

UNIVERSITY OF CHICHESTER
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Childhood, Social Work and Social Care

**THE MANAGEMENT OF DEATH AND LOSS IN THE PRIMARY SCHOOL:
AN INTERDISCIPLINARY APPROACH**

by

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ABSTRACT

This study examines what teachers actively do to manage bereaved primary school children and whether implementation of death and loss education is hampered by lack of government policy, poor finance, teachers' embarrassment, or teachers' workload. An interdisciplinary design incorporates history, psychology, English and the professional discipline of education. It uses a qualitative method to explore whether school policy and practice for helping bereaved children is affected by the wider influence of past historical events and increased pressure on teachers to improve academic results. Qualitative findings are broadened by modest quantitative findings from questionnaires sent to a purposive sample of thirteen Southern England primary schools. These findings support prior research suggesting an absence of school-level death and loss education policy and negligible complementary teacher training via ITT and CPD.

Significant findings show that CPD prioritises curriculum subjects which attract supply teacher funding and that the impact of academic testing reduces teachers' time to talk with bereaved children. Identified is the lack of government policy for supporting bereavement in primary schools, contrasting with a wealth of policy for raising academic standards, suggesting a preference for measuring children's wellbeing by academic results rather than emotional happiness. The effect of reduced school-based counselling support, teachers' professional concerns at losing emotional control and the effect of historical events, are factors considered contributory to adult awkwardness with discussing death and loss in schools. An original contribution to knowledge in the fields of educational practice and children's literature explores how teachers could use developmental bibliotherapy for bereaved children. Despite the availability of children's fiction, developmental bibliotherapy is not widely implemented by teachers in Britain. Thesis findings support the need for government policy to improve the wellbeing of bereaved children and for the implementation of school-level death and loss education policies. Appropriate teacher training through ITT and CPD is called for, to maximise teachers' professional confidence with bereaved children.

DECLARATION OF AUTHORSHIP

I, Lorna Louise Gray

declare that the thesis entitled

The Management of Death and loss in the Primary School: An inter-disciplinary Approach

and the work presented in the thesis are both my own, and have been generated by me as the result of my own original research. I confirm that:

- this work was done wholly or mainly while in candidature for a research degree at this University;
- where any part of this thesis has previously been submitted for a degree or any other qualification at this University or any other institution, this has been clearly stated;
- where I have consulted the published work of others, this is always clearly attributed;
- where I have quoted from the work of others, the source is always given. With the exception of such quotations, this thesis is entirely my own work;
- I have acknowledged all main sources of help;
- where the thesis is based on work done by myself jointly with others, I have made clear exactly what was done by others and what I have contributed myself;
- none of this work has been published before submission, or [delete as appropriate] parts of this work have been published as: [please list references]

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Date:.....

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Definitions and Abbreviations

ACT Association for Children with Life-threatening or Terminal Conditions

AFT American Federation of Teachers

BACP British Association for Counselling and Psychotherapy

BCE Before Common Era

CAR Centre for Appearance

CBN Child Bereavement Network

C. of E. Church of England

CPD Continuing professional Development

CRC Community Research Company

CTPA The Cosmetic, Toiletry & Perfumery Association

CWRC Childhood Wellbeing Research Centre

DCSF Department for Children, Schools and Families (June 2007-2010)

DES Department of Education and Science and the Welsh Office

DfES Department for Education and Skills (2001-June 2007)

DfE Department for Education (2010-date)

DfWP Department for Work and Pensions (coalition 2010-2015)

DoH Department of Health

ECM: CCF Every Child Matters: Change for Children (Green Paper Sept 2003)

ECM Every Child Matters (2004)

ECM: NS Every Child Matters: Next Steps (2004a)

ERA Education Reform Act

ITE Initial Teacher Education

ITT Initial Teacher Training

KS1 Key Stage 1 ; KS2 Key Stage 2

LEA Local Education Authority (later years LA: Local Authority)

LSA Learning Support Assistant

NAT National Attainment Tests

NCB National Children's Bureau

NCGE National Centre for Guidance Education (Dublin)

NDC National Death Centre

NFER National Foundation for Educational Research

NICE National Institute for Health and Clinical Excellence

NOR Number on the roll

NSPCC National Society for the Prevention of Cruelty to Children

NQT Newly qualified teacher

OFSTED Office for Standards in Education

PHIAC Public Health Interventions Advisory Committee

PPA Preparation, Planning and Assessment

PSHCE Personal, Social, Health, Citizenship Education

PSHE Personal, Social, Health and Economic

R.E. Religious Education

SAT (Standard Attainment Tests)

SCDC School Curriculum and Development Council (formed 1984)

SEAL Social and Emotional Aspects of Learning

SEC School Examination Council (formed 1984)

SEN Special Educational Needs

SLT Senior Leadership Team

SMSC Spiritual, Moral, Social and Cultural

TE Therapeutic Education

TES Times Educational Supplement

DATES OF SOME SIGNIFICANT EDUCATIONAL POLICY CHANGES

1870 Elementary Education Act:
Schooling extended to 5-13 years oldq
Parents could be fined for children’s non-attendance
1902 Balfour Act
School Boards abolished
Elementary schools control was transferred from School Boards to local education authorities.
1918 Education Act (Fisher)
The school leaving age was raised to fourteen.
1944 Education Act (Butler):
Primary education was distinguished from secondary education
Compulsory schooling was ensured for children aged five to fifteen
The system of grammar schools, secondary modern and secondary technical schools and free education for all secondary pupils was introduced.
1972 School leaving age raised to 16
1978 Warnock introduced the term Special Educational Needs (SEN)
1981 Education Act
Introduced a Statement of Educational Needs for children requiring additional support and an integrative approach to including children in mainstream schools
1984 Schools Council was abolished, teachers’ influence on curriculum content was reduced
More power was given to the Schools Examination Council (members nominated by the Secretary of State)
1988 Education Reform Act: (Baker)
National Curriculum introduced for England, Northern Ireland and Wales in all State schools
Key Stage testing (Standard Assessment Tests) established (at 7,11,14,16)
Managers were now called School Governors
Control shifted away from Local Education Authorities, the Education Secretary was granted more decision making power
Schools were given more freedom to compete ‘in a market environment’
2004 Every Child Matters: Change for Children (DfES)
2014 New Primary Curriculum England and Wales (DfE)

INTRODUCTION

Purpose

The aim of this thesis is to explore and address the management of death and loss in the primary school. To clarify, while death is a permanent and irreversible absence of life¹, Milton (2004) defines loss as ‘when anything that is valued or anyone we are attached to is removed from our lives’ (Milton 2004: 58) therefore including, but not restricted to, loss from death. Although the mourning duration might differ, the term ‘bereavement’ will be used in this study to mean the period of mourning following either death or loss. Duffy (2003) suggests a wide range of possible losses or ‘little deaths’ (Duffy 2003: 5) affecting children, including moving house and leaving friends behind; close friends or family moving away, and parental separation or divorce. Although not represented to great extent, the discussion of more than one source of children’s grief provides a more rounded contribution to the field of educational policy, than would occur from limiting the study to death-related bereavement.

This study was initiated by an unsettling personal experience with a distraught, physically demonstrative bereaved child in my classroom of four to five year olds. I discovered later that the child had experienced the imprisonment of a parent whom he had not seen for several years. Being untrained in managing bereavement and feeling professionally deficient in knowing how to help him, led me to an intuition that teachers elsewhere could be equally untrained to help bereaved children. My subsequent reaction was to improve the situation in my own school and further. Despite the *Children Act 2004* clarifying that caring for children’s wellbeing is the responsibility of schools², and having recognised that a range of losses can seriously affect children’s happiness, I realised there was no school-level written policy to help teachers with bereaved children. A decision to introduce better school procedures to help bereaved children was backed by my headteacher, and I took on responsibility for in-house training of teachers. Two colleagues found the introductory training discussion challenging, especially the suggestion that euphemisms for death should be avoided.

I realised that to significantly help colleagues, research into areas of psychology not covered in my training (ITT), or offered since in continuing professional development (CPD), would help. This led to researching attachment theory which prompted an exploration into not only the effect on children of death, but also a broader

¹ Notwithstanding religious beliefs on spiritual afterlife.

² Great Britain: *Children Act 2004* (2004: 3, Part 2: 10:2 a)²

understanding of losses perceived as less significant, such as divorce and parental imprisonment, the grief from which can replicate grief from death. Colleagues' unease with discussing death and loss initiated my interest in exploring why attitudes to discussing death have changed and what had influenced the changes. Arguably, the effects of world events have reduced the ease with which death was once spoken about (Jupp and Gittings 1999; Jalland 2005; Parkes, Laungani and Young 2006) and influenced cultural unease³ with discussing the deaths of people known to us (Gorer [1965] 1977; Kearsley 1989; Doughty 2011). I surmised that this reticence is partly responsible for perpetuating a lack of death and loss education in primary schools. Nonetheless, knowing that unease with discussing 'difficult' losses with children might be only one reason for the lack of death and loss education for children and teachers, I explored the effects of social history and past educational policy to better understand the current schools situation.

The study is particularly important for exploring how past educational policy has prioritised children's academic success over emotional wellbeing. The effect on schools of educational policy reveals a disregarding of the impact of grief on children's concentration, and consequent lessening of their learning potential. This situation is intensified from a widespread lack of bereavement training for teachers, causing a possible lack of professional confidence and the significance of certain losses being overlooked. The contribution of the thesis to the fields of research is now discussed.

Framework

An inter-disciplinary research design was considered the best approach for accruing trustworthy data from several sources. This decision led to selecting specific fields of research for their complementary content, and their ability to show a parallel trajectory of events. Rather than 'stand alone' chapters, the chapters link together and detail findings upholding the premise that ease with death and loss has converted to 'embarrassed denial'; moreover, that this attitude infiltrates school culture. Analysis of the data from the field of children's literature not only supports the historical trajectory, complementing the psychological literature reviewed, but also provides ideological concepts informing the theory behind the process of developmental bibliotherapy. As this strategy as a resource in primary schools is under-researched in Britain, the findings make an original contribution to knowledge. Notwithstanding that the educational policy chapter follows an historical trajectory and might have been

³ Not necessarily world religions other than Christian.

positioned earlier in the structure within the literature review, it was placed at the end of the thesis for two reasons: firstly, and most importantly, the analysis of educational data produced significant findings, making it more relevant to group that content with other findings chapters. Secondly, the findings from other chapters preceding educational policy provide an informed scaffold to explore the current reasons for the lack of death and loss education.

The findings, which reflect prior research, support the premise that teachers in different geographical areas are not receiving death and loss education (Crenshaw 1995; Eiser *et al*⁴ 1995; Bowie 2000; Jackson and Colwell 2002; Rowling 2003 and Potts 2013), either during Initial Teacher Training (ITT) or Continuing Professional Development (CPD). They also show that this situation continues despite acknowledgement in the 2010 white paper *The Importance of Teaching* (DfE: November 2010), that schools have a fundamental role in the health and wellbeing of children (DfE 2010: 28; 2.48). Past research (Shipman *et al* 2001) suggests that school-based policies for daily death and loss education are negligible. Teachers in a purposive sample, in schools without a school-level policy, are shown to adopt a mainly passive approach, managing loss-related situations as they arise.

The daily wellbeing of children affected by a range of bereavements is therefore mostly unplanned for, outside the area of critical incident. To comprehensively research the reasons for the lack of death and loss education, it became clear that as well as a need for more than one field of study, more than one research method was required. The two methods of research used to collect and analyse data are qualitative and quantitative, notwithstanding that modest quantitative data from questionnaires to schools are analysed qualitatively. The Methodology will outline the methods and approaches to the literature review and findings chapters, which inform each other, but are discussed independently, in line with an inductive (Strauss and Corbin 1998) and iterative approach⁵ (Srivastava 2005).

⁴ Eiser C., Havermans T., Rolph P. and Rolph J. (1995)

⁵ meaning making and processing of analysed data

Thesis structure

The overall structure is as follows, and the rationale for it is represented in Diagram 1 on the following page.

INTRODUCTION

CHAPTER 1 Literature Review: *History of Death and Mourning*

CHAPTER 2 Literature Review: *Attachment and Loss*

CHAPTER 3 Research Questions:

1. *How has the historical trajectory (chapter 1) and psychological theory (chapter 2) impacted on attitudes to death, mourning and what teachers say and do?*
2. *How is the material covered in chapters 1 and 2 reflected in the parallel trajectory of children's literature?*
3. *Given the pattern of embarrassed denial and the psychology of loss, what could psychologically untrained teachers do in school to help bereaved children?*
4. *If there are initiatives they could use, do the demands of teaching and assessment allow time to implement them and if not, why not?*

Inter-Disciplinary Methodology

1. *Methodology for researching death and loss in children's literature*
2. *Methodology for questionnaires*
3. *Methodology for evaluating bibliotherapy*
4. *Methodology for analysing educational policy*

CHAPTER 4 Analysis and Findings: *Treatment of death and loss in children's literature*

CHAPTER 5 Analysis and Findings: *Questionnaires*

CHAPTER 6 Analysis and Findings: *Evaluation of bibliotherapy*

CHAPTER 7 Analysis and Findings: *Research into relevant educational policy*

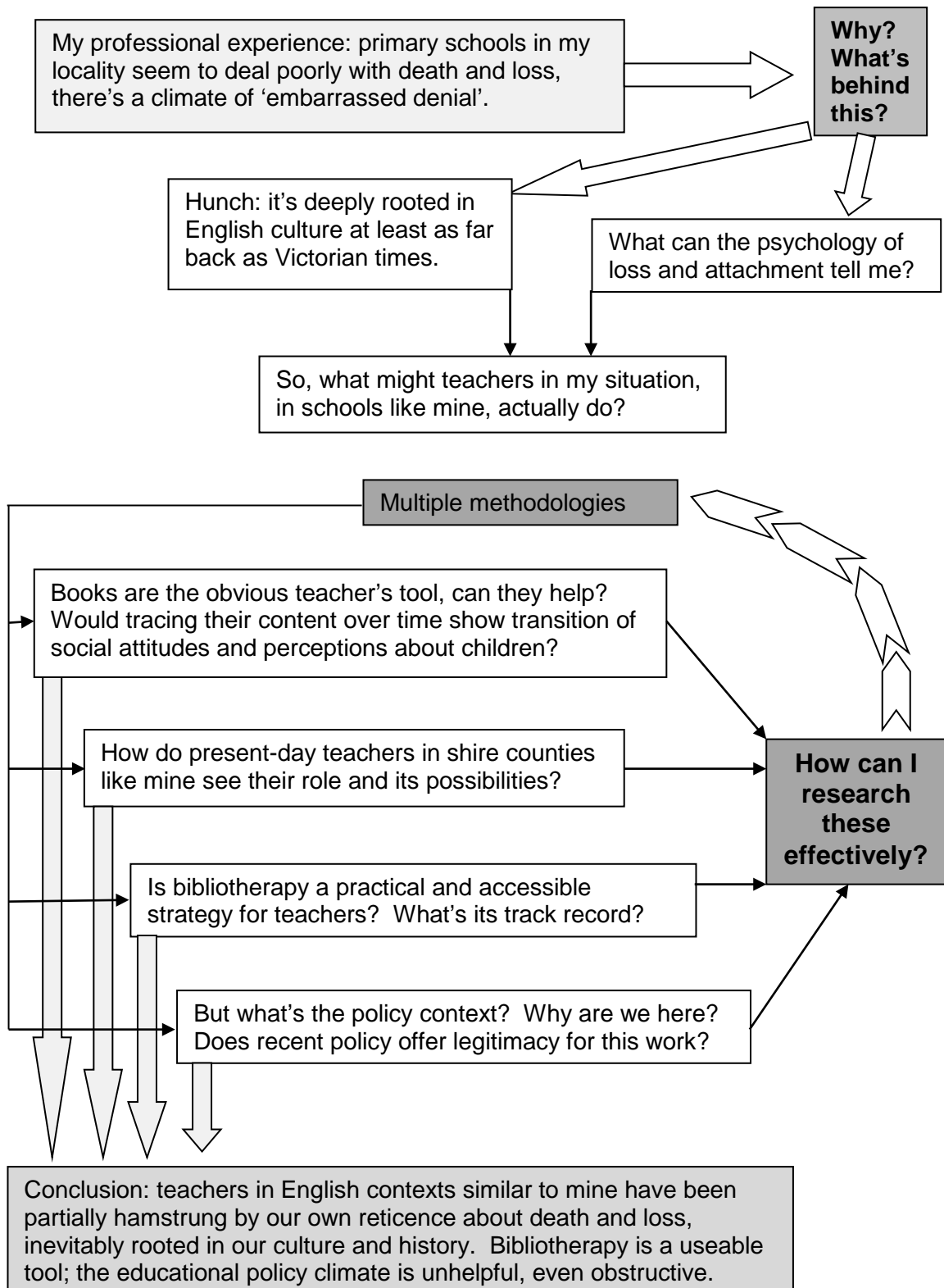
CHAPTER 8 Conclusion.

Rationale for the literature reviewed and the four research foci

The choice of chapters explored in the literature review was influenced by several factors: my professional experience of awkwardness from adults when discussing life-changing losses; the likelihood that adult awkwardness emanated from earlier historical roots, and the realisation that greater understanding of troubled children in my own class would require a more profound knowledge of the effects of loss, grief and mourning. The first chapter of the literature review (Chapter One of the thesis) confirms that world events have greatly influenced society, ultimately affecting twenty-first century educational practice. Chapter two of the review (and thesis) examines the field

of psychological research to find reasons for loss-related grief and mourning. This creates a firm foundation for analysing the data emerging from the fields of literature, bibliotherapy and education. Each findings chapter contributes qualitative data to answer questions arising from the literature review, and the first findings chapter also contributes quantitative data.

DIAGRAM 1: REPRESENTATION OF RESEARCH JOURNEY



Multiculturalism

Having stated the choice of chapters, and the research design, it is important to clarify reasons for a decision to explore a non multi-cultural research area. Although twenty-first century Britain is now no longer mostly Christian, the predominant culture of my target context is not multi-cultural, but Christian and secular. A large proportion of the thesis follows a trajectory during which time other religions were not represented in large numbers in Britain. Research will show that nineteenth and early twentieth century Britain reflects a culture where Christian 'good death', high church-attendance and prescribed Christian mourning rituals dominated. This is reflected in complementary chapters. Furthermore, although not a central feature of the research, the quantitative findings focus on a geographical area with no faith schools other than Christian. The nucleus of the purposive sample is an area comprising communities that are primarily European, can be described as 'peripheral' (Gaine 2005: 6), and therefore not part of non-White multi-cultural communities, and where the second highest language spoken other than English is Polish.

Moreover, death and bereavement across cultures has already been researched (Parkes, Laungani and Young: [1996] 2015), and other studies of teacher attitudes to bereavement focus on regional areas with different characteristics (Holland 2001; Potts 2013).

The children's voice

However, as well as clarifying what could be done within the scope of this study, what could not be addressed through quantitative research was the 'children's voice' which has been the topic of other research (Clark, McQuail and Moss 2003; Pascal and Bertram 2009). This decision was made for several reasons. The priority was to add to a neglected area of research, asking teachers what practice they employ to manage bereaved children. As the research was neither a case study of one particular school, nor participant observation in which the researcher was part of the observed group (Wisker 2008: 203), children could not be met with. Following on from that, some sampled schools did not teach beyond age seven and my professional experience suggested that asking young children to complete questionnaires was unreliable. Although questionnaires can be adapted for young children, they can be 'tokenistic' should only this approach be used (Clark, McQuail and Moss 2003: 32: 3.4). Lastly, having no access to counsellors in schools, or background information about individual children, it was considered ethically problematic to discuss bereavements with children unknown to me. However, the literature review does mention research citing children's

opinions on discussing bereavement and as such, children's thoughts on talking with adults about death and loss are included.

I now turn to the literature review, which begins by discussing some of the best-known past and innovative research in the area of the history of death and mourning, from which current attitudes can be traced. Having provided the foundations, the rest of the literature review discusses what is meant by loss, and how grief affects adults and children. This enables a more informed platform for discussing the data from findings chapters. As the thesis focus is death and loss, it is worth pointing out that the reading of cited papers similar to the Laming Report (2003) ⁶ could be upsetting. To maintain anonymity, the county references have been replaced by asterisks if a reference, or an online address, and by the words 'Southern England' or 'sampled area'.

⁶ Laming Report [online] Available at https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/273183/5730.pdf (accessed 2.11.15)

LITERATURE REVIEW Part One

Chapter 1

BRITISH DEATH AND MOURNING FROM THE VICTORIAN ERA TO 2015

CHAPTER INTRODUCTION

This chapter contributes a framework from which the history of death, dying, loss, and mourning rituals can be explored for their contribution to present day approaches to death education. The chapter focuses on the effects on Britain of significant events from the nineteenth century to 2015. The research underpinning the chapter includes the influence on mourning from world wars, medicalisation and secularisation, providing a background for discussing theories of 'death denial', 'good' and 'bad death', and 'visible' and 'invisible' death. Notwithstanding an awareness and acceptance of more recent diversity in British culture as it has become increasingly multi-cultural, the chapter nonetheless focuses on Christian and secular death rituals and the effects of loss on different classes, ages and genders of people affected by those philosophies – to attempt a more comprehensive account would have been unrealistic and therefore superficial. An informed backdrop therefore underpins other thesis areas, including the quantitative data, and the reticence of church and secular schools to teach death education.

A possible 'revival of death' (Walter 2005) linked to individualism, concludes the discussion. Although the phrase 'death-denial' is frequently referred to herein, and was widely used in the 1950s and 1960s, Jalland reminds us that the phrase is not only value-laden, but has meaning dependent on the professional using it (Jalland 2010: 184). The phrase is therefore defined as: an avoidance of discussion about death and condolences. It is with all these ideas in mind that I begin by examining aspects of death, bereavement and mourning in nineteenth century, Victorian Britain.

TURNING POINTS

There were two major turning points in the history of death, grief, and mourning in Britain between 1830 and 1920. (Jalland 2005: 358)

Jalland states that one major turning point occurred in the 1870s and 1880s during Victorian times, when the forces of religion, demography and culture were affected by

the decline in both mortality and Evangelical fervour; the other was the First World War (Jalland 2005: 358; Jupp and Gittings 1999: 251). To discover what led to the changes at those times, I will begin exploring death and mourning in Victorian Britain.

VICTORIAN ERA

Attitudes to death

Victorian myth

The theory that nineteenth-century communities were more comfortable with discussing death than those of the twentieth and twenty-first centuries can be premised on the belief that the rituals and death-talk of the Victorian 'celebration' of death' (Curl 1972), helped alleviate grief. In support of this, analysis of recent mourning trends by Parkes, Laungani and Young (2006) demonstrates that twenty-first century 'traditional mourning customs have been largely abandoned and the rituals of cremation or burial of the dead have lost much of the emotional significance, which in the past made them a source of support for the bereaved' (Parkes, Laungani and Young 2006: 4). Jalland asserts that criticism of Victorian mourning pomp and expenditure has been judged mainly on lavish formal requirements (Jalland 2005: 300) and from evidence of ostentatiousness attributed to 'ceremonial state occasions' (Jalland 2005: 196), which differed from quieter, family funerals. Furthermore, that 'twentieth century censure has distorted our view of the Victorians' own experiences and responses to bereavement' (Jalland 2005: 300).

Strange agrees that accounts of ritualistic Victorian 'respectability and funeral extravagance' (Strange 2010: 99) have been mythologised (Strange 2010: 99) by subsequent generations and that this is to the detriment of acknowledging the comfort that was gained from the rituals themselves (Strange 2010: 99). Although when 'separating attitudes to death into epochs, historians risk creating categories which inevitably shape, and limit, the questions asked of those cultures' (Strange 2010: 20), value remains in exploring how attitudes to bereavement have evolved, and affect the current climate of 'embarrassed denial'.

Good deaths

It is noteworthy that the demographic structure of the nineteenth century was affected by high rates of infant deaths and a low, adult average life expectancy. Survival from diseases such as typhoid and cholera largely relied on luck, although by mid-Victorian

times quarantine legislation began to improve death- rates⁷ (Strange 2010: 27). Children under twelve months old suffered 220 deaths for every 1000 live births between 1891 and 1900 (Strange 2010: 230), with the highest rate amongst the working classes in industrial cities. The widespread expectation was that one child per family would die in infancy and notwithstanding the huge sorrow felt, communities became accustomed to untimely death and tried to see it as God's will (Jalland 2005: 121; Jupp and Gittings 1999: 237). In this climate, the force of Evangelical Christianity which was most prominent in the 1850s and 1860s (Jalland 2005: 20; Jupp and Gittings 1999: 232) influenced not only attitudes to dying,⁸ but rejuvenated earlier common perception of what was either 'good death' or 'bad death'.

Victorian 'bad death' was sudden, without time to say goodbye to family or more importantly, make peace with God (Jalland 1996, cited by Strange 2010: 48), thus condemning the dying to 'the eternal punishment of hellfire' (Jupp and Gittings 1999: 236). 'Good death' was prepared for gradually and piously, with the dying still conscious, surrounded by family and in some cases, clergy (Jalland 2005: 21). However, beliefs began changing amongst more progressive Christians (Jupp and Gittings 1999: 236) and the 1860s started to see a decline in both the 'literal belief in hell as everlasting physical punishment' (Jalland 2005: 266) and the concept of Heaven as a 'static, theocentric ...restful place for psalm-singing saints' (Jalland 2005: 266). Theologians' emphasis on incarnation rather than atonement (Jalland 2005: 273) made dying less about judgement on sinners and more about reunion with loved-ones in a 'Heavenly home' (Jalland 2005: 273). This became particularly important to families where many young women were dying from consumption (Jupp and Gittings 1999: 237; Jalland 2005: 41)⁹.

The bereaved sought emotional consolation in a culture of predominantly Christian piety, which was supported by the language of the Christian burial service. This 'ameliorated grief by reaffirming belief in heavenly reunion' (Jalland 1996, cited by Strange 2010: 100; Jupp and Gittings 1999: 242). The opportunity for working through grief possibly came not only from religious hope, but also from the reassurance offered from ritual and the consolation offered by community support and sharing memories of

⁷ The overall death rate fell from 21.8 per 1000 in 1868, to 18.1 in 1888(Strange 2010: 27).

⁸ 'For early and mid-Victorians, 'death and suffering were acts of divine providence which Christians must accept with submission' (Jalland 2005: 51).

⁹ Consumption (tuberculosis) killed more people than smallpox and cholera combined (Jalland 2005: 40).

the deceased. Strange asserts that gestures of 'communal sympathy reminded the bereaved that they were surrounded by friends' (Strange 2010: 121).

Laying out

As most people died at home, ¹⁰ communities were overtly affected by the dying process; a direct contrast to the twenty-first century removal of the dying. A prominent use of community women was for laying out corpses. In Victorian middle-class and upper-class families, nurses or female servants instructed by nurses, usually laid out the corpse at home¹¹ (Jalland 2005: 211). In working-class communities, laying out in homes provided an essential role for untrained, local women who charged a small amount. However, the threat to health from quick decomposition of corpses made it unwise to retain cadavers in homes, and it became considered unhygienic to the living for women to undertake the task, especially midwives¹² (Strange 2010: 72).

Disagreement transpired as to who should lay out the dead. The situation was possibly influenced by the male wish to professionalise the care of the body in death as well as life (Strange 2010: 72), and was supported by a report stating that corpses should be removed and dealt with by 'careful' professionals (Hall 1894, cited by Strange 2010: 72).

It was also the year that Blum was credited with having discovered the temporary embalming qualities of formaldehyde, although its use on human corpses in Britain was not instant and was unlikely to have affected the decision to exclude women from the work¹³. Nonetheless, whereas women laying out the dead experienced a power they may otherwise not have known, (Hallam 1997, in Field, Hockey and Small 1997: 117) regardless of their class, a class divide was revealed in the ostentatiousness of funerals, and Jalland suggests that despite providing 'a socially approved catharsis of grief' (Hinton 1979, cited by Jalland 2005: 210), the expectations from funerals could also provoke financial concern for poorer mourners.

¹⁰ See Jalland (2005: 104).

¹¹ There were a few exceptions to this. Sir John Gladstone requested that his 'male retainers attend him as well as his daughter' (Jalland 2005: 100), but this was unusual.

¹² The *Midwives Act 1902* prohibited midwives from laying out the dead (cited by Strange 2010: 72) unless attending a stillbirth (Midwife 1935: 280, section E). [online] Available at <http://rcnarchive.rcn.org.uk/data/VOLUME083-1935/page280-volume83-october1935.pdf> (accessed 26.5.15).

¹³ Blum was credited with its discovery as more than an antiseptic, but Trillat had discussed it earlier. (Simmons 2014: 28).

Funerals

Whilst wealthier families could select a burial site and elaborate monuments, the anxiety of poorer mourners was to avoid burying relatives in 'an obscure corner of the churchyard where the nettles grew' (Dickens 2000: 35, cited by Jupp and Gittings 1999: 224). The distress and stigma of a pauper's (parish) funeral with an unmarked grave was to be avoided at all costs. Mingled with shame was the fear of potential risk to corpses from 'body-snatchers' (Jupp and Gittings 1999: 225), who plundered graves and sold cadavers for medical anatomy classes. The determination to avoid this happening was not least because dissection was thought to invalidate the chance of Christian resurrection. Equally shocking in a culture of sexual prudery was the possibility that a woman could be disinterred and dissected whilst 'subjected to the gaze of lads learning to use the incision knife' (*ibid.*). Membership of a Burial Club ensured that a decent burial took place, and by 1897 there remained more than four million Burial Club members, regularly paying undertakers and publicans to avoid the shame of a parish burial (*ibid.*). The high rate of early death made the male-dominated job of Victorian undertaker one of the most secure and prosperous available.

Much has been recorded about Victorian funeral extravagance. The 1843 Chadwick report¹⁴ condemned funeral expenditure, concluding that four to five million pounds were 'annually thrown into the grave' (Chadwick 1843, cited by Howarth 1997: 124). Nevertheless, the elaborate funerals with plumed horses and floral wreathes requested by many of the poor into the twentieth century, became less usual for the middle-classes. However, whereas it could be assumed that eventually, the poor 'caught up with' middle class views, Strange suggests that this 'influence' should be regarded cautiously (Strange 2010: 117). The importance of community identity, and the creating of 'symbolic spaces' in which to express grief and condolences (Strange 2010: 118) partly encouraged the continuation of traditional ritual for working-class families, and recent thinking suggests that although funerals were considered 'ostentatious', they were not entirely about display (Jupp and Gittings 1999: 242), but more about providing a way to manage grief, whilst acknowledging the place of the deceased in society (Strange 2010: 123). Strange suggests that 'this reading of the funeral persists today: it represents "the finished picture of a person"' (*ibid.*) and allows those not attending the funeral to show their sympathy (*ibid.*).

¹⁴ *Report on the Sanitary Condition of the Labouring Population of Great Britain.*

Mourning attire

Middle classes

Nonetheless, the upholding of traditions safeguarded ‘an additional line of business for the entrepreneur-undertaker’ (Howarth 1997: 123). The suggestion that undertakers were ‘greedy, heartless men enforcing an expensive hierarchy of funeral goods on the victimised poor’ (Howarth 1997: 124) ignores the possible interrelation between Victorian funeral regalia and grief. Jay’s London General Mourning Warehouse opened in 1841 for the specific purpose of providing mourning clothes, including non-reflective crape¹⁵ for women’s clothes and veils and half-mourning of lilac and white for children. Whilst men wore a black arm-band, most middle class women’s rituals were more elaborate and expensive. Staples such as black lace-edged handkerchiefs, dresses, crape-edged capes and veils were required for different mourning stages, despite the health issues¹⁶ that accompanied the proximity of crape to the face (Jalland 2005: 195). Jet jewellery set with seed pearls or opals symbolising tears, and lockets bearing the picture or hair of the deceased, were also commonly worn (Jupp and Gittings 1999: 247; Strange 2010: 118).

Poorer classes

The emphasis on cultural expectations to wear black, despite the financial hardship suffered by poorer families, was ‘so ingrained in the culture of death that to overlook it was to invite speculation on the gravity of loss’ (Strange 2010: 120). Poorer women were determined to dress appropriately, even if items were pawned afterwards (Strange 2010: 19). Whilst the cathartic nature of mourning attire remains unproven (Cannadine 1981, in Whaley 2011: 190) mourning clothing nevertheless epitomised rituals, which were markedly similar across classes and clarified that people were grieving.

Gender

However, Hockey suggests that expectations of mourning dress also revealed a difference in the oppositional natures of the genders (Hockey 1997: 90). Hockey states that whilst the expected sensitivity and expressiveness of Victorian women was privileged in a way that men’s was not, conversely ‘the whole burden of mourning wrappings seems to have fallen on women’ (*Woman’s World* magazine 1889, cited by Hockey 1997: 90, citing Morley 1971: 63). The conventions of female mourning have been critically evaluated as juxtaposed between being helpful *and* restricting. Although

¹⁵ English spelling.

¹⁶ Fumes were given off from the crape.

Curl asserts that 'widows weeds'¹⁷ made grief visible while forming a 'barrier against unwanted intrusions on private feelings' (Curl 2004: 200), Jalland and Cannadine suggest otherwise. They argue that the conspicuousness of mourning from distinctive clothing, enforced women's social isolation for at least a year after the death of a spouse (Jalland 2005: 301), retarding 'the will to recover' (Cannadine 1981, in Whaley 2011: 190) and merely 'asserting status' (*ibid.*).

As the Victorian era progressed through to the 1880s, the demand for crape declined alongside a more common-sense view of 'making-do'. The relaxation of rigid conventions places the times as 'a transitional period in relation to death, grief and mourning' (Jalland 2005: 304). Moreover, there is evidence that the strong faith of many nineteenth-century widows encouraged a greater ability to accept the death (Jalland 2005: 239) and allowed them to bypass the bereavement stage of 'anger', now accepted as a common stage of grief (Parkes 1972). However, this in no way reduced the cumulative effects of bereavement. The withdrawal of the main income, coupled with the loss of a partner, meant that for many women bereavement caused 'multiple tragedies which did not diminish, but intensified the distress of loss' (Strange 2010: 195). It is with the continuing effects from male deaths in mind that Jalland's second turning point of change is now addressed: the Great War.

THE GREAT WAR 1914-1918

The impact of the Great War should never be under-estimated, for it transformed the nation, not least its funerary customs. (Curl 2004: 210)

The effects of the First World War¹⁸ 'intensified' and accelerated the decline in elaborate mourning rituals (Jalland 2005: 371; Cannadine 1981, in Whaley 2011: 193)¹⁹ for the death of individuals; formerly 'an intrinsic part of the nineteenth century Christian community's response to death' (Jalland 2005: 371). A range of war-time events instigated change, including: the absence of servicemen's bodies to bury in Britain; a national decline in religious belief; and a change in the religious affiliation of women, some aspects of which I will examine next.

¹⁷ 'Widows' weeds' originate from the old-English word 'waed' meaning garment.

¹⁸ Also known as The Great War, it began on 28th July 1914.

¹⁹ Motor-driven hearses, lower death-rate and a request by Edward VII, contributed to less ostentatiousness (Cannadine 1981, in Whaley 2011: 193).

Events instigating change

Absent deaths

On day one of the battle of the Somme, of the 60,000 going 'over the top', 30,000 became casualties in the first thirty minutes (Wilkinson 1997: 149). The total of British casualties was approximately 57,000, a third of whom were killed (Bédarida [1991] 2005: 171). The remoteness of the war's action from the British public, sustained by censorship regulators, became a distinctive feature of the First World War (Berridge 2001: 62) and although the newspapers withheld the extent of the death toll abroad, the shocking reality of war casualties was gradually revealed. As the public became aware of the mass graves abroad in which the dead and dying servicemen were laid (Bourke 1999: 215) the similarity to paupers' funerals was hard to bear (Bourke 1999: 219). The absence of men's bodies to bury at home instigated one of the greatest changes in British funeral culture.

The meaning of life and the meaning of death were all but wiped out by the Great War. (Jalland 2005: 380)

Curl asserts that one reaction to the overwhelming loss of men²⁰, and unpatriated bodies, was the seemingly inappropriateness of lavish funerals for civilian individuals (Curl 2004: 210). With so many missing bodies the 'individuality of death had been buried under literally millions of corpses' (Winter 2003, cited by Jalland 2005: 373). Gone was the possibility of the Evangelical 'good death' of the nineteenth century, inconceivable for war deaths (Strange 2005: 264; Winter 2003, cited by Jalland 2005: 373). The late-Victorian belief in Heavenly reunions persisted and widows needed reassurance that their men were waiting for them in Heaven, miraculously un-mutilated, and having avoided 'eternal punishment of hellfire' (Jupp and Gittings 1999: 236). An ineffectual clergy, unable to give plausible explanations for so much death, further affected the unsettled climate in Britain (Cannadine 2011: 219).

Declining church attendance and women's beliefs

From disillusionment with the clergy, mainstream church attendance declined, and according to Bourke (1999) those women whose men had died in battle looked elsewhere for sympathy (Bourke 1999: 233). They found it in Spiritualism, which became the domain of women (Brown 2006: 104; Winter 1998: 55) continuing to increase, and providing evidence of weakened, especially female, conventional

²⁰ Varying figures cited for British servicemen dying in the war include: 722, 785 (Winter, cited by Jalland 2005: 373) 745,000 (Wilkinson, in Jupp and Howarth 1997: 149).

religious belief²¹ (Jupp and Gittings 1999: 251; Jalland 2005: 365). After 1916, the number of Spiritualist societies more than doubled from 158 to 389²² (Jalland 2005: 365; Jupp and Gittings 1999: 251; Wilkinson 1997: 156) transforming the movement from a leisure pursuit (Jalland 2005: 365) to a religion. Strange notes that Spiritualism 'enabled [them] to construct a narrative of the dead at peace' (Strange 2005: 268). Whilst most churches condemned the 'craze for spiritualism' (Brown 2006: 103) some church leaders recognised that the need for the bereaved to find answers had initiated an estrangement from inadequate church teaching (Wilkinson 1997: 156). In 1918, this was acknowledged by the Archdeacon of Aston, who commented that the bereaved 'crave with unspeakable longing for some definite sign that their departed friends are still alive' (Aston 1918, cited by Brown 2006: 104).

Belief in an after-life remained important to the bereaved, despite many mourners doubting their faith (Jalland 2005: 367), but the Victorian notion of the 'bad death' diminished. The war all but removed 'hell' from English Christianity (Wilkinson 1997: 155; Walter 1994: 15). To encourage patriotism, enforced repression of grief was promoted, which impacted on mourning (Wilkinson 1997: 156). The lack of wartime communal grief greatly influenced mourning customs, leaving many widows with no support network other than private letters between friends²³. The awareness of so many young, violent deaths, blunted survivors' emotions and restrained death-talk (Wilkinson 1997: 156; Jalland 2010: 34). Returning soldiers, numbed by their experiences, impaired mourning for themselves and their families (Jalland 2010: 34) and mourning was effectively silenced for over 200,000 dead in England and Wales, most of whom were aged between twenty and forty (Jalland 2010: 32).

The influenza pandemic

However, despite the political and cultural importance of five years of war, more people in Britain and globally died from the Spanish influenza pandemic that began in 1918 than from the war itself. Again, censorship attempted to hide the full extent of the death toll and communities were unaware of the virulence of the disease, the spread of which was said to have originated in the army (Jalland 2010: 32). However, rather than dwelling on the deaths, Britain celebrated victory and lengthy outward mourning was

²¹ *The Rise and Fall of British Spiritualism*. [online] Available at https://wiki.leeds.ac.uk/index.php/HIST2530_The_Rise_and_Fall_of_British_Spiritualism (accessed 24.6.09)

²² *ibid.*

²³ Letters between women were a source of consolation and those of Violet Cecil and Carrie Kipling are some that show the support network that arose (Jalland 2010:chapter 2).

reduced (Jalland 2010: 34) despite many people mourning influenza victims. The deaths were not fully accepted as 'war casualties' until many years later. After the war, the huge death toll of civilians and servicemen forced unavoidable changes in mourning rituals. With Britain awash with grief, extravagant funerals seemed contrary to the prevailing climate, not least because of the reminder to so many of their loss (Jalland 2005: 380) but also because of the financially bleak future faced by many widows (Winter 1998: 47). There was 'a revolutionary simplification of funerals' (Curl 2004: 209). Consequently, low national morale coupled with the shocking reality of battle deaths, unexpectedly amplified the initial 1875 requests for funeral reform (Strange 2005: 264).

Reform

Cremations

Bourke suggests that the 'language of putrefaction' (Bourke 1999: 222) attributed to soldiers dying in trenches, increased support for cremations. The reminder of decaying, and possibly un-buried bodies abroad (Bourke 1999: 223) increased cremations and reduced the proportion of burials. Once thought 'heathen, foreign, un-Christian and downright unpleasant' (Curl 2004: 186) cremation advocates based their opinions on earlier arguments regarding sanitation. The supporters condemned burial as 'disgusting decay' (Bourke 1999, cited by Jalland 2010: 103), and demanded that cremation should be accessible for all, insisting that infected and diseased bodies would be disposed of 'at a distance from densely populated areas' (Hockey, Katz and Small 2008: 189). However, although support for cremations grew amongst the professional and upper-middle classes, the working classes remained strongly disposed towards burial. There were just over one thousand cremations in London in 1914, and in the early 1930s only one per cent of the deceased were cremated (Jalland 2010: 102). It would be another forty-nine years before the cremation rate in England became fifty per cent (Jalland 2010: 103). As the Great War drew to a close, cremation reformers supported 'cremations for all' with mourners wearing 'everyday clothes' (Jalland 1999: 251). The elaborate rituals identifying the Victorian bereaved, belonged to a pre-war world.

Monuments

Kearl asserts that after the First World War, the worth of individuals in communities shifted to create a 'new kind of identity, a new kind of dying, and a new kind of grief' (Kearl 1989: 46). 'New mourning' was exemplified in the national need to erect monuments, more than at 'any earlier single historical event' (Jalland 2005: 380).

Cannadine states, that 'those millions of bereaved wanted some ceremony, some reassurance that their loved ones were not forgotten and that they had not died in vain' (Cannadine 2011: 227). Memorials were not to celebrate the war, but to represent the un-repatriated dead, and the bodies of over 200,000 missing men (Bourke 1999: 229). Gregory states that the non-denominational Whitehall Cenotaph, erected for Armistice Day, on 11 November 1919, was for some people more unifying than attending church (Gregory 1994: 54, cited by Jalland 2010: 61). It provided an opportunity for an 'unparalleled outpouring of collective emotion' (Jalland 2010: 61) which had been constrained through the war and might have remained hidden, were it not for the climate of the inter-war years.

INTER-WAR YEARS 1918-1939

It is unsurprising that '[i]nter-war Britain was probably more obsessed with death than any other period in modern history.' (Cannadine 1981: 189, cited by Wilkinson 1997: 157)

Religion and uncertainty

Inter-war spiritualism

Bourke asserts that shortly after the war in 1920, many families lost hope of ever being reunited with missing loved ones. The sense of shared, chronic grief prompted the war padre Railton to recognise a need to provide some sort of public funeral for communal catharsis (Bourke 1999: 236). Amid calls for more cremations, the coffin of an unknown warrior was interred in Westminster Abbey, representing all missing dead (Wilkinson 1997: 156). It was somewhere to commemorate and mourn the dead in the way that bereaved Victorians had visited cemetery memorials. Up to a million visitors in the first year visited the Unknown Warrior, marking the success of communal ritual mourning (Bourke 1999: 237). However, alongside the need to reconcile so many deaths, and providing particular comfort to the women bereaved of sons (Jupp and Gittings 1997: 269), post-war Spiritualism continued in popularity, rising to over 2000 Spiritualist societies (Jupp and Gittings 1997: 269). Cannadine suggests however, that Spiritualism served another purpose. Whereas memorials were permanent reminders of death, the Spiritualists offered the 'most persuasive case for the denial of death' (Cannadine 2011: 230) together with hope for reuniting with the dead (*ibid.*), as they were remembered.

