. When it is clear that a student wants to talk, try to make the time. Be reassuring and patient while gently encouraging them to talk about the loss. Reassure the student that you are there to help.

Q. Is there any one important thing I should say?
A. Yes – emphasise that grieving is a normal healthy process following a critical incident. It is the person’s way of coping with the event. It is not like depression, which is abnormal. People often need this kind of reassurance because of their confused state.

Q. What if I think that some students are not grieving normally?
A. There is no such thing as a ‘correct’ way to grieve. Some people cry, some laugh, some show no reaction. The important thing is that all these different ways are natural and normal and you should try to help the pupil understand this.
Q. Is it a good idea to organise a classroom session following a critical incident?
A. Some schools do and they have found this to be very effective. There are notes on working in this way included in the pack. An advantage here is that students may feel safe and secure with their classroom teacher rather than being with an adult they do not know.

Q. What should I do if I feel that a student needs more professional support?
A. Discuss the issue with the Principal or guidance counsellor. They in turn may wish to discuss it with the NEPS psychologist and the parents. The outcome may be a referral through the GP to the appropriate service.

Q. What is the overall message in helping bereaved children?
A. You will get through this difficult time and we are here to help if you need support. Take care of yourself and look out for each other. Talk to us if you or a friend needs help.

Q. When should I get back to a normal teaching routine with a class?
A. It is important to give students sufficient time and space to share their feelings and come to terms with what has happened. However, it is also important to move towards a normal routine as soon as possible. Getting on with the regular and familiar pattern of school life helps reduce stress. Avoid introducing new material in the immediate aftermath of an incident or bereavement as grief and shock can interfere with concentration and motivation. It is often a good idea to ask the students themselves about returning to the normal routine.

Q. What do I do about the empty chair/a student’s belongings etc?
A. A helpful strategy might be to involve students in a discussion about what to do about the chair. This might also present an opportunity to move to a new phase in the process. With regard to belongings, it might be useful to put together a folder of the student’s work for the parents. This could be given to them at an appropriate time.

Q. Is there a danger that by talking about suicide you make it an option for others?
A. Talking about the death helps people to make sense of what has happened. People can cope with the truth. It is important to talk about how a person can get to the point where suicide seemed to be an option but to emphasise that it is not a good option. There is always help available if a person can take the step of reaching out for it.
Appendices

EMERGENCY CONTACT LIST

USEFUL CONTACT NUMBERS

SAMPLE LETTER (1)

SAMPLE LETTER (2)

RECOMMENDED READING AND RESOURCES
# Appendix 1

## EMERGENCY CONTACT LIST

Please display this in the staff room and on the office noticeboard

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<thead>
<tr>
<th>Contact</th>
<th>Phone Number</th>
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</thead>
<tbody>
<tr>
<td>Garda</td>
<td></td>
</tr>
<tr>
<td>Ambulance</td>
<td></td>
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<tr>
<td>Fire Brigade</td>
<td></td>
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<tr>
<td>Hospital</td>
<td></td>
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<tr>
<td>Local GPs</td>
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<tr>
<td>Health Board/Child and Family Centre</td>
<td></td>
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<tr>
<td>Chairperson of the Board of Management</td>
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<tr>
<td>School Inspector</td>
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<tr>
<td>State Examination Commission</td>
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<tr>
<td>DES – Communications Unit</td>
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<tr>
<td>NEPS Psychologist</td>
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<tr>
<td>INTO/ASTI/TUI</td>
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<tr>
<td>Clergy/Pastoral Care</td>
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<td>Local counselling services</td>
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## Appendix 2

### USEFUL CONTACT NUMBERS

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<tr>
<td>The Samaritans</td>
<td>1850 609090</td>
</tr>
<tr>
<td>Childline</td>
<td>1800 666666</td>
</tr>
<tr>
<td>Parentline</td>
<td>1890 927277</td>
</tr>
<tr>
<td>Aware</td>
<td>01-6766166&lt;br&gt;1890 303302</td>
</tr>
<tr>
<td>National Suicide Bereavement Support Network</td>
<td>024-95561</td>
</tr>
<tr>
<td>Rainbows</td>
<td>4734175</td>
</tr>
<tr>
<td>The Bereavement Counselling Service – Dublin</td>
<td>01-8391766</td>
</tr>
<tr>
<td>Bereavement Counselling Service</td>
<td>01-6767727</td>
</tr>
</tbody>
</table>

http://homepage.eircom.net/~nsbsn
Irish website for people bereaved by suicide, lists support groups.
Appendix 3

LETTER TO PARENTS (1)
(Sample letter in the event of a tragedy)

Dear Parents,

The school has experienced (the sudden death, accidental injury) of one of our students. We are deeply saddened by the death/events.