Social problems

As the 1920s progressed, a death-obsessed Britain experienced a series of social problems. High unemployment and economic recession, in contrast to the economic prosperity before the war, (Bourke 1999: 233) led to severe hardship²⁴ and uncertainty, affecting the mood and religiosity of the nation. Despite some success from Pentecostalism (Brown 2006: 118) Berridge asserts that post-war 'secularism seeped into society, steadily spreading as both a style of monumental commemoration and a way of thinking' (Berridge 2002: 54). There were no organised communal Cenotaph prayers, and town memorials were mostly plain tablets of stone without crosses (*ibid.*). As economically depressed communities grew, Christian belief declined (Jalland 2010: 102). By 1922, the poorer working classes were increasingly attracted to Evangelicalism (Brown 2001: 41), emphasising strength through the Word of God.

Inter-war cremations

Jalland confirms the importance of the inter-war years for establishing cremation and asserts that while 'the most rapid growth for cremation took place after the Second World War ...important foundations were laid in the inter-war years' (Jalland 2010: 104). Crematoria numbers grew in England and Wales from twenty-one in 1930, to fifty-four in 1939 (Jalland 2010: 104) and by 1939, local authorities and poorer families had begun to accept cremation as economically better than burial, with cremations rising to almost four per cent of all funerals (Jupp and Gittings 1999: 265). Overall, 1930s Britain experienced 'a fourfold increase in cremation' (Jalland 2010: 104) and although support was still predominantly middle and upper class (Jalland *ibid.*), dead bodies could now be dispensed with swiftly, rather than decomposing in homes. With much mourning still widespread, Britain entered the next war, which was to have long-lasting effects on bereavement and mourning.

SECOND WORLD WAR 1939-1945

If the First World War had a cataclysmic impact on British attitudes to death, the Second World War also influenced the course of the modern way of death, but it did so in a different way. (Berridge 2002: 57)

²⁴ Brown comments on the plight of fishing communities suffering declining catches; the hardship in industrial cities (due to strike action) from a decline in post-war heavy manufacturing; and cotton production 'in adverse world trading' (Brown 2006: 117)

Unlike the First World War, the Second World War²⁵ was expected. Whilst the First World War altered the romance of war death, Second World War communities encountered the additional fear of civilian death from bombing. In London and industrial towns particularly, there was first-hand knowledge of civilian death and air-raid destruction and again, grieving was put aside to sustain morale. However, while Churchill's speeches demonstrated that Britain was expected to rise to a national identity of bravery and stoicism, civilians did not necessarily feel stoic (Jalland 2010: 122).

Civilians

Myth of the Blitz

Calder states that for years after the war, as far as 1961, a myth existed to ensure survival in the face of trauma. Calder (1991) argues that a myth persisted amongst the public that the war communities were heroic, good-humoured and willingly altruistic (Calder 1991, cited by Jalland 2010: 122) whereas in reality, it was a very different 'people's war' (Jalland 2010: 122). Jalland agrees, stating that whilst the 'stiff upper lip' of the 1930s continued to pervade society irrespective of class and gender, once the reality of death and grief emerged the devastation had to be minimised to conceal the horror and retain optimism (Jalland 2010: 124). Burnt bodies made fragmentary by the force of blasts were collected for burial, some too unrecognisable to be buried individually. Mass burials were of equal concern for London (Jalland 2010: 129) and Coventry (Jalland 2010: 124), both of which were badly bombed and suffered mass graves for incomplete bodies.

Although post-war consensual memory helped increase morale, mourners were expected to repress and internalise their grief. Church leaders perpetuated the myth of the Blitz and urged the bereaved of Coventry to 'try not dwell on their horrific loss' (Jalland 2010: 124). The full-scale of mass burial was again quashed by wartime censorship. Jalland argues that the 'myth of the Blitz played a significant role in the history of death and grief in twentieth-century England' (Jalland 2010: 123). Arguably, the need for emotional restraint during the world wars affected mourning in Britain with women particularly suffering from the enforced silence (Jalland 2010: 158).

²⁵ War began on 3rd September 1939.

Post-war mourning

Jalland summarises post-war changes in mourning: after the Great War, the emphasis was on remembrance; after the Second World War, the emphasis was on forgetting (Jalland 2010: 179). Equally, individual memorials in churches 'were discouraged as contrary to the war's communal spirit' (Wilkinson 1997: 161). Rather than erect new memorials, war-dead names were added to existing Great War monuments, and the change in attitude towards commemorating the dead nationally exemplified how quickly British attitudes to mourning had altered in less than thirty years. For some mourners, Christianity still offered religious consolation and was hoped to be 'holding the nation together' (Brown 2006: 164), however, Wolffe argues that although religion still contributed to 'a tightly-disciplined sense of national identity... by the 1940s [this] was in decay' (Wolffe 1994, cited by Brown 2006: 13). It is for good reason that social and religious influences are examined when attempting to quantify and explain changes in attitudes and values and with this in mind, I now turn to the effects on mourning of the post-war years, and secularisation.

1950s, 1960s

It is difficult to appreciate today how widespread and deep-rooted was the ignorance, silence, and embarrassment about grief in the 1950s and 1960s. (Jalland 2010: 235)

Beginning in the inter-war years and becoming more commonplace in 1950s Europe, there is evidence that in England emotions regarding death after the wars were more 'muted' (Jalland 2010: 183; Cannadine 1981: 230). It is therefore conceivable that an embarrassed silence about grief enveloped the rest of Britain, however, with over six hundred thousand widows under sixty years of age estimated to be living in England and Wales in 1951 (Jalland 2010: 199), prevailing ignorance was less understandable²⁶. Nonetheless, psychiatrists had not yet explored bereavement effects in other than clinical patients²⁷ (*ibid.*: 202) and many mourners had no outside help dealing with the implications of loss. At one time, the church would have provided a

²⁶ It was not until 1969 that Kübler-Ross wrote the landmark book *On Death and Dying*, outlining grief stages.

²⁷ Peter Marris's (1958) empirical study of widows was a landmark deviation from exploring the effects of grief on clinical patients and studying instead, ordinary people (*ibid* 202).

listening ear, however, an area arguably difficult to chart, but relevant to a historical trajectory of British culture and its effect on mourning, is that of secularisation.

Religion and secularisation

[T]he secularisation of the inter-war years started the reforms that impacted on the 1960s. (Haste (1992) and Machin (1998), cited by McLeod 2007: 220)

McLeod, in discussing the roots of secularised Britain, agrees with Haste(1992) and Machin(1998) and highlights how the 1950s and 1960s witnessed big changes in society despite many of the reforms having started earlier (McLeod 2007: 220). After the war, a new welfare state and social improvement were needed. Consequently, a Labour government sought to achieve a string of social reforms and to repeal or modify laws concerning amongst others, blasphemy, male homosexuality,²⁸ film and theatre censorship, capital punishment and abortion. It was only after 1950 that people stopped absorbing the religious identities previously generated for them and it was 'only when that discursive power waned that secularisation could take place' (Brown 2001: 175). In a changing society, institutionalised belief was usurped by private individual belief, no longer reliant on church attendance, church control or community. Brown asserts that in the 1960s, religion started to stop mattering (Brown 2001: 7) and other forces became important enough to seriously threaten Christianity, its affiliated values and the overall effect on bereavement.

By 1963, church attendance showed 'the steepest peacetime decline of the century' (Brown 2006: 215). The publishing of the controversial book *Honest to God* by Robinson, the Bishop of Woolwich, challenged previously established traditions and contributed to making 1963 a turning point in a cultural revolution (Brown 2006: 225). This preceded a legislative revolution during 1959-69 (McLeod 2007: 218) prompting an upheaval in morals on a scale unforeseen by the innovators, and counter-attacked by amongst others, Mary Whitehouse²⁹. Undoubtedly, traditional values were under attack (Marr 2009: 261). The beginning of a pop culture, influenced by groups like *The Beatles* (Brown 2006: 225), separated many teenagers' ideals from their parents' values. It was the main catalyst for changes in cultural attitudes, and a more dominant influence on society than either social class or gender (Marwick 1998, cited by McLeod

²⁸ In Scotland the law on homosexuality was not reformed at this time.

²⁹ Mrs. Whitehouse had strong Christian principles and sought to redress the balance with her 'Clean Up TV' campaign making her 'a major national figure who spoke for millions' (Marr 2009: 261).

2007: 14). The relaxing of older social customs and influences affected traditional family life. Moreover women, many of whom had worked during the war, sought employment outside of the home (Marr 2009: 266) threatening conventional family expectations.

The mainstream church perception of women as conventional home makers (Brown 2001: 179) was severely challenged by cultural traditionalism as the number of mothers in paid employment gradually rose. Of those who were thirty years old in the 1930s, thirty per cent were now working, compared with thirty- four per cent of women who were thirty in the 1950s³⁰. Whereas women had largely been responsible for 'passing on religious beliefs and practices to a younger generation' (McLeod 2007: 171, citing Brown 2001), their interest in ensuring families attended church competed with changes in consciousness generated by feminism and personal ambitions. With less free time, women's focus on church reduced as the Women's Liberation Movement increased (McLeod 2007: 175). Although the actual feminist movement was in its infancy, the earlier suffragette movement had already encouraged reformation of women's identities, affecting family life and cultural values such as 'churching'³¹ mothers (McLeod 2007: 109).

Gorer's informative study (1965) deduced that death had not become *forgotten* post-war, as asserted by Jalland above, but that within Britain it had become 'tabooed, suppressed and unmentionable – almost obscene' (Dollimore 2005: 120). As discussed, a deficit of death talk was attributed to a loss of Christian belief, church attendance and prayer, confirming a connection between the 'shift in taboos and the shift in religious beliefs' (Gorer [1965] 1977: 196). There was a prudery relating to death-talk, defined by Gorer as an 'aspect of human experience ...treated as inherently shameful or abhorrent...never discussed ...openly' (Gorer 1977: 194). Gorer's 1960s research revealed that 'traditionally, religion is held to offer consolations for the grief of bereavement' and he concluded that even with secularisation '[i]t is very rare indeed in Britain for a dead body to be disposed of without benefit of clergy' (Gorer 1977: 19). Out of a sample of three hundred and fifty-nine funerals, only two were non-denominational (Gorer: *ibid.*).

³⁰ Source: *British Household Panel Survey*, Institute for Social and Economic Research, Office National Statistics, fig. 4:1. (Matheson and Summerfield (Eds.) *Social Trends* 2000: 71

³¹ A ritual blessing at church for new (married) mothers.

AFTER THE 1960s

Approaches to death

However, the continuation of church funerals had no influence on reduced mourning rituals and communities no longer received guidance in how to support bereaved neighbours, especially male ones. Gorer states that 'nowhere is the absence of an accepted social ritual more noticeable than in the first contacts between a mourner and his neighbours, acquaintances or workmates after a bereavement' (Gorer 1977: 57). It remained obvious that there was no specific outlet for male bereavement, and that this problem was possibly hampered by the emotional restraint practised by many men (Walter 1994, cited by Jalland 2010: 253). This contrasted with female tendency for emotional expressiveness (Jalland: *ibid.*), which found a channel of expression through an increase in the 1970s, middle-class female work force (Jupp and Gittings 1999: 275). Small communities of empathetic listeners provided a moving away from the 'behind-closed-doors' Victorian female grieving and post-wars lonely, stifled grief. It was, however, still fundamentally more private than public. The 1970s social changes and the expansion of Cruse³² the bereavement counselling movement, also showed that emotions could be worked through without church support.

Death denial and invisible death

Becker (1973) asserts that by this time, Britain had moved towards a 'denial of death'. Although the fields of social sciences and medicine were exploring the effects on the bereaved of death and dying (Marris 1958; Bowlby 1961; Glaser and Strauss 1965; 1968; Kubler-Ross 1969; and Becker 1973), such matters were gender stereotypical and not discussed commonly. Research contrasting grieving in widowers with that of widows was unavailable, resulting in a 'psychiatrised' and feminised model of bereavement (Field, Hockey and Small 1997: 96) inspired by psychiatrists such as Parkes (1972) (Field, Hockey and Small 1997: 97). Culturally, little progress was made for openly discussing grief with neighbours, which contributed to the climate of 'embarrassed denial,' particularly for men. Kellehear (1984) supports Gorer's earlier premise on the absence of social ritual for bereavement, clarifying that 'for most social actors the fear of offending is situationally greater than the fear of mentioning death or expressing grief' (Kellehear 1984: 720).

By 1981, changed attitudes to death prompted Ariès' assertion that death had become 'invisible' (Ariès 1981) with Britain assuming the existence of a 'taboo of death'. This

³² Cruse was founded in 1959 and derives its name from the biblical Old Testament story of the widow of Zarephath's cruse (jar) of oil that never runs out (1 Kings 17: 8-24).

social construct is still popularly perceived to exist. An alternative view, however, is that far from 'denial of death' and 'invisible death' there has been a more recent increase in death awareness, albeit for tragic 'bad deaths'. For this reason 'media death', its effect on mourning, and the posited 'revival of death' (Walter 1994) is now discussed.

Reasons for taboo

Overcrowding

Since war atrocities had recently preceded his research, Gorer was probably justified in his theory that 'natural death and physical decomposition' had become 'too horrible to contemplate or to discuss' (Gorer 1977: 196). However, further reticence in people's willingness to discuss death could have come from the domestic problems with caring for dying relatives at home. A significant report by the Marie Curie Foundation (1952) investigating over seven thousand cases of cancer patients dying at home, found many suffering in conditions of 'gross overcrowding' (Marie Curie Foundation cited by Jalland 2010: 186). The situation is confirmed by Parkes (Parkes 1972, cited by Jalland 2010: 185) and Hinton (1967), who also catalogues different generations sharing bedrooms with dying relatives amidst poor sanitation (Hinton 1967: 152). Despite planned inter-war house building (Dewey 1997: 175) there was widespread sharing of bathrooms in most working class areas (Hinton 1967: 152)³³ and an estimated shortage of 479,000 houses in England and Wales by 1931 (Dewey 1997: 172). All factors could have contributed to families being so close to the dying that they developed distaste for discussing death.

Death-discussing culture

However, despite more recent suggestion that a taboo of death is culturally established,³⁴ as we approach the present time there are growing contradictions that suggest it might not be so entrenched. Notwithstanding Gorer's study and Ariès' later assertion that for ordinary people, society had 'banished death' (Ariès 1981: 560), Michael Simpson ([1979]: 1987) in his bibliography of thanatology and terminal care, disagrees that death is taboo. He claims with irony that 'death is a badly kept secret', and quips that it is so unmentionable and taboo 'that there are over 750 books now in print asserting that we are ignoring the subject' (Simpson [1979]: v11). By 1987, Simpson had listed over 1700 titles relating to death, which he refers to as proof of a

³³ The Overcrowding Survey for England and Wales (1936) records overcrowding on council estates (Cited by Dewey 1997: 177).

³⁴ 'The whole idea of planning and talking about death remains something of a taboo in the UK' Abi Berger of the British Medical Council, stated that the 'whole idea of planning and talking about death remains something of a taboo in the UK'. (April 2006).

death-discussing culture. However, this is too simplistic, and providing books about death does not characterise a death-discussing culture amongst the lay public. Dollimore further argues that to even contrast death as either taboo, or no longer taboo, lacks complexity (Dollimore 1998: 26). Noys (2005) expands this point and suggests that the argument for whether or not death is taboo in modern culture disregards the composite ways in which death is simultaneously invisible and 'highly visible' (Noys 2005: 3).

It is likely that as improving health care in Britain throughout the twentieth century reduced natural death rates, particularly among younger people (Gorer 1977: 197), so death in the community became less visible (Noys 2005: 3) and less discussed. However, further discrepancy in the visibility of death emanates from categorising death as 'good' or 'bad'. Bad deaths are characteristically the ones most heard about; most visible. They are not 'natural deaths', but rather unplanned, and possibly without pain-relief. Bradbury defines them as happening 'at the wrong place at the wrong time' (Bradbury 2000, in Dickenson, Johnson and Katz 2000: 59).

Visible death and the media effect

Furthermore, visible deaths, including road-traffic accidents, suicides or infant deaths, often attract media attention. The deaths from the Hillsborough football stadium disaster (1989) and the deaths of Princess Diana (1997) and Baby 'P'³⁵ (2008), still make headline news and are memorable examples of 'bad' or untimely deaths. Far from making death taboo, the public is drawn to discussing such deaths with shared intrigue and possibly shared mourning.

A smaller proportion of the population of contemporary Western societies dies in any one day than in any society at any time in the history of humankind, yet through the news media death is now extremely visible. (Walter *et al* 2000: 17)

Although not evidence of a death-discussing culture, this reveals one in which visible death is the death of 'strangers'³⁶. These deaths collectively remind the living of the tenuousness of life, and affirm what Canetti (1973) calls a 'survival mode' in which

³⁵ Baby 'P' was abused and died from extensive injuries inflicted on him by his parents in London in 2007.

³⁶ There were estimated to be over a million bouquets left at the palace and over 136 000 mourners wanting to sign the condolences book.

<http://www.hrp.org.uk/KensingtonPalace/stories/Palacepeople/princessdiana/diana> (accessed 17.9.13)

other people's deaths makes us feel successful that we are alive (Canetti 1973, cited by Field, Hockey and Small 1997: 215). Undoubtedly, British culture³⁷ discusses such highly visible deaths with less fear of offending others.

Medicalisation

Alongside this media view of 'bad death', medicalisation creates further 'radical changes in the visibility of death' (Jalland 1996, cited by Jupp and Gittings 1999: 278). Whereas the Victorians synonymised 'good death' with Christian religious faith, a belief challenged by some recent cultural values; Cannadine suggests that more contemporary diminished belief in 'the resurrection of the body and the life everlasting' (Cannadine 2011: 238) has made the contemplation of death correspondingly terrifying and lonely, possibly encouraging taboo. A recent report by Age UK (Payne 2015)³⁸ found that the elderly consider 'good quality death' to be pain free, with dignity, in sleep and without knowledge of imminent death (Payne 2015). Many elderly people, irrespective of religious faith, now clearly view medicalisation as synonymous with 'good death'³⁹. Cannadine confirms that in Britain, the opportunity to die 'as painlessly as possible with the minimum of fuss' is now widespread (Cannadine 1981, in Whaley 2011: 239), however, whereas a home death might be preferred, once death is imminent the dying are often transferred from their community (Hockey, Katz and Small 2008: 193), into hospitals (Kellehear 1990, cited by Hockey, Katz and Small 2008: 190) where the carers administering palliative drugs are (necessarily) medical staff.

Invisible death

Thorpe suggests that by isolating the dying, and segregating them into hospital where they are invisible to families, accepting mortality can be hindered (Thorpe 1993, cited by Zimmerman and Rodin 2004: 125). However, notwithstanding exceptions, families are less expected to care for dying relatives (and arguably less available to do so due to paid work commitments) especially the old, the terminally ill and Alzheimer's sufferers (Jalland 1996, cited by Jupp and Gittings 1999: 278); reaffirming hidden death and inducing a 'stigmatization of death' (Hockey, Katz and Small 2001: 190). Additionally, whereas corpses would have been in open coffins for viewing, the infirm who die at home are now excluded 'as rapidly as possible to be buried or cremated'

³⁷ Other religions in Britain notwithstanding.

³⁸ Age UK (2015) [online] Available at <http://www.ageuk.org.uk/professional-resources-home/knowledge-hub-evidence-statistics/debates-on-ageing/dying-at-home/> (accessed 5.6.15)

³⁹ Although other world religions may differ from this definition, attitudes towards Christian deaths form the argument here.

(Noys 2005: 25). The removal of bodies psychologically distances mourners from death; a situation Worden suggests can cause problems in grief resolution (Worden 1991, cited by Hockey, Katz and Small 2001: 194). Whilst it could be argued that this change merely echoes previous generations' sanitation concerns, the dying are nonetheless effectively hidden and ultimately 'invisible'.

'The Order of the Good Death'

It is in this context that the Los Angeles-based mortician, Doughty, has formed *The Order of the Good Death*. Doughty asserts that 'engaging with the corpse is good for us, mentally and emotionally' and she states that the corpse being removed from our culture is to 'the detriment of our relationship with death' (Walker: May 2013)⁴⁰. In Western society, what is considered 'normal' and 'acceptable,' informs where and how we die and are disposed of. The prevailing expectation in Britain⁴¹ is that the dead will be taken to an undertaker's morgue until they are placed in a coffin, a situation exemplifying death-invisibility, strongly disapproved of by Doughty (Doughty, *Order of the Good Death* [online]).⁴²

...we take those expensive caskets and bury them with a concrete or metal burial vault surrounding them, another layer of protection. Then it's only a matter of a gravestone, like a cherry atop the death denial sundae. (Doughty, *Order of the Good Death*).⁴³

For both Doughty(2011) and Gorer(1977), what matters most is not that the corpse is engaged with, but *who* engages with it, and where. Doughty and Gorer consider there to be cultural death-denial (Gorer 1977: 196) in using a funeral director unknown to the deceased. *The Order of the Good Death (The Order)* was formed in 2011 to 'prepare a death-phobic culture for their inevitable mortality'⁴⁴. *The Order* shows on its web pages how to care for the dead at home and how to embrace and celebrate death rather than fear and hide it. However, not all deaths are so manageable for relatives, and whereas Gorer congregates all deaths, irrespective of type, stating that 'the art of the embalmers is an act of complete denial' (Gorer 1977: 196), Bradbury(2000) differentiates between

⁴⁰ *The Independent*, (25.5.2013). [online] Available at <http://www.orderofthegooddeath.com/independent-uk#.VW3KGEsfods> (accessed 2.6.15)

⁴¹ Notwithstanding religious cultural differences.

⁴² Doughty [online] available at <http://www.orderofthegooddeath.com/naturalburial> (accessed 4.9.13)

⁴³ *Ibid.*

⁴⁴ *Mission Statement of the Order of the Good Death* [online] Available at <http://www.orderofthegooddeath.com/category/mission> (accessed 3.9.13)

denial of death itself and denial of 'bad death' with further discrimination between damaged and undamaged corpses. Bradbury suggests that funeral directors try to hide from families evidence of violent, or 'bad deaths' or mutilation (Bradbury 2000, in Dickenson, Johnson and Katz 2000: 62).

This response could be acknowledged as caring and understandable, rather than denial. Moreover, it is perhaps as naive to accept Gorer's blanket approach, aggregating the treatment of all deaths as evidence of 'death-denial', as it is to assume with Doughty and Gorer, that strangers concealing a corpse within a coffin makes the death feel less 'real' to the bereaved than personally laying them out. However, dealings with the dead are now mostly decided, and managed by, experts, and it is evidence of the endurance of the *professionalisation* of death that began in the nineteenth century, and emphasises 'who has possession over the body' (Walter 1994, cited by Hockey, Katz and Small 2001: 194)

Death impact

Infant death

The differences in impact between child death and elderly death, and the likelihood that many old people will be institutionalised to die, can be premised not only on the scenario of 'out of sight, out of mind' but also on the effectiveness of reduced social importance. Blauner (1966) notes that death impact on society is reduced if the social importance of those dying is equally reduced (Blauner 1966, cited by Walter 1994: 50). Thus with relatively few infants now dying⁴⁵; infant death has greater societal impact than elderly death, and is more shocking from its untimeliness and the loss of future hope. For the UK as a whole in 2013, declining infant mortality figures recently recorded only four infant deaths in every one thousand live births, and lower still at 3.8 deaths per thousand, in England and Wales^{46 47}. Conversely, elderly death is less culturally significant, both because it is expected, and because those most likely to die are perceived as having the least to offer, making them less economically valuable. Attitudes towards the elderly can also be aligned with cultural unease with ageing. Old

⁴⁵ ONS (28 February 2014) *Infant Mortality Rate in England and Wales Hits Record Low*. [online] Available at <http://www.ons.gov.uk/ons/rel/vsob1/child-mortality-statistics--childhood--infant-and-perinatal/2012/sty-imr.html> (accessed 4.6.15).

⁴⁶ ONS (10 March 2015) *Childhood, Infant and Perinatal Mortality in England and Wales 2013*. [online] Available at <http://www.ons.gov.uk/ons/rel/vsob1/child-mortality-statistics--childhood--infant-and-perinatal/2013/stb-child-mortality-stats-2013.html> (accessed 4.10.15)

⁴⁷ Mortality Rate Infant (for every 1000 live births before one year of age) [online] Available at <http://data.worldbank.org/indicator/SP.DYN.IMRT.IN>(accessed 4.10.15).

people can remind us of death and can therefore become marginalised by the young, although this is not a concept that young children necessarily recognise.⁴⁸

Ageing and death

Whilst camouflaging bad deaths can be seen as disengagement with death, Kearl suggests that 'the same denial system ... allows the cosmetics industry to flourish: by dying grey hair and having face-lifts we can hide our ageing, hence our deaths' (Kearl 1989: 125), or at least, our progress towards death. Recent research at the Centre for Appearance (CAR)⁴⁹ states that many elderly women are anxious about body image (Wiseman 2012)⁵⁰. Aspects of death-denial can therefore be linked to ageism and in Britain, the low cultural value given to the elderly, particularly the elderly infirm (Mulkey and Ernst 1991, cited by Walter 1994: 51). For many old people, fear of dying can be paralleled with the 'living death' of being infirm and elderly. Old-age can represent 'fear of being as dependent as a young child while not being loved as a child is loved but merely being kept alive against one's will' (Cowley 1980, cited by Kearl 1989: 125). Arguably, many lonely old people endure social-death long before physical death occurs (Mulkey and Ernst 1991, cited by Walter 1994: 51).

However, whereas fear of death and institutionalising the dying can cause death denial in the remainder of society, Kellehear argues conversely that avoiding any talk of death is more from 'fear of the dying process' (Kellehear 1984: 714) and that to catalogue all avoidance of death talk as 'death denial' ignores those who fear not death, but how they will die (Kellehear 1984: 714). Dying alone and unloved is possibly more worrying for the elderly that dying hidden in hospital. An opposing view on 'hidden deaths' comes from Walter (1994) who questions the supposed death taboo in the Western world and suggests a recent choice-driven 'revival of death' in Western societies (Walter 1990, and especially ch.20 in Walter 1994: 175) whereby death is discussed openly. It is to some elements of Walter's revivalist theory that I now turn.

Revival of death

Walter suggests that death-talk with coroners and hospitals encourages the privacy, or hiddenness, of personal death and bereavement experiences, and that the 'revival' springs from the need to repair the incompatibility (Walter 1994: 24) by making the experience more open. Walter further divides the revival into two strands: late-modern,

⁴⁸ This in no way suggests that other cultures in Britain comply with this practice.

⁴⁹ CAR is at the University of the West of England, Bristol, UK.

⁵⁰ Wiseman *The Observer* (10.6.2012)

and post-modern. *Late-modern* medical and psychological experts seek 'to replace medical control over death with a more psychological approach' (Árnason and Hafsteinsson (2003: 45). Key influences include Kübler-Ross (1969), Bowlby (1980) and Murray-Parkes (1972) all of whom helped either terminally ill or bereaved people to move through prescribed grief-stages to resolution. The contrasting *post-modern* strand celebrates free expression, and is driven by 'ordinary people, the dying and the grieving themselves' (Árnason and Hafsteinsson (2003: 46). Expert-led decisions and reliance on mourning *stages* and *processes* are rejected to allow individualism in death and bereavement, demanding that people be 'allowed to die and grieve in their own ways and express their emotions as they see fit' (*ibid.*). However, there is cause to suggest that it is a restricted freedom in so much as certain 'embarrassing' behaviours, such as showing excessive grief, might not be tolerated by crematoria staff or welcomed by mourners⁵¹.

Whereas *The Order of the Good Death* appears to correspond with individualism, likewise, in Britain, the *Natural Death Centre* (NDC)⁵² publishes a list of 'funeral myths' detailing how easy it is to personalise funerals⁵³. A help-line assists mourners to direct an individual funeral without 'professionals'⁵⁴. Similarly, whilst not advocating any type of funeral, *The Good Funeral Guide* sets out how 'DIY'⁵⁵ funerals can be achieved, claiming: 'Some will express amazement that you want to do it all yourself, some may try to dissuade you, some will disapprove and some will try to stand in your way' (Cowling 2015).⁵⁶ Nonetheless, whilst corpses are rarely now retained for viewing in the home by British families⁵⁷, it is debatable whether anyone other than crematoria staff would choose to personally cremate bodies. Moreover, despite fixed funeral costs rising by sixty-seven per cent since 2007 (National Association of Funeral Directors, NAFD)⁵⁸ there is still an expectation that funerals will be organised by professionals. Hockey argues that 'we cannot ignore evidence that [people] appreciate expert help'

⁵¹ This might not be the case in certain cultures within Britain.

⁵² Established 1991

⁵³ <http://www.naturaldeath.org.uk/index.php?page=trying-to-make-sense-of-grief> (accessed 5.9.13)

⁵⁴ Professionals are trustees.

⁵⁵ Do it yourself.

⁵⁶ *The Good Funeral Guide*. [online] Available at <http://www.goodfuneralguide.co.uk/find-a-funeral-director/do-it-all-yourself/> (accessed 5.6.15)

⁵⁷ Notwithstanding religions other than Christian.

⁵⁸ Average increase of costs is now 67 per cent. (NAFD) [online] Available at <http://www.nafd.org.uk/funeral-profession/news/news-archive/funeral-directors-contain-prices-and-deliver-added-value.aspx> (accessed 5.6.15)

(Hockey, Katz and Small 2008: 193). Perhaps individualism stretches to deciding the need for professional intervention, and personally choosing funeral music.

CHAPTER CONCLUSION

The higher rates of death and the higher likelihood of home deaths in the nineteenth century allowed a greater awareness of death amongst children. Victorian widows have been shown as more accepting and less angry at their loss, despite being as overwhelmed by grief as any widow today. Victorian certainty that a 'good death' was only possible for those dying at peace with the Christian God bears little relation to a twenty-first century medicalised 'good death'. Furthermore, on the whole, Christian religious practice no longer defines an unprepared-for death as a 'bad death'. It is defined mostly by cause of death and the bodily appearance of the deceased. A gradual lack of prescribed mourning ritual seems to have affected communal recognition of bereavement⁵⁹, and now allows little opportunity for the bereaved to receive shared sympathy and understanding. Although Victorian rituals have been criticised for their unhealthy and socially segregating effects on women, nevertheless, they acknowledged the time needed to heal grief and provided community support. The effects of world wars and stifled mourning contributed to huge changes in the ability to accept death as God's will. Furthermore, the effects of secularisation amongst the white 'British-heritage' population have contributed to reduced church attendance, which could have partly eradicated the support once available and altered responses to death.

Conversely, Arnason and Hafsteinsson argue that the 'revival of death' has simultaneously allowed people to die and grieve in their own way, but removed their support network. However, the possibility that a revival of death through individualism is challenging the perceived taboo of death, could be considered in the light of recent Church of England Synod discussions to allow funerals for suicide cases and for them to be openly buried in consecrated ground⁶⁰. Once considered a 'bad death' (Bradbury 2000) the decision promotes the chance of success for the recently failed 'Assisted Dying' bill. This bill is supported by pressure groups such as *Dignity in Dying*⁶¹ but opposed by many Church Peers and the British Medical Association (BMA) who argue

⁵⁹ Except in ethnic minority groups.

⁶⁰ Gledhill (12 February 2015) *Christian Today* [online] Available at <http://www.christiantoday.com/article/suicides.can.receive.anglican.funerals.says.general.synod/47997.htm> (accessed 11.6.15)

⁶¹ BBC News, (7.5.13) <http://www.bbc.co.uk/news/uk-politics-22432308> (accessed 22.10.13)

that palliative care already provides a dignified ending⁶². They might agree with Curl, who maintains that the invisibility of death has made death insignificant and that death denial has cheapened life (Curl 2004: 193). Who has control over a body, when dying or dead, remains controversial. The following statement is less so:

The right to 'a good death' should be fundamental. We believe that social attitudes are part of the problem, and that a willingness to be open about death will facilitate better communication and ultimately better provision. (Department of Health, Section 6, paragraph 135, July 2004)⁶³

To understand better the reasons for a lack of openness and to explore the possible effects of bereavement on both children and adults, I will now discuss some of the psychological theories that have informed cultural attitudes to discussing death and loss.

⁶² <http://bma.org.uk/practical-support-at-work/ethics/bma-policy-assisted-dying> (accessed 21.10.13)

⁶³ <http://www.publications.parliament.uk/pa/cm200304/cmselect/cmhealth/454/454.pdf> (accessed 24.10.13)

LITERATURE REVIEW Part Two

Chapter 2

ATTACHMENT AND LOSS

CHAPTER INTRODUCTION

The above trajectory of death and dying explores the possibility that historical incidents have affected cultural perception of death and mourning and that a 'denial of death' now exists in Britain. The present lack of prescribed mourning rituals, and the deficit of community support for helping the bereaved adapt and move on, can be seen as evidence for that denial. Insufficient external support for bereavement has also been discussed above in relation to Gorer's [1965] (1977) study of condolences, and the effects on Britain of post-war changes, secularisation and medicalisation.

Thanatologists, historians and psychologists including Ariès (1981), Worden (1986) and Parkes (2006) have added their voices to discussing the problems thought to be associated with unsupported grief. However, Lendrum and Syme (1992), with reference to Parkes (2006), emphasise internal resources are as necessary for grief resolution as external support. They state that:

when a person with either insufficient external support and/ or internal resources suffers a major loss through death or separation...the grieving process may well be incomplete or even blocked. (Lendrum and Syme (1992: 38)

The theoretical and empirical research exploring the importance of initial attachments, and the contribution of secure attachments to healthy internal support, adds to that body of research and is examined in this chapter. The significant contribution made by psychodynamic research to the literature of attachment and loss is discussed with reference to Freud, Klein, Bowlby and Winnicott. It is further suggested that cultural death-denial, particularly apparent through embarrassed denial, excludes many children from participating in family death rituals and perpetuates the culture⁶⁴ of unease with death. However, as schools are required to cope with children troubled by many losses, the effect on children of losses other than death, and the possible consequences of mis-management of those children necessitates some mention. Included below is a section exploring the effects on children of parental divorce and

⁶⁴ British Christian and secular culture

imprisonment. Holland defines loss as 'any change that impacts so greatly as to overwhelm us and be problematic' (Holland 2001: 19) and whilst the practical problems from divorce and imprisonment can seem to mainly affect adults, the loss of a home, income and life-style can generate significant losses for children. The cumulative effects of dramatic change, which can result from both these situations, have the potential to impact greatly on children's lives. This suggestion will be explored more fully in this chapter. Furthermore, although schools are relatively used to children of divorce, they are not necessarily familiar with the effects of loss on prisoners' children. This is possibly due to the stigma attached to imprisonment, which makes it a subject parents do not discuss.

The discussion will add questions to those arising from chapter one, which are addressed in the chapter findings to follow. To enable a better understanding of the impact of loss on adults and children, I begin by exploring the research on attachment theory and its influence on understanding the effects of loss. The significance of the direct correlation between secure infant attachment and how those children, when adults, manage stressful situations such as bereavement (Siegel 1999; Simos 1979; Black and Young 1995) will be explored with reference to the work of Freud, Klein and Bowlby, and the slightly more recent and influential work of Winnicott.

ATTACHMENT

It is difficult to comprehend the impact of separation on any child without knowledge of child development and attachment theory. (Aldgate 1988, cited by Kroll 1998)

This inter-disciplinary thesis upholds Aldgate's statement, however, the literature reviewed reveals that empirical psychoanalysts have mainly examined the maternal relationship with babies (Spitz 1945; 1965, in Fonagy 2001: 55) or a series of mother figures (Schaffer and Emerson 1964). The attachment role of fathers has only recently been studied in detail (Main and Weston 1981; Fox, Kimmerly and Schafer 1991⁶⁵) and therefore, notwithstanding the value of the paternal role, the main discussion will focus on maternal attachments, beginning with the work of Freud.

⁶⁵ Fox, Kimmerly and Schafer (1991) concluded that a child with a secure attachment to the mother was more likely to have a secure attachment with the father, although 31 per cent of children had a secure attachment with only one parent, the potential for a secure attachment with both emanates from one already secure attachment (Daniel and Taylor 2001: 77).

Key thinkers

Freud

Although Freud's work was theoretical and not empirical, nonetheless, his work was extremely influential and opened up study and speculation about the workings of the mind. Silverman asserts that many contemporary psychological theories are based on the work of Freud (Freud 1961, cited by Silverman 2000: 18) and were founded on the baby's need for food-gratification. They influenced psychologists to agree the importance to the infant of the mother (Klein 1959; Bowlby 1979; McDougall 1989). Freud recognised the maternal bond as 'unique, without parallel, established unalterably for a whole lifetime as the first and strongest love-object and as the prototype of all later love relations' (Freud 1938: 188). Freud stresses that without secure, internal attachment with the mother, any childhood grief can potentially continue into adulthood, causing unresolved psychiatric problems (Fonagy 2001: 16). Freud also initially related successful grief-work from mourning to the ability to emotionally detach oneself from the deceased⁶⁶ in order to form new attachments (Silverman and Klass 1996, cited by Silverman 2000: 18) by re-investing that emotional energy in another person (Strada 2013: 16) .

However, Freud realised from his own later bereavements that despite 'normal' life recurring, such detachment was not necessarily possible (Silverman and Klass 1996, cited by Silverman 2000: 18). Significant to later theories on grief-work was Freud's ground-breaking essay *On Mourning and Melancholia* (1917)⁶⁷ written during the First World War, which details the painful process of withdrawing emotional attachment from the loved object. Based on Freudian ideas, but diverging from them, Klein formed the theory of Object-Relations, which influenced later theories of attachment.

Klein

Whilst Klein (1940) agrees that interpersonal attachment between a baby and its parent, in which a secure attachment is formed, is essential to resolving future bereavements, Klein's reasons for attachment differ from Freud's original premise. Although for Klein, the security of attachment remains crucial to psychiatric stability and the management of future loss, Klein lays greater emphasis on the child's dependency on the object of the breast. This represents not only food, but also comfort and social interaction, coupled with both good and bad experiences (Likierman 2002: 55). Having successfully internalised the mother through its needs being met, the infant maternal relationship

⁶⁶ Also known as breaking of affectional bonds (Archer 1999: 251).

⁶⁷ Although begun in 1915, the work was not published until 1917.

becomes healthy and secure. Klein refines the process of secure attachment further by exploring the baby's ability to separate the breast itself from the whole mother ⁶⁸ (Klein 1940, cited by Mitchell 1986: 116), and the separation of the 'good' mother from the 'bad' mother. Thus, the 'good' mother is not only available to feed from (good breast) but also offers comfort, and the 'bad' mother' (bad breast) is momentarily lost to the infant even if the whole mother remains (Klein 1940, cited by Mitchell 1986: 165). This is significant for discussing the impact of temporary loss on children.

Thus, Klein asserts that it is only when the baby is able to realise that the mother holds both good *and* bad experiences and is a separate being from itself, that it reaches the crucial step of being able to internalise the 'good' mother and love the mother as a whole, separate person (Klein 1940, cited by Mitchell 1986: 165). From gradually experiencing what is real and unreal, an infant eventually detaches itself from the lost 'object' and comes to terms with its loss (Archer 2001: 16; Klein 1940, cited by Mitchell 1986: 147). To achieve independence, a baby must form a separate existence from the mother. Secure attachment is vital to achieving this, since it enables the baby to feel real love, and experience real grief from loss, so providing the resource of inner strength. The significance of attachment research for adults managing bereaved children, comes from the realisation that even very young children form strong attachments, and mourn the loss of the attachment figure (Klein 1940, cited by Mitchell 1986: 165). Klein realised that the mourning of young children could be greatly helped if the child was with people he (*sic*) loved who were able to reduce any distress, and so restore inner-world harmony (Klein 1940, cited by Mitchell 1986: 165).

Bowlby

Mothers

Whilst later work on attachment theory emanates from the huge archive of research from Freud and Klein, Bowlby sought to find an alternative, theoretical model for attachment, within the school of psychoanalysis. Bowlby's research of the infant-mother relationship, led him to write his ground-breaking work on the making and breaking of emotional bonds (Archer 2001: 47). Influenced by Darwin's work on

⁶⁸ There are two main, contrasting views relating to object-relations; the romantic view, which sees humans as intrinsically good and the baby as realising primary love and the Classic view, which is more pessimistic and sees love as developmental and humans as flawed beings, trying to become better (Fonagy 2001: 82).

ethology,⁶⁹ and Lorenz's work on imprinting,⁷⁰ Bowlby's work on maternal bonds stemmed from a new hypothesis. Incorporating a psychoanalytic model, but drawing more ideas from developmental psychology, Bowlby found shortcomings with object-relations theory and its reliance on food gratification. He adopted a more biological approach to determining how attachments are formed in the first six months of life. Initially, Bowlby worked alongside two colleagues, Klein and Isaacs, in a study examining World War Two evacuees (Shemmings and Shemmings 2011: 18). Bowlby *et al* discovered that those children from a secure base, whose needs were understood and met by their carer, coped much better with the separation from their parents than those children who were not securely attached and whose needs had not been met (Shemmings and Shemmings 2011: 18).

Bowlby's approach was influenced by Klein, whom he praised for making a connection between childhood loss and mourning (Bowlby 1980: 36), but whom he criticised for connecting the 'loss' of the mother only to 'feeding and weaning' (Bowlby [1989] 2006: 77). Bowlby's contrasting findings suggest that the infant's goal is to achieve security. Consequently, Bowlby defined attachment behaviour as 'any form of behaviour that results in a person maintaining proximity to some other clearly identified individual who is conceived as better able to cope with the world' (Bowlby 1988: 26). Bowlby's 'monotropy' theory suggests that the forming of one special attachment with a primary caregiver to ensure survival, views the mother as qualitatively different to any subsequent attachment (Bowlby 1958 [1969] 1982, cited by Cassidy 2002: 338). Thus, a mother responding to distressed cries is more likely to form a secure attachment with the child than a mother providing food without security or comfort in the face of perceived danger. The secure attachment provides an inner working model for managing all future events and the security of all future attachments (Fonagy 2001: 8). Conversely, an insecure attachment could arise in a child who cries, smiles or crawls towards the mother and is ignored (*ibid.*) possibly adversely affecting all future attachments.

Other attachments

Bowlby perceives the loss of good mothering as the worst loss (Fonagy 2001: 50). Realising that children of eighteen months, separated from a parent, show grief

⁶⁹ Ethology is the study of the behaviour of animals in their natural habitat and human ethology is the study of human behaviour, especially aggressive and submissive behaviour in social contexts.

⁷⁰ Lorenz discovered that young animals would follow an attachment figure even when food is not being offered.

reactions similar to those expressed for bereavement, Bowlby was able to clarify that such young children can mourn (Bowlby 1958, cited by Fonagy 2001: 50). Furthermore, from his own observations and drawing on research, including Furman's work, Bowlby concludes that children as young as six months old can mourn loss (Christ 2000: 12, citing Bowlby 1980). However Schaffer and Emerson's study of Scottish infants (1964) found that young children, particularly after eighteen months of age, became similarly attached to adults who were not the main carers (Schaffer and Emerson 1964, cited by Rutter 1987: 271). Additionally, Heinecke and Westheimer (1965) showed that children can form strong bonds with many people (Heinecke and Westheimer 1965, cited by Rutter 1987: 271). Moreover, in subsequent trials, children experienced equal distress whether the mother left them, or their sibling (Heinecke and Westheimer 1965, cited by Rutter 1987: 271) or the father (Lamb 1977, cited by Rutter 1987: 271).

Whilst there is clearly support for assuming the importance of the mother above all other attachments, researchers investigating secure attachments in other cultures expose the shortcomings of perceiving only the natural mother as a potential main attachment figure. Parkes, Laungani and Young (1997) looked at how the bond formed by children raised by several mother figures was from 'a matter of behaviour not blood relationship' (Parkes *et al* 1997: 239). Deaths from close friends, siblings and teachers can significantly affect children (Young and Papadatou 1998: 197). However, notwithstanding that influential emotional bonds form with different attachment figures, studies still show a hierarchical preference for one particular adult over others (Ainsworth 1967; Schaffer and Emerson 1964, cited by Rutter 1987: 271). Donald Winnicott, also an object-relationist, explored attachment theory more recently.

Winnicott

Good-enough mothers

The existence of trust between baby and parent, or parent-figure (Winnicott 1985: 56), centrally underlies Winnicott's theory. His middle ground on attachment is less food-driven than Freud and less reliant on 'good-mothering' than Klein or Bowlby. Conversely, Winnicott (1985) suggests that for a child to form a healthy secure attachment, a mother need not be perfect, or even a 'good' mother. To provide the security for an infant to become autonomous she only needs to be 'good enough' (Winnicott 1985: 163). Furthermore, 'good enough' mothering is sufficient for a bereaved child to relinquish the living maternal bond and form a revised, enduring bond with the dead (Shapiro 1994: 41). Winnicott agrees with Klein however, that the baby's

progression towards independence relies on the baby's use of its mental faculties to regard the mother not as one with itself, ruled by omnipotence, but as a separate being (Winnicott 1985: 95). Winnicott 1985 contributes greatly to attachment theory from his emphasis on bonding through play. The facial and noise interaction between mother and baby strengthens security of the baby-parent relationship, whereby the mother mirrors the baby's emotions (Winnicott 1985: 55). This has important implications for babies of mothers who are post-natally depressed or depressed from bereavement. Rustin(2001) asserts that if parents cannot 'provide a sufficient level of emotional responsiveness, there is risk that serious developmental arrest or disorder in the infant may take place' (Rustin 2001: 191). A depressed mother, unable to respond to her child through smiling and playing, could therefore represent an early loss for some babies.

Not good-enough mothers

Fonagy (2001) explains that the mother being 'not good enough' from inability to replicate the baby's behaviour, negates the baby's confidence in its own omnipotence and prevents healthy forming of emotional and bodily intimacy with the mother (Fonagy 2001: 118). In normal development, the baby's attachment to the parent, and its dual feelings of love and hate for the object, eventually form a morally balanced adult who can love itself and others (Fonagy 2001: 191). Without trust in the mother, the attachment is lost before the mother is successfully internalised. All the baby's magical power is missing if a mother's unresponsive facial features fail to mirror the baby's own feelings (Winnicott 1985: 55). Consequently, if a mother's reactions are erratic, unsafe, not trusted and uneasily read by the infant, the attachment can be labelled 'disorganised'. Parents with unresolved trauma and loss can have children with disorganised-attachment (Siegel 1999, cited by Green and Scholes 2003: 28). Consequently, teachers of bereaved children may be dealing not only with children's unresolved losses, but also with the unresolved grief of school parents and even their own unresolved loss.

LOSS

Longitudinal loss

Past losses and separations have an impact on current losses, separations and attachments, and all these factors have a bearing on the fear of future losses and separations and the capacity to make future attachments (Simos 1979: 27, cited by Worden 1986: 55).

Simos'(1979) summing up of the longitudinal effect of loss, referred to above, suggests that the empirical evidence is clear-cut, however, there are inconsistencies in findings. Following their review of twenty controlled studies, Crook and Eliot (1980) criticise the research reporting association between child bereavement and adult depression as 'methodologically flawed' (Crook and Eliot 1980, cited by Rabkin 1982: 491). However, empirical research by Black and Young (1995) found that children who suffer parental loss are significantly more likely to develop 'psychiatric disorders and may suffer considerable social difficulties throughout childhood, and later in adult life' (Black and Young 1995: 197, cited by Parkes *et al* 1997). Peretz (1970) notes how each loss 'carries with it the threat of an additional future loss' (Peretz 1970: 6) and later support for this premise comes from Edelman (1994), Pill and Zabin (1997), and Brennan, Clark and Shaver (1998).

Early loss can therefore be internalised as rejection from the attachment figure (Mireault, Bearor and Thomas 2002: 99), threatening initial security and future relationships. Moreover, recent research collated by the Joanna Briggs Institute found that six weeks after loss, thirty per cent of adult mental-health patients were dysfunctional, and had some remaining unresolved 'bereavement issues' (2006: 64)⁷¹. Later psychiatric studies by Black (Black 1998, cited by Mireault *et al* 2002: 98) and also Geiss, Whittlesey, McDonald, Smith and Pfefferbaum (Geiss *et al* 1998, cited by Mireault *et al* 2002: 98), suggest that childhood loss is a major risk factor for later instability. Mireault and Bond (1992) studied 13,017 subjects, and asked thirty female respondents motherless before age eighteen, to complete questionnaires relating to remembered relationships with their mother and more recent adult relationships.

Although Mireault and Bond found a link between childhood trauma and adult depression, their research concluded that the most likely reason for maternally deprived girls to become anxiously-attached adults is the feeling of *vulnerability*, which early maternal loss projects onto the fear of losing other relationships (Mireault and Bond 1992, cited by Mireault *et al* 2002: 101). Research by Haine, Wolchik, Sandler, Millsap and Ayers (2008) also suggests a raised risk level of 'negative outcomes' for bereaved children (Haine *et al* 2008, cited by CWRC⁷² 2014: 11). The research above

⁷¹Joanna Briggs Institute (2006) *Literature Review Bereavement and Bereavement Care*. [online] Available at <http://www.rgu.ac.uk/files/dmfile/bereavement-and-bereavement-care-literature-review.pdf>

⁷²Childhood Wellbeing Research Centre (CWRC) 2014 *Bereavement in Childhood: the impact on Psychological and Educational Outcomes and the effectiveness of Support Services*. [online] Available at

into the effect of secure or insecure early attachment forms a basis for exploring children's understanding of death concepts and the diversity of loss.

Children's understanding of death and loss

Although research clarifies the importance of lost maternal bonds, and children in the twenty-first century encounter many losses other than maternal death,⁷³ it is possible to agree with Milton that loss arises when 'anything that is valued or anyone we are attached to is removed from our lives' (Milton 2004: 58). Notwithstanding the long-term consequences of greater losses, a range of perceived lesser losses can also have long-term effects on children, and this chapter examines research into the effect of losses other than death. Nonetheless, this section begins with a review of some of the research into children's understanding of death, which relates to the death concepts outlined by Speece and Brent (Speece and Brent 1984: 1671).

Death concepts

Inevitably, research into children's death concepts has been explored in relation to adult concepts (Holland 2001: 51), which are largely influenced by a range of social and cultural issues, religious assumptions and personal beliefs (Slaughter 2005, cited by Bonoti, Leondari and Mastora 2011: 47). Although researchers realised the importance of studying children's concepts, research before 1930 focused on unhealthy children's understanding of death, before shifting to healthy children's responses (Anthony 1940; Schilder and Wechsler 1934, cited by Speece and Brent 1984: 1671). It is now 'a rapidly increasing body of research' (Speece and Brent 1984: 1671). The death concepts, explored by Speece and Brent are:

Irreversibility (or irrevocability): once a living thing dies its physical body cannot become alive again (Hornblum 1978; Childers and Wimmer 1971).

Non-functionality: all life-defining mechanisms have ceased on death (Nagy 1948).

Universality (or inevitability): all living things die (Childers and Wimmer 1971; Bolduc 1972).

Speece and Brent (1984: 1678) suggest a link between understanding death concepts and a Piagetian series of learning stages. It is therefore useful to outline Piaget's

http://www.cwrc.ac.uk/news/documents/Revised_Childhood_Bereavement_review_2014a.pdf
(accessed 18.6.15)

⁷³ Mothers suffered high rates of death from puerperal fever in the nineteenth century.

stages here, setting in context the most likely ages whereby full understanding is achieved.

TABLE ONE: Piagetian Stages

Pre-Operational (2-7 years)	Co-ordination of motor-responses and sensory input. Children learn to communicate, copy sounds and develop speech. Children develop a sense of object permanence; i.e. an object exists when unseen.
Concrete-Operational (7-11 years)	Development of symbolic thought marked by egocentrism. The child sees the world only from its own viewpoint. It experiences centration, i.e. can only focus on either the problem or the object in a situation. Children use imagery and language.
Formal-Operational (11 years to adult)	Children see a different point of view and begin to see and reason with concrete knowledge, but not reason outcomes such as 'the future'.
	Children think logically, abstractly and theoretically to solve problems.

Content from Donaldson (1978: 134-135)

Although the suggested stages of understanding death concepts are linked to Piagetian developmental stages, they are necessarily flexible, since cultural and experiential factors can influence children's understanding (Koocher 1973, cited by Speece and Brent 1984: 1680). As children's experiences vary greatly, there is potential for disparity between researchers for the ages agreed whereby children fully understand the long-term implications of loss. Notwithstanding Piagetian stages, there is disagreement surrounding the age at which children fully understand death and whether their understanding is more likely to be affected by personal experience or physical development.

Developmental understanding

Magical thinking

Pioneering empirical studies by Anthony (1940) and Nagy (1948), suggest that children's development is a significant factor in understanding death concepts. They

ascertain that children below five years of age could mourn a loss, but that the finality of death is denied and the children do not understand the irreversibility of death (Archer 2001: 50). These findings comply with the theory of 'magical thinking'⁷⁴ experienced by children aged between two and six years old (Jewett 1992: 27) during which many children either believe that death can be reversed, or that the dead live on differently elsewhere and will return (Lonetto 1980, cited by Jewett 1992: 27).

Irreversibility and irrevocability

Children of five and more seem to change their thinking about certain concepts. Kane (1979) specifies that the average child of six understands that death is irreversible (Kane 1979, cited by Holland 2001: 50). Archer extends this, stating that somewhere between ages five and seven, most children understand that death is irreversible and involves non-functioning (*ibid*: 51). They do not necessarily realise that they can die, although children aged nine to ten years old are most likely to understand they will, and realise that death is inevitable (Jewett 1992: 27). Having examined thirty-five studies exploring children's age-related understanding, and the relation to Piagetian stages, Speece and Brent (1984) criticise some psychologists⁷⁵ for relating cognitive development to understanding of death with inadequate empirical research to support them (Speece and Brent 1984: 1680). Nonetheless, despite ambiguous findings, Speece and Brent conclude that age development does impact on understanding, and therefore most concrete-operational⁷⁶ children should understand all three death concepts (Speece and Brent 1984: 1683).

Furthermore, they suggest that children as young as eighteen months old have some concept of death 'long before they achieve the normative adult conceptualization' (Speece and Brent 1984: 1673). Adults base their decisions to involve children in death-rites on their own perception of children's understanding, (Holland 2001: 50) but an important distinction is required between children's understanding of the infinitude, irreversibility and universality of death, and children's aptitude for mourning loss.

⁷⁴ The cognitive stage of childhood associated with children assuming control over what happens to themselves and others through their own thoughts and actions (Jewett 1992: 8).

⁷⁵ Anthony 1972; Kane 1979; Robinson 1976/78; Safier 1964 and Steiner 1965, cited by Speece and Brent (1984: 1680)

⁷⁶ The concrete-operational stage follows the pre-operational stage. The pre-operational stage is one in which children tend to see the world as absolute and in which children are influenced by how something seems, rather than by logical principles or *operations*. (Gross 1987: 482) One of the most famous Piagetian task to demonstrate this principle was the *Three Mountains* task. (See Donaldson, 1978:19-20)

Ages for mourning

As well as variance for when children fully understand death, there is disagreement of the age when children can mourn, which might emanate from defining the term and its link with verbalisation. Bowlby (1961) concludes that children as young as six months old can mourn loss, (Bowlby 1961, cited by Worden 2003: 77) whereas Wolfenstein (1966) argues that children cannot fully mourn until they reach adolescence and have formed a complete identity (Wolfenstein 1966, cited by Worden 2003: 77). Furman (1974) adopts a middle ground suggesting that children aged three can mourn (Furman 1974, cited by Worden 2003:77). However, as well as a presumed link between children's ages and their understanding of death, equally, adults can incorrectly evaluate children's comprehension of loss by connecting developmental age with an ability for language communication. Kübler-Ross [1969] simplifies the discussion and asserts that children 'are old enough to grieve if they are old enough to love' (Kübler-Ross [1969] 2005: 160).

Mallon (1998) also argues that 'limited language does not mean limited feelings' (Mallon 1998: 29) and Silverman agrees that 'although young children may have no words for death, they understand when something is lost and can show their concern and distress in non-verbal ways' (Silverman 2000: 50). Dyregrov (2007) expands the possibilities and suggests that 'before they master the language to express such experiences, they [children] can carry such events in non-verbal form, and then, when mastering language, give words to their impressions' (Eth and Pynoos 1985, cited by Dyregrov 2007:17). Obviously, this relies on adults being able to discuss the loss when the child is ready. However, notwithstanding children's language development, their acquisition of grief-language can be hampered by adult embarrassed denial. Children unable to voice their feelings can lead adults to wrongly assume that they are untouched by loss. As children encounter many losses, the next discussion relates to the grief from loss for both adults and children, since both parents and children often share the same bereavement.

Losses other than deaths

Whilst death of a loved one is obviously a loss, and is therefore included in that category, there are other losses that cause great grief. To recap, grief from loss can be defined as 'the characteristic response to the loss of a valued object, be it a loved person, a cherished object, a job, status, home, country, an ideal, a part of the body' (Engel 1961:18, cited by Bruce and Schultz 2001: 32). More recently, Holland (2001) defines loss as 'any change that impacts so greatly as to overwhelm us and be

problematic' (Holland 2001: 19) and whilst some losses in Engel's list are mostly experienced by adults, the loss of a particular home, income and life-style can generate significant losses for children. Duffy (2003) suggests a wide range of possible losses or 'little deaths' (Duffy 2003: 5) which could fit Engel's definition:

- Redundancy and unemployment;
- Moving house and leaving friends behind;
- Close friends or family moving away or abroad;
- Separation or divorce;
- Hysterectomy in young woman;
- Knowledge of serious illness in loved one;
- Children leaving home;
- Failure to achieve;
- Burglary.

Duffy's list is neither hierarchical nor exhaustive, but recognises the impact of situations that can feel like crises and replicate the grief of greater loss. Adults tend to rate their own losses on a scale of mutually agreed devastation, possibly based on cultural significance, with the death of a loved one understandably considered as very traumatic. The mental anguish and stress of mourning any loss can affect physical and mental health. Holmes and Rahe (1967), examined over five thousand patients, and by exploring the link between major stress and illness they found that major life-events preceded illness in many adults. Although twentieth century, the research still influences perception of what will most likely cause stress. Holmes and Rahe (1967) developed a scale of major life stressors, with life-change numerical units assigned to each stressful event: death of a spouse; divorce; marital separation; imprisonment; death of a close relative; personal injury or illness.

There was a positive correlation of 0.1 found between certain life events and adult illness. In the list, the death of a spouse ranked as the most significant stressor for adults. Interestingly, the effect of pet death on adults is not listed, although this can cause immense grief in adults, with many books addressing the subject ⁷⁷.

⁷⁷Including: Friedman, James and James 2015; Sife 2014; Murray 2014

Effect of loss on children

Whilst children and adults can experience similar losses, a later contrasting list from James and Friedman (2002: 4) notes what they believe to be the most common losses experienced by children:

- Death of a pet;
- Death of a grandparent;
- Major move;
- Divorce of child's parents;
- Death of a parent(s);
- Death of a playmate, friend or relative;
- Debilitating injury to the child or to someone important in the child's life.

As this is a list of likely experiences rather than an emotionally hierarchical inventory of losses, the loss of a parent has not been placed uppermost. Clearly, imprisonment of a parent is not considered a common loss. Brown (1999: 111) also includes:

- Loss of self esteem;
- Birth of a new sibling;
- Abuse.

Based on the scores given to events by Holmes and Rahe (Holmes and Rahe 1967, cited by Sorensen 1993: 51), Coddington (1972) was the first to adapt the correlation measurement of stress-to-illness for school-age children. In ascertaining how effectively children manage major life-stress events such as death and divorce, Masten (1985) suggests consideration of three contributory factors (Masten 1985, cited by Sorensen 1993: 52): socio-economic; age-development and gender; and the influence of support mechanisms. Focusing on the final factor, external support for children relies mainly on adults, which can include teachers, especially if the remaining parent is so affected by grieving that they are unable to talk. However, Childline statistics (2014: 9) demonstrate that children often have too few available confidantes. The charity charts an increase in the number of children contacting them to discuss issues related to divorce, separation and family conflicts, with online counselling sessions rising to 81,000 in 2013/14⁷⁸ ⁷⁹. There are maybe too few teachers available to confide in,

⁷⁸ *Childline Review 2013-14* [online] Available at <http://www.nspcc.org.uk/globalassets/documents/annual-reports/childline-review-under-pressure.pdf> (accessed 14.6.15)

nonetheless, the approaches of family, friends and teachers all have a bearing on how well children manage loss and accept the new situation. Adults not intervening can arise from a lack of appreciation that the behaviour of grieving children can vary greatly from adult expectations.

Reactions and behaviour

In the short term a child can be informed of bereavement and can seem unaffected, or only momentarily show grief, before continuing to play as if nothing has happened. Furman (1970) clarifies that this response is in no way a denial of death (Furman 1970: 78) and Sunderland (2003) notes that this behaviour is partly due to young children's developmental need to follow motoric impulses to 'run and leap and climb and play ball' (Sunderland and Armstrong 2003: 4). The adult associative behaviour of 'sitting still, introverted and depressed' (Sunderland and Armstrong 2003: 4) results in a misdiagnosis of childhood grief. Just as adults need time to assimilate new information into their schema, so do children. Additionally, Jewett (1992) asserts that vulnerable bereaved children can resist crying, from the need to protect themselves from 'internal feelings of weakness' (Jewett 1992: 137), particularly if at school. Adults knowing signs to look for can help children grieve and Dyregrov (2007) identifies the most common childhood grief reactions, which can come in any order, with some lasting longer than others:

- anxiety;
- vivid memories;
- sleep difficulties;
- sadness and longing;
- anger and acting-out behaviour;
- guilt;
- self-reproach and shame;
- school problems;
- and physical complaints.

(Dyregrov 2007: 15)

Somaticisation is another possible effect. Hemmings (1995) suggests that from having less understanding of situational implications and almost no control over what direction their life will take, children might take longer than adults to resolve their grief

⁷⁹ The chapter on educational policy findings expands this discussion.

(Hemmings 1995, cited by Holland 2001: 154). Arguably, many reactions listed could lead to school problems, not least children failing academically from absenteeism. Feigning illness (Brown 1999: 70) can be more than attention seeking in bereaved children, allowing them to ensure the living parent is there. Mallon (2011) confirms that children can become too distressed to leave home and that what is sometimes misdiagnosed as school phobia is actually separation anxiety, relieved by being able to telephone home (Mallon 2011: 50). However, some children do experience real physical symptoms. There has been significant research into somaticisation as an expression of grief in bereaved children 'especially the experience of headaches and stomach aches' (Sood *et al* 1992, cited by Worden 1996: 64).

These symptoms are particularly likely in younger children with limited verbal abilities (Furman 1974, cited by Worden 1996: 64). Higher levels of somatic symptoms occur in families experiencing large numbers of post-loss disruptions (Worden 1996: 65). Although the research explored somaticisation following bereavement from death, children can show similar grief following house-moves and long-term separation from an attachment figure from other causes. To understand better how to manage bereaved children, I now turn to exploring stages of grief.

Grief Phases and Stages

Passive and Active

A glance at psychological recovery through mourning shows that there are two main approaches to healing the bereaved; passive and active. Worden suggests that those defining the process as phases of mourning, such as Bowlby, Parkes and Sanders, are making observations and advocating that the bereaved take a more passive approach in which they move through phases of grief (Worden 2008: 39). Conversely, suggesting tasks of mourning reflects an active approach, whereby the participant makes adjustments as they encounter experiences. Phase, or stage models of mourning can be seen in Table Two below:

TABLE TWO: Grief Phases and Stages

Bowlby (4 phases)	Jewett (3 phases)	Kübler-Ross (5 stages)
Numbing and / or anger	Early grief- shock, numbing, alarm, denial	Denial
Yearning and Searching	Acute grief-yearning, pining, searching, strong feeling, disorganisation, despair, reorganisation	Anger
Disorganisation and Despair	Subsiding grief, Integration of loss and grief, mastering of loss or separation.	Bargaining
Reorganisation		Depression
		Acceptance

(Derived from Bowlby 1980; Jewett 1992; Kübler-Ross 1969)

The differences between how children and adults express their grief has been shown above to be necessarily different, due to the developmental stage variances, however, the actual tasks of mourning can be similar for all mourners, irrespective of age (Smith and Pennells 1985; Holland 1997, cited by Brown 1999: 1). Bowlby asserts that while there is variation in the intensity and phase length of grief for each individual 'there is none the less a basic overall pattern' (Bowlby 2006: 101). Reflected in Table Two, Bowlby defines four phases of mourning applicable to children as well as adults (Bowlby 1981, cited by Jackson and Colwell 2002: 91). These are not prescriptive in order, as mourners can move back and forth between them (Jackson and Colwell 2002: 91; Jewett 1992: 64). Jewett suggests three phases of grief, similar to Bowlby's phases (Jewett 1992: chapter 3) but more comprehensive. Kübler-Ross refers to grief-stages rather than phases, and suggests them as a *process* rather than a state to be moved through (Kübler-Ross [1969] 2005: 7). Having outlined what she believed to be the five stages of mourning (*ibid.*) Kübler-Ross later qualified their rigidity and wrote that 'they were never meant to help tuck messy emotions into neat packages' (*ibid.*). Nonetheless, the idea of prescribed stages is still prevalent in common parlance.

Worden's Four Tasks and the Dual-Process Model

Whilst agreement with Bowlby is acknowledged, Worden lists four *tasks* of mourning which bear similarities to the above stages and phases, but are more akin to Freud's work, presenting a less passive approach to mourning (Worden 2008: 38). Worden (1982) asserts that those who do not complete all the tasks of grieving 'may have an

incomplete bereavement, just as one might have incomplete healing from a wound' (Worden 1982: 10). During the time of grief-work, when accepting and learning to manage life-changes, adults can remain 'restless, tense, anxious and unsettled until the necessary modifications have been made' (Parkes 2006: 32). However, the psychological 'health-illness' model of bereavement is countered by Stroebe and Schut (2012: 198) who suggest a danger exists in interpreting grief as something you recover from, and that such reasoning can lead to assuming that grief is 'bad' and that only healthy states are 'good' (*ibid.*: 203). Stroebe and Schut propose a dual-process model of bereavement which suggests that everyday life experiences switch between loss-oriented and restoration-oriented actions. Although Stroebe and Schut (2012) acknowledge the need for more empirical evidence to support their model (*ibid.*: 220) they have modified the tasks to reflect their model, suggesting a need for 'dosage' with breaks away from mourning (*ibid.*: 213). Conversely, Worden (2009) states that certain tasks of mourning must be achieved before equilibrium can be restored, completing mourning, or adaptation to loss (2009: 39). Worden's final task appears to relate to Freud's suggestion that to successfully manage lost attachments, the bereaved must be able to emotionally detach from the deceased person and form new attachments. The tasks comparisons are listed:

Worden (2009: 39)

- to accept the reality of the loss;
- to experience the pain of grief;
- to adjust to an environment in which the deceased is missing;
- to withdraw emotional energy and reinvest it in another relationship.

Stroebe and Schut (2012: 213)

- accepting the reality of a changed world,
- taking time off from the pain of grief.
- to reconstruct the subjective environment
- to develop new roles, identities and relationships

The possibility exists that rather than wanting detachment and forming new relationships, the bereaved can take comfort from retaining their relationship with the person they have lost (Furman 1974, cited by Silverman 2000: 20). Furman (1974), researching the effects of bereavement on pre-school children, asserts that mourning ended 'when the children identified with a part of the deceased, thus allowing them to keep aspects of their lost parents with them forever' (Furman 1974, cited by Silverman

2000: 20). Whilst the main sample of children studied by Furman were almost entirely pathologically problematic, some younger children in the sample had minimal problems prior to bereavement, and the work is valuable for insight into children's responses following a parent's death (Bowlby 1980: 267).

Similarly, the stage-model was originally adopted by Kübler-Ross [1969] (1982) as a means for understanding the phases of grief attributed to terminally ill adults, making it questionable whether it should be used to understand healthy children's grief. As it is suggested that there is a possible denial of death, it is worth stating that there is a distinction between denying, or refusing to discuss actual death, and the bereaved finding it unbelievable that the dead person is not going to walk through the door. It is important to confirm that the phases and stages are suggesting that mourners believe the bereavement, but possibly find acceptance difficult. Whilst all humans experience some loss as an inevitable part of growth, most are transient losses which although detrimental to wellbeing, are eventually managed. Viorst (1998) maintains that some losses are 'necessary', and that 'without increasing periods alone and the consequent experience of loss, we would not mature' (Viorst 1998, cited by Lendrum and Syme 2004: 3).

Adults' handling of bereaved children

'Embarrassed denial' and realism

Hockey argues that many children are now shielded from the reality of human mortality (Hockey 2001, in Hockey, Katz and Small 2001: 193). Clearly, whilst children are not immune to the possibility of death, often seeing it in television drama and violent DVD games, these experiences are too unrealistic and remote for children to understand that death could happen to someone they know, or to them. Laungani and Young (1997) support this premise, noting that although children are 'socialized into a culture of violence, destruction and death, they are insulated from death as a reality' (Laungani and Young 1997: 222). Media 'bad' death, in which the dead often return to life, presents death to children as 'magical', unreal and reversible. They are left ignorant of the irreversibility of real death and unprepared for the impact of mourning on their lives, and of others. Although no empirical evidence suggests that seeing real dead bodies will traumatise children, and Jewett (1992) suggests that children do not seem to experience 'unusual problems' (Jewett 1992: 34), the accepted Western view is that children should not be involved in ritual (Laungani and Young 1997: 222).

However, it is often easier for children to have the facts than be frightened by what other children say, or by their own active imagination. Nonetheless, outside of other religious traditions, Christian and secular Britain has created a culture of denial, where even using the words 'dying' and 'dead' with children are avoided and replaced with euphemisms. Since children now experience reduced involvement in the ritual of community deaths, arguably, they are in greater need of death education.

Too good a childhood?

It is interesting to note therefore, that in contrast to the effects of childhood loss and potentially serial, insecure attachment patterns, Rando (2002) also suggests that a too perfect childhood can cause problems for adults managing traumatic life events. Rando cites evidence for this view in her article 'The "Curse" of the Too Good a Childhood', in which she bemoans the lack of 'a healthy dose of misfortune' (Rando 2002, cited by Parkes 2006: 145). Rando bases her argument on potential problems arising from a person's lack of experience with 'defending and revising their assumptive worlds' (*ibid*). There is resonance here with Piagetian assimilation of new experiences into existing schema (Piaget 1954, cited by Kauffman 2002: 18) and Duffy's experiential 'little deaths' (Duffy 2003: 5). Rando (2002) also suggests that those who have 'positive expectations of themselves and others' are devastated when they suffer disappointment, for which their past life has left them unprepared (Rando 2002, cited by Parkes 2006: 145). The situation can prove so traumatic, they don't risk forming further attachments in case they too are lost, which bears similarity to the discussed work on attachment by Simos (Simos 1979: 27, cited by Worden 1982: 55). Adult over-protection of children can impede their chances of coping with losses, especially death.

Bereavement figures

Draper and Hancock (2011) assert that figures for the number of bereaved children in Britain are difficult to verify, with 'significant' bereavements hard to quantify (Draper and Hancock 2011: 290). Lowton and Higginson(2002) also reflect that the numbers could be higher, since male suicide and deaths from HIV are not included in the data (Lowton and Higginson 2002 [sic],⁸⁰ cited by Draper and Hancock 2011: 289). Nonetheless, figures from the bereavement charity *Winston's Wish*⁸¹ (2015) state that in Britain, approximately 358,300 children are annually bereaved of a sibling; 24,000 are bereaved of a parent; over 530,000 children each year experience the death of a close

⁸⁰ The journal paper quoted appears to have been published in 2003.

⁸¹ Winston's Wish has been based in Southern England since 2006. *Winston's Wish History*. [online] Available at <http://www.winstonswish.org.uk/about-us/our-history/> (accessed 27.1.14)

family friend and over a million children under sixteen years old experience the death of a grandparent (*Winston's Wish: 2015*)⁸². As up to sixty-three per cent of grandparents are now relied upon for child-care for children under sixteen,⁸³ their deaths can be a significant early loss to a child (Dyregrov 2007: 37).

Adult reticence

Adult approaches to preparing children for death have been shown to have far-reaching effects, with bad handling of situations negatively impacting on children's management of later adult bereavements (Black and Young 1995, cited by Young and Papadatou 1997: 197). Resonant of the discussed unease accompanying expressing condolences (Gorer 1977: 720), death talk in particular is further hampered by adult determination not to cry in front of children (Bowlby 1980: 272). My own classroom experience recalls that parents are largely unaware that this is unhelpful and surprised when the possibility is mentioned. Mallon(1998) blames adult inhibition for children's reticence in discussing death and she asserts that it causes growing children to discern that some subjects are taboo (Mallon 1998: 11). Bowlby(1980) agrees that children 'are quick to realise when a parent is afraid to show their feelings of grief and will correspond by not showing their own' (Bowlby 1980: 272). This could lead to adults wrongly assuming that children are coping. Corr, Nabe and Corr (2009) suggest that by talking to adults, even strangers, children use responses to their questions to achieve guidance for how they too should respond (Corr *et al* 2009: 343). Furthermore, adult desire to retain emotional control suggests to children that feelings should be kept 'under cover'.

Dyregrov confirms that by avoiding discussing feelings, adults become negative role models (Dyregrov 2007: 72). Despite post-1960s research improving professional acceptance of 'talking cures' (Lendrum and Syme 2004: 56), Lendrum and Syme assert that by avoiding 'awkward' questions, adults are 'introducing a process of embarrassed denial with young children' (*ibid.*: 55). Notwithstanding that this is doubtless prompted by fear of saying the wrong thing, it is also likely that adults fear distressed children, and one way that they attempt to reduce unpleasantness is with euphemisms. Euphemisms for death, such as 'gone with the angels' or 'gone to sleep', can be used by adults because they have developed metaphorical language, however,

⁸² *Ibid.*

⁸³ Department for Work and Pensions ((DfWP) 26 July 2013) *Looking After the Grandchildren? Make Sure it Counts Towards your State Pension*. [online] Available at <https://www.gov.uk/government/news/looking-after-the-grandchildren-make-sure-it-counts-towards-your-state-pension> (accessed 13.10.15)

when explaining death to children, such phrases are mostly meaningless. However, euphemistic denial of death is not singularly a twenty-first century phenomenon. Ariès (1981), in discussing attitudes to death over thirty years ago, stated that children were excluded from death, and were either uninformed or told 'their father has gone on a trip or that Jesus has taken him' (Ariès 1981: 576). Lack of physical contact with the dying or dead distances adults and children from death, a situation discussed above. Laungani and Young (1997) uphold this view and claim that 'not only do parents protect themselves from encountering death but take special pains to prevent their children from witnessing death' (Laungani and Young 1997: 221).

Funerals and viewing bodies

Joining in with ritual is a way to move on through stages of grief and hopefully share that experience with another person. Children's first experience of seeing dead bodies and burying them might be a loved pet. In the case of human loss, rituals provide an outlet for grief and a chance to say goodbye not only to the person who has died, but also to the relationship they shared. Rituals help people come to terms with reality and are part of the grief process, helping children understand more and to ask questions. Although adult fears and concerns can inhibit children from making 'the unreal real' (Dyregrov 2007: 58) Lendrum and Syme(2004) assert that if children are given clear information from adults, they should decide for themselves whether or not to see a dead body and attend a funeral (*ibid.*: 71). However, both Mallon (2011) and Brown(1999) recommend preparing children beforehand (Brown 1999: 20) and when viewing bodies, children need warning of what the body will look like; that it will feel cold, and will be unable to see or speak because dead people cannot do these things. Mallon suggests reducing the shock by forewarning the coolness of the room and whether the coffin will be open (Mallon 2011: 112).

However, saying goodbye to a loved one might be less important for children than checking the person is really dead. Brown (2000) suggests that children should be allowed to touch the body if they wish to (Brown 2000: 21). The literature review clarifies that in previous centuries children were aware of death and as many people died at home, the chance to experience dying would have been common. The attendance of younger children at funerals is now a cultural⁸⁴ dilemma. Notwithstanding that some children prefer not to attend (Dyregrov 2007: 64), adult decision to exclude children without seeking their opinion is another form of death denial (Lendrum and

⁸⁴ British Christian and secular culture.

Syme 2004: 71), which Dyregrov suggests can reinforce children's own denial of death (Dyregrov 2007: 59) by avoiding the situation. Duffy(2003) agrees that funeral rites give all ages an opportunity to be part of a grieving community; to realise that a change has occurred (Duffy 2003: 52); to say goodbye and begin grief-work. As part of the longitudinal Harvard Child Bereavement Study, which began in 1987, Worden studied one hundred and twenty five children bereaved of a parent. From his research, Worden(1996) upheld the need to include children in the experience of loss, and listed three supportive strategies:

Supportive strategies

Funerals

1. they should receive adequate information about a death and its cause;
2. they should be involved in ritual and discussions
3. they should have grief behaviour modelled by adults.

(Worden 1996: 13)

Attending a funeral and sharing in the reminiscences afterwards could be as helpful for children as it is for adults. Teachers can be particularly helpful for children to discuss their worries with, since they are usually removed from the bereavement. My own experience of discussing funerals with classes is that once conversation begins, the children are enthusiastic to either share experiences or ask more questions. Older children particularly, can agonise over the opinions of others and whether they will be thought 'babyish' if they cry, and unfeeling if they don't (Jewett 1992: 34). There is also evidence that children with learning disabilities are often excluded from any preparations for the funeral or from attending the ceremony, in case they behave in a manner considered inappropriate (Raji, Hollins and Drinnan 2003, cited by Mallon 2011: 43). Children to whom no-one has spoken about a funeral can be consoled knowing everyone grieves differently.

Post-funeral support

There is also evidence of insufficient post-funeral support for bereaved children,

⁸⁵outlined in the *Grief Matters* report from the National Children's Bureau (NCB)⁸⁶:

⁸⁵ Related to predominantly white Christian or secular families.

⁸⁶ NCB (2007) [online] Available at

http://test.childhoodbereavementnetwork.org.uk/documents/GMCBwithcover_000.pdf (accessed 16.6.15)

to manage the impact of such a life-changing experience, children need support from family, friends and other important people in their lives - but some struggle to find the help they want. (NCB 2007: 5)

This is particularly so for 'looked after' children⁸⁷ who have sometimes had more than one loss and several placements⁸⁸. The number of primary school age children in local authority care in England has risen, with over five thousand of those aged five to nine⁸⁹ (DfE 2015: Table C1)⁹⁰. Mallon(2011) cites the study by Cousins, Monteith, Larkin and Percy (2003), which suggests that thirty per cent of looked after children under five were bereaved of a close family member (Mallon 2011: 45). Those children not 'looked after' by local authorities, who have access to family, can still experience uncommunicative, grieving adults where the reality of their own loss can seem 'too difficult to contemplate' (Silverman, Nickman and Worden 1992, cited by Bruce and Schulz 2001: 123). Bereaved children returning to school, also face the possibility of mixing with peers who have no personal experience of bereavement from death. Bereaved children are sometimes isolated from mis-informed children, who fear that through contact they could be affected similarly (Jewett 1992: 18). Schools lacking an ethos of open death-talk can create extra worry for bereaved children, rather than a welcome diversion (Wade and Smart 2002)⁹¹.

Those children whose schools offer a safe haven, with safe places, people and situations (Mallon 2011: 56), are more likely to manage post-bereavement grief. Nonetheless, the effects of losses other than death are not always understood. For some children, although a parent is not dead their inaccessibility makes them 'dead' to the child. Further to the discussion above, Winnicott (1985) notes that to a child below two years of age, whose mother has left home to have another baby 'she is dead from the point of view of the child' (Winnicott 1985: 25). Too young to understand the temporariness of the loss, a child can feel overwhelming sadness at what they perceive is permanence. Children with an imprisoned or separated parent, with whom they have no contact, or a parent with alcohol or drug problems who cannot care for the child properly, can experience similar grief symptoms to children bereaved by death. As

⁸⁷ Children in Local Authority care.

⁸⁸ *Children Looked After in England including Adoption: 2014-2015*. (Page 6; point 2.) [online] Available at <https://www.gov.uk/government/statistics/children-looked-after-in-england-including-adoption-2014-to-2015> (accessed 13.10.15)

⁸⁹ In 2015, 3510 'looked after' children are living with parents. (*Ibid.*)

⁹⁰ (*Ibid.*)

⁹¹ *How Primary school Children Cope with Family Change* (J.R.F. 2002) ⁹¹ <http://www.jrf.org.uk/publications/divorce-and-separation-outcomes-children> (accessed 8.1.14)

losses other than death are discussed, I now outline and discuss some of the overlooked losses affecting adults and children that are likely to affect schools.

Bereavement through divorce

The security of childhood has long been regarded as synonymous with homes where both parents live together throughout the child's life, however, higher rates of divorce in Britain have increased the likelihood of schools teaching young children from split families. In England and Wales, in 2011, out of 117,000 couples divorcing, over 43,000 children aged between five and ten years were affected compared with 36,500 children aged eleven to fifteen (ONS: 2012)⁹² ⁹³. In 2013, forty-eight per cent of couples divorcing had at least one child under sixteen living with them with divorces most likely before the eighth wedding anniversary (ONS: 2014)⁹⁴. Recent, lower divorce figures may arise from more couples co-habiting, and while it is not possible to statistically quantify the breakdown of co-habitations, Hall (2011) states that an equal number of co-habitees separate each year and that the effect of the break-up of those family units on children is comparable to divorce (Hall: 2011)⁹⁵. As children are similarly affected whether the parents were married or co-habiting, the term 'divorce' will be used to discuss the outcome for both situations. An estimated forty-two per cent of marriages end in divorce in England and Wales with the percentage of marriages ending before the tenth anniversary increasing more rapidly than in the following ten years (ONS: 9.2.13)⁹⁶.

It is therefore unsurprising that those children living with parents contemplating separation are probably primary school age. Whilst divorce is usually thought of as an adult bereavement, the loss of secure family life has a profound effect on many children. In 1998, the Joseph Rowntree Foundation (J.R.F.) collated over 200 research papers on the effects of divorce and separation on young people, and from these concluded that support 'cannot be provided by specialist services alone' (J.R.F.: 1998)

⁹² Office of National Statistics (O.N.S.) (20.12.12) [online] Available at <http://www.ons.gov.uk/ons/publications/re-reference-tables.html?edition=tcn%3A77-238035> (accessed 10.1.14)

⁹³ Figures for 2012 are provisional, as at June 2015.

⁹⁴ Statistics from ONS (2014) *Thirteen Facts About Divorce*. [online] Available at <http://www.ons.gov.uk/ons/rel/vsob1/divorces-in-england-and-wales/2012/sty-13-facts.html> (accessed 24.6.15)

⁹⁵ (Hall: 31.8.11) *Help Your Children Cope with Your Divorce: A Relate Guide. (Introduction)*, Kindle Edition, Ebury digital [online] Available at http://www.amazon.co.uk/dp/B005H0CCY0/ref=rdr_kindle_ext_tmb (accessed 12.1.14)

⁹⁶ O.N.S. (published 9.2.13) <http://www.ons.gov.uk/ons/rel/vsob1/divorces-in-england-and-wales/2011/sty-what-percentage-of-marriages-end-in-divorce.html> (accessed 8.1.14)

⁹⁷. The report showed that parents are most likely to 'seek advice from G.P.s, teachers and family lawyers, who are often ill-equipped to help' (J.R.F.: 1998)⁹⁸ also stating that teachers should be offered training to help them advise parents⁹⁹. Furthermore, although recent Childline(2013) reports show an increase of 122 per cent in the calls from children experiencing parental separation and divorce¹⁰⁰ and although divorce is more widely discussed, imprisoned parents present a loss that is often hidden (Boswell and Wedge 2002: 52). I now discuss this area of loss for its significance as another subject of embarrassed denial, and for its low profile in primary school death and loss education.

Bereavement through parental imprisonment

'More than double the number of children are affected by parental imprisonment than by divorce in the family' (ONS 2011, cited by Action for Prisoners' and Offenders' Families: 2015¹⁰¹)¹⁰² and it is estimated that in England and Wales, 200,000 children each year have a parent imprisoned (Action for Prisoners' Families 2013; Morgan, Leeson, Dillon and Wirgman 2014: 269)¹⁰³. The effect on children of this type of loss is similar to that for losses following death or family divorce, however, reference above to James and Freedman's (2002) list of the most common losses for children shows that imprisonment is an excluded loss. It is possible that the non-appreciation of the effects on children of imprisonment is as much a problem as the taboo surrounding death. Drawing attention to Bowlby's attachment theory, the COPING report (2013) suggests that parental imprisonment threatens children's attachment security (Jones and Wainaina-Wozna 2013: 142), which can be particularly distressing since family embarrassment can prevent children from receiving school support. I was inspired to begin this research study because of the effects of an imprisoned father on a child in

⁹⁷[online] Available at <http://www.jrf.org.uk/publications/divorce-and-separation-outcomes-children> (accessed 8.1.14)

⁹⁸[online] Available at <http://www.jrf.org.uk/publications/divorce-and-separation-outcomes-children> (accessed 8.1.14)

⁹⁹[online] Available at <http://www.jrf.org.uk/media-centre/major-jrf-study-reviews-experiences-children-whose-parents-divorce> (accessed 10.1.14)
<http://www.jrf.org.uk/publications/how-primary-school-children-cope-with-family-change> (accessed 10.1.14)

¹⁰⁰ Childline report 2012/13. [online] Available at <http://www.nspcc.org.uk/globalassets/documents/research-reports/childline-review-2012-2013.pdf> (accessed 14.6.15)

¹⁰¹ Renamed October 2014

¹⁰² Office for National Statistics (2011) *Divorces in England and Wales 2009*, Fareham: Office for National Statistics

¹⁰³ Action for Prisoners' Families (2013) *Facts and figures About Prisoners' Families*. [online] Available at http://www.prisonersfamilies.org.uk/uploadedFiles/2010_Publications_And_Resources/Facts_and_figures_about_prisoners_families_June2013.pdf (accessed 24.6.15)

my Foundation Stage class.¹⁰⁴ Several years' lack of contact with no opportunity to discuss his father with school staff or peers was not unlike having a dead parent. Unfortunately, the mother had not mentioned the imprisonment with me.

Blake's (1991) assertion that children of prisoners are 'sentenced by association' (Blake 1991, cited by Brown 1999: 74) suggests why I had not been informed, although once the mother knew that an incident had occurred, she felt able to discuss the situation, albeit briefly and with some embarrassment. The recent COPING report findings (Jones and Wainaina-Wozna 2013) show that this is not unusual in schools and the report identifies that although responses and support from teachers was seen as mainly positive by those parents asked (Jones *et al* 2013: 330), schools are seldom aware of the situation (*ibid.*: 286; 9). O'Keeffe (2014) suggests that with rare exceptions, there is a lack of school policies for recognising the needs of children with imprisoned fathers (O'Keeffe 2014: 2). This inadequacy, coupled with parental secrecy, contributes reasons for policies not being prioritised by schools, and the associated grief symptoms not always recognised by teachers. The CRC report *Silent Voices* (Adamson and Templeton 2012), for the Office of Children's Commissioner, suggests that lack of government policy development results in children receiving inadequate support for losses other than death, such as the impact of parental drug and alcohol abuse (*ibid.*: 88). Children of prisoners and those affected by substance abuse bereavement are part of a diverse group of hidden mourners. Research shows that children's troublesome behaviour (*ibid.*: 12) may prevent them from receiving much needed school support as it camouflages the underlying problem (Ofsted 2011a, cited by Adamson and Templeton 2012: 35). Having since taught other children who have experienced losses other than death, there is credibility in Jewett's (1992) statement that children angry from grief need release from that anger, and experience 'a surge of energy' from their mouth, their arms and hands or their feet and legs' (Jewett 1992: 123).

Although my pupil was five, more recent research notes that boys aged six to twelve with imprisoned parents are in the age range most likely to react aggressively to the situation (Sack 1977, cited by Lacher, Nichols and Murray 2005: 452). I was unprepared for the boy's violent verbal and physical reaction from the task of drawing a family picture, however, Ward *et al* (1996) have stated that 'sadness is often behind anger' (Ward *et al* 1996: 113) and with hindsight, this seemed to be true for my pupil.