(Brief details of the incident, and in the event of a death, perhaps some positive remembrances of the person lost)

We have support structures in place to help your child cope with this tragedy. (Elaborate)

It is possible that your child may have some feelings that he/she may like to discuss with you. You can help your child by taking time to listen and encouraging them to express their feelings. It is important to give them truthful information that is appropriate to their age.

If you would like advice or assistance you may contact the following people at the school. (Details)

Yours sincerely,
Appendix 4

LETTER TO PARENTS (2)
(Sample letter requesting consent for involvement of outside professional/s)

Dear Parents,

Following the recent (tragedy, death of X) we have arranged professional support for students in school who need particular help. (X ……) is available to help us with this work. This support will usually consist of talking to children, either in small groups or on a one-to-one basis and offering reassurance and advice as appropriate.

Your son/daughter has been identified as one of the students who would benefit from meeting with the psychologist. If you would like your child to receive this support please sign the attached permission slip and return it to the school by…………………

If you would like further information on the above or to talk to the psychologist, please indicate this on the slip or telephone the school.

Yours sincerely,

……………………………………………………………………………………….

I/We consent to having our daughter/son met by a psychologist employed by the Minister for Education and Science.

I/We understand that my daughter/son may meet the psychologist(s) in an individual or group session depending on the arrangements which are thought to be most appropriate.

Name of student: ________________________________________________

Class/Year: _____________________________________________________

Date of Birth: ___________________________________________________

I would like my daughter/son …………………………… to avail of the support being offered by the psychologist.

Signed……………………………………….(Parent/Guardian)
Appendix 5

SUGGESTED READINGS AND RESOURCES

RESOURCES FOR SCHOOLS

INTO/Ulster Teacher Union (2000). 
*When Tragedy Strikes: Guidelines for Effective Critical Incident Management in Schools.*

ASTI (1997). 
*Guidelines for Schools on How to Respond to the Sudden Unexpected Death of a Student.*

City of Dublin VEC Psychological Services. 
*Coping with a Major Crisis.*

City of Dublin VEC Psychological Service. 
*When Something Terrible Happens…*

Pat Donnelly, Barnardos (2002). 
*Someone to Talk To: A Handbook on Childhood Bereavement.*

*Suicide Bereavement and Loss: Perspective and Responses.*

*Echoes of Suicide.*

The Irish Association of Suicidology, National Suicide Review Group (2002). 
*Suicide Prevention in Schools: Best Practice Guidelines.*

*Wise Before the Event: Coping with Crises in Schools*; 
Pub. Calouste Gulbenkian Foundation.

Available from Solas, Barnardos Christchurch Square, Dublin 8. 
*Death – Helping Children Understand.*
RESOURCES FOR CHILDREN

*Remembering Mum.*
Pub. A & C Black (Children under 7 years).

*How It Feels When a Parent Dies.*
London: Orion Children’s Books (age 7 – 11).

S. Wallbank.
*My Father Died and My Mother Died.*
Cruse – Bereavement Care (11 years –).

Pub. Good Apple, USA.

Noirin Hynes and Margarita Synott.
*Death and Dying: A Resource Pack.*
Available from the Marino Institute of Education.

RESOURCES FOR PARENTS


Christy Kenneally.
*Sorry for Your Trouble – Helping the Bereaved* (a tape).

Allison Wertheimer.
*A Special Scar: The Experience of People Bereaved by Suicide.*

Sharry, John & Reid, Peter & Donohue, Eugene (2001).
*When Parents Separate: Helping Your Children Cope.*
Pub. Veritas Publications, Abbey Street, Dublin.
The National Educational Psychological Service Agency provides, on behalf of the Department of Education and Science, an educational psychological service to children in primary and post-primary schools.

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Email: neps@neps.gov.ie