¹⁰⁴ Four to five year old children.

Providing an opportunity at school for children to redirect some of the anger constructively, and to discuss their feelings appropriately, therefore gives children the chance for support and can dissipate some of the physical need to hit out at people (Jewett 1992: 130). Findings reveal that troublesome children are often troubled, but without training teachers to recognise grief from loss, it hampers their ability to address children's needs. The vulnerability of children of prisoners is an area that teachers can be trained to recognise and deal with. *Hidden Sentence* Training is offered for professionals, including teachers, by the organisation Action for Prisoners' and Offenders' Families (2016) but its inclusion in schools relies on the headteacher designating £550 for a group training session¹⁰⁵, despite the COPING report suggestion that awareness should be raised.

The COPING report finds that

Training materials for teachers, school counsellors and others should be produced and used to raise their awareness of the emotional and educational support needs of children of prisoners (among other vulnerable groups) so that they are better able to identify and respond to them.

(Jones A.D. and Wainaina-Wozna A.E. 2013: Recommendation EU9.2: 2013: 586).

Although children do not always verbalise their worries, feelings can be manifested through: bed wetting; nightmares; temper tantrums; aggressive behaviour; withdrawal, and refusing to attend school. Furthermore, the effects from parental imprisonment are similar for children experiencing death or divorce, and can lead to an escalation of added losses, such as parental divorce following imprisonment of one parent. This can increase other losses (Richards 1992, cited by Brown 1999: 76) leaving children scared that their world is falling apart (Mazza 2002, cited by *Action for Prisoners' Families* (2013)¹⁰⁶. Ramsden (1998) suggests that children respond emotionally to the loss of an imprisoned parent through feelings of guilt, low self-esteem, confusion and frustration (Ramsden 1998, cited by Brown 1999: 76). Noble (1995) interviewed thirty families and

¹⁰⁵ Available at <http://www.parentinguk.org/our-work/training/hidden-sentence/> (accessed 20.6.16)

¹⁰⁶ Mazza, K - And the World Fell Apart: The Children of Incarcerated Fathers (2002) *Families in Society*, 83:5/6, 521-529 [online] Available at www.familiesinsociety.org/ShowDOIAbstract.asp?docid=61 (accessed 30.6.15) cited in Action for Prisoners' Families (2013) *Facts and figures About Prisoners' Families*. [online] Available at http://www.prisonersfamilies.org.uk/uploadedFiles/2010_Publications_And_Resources/Facts_and_figures_about_prisoners_families_June2013.pdf (accessed 30.6.15)

found that eighty per cent of children with an imprisoned father were said to have behavioural difficulties (Noble 1995, cited by Boswell and Wedge 2002: 62).

Notwithstanding the possibility that those difficulties could have been the result of family problems surfacing prior to the imprisonment, Murray (2005) notes that so far, measures to test the effects of imprisonment on children of prisoners have been non-standardised and unreliable (Murray 2005: 443). The effects of longitudinal loss can therefore only be surmised, however, the lack of reliable measures does not change the resulting behaviour.

CHAPTER CONCLUSION

This chapter has explored the research on the importance to children of a secure attachment to a main carer for the possibility of later, secure adult relationships. The possibility that insecure relationships can cause later disorganised attachments or problems with reconciling bereavement, suggests the importance of good mothering. However, contrasting theories propose that 'good enough' mothering is all that is required to achieve this. Whether maternal attachments outweigh those of paternal and other carers is a matter for discussion, however, the most important factor could be the security of the attachment and the behaviour of the adult over the blood relationship. In considering the effects of loss, Bowlby's work with evacuees clarifies that children as young as six months old can mourn a loss and this research is important for understanding the need for adult support for very young bereaved children. However, there is a possibility that embarrassed denial prevents adults discussing death with children. To prevent cultural death-denial, Furman(1970) argues that '[I]t is important to acquaint the small child with the facts about death so as to help him (sic) acquire a realistic concept of death as a prerequisite to mastering his emotional response to death (Furman 1970: 71). Furman is not alone in this premise. It is a view shared by many professionals who work closely with children (Mallon 1998, Silverman 2000, Leaman 1995, Ward 2004, Brown 1999).

Moreover, although children are exposed to media death, they are often removed from real death and death rituals and are shrouded in half-truths and euphemisms from adults. The importance of demystifying attitudes to children's age-related understanding of death concepts is relevant for encouraging wider death education, and clear language, particularly in schools. Speece and Brent's (1984) research into understanding of death concepts reveals variability for when children understanding the irrevocableness and irreversibility of death, and even that they will also die. Excluding children from seeing dead bodies or attending funerals can encourage children's own

denial of death from which they may believe that the dead live on elsewhere in a different form, or are merely sleeping. Post-funeral support for children with disabilities or special needs and looked after children are especially likely to be excluded and have no adult or peers to discuss how they feel or what involvement they would prefer.

The above discussion details how bereavement 'can cut right across children's lives, affecting their schooling as well as their health and well-being, not just immediately following a death, but throughout their childhood and beyond' (Penny 2006: 1). However, notwithstanding the importance of death education, the effects on children of so-called lesser losses, such as divorce or parental imprisonment can seriously contribute to reduced wellbeing. Good internal and external support can help children and adults overcome the loss associated with these events, reducing stress and lessening the likelihood that children will suffer physical symptoms, or separation anxiety from the remaining caregiver. However, the disinclination of parents to inform schools, despite reports showing positive feedback from those parents who have done so, perpetuates cultural embarrassment and preserves a further loss-related taboo.

Arguably, good death education and understanding of the effects of 'lesser losses' and how these impact on children's wellbeing, is as important as knowing how children mourn and what help they need from adults. Thus, as well as attempting to answer questions related to historical events and trends, and potentially useful resources, experience as a primary school teacher in Southern England led to a strong hunch that the situation locally was probably representative of a much wider geographical area and that this merited investigation. The possibility that negligible death education is affected by factors such as embarrassed denial, a culture that has individualised grief, low finance, teachers' workload and a lack of coherent policy suggested the advantage of sending questionnaires to a sample of schools, thus providing quantitative research to support and expand the qualitative findings from other chapters.

Chapter 3

INTER-DISCIPLINARY METHODOLOGIES

CHAPTER INTRODUCTION

This study began with an intuition that primary school teachers are not sufficiently supported or trained for helping bereaved pupils and that this deficiency affects their own wellbeing and that of bereaved children. Whilst a lot of cultural discussion regarding bereavement is death-related, the initial identification of a possible problem in schools, and society in general, resulted from teaching a child bereaved from a so-called lesser loss. This clarified that training for bereavement should also include managing losses such as divorce, and parental imprisonment. Marshall and Rossman (2006) support the feasibility of beginning research by problem solving, and forming a conceptual framework by answering specific questions. They state that the 'complex process of conceptualizing, framing, and focusing a study typically begins with a personally defined question or identified problem' (Marshall and Rossman 2006: 31).

Research questions generated by the literature review

Listed below are the questions generated by the two literature review chapters, which determined the shape of the thesis.

1. How has the historical trajectory of death and mourning outlined in the first chapter, and the research into psychological aspects of death and loss explored in chapter two, impacted on attitudes to death, mourning and other losses and affected what teachers say to bereaved children? What are schools doing to support teachers of bereaved children?
2. How are the attitudes to discussing death and loss discovered in chapters one and two, reflected in the parallel trajectory of Children's Literature? Does the didacticism of nineteenth century children's books reflect the way that children were informed about death? Do the books of the twentieth and twenty-first centuries equally reveal changing cultural attitudes?
3. Given the pattern of embarrassed denial and the known psychology of loss, what could teachers, untrained as educational psychologists, practically do in school to help bereaved children? Is there a possibility that the under-researched area of bibliotherapy could be utilised?
4. If there are initiatives teachers could use, do the demands of teaching the curriculum, behavioural issues, and the need for standard assessments allow time for teachers to implement resources and if not, why not? In other words,

what is the policy climate in which death and loss education struggles for recognition?

RESEARCH DESIGN

The best methodology design for collecting data was clearly an inter-disciplinary approach. This allowed an analytical overview not only of how the current culture of antipathy towards discussing death and loss has evolved, but also whether there was any evidence that a culture of 'embarrassed denial' infiltrates and affects primary education. Stember (1991) defines interdisciplinarity as 'between two or more fields of study' (Stember 1991: 4, cited by Repko and Szostak 2014: 5) and Moran(2010) upholds this definition (Moran 2010: 14). There are further definitions for the purpose and meaning of inter-disciplinary studies, including those from: Rhoten, Boix-Mansilla, Chun and Klein 2006: 3; Boix-Mansilla 2005: 16; and Newell 2007: 248, cited by Repko and Szostak 2014: 13) however, the elected definition of 'inter-disciplinary' for social world research will be that of Klein and Newell (1997). They define interdisciplinarity as 'a process of answering a question, solving a problem, or addressing a topic that is too broad or complex to be dealt with adequately by a single discipline' (Klein and Newell 1997: 393, cited by Repko and Szostak 2014: 12). xxx

A further distinction is needed between 'multi-disciplinary' (Moran 2012: 14) which Moran aligns with juxtaposed disciplines, such as joint-honours degrees (Moran 2010: 14) and 'inter-disciplinary,' with suggests the need to study several disciplines to arrive at 'an all-inclusive synthesis' (Moran 2010: 14). For this reason, within the two literature review chapters (history and psychology) and four chapters of findings (questionnaires, children's literature, bibliotherapy and educational policy) there are six distinct epistemologies. Notwithstanding the inclusion of social science, the disciplines covered are not epistemologically wide¹⁰⁷, but distinctly within the school of arts and humanities. Furthermore, the various disciplines synthesised in the research were explicitly chosen for their capacity to inter-connect, complement and support each other, not least from the examination of parallel trajectories of history and literature.

However, as the impact of other areas on the current position in schools was a principal focus of the research, it was essential to include a trajectory of the professional discipline of education and specifically educational policy. Although to some extent all theses are influenced by other disciplines, Repko and Szostak (2014)

¹⁰⁷ For example, modern languages and science.

commend a specifically inter-disciplinary approach. They note that although inter-disciplinary studies depend on their constituent disciplines to inform research, amalgamation produces new, and more comprehensive knowledge of real-world problems¹⁰⁸ (Vickers 1998: 34, cited by Repko and Szostak 2014: 10). Toynton (2005) agrees that by examining connections between disciplines, the contribution to knowledge is potentially more original, more profound and broader in character than a single disciplinary approach (Toynton 2005, cited by Repko and Szostak 2014: 52). Thus, the epistemological stance taken by using interdisciplinarity, provides not only a better understanding of how the current situation in society and specifically schools has transpired, but suggests what can be done to improve it. To clarify the choice of a post-positivistic, interpretivist approach, using quantitative and qualitative methods, I now clarify the reasons for the chosen paradigms, or theoretical framework, of the thesis.

Methodology for Literature Review

To form an idea of how present day attitudes to death, loss and mourning have transpired, and to form a deeper understanding of people's lived experiences (Marshall and Rossman 2006: 55), and their possible impact on current attitudes, the decision was made to review a trajectory of significant cultural changes, beginning with nineteenth century rituals and assumptions made about Victorian death. Following this line of enquiry, the effect of past 'turning-points' such as world wars, post-war eras, secularisation and medicalisation were explored for their possible impact on current attitudes to bereavement and mourning and the meaning of 'good death' and 'bad death'. This required an in depth study of scholarly writings, government reports, acts and online documents. Despite some statistical differences, which can be explained by noting the problems with interpretations of historical events, cross-examination of similar data reflected a common acknowledgement that previous centuries were more comfortable with discussing death and bereavement.

The research area of attachment theory and its relevance to mourning ensured an understanding not only of how children grieve but also how some questionnaire respondents might be affected by personal bereavements. By researching the ages at which children understand different death concepts and the differences in how adults and children show grief, a more authoritative basis could inform the quantitative research. Furthermore, as loss as well as death is a focus, it enabled a deeper understanding of the hidden losses suffered by children of parental divorce or

¹⁰⁸ This was borne out by my paper at the joint 2009 *Changing Childhood* conference organised by the Children's Society, Diocese of Chichester and University of Chichester (2-4 July 2009).

imprisonment. To gain a comprehensive overview, journal papers, classic texts and innovative studies were examined. The theory extracted was used to inform questionnaires.

Methodology for Researching Death and Loss in Children's Literature

The research on children's literature was included to provide informative data on how readers respond to particular books, how cultural events are reflected in book content, and the possible effects of loss that motivate authors. The infrastructure of the thesis forms a conceptual framework that explores an overview of how Britain has evolved from being mostly at ease with bereavement in the nineteenth century, to predominantly death-denying in the twenty-first century¹⁰⁹. Furthermore, it explores how the circumstances affecting the social construct of 'embarrassed denial' have affected the policy for lack of provision for death education for children and teachers. A purposive sample of ten books, representative of different eras from the nineteenth century to the twenty-first, was chosen to explore how death and loss in children's literature reflects Britain's cultural changes. Arguably, although recognised as children's books, neither the implied adult reader nor the impact of bereavement on the author should be disregarded.

Nonetheless, for this chapter, they are referred to as books for children. Two analysed titles¹¹⁰ focus on helping children deal with divorce, and one¹¹¹ of the eight books analysed with a theme of death is a translation of an English text. It was chosen to demonstrate that cross-cultural attitudes to including children in discussions of death can differ, even within the same century. In keeping with the interpretive paradigm of the methodology, a qualitative analysis explored the themes in the conceptual framework. The huge number of books available for the sample, required sorting criteria, based on genres and underpinned by the themes arising from the historical and psychological literature reviewed:

- Nineteenth, twentieth and twenty-first century fiction with a theme of loss;
- Didactic books portraying a religious 'good death;'
- Extended, moralistic fables;
- Fantasy texts;
- Picture books;

¹⁰⁹ Notwithstanding the distinction between 'visible' and 'invisible' death, theorised in chapter one.

¹¹⁰ *Two Homes; It's not Your Fault Koko Bear.*

¹¹¹ *Granpa* (trans. as *Mein Opa und ich*)

Books with text;
Books with no text;
Books with themes of unresolved loss written by authors bereaved as children;
Links to attachment theories, object-relations, reality testing and mother loss;
The theme of Home;
Translation;
Divorce.

Presenting an analysis of past and current books with themes of loss not only supported the historical trajectory evidenced in the literature review, but also helped create a platform of knowledge from which to discuss the appropriateness of using fairy tales in schools, for bibliotherapeutic problem-solving.

Methodology for Researching Practising Teachers

Paradigms

The ontological principle underpinning the thesis assumes that the interaction between the social world and its inhabitants is flexible, rather than fixed and scientifically quantifiable (Oakley 2000, cited by Thomas 2013: 111). A positivistic paradigm, whereby outcomes are proven through testing hypotheses (McGregor and Murnane 2010: 5; Robson 2011: 21), was considered inappropriate for exploring the strength of an intuitive idea with no hypothesis. Post-positivistic interpretivism maintains that the social phenomena of the world cannot exist separately without interpretation, making objective analysis impossible (Repko 2011: 468). Rather than numbers, percentages and measured statistics, interpretivism relies upon 'the voice of the researcher and participants in the study' (McGregor and Murnane 2010: 6). Taking this into account, the use of a post-positivistic paradigm was considered the best design for data to be amassed from the voiced experiences of past and current generations. Moreover, interpretivism presumes that meanings from events and experiences will be constructed by social actors within their own world (Bryman 1988: 20, cited by Jupp 2006: 202; Schutz 1954, cited by Radnor 2002: 9). As cultures historically change, and social actors evolve, so social reality and what is acceptable constantly shifts.

An interpretivist paradigm therefore enabled a comprehensive overview of two sources of data: qualitative data and the quantitative data analysed qualitatively. However, despite interpretivists aiming to remain 'fair-minded, neutral observers' (Thomas 2013: 70), it would be difficult to entirely change the value position of a teacher-researcher working in the field of education. Consequently, the study strives for trustworthiness

(McGregor and Murnane 2010: 6) when interpreting historical and quantitative data. Table One clarifies the main differences between earlier positivist, and more recent interpretivist paradigms.

TABLE THREE: Positivism and Interpretivism

POSITIVISM	INTERPRETIVISM
The social world can be studied objectively.	Knowledge is everywhere and can be socially constructed.
The methods of natural science are appropriate in social science.	All kinds of information are valid and worthy of the name 'knowledge', even things 'of the mind'.
General accounts inform the specific.	Specific accounts inform each other.
The act of trying to know ought to be conducted in such a way that the knower's own value position is removed from the process.	The act of trying to know should be conducted such that the knower's own value position is taken into account in the process.

Content taken from Thomas (2013: 107)

Having decided on a post-positivistic, interpretive paradigm as the most useful and appropriate design, the methods used for accruing data are now discussed.

Method for questionnaires

Newton and Benz conclude that the purpose of research is the 'search for knowledge (or "truth")' (Newman and Benz 1998: 11). The two dominant paradigms for this purpose are epistemologically dichotomous. Quantitative methods are characterised by positivism, and measure evidence statistically. Qualitative methods, using mainly post-positivistic approaches, aim to interpret and understand society in the same way as the people within it (Katsirikou and Skiadas 2010: 9) without the need for statistics. Although quantitative research remains useful for emphasising measurable evidence (*ibid.*) the possibility that humans construct reality from the 'value-laden nature of human social interactions' (Newman and Benz 1998: 5) casts doubt on the effectiveness of singularly mathematical measures. Furthermore, Repko (2011) notes that a misconception of qualitative research is that valid results can only be produced from quantitative statistics (Repko 2011: 208). Ultimately Newton and Benz (1998) claim that rather than choosing between quantitative and qualitative methods, a combination of both (Newton and Benz 1998: 12) is the most effective approach. As the best means of addressing practical problems were sought, a goal advocated by Denscombe (2010: 149), both methods were used. For clarification, there is no suggestion that the research claims a 'mixed methods approach'. This would have required qualitative findings to share 'complementary strengths' (Cresswell and Plano

Clark [2007](2011), cited by Katsirikou and Skiados 2010: 12) with quantitative findings, achieving ‘a transformation of the data and their analyses through the other approach’ (*ibid.* 2010: 11). As significantly more data is qualitative, the strengths are not complementary in ratio; however, questionnaires were used effectively to broaden the knowledge base. This included addressing concepts from the literature review, such as the current definition of a ‘good death’ and the possibility that ‘embarrassed denial’ is prevalent in British culture,¹¹² affecting the policy and practice for managing bereavement in primary schools. In line with interpretivism, teachers’ feelings on teaching bereaved children added data to a neglected field. Although some data was statistical, and quantitative, for example how many teachers had taught bereaved children or had attended death and loss training; information from respondents was mostly interpreted qualitatively in keeping with a post-positivistic paradigm.

The approach to the research can be seen to be inductive, rather than deductive. Although some statistics emerged, a hypothesis was not being tested positivistically. Experimental, measured statistics were not employed to test a theory (Wisker 2008: 210), and variables were not measured by using an instrument to obtain scores ‘with the objective of testing a theory rather than developing it’ (Cresswell 2014: 59). Data were used qualitatively, looking for emerging patterns, themes and trends. The table below shows the differences in the two approaches.

TABLE FOUR: Contrasting inductive and deductive methods

Inductive	Deductive
Past generalisations presented from past literature or experience.	A hypothesis is formed and tested or a theory is verified.
Broad patterns, generalisations or theories looked for, from themes or categories.	The theory is used to test the hypothesis or research questions.
Researcher analyses the data to form categories and themes.	Measurable variables, such as characteristics, are defined and used from theory.
Researcher asks open-ended questions.	Variables are measured or observed using an instrument to obtain scores.
Information is gathered, which can be used for interviews.	

Adapted from Cresswell (2014: 59 and 66)

¹¹² Christian and secular

A further approach discounted was grounded theory, as themes and ideas were already emerging from the literature review before the data were analysed. In grounded theory, the expectation is that theory will be entirely generated from data (Glaser and Strauss 1967: 3, cited by Cohen, Manion and Morrison 2007: 492). The inductive methodology therefore looked for patterns, generalisations, themes and categories that could be seen across the theory in the field of past literature, and the findings from more current data. From the paradigm used, all knowledge was considered valuable and in accord with the interpretivist paradigm, quantitative data was employed to increase specific accounts that could inform each other. Further support for using some quantitative data comes from the discussion above that research is unquestionably value-laden. To address this shortcoming, triangulation was used (Hussey and Hussey 2003, cited by Wisker 2008: 68), whereby more than one type of data converged from more than one source (Hewson 2006: 180). However, it should be noted, that due to its age the data are by no means more important than other more recent thesis elements and should therefore be reviewed as a support to increased validity. The next section will expand the approach taken to acquiring quantitative data, by outlining the methodology for questionnaires, starting with the sample constituents.

Sampling: geography

In keeping with this mainly qualitative study, a purposive sample of thirteen schools within the geographical area 'A' of a county in Southern England (which was then largely homogenous with regard to ethnicity) was preferred to a random sample. A random sample might not have contained schools employing more than three teachers, making a higher probability of some schools returning a null response. At the time of sending the questionnaires, in 2009, 'Free Schools'¹¹³ were not available to sample. Given the limitations on the size of the study, the purposive sample focused on schools within a thirty-minute drive from the nucleus of the sampled area, which is classed as a region made up of mainly rural towns and villages¹¹⁴. The distance was a decisive factor in sampling, as in the original introductory letter to headteachers, I had offered to visit schools to present the questionnaires at staff meetings, and give more information to participants.

¹¹³ 'Free Schools' are independent non-profit making, state-funded schools. [online] Available at <https://www.gov.uk/government/policies/increasing-the-number-of-academies-and-free-schools-to-create-a-better-and-more-diverse-school-system/supporting-pages/free-schools> (accessed 27.4.15)

¹¹⁴ *County Profile 2012*

I also hoped it might be possible to interview respondents at a later date, making it essential to select schools that I could easily reach after a school day. Marshall and Rossman assert that the efficiency of a study relies partly on the researcher's ability to increase the opportunity for full responses to questions balanced against the time and energy available to the researcher (Marshall and Rossman 2006: 77). Within the sampled area, most schools were primary, with only five infant and four junior. The purposive sample therefore represented a roughly similar ratio of school types by selecting one junior, two infant and eleven primary.

Sampling: teachers

Cresswell (2014) defines the use of 'purposefully selected participants' (Cresswell 2014: 189) as those most beneficial for providing an understanding of the research questions (Cresswell 2014: 189). Despite already having commented that there is an imbalance of genders amongst primary school teachers, it was decided that the sample should not deliberately contain a stratification characteristic (Cresswell and Plano Clark [2007] 2011: 175) of predominantly female staff. This information, and the number of children on the roll (NOR) was available from school web sites. Schools selected comprised male and female staff, in case the variable of gender showed a particular trend in the questionnaire replies. The ratio of males to females was not in equal proportion to that of the wider population (Cresswell 2014: 159) however, it was in keeping with the population of teachers, represented by far more female than male teachers. Equally, the number of female headteachers outnumbered the male headteachers, with eight females and five male, reflective of the lower numbers of males choosing primary teaching.

Moreover, only teachers and headteachers were asked to contribute to the study. It is possible that had I suggested to gatekeepers that teaching assistants could complete questionnaires, the overall response rate would have been higher. However, it was equally possible that in suggesting assistants contribute data, some teachers could relinquish interest and not feel it necessary to respond. Furthermore, the literature informing the questionnaires had not explored the role of teaching assistants in schools. Although widely expected to use their initiative, teaching assistants work under the jurisdiction of class teachers' guidance for how bereavement should be approached with children.

Sampling: religious affiliation

Given the relevance of changing religious views to the research, it was important to represent schools of the religious affiliations available in the chosen area, represented by a heterogeneous sample of secular, Roman Catholic (R.C.) or Church of England (C. of E.). In the sampled area there were no Muslim, Jewish, Hindu or Sikh schools¹¹⁵ (indeed there are still none in the entire local authority¹¹⁶). Whilst the homogeneity of the geographical area suggested that similar, county level death education training would have been available to all respondents, it was possible that for church schools, diocesan affiliation was an additional factor in training provision. Having clarified the purposive sample, the next section will discuss the process of gathering data, beginning with the question format.

Question format

Closed

As stated, interpretivist paradigms consider all knowledge as valuable. Including closed questions, multiple choice questions and open-ended questions on questionnaires reinforced this theory. From the one hundred questionnaires sent to a sample of thirteen schools, quantitative data was gathered from fifty measurable closed questions, allowing contrasts to be made between answers across the sample (Oppenheim 1992: 115, cited by Cohen, Manion and Morrison 2007: 321). Closed questions were reserved for sections requiring largely quantitative data in which an opinion was not sought, such as age, gender, religion, school denomination and whether death and loss training had taken place in the last three years. Robson (2011) suggests the use of a clear 'frame of reference' (Robson 2011: 256) and for this reason some closed questions related to ranges of specified time periods (Robson 2011: 256). Furthermore, questions relating to areas which might be thought too invasive, such as respondents' ages, were in groupings of age ranges. Multiple-choice questions were mostly accompanied by prompts, to reduce the amount of writing required by respondents and to clarify the question area. This strategy is discussed in the chapter on Questionnaire Findings.

¹¹⁵ statistics Available at http://www.schoolwebindex.com/england/*****.php?religion=J [online] (accessed 3.11.14)

¹¹⁶ Directory of primary schools. [Online] Available at http://www.schoolswebdirectory.co.uk/leasearch.php?lea=*****&where=1&submit=Submit (accessed 30.4.15)

Open

Thirteen more open questions encouraged respondents to potentially reveal “gems” of information that otherwise might not be caught in the questionnaire’ (Cohen, Manion and Morrison 2007: 330). The respondents were directed to an overleaf space, allowing them to expand an answer. Detailing experiences in written comments provided answers to be analysed inductively for recurring patterns and themes. However, whilst Cohen, Manion and Morrison (2007: 321) note that open-ended questions allow respondents to qualify their response, they also warn that very broad replies can discourage respondents from answering particular questions, due to the time taken to reply. Nonetheless, Thomas (2013) suggests that open questions allow for central concerns to be communicated (Thomas 2013: 208). This likelihood can be endorsed by examining questions requiring qualification, as some teachers’ replies were more forthcoming and conversational than for other areas. Content for these areas related either to respondents’ personal biographies; their own bereavement experiences as children or adults; or their professional life at school. Each headed section contained numbered and sub-numbered questions for ease of researcher analysis.

Multiple choice

A few questions were multiple-choice, and asked respondents to choose from options or prompts. Examples are questions twenty-seven to thirty-one. These questions asked teachers to state the religion of some bereaved children they had taught; and should the children have experienced a death, teachers were asked to state the child’s relation to the deceased. If it was a different manner of bereavement, they were asked to specify the loss. Similarly, question thirty-eight was presented a multiple choice of grief symptoms to select from. It could be argued that some of the closed-answer questions were multiple-choice, as they did not allow expansion.

Data gathering

Pilot group

It was decided that before sending questionnaires to the sampled schools, advice should be sought from a pilot group. Maxwell (2013) commends the function of a pilot study and refers to an earlier example from Light, Singer and Willet (1990) stating that all designs can be improved by ‘a prior, small-scale exploratory study’ (Light, Singer and Willet 1990: 213, cited by Maxwell 2013: 66). Initially, a pilot group was not planned for, but became increasingly sensible as the thesis evolved and Robson(2011) agrees that the first stage of data gathering should involve the use of a pilot group and

that in flexible designs (Robson 2011: 405) where the research design develops during the research, this is often a small group who can give feedback (Thomas 2013: 215). Consequently, two months before finalising and posting questionnaires to schools, a pilot-group was approached. This was a class of around ten teachers, from schools known to be outside of the purposive sample, who were studying for an M.A. in Education.

Their feedback informed the decision to make some changes to the questionnaire question order, prioritising the question asking respondents to comment on their understanding of a 'good death'. It also allowed the opportunity to revise any misleading questions. The pilot group encountered problems with completing question thirty-seven, which asked respondents to comment on how discussing losses with particular children was for them and what would have helped them. The wording of that question was subsequently altered for clarification. A further decision made was that the questionnaires would be on yellow paper. This was to easily distinguish the questionnaires from the large volume of white paper in teacher's 'pigeon-holes'¹¹⁷ and so increase the chance of a better response.

Shortly after completing the pilot study, I attended a county-run course for literacy and encountered a teacher who had been part of the pilot group. The teacher recognised my name and suggested that I should include on my letter to schools the number of words required for the research. It was suggested to me that clarifying for participants the extent of the work involved in writing the thesis could elevate the importance of the study and increase response rate. On reflection, the subsequent letter to headteachers included this information. A further request from the same teacher was that I should include her school in the final sample. This was because the school had experienced the death of a child without any policy, plan or whole school agreement in place; a situation the teacher realised was unhelpful to the teachers. This conversation confirmed the usefulness and necessity of the research. As the research was anonymous, and the intention of a purposive sample is to improve understanding of the researched situation, I did not reveal whether the discussed school would be in the sample, but added the name to the list. However, before sending questionnaires to schools, the ethics of the research was explored and permission sought.

¹¹⁷ post-boxes

Ethics

The original ethics form detailed the possibility that two separate questionnaires would be sent to each school in the sample. The first would include a range of questions related to teachers' personal and professional biography and their personal experience of bereavement. The second questionnaire would ask questions about their experience of using books for helping bereaved children. This data was to contribute to the gap in British research about using developmental bibliotherapy for bereaved children in primary schools. However, from personal experience of teaching, it was later decided that the workload of respondents would make them unwilling to complete two forms, and all questions requiring analysis were amalgamated into a single questionnaire.

Informed consent

To reduce respondent sensitivity, and in accord with Hudson and Miller (Hudson and Miller 1997, cited by Cohen, Manion and Morrison 2007: 157) the nature and importance of the research was mentioned on the introductory letters to teachers. Furthermore, all respondents were ensured of anonymity; were alerted to the opportunity to withdraw from the study at any time, and were made aware that the information supplied would only be used for research. I included the address of my school and my personal email address and telephone number, should any respondent wish to contact me for further details. Additionally, their informed consent was requested and they were reminded that completing the questionnaire was voluntary. Marshall and Rossman (2007) state that ethical considerations of anonymity and informed consent should be typical in any qualitative research (Marshall and Rossman 2007: 82). Consequently, although some data was quantitative, and despite this study being non-participatory in that no researcher was *in situ*, the same code of ethics was employed as good practice.

Second ethics form

In the penultimate year of the thesis, it was decided to update specific, original data. A second ethics form was therefore completed before a further letter was sent to headteachers, in mid-2014. This was to ascertain whether the sample schools had since written a whole-school policy explicitly for day-to-day death and loss education. The letter made clear the rationale for the content of a death and loss education policy, to differentiate it from a critical incident policy and so avert any mis-understanding of the question being asked (see appendix). The original sample of schools was approached, and the headteachers asked to forward their policy, should one exist. Headteachers could delete their school name should they wish to preserve anonymity,

which is ethically in line with the good practice included in the *Data Protection Act 1998* (Chapter 29, part 4, section 33: 1-5)¹¹⁸ and in keeping with the thesis approach. However, before making this request, all school web sites were carefully checked for any new headteachers, so that letters were correctly addressed.

All schools had the option to post or email any existing policies either to me or to the Head of the school of Primary Education at the University of Chichester, within two weeks of the request. It was assumed that as the head of primary education was known to them, from school partnerships with ITE, the headteachers would be eager to confirm if their school had a policy and if I received no reply, it could be assumed that none existed. Several headteachers replied that they did not have one, and the remainder chose the option to not reply.

Gatekeepers for questionnaires

Robson (2011) emphasises that to elicit a reasonable response rate it is vital to include a covering letter (Robson 2011: 256), so a letter for teachers alongside a separate one only for headteachers, was sent to all headteachers with the pack of questionnaires. This allowed the headteachers to act as 'gatekeepers' so that respondents could be forewarned of 'sensitive' subject matter. The use of gatekeepers to access groups that might be vulnerable is a procedure validated by Robson (2011: 211). However, conversely, Robson (2011) notes that the over-protectiveness of gatekeepers can prevent participants from taking part, thus affecting research detrimentally (Robson 2011: 211), resulting in non-response bias. One headteacher replied on behalf of his staff that the school would 'not be interested' in contributing to the study, and that teachers were not to be given an opportunity to complete questionnaires. Whether the headteacher was being obstructive or protective is debatable. However, whilst Cohen, Manion and Morrison (2007) state that coercing respondents to complete questionnaires is not ethical (2007: 317) it could be argued that neither is it ethical to refuse them the opportunity to do so, but clearly this was out of my hands.

Non-response bias

The aim of this research was to contribute to, and fill the gaps, in research into how primary school teachers cope with children bereaved from death and loss on a daily basis. The focus of the sample was therefore not pupils, but the headteachers and teachers, and as such, the ethics review for the study related to adults. Despite one

¹¹⁸ Great Britain. *Data Protection Act 1998* (Chapter 29, part 4, section 33:1-5) [online] Available at <http://www.legislation.gov.uk/ukpga/1998/29/section/33> (accessed 21.4.15).

headteacher emailing me refusing to help, with no reason given, it was not thought likely that respondents would be unduly distressed at receiving questionnaires, beyond that which they would normally experience in their work. Similarly, returning the questionnaires was made as easy as possible, and stamped addressed envelopes were included with all questionnaires. Some schools chose to return replies via the inter-schools posting system, known as the 'black bag,' possibly because this saved a trip to the post office.

Having considered the need to explore bereavement and although confident of the ethics surrounding inclusion of questions relating to death, it was possible that some grieving teachers could cause non-response bias by avoiding those questions. Moreover, I have discussed the possible 'taboo' still surrounding invisible deaths, and note Farberow (Farberow 1963) who equates sensitive topics with areas of life that are 'surrounded by taboo' (Farberow 1963, cited by Lee 1993: 3). It is possible to agree with Lee, that in what I might very broadly characterise as 'British culture', there is an element of potential problems for researchers investigating topics 'laden with emotion' (*Ibid.*) which upholds the use of gatekeepers.

Interviews

Unfortunately, although four teachers provisionally agreed in principle to an interview, they declined a specific invitation at a later date. As respondents had neither included their e-mail address on the relevant part of the questionnaire nor e-mailed me to indicate their continuing interest, a second letter had to be posted to headteachers so that teachers could contact me should they still agree to an interview (See appendix). It is impossible to say with certainty why teachers would not be interviewed. It was however, unsurprising, given the theme of embarrassed denial revealed in the literature review and findings, and the heavy workload of primary school teachers. Whilst teachers have always claimed this, the situation is emphasised in recent DoE research (February 2015) about reducing unnecessary workload in schools¹¹⁹. Nonetheless, the questionnaires were intended to inform follow-up, semi-structured interviews with respondents, in an attempt to gather more detail (Cresswell 2014: 19). Such interviews rely on discussion of pre-planned topics, with the inclusion of unplanned questions, based on the interviewee's responses (Robson 2011: 280). Although the lack of

¹¹⁹ DoE (2015) *Workload Challenge: Analysis of Teacher consultation Responses. Research Report*. [online] Available at https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/401406/RR445_-_Workload_Challenge_-_Analysis_of_teacher_consultation_responses_FINAL.pdf (accessed 30.4.15)

response meant that interviews did not occur, the ethics of interviewing respondents was researched, to be employed after receipt of completed questionnaires (see appendix).

Methodology for Evaluation of Bibliotherapy

The use of story and problem-solving is already imbedded in the curriculum, as is the inclusion of fairy-tales, as seen in chapter five; but the use of bibliotherapy in primary schools for problem-solving is under-researched in Britain. Its inclusion in the thesis is therefore relevant for three main reasons: to make an original contribution to knowledge, to fill gaps in knowledge, and to add to and support the discussed research suggesting that bereaved children can be helped via the curriculum. A scrutiny of the research in the field not only confirmed British bibliotherapeutic research as a neglected area, hence justifying its inclusion as a chapter, but also enabled a description of different categories of bibliotherapy. This verified that developmental bibliotherapy was the most applicable process for teachers to use. By inductively analysing data from theorists and practitioners outside of Britain who have successfully implemented the bibliotherapeutic process (Pardeck and Pardeck 1984: 3, cited by Schlenker 1999: 30), significant information was gathered. This informed the questionnaire section asking teachers if they used books with bereaved children.

However, in keeping with the inductive model and the interdisciplinary design of the thesis, questions in this area were not based on only the research on bibliotherapy. The assumption that bereaved children could be helped to problem solve through the Identification process outlined in the bibliotherapy chapter, draws support from several inter-linking thesis areas, including:

- the ideology of reader-response in the Children's Literature chapter;
- the past and recent research into the psychology of loss in chapter two;
- research on the use of fairy tales for problem solving in chapter four;
- the research of the primary curriculum in chapter five, and the researcher's professional-practice knowledge from teaching Key Stage one.

The inclusion of bibliotherapy research is both innovative and appropriate to the research into death education, and for the suggestion that teachers who are not educational psychologists could incorporate part of the process into the classroom.

Methodology for Analysing Educational Policy

A significant area within the thesis is the lack of training for teachers for the daily management of bereaved children from the scant provision of death and loss education, through either ITT¹²⁰ or CPD¹²¹. To gain a broader picture of how the situation has emerged, the history of educational policy was examined following a trajectory from 1870 to 2015, parallel to that of the literature review and the analysis of children's literature. The interpretivist methodology underpinning this chapter concedes the subjectivity of the researcher's own value position in collecting data, suggesting the importance of reading as many different types of documentary evidence as possible. Hence, a range including: Select Committee Reports; Acts of Parliament; Ofsted Inspection Acts, once-funded government initiatives and the new primary curriculum (DoE 2014) were examined for their cumulative influence on primary school policy. This wide reading suggested a significant finding of the thesis to be the possibility that 'embarrassed denial' remains an over-riding factor in under-provision for death and loss education in schools.

However, with the exception of some more recent studies, Crenshaw (1995) Eiser *et al*¹²² (1995), Bowie (2000) Holland (2001), Jackson and Colwell (2002) Rowling (2003) and Potts (2013) past educational research has largely focused on teachers' personal attitudes to death, rather than their classroom practice in managing bereaved children. Consequently, areas evolving from the analysis of policy led to specific questionnaire questions, allowing teachers to state their experiences and feelings about speaking with bereaved children thus contributing data to an under-researched area.

CHAPTER CONCLUSION

The problem of why there is negligible death and loss education in primary schools is a real-world problem, and as such, an inter-disciplinary paradigm was the best design for research. It presented the most appropriate medium for answering the questions transpiring from the literature review, and suggested the most plausible method for analysing data from other complementary chapters. The employment of an inter-disciplinary approach has allowed the thesis to raise social world issues, explore their effect on the micro-culture of primary education and so broaden and enrich the area of teacher research. A post-positivist inductive paradigm was chosen for examining related but distinct epistemologies to accrue as much information as possible for

¹²⁰ Initial Teacher Training

¹²¹ Continuing Professional Development

¹²² Eiser C., Havermans T., Rolph P. and Rolph J. (1995)

exploring how and why the situation of embarrassed denial exists in British culture¹²³, and the micro-culture of schools.

However, as there are limitations of post-positivist research, which confirms truth from only one piece of research (Robson 2011: 23) it was wise to follow advice from Robson (2011) who suggests that should other studies find similar truths, there can exist greater confidence in the results acquired (*ibid.*). For this reason, reference has been made to past and recent research with a similar conceptual framework and also using an inductive approach to explore the situation in schools. This enabled comparison, and confirmation of the trustworthiness of the methodology. Research by Crenshaw (1995) Eiser *et al* (1995), Bowie (2000), Holland (2001), Jackson and Colwell (2002), Rowling (2003) and Potts (2013) collectively reveals that primary schools are not all adequately supporting teachers and pupils in death and loss education. Furthermore, as the thesis began with an intuition, rather than a hypothesis, a positivist paradigm was inappropriate, and scientific testing unnecessary for generating trustworthy data, as found from the two data-gathering methods employed. By realising that qualitative and quantitative methods were not necessarily dichotomous, but could be used as complementary vehicles for gathering data, a broader database evolved, enriching the thesis. The use of an inter-disciplinary, post-positivist and inductive approach using different methods of data gathering is therefore upheld as the most appropriate design for the research.

¹²³ Not necessarily non-Christian.

Chapter 4

ANALYSIS AND FINDINGS OF THE TREATMENT OF DEATH AND LOSS IN CHILDREN'S LITERATURE

CHAPTER INTRODUCTION

I have already explored the detrimental effects on British society¹²⁴ of cultural death denial and it is suggested that 'embarrassed denial' can prevent adults discussing death with children. The content of more recent 'compassion' books¹²⁵ suggests that whilst more children's literature is now more likely to allude to death, particular deaths remain unnamed¹²⁶, suggesting that denial of terminal illness has become a specific embarrassment. An examination of some classic children's stories suggests that nineteenth and very early twentieth century authors were more at ease with writing about death and mourning, and the likelihood is that it was once generally acceptable to discuss death with children. Having previously outlined the effects of world wars and religious secularisation on changes in attitudes towards mourning, and the consequential decline in openly discussing deaths, this chapter will explore whether the changing perception of 'good death' is substantiated from children's literature. Also examined will be whether authors' experiences of childhood bereavements are revealed through metaphoric language in stories. The difference between texts and picture books with themes of loss will also be discussed.

As 'most studies of death in children's literature have been descriptive rather than analytic' (Moore and Mae 1987: 54, citing Kimmel 1980), the analysis of some loss-related book content fills gaps in knowledge in the fields of English, history and education. A particularly valuable contribution to the thesis is an analysis of books depicting child-attended death ritual and the classic books referred to will be representative of different eras to reflect changing cultural views: *The Fairchild Family* (Sherwood [1818]); *Jessica's First Prayer* (Stretton [1861]); *Peter Pan and Wendy* (Barrie [1911]); *The Lion, the Witch and the Wardrobe* (Lewis [1950]); *Tom's Midnight Garden* (Pearce [1958]); *The Snowman* (Briggs [1978] 2013); the translated *Granpa* (Burningham 1984a; Burningham and Korschunow 1984b) and the more recent picture-book *The Copper Tree* (Robinson and Stanley 2013). Also examined are two books for children of divorce: *Two Homes* (Masurel 2002) and *It's Not Your Fault, Koko*

¹²⁴ This is a statement not necessarily representative of all religions in Britain.

¹²⁵ Books written to help children overcome trauma.

¹²⁶ Unless specifically written for a charity such as *Winston's Wish*.

Bear (Lansky and Prince 1998). I begin with discussing a short history of changing children's literature.

HISTORICAL CONTEXT

Adult and child

Holmes (2012) asserts that 'the term "children's literature" has been the site of conflict almost from its inception as a category' (Holmes 2012: 133). Although there is now a clear demarcation between adult and children's fiction (with the exception of cross-over fiction¹²⁷) the separation of adult and children's books within the genre was originally unnecessary. The earliest stories were oral, and intended as much for adults as for children. They were most likely short, fictional tales with 'a specific moral or behavioural lesson to teach' (Grenby 2009: 10) and as such helped maintain a cultural equilibrium. Oral stories were essential, as compulsory schooling for children aged five to ten years was not legislated until 1880, before which there was widespread illiteracy. For those children who could read, books primarily intended for adults such as *Pilgrim's Progress* (Bunyan 1678) were among the limited texts available.

Fables

In the late seventeenth century, children were culturally perceived as small adults. The philosopher John Locke (1693) aimed for childhood to be seen instead as a unique developmental stage of growth. In his ground-breaking essay *Thoughts Concerning Education* (Locke 1693, cited by Darton 1982: 17), Locke suggests that adults have a responsibility to educate children; an assertion that has to some extent remained tangible in British culture. Although fables were originally written for adults (Grenby 2009: 11) *Aesop's Fables* was one of only two books proposed by Locke as fit for children to read (Grenby 2009: 13) as the instructional stories were thought an appropriate way for children to learn simple lessons (Whitley 1997, cited by Grenby 2009: 16). Whitley (1997) argues that from the mid-eighteenth century, authors influenced by Locke explored fables as a means to teaching children to work out the lessons for themselves (*ibid.*). They can therefore be considered early problem solvers, reflecting cultural and moral expectations while simultaneously helping to perpetuate them.

As Patterson(1991) maintains that the fable message 'must always be understood in its social-historical context' (Patterson 1991, cited by Zipes 2012: 13) fables are

¹²⁷ See Reynolds (2005: 37).

relevant to discuss for their influence on past culture. However, although from the eighteenth century the success of fables categorises them as ‘children’s literature’ (Grenby 2009: 13) it was not until the mid-eighteenth century, following the increase in personal attention given to children’s needs (Rustin and Rustin 2001: 5) that books for children became a recognised genre (Darton 1982: 1; Ariès 1962, cited by Rustin and Rustin 2001: 5). From their content, books with moral messages can be seen as examples of extended fables, (one of these being *The Fairchild Family*), an analysis of which follows.

NINETEENTH-CENTURY BOOKS

Books for improvement

The need for children’s books to be both educational and moral was undoubtedly influenced by socio-historical events, well exemplified by nineteenth-century Evangelicalism¹²⁸. Following requests from the Sunday Schools, Evangelicalism brought about an increase in the publication of religious tracts. Their prime aim was to ‘improve the characters of the young’ (Houlbrooke 1989: 136) and as can be seen from what follows, portray death as a ‘happy release from earthly suffering’ (Houlbrooke 1989: 141). This is understandable, as the highest number of infant deaths ever recorded occurred at the end of the nineteenth century, with 220 children dying out of every 1000 births¹²⁹ (Reynolds 1994: 16). The author Stretton’s central characters were always uncorrupted and pure (see *The Norton Anthology of Children’s Literature*, Zipes 2005: 533),-including the protagonist in best-selling *Jessica’s First Prayer* [Stretton: [1861]; [1867](2009)].

The Fairchild Family

Good death

The Fairchild Family (Sherwood 1818) details the early nineteenth-century, cultural expectation that children could die young. It demonstrates the belief that God-fearing children, obedient to parents, would have a ‘good death’ or a ‘happy death’ (see Sherwood 1818: 286). Reynolds (2005) asserts ‘it is a book which regarded children as the products of original sin’ (Reynolds 2005: 39) and is full of religious instruction and a

¹²⁸ The Religious Tract Society (RTS) was founded in 1799 and by 1810 was targeting children (Grenby 2009: 213).

¹²⁹ This figure relates to the first year of life.

'modality'¹³⁰ that assumes the reader shares the writer's viewpoint (Reynolds 2005: 39). It is therefore a good example of a book shaped by, and shaping, culture. The extended fable is '*vigorously and persuasively moralistic*' (Watson, Bearne and Styles 1992: 14) and the language is unashamedly Evangelical and unswervingly didactic¹³¹:

'Oh mama,' said Emily, 'what a naughty girl I have been! ...I thought God would take no notice of my sin. But I was much mistaken. His eye was upon me all the time...When I was ill I might have died.' (Sherwood 1818: 66)

Sherwood weaves a story around an extended sermon, with the instruction for achieving a 'good death' written as much for the adult as the child. Doubtless, Sherwood is reflecting the culture of the early nineteenth century as much as she is shaping it. The book is littered with references to dying and death, with three main examples being the death of an old man, of the child Augusta and of little Charles Trueman. Furthermore, the book clarifies that in early nineteenth-century Britain, children commonly participated in death ritual. There is no suggestion of any unusualness or taboo in children attending funerals or viewing a corpse, notwithstanding the advanced decay in the one visited described as, 'a kind of disagreeable smell, such as they never had smelt before' (Sherwood 1818: 14).

In contrast with many later books published for children, in which the virtue of a *Swallows and Amazons* (Ransome: 1930)¹³² Arcadia seems mandatory to happy childhood, the dying protagonists in Sherwood's nineteenth-century book are mostly children. The importance of putting oneself last, and God first, is exemplified in Augusta's death. Despite her worldly wealth, Augusta is disobedient and meets an early death from burning. The book clarifies that worse than the pain of burning, (surely suggestive of hell-fire), is the fact that Augusta dies knowing 'nothing of the evil of her own heart, and nothing of the Redeemer, nor of the sin of disobedience to her parents' (Sherwood 1818: 159), resulting in a 'bad death.' In contrast to the erring Augusta, the 'happy death' of pious and aptly named Charles Trueman, whose illness purportedly begins at the time of Augusta's death, is recorded in detail, ending with Charles' pious

¹³⁰ Modality is a term used to explain how an author uses persuasive language to convince the reader, e.g. 'Clearly, this is the case;' 'As you can see...'

¹³¹ The term 'didactic' is most popularly explained as 'teaching', i.e. the book is instructional and sets out to teach the reader (See Hunt 1994: 3), although it can also mean 'informative'.

¹³² A 1930 adventure book by Arthur Ransome.

thought 'I will be satisfied when I awake in thy likeness' (Sherwood 1818: 298). Not only does Charles reveal that he knows he will soon die, but in keeping with the piety of Evangelism, Henry reassures him 'you will be happier in heaven than you are here' (Sherwood 1818: 282). Unless Sherwood was attempting to radicalise views, her book reveals that her target audience of children were used to premature deaths.

Whilst 'embarrassed denial' causes twenty-first century adults to worry whether any information is too much, Sherwood clarifies the unpleasantness of death. She states that 'even the death of those whose souls are redeemed is a dreadful sight' (Sherwood 1818: 293). Although the instruction for achieving a 'good death' would have been written as much for the adult as the child, Sherwood urges the implied child reader to read the funeral service, stating 'I would advise you to read it immediately, and consider it well' (Sherwood 1818: 158). Read today, the book seems cloyingly didactic and excessively suffused with religious lessons, interspersed with hymns, prayers and biblical verse. However, not only is the importance of religion and 'good death' clearly defined, but the role of children in nineteenth-century death rituals is confirmed. Whilst some stories were undoubtedly used as a platform for political reform, they were no less popular for it. The Methodist, Hesba Stretton, published many books for children clearly aiming to impart a religious message and to evoke pity for the suffering of children, in the same way that Andersen had addressed poverty in *The Little Match Girl* (Andersen: 1845).

Augusta's funeral

A detailed description of Augusta's funeral, attended by 'almost all the ladies and gentlemen of the neighbourhood' (Sherwood 1818: 157), supports the suggestion above of community involvement for funerals at the time. In the text, all three children 'stood very close to the coffin, crying bitterly' (Sherwood 1818: 158). There is no suggestion that immaturity or the sadness of the occasion should excuse the children from attending a funeral. Sherwood narrates a full account of what to expect, including the wearing of crape and a black-covered hearse, with black or white-feathered horses' plumes 'according to the age of the person to be borne' (Sherwood 1818: 157). Whilst there are no references to the state of *extended* mourning in the book, there are many examples of funeral etiquette and it is as much a manual on what to expect from dying, as it is a religious lesson.

***Jessica's First Prayer* [1861]; (1867)**

Happy death

This book is certainly moralistic, but also demonstrates that virtue is waiting within oneself, requiring only to be 'awakened' (Grenby 2009: 81). Books of this genre suggest that everyone has the potential to be virtuous by following the example of the protagonist. Although Jessica happily awaits death, she is spared by her faith and her prayer, and is therefore treated more optimistically than Charles Trueman, who Sherwood did not spare.

There was a very sweet yet surprised smile upon her face... 'Our Father... I asked you to let me come home to heaven; but if Mr. Dan'el wants me, please to let me stay a little longer, for Jesus Christ's sake. Amen.' (Stretton 1867: 92)

Changing views

The perception of a Heavenly home is still prevalent in the text, suggesting that religious views were unchanged, however the book demonstrates changing attitudes towards children, particularly in the middle-classes, that had begun with the earlier Romantics of 1770-1848.¹³³ Books of this genre allow the middle-class child to show benevolence towards the deserving and lower-class poor (Hunt 2004: 45) whilst retaining equilibrium in the class structure. By 1882, following social, economic and educational reforms, the elite young 'were no longer regarded as sinners but as little angels' (Ellis 1963: 31). Hunt (2004) agrees that the sentimentalised view of childhood, becoming more noticeable in the late 1880s with books such as *Little Lord Fauntleroy*, promoted the idea of the 'beautiful child' and children remained 'protected' until the early 1920s (Hunt 2004: 51). *Jessica's First Prayer* is a good example of a late nineteenth-century book exemplifying a change in how children, particularly girls, were perceived. However, the story also demonstrates that at this time, the content of books for children existed more for the approval of the implied adult reader than for children's amusement and reveals the cultural perception of 'suitable' children's literature.

TWENTIETH-CENTURY BOOKS

A trend away from didacticism

After the early twentieth century, children's books were more likely to be adventures with 'stereotyped characters and ideas' (Carpenter 2009: 16) or stories with 'talking animals or toys, or inexplicable magical events' (Carpenter 2009: 16). Classics such as

¹³³ The Romantic period extolled the virtuousness of children as being 'in a higher state of spiritual perception than adults' (Carpenter 1985: 8).

Peter Pan and Wendy (Barrie [1911]; 2005) and *The Chronicles of Narnia* (Lewis: (1950) could be said to encompass all of the above. In support of firstly the cultural history outlined above, and secondly the far-reaching effects of loss on children, I now reflect on the previous chapter's research and turn to a partly psychoanalytical analysis of several texts, beginning with *Peter Pan and Wendy*. This is a particularly relevant book to analyse, as it was written before the discussed turning point of the Great War and because Barrie experienced traumatic losses in childhood. The book also reinforces the premise that fantasy literature provides children with a base from which to act out 'not only real or imagined damage but also the desire for reparation' (Bosmajian 1999: 106). The cathartic writing of authors as an attempt to come to terms with childhood loss is clear from the following accounts.

Peter Pan and Wendy

Rose (1984) states that *Peter Pan and Wendy* (1911) is an early twentieth century book written specifically for children (Rose 1984: 66). In contrast, Holmes argues that it remains an example of an early twentieth century book written for both child and adult (Holmes 2009: 140). Clearly, *Peter Pan and Wendy* is the ultimate adventure story, but one in which the undercurrent of loss and the effects of unresolved bereavement are always present. Furthermore, it exemplifies the cultural view that childhood should be protected and cherished, not accelerated (Gilman 2005).¹³⁴ Peter re-emphasises: 'I just want always to be a little boy and to have fun' (Barrie 1928: 111). Adulthood is perceived to be not fun. Living with Mrs. Darling would begin Peter's journey into adulthood and a loss of innocence, but for Peter 'there can be no maturity, no increase in wisdom, no procreation, not even death' (Carpenter 1985: 180).

Resonating with themes of death and loss, revealing a culture used to community death ritual and discussing death with children¹³⁵ the narrator in *Peter Pan and Wendy* refers to dying children, stating that 'when children died, [Peter Pan] went part of the way with them, so that they should not be frightened' (Roth 2006: 58). Peter's role of surrogate parent is interesting, given Barrie's own parental insecurity. Furthermore, *Peter Pan* is relevant for discussing the effects on Barrie of a succession of unresolved childhood losses and the metaphoric material exemplifying them. It is therefore a relevant text to explore, for its ongoing effect on culture, and for demonstrating both the

¹³⁴ From online journal *The Looking glass: New Perspectives on Children's Literature*, 9 (3) <http://www.lib.latrobe.edu.au/ojs/index.php/tlg/article/view/32/36> (accessed 17.3.14)

¹³⁵ Later, post Great War showings of the play, which preceded the book *Peter Pan and Wendy*, had to omit the line: 'To die would be an awfully big adventure'.

long-term effects of bereavement, and the importance of adult support for bereaved children.

Sibling death and mislocation

When Barrie was six, his elder brother David died aged thirteen (Carpenter 1985: 171). It is therefore unsurprising that *Peter Pan* never grows up, but remains a child, not having to cope with the real world. *Peter Pan* provides a platform for Barrie to retell the story of David as well as retell his own story. Becker and Knudson (2003) suggest that there is a ghost behind every story (Becker and Knudson 2003: 714, cited by Mallon 2011: 7), and in *Peter Pan and Wendy*, the ghost is probably David. Ultimately however, it is unclear whether *Peter Pan* is David, who never did grow up or Barrie, who 'retained a markedly boyish look into old age' (Carpenter 1985: 173). Carpenter explores the conundrum and asserts that the primary model for Peter is Barrie, but that David is a contributory figure (Carpenter 1985: 177). Nonetheless, most likely is Carpenter's definitive suggestion that 'Peter is in a sense, made up of many people' (Carpenter 1985: 177). Unable to reconcile herself to the loss of David, Barrie's mother continued to keep David's childhood memory alive (Carpenter 1985: 177) as much as Barrie helped her to do so. To please his inconsolable mother, Barrie submerged his own identity and emulated the dead David, dressing and whistling like him.

Field (2006) asserts that an inability by the bereaved to integrate the loss of a loved one results in 'mislocation'¹³⁶ a term used by Bowlby (Bowlby 1980), possibly causing parents to supplant the dead child with the one still living. Similarly, the need for continuing bonds with a dead sibling (Klass, Silverman and Nickman 1996, cited by Mallon 2011: 5) can cause the remaining child to act in a way that would have pleased the deceased child (Mallon 2011: 5). Recent research further suggests that the imitation of the deceased is a normalising grief response in children (Goldman 2006: 74) as is to 'tell and retell their story' (Goldman 2006: 73).

Object-relations

In the 1911 book of the original play, the theme of attachment and loss links to Kleinian Object-Relations theory. Peter is separated from his shadow, which can be regarded as his 'object' (Amiran 2012: 177) a situation which can only be remedied for Peter by sewing the object back on, or tying it to himself (Amiran 2012: 177). Winnicott's work on transitional objects and the use of string to connect objects together symbolises the

¹³⁶ A term meaning a failure by the living to acknowledge the death of a loved one.

perceived threat of separation from the mother (Winnicott 1989:16, cited by Amiran 2012: 177). The need for Peter to attach his separate shadow to a part of himself, without which he is not whole, resonates with Barrie's tenuous childhood hold on his own mother. Reality testing for Barrie was in his attempt to retain an attachment with a depressed, 'not good enough' (Winnicott 1985: 56) mother. Her inability to interact with the real Barrie made the attachment less secure. The final part of *Peter Pan and Wendy* is particularly revealing of the unstable relationship between Barrie and his maternal 'object'.

Reality testing

It ends with Mrs. Darling's reunion with the children back in the Nursery, to which Peter, an uninvited onlooker, can be convincingly interpreted as a reflection of childhood loss suffered by the bereaved Barrie. Peter is described as 'looking through the window at the one joy from which he must be forever barred' (Barrie [1911]; 2005: 141). This echoes Bowlby's work on maternal attachment. In expressing both Barrie's struggle with bereavement and loss, and the cultural attitude to children and death at the beginning of the twentieth century, the analysis of *Peter Pan* is relevant. Barrie's use of real and unreal characters, in real and fantasy settings, illustrates competing 'home' and 'away' worlds. The safety provided by the former to explore the latter echoes the discussed 'reality testing' that helps children understand and cope with the significance of death. However, there is a sense of unreality in the Nursery and in both Barrie's worlds, there is always the impact of loss to manage. Consequently, Peter must either grow up and lose the fantasy Neverland, or remain a child and lose the real Wendy. Arguably, Barrie's attempt to come to terms with childhood loss is projected onto Peter, who can be regarded as a boy with a tenuous grip on reality. As Peter states 'I want always to be a little boy and never grow up' (Barrie 1928: 32). Peter is ageless, sexless, and immortal, and therefore at odds with the reality of being and ultimately, dying.

The culture of the audience

Belsey (1980) argues that culture is shaped by stories, and stories are equally shaped by culture, which is clear from reading the story. She asserts that people are the products of history itself, or even product and producer concurrently (Belsey 1980, cited by Sarland 1999: 46). The times in which a book is written, and its intended audience, are unavoidably linked to cultural events. As such, something is lost in translation by readers from one time period to another, a view upheld by Rose (1984), who suggests that 'as *Peter Pan* very clearly demonstrates, if we are talking to one

group of children, then the chances are we will not be speaking to another' (Rose 1984: 7). Twenty-first century children could disregard cues intended by Barrie for an earlier audience, however the potential for empathy with Peter might be stronger in children bereaved of mothers, and it remains an ideal text to read and discuss with children.

BOOKS FROM THE 1930s TO THE 1960s

Pleasure as goal (with didacticism)

As the twentieth century progressed, evidence that the implied child reader became the preferred target audience for authors of children's literature can be seen from the change in literary content. Books became less overtly moralistic and more fantastic. A change in how children's literature was perceived is portrayed in Darton's 1932 definition of children's literature as:

...printed works produced ostensibly to give children spontaneous pleasure and not primarily to teach them, nor solely to make them good nor to keep them profitably quiet. (Darton 1932: 133)

Arguably, even an author attempting to create pleasure-seeking reading suggests a type of didacticism (Nodelman 2008: 255), which can be better understood by examining a book from *The Chronicles of Narnia* (Lewis: 1950-1956), written by another author deeply affected by loss, both in childhood and adulthood.

***The Lion, the Witch and the Wardrobe* [1950] (1960)**

The first published book in the *Chronicles of Narnia* was published five years after the Second World War and demonstrates the dualistic elements of instruction and pleasure particularly well. Whilst Lewis states it is 'a fairy tale to escape to' (Gray 1998: 61) it is also inescapably moralistic, and there is therefore something of the extended fable about the book. The preference for prized virtues of forgiveness, trust and loyalty shown by the protagonists emerge in opposition to the lesser traits of ruthlessness, distrust and deceit. The relevance to the research of *The Lion, the Witch and the Wardrobe* is twofold: the theme of death and loss, and the influence of religion.

Death and loss

Gray (1998) asserts that the imaginative writing of Lewis is 'all about death' (Gray 1998: 53) and arguably, it is all about loss. It is therefore a good example of a fantasy text emphasising escapism from death and loss whilst conveying the emotions associated with grief. Written near a time of widespread submerged mourning, many

children had recently been evacuated, orphaned or made homeless. Whereas the safe home as the ultimate place to be is shown above to be a common theme in children's books (Nodelman 2008: 66) the book reflects the uncertainty of a post-war world in which it was common for children to have lost a secure home setting. However, no matter what happens in Narnia, the children always return to the Professor's house, which provides 'good enough' protection. Lewis's book merges the binary opposites of reality and unreality, where the real world of 'home' opposes the unreal world of 'away'. Nonetheless, similar to *Peter Pan and Wendy* (1911) and *Tom's Midnight Garden* (1958) 'away' seems real when the children are there, despite time slips.

Religion

The book was published in the British post-war culture of increasing secularism. The scene in which Aslan surrenders himself for the children's sins, before resurrection (Wilson 1991: 220), is undoubtedly influenced by Lewis's conversion to Christianity in 1931 (Wilson 1991: 133). Aslan's return to life from death provides a happy, Christian-influenced eschatological ending, but also sanctions a cultural death-denial.

'Aren't you dead then, dear Aslan?' said Lucy.

'Not now', said Aslan. (Lewis 1960: 147)

For any child still in the 'Magical Thinking' age, this part of the story needs adult interpretation. Whilst the story subtly grapples with the issue of faith and morality, the virtue of truthfulness is explicit, adding an instructional element to the text. Similarly, Aslan's resurrection, categorised by Tolkien as 'the mark of the true fairy story' (Gray 1998: 64), is juxtaposed between religious didacticism and fantasy. Replicating the 'Doubting Thomas'¹³⁷ of the Christian gospels, Lucy was doubted by her siblings because apart from Edmund, who denied Lucy's recount of Narnia (1960: 41), no-one else had been through the wardrobe. Ultimately, the professor states:

'Either your sister is telling lies, or she is mad, or she is telling the truth.' (Lewis 1960: 47)

Despite lack of evidence, and having ruled out the other possibilities, Lucy is considered truthful. It is nonetheless resonant of the best fairy tales, where suffering and loss are usually stepping-stones towards happiness, and where valour triumphs

¹³⁷ From the gospel of John chapter 20: verse 27

over adversity. As with Barrie, Lewis's own childhood in Ireland is thought to have influenced his writing. At the age of nine Lewis reportedly 'was marked for life by his mother's death' (Adey 1998: 5). Furthermore, within two months of his mother dying, preceded by the death of his grandfather, Lewis was sent to school in England, losing his home, his grandfather, his mother and his absent, emotionally distraught father (Wilson 1991: 21) in quick succession. It can reasonably be argued that so many unresolved childhood losses impacted on Lewis and that the grief carried into adulthood was cathartically managed through stories.

Mothers and transitional objects

This premise can be upheld by exploring the psychoanalytic references to mothers in both books. Faced with maternal loss, and realising that there is no securely attached 'good mother' (Mitchell 1986: 165) the Narnia children echo Lewis's own experiences. They either try to fulfil the role themselves or seek a mother replacement. In *Peter Pan and Wendy*, Peter and the lost boys successfully envisage the child Wendy as a potential mother:

'O Wendy lady, be our mother'. (Barrie [1911] 2005: 65)

In *The Lion, The Witch and The Wardrobe*, Susan the eldest evacuee, manages only an unsuccessful attempt at mother-like language and is not credible to her siblings as a mother-figure:

'Trying to talk like Mother', said Edmund. (Lewis 1960: 10)

Edmund's need for maternal support leads him to unwisely choose the exotic patronage of the 'bad mother' White Witch, rather than the 'good enough' Mrs. Beaver. The White Witch can be assumed to represent Lewis's 'bad breast' absent mother who 'rejected' him by dying (Holbrook 1991, cited by Gray 1998: 77). Both mother figures use the provision of food to help form attachments. Jadis, the White Witch uses 'bad for you' Turkish Delight (Lewis 1960: 37) while Mrs Beaver uses good, honest fare (Lewis 1960: 70) but the supplying of food renders both examples of maternal attachment more Freudian than Kleinian in philosophy, as discussed above.

Wardrobes

Examining the alleged relationship of a transitional object to symbolism valorises the premise that the wardrobe portal is a symbol for transition from childhood and

egocentrism, to adulthood and objectivity. Winnicott (1985) maintains that such symbolism can only be properly studied as relevant to 'the growth of an individual' (Winnicott 1985: 7). It can be argued that the wardrobe is the gateway to personal growth. For Edmund particularly, a central theme in the story is his gradual moral development as he learns to be honest, progressing from doing 'the meanest and most spiteful thing he could think of' (Lewis 1960: 44) after first entering the wardrobe, to being labelled 'Edmund the Just' (Lewis 1960: 167). The use of the wardrobe provides a means for the children to become virtuous from within, reminiscent of the progress made by Jessica in *Jessica's First Prayer*, and clearly didactic. Whilst the discussion above reveals the complexity of the material, it is also clearly an outlet for expression of Lewis's religious conversion and unresolved childhood bereavement. It is therefore a good example of the way in which a culture shapes a book and how a writer uses personal experience to shape culture through the reader.

Tom's Midnight Garden (1958)

Bereavement as a feeling

Written thirteen years after the Second World War, *Tom's Midnight Garden* (Pearce 1958) is a book typifying the trend for books written in England between the 1950s and 1970s (Carpenter 1985: 217). From a psychoanalytical reading of the book, Rustin and Rustin assert that during the story, the characters in *Tom's Midnight Garden* keep good feelings alive whilst they are 'in a state of 'loneliness and loss' (Rustin and Rustin 2001: 32). The idea that bereavement is about feelings, rather than Heaven replaces the nineteenth century religious didacticism. Hatty, one of the focalising¹³⁸ characters exemplifies this as she moves from the child bereaved from parental death, to the adult bereaved of two sons in the Great War. Furthermore, the book demonstrates that perceived lesser losses impact significantly on children. Tom feels the loss of his home, his brother, his parents and his long-awaited school holiday. Tom Long's removal from his measles-infected brother reflects Pearce's own experience of a long stay in hospital from tuberculosis. The book details a story of coming to terms with losses, and is a textual reminder of the infant management of reality through play, discussed next.

Gardens and reality

Rustin and Rustin (2001) suggest that through play, Hatty comes to terms with the reality of her loss. By identifying with and playing with Hatty, Tom is able to explore the retained memories of his family and home, and by the end of the story Tom feels the

¹³⁸ The character from whose viewpoint the story is told

additional loss of his attachment to Hatty (Rustin and Rustin 2001: 31). To implied child readers, a significant message is that consecutive losses can occur. The daytime garden is in Tom's real childhood time, but at night it is in Hatty's childhood time. The fantasy world of the garden is, as in Narnia, a portal for the journey from childhood into adulthood and a metaphor for the imaginative time of dreaming 'in between internal and external reality' (Rustin and Rustin 2001: 36). The real, daytime garden is the world of loss and internal reality where Tom's internalised attachments and unresolved losses exist. The unreal, midnight garden is the world of imagination and external reality, although in the story it is as real for Tom as the daytime garden (Rustin and Rustin 2001: 36) in the way that Narnia is real in the Chronicles.

Other worlds

As the story progresses, there is a merging of Tom's two worlds when his brother appears to him in a dream, a familiar experience for bereaved people, as stated by Parkes (Parkes 1972, cited by Hockey, Katz and Small 2008: 89). As the book was written within reach of the Second World War and during a time that death and out-of-reach relatives would have remained in people's thoughts, the dream could have reflected the longing felt by those bereaved. Tom's ability to perform unreal, supernatural feats hints that he is 'not of this world'. An amazed Hatty sees Tom move through closed doors and she describes Tom as 'unreal looking' (Pearce [1958] 2008: 196).

'But, please, Tom-please come through slowly – I want to see how it's done!'
(Pearce [1958], 2008: 144)

Comparisons between themes of time, and of leaving childhood behind, are in both *Tom's Midnight Garden* and *Peter Pan and Wendy*. In support of this premise, Carpenter suggests that '*Tom's Midnight Garden* is in one respect a reworking of *Peter Pan* from Peter's point of view' (Carpenter 1985: 219). Like Peter, Tom also wishes not to grow up but to stay in the present where his attachment to Hatty has overtaken the yearning for real home with a desire to stay in the unreal home of midnight garden. As mentioned, themes of binary opposition are often used in a classic form of writing, characteristic of many children's books, which compare the biospheres of home and not home (Nodelman 2008: 230). The merging of the binary opposites of reality and unreality demonstrated by events in the real world of 'home' and the unreal world of 'away', are obvious in *Tom's Midnight Garden*, *Peter Pan and Wendy* (1911) and *The*

Lion, the Witch and the Wardrobe (1950), where the passing of time is different between the biospheres.

Although losses occur in both worlds, the trend for books fantastically shifting between real and unreal worlds might account for *Tom* and *Peter* enduring into the twenty-first century, whereas *The Fairchild Family* and *Jessica's First Prayer* have not. However, although not religiously didactic in the manner of Sherwood and Stretton, *Tom's Midnight Garden* is nonetheless instructional. Pearce suggests that it is good for boys to cry and share unhappiness, with the external support of an adult.

Now at last he wanted to tell her-to share and perhaps thereby lessen his grief.
(Pearce [1958] 2008: 213)

Pearce's portrayal of Tom's feelings, reflect the start of a cultural realisation that children feel loss, despite not always voicing it. With Kübler-Ross's pioneering work *On Death and Dying* (Kübler-Ross 1969) still unpublished, *Tom* exemplifies a text of loss advanced for its times. The following wordless books are very different in layout, possibly attracting a different target audience but still good examples of loss themes.

1960s ONWARDS AND PICTURE BOOKS

A different notion of reality

Jones clarifies 'that children's books, published since the 1960s show little of the directly targeted Christian morality and pious sentimentalism of the late nineteenth century' (Jones 2001: 33) and this statement seems credible, as it has been discussed as a time of growing secularisation and social and political change in Britain. From 1970 it became obvious that whilst most children's books were promoting certain values, the plots emphasised the spiritual, moral or intellectual maturing of children from contact with magical, unreal worlds. Through this process they came to terms with reality (Carpenter 1985: 217). Raymond Briggs' *The Snowman* [1978] (2013) encompasses the reality of loss with the possibility of magic and as such is a very powerful book. For the times in which it was written it demonstrates an anomaly between the culturally accepted fun element of comics and picture books, the ideology that informs them, and the way in which Briggs uses the book to instruct children about death and loss.

The pictures are unquestionably amusing, but there is a specific orientation towards the reality constructed by the society of the time (Hunt 1992: 158), making picture books as instructional as any of the books discussed above. Analysis of *The Snowman* [1978] (2013) is relevant for demonstrating the way that an author from the late twentieth century, having suffered losses as a child, deals with death and loss through pictures.

***The Snowman*[1978] (2013)**

Layout

As a picture book in cartoon strips *The Snowman* diverges from previous books discussed, in that it straddles two genres of book style: comic strip and picture book. Although enjoyed by younger readers, Gibson (2010) notes that the enjoyment and comprehension of *The Snowman* is best employed by experienced readers who can decode the format of panels and story sequence, and understand the 'grammar of the comic' (Gibson 2010: 106). The conventions deployed in the picture book, whereby the reader must 'decode the pictorial, cultural and linguistic codes with considerable competence' (Moss 1992: 52) are beyond the capabilities of many younger children with minimal world experience. This premise expands Stephens' statement that reading a picture book requires a complex cognitive process (Stephens 1992: 161) and consequently, questions common primary school practice. Non-readers with negligible phonics knowledge usually begin by interpreting a wordless picture book with adult support. Verbalising what they think is happening in the story helps children learn the rudiments of book layout, but comprehension is sometimes inept.

Love and loss

As with Lewis's *Narnia Chronicles*, *The Snowman* can be interpreted as juxtaposed between a magical fairy tale and a lesson in life and death, love and loss. Whilst immature readers might confuse reality with fantasy, especially if in the Magical Thinking stage, an older child would probably know already that snow and snowmen eventually melt. The theme of irrevocable loss is clearly aimed at the child implied reader, not adults, and in support of this view, Sainsbury (2005) asserts that the story of *The Snowman* reflects 'Briggs' belief that children should not be shielded from the darker aspects of human experience' (Sainsbury 2005: 231). Although it could be argued that a type of anthropomorphism is projected onto the snowman to make Briggs' point, the book is undeniably about death and loss (Reynolds 2005: 231).

Home and away

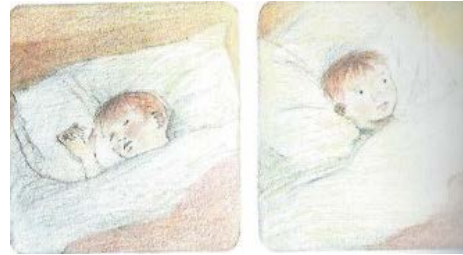
The story begins with a cosy home tableau, which as discussed, epitomises safety. Having set the scene, deep snowfall in the garden follows to change the familiar landscape to a strange, unknown place. The boy's experience of loss begins with the disappearance of his known landscape and Carroll (2011) asserts that snow is 'an especially apt signifier of other worlds in children's fantasy' (Carroll 2011: 44). Ice in *Peter Pan*, snow in the *Lion, the Witch and the Wardrobe* and snow and ice in *Tom's Midnight Garden* represent a moving away from childhood innocence, certainty and safety and 'all that is traditional, mundane and routine' (Wood 2004, cited by Carroll 2011: 44) to what is unknown and uncertain. The focalising character makes an adult, male snowman from the fresh snowfall and by magic, or possibly wish fulfilment, he comes to life to be a friend for the boy and the transitional object between the known, old world and the new, unknown world (Winnicott 1974, cited by Moebius 1991: 68).

The boy's 'good enough mother' (Winnicott 1985) is seen initially watching him explore the new world from the kitchen window and is later seen tucking him into the safety and comfort of bed. The boy has internalised the mother as a secure attachment and provider of safety and so fearlessly embarks on an adventure 'away'. Although the home setting and garden signify safety for the boy, the night-time adventure requires him to move away from his mother and trust his new protector. The excitement of flying away with the snowman to a secret magical world is reminiscent of *Peter Pan* and representative of a slow moving from childhood to adulthood through the portal of the night sky. The story begins and ends with the safety of home and moreover the bedroom, from where the snowman is first noticed, and last seen 'alive'. The possibility that the snowman will not last, is signposted by inviting the snowman indoors and showing him beginning to melt by the fire, suggesting that he cannot exist in the home world.

Loss

Although the book translates successfully for the twenty-first century reader, there is a clear cultural significance with pictures showing both parents living harmoniously together. The house scenes depict a traditional, nuclear family going about daily life; a mirroring of Briggs' own early childhood experience before being evacuated from home in the Second World War and a possible statement against the rising divorce statistics of the 1970s.

In the last 'sleep' frame near the end of the book, the golden light of the sun allows the knowledgeable reader to infer that the snowman will melt.



The book could be a useful 'way in' for discussion with a bereaved child especially as the concluding frame shows that the snowman has 'died'. Explicitly, Briggs' comic/picture book is a fantasy story about adventure and new beginnings. Implicitly, it is a book about loss and the irreversibility of death and as such is a very powerful, instructional book for children to read, albeit reliant on children's understanding of this genre and their ability to realise the irreversibility of death.



Cultural translation

***Granpa* (1984a) (1984b)**

Within the field of children's literature is the concept of text translation from one language to another. The implied reader in this instance is in a culture other than that of the original author, and as such, changes to the original text are made to accommodate them. A book that has possibly suffered from being translated into German is *Granpa* (Burningham: 1984a). Burningham's British book speaks volumes by using minimal text and allowing the reader to gradually form their own conclusions about the eventual illness and death of the old man.

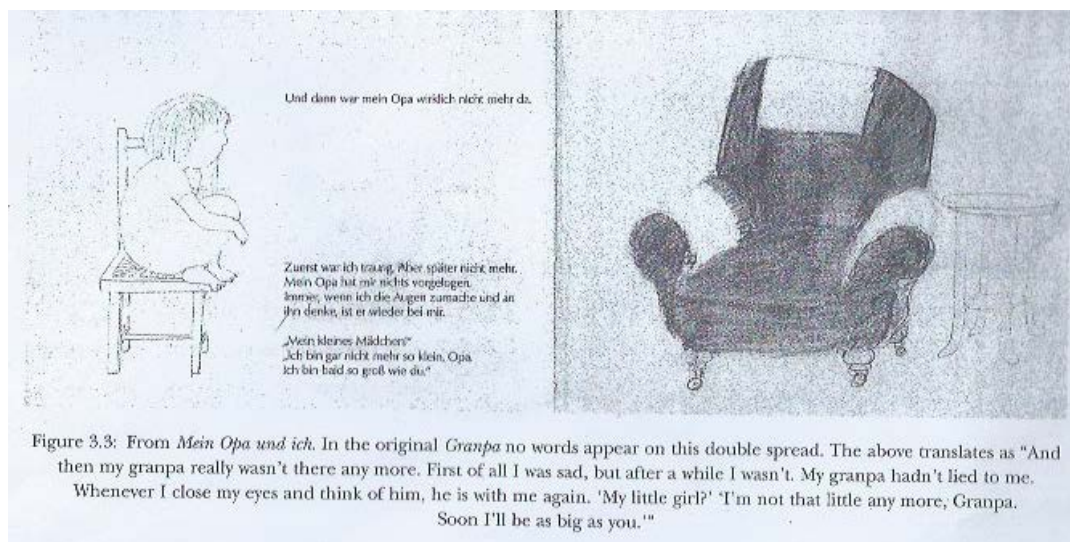
'Mama said that soon you will be going away forever, Granpa'. (Burningham and Korschunow 1984b: 17, translated from Burningham 1984a).

Inference

A double-spread picture book with text, *Granpa* is the story of a little girl's relationship with her grandfather, and their many shared experiences, told in the present tense. As the story nears its end, Granpa is seen to slip on the snow, and is next seen wrapped in a blanket next to a table holding medicines, allowing the reader to realise he is ill. The penultimate picture is of the girl sitting on her little chair, opposite Granpa's empty

chair, next to an empty table. The inference can be made that an ill, old person has died, and has left an emptiness that is being mourned.

No text is needed, as the absence of conversation between the characters, allow children to conclude that Granpa is no longer in the story. However, the Korschunow translation into German alters the original author's intention, which was to let the reader draw their own conclusions, and instead, Korschunow elucidates the death. Whilst O'Sullivan states that the implied readers in the German translation are assumed to be less able to make sophisticated connections between the verbal and visual elements of the books' (O'Sullivan in Lathey 2006: 120), the suggestion above that young readers find inference problematic, is in itself, a salient reason for why Korschunow made this change.



Mourning

However, the explanation supplied by O'Sullivan for the change in emphasis is that German educationalists are 'reluctant to entertain children by letting their blood run cold, considering it tasteless or even dangerous' (translated from Grützmacher 1985: 4, cited by O'Sullivan 2005: 29). This is an interesting observation, demonstrating a cultural change in content suitability, especially given the inclination of the original Grimms' fairy tales to provide unpleasant endings. However, support comes from Frank (2014) who suggests that children's books can be used for helping to socialise children into their society. Using stories to address life events such as 'suffering, death and violence' (Frank 2014: 20) can result in the norms of the reader's culture adapting a text through translation (*Ibid.*). Nonetheless, Lathey (2006: 120) criticises the Korschunow translation of *Granpa* for allowing the child to recover her mourning too quickly:

'First of all I was sad but after a while I wasn't'. (Burningham and Korschunow 1984b: 18, translated from Burningham 1984a)

This lack of empathy for children's extended mourning reveals a deficiency in some children's literature, which if anything, should use the medium of story to inform and improve cultural awareness. As such, children reading a translated book can be prevented from reading it in the way intended by the author, which is especially problematic when writing about death to suit a particular culture. The crux of the matter is whether the cultural differences affect the overall enjoyment or usefulness of the story.¹³⁹

TWENTY-FIRST CENTURY BOOKS

A covert adult audience

Twenty-first century readers have little use for the overtly religious books of the nineteenth century, which seem to bear no relation to contemporary culture. The need for books that are enjoyable as well as instructional has strongly influenced authors to provide texts that will appeal to the adults who read them to children, as well as to the children who try to understand them. Nodelman (2008) supports this view and states that what adults aim for is not just what is good for children, but what is good for adults. He suggests this might be better defined as 'the literature adults want and need children to need' (Nodelman 2008: 158). The place of death and dying in children's books is particularly relevant. When discussing realism in children's literature, Westall (1981) notes that because 'we adults are upset by children's real thoughts we regard them as being unsuitable material for children's books [and] you don't even have to go as far as death to find taboos in the children's book world' (Westall 1981, cited by Hunt 1994: 169).

Arguably, the adult implied-reader is always at the back of the author's mind when writing. 'Compassion books' in which real people fall ill and die can be analysed with reference to Nodelman's observation that books are recommended by adults primarily because they influence children in ways which 'are useful to adults and their society as a whole' (Nodelman 2008: 159). In a culture of predominantly embarrassed denial, their usefulness is in alerting children to situations adults find awkward to discuss. Whereas books for older children contain more information, 'a wide range of visual symbolism' (Nodelman 2005: 136) in picture books conveys complex meaning. *The Copper Tree*

¹³⁹ See Bibliotherapy findings: Fairy tales.

(Robinson and Stanley: 2013) is a picture book with text that can be categorised as a 'compassion' book.

The Copper Tree

Memories

While it is non-euphemistic and clarifies that someone has died, the book hinders cultural ease with discussing terminal illness. The story reveals a class of young children, possibly Foundation Stage¹⁴⁰, whose female teacher becomes ill and later dies. Like a mother figure, she represents both good and bad experiences. The children write to her recalling times spent with her, and although Alfie Tate remembers 'always having to go to her desk for being naughty' (Robinson and Stanley 2013: 15) he is also shown playing with a healthy Miss Evans in the playground (*ibid.*: 16). She is therefore, a pseudo 'good enough mother' whose memory is kept alive by the children's memories and the planting of a copper tree, covered with copper leaves inscribed with children's messages detailing the memories and skills learned from Miss Evans. The book reflects the cultural philosophy of support organisations such as *Winston's Wish*¹⁴¹ who emphasise the importance of keeping memories alive.

The included suggestion that talking to an adult 'sometimes helps' (*Winston's Wish* 2014: 13) is in line with research above, acknowledging talking-cures. The book's final page depicts leaves for the child reader to write their own messages. Remembering the deceased is shown as intrinsic to grieving and what the book does well is to clarify that sadness and anger are both permissible grief symptoms in children (*ibid.*: 14).

Good death

However, whereas nineteenth-century books leave little unsaid, clarifying the importance of only a religious 'good death', *The Copper Tree* is an example of a twenty-first century book with a secular, medicalised approach to 'good death', reflecting the cultural priority for pain-free death. The book clarifies that Miss Evans 'wasn't in any pain at all when she died' (Robinson and Stanley 2013: 11). However, whilst the book improves greatly on the often-read euphemistic book *Freddie the Falling Leaf*, (Buscaglia 1982) in which Freddie 'falls asleep' it fails to circumvent the cultural disinclination to abandon 'embarrassed denial' when discussing cancer. The book alludes to cancer through illustrations but omits the word and although *The Secret C* (Stokes 2000) was published earlier, Stokes' descriptive clarity is clearly not

¹⁴⁰ In Britain, commonly aged 4-5 years old.

¹⁴¹ Memory boxes are purchasable from the charity.

widespread. There are several obvious signals to adults reading *The Copper Tree* that the teacher is seriously ill as pictures show her seated in a wheelchair with a scarf hiding her hair-loss. A child with some experience of cancer might infer what is not stated, but otherwise Miss Evans feeling 'a bit wobbly' is as clear as it gets. Nevertheless, the children in the class understand the irrevocability of Miss Evans' death.



The Copper Tree (2013)

Cultural comfort

The changing way that death is depicted in children's books exemplifies how books shape culture and simultaneously, how culture shapes books and books in which humans die are becoming more common. Aimed at children from four years old, *What Does Dead Mean?* (Jay and Thomas 2013) not only shows a corpse, but also uses



conversations to ask and answer questions about death. It is an unusual text, as few children's books pictorialise 'real' dead people.

Badger's Parting Gifts (Varley [1984] 2013) is commonly read in schools when someone has died. Nonetheless, as the original fables used animal characters to teach moral lessons it is unsurprising that dying animals are still anthropomorphised in children's literature. Moreover, Hollindale asserts that 'in literature as in life, we have to start from where the children are, and with their own (often inarticulate) ideas' (Hollindale 1992: 35) and Tucker (1991) agrees that children might be more comfortable exploring death where books depict a dying mother animal rather than experimenting with the feelings associated with their worst fears (Tucker 1991: 56). A case exists for introducing young children to death in this way before expanding their learning, however, offering books in which *only* animals die exacerbates cultural death-denial and relieves the problem for adults. I now turn to two books that focus on divorce, *Two homes* (Masurel and Denton 2002) and *It's Not Your Fault, Koko Bear* (Lansky and Prince 1998).

Divorce

Two Homes

Accentuating the positive

Notwithstanding the likelihood that children will experience the death of grandparents, there is a higher possibility that children will suffer grief from divorce than from parental death. Statistics above show the high percentage of divorced families, and in the twenty-first century, the same problems could relate to co-habiting couples. In 2011 there were over two thousand lone- mother families with dependent children compared with over three hundred lone-father families with children under sixteen (ONS 2014: Table 1)¹⁴² and it is unclear whether the parents were originally married. The 'lesser losses' following parental separation such as change of school, home loss, even pet loss have a significant effect on children, as suggested by Duffy (2003) above, especially if they are dealing with several of those losses at one time. The use of a book to help view change positively is therefore a valuable resource for parents, and hopefully for children.

¹⁴² ONS *Families and Households survey 2014*. [online] Available at <http://www.ons.gov.uk/ons/rel/family-demography/families-and-households/2014/families-and-households-in-the-uk--2014.html> (accessed 8.10.15)

One such book is *Two Homes* (2002), which depicts the life of a child living with their mother and visiting the home of their father. The main message of the book is that whether Alex, the protagonist, has two front doors, two favourite chairs, each different, or two beds each in a different place, the love that both parents have for her is equal and unchanging. Notwithstanding the demonstrated joy at having fun in two homes, there are stereotypical messages underlying the main message. Dad's home is by the sea, has a dog in it, shows little regard to tidiness and has no picture of mum visible. Mum's home is a more austere flat, with no garden, a goldfish for the pet, and a huge painting by Alex of Dad on the bedroom wall. There is little doubt as to which home looks more fun, and it is possible that this is a deliberate tactic, as statistically, most children remain living with their mother.

***It's Not Your Fault, Koko Bear* (1998)**

Good-enough parents

It's Not Your Fault, Koko Bear (Lanskey and Prince 1998) is book with the same intention as *Two Homes* (2002), but it uses bears rather than people, and is therefore less representative of a child's experiences. Both books on divorce are also reminders of the theme of home and away, discussed above, although in these books, 'away' is another 'home'. The book theme is that forgetting a back-pack because it is at one parent's house is not Koko's fault, and this paves the way for the greater worry for a child of whose fault the divorce is. The discussion above notes that it is not uncommon for children to assume that something they did caused their parents to separate. The author clearly understands that children can blame themselves for parental divorce¹⁴³ and also that they can feel angry or sad, in the same way as children bereaved by death. Nonetheless, the theme of the books is that both homes are equally important for the child. The 'good-enough mother' now needs to be equalled with the 'good-enough father', as with parents no longer together, a child needs to feel as secure in one home as they do in another.

A more unusual addition to the book is the notes to parents at the foot of each page, which give indications of how to discuss situations that might arise. *It's Not Your Fault, Koko Bear* (*ibid.*) is therefore appealing to adults as much as children and is a cross between a story-book and an instruction manual in which advice is given, addressing both adult and child implied readers.

¹⁴³ Children commonly blame themselves for loss (Jewett 1997: 167; Silverman 2000: 50).

CHAPTER CONCLUSION

Nineteenth century writers did not shy away from discussing death and loss and it could be assumed that those authors showed more responsibility towards educating children for bereavement than authors since. It is clear, however, that the author's intention was predominantly to uphold religious and moral cultural views, a didacticism that seems at odds with literature in the last sixty years. The post World War Two books analysed above reflect fantasy stories in which people can time-slip through portals between this world and other worlds; a feat obviously incredible to most adults, but not necessarily to children. The stories reveal to the reader the difference between reality and unreality, and the restoring of the 'me' from the transitional space in which exists the 'not me'. The use of other worlds is by no means definite as a veiled inference to Heavenly states, but it is possible that as with other aspects related to death and loss, the authors of post twentieth-century books felt more comfortable hinting at post-death states, rather than clarifying them. The protagonists successfully deal with attachment and loss, often supported by a protector, and once the events of the story conclude and equilibrium is restored, there is a sense of the protagonists having learned from the experience and being improved morally before moving on. There is therefore nothing to suggest that reading about death and loss should traumatise twenty-first century children.

Mark (1986) asserts that whether children find the unknown more frightening than the known is doubtful and that only the known can be identified and dealt with (Mark 1986, cited by Hunt 2005: 197). Children's books that only allude to dying are responsible for perpetuating cultural death denial and whilst there is evidence of a recent change in book content, the minimal inclusion of death-related facts and pictures exacerbates the problem. However, the proliferation of the book's success relies mainly on the commendation of the implied adult readers as much as the implied child readers, posing the question of who the book is really written for. A finding when researching this chapter, was that although books for children on divorce can be easily sourced, fiction in UK English for younger children of parental imprisonment is rare, outside of specifically related websites¹⁴⁴. This is a possible reflection of the stigma associated with imprisonment and the reluctance of adults to discuss difficult issues with children. However, Hunt asserts that authors have a responsibility to do more than just tell stories (Hunt 1994: 3) and clearly they are in a powerful position to impart specific

¹⁴⁴ With the exception of: Weir and Littlewood (2012) *When Dad Was Away*. London: Frances Lincoln

intentions. A later chapter extends the discussion above by examining in more detail how particular genres of books could help bereaved children in a school setting.

Chapter 5

ANALYSIS AND FINDINGS OF QUESTIONNAIRES

CHAPTER INTRODUCTION

These findings have been employed to help answer research questions arising from the literature review. A motivating element of all the research areas was realising my own inadequacy when faced with managing a child bereaved from a tragic loss that was not commonly perceived as stressful as death. Consequently, I assumed that other teachers untrained in death and loss education might feel similarly deficient. The analysed data from questionnaires are used to help clarify any truth in the suggestion that provision for death and loss education in primary schools is lacking and to support other thesis findings. Although it is not entirely certain whether any deficit in provision is influenced more by a lack of government policy; teachers' personal bereavement experiences; funding, or general 'embarrassed denial', the initial suspicion was that whilst all these factors could contribute significantly to the minimal status afforded to death education, there might be one factor overriding the rest. This chapter reports, and discusses, the results of a small research study involving thirteen primary schools within a specific geographical area of Southern England, which although unrepresentative of metropolitan areas, is nonetheless similar to other Shire counties.

This chapter seeks to contribute responses from teachers in my sampled area to the other findings from Educational Policy. It became clear from the first two chapters that perception of a 'good death' has changed, particularly after the events of the First World War, changes in mourning rituals and the increase in secularisation and medicalisation. To explore more recent perception of 'good death' this area is included in the questionnaire. An initial intuition was that many primary school teachers had received negligible initial teacher training (ITT) or continuing professional development (CPD) for death and loss education but had taught at least one child bereaved from death or lesser loss. This made school-based policy provision an area requiring examination. Having written a school-based policy for daily death and loss education during the course of the research, to pair with a required Critical Incident policy, research revealed that my own school was in a minority. I was therefore interested to see if other schools in the sample had written a policy to support daily whole-school approaches to managing death and loss.

I was also interested in the provision of school-based counselling, having realised from chapter two that bereaved children with unresolved losses can suffer problems in adult relationships and that counselling services are now largely bought-in. Further findings extend the bibliotherapy findings, and discuss whether teachers in the sample employ the strategy of using fiction books for problem solving. Although a recent survey conducted by the American Federation of Teachers (AFT) in 2012 reveals that over ninety per cent of teachers in the U.S.A. are still not receiving bereavement training¹⁴⁵ (AFT 2012: 4), nonetheless, developmental bibliotherapy is commonly accepted as a resource for teachers to use. Other chapter findings suggest that the resource could be helpful in British schools for troubled children, many of whom are bereaved and in mainstream classes. The questionnaire findings therefore contributes to several fields of enquiry explored further in other chapters. I now discuss the findings from questionnaires, beginning with teachers' experiences.

TEACHERS' EXPERIENCES

Initial training and continuing professional development

The responses in this section of the questionnaire were intended to explore teachers' attitudes to discussing death and loss and their history of having taught bereaved children. This would contribute to research into teachers' reactions to coping with death and loss on a daily basis. Factors included were those which might have affected teachers' confidence, such as whether teachers were bereaved as children. Particularly relevant was whether teachers (when children) had seen the deceased, attended the funeral or been prevented by adults from doing so. It was thought that past experiences might influence their management of bereaved pupils, and the perceived importance placed on discussing death with children. Furthermore, other analysis reveals that teachers often fear saying the wrong thing, tending to only approach death education passively (Bowie 2000: 24, 26). Consequently, respondents were asked whether they had experienced ITT or CPD training for death and loss education. To improve the chance of a questionnaire response, teachers could maintain anonymity by not divulging their position or status in their school. I therefore did not know who was a head teacher and could only know which teachers were newly qualified (NQT) from the number of years they had taught.

The latter information was relevant to the research, as a NQT might not yet have had the chance to receive CPD training for death education. Nevertheless, had their initial

¹⁴⁵ AFT survey results: *Supporting the Grieving Student*. [online] Available at http://www.aft.org/sites/default/files/release_bereavement121012.pdf (accessed 3.4.15)

teacher training included a lecture on coping with grief symptoms in children, I would have expected respondents to refer to that training on the questionnaire, assuming that the lecture had made enough impression upon their memories. However, the widespread affirmation that training had not been offered at any time, upholds the suggestion in the Educational Policy findings, that ITT courses are not providing much, if anything, by way of helping trainee teachers prepare for this aspect of teaching and schools are not offering CPD. Furthermore, the updated findings contribute to earlier research by Eiser, Havermans, Rolph and Rolph (1995) which revealed only six per cent of 104 trainee teachers had found bereavement included in their course (Eiser *et al* 1995: 33) and a lack of standardised training in death education.

My sample was a similar size to Eiser *et al* (100 potential respondents) and it was unlikely that all teachers would have completed ITT in the same university. It agrees with recent research of ITT providers, which found that less than two per cent of ITT students had been on any courses for bereavement. (Shepherd *et al* 2013: 20)¹⁴⁶.

Gender, years of teaching, religion

Out of one hundred questionnaires sent to thirteen schools, there were forty- one replies; thirty female respondents, seven male and four with no gender stated. It is assumed that for those with un-stated gender, the question had either been overlooked or the information was intentionally withheld to preserve anonymity, creating non-response bias. Furthermore, teachers were asked to specify their age-range rather than exact age, to uphold anonymity. Less chance of anonymity might also somehow contribute response-bias.

TABLE FIVE: Respondents' age ranges

	21-25		26-35		36-41		42-50		51-60	
Male	2	Male	0	Male	3	Male	1	Male	1	
Female	3	Female	6	Female	5	Female	8	Female	8	
Unstated Gender	0	Unstated Gender	0	Unstated Gender	3	Unstated Gender	1	Unstated Gender	0	
TOTAL	5		6		11		10		9	

Another reason for knowing teachers' ages was that although NQTs were assumed to be the youngest teachers, making it unlikely that they had yet received CPD training in

¹⁴⁶ Shepherd *et al* (2013) *Public Health Research* August 2013. [online] Available at <http://eprints.soton.ac.uk/351998/1/FullReport-phr01020.pdf> (accessed 15.9.15)

death and loss education, teaching is a graduate profession attracting mature students. In England alone, the number of placed mature students (aged over 21) for teacher training in 2014 exceeded 19,500, although it is unclear what proportion of the students were solely for primary education (UCAS *Teacher Training Statistics* [online] September 2014: 3)¹⁴⁷. With the possibility that those teachers within older age ranges were also NQTs, the number of years teachers had taught became important for confirming their level of teaching experience, and their chances of having taught bereaved children. Table Six demonstrates that only two teachers were probationers.

TABLE SIX: Years of teaching

	Under 1 year	1-4 years	5-10 years	11-15 years	16-20 years	21-25 years	26-30 years	31- 40+
Male	1	1	0	0	4	0	0	1
Female	1	4	5	3	5	7	3	2
Gender unknown	0	1	2	1	0	0	0	0
TOTAL	2	6	7	4	9	7	3	3

The literature review cited religious decline as a contributory factor to cultural¹⁴⁸ death denial. As the era explored in the literature review covers a time in Britain that was predominantly Christian or secular, and the sampled area was predominantly Christian or secular, it was relevant to note from questionnaire findings how many respondents were Christian, non-Christian or of another faith. Question four was phrased: 'What religion are you, if any?' As it was, any respondent declaring a faith listed only Christian denominations. The possibility was that teachers' ease with discussing death with children could have been affected if they were of faiths believing in an after-life. Arguably, those teachers proclaiming Christianity as their religion were perhaps reiterating learned family values rather than declaring current personal faith. Furthermore, the activeness of respondents' faith practice is impossible to gauge from data, as the question of church attendance was not asked. Notwithstanding ecclesiastical birth rights for the Church of England, however, had the respondents no religious conviction it is assumed that they would answer 'none' for that question. As some teachers were stating the specific denominations of Church of England (C. of E.), Roman Catholic (R.C.) or Baptist, and others did not specify a denomination,

¹⁴⁷ Figures taken from UCAS Teacher Training monthly statistics [online] Available at <http://www.ucas.com/sites/default/files/utt-applicant-statistics-15-sep-14-report-a.pdf> (accessed 4.11.14)

¹⁴⁸ Discounting other world religions, which discuss death openly.

separate denominations were replaced with the broader term ‘Christian,’ for ease of findings analysis. Two teachers in C. of E. schools stated their religion as ‘agnostic’ or ‘none’ respectively and were recorded as non-Christian. Eight respondents left the question unanswered, or wrote ‘not applicable,’ and to reflect the thesis target context, were categorised as having no religion for ease of analysis. Table seven shows that just under half of respondents answering the question (46 per cent) were Christian: five Christian teachers taught in secular schools; ten taught in C. of E. schools; four in RC schools. The need to preserve anonymity could have influenced seven teachers to declare no school category, and four teachers to divulge no gender, thus causing non-response bias. These results are tabulated below.

TABLE SEVEN: Type of school related to teacher’s religion and gender

Gender/Faith	Type of School			
	<i>Secular</i>	<i>C. of E.</i>	<i>R.C.</i>	<i>Uncategorised</i>
<i>Male Christian</i>	1	2	0	1
<i>Male not-Christian</i>	3	0	0	0
<i>Female Christian</i>	4	8	4	6
<i>Female not-Christian</i>	5	2	0	1
<i>Unstated gender</i>	1 Christian		2 Christian	1 Christian

Teachers bereaved as children

I now turn to data showing which teachers were bereaved from death as children. It could be that cultural ‘embarrassed denial’ (Lendrum and Syme [1992] 2004: 55) infiltrating schools is more powerful at affecting the willingness of teachers to discuss death and loss confidently with bereaved children than teachers’ own personal experiences. Two main areas of thesis interest relate to whether the effects on teachers bereaved by death as adults or as children, influences how they feel when discussing bereavement with their own pupils. Tabulated results for those bereaved as children are on the following page.

TABLE EIGHT: Teachers bereaved as children

Subject	Gender	Religion	Age bereaved	Saw deceased	Attended funeral
2	male	Christian	teens	no	yes
4	female	Christian	teens	no	yes
12	male	Christian	teens	yes	yes
14	female	Christian	6-9	no	yes
15	female	Christian	teens	yes	yes
17	female	Christian	0-5	no	yes
28	female	Christian	6-9	no	yes
44	male	None	10	no	yes
46	female	Christian	0-5/6-9	no	yes
50	female	Christian	teens	no	no
51	female	Christian	10 and 12	no	no
64	female	Christian	Child/teens	yes	blank
79	female	Christian	6-9	no	no
82	female	Christian	teens	no	yes
83	unknown	Christian	0-5	no	no
84	female	Christian	6-9	no	no
85	unknown	Christian	0-5	no	no
92	female	Christian	10-12	no	no
93	male	Christian	teens	no	yes
94	female	Christian	teens	yes	yes
95	female	Christian	6-9	no	no
98	male	unknown	6-9	no	no

Twenty-two of the 41 respondents, about 54 per cent, were bereaved as children, though the questionnaire did not press them on their relationship to the person who died. Of those bereaved up to the age of nine, four attended the funeral and six did not; of the thirteen bereaved at ten or in their teens all but three were at the funeral and only four – all teenagers – saw the body. In questionnaire data, only subject (number 98) mentioned that their own childhood bereavement helped them as a teacher, suggesting that either their role-model adult had been helpful, or that the experience had somehow prepared them to talk with children. This finding is relevant to the thesis for two reasons. Firstly, the literature examined in chapter two discusses the possible detrimental effects on adults from disorganised attachments and unresolved loss.

Knowing, therefore, which respondents had been bereaved as children and their involvement in, or exclusion from, death rituals and discussion about the deceased, could usefully compare with whether they stated any problem talking to bereaved children. It is not within the ethical remit of this research to enquire whether a childhood loss had influenced teachers' adult perception of bereaved pupils' needs, unless that information was willingly divulged. Nonetheless, the possibility exists that any respondents lacking good childhood role-models could lack a basis for future experiences (Dyregrov 2007: 72), such as discussing bereavement with pupils.

Secondly, the literature examined in chapter one suggests that the deaths of those known to us have become hidden from general parlance as well as from sight, and that this situation remains culturally constant in the twenty-first century. Subject number seventy-nine, who was bereaved between the ages of six to nine, volunteered that they would have liked to have attended the funeral, but were denied the opportunity. As (regrettably, with hindsight) the questionnaire did not ask all respondents whether as children they would have *liked* to attend a funeral, it is not possible to gauge whether other teachers shared this regret. Some teachers did not know the reason for their non-attendance. Seven teachers commented that relatives thought either that their attendance was inappropriate, or that it would upset them too much. The possibility exists that the adults were unsure how they would cope with an upset child, or as discussed, did not wish for a child to witness upset adults, but this cannot be verified. It does, however, accord with comments from children in the *Time to Talk* consultation (DfE: 2007), whereby children were asked what helped them overcome bereavement (DfE 2007: 4)¹⁴⁹ .

Teachers bereaved as adults

Thirty-four teachers had been bereaved by death as adults, some more than once, and all teachers had attended at least one funeral. Seventeen teachers had seen a dead body, and most teachers had therefore experienced some degree of personal understanding about grief, and mourning ritual. However, only four teachers agreed that suffering bereavement had helped them talk with bereaved children. This contradicts the suggestion above that experience of death might be enough to help teachers talk with children, and supports the need for training. It is a significant finding,

¹⁴⁹ *Time to Talk* consultation. [online] Available at <http://www.childhoodbereavementnetwork.org.uk/documents/TimeToTalkresponseformCBN.pdf> (accessed 28.11.14) also [online] at <https://www.education.gov.uk/consultations/index.cfm?action=conResults&consultationId=1505&external=no&menu=3> (accessed 6.7.16)

however, that the majority of teachers questioned had taught a bereaved child, and I now turn to this data.

Professional experience

Questions twenty-six to thirty-six focused on whether teachers had taught bereaved children, spoken about loss with them, and whether it was at the child’s request or the teacher’s instigation. Ninety-three per cent of respondents (38 teachers) had at some point in their career taught a bereaved child. Only four of that number did not speak with the child about their loss and only one teacher suggested that Foundation Stage children were too young to discuss bereavement.

TABLE NINE: Teachers who had taught and /or spoken with bereaved children

Taught bereaved child	Spoke about child with loss	Did not speak with child about the loss	Had not taught the bereaved child
38(+1)	34	4	2

(The +1 was a teacher where the child was in another class)

Thirty-four teachers (89 per cent) discussed loss with children, although only 31 children suggested it. Four children indicated no wish to do so. Although death was the loss most teachers commented on not all losses cited were deaths; three children were suffering losses associated with parental divorce, and all three children were spoken to because of worsening behaviour, which corresponds with educational policy findings. Only seven of the 34 teachers who said they had discussed losses with children, had received any sort of training, either through staff meetings or inset. The educational policy findings clarify that some teachers might worry about losing emotional control and their professional persona, when discussing death with children, however, children undoubtedly feel more able to show their own feelings if adults do not restrain theirs (Bowlby 1980: 72).

Evidence from video reports for the consultation paper *Time to Talk* (DfE 2007: 6) suggests that the main priority for bereaved children is that adults involve them in the situation. Those bereaved children whose adults shared with them what was happening were helped by such openness (*ibid.*), despite some adults criticising the decision to include the child. It was therefore a useful support to the other findings to

know how many teachers in the sample had taught bereaved children, and how respondents felt about this aspect of their professional life.

Teachers' feelings on speaking with bereaved children

Question thirty-seven focused on how teachers felt about speaking with bereaved children, however, only thirteen of the thirty-four who had spoken with a child commented in the space provided, suggesting that talking about feelings is difficult.

The question was phrased:

Please comment overleaf on how discussing the loss(es) was for you. If you feel you needed more help in the situation, what would have helped you?

Moreover, the low response-rate to question thirty-seven suggests that some teachers were reluctant to discuss personal feelings. This could be influenced by one of several factors: unresolved childhood grief; embarrassment from an acknowledged lack of professional ability; the possibility of a recent bereavement, or pure pragmatism that it would take too long to write the answer. From those who did reply, seven of the thirteen respondents commented that discussions with bereaved children were, in some way, at some time, 'difficult' or 'hard' (Table 10).

Replies also suggest the importance to teachers of 'knowing what to say' or 'having the answers,' possibly because there are professional expectations from the public and from the teaching profession, that teachers will fulfil high standards and demonstrate excellent subject knowledge. This last theory is supported by research from Ofsted, which connects high quality teaching with teacher's subject knowledge (Ofsted 2012: question 1)¹⁵⁰. However, five teachers were more positive about the situation, with two citing the importance of good listening skills.

¹⁵⁰ House of Commons Education Committee: Written Evidence Submitted by Ofsted. [online] Available at <http://www.publications.parliament.uk/pa/cm201012/cmselect/cmeduc/1515/1515we28.htm> (accessed 7.2.15)

TABLE TEN: How teachers felt discussing losses with children

Subject no	Comment
23	Difficult, because I find children find [it] hard to explain.
46	As an experienced teacher and with children of my own, it was ok to talk to the child-I felt quite comfortable. (However in the early years of teaching I had felt less comfortable when the situation arose).
50	It helped as I was in a similar place having lost both parents.'
64	I wanted to 'have all the answers' but felt at a loss as to how to really help the child.
77	Hard to know what to say.'
81	It can be difficult/uncomfortable but once you have 'broken the ice' it is beneficial.
83	I think it is difficult to do but the loss of my own father is still a very sore and tearful place so I feel able to talk to the children and being a Catholic school with a strong ethos helps.
86	As the child was open I felt confident at dealing with the situation. I knew I needed to be sensitive and a good listener.
91	I try to bring my own experiences into the situation and listen. It can be upsetting to see a child upset but I see no harm in letting a child see that you are moved by their grief.
94	I think suicide is probably the hardest bereavement to discuss. Mother of child went into premature labour with shock. Cousin taken into care. Very difficult situation. Best advice to listen to worries/concerns.
95	I do not have a class so can offer time to children.
96	It would have been helpful to know what to do when he was so distressed he cried for three days.
98	Having experienced parental death at a young age, I felt I could listen and then discuss.

Training

Despite some teachers stating that they had difficulties discussing bereavement with children, not all teachers unanimously agreed that training would help them. The questions here asked whether they had had any inset days/staff training meetings about how to deal with loss, death and bereavement (Q.51) and whether any such event had been in the previous three years(Q.51a); whether it had helped/would help to have one (Q.51c) and finally whether they felt that future training for bereavement would make it easier to discuss death and loss on an everyday basis.(Q.54).

Out of 41 respondents, only eleven teachers (27%) stated that they had had any staff meetings or inset days, eight of which had been in the last three years.

TABLE ELEVEN: Number of teachers responding to questions 51 and 51(a)

	Yes	No	Blank
Staff meeting/inset	11	27	1
Last 3 years	8		

One respondent volunteered that the school had held a staff meeting more than three years ago following a child's death. This accords with the findings in a later chapter (educational policy) that teachers tend to have a passive approach to discussing death, only doing so when needed. Although the schools in which individual teachers work were anonymous, the consecutive numbering of questionnaires reveals which respondents were from the same school. Those replies stating that teachers had experienced staff meetings in the last three years were not numbered consecutively so they were therefore from different schools within the sample, rather than all from the same schools. These contradictory answers might be accounted for by teachers joining the school more recently, or memory lapses, but as a result some doubt is cast on the reliability of those answers.

Relevant staff meetings and inset (Q. 51c)

As to whether such meetings would help or have indeed helped, the comments varied greatly.

TABLE TWELVE: Would it/does it help to have them?

Blank	No	Unsure	Yes
6	5	14	16

Whilst 34 per cent of respondents were unsure if staff meetings and inset helped, 39 per cent agreed they had, or would, and only seven per cent disagreed. Some respondents further qualified their answer to the question with a comment:

TABLE THIRTEEN: Comments on relevant staff meetings/Inset

Subject	COMMENT
4	Not whole staff meetings, but part of meetings-had staff meeting led by play therapist on how play supports children suffering from loss, etc.
17	It would be good to have staff training on bereavement and other issues such as parents splitting up.
18	But only if the trained support staff come into contact with a bereaved child.
28	I would feel more confident in supporting my pupils.

64	Staff meetings made me more aware, however I am not sure I feel better equipped to deal with loss/death.
93	It is a high possibility [that it would help] and an area I would expect the L.A. ¹⁵¹ to take a lead in.

Table thirteen shows that whilst some teachers considered that training might be useful for improving awareness and confidence, others had misgivings that they would become 'better equipped'. However, despite already disagreeing with the usefulness of staff meeting/inset days (question 51a) subject number twenty-three confirmed (question 51c) that some training would make it easier to discuss death and loss on an everyday basis. The responses show contradictory answers from subject twenty-three, suggesting disparity in answers for other respondents. As Inset days are usually planned for months ahead to cover a range of subjects, it is possible that what the respondent disagreed with was staff meetings and Inset days being used for the purpose of death education. The next question related to managing bereaved children in school, asking whether training would help discuss death and loss more easily on a daily basis:

TABLE FOURTEEN: (Q. 54)

With training, would you find it easier to discuss death and loss on a daily basis?

Yes	No	Unsure	Blank	Had training	Comments indicating 'No'
15	5	15	3	1	2

Those teachers agreeing that staff meetings had helped them, almost equalled the number of teachers confirming that training would help daily discussions of death and loss. Furthermore, an almost equal number of respondents answered 'unsure' as they did 'yes' for both questions 51c and 54. As the type of training offered was not clarified, it can be assumed that those unsure were not necessarily refusing an offer of training, merely doubting how it would help them. Had there been an answer from the three unresponsive teachers, either category could have attracted a higher percentage. Nonetheless, the findings show only seven per cent of teachers stating 'no' to staff-meetings and inset, and twelve per cent of teachers stating 'no' to other training. These are low numbers.

¹⁵¹ L.A. is either the Local Education Authority, or the school LSA, learning support assistant.

Policies for Death and Loss Education

Providing training support for discussing bereavements with children would allow teachers to be more professionally confident. However, findings for educational policy have ascertained that it is unlikely that a school will allot funds for any CPD in other than curriculum subjects and possibly SEN. The questionnaire findings show that when talking with bereaved children, eight teachers used euphemisms, particularly if the child or the child's parents did. However, the literature review suggests that children given hints rather than truth can end up confused. Without a school policy on death and loss education, in which training is given and euphemisms are excluded from practice, an ethos can evolve whereby teachers are following personal preferences rather than clear guidelines on procedure. The educational policy findings reveal that internal school policies for death and loss are scarce and the questionnaire findings support this conclusion. While the sample area is small, it nonetheless contributes to the previous research by Shipman *et al* (2001) and is likely to be representative of other similar geographical areas.

Is there a written policy for Death and Loss Education? (Q.45)

It was assumed when sending out questionnaires to schools that teachers would know if there was a policy for death and loss education, since policies are generally written by a staff member and discussed, updated, and agreed upon in staff meetings before being forwarded to Governors. In the sample of teachers, however, all but three teachers stated 'don't know' to question forty-five, while two teachers answered 'yes' and one teacher replied 'in progress'. Given the time that had passed since the original questionnaire, it was decided that this piece of information should be updated to reflect the current situation in schools. This decision followed a presentation of draft thesis material given to a group of teacher-researchers after which several teachers declared that their schools did have such a policy. Whilst my intuition was that the teacher-researchers in question were thinking of Critical Incident policies, rather than a policy defining how death and loss would be managed by all staff on a daily basis, it was nonetheless possible that the questionnaire content had alerted schools to the need for a policy and one had since been written.

As I could not verify whether the schools in question were included in the sample without breaching confidentiality, the headteachers of the sampled schools were all asked whether or not they now had a policy for daily death and loss. The letter sent (See Appendix) was countersigned by the former head of the school of primary education at the University of Chichester, and clarified that the question related not to

Critical Incident policy, which all schools should have, as outlined by the Department for Education and Science (DES) (2007)¹⁵², but to a policy for managing daily death and loss. Although this was already stated on the questionnaire as part of question sixty-one, teachers may have overlooked the phrase. It was confirmed that in the intervening time between the original questionnaire and the new letter to headteachers, no sample schools had written a policy for managing daily bereavement. The additional data indicates that there is some misunderstanding in schools between Critical Incident, and death and loss education policies.

One school did state that it was something they would appreciate help with, however, discussion with the supervisory team suggested that results could be skewed if I offered that help before thesis submission. Nonetheless, the results clarify that there was no death and loss education policy in any of the sample schools, suggesting that death and loss education remains low profile. However, an additional reason for the absence of policies might emanate from which teacher should write and implement them.

Action-plan

Furthermore, when asked if there was a whole-school action-plan for dealing with bereavement, twenty-three teachers thought there was not, five thought there was, nine were unsure and four replies were left blank. Some teachers linked together anything that could be a plan, without distinguishing between them.

Positive comments included:

SUBJECT 2. 'We have an emergency plan including sad and critical events'

SUBJECT 4: 'Not exactly "action plan", but part of whole-school approach of listening, being available at all times for children, working with other agencies.'

Consecutive numbering of questionnaires showed that other teachers in the same schools disagreed that any such action-plan existed, however the discrepancy could have emerged from interpretation of the phrase 'action-plan' and is therefore not a reliable indication of whether or not a plan existed or how high profile it was.

¹⁵² DES (2007) *Responding to Critical Incidents. Guidelines for Schools*. [online] Available at http://www.education.ie/en/Schools-Colleges/Services/National-Educational-Psychological-Service-NEPS-/neps_critical_incidents_guidelines_schools.pdf (accessed 7.2.15)

Responsibility for Death and Loss Education

Knowing whether there was a staff member responsible for death and loss education (question 59) and whether there should be (question 60), was included to explore teachers' attitudes to having a designated person for this role. Teachers who answered 'yes' to the need for someone were also asked what difference they thought it would make to them.

TABLE FIFTEEN: Responsibility for Death and Loss Education

Question 59	<i>Is someone responsible for death and loss education?</i>
Yes	6
No	14
Not sure	19
Blank	2

Question 60	<i>Should there be?</i>
Yes	19
No	10
Not sure	4
Blank	8

As this table shows, only six respondents stated that someone in their school was responsible for death and loss education, with nineteen teachers (46 %) unsure. If the initiative were prominent, teachers should have known whom to approach, in the same way that all teachers must know who to refer to for issues of child protection. Significantly, nineteen teachers (46 %) thought that there *should* be someone responsible. Furthermore, there were eight blank replies whose completion could have increased either figure, and exemplifies response-bias (Cresswell 2014: 162). Possibly, some teachers had past experience of supporting an initiative, then becoming solely responsible for it. The ten teachers choosing a 'no' answer for question sixty might have considered this a reason for answering negatively. Having a support team could rectify this, so that several teachers could take on the role. Several comments reflect the need for a point of contact for teachers to refer to for support, ideas and discussion; an ethos in line with the Subject Leader role in primary schools.

Nonetheless, when teachers were asked what difference they thought it would make to have a person responsible for death and loss education (Table 16), answers included having someone ‘to take the pressure off’, ‘who has the responsibility and understanding of dealing with this’, ‘to know where to turn to immediately’ or for someone to be the ‘designated person for the child to talk to’. All replies suggest a hope to not be that teacher themselves. Moreover, the high number of teachers agreeing that there *should* be someone responsible for death and loss in their school links to aims frequently stated in reports cited in the educational policy chapter: improving the wellbeing of British children.

TABLE SIXTEEN: What difference would it make to have someone responsible?

Subject	Comment
1	Someone to get ideas from.
12	Someone to lead/ take the responsibility to prompt others/ ensure that it doesn't get overlooked.
15	To give a route for discussion/talk.
16	To know where to turn to immediately.
17	They can check that provision is in place for dealing with death, and help staff teach the subject of loss in a sensitive way.
23	Would be someone to look to.
28	A good port of call.
38	Keep relevant literature and information. Attend any courses.
43	Someone to go to for support and advice.
75	It would mean that if a child needed to speak to someone as a class teacher I could seek advice and act appropriately. Alternatively, the child could speak to the designated person.
82	Someone who could advise on useful resources, approaches, etc.
85	Point of contact. Link with RC ethos/prayers.
86	So there is a main person that has the responsibility and understanding of dealing with this.
93	I would hope that they would have been properly trained and able to cope subjectively. They would have been chosen for their skills and attributes. Pressure taken off those who may be expected to cope.
96	As PSHCE co-ordinator, I have been on courses previously and found them helpful. It may well be yet another PSHCE hat to wear!

The lack of teachers trained to recognise grief symptoms in children, and so alleviate bereavement distress in some way, is also linked to the educational policy findings which discusses the Elton report (1989) and the possible benefits to troubled children from provision of school-based counselling. Questions 48, 49 and 50 were therefore

included in the questionnaire to assess the provision of school-based counselling, and to gauge teachers' views on provision.

Counsellors in schools

The educational policy findings demonstrate that school-based counselling can help improve the behaviour of many troubled children. As discussed, the local County Council for the sampled area no longer funds a school-based counselling service for individual schools on a regular basis (by email 2014: see Appendix). Furthermore, whilst some schools utilise the Pupil Premium to purchase external counselling help, others do not. At the time of sending out questionnaires, however, the counselling grid for the purposive sample showed that there was still a county-run school-based counselling service. In order to assess the number of counsellors in schools at that time, and teachers' opinions on their usefulness, respondents were asked questions relating to the counsellor assignment to their schools. The replies demonstrate not only that the role of a counsellor is not fully understood, with some teachers assuming that an assigned school nurse fulfils this role, but also that some teachers were unaware whether a bereavement counsellor served their school. This again demonstrates the low profile of bereavement resources. Teachers who confirmed that their school was assigned a counsellor, were asked to say whether they were full-time or not.

The two main questions asked are shown in this table:

TABLE SEVENTEEN: Availability of counselling

Question 48	<i>Is there a professional bereavement counsellor assigned to your school?</i>
Part-time	9
Full-time	0
No	16
Don't know	14
Blank	1
Other	A school nurse

Question 49	<i>Should there be one?</i>
Yes	15
No	11
Unsure	12
Blank	2

Sixteen schools reported no counsellor assigned to them, relying on the headteacher financing help when considered necessary, or teachers managing situations themselves. The fifteen teachers who said that a counsellor should be assigned to their school were asked to comment in what way it would help, and eighteen teachers responded.

TABLE EIGHTEEN: *What difference would a counsellor make? (q. 60)*

Subject	COMMENT
1	Resources would be useful.
3	A named person is a safety net for support.
4	Play therapist offers bereavement counselling.
12	Someone special to talk to.
14	We have a counsellor. Don't know if she is a professional bereavement counsellor.
15	Being able to talk and be heard.
16	Somewhere to talk to when need to talk without having the hassle of going through GP.
17	I think it would give children and staff the opportunity to discuss difficult feelings instead of bottling them up and trying to carry on as if nothing has happened.
18	Professional approach to serious and life changing situations crucial. Other staff could be inept, ill named, overstretched or inadequate to the job.
23	Would be someone to look to.
28	More equipped to deal with bereavement.
80	Someone impartial to talk to.
82	Valuable to have someone who is trained to understand such issues, and support those who need it.
83	School nurse does this.
86	I think the type of school we are (army-based school) it would be beneficial.
93	Experience is an area rarely considered. Advice and support for all.
95	Trained staff member with counselling skills.
96	Sometimes the children get back into the routine of school without their feelings being fully addressed and may cause problems later.

Having someone to talk things over with, trained to understand and supply support, was a repeated reason from teachers for why a counsellor would help. Subject number ninety-six reported that problems can occur later if grief is not addressed at the time and admitted to having wanted help for a very distressed child. This finding agrees with

the literature review, stating that adult mental health can be affected by earlier, unresolved bereavement issues. It is not possible to say whether other teachers thought similarly, but did not consider it relevant to comment. Most teachers reported that children suffering loss displayed behaviour that was abnormal for them, as table 19 shows, although it isn't known whether they immediately recognised bereavement as a cause.

TABLE NINETEEN: Observed outward signs of bereavement

Quieter	Aggressive	Tearful	Moody	Argumentative	Clingy
18	5	17	7	2	12

Three children were stated as being either attention-seeking, distracted or lacking concentration. All these signs are those expected from the reviewed literature on attachment and loss.

Teachers' awareness of guidelines to support them

However, the number of teachers aware of guidelines to help them whilst waiting for a counsellor was very low. Teachers were asked if they knew of the *Support for Loss* guidelines (2004); or used the SEAL (2005)¹⁵³ guidelines for relationships, which covers 'loss', or had heard of the outside agencies: Cruse, Winston's Wish, Childline, CBN, or any other.

**TABLE TWENTY: (Qs. 57 and 58)
Teachers knowing of and/or using 'Support for loss' guidelines
and SEAL 'Loss' relationships curriculum**

	Support for Loss guidelines	Support for Loss guidelines	SEAL 'loss' relationships curriculum	SEAL 'loss' relationships curriculum
	Know of it	Use it	Know of it	Use it
Yes	11	6	28	16*
No	29	33	11	17**
Non-response	1	2	2	8
Comments				In part* Not yet**

¹⁵³ *Social and Emotional Aspects of Learning*. Although not funded by Government now, it is still used in schools.

TABLE TWENTY-ONE: Teachers aware of external bereavement agencies (Q. 63)

	Cruse	Winston's Wish	Childline	CBN	Other
Yes	17	19	39	7	3*
No	17	17	0	23	
Non-response	6	5	2	11	38

Seventy-one per cent of teachers were unaware of the guidelines *Support for Loss* (****: 2004), which were written due to some schools not being proactive at teaching loss (see appendix email). They were available to all headteachers in primary schools within the county, and at some point, would have been accessible to school staff. An even higher number of teachers, eighty per cent, did not refer to the guidelines despite knowing of them. Similarly, sixty-eight per cent of teachers knew of the SEAL guidelines for loss, but only thirty-nine per cent had ever used them. As with previous results, non-responses could have altered the findings, and it is unknown which percentage would increase. What is known is that even when teachers are aware of helpful publications, they do not necessarily use them. This could be from a preference not to use up PPA¹⁵⁴ time, (Teachers Pay and Conditions DfE 2014: 47, para. 52.18), making presentations at staff meeting directed time¹⁵⁵ preferable. This would enable shared reading, and discussion could occur. Arguably, a tendency for a passive approach suggests that teachers might only refer to guidelines when death and loss occurs.

The discussed possibility that culture infiltrates a primary school is apparent from the results determining which external loss-related charities the respondents knew of. Childline,¹⁵⁶ begun in 1986¹⁵⁷ by Esther Rantzen and highly publicised in the 1980s through the media (Harrison 2012: 283) was the best known, with ninety-nine per cent of respondents aware of it. Only seven teachers, seventeen per cent, had heard of the CBN, despite their online publication, links with NCB for the national campaign *Grief*

¹⁵⁴ Planning, Preparation and Assessment time.

¹⁵⁵ There are 1265 hours of directed time each year, 195 days, in which a teacher is expected to be available for duty (Teachers Pay and Conditions, 2014, p47: para. 52.18) [online] Available at https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/341951/School_teachers_pay_and_conditions_2014.pdf (accessed 16.2.15)

¹⁵⁶ Childline is a service for children with online chat, a freephone telephone number and the opportunity for children to speak with counsellors about bereavement and other issues. [online] Available at <http://www.childline.org.uk/talk/asksam/emotions/bereavement/Pages/Bereavement.aspx> (accessed 13.2.15)

¹⁵⁷ History of Childline [online] Available at <http://adc.bmj.com/content/82/4/283.full> (accessed 13.2.15)

Matters (April 2009)¹⁵⁸ and patronage of the late Diana, Princess of Wales¹⁵⁹. Despite being the leading bereavement charity in the United Kingdom¹⁶⁰ with a base in the geographical sampled area, only forty-six per cent of respondents knew of *Winston's Wish*. It appears that although the previously discussed revival of death through the media has alerted teachers to *Childline*, local resources that could be utilised in schools were relatively unknown. It was expected that teachers might mention *The Snowdrop Trust* as an 'other' since their work is known in the sample area of Southern England¹⁶¹ and their services to schools are free. There was a high proportion of non-response to this question (Table 20) and only one teacher named the Trust.

Curriculum

It is clear from responses, that notwithstanding the existence of SEAL guidelines for schools, there are few known resources for teachers and few curriculum areas for preparing children for bereavement, despite over 24,000 children a year being bereaved¹⁶². Despite the recent introduction of Free Schools, ¹⁶³autonomy in state-maintained classrooms¹⁶⁴ reduced following the abolition of the Schools Council in 1984. The educational policy findings disclose that the introduction of the National Curriculum and National Attainment Tests, focusing teachers' time on tested subjects, have affected teachers' relationships with children. It is therefore plausible that the affective component of education remains side-lined in the twenty-first century, despite thesis evidence that children's wellbeing in Britain is suffering. This makes it relevant to know whether schools accommodated death and loss in the curriculum.

Do you cover death and loss as part of your school curriculum? (Q.55)

This question was asked due to work by Jackson and Colwell (2002: 109), who note that the national curriculum creates opportunities for discussing death and bereavement, and secondly, because of the report by the Association for Children with Life-threatening or Terminal Conditions (ACT) to the Select Committee for Health,

¹⁵⁸ *Grief Matters*. [online] Available at <http://www.ncb.org.uk/media/archive/2009-jan-jun/48> (accessed 2.3.15)

¹⁵⁹ CBN in affiliation with NCB. [online] Available at <http://www.ncb.org.uk/media/archive/2009-jan-jun/48> (accessed 2.3.15)

¹⁶⁰ *Winston's Wish* [online] Available at <http://www.winstonswish.org.uk/about-us/facts-and-figures/> (accessed 2.3.15)

¹⁶¹ Catchment area map for the ***** Snowdrop Trust [online] Available at http://www.the*****snowdroptrust.com/about-us/our-catchment-area/ (accessed 10.2.15)

¹⁶² *Winston's Wish* [online] Available at <http://www.winstonswish.org.uk/about-us/facts-and-figures/> (accessed 2.3.15)

¹⁶³ Free Schools have more freedom to choose their curriculum. [online] Available at <https://www.gov.uk/types-of-school/free-schools> (21.9.15)

¹⁶⁴ Questionnaires were sent when Academies and Free Schools were newly legislated and as such, only state-maintained schools were sampled

stating that death can be ‘a natural element of many other subjects’ (ACT: PC38A, July 2004: 26)¹⁶⁵. Whether or not death education was already being integrated in the curriculum of sampled schools was therefore relevant for showing whether any progress had been made in this area. The results for inclusion were:

TABLE TWENTY-TWO: *Is death and loss covered in your school curriculum?*

Yes	No	Unsure	Non-response
22	6	10	3

Six teachers confirmed that they covered death and loss through religious education (R.E.) and twelve teachers cited PSHCE (renamed PSHE in 2008)¹⁶⁶. However, comments clarify that teachers mainly refer to a curriculum subject to help them, only when circumstances require it. This is despite the national non-statutory guidance for teaching R.E. in English schools, including a stipulation that schools should ‘encourage pupils to play a full part in their own learning in R.E’. as individuals, using their own experience and background to reflect on questions of truth and morality and deeper meanings of life and death (DCSF 2010: 33). Furthermore, in the local Agreed Syllabus for R.E., discussions on death are only included in the curriculum for Key Stage Two¹⁶⁷, leaving children aged four to seven with no particular curriculum requirements lending themselves to discussion. Equally, from 2014, PSHE is no longer a statutory subject within the new primary curriculum for state-maintained schools. An independent review for the Department for Children, School and Families (DCSF: 2009) undertaken by Sir Alasdair Macdonald explored the proposal for statutory provision of PSHE, however, the report concludes that the subject should remain non-statutory (DfE: 2013).¹⁶⁸

It is therefore dubious to expect that all primary schools will give equal prestige to identical elements of PSHE but will select by preference. Moreover, despite an Ofsted *PSHE Report* (2013) commenting on the ‘correlation between the grades that the schools in the survey were awarded for overall effectiveness in their last section 5

¹⁶⁵ As stated in my article in *R.E. Today*(Gray: January 2009)

¹⁶⁶ *The History of PSHE* [online] Available at <http://www.educationengland.org.uk/documents/pdfs/2009-macdonald-pshe.pdf> (accessed 27.2.15).

¹⁶⁷ *Agreed Syllabus 2008*. (2008: .24, s.h).

¹⁶⁸ DfE (11.9.2013) *Guidance PSHE Education* [online] Available at <https://www.gov.uk/government/publications/personal-social-health-and-economic-education-pshe/personal-social-health-and-economic-pshe-education> (accessed 27.2.15)

inspection, and their grade for PSHE education¹⁶⁹(PSHE Association: 2014),¹⁷⁰ the only agreed stipulation to date is that schools ‘should make provision drawing on good practice’ (DfE 2013: 2.5)¹⁷¹ and that schools should include on their website their curriculum for PSHE (PSHE Association: 2014)¹⁷². There is therefore no confirmation that death and loss would be met through the PSHE curriculum.

Using books

From the information on accommodating death and loss in the curriculum, and to support my findings from the areas of children’s literature and developmental bibliotherapy, the questionnaire asked teachers if they used books for helping children with loss. One teacher stated they would like to use stories and poems, but had not yet done so. Only one teacher commented that it was something they felt inadequate for. With books readily available as a relatively inexpensive resource in schools, twenty-seven teachers (sixty-six per cent) confirmed that they had used books to help bereaved children. However as forty-four per cent of teachers had not, it suggests that some respondents had not considered the strategy. Ten teachers confirmed that their school had an available library of books available to discuss bereavement, although they had not used them. The findings suggest a problem for class teachers.

On the one hand, a book may be the only available resource at short notice. Conversely, although the bibliotherapy findings recommend that books can be used as a start to problem solving, they also suggest that teachers should have a thorough understanding of childhood bereavement for the process to be successful. Clearly, the majority of teachers in the sample using books are untrained for supporting bereavement. Nonetheless, whilst it is unknown how much can be achieved by a teacher unsupported by trained counsellors, the responses demonstrate that despite the lack of counsellor provision, teachers are sharing books with bereaved children, as shown:

¹⁶⁹ PHCE Association *Current Curriculum Guidelines*. [online] Available at <https://www.pshe-association.org.uk/content.aspx?CategoryID=1053> (accessed 27.2.15)

¹⁷⁰ PHCE Association *Current Curriculum Guidelines*. [online] Available at <https://www.pshe-association.org.uk/content.aspx?CategoryID=1053> (accessed 27.2.15)

¹⁷¹ DfE (11.9. 2013) *Guidance PSHE Education* [online] Available at <https://www.gov.uk/government/publications/personal-social-health-and-economic-education-pshe/personal-social-health-and-economic-pshe-education> (accessed 27.2.15)

¹⁷² PHCE Association *Current Curriculum Guidelines*. [online] Available at <https://www.pshe-association.org.uk/content.aspx?CategoryID=1053> (accessed 27.2.15)

**TABLE TWENTY-THREE:
Comments from teachers about using books with bereaved children**

Occasion has not arisen, other than the book at 47a [<i>Badger's Parting Gift</i>] for the death of a pet.
Not had to. Not sure if I would be the best person to do this.
Yes. Read through and discuss.
Yes, e.g. <i>Badger's Parting Gift; Waterbugs and Dragonflies</i> .
I have done in the past.
I do have books but haven't needed to use them.
Yes- reading stories raising discussion and allows discussion.
Sharing the book.
<i>Winston's Wish</i> publications.
Books are available but I have not had to use them at present school.
Yes I would have thought so.
Not sure.
I don't but would like to use stories or poetry.
Haven't done so to date.
As part of PSHCE curriculum.

The literature review suggests that repercussions for children from divorce, which is now a more common loss for children than parental death, contribute greatly to bereavement grief. The books *Two Homes* (Masurel and Denton 2002), *Two of Everything* (Cole 2000) and *It's Not Your Fault Koko Bear* (Lansky and Prince 1998) two of which are analysed in the children's literature findings, all try and deal positively with the result of divided family homes arising from separated or divorced parents. Although discussed above that divorce within ten years of marriage is prevalent amongst families of primary school age children only three teachers (seven per cent) had used books that address that situation (Table 23). This suggests either that teachers are largely unaware that children's grief from divorce can in the short-term be similar to grief from death, or that they generally evade discussing divorce with children for fear of annoying parents.

TABLE TWENTY-FOUR: Number of teachers using specific books

Titles	Teachers using book
<i>Badger's Parting Gifts</i>	25
<i>Dogger</i>	18
<i>Goodbye Mousie</i>	1
<i>Two Homes</i>	3
<i>Two of Everything</i>	0
<i>The Fall of Freddie the Leaf</i>	0
<i>Goodbye Mog</i>	7
<i>Goodbye Daddy</i>	2
<i>It's Not Your Fault Koko Bear</i>	0
<i>Lifetimes</i>	0

TABLE TWENTY-FIVE: Other titles mentioned

<i>Granpa</i>	2
<i>Waterbugs and Dragonflies</i>	3
<i>Grandad</i>	1
<i>Heaven</i>	1
<i>I'll Always Love You</i>	2
<i>My Bunny Died Last Night</i>	1
<i>Grandma Bill</i>	1

The two most-used titles for loss were *Badger's Parting Gifts* (Varley 2013) read by sixty-one per cent of teachers and *Dogger* (Hughes 2009), which features a lost stuffed dog, read by 44 per cent of teachers. However, although the book *Dogger* (Hughes 2009), is available in most Key Stage One classrooms for shared reading, its theme is transient loss rather than intransient. The children's literature findings have remarked on using anthropomorphic books such as *Badger's Parting Gifts* (Varley 2013) to talk about loss with children. Using a book with animal protagonists can allow the circumvention of children's more difficult questions regarding human death, which a teacher might feel unequipped to answer. However, only seven teachers (17 %) used the book *Goodbye Mog* (Kerr 2003), which features a dying cat, suggesting book choice may partly be due to availability.

Interpretation of 'Good Death'

Having gained an overview of teachers' experiences, attitudes to discussing death and loss and how many teachers considered themselves Christian,¹⁷³ I now turn to a category on the questionnaire related to respondents' understanding of the phrase 'good death'. The findings are significant for making an original contribution to knowledge, and for adding research to the field for whether perception of what constitutes a 'good death' has now changed. As there is likelihood that schools reflect twenty-first century perceptions of death, and as this might affect the ease with which teachers speak with bereaved children, it was a worthwhile area of interest to be explored.

Open questions

Initially, question five was the open question: 'What do you think a good death would be?' However, following pilot-group feedback and taking account of criticism of open questions by Redline, Dillman, Carley-Baxter and Creecy (2002)¹⁷⁴ the style of question was changed. Redline *et al* (2002) suggest that respondents spend too long writing replies to open questions, making them overlook instructions, and provide less useful answers (Redline *et al* 2002, cited by Cohen Manion and Morrison 2007: 331). Subsequently, before sending questionnaires to schools, question five was altered to meet two requirements: space was retained for respondents' personal comments, which fulfilled a 'blue skies' approach (Cohen *et al* 2007: 41) to gain a fuller picture, and it was supported by prompts.

Prompts

Cohen, Manion and Morrison suggest the use of prompts on questionnaires because 'it is useful for the researcher to provide some support for respondents, so that they know the kind of reply being sought' (Cohen *et al* 2007: 330). The conceptual framework of the literature review influenced the prompts, which were: pain-free; quick; at peace with God; controlled by the dying person; in hospital; at home; unconscious. Whilst prompts possibly discouraged alternative answers, creating response bias, clarifying categories to avoid ambiguity could nonetheless have ensured less misunderstanding of the type of answer sought (Cohen *et al* 2007: 224). However, the order of phrases written by respondents from the available prompts, suggests that teachers worked through them chronologically, selecting on sight those phrases considered most applicable.

¹⁷³ This thesis realises that this is not synonymous with church attendance.

¹⁷⁴ Redline, Dillman, Carley-Baxter and Creecy (2002)

Question order

As only three respondents did not answer the question, there is support for acknowledging the pilot-group feedback. The suggestion was to move question five from the later position of number fifty-one (a) and it is likely that earlier question-order position increased chances of it being answered. This is a strategy validated by Krosnick and Alwin (1987) and more recently, Dillman, Smyth, Christian and Stern (2003), who found that earlier listed items on questionnaires are given greater weight than later ones (Dillman *et al* 2003: 6, cited by Cohen *et al* 2007: 324). This would be especially probable if respondents read through the whole questionnaire before writing. However, whilst the possibility of a primacy effect could have been explored using a positivist methodology, whereby half the sent questionnaires ordered prompt-answers differently, had respondents been asked to order their answers hierarchically, it would have been clearer whether some statements were more valued than others. Counteracting this possible shortcoming, there was additional space for respondents to personally develop their answer, thus providing 'a window of opportunity for the respondent to shed light on an issue or course' (Cohen *et al* 2007: 331).

Respondents' relationship to religion

Seven teachers, all of whom declared a Christian denomination, selected the prompt 'with God' for their understanding of 'good death'. Five were female, one male, one undeclared gender, and apart from one teacher who did not state their school-type, all worked in faith schools¹⁷⁵. Five of them were in the 42-50 age-range, and two were aged 51-60 (Table 26).

TABLE TWENTY-SIX: Christian teachers aged 42-60, in faith schools, equating 'good death' as being 'with God'

Subject	Aged 42-50	Aged 51-60
Male	1	
Female	3	2
Gender undeclared	1	

It is feasible that teachers in these age ranges could have been influenced by a range of factors: inherited cultural values from grandparents or parents; respondents' personal experiences; adult religious views, or a combination of those factors, any of which could have influenced teachers' understanding of 'good' deaths. Teachers within these age ranges would have been born between 1949 and 1969, at a time when the

¹⁷⁵ Those schools financially aided by a particular religion or denomination within that religion.

rise in secularisation encouraged greater individualism of belief. However their parents, and particularly grandparents, could have experienced a world before the inter-war years where religious observance and mourning ritual prevailed, and where religious funerals continued strongly. Nonetheless, eighteen teachers who stated they were Christian did *not* choose a religious meaning for a 'good death' (Table 27). Of the eighteen, six teachers worked in secular schools, six in faith schools and six in schools uncategorised on the questionnaire. Two teachers, one in a faith school and one in a secular school, omitted an answer.

It is not possible to say why only some Christian teachers defined a 'good death' as 'with God'. It is possible that those teachers not choosing a religious definition were only nominally Christian and to them other factors were more important, however, the findings in this chapter concord with the literature review which states that religious meaning for 'good death' has become less significant since the wars. Furthermore, answers could have been affected by respondents having witnessed the painful death of a relative, or been diagnosed with a life-threatening illness themselves.

TABLE TWENTY- SEVEN: Christian teachers not choosing religious statement for a 'good death', by age and gender

	Faith School	Secular School	School unknown
Christian Male			
Age 21-25		1	
26-35			
36-41	1		1
42-50			
51-60			
Christian Female			
Age 21-25	1	1	1
26-35	1	1	2
36-41	1	1	
42-50	1		2
51-60	1	1	
Gender unknown			
36-41		1	

Other responses

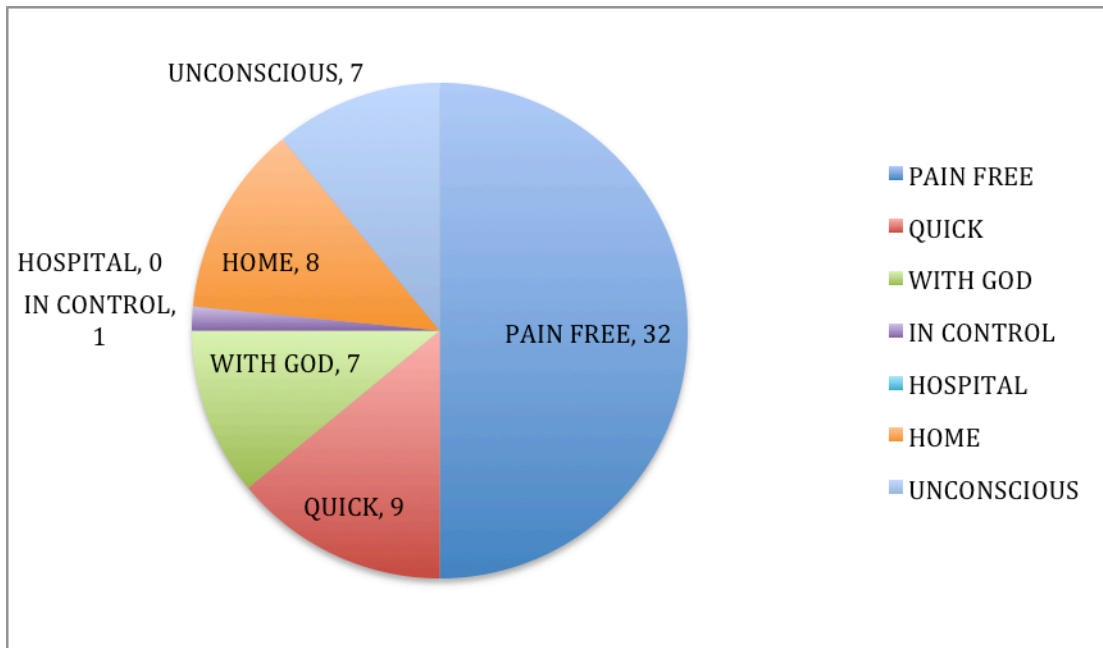
Respondents' answers comprised mostly of supplied prompts, however, some respondents added personal statements, such as subject number twelve who answered 'Knowing Jesus'. An interesting finding from the data supports the literature review, in which is suggested that the dying and particularly the elderly infirm, become 'invisible' and 'hidden' in hospitals and hospices. This increases likelihood that many will be denied the opportunity to die at home (Hockey 2008: 193), creating communities where hidden death can be conveniently 'denied' by the living. As only eight respondents (nineteen per cent) selected the 'at home' prompt, this suggests a cultural preference for deaths to be medicalised and institutionalised. Respondents choosing 'at home' also chose the prompt 'pain-free,' and it is possible that it was assumed that a home death would be medicalised and also painless (Table 28).

**TABLE TWENTY-EIGHT:
Prompt comments defining 'good death' chosen by respondents**

Subj	Pain free	Quick	With God	In control	Hospital	Home	Unconscious
1	x					x	
2	x						
3	x						
4	x					x	
12			x				
14	x		x				
15	x	x	x			x	
16	x	x					
17	x						
18	no	prompt					
23	no	prompt					
28	x						
38		x				x	
39	x						
42	x						
43	x	x					
44	x						
45	x					x	
46	x		x				
50	x	x	x			x	
51	blank						
64	x						
75	x	x					
77	x						
79	blank						

80	x						In sleep
81	x	x					In sleep
82	blank						
83	x		x				
84	x		x				
85	x						In sleep
86	x						
88	x						
91							In sleep
92	x					x	
93	x	x					
94	no	prompt					
95	x						
96	x	x				x	In sleep
98	x						In sleep
100	x			x			In sleep

CHART ONE: Above table in graph format



From the findings, it is impossible to establish whether the respondents who chose the prompt 'at home' had experienced the death of a relative either in institutions or at home. It is also unknown whether the respondents' preference for home death would, in reality, have been affected by: their own age, the age and medical condition of the dying person, the need for twenty-four hour palliative care, the controversial Liverpool

Care Pathway¹⁷⁶ or the wish for assisted dying. Clearly, ambiguous findings require conjecture on the part of the researcher, and are based on interpreting patterns and trends in findings, to unravel the possible intention of respondents. Only one respondent selected the prompt 'controlled by the dying person'. The finding is significant due to the failure of the Assisted Dying Bill in parliament and the statistics from Age UK, cited in the literature review, stating that the preference of the elderly is for medicalised death, without knowledge of imminent death (Payne, Age UK: 2015).

The fact that 'pain-free' was a prompt chosen by thirty-two respondents clarifies that this was more important for most than being 'with God'. The six teachers who did not choose the prompt 'pain-free' wrote either 'minimal pain', 'quick' or 'in one's sleep.' Whilst the respondents' past experiences possibly influenced their answers, the reply from subject number one hundred (Table 29 below) reflects the importance of other factors not considered. Whilst other respondents did not elucidate so fully, nonetheless, they may have chosen similar prompts had they been available. More conclusive is the possibility that the variance in the questionnaire answers detailed above, represents the continued twenty-first century importance of choice (Walter 1990, especially ch.20 in Walter 2005: 175), which arguably is now shown to extend to the discussed medicalisation of death. The quantitative research from questionnaires therefore provides tentative qualitative data supporting other findings that there is a post-modern 'revival of death. This defends the right of individuals to die as they wish (Árnason and Hafsteinsson (2003: 46), despite the outcome of recent parliamentary debates suggesting assisted death is still a taboo subject.

Notwithstanding that the unpredictability of tragic or 'bad deaths' makes the availability of such choice dubious, how and where death occurs is clearly important to individuals experiencing a planned-for death. Subject number fifty paralleled a 'good death' with 'going home,' although it was unclear as to whether the respondent meant their own home, or a celestial 'home,' since they also chose the prompt 'at peace with God.' Arguably, whilst it is uncertain how significantly questionnaire prompts influenced respondents' answers, nonetheless, a wide choice-list avoided asking 'loaded questions ...in such a way as to suggest to respondents that there is only one acceptable answer' (Cohen, Manion and Morrison 2007: 33). The corresponding data

¹⁷⁶ *NHS Choices* 27. 12. 2012 [online] Available at <http://www.nhs.uk/news/2012/11November/Pages/What-is-the-Liverpool-Care-Pathway.aspx> (accessed 20.11.14)

from findings were therefore broad, and several respondents added their own definitions of ‘good death’.

The main additions to listed prompts were dying ‘with loved ones’, introduced by twelve respondents, and the respective additions ‘dying with dignity’, and ‘saying goodbye’, introduced by three respondents for each category. Although only three respondents highlighted ‘saying goodbye’ as important, it is anticipated that those choosing ‘dying with loved ones’ assumed they might be also ‘saying goodbye’ to them, making it equally likely that fifteen respondents chose this category by default. It was therefore the highest incidence of choice for respondent-added prompts, thus supporting data to the discussion of ‘bad’ deaths, where relatives are often denied the chance to say goodbye. Some respondents chose to expand their answers more fully. Six respondents, all female, included information revealing the importance of being with, or near, loved ones whilst dying.

TABLE TWENTY-NINE: Additional phrases related to loved ones

Faith	Age	Additional Prompt of ‘with loved ones/family’
Christian	36-40	At home, in sleep, <i>with family</i> , pain free
Christian	42-50	Pain free, at home, in peace, <i>loved ones</i>
Christian	42-50	Pain free, with your family. At peace with yourself and God. Preferably at home.
Christian	21-25	Pain free, at an old age, at home with loved ones.
Unstated	51-60	At home, minimal pain, having said ‘goodbye’ to loved ones.’
Atheist	51-60	Pain free; preferably in my sleep; opportunities to say goodbye to my family/have my family nearby; in my home or a nursing home/ hospice; with some control after the end if mental faculties are ok; or with control by my children if I had dementia (through power of attorney).

CHAPTER CONCLUSION

The results of this chapter serve to expand and support the research from the literature review and the three other findings chapters in the thesis. It is not possible to confirm

whether another sampled area of the country would result in different findings as to how teachers deal daily with death and loss. However, recent similar findings in other areas of the country, outlined in the educational policy chapter, give cause to suggest that notwithstanding exceptions in other non-metropolitan schools with similar ethnically homogenous intakes, the sample is likely to be indicative of the general situation of bereavement provision within other primary schools. As the data from questionnaires reflect no particular surprises, the intention to use them interpretively to support the data in other chapters is fulfilled.

The findings reveal that fifty-four per cent of teachers in the sample were bereaved as children and eighty-three per cent had been bereaved as adults, making most teachers familiar with grief at some point. Nevertheless, also revealed is that not all teachers in the sample were confident speaking with children about bereavement. Only one teacher suggested that being bereaved as a child helped them in any way to discuss bereavement with children and only four teachers bereaved as adults said that experience had helped them. Although familiarity might help prepare the bereaved personally for the next loss, it seems that it does not necessarily help teachers know what to say to bereaved children. Nonetheless, thirteen teachers took the time to answer how they felt about speaking with bereaved children. Their comments comply with the literature review, which indicates that teachers find this aspect of their role hard, adopt a passive approach, and that knowing what to say can leave them 'at a loss'.

Despite ninety per cent of teachers having taught a bereaved child, a high proportion of respondents had received no CPD training on how children grieve, or what would help them manage. Only five teachers considered that training would not help them, and it is unclear whether this was because they suspected that agreeing to training might leave them wholly responsible for every bereaved child in the school. Fifteen teachers thought training would help and the same number of teachers was unsure. Possibly, with more information of what the training comprised, they might have answered positively. Sixty-eight per cent of teachers confirmed that they knew of County resources within their school, although thirty-nine per cent had never used them. Teachers said they seldom referred to any resources unless an immediate need arose, which supports the argument that teachers either have a passive approach to discussing death and loss or that any spare time is used for raising academic standards, as suggested in other findings.

Ways in which teachers can help children by sharing a suitable story have been explored to support the chapter on the under-researched area of bibliotherapy. The questionnaires looked to connect with that chapter's findings by asking if teachers generally used books to help bereaved children. Although the two most-used books were anthropomorphic, sixty-six per cent of teachers had shared a book with a grieving child, which suggests that carefully chosen books would be an inexpensive resource teachers would be willing to use if they were trained to understand the bibliotherapeutic process and had external support. Another significant finding is that none of the sampled schools had a policy for death and loss education, and as such, there was no agreed course of action or rationale for how teachers would approach discussions with children or alert other staff of bereavements.

The educational policy findings in a later chapter show that the sampled schools are not unusual, and it seems highly likely that without government education (or health) policy raising the profile of bereavement, schools will not regard it as a priority. Insights from chapter one suggest that the failure of all the schools in the sample to consider a written policy necessary could well be an institutionalised example of 'embarrassed denial' when speaking about death and mourning. Moreover, the findings of the education policy chapter show that provision for emotional intelligence is outweighed in primary schools by the significance accorded to achieving high academic results, indeed they have become increasingly attainment-driven with the recent 'secondary ready' government goals (DfE 2013: 3: 1.3).¹⁷⁷ Furthermore, the chapter's findings support the premise that there is confusion in schools between policies for critical incidents and those for daily death and loss education, with the former being a passive but statutory requirement and the latter being optional. Also highlighted in the education policy research are the recommendations from the ACT report to the Select Committee for Health (Department of Health Select Committee 2004:6:135; ACT: PC38A, July 2004: 26)¹⁷⁸ stating that schools should have a policy for dealing with individual, bereaved children. Without an agreed policy, teachers are not informed of bereavements and training can go unplanned.

¹⁷⁷ DfE (2013) *Primary Assessment and Accountability Under the New National Curriculum* [online] Available at https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/298568/Primary_assessment_and_accountability_under_the_new_curriculum_consultation_document.pdf (accessed 24.2.15)

¹⁷⁸ Available at <http://www.parliament.the-stationery-office.co.uk/pa/cm200304/cmselect/cmhealth/454/45410.htm> (accessed 30.8.14)

The policy written for my own school states as an aim that staff will be given information and support and that they will attend training (see appendix). Forty-six per cent of teachers in the sample thought someone should be responsible for death and loss education in the school, compared to twenty-five per cent who thought otherwise. The sixty per cent of the sample bereaved as children may have influenced that opinion. On the other hand, the responsibility for any school role has to be considered by a headteacher as a 'reasonable' part of teachers' agreed duties, and without sufficient training and support, it is questionable whether any member of staff *should* undertake the role alone without counselling support. The termination of County school-based counselling services has been cited as further proof that help for bereaved children occurs only if the school particularly requests it (2015: email appendix). The findings show that even when school-based counsellors were available for schools in the area, few schools had one assigned to them.

Moreover, there is a lack of understanding as to whose role external bereavement support is. Auman (Auman 2007, cited by Potts 2013: 11) exemplifies the misunderstanding voiced by some respondents who by suggesting that the school nurse is responsible further support the notion that a medicalisation of bereavement has evolved (Potts 2013: 11). It might also be pointed out that reliance on the school nurse disregards the fact that nurses do not visit schools daily. Respondents' answers point to a lack of bereavement training for teachers; a majority desire to obtain training; a sense that teachers feel some inadequacy in talking with bereaved children and a lack of known resources within and without the school to support them in this. Taken together, the findings from the quantitative data makes an original and useful contribution to discerning what methods teachers utilise, how they are trained, whether school-based policies are written and how teachers feel about managing bereaved children in their classrooms.

Chapter 6

ANALYSIS AND FINDINGS FROM AN EVALUATION OF BIBLIOTHERAPY

CHAPTER INTRODUCTION

A previous chapter discusses the evolved portrayal of death and loss in children's literature from the nineteenth century to the twenty-first, and suggests that whilst reference to death in children's books has shifted with changing times, there remains a denial of certain deaths and awkwardness with discussing other specific losses. This chapter builds on that research, exploring some of the history of bibliotherapy, otherwise known as the use of books to help problem-solve, and how different practitioners can use books to facilitate grief resolution. Comparisons between clinical and developmental approaches and further differences between cognitive self-help bibliotherapy and that which is fiction-based will be explored. Although research suggests that British primary schools are not generally and recognisably using fiction bibliotherapeutically, teachers that read stories with themes of death and loss could be initiating the problem solving process.

The chapter considers whether primary school teachers, who are not psychotherapists and who have negligible access to school counsellors, should implement the foundations of bibliotherapy. By investigating the use of fairy tales for problem solving, this chapter builds on theory initiated by Bettelheim(1976), and adds to the inter-disciplinary fields of education, psychology and English, all of which are represented in different parts of this thesis. The inclusion of bibliotherapy research is therefore relevant for expanding the discussion and for contributing to an under-researched area of educational practice in Britain. Peryon (1982) states that bibliotherapy in educational settings became popular from the 1940s (Peryon 1982, cited by Afolayan 1992: 139). More recently, Sullivan and Strang (2002) suggest that 'interest is growing in the use of bibliotherapy as a resource for professionals working with school-age children in the classroom setting' (Doll and Doll 1997, cited by Sullivan and Strang, 2002: 75). The lack of evidence detailing if and how bibliotherapy is used in British primary schools, however, contrasts with the statements above, suggesting that evidence of bibliotherapy being used or having gained popularity, refers predominantly to schools outside of Britain, or to some secondary schools.

Bibliotherapy is neither a universally known term nor a widely used practice in British primary schools, and whilst research shows that in the U.S.A., bibliotherapy is used in

schools as a problem solving tool (Doll and Doll 1987; Sullivan and Strang 2002; Parker 2005), the recognition of the potential benefit of bibliotherapy in British classrooms is a more recent phenomenon (Johnson 2004: 293). Possible reasons for growing interest could be: more troubled children in mainstream schools; the increasing media influence of American culture, and possibly, growing cultural consciousness of the effect on adults of unresolved childhood traumas. This research into the relevance to British schools of using different bibliotherapeutic interventions to help bereaved children, comprising either self-help, cognitive-therapy workbooks, or children's fiction, thus fills a gap in the field of knowledge.

History

Although bibliotherapy is a strategy not noticeably endorsed for use in British primary schools, it nonetheless represents an historically ancient practice. There is evidence that in Greek culture bibliotherapy is claimed to be as old as 300 BCE¹⁷⁹ (Afolayan 1992: 137) where it is perceived as 'nourishment of the soul' (Cardenas 1980: 3, cited by Afolayan 1992: 137). The word *bibliotherapy* emanates from the Greek *biblion* meaning 'book', and *therapeia* meaning 'to heal' (Crothers 1916, cited by Afolayan 1992: 138). Scholars who have reviewed the history of bibliotherapy, unanimously suggest that the actual term 'bibliotherapy' was first used by Crothers in 1916, to describe how books could help patients understand their problems (Sullivan and Strang 2002: 75). Rush was one of the first Americans to suggest using books therapeutically, (Weimerskersch 1964: 6) and John Galt in 1840 first wrote about reading as an alternative intervention technique in hospitals¹⁸⁰ (Weimerskersch 1964: 6, Afolayan 1992: 138).

Definition

Whilst bibliotherapy was used psychotherapeutically and effectively in American mental hospitals, and to 'heal' suggests clinical intervention, for the purposes of this chapter the phrase will be more generally used to suggest the ability to see problems from a different perspective (Lenkowsky [1987] 2001: 123) and for gaining resolution. Later, following the First and Second World Wars (1914-18; 1939-45), bibliotherapy as a treatment for soldiers with post-traumatic stress disorders 'received widespread attention' (Schechtman 2009: 22). Although there are many definitions of what bibliotherapy is, it is commonly understood to be the use of reading books, either individually, with another, or with a group, to promote psychological or emotional

¹⁷⁹ Before Common Era. (see glossary)

¹⁸⁰ Later available as a series of essays published 1846.

change through problem solving. Some definitions are:

the use of reading to produce affective change and to promote personality growth and development. (Lenkowsky [1987] (2001): 123)

guided reading¹⁸¹ that helps individuals understand the self and environment, learn from others, or find solutions to the problems. (Schrank and Engels 1981, cited by Todahl, Smith, Barnes, and Pereira 1998: 98)

the practice of using books and stories as part of the treatment of emotionally and mentally disturbed people. (Jones 2001: 15)¹⁸²

'a child-friendly, noninvasive method' to help students achieve emotional intelligence (Sullivan and Strang 2002: 77).

Although the primary concern of the study is with primary school bibliotherapy, it is important to state that notwithstanding variance in definitions of what bibliotherapy is, the strategy was initially used only for adults. Bibliotherapy has also been used extensively for children in the U.S.A. and from the late 1960s this included bereaved children (Jones 2001: 16).

The self-help tradition

Historically, reading books for self-improvement is said to have begun in the eighteenth century with Abraham Lincoln (Phillips 1992: 5, cited by Effing 2009: 128) after which bibliotherapy became known as a genre in the USA and was established with the publishing of the book *Self-Help* (Smiles [1859] 2006, cited by Effing 2009: 129). Whilst cognitive bibliotherapy offers the possibility of medical-free help, it nonetheless provides insufficient intervention for everyone. Cognitive therapies are based on the premise that behaviours are learned and can therefore be unlearned (Schechtman 2009: 23), and rely on a person's personal motivation to change behaviour.

Consequently, some self-help books, including those for children, involve work sheets and 'tasks'. Their success in problem solving depends on an ability to read and

¹⁸¹ Since in primary schools teachers and teaching assistants 'teach' the process of *guided* reading to children in a group situation, the term 'shared reading' might be more appropriate to bibliotherapy in a primary school setting.

¹⁸² For this thesis, the assumption is made that the model of a bereaved child will be otherwise mentally healthy.

understand the work expected, and a willingness to complete assignments and workbooks independently (Schechtman 2009: 25). Cognitive bibliotherapy as the sole intervention could therefore be ineffective in children under seven years of age, and inappropriate for use with primary school children struggling to write.

Clinical use

Clinical bibliotherapists are trained to suggest particular books for reading (Hynes 1988, cited by McArdle and Byrt 2001: 520) as an additional resource to client-therapist psychotherapeutic sessions. These are most likely to be fiction books for the client to read between therapy sessions before discussion with the therapist. Whilst psychotherapeutic, bibliotherapeutic intervention can be either a cognitive workbook or a story, fiction is most often suggested as a way to help patients with 'emotional catharsis, active problem solving and personal insight' (Lanza 1996, cited by McArdle and Byrt 2001: 520). Carlson and Arthur support this premise noting that the 'therapeutic use of story is grounded in psychoanalytic theory' (Carlson and Arthur 1999: 216), a strand already explored above.

Schlenker asserts that up until the mid-1970s, bibliotherapy was approved for the offices of trained therapists only (Schlenker 1999: 30). Having discussed some of the aspects of clinical, therapist-led bibliotherapy, he suggests that within the field there are two main approaches used: *Clinical Bibliotherapy*, which is employed by a qualified counsellor, therapist or psychologist (Cook *et al* 2006: 92); and *Developmental Bibliotherapy* which can be utilised by an adult untrained in psychotherapy.

Nonetheless, Schlenker notes that within the field of bibliotherapy, division between clinical and developmental strands is complex, since a teacher will easily resolve some outwardly difficult problems, whilst some deceptively simple problems will require therapeutic intervention from a psychologist (Schlenker 1999: 30). However, as proportionally more children in a mainstream primary school will be mentally healthy than not, the need for only clinical, therapist-led bibliotherapy at school is minimal.

DEVELOPMENTAL BIBLIOTHERAPY IN SCHOOLS

Pardeck endorsed the use of bibliotherapy as not only a clinical tool for professional practice but also for lay-workers (Heath *et al* 2005: 564). Lucas and Soares extend this premise, stating that developmental bibliotherapy can be successfully implemented by teachers in schools (Lucas and Soares 2013: 142). Arguably, the familiar classroom setting and the potentially powerful bond between teacher and child can make it the most favourable place for bibliotherapy to occur (Lucas and Soares 2013: 145).

However, there is disagreement as to how proficient teachers would be. Antila asserts that the main qualifications for a facilitator are 'a concern for children and a desire to explore children's literature' (Antila 2009: 18), while Cook *et al* (2006: 92) suggest that teachers unused to discussing death could struggle with the responses of bereaved children. Lucas and Soares (2013: 141) emphasise that whilst developmental bibliotherapy can be successfully implemented in schools at all age levels, (Lucas and Soares 2013: 142) it should be 'guided by trained psychologists' (Lucas and Soares 2013: 142).

Although not at all widespread in British schools, developmental bibliotherapy is commonly implemented in the USA by teachers, or other non-clinical adults 'to facilitate normal development and self-actualization with an essentially healthy population' (Afolayan 1992: 139; Kramer and Smith 1998; Rubin 1978, cited by Pehrsson 2005: 3, McCulliss 2012, cited by Lucas and Soares 2013: 141). Teachers are concerned with 'everyday situations that inevitably occur as part of the complex social and emotional classroom environment' (Maich and Kean 2004: 4) and it is therefore more likely that teachers use bibliotherapeutic strategies and shared-reading without presuming any resemblance to a therapeutic process they are unqualified for.

Reading popular stories, such as *The Huge Bag of Worries* (Ironsides and Rodgers 1996) can provide teachers with an instant, comfortable way of dealing with children's upsets. Whilst there is a need for more recent case studies citing the effectiveness (or otherwise) of using either clinical or developmental bibliotherapy for specific problems, (Heath *et al* 2005: 565) bibliotherapy practitioners have reported the effectiveness of sharing books in situations similar to those mentioned already. Although the effectiveness of talking therapies is hard to prove, and large-scale trials are not as common as those for drug trials or cognitive-therapy, Heath *et al* discussing developmental bibliotherapy, state

...studies indicate that bibliotherapy is helpful when working with children and families dealing with loss or transition and that this includes divorce (Brennan 1990) death, parental unemployment or marital separation (Morris-Vann 1983, cited by Heath *et al* 2005: 564).

Whilst the merits of bibliotherapy are clearly not restricted to bereaved children, the research referred to shows that a significant number of children each year are bereaved through death and loss; many will retain unresolved issues. The use of

bibliotherapeutic literature for children experiencing common problems including loss of friendship; feelings of anger and fear; moving house, divorce and the effects of new family dynamics, has been positively acknowledged by Pardeck as a technique possible for teachers and parents to use (Pardeck 1989, 1990a, 1991, 1996, 1998; Pardeck and Pardeck 1993, 1997 and 1998, cited by Heath *et al* 2005: 564) and inevitably this would be developmental bibliotherapy.

Six goals

Whilst a clinical intervention with a trained therapist is appropriate (and available) to some, reading certain books is generally agreed to potentially help readers solve personal problems (Pardeck 1993; Riecken and Miller 1990; Jones 2001; Milton 2004). The six goals of bibliotherapy proposed by Pardeck and Pardeck (1995: 110) initially related to clinical bibliotherapy, but they apply whichever method of achieving them is undertaken. They suggest:

1. To provide information.
2. To provide insight into a specific experience or situation.
3. To provide alternative solutions to the problem.
4. To stimulate a discussion of what the actual problem is.
5. To communicate new values and attitudes with regard to the problem.
6. To help students understand that they are not the only one who has experienced this problem.

(Pardeck and Pardeck 1995: 110, cited by Cook *et al* 2006: 92)

Furthermore, as the goals are clearly linked to problem solving through discussion and insight, they are relevant for managing many common, everyday concerns that transpire in classrooms. It is, however, too simplistic to present the goals to teachers without clarifying the process used to integrate them into a school day. There is negligible empirical research on how cognitive-bibliotherapy helps children (Essau and Ollendick 2012: 2, citing Watkins and Clum 2008) and most of the literature exploring the use of bibliotherapy with children cites affective bibliotherapy (Gladding 2005, cited by Schechtman 2009: 26). There is evidence, however, that learning from stories shared with an adult allows children to reflect on how book characters problem solve (Herbert and Kent 2000, cited by Cook *et al* 2006: 93). By reading a book reflecting a problem similar to theirs, a child could gain insight, experience catharsis and develop strategies to help them manage better (Milton 2004: 60). Furthermore, stories represent periods of relaxation and are synonymous with the routines of bedtime (Gadd

2007: 3) and sharing time with parents. Also part of whole-class story times, they are more likely to ease tension in troubled children than a workbook, and Mallon asserts that whatever a child's age 'there are books that enable them either to prepare for or cope with distressing personal life events' (Mallon 2008: 21).

Many children prepare for more challenging troubles by discussing lesser fears. Fear of the dark, a common innate childhood fear¹⁸³ researched by Mikulas (Mikulus 1985, cited by Lenkowsky [1987] 2001: 128) has provoked empathetic classic texts such as *The Owl Who Was Afraid of the Dark*¹⁸⁴ (Tomlinson and Howard: 2000), *What's That Noise?*¹⁸⁵ (Simon and Melling: 1996) and *Can't You Sleep Little Bear?*¹⁸⁶ (Waddell and Firth: 2013). All the titles address fear through the focalising characters in the stories, which when read with children, can stimulate conversations about additional fears.

Teachers as quasi-therapists

Arguably, there is a danger in expecting teachers to undertake developmental bibliotherapy without support or training. However, since there is sometimes a delay in obtaining help from outside agencies, teachers can be unavoidably required to take on the role of a quasi-therapist¹⁸⁷ with only distance-support from educational psychologists. Evans (1971) clarifies that 'the teacher's role is not as therapist' (Evans 1971, cited by Jones 2001: 20) however, education has clearly become 'more interdisciplinary' (Mackey and McQueen 1998, cited by Maich and Kean 2004: 3) with the emphasis on school inclusion for pupils with behavioural needs (Wood 1998, cited by Maich and Kean 2004: 3). Consequently, teachers have been required to redefine their professional boundaries (Wood 1998, cited by Maich and Kean 2004: 3) and for this, new inexpensive interventions are needed.

It could be argued therefore that teachers untrained in bibliotherapy, already implement part of the process in some way through necessity. The process is ultimately reliant on dialogue and reflection (Lucas and Soares 2013: 139) with the intention not to provide a cure, as with clinically used cognitive bibliotherapy, but to use the curriculum to prepare children for life and to 'enlighten and provide insight' (Caldin 2009, cited by Lucas and Soares 2013: 139). It is therefore a practice not beyond the remit of many

¹⁸³ Bowlby stated that fear of dangers encouraged an infant to seek an attachment figure.

¹⁸⁴ Written by Jill Tomlinson, illustrated by Paul Howard.

¹⁸⁵ Written by Michelle Edwards and Phyllis Root.

¹⁸⁶ Written by Martin Waddell and Barbara Firth

¹⁸⁷ From 2009-10, I taught a class in which two children had severe emotional and social problems, with behaviour well beyond anything that my training had covered. I wrote a daily log to the educational psychologist as a support system to help me manage their behaviour.

primary school teachers who are dealing daily with the side-effects of children's unresolved grief. Whilst not suggesting that teachers are therapists, my argument is that teachers could begin the process of developmental bibliotherapy, particularly as supported facilitators, for children assessed as sufficiently mentally adjusted to manage without psychotherapeutic intervention.

The limits of teacher intervention

Whilst reading a book plays a significant role in developmental bibliotherapy, Lucas and Soares (2013) make the important distinction that bibliotherapy 'is not simply a reading activity' (Lucas and Soares 2013: 139), which contrasts with Sullivan and Strang's assertion that a reason for incorporating bibliotherapy into the curriculum is to strengthen reading skills (Sullivan and Strang 2002: 77). Sullivan and Strang are possibly advocating the use of reading as a context already familiar to children in classrooms, but the complex process of developmental bibliotherapy requires a facilitator who can judge when a child's problem is beyond their scope without feeling professionally deficient.

As noted already, clinical bibliotherapy requiring therapeutic methods, is for children 'with serious emotional problems' (Abdullah 2002: 1) and Cook (2006) notes this would occur in a structured setting (Cook *et al* 2006, cited by Foss 2009: 3). However, the use of alternative therapies such as one-to-one art therapy already occurs in some schools using an external practitioner. The document *Guidelines for the Provision of Counselling, Psychotherapy and Play Therapy in Southern Counties*¹⁸⁸[sic] Schools (Ryan 2010) states that a 'willingness to use creative arts therapeutically' (Ryan 2010: 17) is deemed an essential requisite of a school counsellor/play therapist.

Consequently, whilst some teachers regularly share stories with overtly unhappy children as a short-term measure, others might not only correctly assume that they are not capable of managing the deeper emotions emerging from a session with a severely-troubled child, but think the counsellors should be solely responsible. My findings suggest that some teachers believe this to be so. Hence, even with training, it would be likely that a primary school teacher would agree with Lucas and Soares (2013) that there is a need for collaboration with the educational psychologist allocated to a school (Lucas and Soares 2013: 142), further supporting the premise that developmental bibliotherapy rather than clinical is the only strand appropriate for teachers to employ.

¹⁸⁸ Not the true name, county name removed.

Moreover, which children should experience developmental bibliotherapy in schools is as relevant as who is equipped to facilitate it, and depends largely on the accuracy of initial judgements. Accordingly, the decision as to whether there is a need for therapist intervention is dependent on which professional makes the decision: doctor, counsellor or teacher (Lindeman and Kling 1968: 36). Lindeman and Kling assert that this is partly dependent on whether the practice of bibliotherapy is perceived as treating the mentally ill, the maladjusted or 'as a natural part of classroom curriculum used in meeting the developmental needs of children' (Lindeman and Kling 1968: 36). Although Lindeman and Kling are differentiating between clinical and developmental bibliotherapy, whether or not any potential bibliotherapist requires training in psychotherapy or is able, with training, to facilitate some of the bibliotherapeutic process is clearly debatable. Afolayan (1992) suggests that the qualities of the facilitator help determine its success and that the traits of patience, self-confidence, empathy and emotional stability are essential (Afolayan 1992: 144, citing Edwards and Simpson 1986).

Interventions within the competence of teachers

Despite possible misgivings, the extent of available books coupled with teachers' willingness to help troubled children make school-based developmental bibliotherapy a school practice worth exploring. Consequently, guidelines are needed for those teachers who wish to begin the process themselves with suitable support, even if they then need to assign the whole case to an educational psychologist or counsellor. Despite their origin in clinical bibliotherapy, there is value in discussing the four areas relevant to the administering of the bibliotherapeutic process from which it is hoped that catharsis and insight will occur (Afolayan 1992: 140). The stages for the process are succinctly summarised by Pardeck and Pardeck (Pardeck and Pardeck 1993, cited by Lucas and Soares 2013: 143) as:

TABLE THIRTY: Stages in the bibliotherapy process

<i>Identification</i>	of the problem, behaviour
<i>Selection</i>	of appropriate literature
<i>Presentation</i>	of the stories
<i>Follow-up</i>	with reading and discussion

These four bibliotherapeutic stages are useful, although they are extended by Aiex (Aiex 1993, cited by Cook *et al* 2006: 94) and have been recently reviewed and updated by Lucas and Soares (2013: 143) who transpose the word 'implementation' for 'presentation'. By examining each part of the process, it can be seen how adequately trained and supported teachers could implement developmental bibliotherapy in primary schools. I will use Pardeck's four stages to discuss the process, although the obvious over-lap between them suggests that separate sections are unnecessary.

Stage One: Identification

As discussed above, troubled children that are grieving are often unable to manage their feelings alone and can find it difficult to talk to family. Teachers with no training in death and loss education face a more problematic situation than those who realise the link between a child's behaviour and bereavement. The problem behaviour is sometimes easier to understand, and even defuse, once a cause is suspected¹⁸⁹. To initiate developmental bibliotherapy, the teacher needs to identify the root of the child's problem so that they can assess their ability to deal with it and be able to offer a suitable selection of stories for shared reading. The books chosen must therefore be credible and relate directly to the child's 'target behaviour' (Cook *et al* 2006: 93), which in a bereaved child might include uncontrollable anger towards others, temper tantrums, excessive weeping, social withdrawal and clinginess to adults. If the teacher has successfully identified the root of the problem, the principle of developmental bibliotherapy is that the child empathises with a character experiencing similar problems to themselves, and identifies with the 'needs, wishes and frustrations of that character' (Carlson and Arthur 1999: 216). From this, resolution is ultimately possible.

Clearly, the age of the child and their reading-age affects the books offered, alongside whether they are text-free, picture books, or chapter books. Lucas and Soares expand this theory and suggest that for children aged three to six years, books addressing 'daily life-problems' might be most interesting. They suggest that for children of seven, adventures or fairy tales with less text might help (Lucas and Soares 2013: 143) with problem solving whilst older children often prefer more elaborate fairy tales comprising 'images and text with simple sentences' (Rosario 2004: 143, cited by Lucas and Soares 2013: 143). As the younger children in a primary school will be four years old, picture books are an important resource.

¹⁸⁹ Personal classroom experience supports this theory.

Accordingly, Schlenther (1999) notes that for children not yet reading, pictures in books are essential to their understanding (Schlenther 1999: 33). To support this premise the research undertaken by Hunt, previously a primary school teacher, cites the case of a child of three selecting the book *The Snowman* (Briggs [1978] 2013) following her mother's death. The child selected the story herself and although unable to read, the pictures clearly held meaning for her. She became fixated on the last page, and in an effort to come to terms with what 'being dead' means, she repeatedly asked 'Is he dead?' (Hunt 2006: 41). Reading the book independently would not have allowed the discussion that in itself demonstrated the child's dubious understanding, or need to have the facts repeated. In contrast to the therapeutic model, where a facilitator selects books for the child to choose from, Hunt asserts that children need freedom to select stories themselves, and can do so from 'a kind of innate wisdom' (Hunt 2004, cited by Hunt 2006: 41). Hunt continues that adults should respect this ability (*ibid.*). The books presented should therefore cover a wide range of formats.

Stage Two: Selection

The teacher's ability to select book titles to choose from, appropriate to a child's needs, is obviously crucial to success, but another consideration is story endings that promise the impossible. These could do more harm than good, such as the book *Up in Heaven* (Chichester Clark 2013) which should be used cautiously, for its promise to the focalising character of a new dog to replace the dead one. To simplify the way that teachers could approach book selection I refer to Carlson (2001), who itemises the questions teachers could ask of a book:

TABLE THIRTY-ONE: Questions for teachers to ask of a book

Is the story simple, clear, brief, non-repetitious, and believable?
Is it at an appropriate reading level and developmental level?
Does the story fit with relevant feelings, needs, interests, and goals?
Does it demonstrate cultural diversity, gender inclusivity, and sensitivity to aggression?
Does it demonstrate cultural diversity, gender inclusivity, and sensitivity to aggression?

(Carlson 2001); (Cartledge and Kiarie 2001, cited by Maich and Kean 2004: 7)

Apart from the third and the final questions, which are clearly bibliotherapeutic in character, the questions resemble those most teachers would consider before suggesting a book for a child to read. Consequently, most of the developmental

bibliotherapy process is not entirely alien to primary school teachers. A study by Cohen (1994) reveals that people benefited most from stories in which they could identify with the book characters (Cohen 1994, cited by McLeod 2006: 80). This is validated by Pardeck (1990b: 1043, cited by Carlson and Arthur 1999: 216) and Cook *et al* (2006) who assert that underlying the success of bibliotherapy is the ability of the child to identify with literary characters similar to themselves (Cook *et al* 2006: 93). This follows earlier work from Bettelheim(1976) who suggests that it is more important for a child to consider 'Who do I want to be like?' than 'Do I want to be good?' (Bettelheim 1976: 10, cited by Schechtman 2009: 28), making it vital that the child is drawn to the characters whose problems are resolved within the books offered. Furthermore, Lucas and Soares emphasise, that successful bibliotherapy is dependent not only on book selection by a competent facilitator, but on encouraging children to realise that there is more than one solution to a problem (Lucas and Soares 2013: 142).

This is more relevant to the stage of follow-up discussions but has a bearing on the books initially selected, as some books lend themselves better to the consideration of alternative endings than others. Identifying with a focalising character that has come to terms with grief, mourned and moved on would be a very powerful experience for a bereaved child. While there have been few recent children's fiction books detailing feelings in the first year after bereavement, book titles such as *Michael Rosen's Sad Book* (Rosen and Blake 2004), *A Place in My Heart* (Aubrey and Barton 2007) and *Milly's Bug-Nut* (Janney and Bailey 2002) all detail the experience of mourning. Similar books are particularly useful for children whose families avoid discussing the deceased and who practise 'embarrassed denial'. Where children are excluded from 'difficult' conversations, being offered a book to read that echoes their own dilemma can be a lifeline. Selecting books that echo the child's problems relies upon the accurate matching of book to child (Maich and Kean 2004: 3), a point emphasised by Crago who stresses that 'bibliotherapy rests on the possibility of such matching' (Crago 2005: 182).

Drawing on research by Nell (1998)¹⁹⁰, Crago maintains that 'the optimal conditions for 'bibliotherapy would be when a reader... already capable of ludic reading... encounters a text... which matches his or her developmental stage or recurrent inner themes' (Nell 1998, cited by Crago 2005: 185). From this, resolution can occur and bibliotherapy is

¹⁹⁰ Nell (1998) investigated 'ludic reading' 'where readers willingly become oblivious to the world around them...The reader 'merges' with the characters and events of the work' (Crago 2005: 185).

seen to have been a valuable intervention or additional support to other measures. However, a contrasting view proposed by Schlenther is that children do not necessarily want to read about their own problems, but *will* be content to read about focalising characters grappling with different problems (Schlenther 1999: 34) with satisfactory conclusions. Children beginning to manage their grief could feel overwhelmed from reading a 'sad' book making it vital to offer a wide selection and follow the child's decision. Understanding the process of problem-solving might be the most important achievement and an important distinction when some losses are rarer to read about than others.

Stage Three: Presentation

How books are presented to the child requires skill from the facilitator to help the child choose from books available to them (Mitchell-Kamalie 2002, cited by Lucas and Soares 2013: 143); a situation a child should be familiar with in class from choosing books for individual reading with a teacher. However, whilst Lucas and Soares state that it is important for a facilitator to introduce the story theme by saying 'this story is all about... ' (Lucas and Soares 2013: 143), arguably this could be perceived as overtly didactic. It might take time for children to acknowledge the similarity of their own life, or problem, to the story plot. Additionally, the location for presenting books for bibliotherapy is as important as the books selected. Presenting books in a noisy classroom with interruptions from other staff, other children, or school incidents could make the experience stressful. Quiet-reading time, or whole-class independent activity time, would encourage success, as already suggested for guided-reading.

Stage Four: Follow-Up

Follow-up is unavoidably intertwined with the other three stages, causing repetition in the guidance. It is here, therefore, that the distinction becomes vital between reading a book, and developmental bibliotherapy. In support of this clarification, Pardeck and Pardeck assert that without the success of the previous stages and without successful resolution from the final stage, the follow-up process is merely reading (Pardeck and Pardeck 1993, cited by Berns 2004: 325) and as such is not bibliotherapeutic. The significance of this distinction relates to both clinical and developmental bibliotherapy, and notwithstanding the consequence of book choice and session location, Lucas and Soares stress the importance in follow-up of paying attention to children's comments (Lucas and Soares 2013: 143). There is also a requirement for the facilitator to avoid sermonising or asking sets of questions that collect data, and for constructing an argument from which solutions can be found (Lucas and Soares 2013: 143). Questions

aiming to help a child suggest solutions (Lucas and Soares 2013: 144), and directed to the child's feelings (Davis 1992, cited by Lucas and Soares 2013: 143) could be: 'What could happen if...' 'What would you do if...?' (Rosàrio 2004, cited by Lucas and Soares 2013: 143).

Guided reading

A possible solution to the time needed for individual reading sessions could be for a teacher to incorporate the time into a curriculum guided-read, with the proviso that a competent teaching assistant was available to supervise the remainder of the class in the teacher's presence, for primarily independent activities. This is a normal use of resources in primary classrooms and within the new 2014 Primary Curriculum,¹⁹¹ guided-reading is already suggested as a very useful tool for flexible teaching and for children to learn from one another, if it is well planned and with 'carefully-chosen texts' (DfE 2013: 2). Feasibility would depend partly on whether a small group of children shared similar problems. A dilemma could be the book choice relevant to a diverse group. Crago reinforces this concern by asserting that selecting a book 'is a question of a very 'private' transaction' (Crago 2005: 182) between child and bibliotherapist. However, although the chosen book and approach that suits one child clearly might not suit another, group sessions may have the potential to encourage better self-awareness in a child, and peer support can help them perceive a situation differently (Berns 2003: 331; Lucas and Soares 2013: 142).

At the same time, a reading group disrupted by the actions of a very troubled child can prevent progress being made by other children. My experience of guided-reading is that some children are shy to speak in a group, and those children recently bereaved might be embarrassed by group sessions, especially if peers have since treated them differently. In support of these misgivings, Berns elucidates some concern over group-work being perceived as a 'cure-all' (Berns 2003: 332). Also relevant would be whether it was easier for the teacher to undertake bibliotherapy than to manage the behaviour resulting from children's unsolved problems. With permanent counsellors rare on primary school staff, a group-read is at least a temporary solution to time-allocation dilemmas.

¹⁹¹ In the New Primary curriculum for 2014, as *The Role of Guided Reading (2013)* [online] Available at http://fdslive.oup.com/www.oup.com/oxed/primary/literacy/guidedreading_report.pdf?region=uk (accessed 29.5.14)

Classroom discussions after shared reading or during guided-reading have developmental potential. Research by Riecken and Miller (1990) suggests that teachers 'can easily set and adjust the pace of the story-reading session to allow for prolonged discussion of the problematic issues embedded in the narrative' (Riecken and Miller 1990: 63). Successful follow-up seems to rely on several factors: the chosen book should be interesting, but not scholastically over-challenging, and as Crago maintains, the book needs to create a sufficient parallel to the child's condition for them to be moved to 'talk about what has previously been inchoate' (Crago 2005: 187). This can be better accomplished by using a familiar story as the plot is already understood. Jones suggests that an effective story is one that can be read and re-read, becoming a continuing resource for any bereaved child (Jones 2001, cited by Berns 2004: 333).

Books with familiar stories employing losses and resolution, suggests the usefulness of fairy tales as a genre for problem-solving, and it is to fairy tales for developmental bibliotherapy that I now turn.

Using fairy tales

The enduring popularity of fairy tales for adults and children is a much-researched subject (Tatar 2009; Teverson 2013; Zipes[2012] 2013) that has been explored in relation to both its conscious and unconscious impact on readers. Known to many pre-school children, fairy tales remain classic books within British culture, despite those best known having been translated from past historical times and non-British cultures. Berne (1975) suggests that any culture includes an abundant store of narratives including films and fairy tales, from which self-narratives can transpire (Berne 1975, cited by McLeod 2006: 45). Although Teverson asserts that fairy tales can only be understood in the cultural context in which they were written and received (Teverson 2013: 124), conversely, the scenarios of loss within fairy tales have the potential to reach troubled children of any culture. In contrast to Teverson (2013), Riecken and Miller (1990) assert that the wide range of problems and problem settings expose children to the reality that there are many alternatives to solving problems (Riecken and Miller 1990: 62).

A literature of grief and problem-solving

It could therefore be argued that complete cultural understanding is less important than the potential for problem-solving. Children who are lost or unwanted, or who feel different and isolated from peers, or are living in crowded conditions are all scenarios addressed in fairy tales at the time they were written, and easily resonate with the

experiences of some twenty-first century children (Riecken and Miller 1990: 63). Fairy tales show children that there are 'difficult and painful growing up experiences which cannot be avoided' (Bettelheim 1976: 215). Bettelheim¹⁹² equates the 'agonizing problems' of parental death in fairy stories with the real-life event or fear of it for children (Bettelheim 1976: 8) and Johnson, who extends the discussion to endorse the usefulness of fairy tales, asserts that some fairy tales are the first literature of grief for children (Johnson 2004: 295). Accordingly, Tatar asserts that fairy tales help children 'navigate and manage what lies ahead' (Tatar 2009: 89) through 'broadening their understanding of the human condition' (Tatar 2009: 89); a measure that Tatar concludes is important in a culture that has made dying a private, medical fact of life from which children are spared (Tatar 2009: 102). Helping children, rather than shielding them, is a strategy supported by Heath *et al* (2005), echoing Rando's assertion above that misfortune can be healthy.

Heath *et al* maintain that it is through conflict that we become dissatisfied with our lives and encouraged to find alternative solutions (Heath *et al* 2005: 210). Moreover, Tatar validates that 'stories for children would lose their power very quickly if there were nothing but sparkle and shine' (Tatar 2009: 81). Themes of death and loss prevail in fairy tales, and as their therapeutic value is largely missing from mainstream British culture (McLeod 2006: 59), their inclusion here is relevant for school-based developmental bibliotherapy, not least for the accessibility of the tales as a resource to use with bereaved children. Whilst it could be argued that only a skilled counsellor should be attempting to discuss themes of death and loss, whatever the book, teachers mostly have to manage immediate situations, for which there is no planned response¹⁹³. Furthermore, notwithstanding a cautionary note that adult interpretation of the tales must be carefully undertaken, stories demonstrating that other bereaved children have solved their own problems are a valuable and positive bibliotherapeutic resource.

Heath *et al* stress that bibliotherapeutic books should be chosen for what characters *can* do to solve problems, rather than for what characters cannot accomplish (Heath *et al* 2005: 569) and that the character should be a good role-model for problem-solving skills (*ibid.*). If read with a facilitator, who asks questions similar to those outlined above, a child could appreciate that not only can hardships be overcome, but that the

¹⁹² Although Bettelheim's work is not current, it is nonetheless, a relevant and inspiring work that has influenced more modern writing and for that reason is included in this thesis.

¹⁹³ The lack of school-based policy is discussed in the chapter on educational policy findings.

character's actions enabled a successful outcome. As already discussed in the literature review, children beginning to leave behind the 'magical thinking' stage, during Year 2 of primary school, improve their ability to understand death as irrevocable and irreversible. Tatar supports this view and comments that it is 'precisely through fairy tales and fantasy that children learn to move beyond magical thinking'¹⁹⁴(Tatar 2009: 140), making their bibliotherapeutic potential partly founded in theory.

Place in the curriculum

As fairy tales already form part of the curriculum in mainstream schools, the problems of time-management for developmental, bibliotherapeutic, cyclical sessions are partly addressed. The prescribed lessons for Key Stage One and lower Key Stage Two¹⁹⁵ (D.f E. 2013: 25) encompass fairy tales, and their problem-solving propensity therefore utilises a genre currently endorsed in two areas of the National Curriculum: *Speaking and Listening* and *Reading*.

The pre-2014 National Curriculum programmes of study for English Literature (EN1 *Speaking and Listening*; 2d) which will still apply to pupils in years two and six¹⁹⁶ suggest the need for pupils to 'listen to the reactions of others' (2000: 6, 2d) 'take different views into account' (2000: 6, 3c), 'extend their ideas in the light of discussion' (2000: 6, 3d) and plan for the sharing of 'ideas and experiences' (2000: 7, 10b). As teachers are trained to discuss texts with classes and to model listening to opinions, children are already learning the questioning skills needed for the start of the bibliotherapeutic process.

The present *National Curriculum for Reading* states that children should be taught to: 'identify and describe characters, events and settings in fiction' (DfE 2000: 6, 3b) and to read 'retellings of traditional folk and fairy stories' (DfE 2000: 10, 6c). In Key Stage 2, children are specifically taught to 'qualify or justify what they think after listening to others' questions or accounts' (DfE 2000: 16, 3c) while 'looking for meaning beyond the literal' (DfE 2000: 19, 2c). Stories explored can include: modern fiction, long-established fiction, and traditional tales (DfE 2000: 21, 8a,b, f) such as *Rumpelstiltskin*. From September 2014, the statutory requirements for reading for Year One children

¹⁹⁴ 'Five to eight year olds are in the stage of magical thinking, believing that wishing can make something happen' (Mallon 2008: 31)

¹⁹⁵ Years three and four, ages seven to nine.

¹⁹⁶ The present statutory guidelines apply due to the National Attainment Tests undertaken by children in those year groups but in 2016, all children will be taught the new Programmes of Study. [online] Available at <https://www.gov.uk/government/collections/national-curriculum> (accessed 21.5.14)

(ages five to six) stipulate that children should 'be encouraged to link what they read or hear to their own experiences' (DfE 2013: 11) 'becoming very familiar with key stories, fairy stories and traditional tales' (DfE 2013: 11) and to 'participate in discussion about what is read to them, taking turns and listening to what others say' (DfE 2013: 11). All of the above requirements reflect suggested bibliotherapeutic elements.

Inevitably, the need to avoid text repetition within long-term curriculum planning requires some didacticism from teachers in choice of text, meaning that the child's own problems might not be met via the curriculum, and would be better covered by another book. For those children, one-to-one help with their own choice of text could be more beneficial and Bettelheim notes that children are able to unconsciously select the fairy story that best relates to their life situation (Bettelheim 1976, cited by McLeod 2006: 45). Both Berne (1975) and Bettelheim (1976) suggest that story messages heard by the very young can continue their influence on children when adults, and that without intervention, they will continue to identify with those same characters and world-views (Berne 1975; Bettelheim 1976, cited by McLeod 2006: 45). Obviously, some fairy tale experiences will have less meaning for twenty-first century children, but being unwanted and malnourished; or physically abused and frightened; or distressed from an adult protector turned perpetrator, remain experiences some children suffer.

In such cases, the grief of the situation is tangled with the beneficial effects of losing the abusive relationship (Ribbens McCarthy 2005: 34, cited by Penny 2007: 21). Fairy tales in which children suffer at the hands of their parent but achieve positive outcome,^{197 198} such as *Hansel and Gretel*¹⁹⁹ (Grimm 1812), *Snow White*²⁰⁰ (Grimm 1812) and *Cinderella* (Perrault 1697; Grimm 1812²⁰¹), could be illuminating and helpful. Echoing Berne (1975) and Bettelheim (1976), children who are silent sufferers might particularly find that a fairy tale focalising character is one with whom they can identify and from whom they can achieve insight into their own problems. Conversely, although children of divorced parents might find it difficult to accept the gender-stereotypical 'happy ever after' conclusion of most 'prince meets princess' romances, the outcome could still offer hope.

¹⁹⁷ A positive outcome is not necessarily a happy ending, but one seeming reasonable to the child.

¹⁹⁸ The endings vary in these tales depending on the author.

¹⁹⁹ The Grimm's ending has the witch burned alive, the father sees his errors and the step-mother has died.

²⁰⁰ The Grimm's ending is that the queen dances to her death in red-hot slippers.

²⁰¹ The Grimm's version has the Stepsisters' eyes pecked out.

There is, however, a danger to successful insight if a child cannot recognise that the 'as if by magic' world of fairy tales contains not only resolution but also false promises. Although a young child still in the magical-thinking stage might only partly believe that woodcutters can retrieve dead people from inside a wolf, insecure disbelief of this sort is dangerous. Related to Berne and Bettelheim above, an important safeguard to eradicate any occurring misconceptions from using fairy tales for bibliotherapy, is that the child reads *with* the adult, rather than being read *to* in a whole-class story-time slot.

The value of fantastic stories

Bettelheim supports this view, stating that 'ideally the telling of a fairy story should be an interpersonal event into which an adult and child enter as equal partners, as can never be the case when a story is read to a child' (Bettelheim 1976: 152). This is particularly important if reading to children from another religious culture with a different view of death, or if reading to urban children who have never seen a wolf or even any woods. While McIntyre (1999) and Carlson *et al* (2001) stress the need for realistic and feasible plots and outcomes for a book to be worthwhile bibliotherapeutically (McIntyre 1999, cited by Heath *et al* 2005: 569; Carlson 2001, Cartledge and Kiarie 2001, cited by Maich and Kean 2004: 7) the very fact that the stories are fantastic and therefore somewhat unrealistic, provides children with enough clues to realise that the magic of the tales indicates expected fabrication. A contrasting view is that escapism from actuality benefits problem-solving. The distance created through the symbolism in the fairy tale plots and the remoteness of the reality of settings and characters dissociates them enough from reality to promote problem- solving from the safety of imagination.

The Me and the Not Me

McArdle and Byrt (2001) suggest that fairy tales function in the same way as therapeutic storytelling (Hinds 1997, cited by McArdle and Byrt 2001: 520) by encouraging the safe expression of feelings (McArdle and Byrt 2001: 520) and allowing coping mechanisms to emerge. The tales can provide answers 'to questions of which we are unaware because they perturb us only in our unconscious' (Bettelheim 1976: 218). Whilst much has been written about the psychoanalytical approach to understanding fairy tales (Bettelheim 1976; Kuhn 2013; Schanoes 2014) if the experience of sharing surfacing worries is outside of the teacher's remit, it would obviously require therapeutic intervention; however, fairy tales are valuable for most children. Those who have been provided with metaphors for life experiences, and those who were previously unable to verbalise their thoughts and feelings

appropriately, can learn new ways to do so (Pardeck and Pardeck 1993, cited by Cook 2006: 92).

This echoes the relationship between children's literature and Winnicott's work discussed earlier, in which the 'me, and the not me' exist in the transitional spaces between the inner and outer worlds and the spheres of reality and unreality (Kuhn 2013: 15). The value of this theory is that a child can identify the presented problems as similar to their own but occurring somewhere else, making worries more manageable. The stories contain '*universal* truths about love, hate, grief and joy and the unpredictability of human relationships' (Magorian 1981, cited by Mallon 2008: 21) but their remoteness can assign the truths to fictional spaces. Some of the books analysed above demonstrate reality that is distanced in unreality. In support of this statement, and despite the concerns of possible gender stereotyping, fictitious stories portraying poverty or uneasy family situations can help a child believe the feasibility of creating a world they wish to 'invent or inhabit' (Gadd 2007: 3) rather than accepting that the one they are in is all there is.

Mother-figures

The absence of mother-figures or the cruelty or misguidedness of step-mothers or witches towards children, primarily girls, as in *Snow White*, *Cinderella*, *Sleeping Beauty*, and *Rapunzel* (Grimms 1815), contrasts with the role of fairy godmothers who are all good. The bad-mother, good-mother characteristics are therefore embedded in the characters. The work of object-relations discussed above determines the acceptability of a 'good-enough mother' (Winnicott 1985), but in fairy tales, it is clear that women are rarely portrayed this way. Traditionally, witches can represent that 'dark' side in people (Gadd 2007: 5²⁰²) and the symbolism of fairy tales reflects underlying messages, clearly contrasting with explicitly instructional fables, in which mothers teach and protect their children and in which dilemmas are entirely of this world. Bettelheim concludes that contrary to fables, the symbolic meanings in fairy tales are covert enough to lay dormant until our state of mind and development requires them (Bettelheim 1976: 43). Read independently, therefore, fairy tale messages could remain hidden due to the pure escapism that imaginative stories offer.

It is relevant to suggest that whilst the 'dark' side of fairy tales is obvious to adults, it might be less obvious to children. The suggestion here is that since the primary

²⁰² Gadd (2007) *Fairy Tales Come True*. [online] Available at <http://www.anngadd.co.za/2014/11/fairytales-come-true/> (accessed 13.8.15)

curriculum requires the use of fairy tales in teaching and they will therefore be experienced by many children, some of whom will be bereaved, whatever the deficiencies of fairy tales it could still be possible to use them to facilitate problem-solving. This is partly because the familiarity surrounding the stories focuses a child on the problem-solving aspect of the tale rather than on trying to remember an unfamiliar plot. Furthermore, the problems within them are often discussed with untroubled children with no need for developmental bibliotherapy for a specific problem. It is important to re-state however, that there is a potential danger in the use of fairy tales as other than stories for pleasure if used by professionals other than therapists. This is particularly so given the lack of bereavement training for teachers. Undoubtedly, any teacher finding the situation unmanageable should refer the case to an educational psychologist and hope for some advice from colleagues in the meantime.

Financial constraints

Despite the educational and therapeutic arguments for bibliotherapy in schools, it would be simplistic to ignore the practical issue of cost. Cook *et al* (2006) note that an attraction of developmental bibliotherapy is its lack of high expenditure and they maintain that bibliotherapy does not need 'intensive training or immense financial resources' (Cook *et al* 2006: 93). With budget cuts of around two hundred million pounds for 'school improvement and behaviour support' (Crow and Payne for NCB 2013: 24, 3.3.4) set for 2015-2016,²⁰³ an additional benefit is the financial viability of a group of schools collectively training teachers in-house for developmental bibliotherapy. Having ascertained that developmental bibliotherapy is possible to implement in most primary schools, the opportunity for teachers to incorporate it into school practice is dependent on several resource-related factors: the importance of death and loss education to the headteacher and hence some budget allocation for continued professional development; the available support from the school's designated educational psychologist; and budgeted additional classroom-assistant support to allow the teacher time with a child.

Consequently, since the long-term benefit of training teachers outside of ITT to use bibliotherapy would depend on the decisions of the headteacher and school governing body, this argues for the need for headteachers to appreciate its benefits. Clearly,

²⁰³ The 2012-2013 expenditure for the area schools was £98654, compared to £114000 in 2011-12, and £169000 2010-2011. Available at (DfE) Table Six for all 3-year blocks. <https://www.gov.uk/government/publications/local-authority-and-school-expenditure-on-education-childrens-services-and-social-care-2010-to-2011> (accessed 25.4.14) also at same address for each year.

whilst budget and time constraints on teachers in primary schools make provision of additional teacher-support difficult, it is not insurmountable, as demonstrated by extra support for supply teaching during National Attainment Tests. School budgets also normally allow for supply teachers for the allocated, statutory ten per cent of non-contact time for Planning, Preparation and Assessment (PPA).²⁰⁴ Reid (2002) stresses that although problems of school finance will always exist, and they should not be used to inhibit care of children (Reid 2002: 206). Nonetheless, the problem of time allocation is exacerbated from the stipulation for bibliotherapy sessions to be cyclical rather than once a week. This is to enable the development of a bond of trust between teacher and child (Lucas and Soares 2013: 142) but unfortunately, holding cyclical sessions in a school unable to finance extra support-staff could force a teacher to relinquish some lunchtime, or PPA time, to implement the process.

CHAPTER CONCLUSION

A recurring theme of this chapter is that children can be helped to problem-solve in a primary school through fictional developmental bibliotherapy, and that children's literature 'can in very real terms reflect the lived concerns of young children' (Riecken and Miller 1990: 63). In support of this argument, Berns (2004) asserts that by sharing the lives of a focalising character in a story, children can gain 'insight, clarity, understanding, and a sense of camaraderie' (Berns 2004: 326). Elucidated above is the lack of support available for children in Britain from adults experiencing 'embarrassed denial', requiring schools to step in, and although the follow-up stage of bibliotherapy might require the support of a psychologist, (Pardeck and Pardeck 1984: 3, cited by Schlenther 1999: 30) Pardeck and Pardeck suggest that facilitators untrained in psychotherapy can employ the first stages of the bibliotherapeutic process without misfortune (Pardeck and Pardeck 1984: 3, cited by Schlenther 1999: 30). Whilst there are clearly time obstacles and training issues for implementing developmental bibliotherapy, primary school teachers' knowledge of a class makes them well placed to help bereaved children.

Partly, this is due to the amount of time primary school teachers spend with a class which is significantly greater than the time spent with any one group in secondary school and usually greater than the time spent with adults outside of the child's family (Afolayan 1992: 145). Furthermore, the six goals for bibliotherapy overlap what is already taught in primary schools and it is therefore a clearly feasible process to

²⁰⁴ Primary school teachers are legally due this non-contact time, although its implementation varies in each school, with some teachers taking the PPA colleague's class.

incorporate bibliotherapy into a school week. However, time limitations and a noisy setting can reduce the opportunity to implement it. Also, there are disadvantages to using bibliotherapy for bereaved children if teachers have received no training in identifying children's grief symptoms. Berns suggests that a facilitator needs to have 'a thorough understanding of childhood bereavement' (Berns 2003: 332). Moreover, the psychodynamic nature of exploring the past would suggest that teachers should not only be trained to recognise grief in children, but also to know when a situation is beyond their expertise. However, monetary cuts have been detailed as detrimental to the number of school counsellors supporting teachers in schools.

Accordingly, Hunt (2006) asserts that since not all schools have counsellors assigned to them and arguably, not all children require therapeutic counselling support (Hunt 2006: 40), a teacher who is sensitive to a child can be equipped to deal with their immediate needs (Hunt 2006: 40). Schonfeld and Kappelman (1992) also emphasise the importance of good provision for teachers and that as educators 'we can best help children cope with death and grief, whether expected or unexpected, by being prepared' (Schonfeld and Kappelman 1992, cited by Jackson 2006: 34). Just how much preparation is required would depend on each case. Finally, whilst bibliotherapy is acknowledged as effective in helping bereaved children (Milton 2004: 60) and there has been research into the influence on children of the classroom setting, (Galda 1983; Hayhoe and Parker 1990, cited by Benton 1990: 86) there is still insufficient empirical data on teachers using bibliotherapy in British primary schools and which books are most effective.

This is therefore an area for further research; a view validated by Essau and Ollendick (2012) who affirm that research into the effectiveness of fictional bibliotherapy with children is 'a much neglected area of study' (Campbell and Smith 2003, cited by Essau and Ollendick 2012: 2). A clear argument for its inclusion as a resource to include in the primary curriculum is therefore an original contribution to the fields of educational policy and literature.

Chapter 7

ANALYSIS AND FINDINGS OF RESEARCH INTO RELEVANT EDUCATIONAL POLICY

CHAPTER INTRODUCTION

This chapter discusses two types of policy; those written by schools, and agreed by successive governors and staff ²⁰⁵, and those written by advisors and politicians, made into law or statutory guidance, and defined as statements that can be made into texts to be read and interpreted by a particular audience (Trowler 2003: 201); in this case, Education. The chapter begins by showing an in-depth trajectory of test-driven 'policy culture', reflecting the goals and 'dominant discourses and practices within public bureaucracies' (Lingard and Garrick 1997: 2, cited by Trowler 2003: 201), rather than those preferred by schools. Beginning in 1870, the policy trajectory encompasses the period of history discussed in other chapters, providing a background to current education legislation. It also enables an interpretive view of why many primary schools are not writing an internal policy for death and loss education, or prioritising continuing professional development for teachers (CPD), to help teachers cope with bereaved children.

The preceding chapters support a plausible assumption that discussing bereavement in Britain²⁰⁶ is retarded from a prolonged existence of 'embarrassed denial'. From exploring the available research, including findings herein, it can be assumed that this situation unavoidably infiltrates the fabric of many British primary schools, whose social norms might be seen as a microcosm of the wider culture. Aris supports this view stating that a 'conspiracy of silence' about death seems to include the fear of incorporating death into the curriculum (Aris 2005: 50). The situation is possibly hindered by a history of government initiatives forcing children's academic results to take disproportionate precedence over social and emotional learning. Conversely, Reid (2002) asserts that 'the role of the school extends beyond a responsibility of addressing educational policies, and that whilst curricular content is important, the role of carer must be a primary concern' (Reid 2002: 194). Moreover, assessing teachers' strategies for addressing the emotional needs of bereaved children from death or other significant

²⁰⁵ Those policies required by schools to be written, agreed and made available to parents. *Statutory Policies* [online] Available at https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/357068/statutory_schools_policies_Sept_14_FINAL.pdf (accessed 1.9.15)

²⁰⁶ Not counting all religious practice in Britain.

losses largely relies on what the carer's role is perceived to be; what teachers are legislatively responsible for, and why death education in schools is negligible (Lowton and Higginson 2003: 719).

These elements contribute to areas of research already flagged up as historically lacking in Britain (Pratt, Hare and Wright 1987; von Eyre 1996, cited by Reid and Dixon 1999: 219). While there have been reports of the feelings and views of bereaved pupils (Alexander *et al*: 2014) the reported views from teachers are lacking. This suggests a need for more research exploring teachers' opinions on effective and proactive support for bereaved children (Lowton and Higginson 2003), and although modest, my quantitative findings have considered that gap. Furthermore, whilst teachers' attitudes to death have been reported (Pratt *et al* 1987), the possible internal or external obstacles affecting confident practice with bereaved children have been under-reported (Lowton and Higginson 2003). To contribute findings to the field of research, this chapter will explore the impact of some policies that have significantly affected the time and resources available to teachers, and how legislation has influenced the priority given by schools to areas falling within and without the statutory *National Curriculum*. The training available to teachers, their accepted role with bereaved children, and the funds available to train teachers, will be discussed in the light of CPD and school-based counselling.

A policy gap

Over time and successive governments, policies are revised and added to. This 'culture of policy' reflects the goals and 'dominant discourses and practices within public bureaucracies' (Lingard and Garrick 1997: 2, cited by Trowler 2003: 201). The course of the original idea, to its implementation through education acts and reforms can be followed. Perhaps surprising is the rarity of school-based policies to ensure uniformity in the approach of teachers to discussing bereavement. Rowling (2003) asserts that in England a lack of teacher training and education about grief will only improve if there is 'system level policy and training support as well as school community and individual teacher recognition of their potential contribution to young people's wellbeing' (Rowling 2003: 13). This view is validated by Crenshaw (1995) and Holland (2001) who stress that 'staff are unlikely to respond appropriately if they do not have any guidelines to refer to, as they themselves, in certain circumstances may be in a state of shock' (Crenshaw 1995; Holland 2001, cited by Bowie 2000: 25).

Furthermore, and as previously emphasised, losses perceived as lesser losses do affect children. The evidence review of the *Impact of Family Breakdown on Children's Wellbeing* (Mooney *et al*: DCSF and University of London 2009) reveals this as 'a key issue for policymakers since although the government supports stable relationships between parents, where they break down there is a responsibility to provide support to optimise positive outcomes for children' (*ibid.* 2009: 1). Arguably, some of this support must come from the class teacher, who is with the child for most of the day. It is worrying that Shipman, Kraus and Monroe (2001) report less than ten per cent of schools have a bereavement policy (*Shipman et al* 2001, cited by Mallon 2011: 50). One area of thesis findings suggests that since 2001, the situation has hardly changed. Schools have policies on non-curriculum areas such as Sex and Relationships and Equality and Disability²⁰⁷, but rarely on managing daily death and loss²⁰⁸. An experienced headteacher of an infant school in the geographical area of the sample, recognises the personal limitations of staff, but considers a way round it:

I think that sometimes the reluctance to have a death and loss policy in school is related to one's personal experiences and sometimes due to leaders valuing the wrong things in schools! There are times due to personal loss that leaders may feel too emotionally unstable themselves to deliver death and loss [education] – however in my opinion this topic should then be delegated to another leader in the school. (Local Headteacher, name withheld, with permission to be quoted: 2014).

As the effect of loss on adults has been discussed above, this chapter will discuss what determines school-based policy or government policies and whether policy for children's wellbeing ignores bereavement. I begin with a short history of the locus of control and power in British schools.

HISTORY OF PROVISION AND REFORM

1870-1944

The need to reduce illiteracy, and widen accessibility to learning, led to the *Elementary Education Act 1870*, before which, only some middle and upper classes could afford to fund more than rudimentary schooling, mainly for boys (Trowler 2003: 1). Most working-class children only received basic schooling, with the grant-assisted Church

²⁰⁸ This is not comparable to a Critical Incident policy.

schools one of the most important sources of education (Trowler 2003: 1)²⁰⁹. Rates-funded schooling, overseen by School Boards, was made available to all children aged five to thirteen (*The Elementary Education Act 1870*: 471, 74, p.1)²¹⁰. Nonetheless, before 1880, school attendance was not compulsory (Trowler 2003: 2) and it was only after a period in which education provision was described as 'chaotic' (Ball 2008: 62, citing Archer 1979) that schooling became an entitlement, rather than an option, for children up to age ten. It was 1891 before school fees were abolished (Trowler 2003: 2). Provision for ten to fourteen year old children was not consistent until 1918, when the school leaving age was raised to fourteen and control was transferred from School Boards to Local Education Authorities (LEAs) (Trowler 2003: 2).

1944-1988

Despite the severe disruption to education (Gosden 1976: 72) of the war years, the introduction of the 'Butler' *Education Act* of 1944²¹¹ demonstrated continuity of progression. This act distinguished primary from secondary education, ensured compulsory schooling for children aged five to fifteen²¹², and introduced the tripartite system comprising grammar schools, secondary modern and secondary technical schools (Trowler 2003: 2). In 1984, teachers' influence on curriculum development was reduced when the government abolished the Schools Council. The power of policy making shifted to the School Examinations Council (SEC), whose members were nominated by the Secretary of State, and the School Curriculum Development Council (SCDC)²¹³. However, the most noticeable changes came from the *Education Act 1980*,²¹⁴ possibly influencing later decisions as to how schools function (Trowler 2003: 6). More power was allocated to schools and school governors (previously called 'managers'), shifting control away from Local Education Authorities (LEAs) and encouraging schools to compete 'in a market environment' (Trowler 2003: 6). The Act also gave the Education Secretary more authority for policy making (Trowler 2003: 6) thus consolidating a pattern whereby non-teaching individuals made educational

²⁰⁹ Private and voluntary schools were the other two important sources (Trowler 2003: 1).

²¹⁰ Great Britain: 1870 [online] Available at <http://www.educationengland.org.uk/documents/acts/1870-elementary-education-act.html> (accessed 16.8.15)

²¹¹ Great Britain: 1944 [online] Available at <http://www.legislation.gov.uk/ukpga/Geo6/7-8/31/contents/enacted> (accessed 16.8.15)

²¹² In 1972, the school-leaving age was raised to sixteen (McKenzie 2014: 219).

²¹³ *Education in England* (8) [online] Available at <http://www.educationengland.org.uk/history/chapter08.html> (accessed 2.9.14)

²¹⁴ Great Britain: 1980:Chapter 20, Sections 1 and 2. [online] Available at http://www.legislation.gov.uk/ukpga/1980/20/pdfs/ukpga_19800020_en.pdf (accessed 16.8.15)

decisions. The momentum of policy change, and shifts in control, can be traced back to the power structures created by 1980s Education Acts.

1988 and after

By 1988, teachers were considered too 'conservative and resistant to change' (Ball 1990, cited by Ball 2008: 110) and were removed from decision-making roles. Equally, education was thought to have become too progressive, responsible for economic and industrial problems, and no longer 'fit for purpose' (Ball 2008: 110). More reforms followed to correct earlier problems. The 1988 *Education Reform Act* (ERA) (UK Parliament [online] 2009: para.15)²¹⁵ for England and Wales²¹⁶ was the first major education reform primarily for England and Wales (with some extensions for Scotland and Northern Ireland)²¹⁷ for over forty years. Introduced to raise academic standards, (Osborn, McNess, Broadfoot, Pollard and Triggs 2001: 6), it made comprehensive changes to primary education, including the *National Curriculum*. Before this, 'teachers, schools and local authorities had determined the curriculum in each locality' (National Foundation for Educational Research (NFER) September 2009: 5)²¹⁸. Now there was uniformity, but no distinctiveness for curriculum content.

National Curriculum

Streamlining teaching into ten defined subject areas with prescriptive programmes of study, created a volume of work resulting in 'death by ring-binders' (Graham 1993: 102, cited by Tomlinson 2005: 62). The attempt to activate the enormity of the curriculum document adversely affected teacher work-load, causing despair amongst many teachers (Osborn *et al* 2001: 7). This statement can be viewed in the light of the longitudinal PACE²¹⁹ report (*ibid.* 2001: 7), which began after the *Education Reform Act 1988* and charted the attitudes of teachers in Key Stages One²²⁰ and Two, from the early to late 1990s. Teachers were seen as needing increased 'technicist, cognitive and managerial skills' (*ibid.* 2001: 53) and the report suggests that most teachers felt

²¹⁵ *Education Reform Act 1988* [online] Available at <http://www.publications.parliament.uk/pa/cm200809/cmselect/cmchilsh/344/34405.htm> (accessed 31.7.14)

²¹⁶ Scottish education is under the jurisdiction of the Scottish Parliament and the *Education (Scotland) Act 1980* and the subsequent revisions in later acts. [online] Available at <http://www.legislation.gov.uk/ukpga/1980/44/contents> (accessed 20.8.14)

²¹⁷ ERA 1988, Chapter 40, [online] Available at <http://www.legislation.gov.uk/ukpga/1988/40> (accessed 23.8.14)

²¹⁸ *National Foundation for Educational Research* (NFER) [online] Available at http://www.nfer.ac.uk/shadomx/apps/fms/fmsdownload.cfm?file_uuid=67EAAF91-C29E-AD4D-07F1-A9373EA17105&siteName=nfer (accessed 9.8.14)

²¹⁹ *Primary Assessment, Curriculum and Experience* (Osborn, McNess, Broadfoot, Pollard and Triggs, 2000: 12)

²²⁰ Key Stage One, 4-7 years; Key Stage Two, 7-11 years

the increased workload to fulfil the new curriculum affected their relationships with children (*ibid.* 2001: 54), diminishing time to talk with them, particularly in Key Stage One (*ibid.* 2001: 55).

Special Educational Needs and the Elton Report

The earlier addition of more children with Special Educational Needs (SEN) to mainstream classes, following reduced segregation into ‘Special Schools’²²¹, put further limitations on teachers’ time. Although the law allowing SEN children the right to education in mainstream primary schools²²² was not passed until 1993²²³ SEN children without Statements²²⁴ could be admitted to mainstream following the *Education Act 1981* (Chapter 60: 2: section 3a-c)²²⁵. Extra preparation and planning was required to accommodate SEN children, adding to the constraints placed on the time available in a working day for anything outside of teaching and assessment. Teachers had less time to spend with individuals, and with some SEN children being also emotionally needy (DES 1989: 147, s.20 and 1989: 149, s. 26),²²⁶ delivery of the National Curriculum became (and remains) very challenging²²⁷.

The Elton Report (1989) into discipline in schools reasons that some of the unruliness in classes is ascribed to pupils with SEN (DES 1989: 147, s.20 and 1989: 149, s. 26)²²⁸. Moore, Decker, Greenwood and Kirby (1993) emphasise the findings of the survey commissioned by the Report (DES and Welsh Office, 1989), which found that ‘two out of ten primary school teachers found particular pupil behaviours difficult to deal with, but the pupils concerned were identified as ‘troublesome’ rather than “troubled”’ (Moore *et al* 1993: 279) suggesting a lack of teacher knowledge of emotional problems. Furthermore, Elton reveals the probability that teachers who struggled to help emotionally troubled children, were relieved²²⁹ when disruptive pupils were absent (DES and Welsh Office 1989: chapter 7, page 166)²²⁹. Despite the 1996 Education Act

²²¹ Schools which catered only for children who were considered unable to access the full academic curriculum available to children of that age.

²²² As long as schools had the provisions to accommodate them.

²²³ Great Britain: 1993 (section 160), which was subsequently consolidated into the *Education Act 1996* (section 316).

²²⁴ See Glossary.

²²⁵ Great Britain: 1981(Chapter 60: 2: section 3a-c) [online] Available at <http://www.legislation.gov.uk/ukpga/1981/60/enacted> (assessed 25.8.15)

²²⁶ DES England and Wales, (*Elton report*) (1989) [online]. Available at <http://www.educationengland.org.uk/documents/elton/elton1989.html#06> (accessed 8.9.14)

²²⁷ This thesis in no way suggests that SEN children should not be in maintained schools.

²²⁸ DES England and Wales, *Elton report* (1989) [online]. Available at <http://www.educationengland.org.uk/documents/elton/elton1989.html#06> (accessed 8.9.14)

²²⁹ DES England and Wales, *Elton Report* (1989) [online] Available at <http://www.educationengland.org.uk/documents/elton/elton1989.html#09> (accessed 2.10.14)

stipulating that the education of SEN children in mainstream should not be 'incompatible' with the 'efficient education' of other non-SEN children (Great Britain: 1996: 316a) problems can arise for teachers of children who are labelled 'difficult,' especially when disrupting other children's education.

However, the unacknowledged possibility that 'difficult' children were failing academically from undetermined and unresolved emotional problems, reveals a failure in the history of educational policy to recognise or prioritise children's emotional needs. Clearly, one example of this is the relationship between unsupported grief and its contribution to low concentration levels or non-compliant behaviour (Moore *et al*, 1993: 279). Although not recent, the Elton Report usefully illuminates past experiences for teachers of troubled children, and their influential legacy on recent policy.

National system of assessment

A further reduction in teaching time for addressing emotional wellbeing came from the 1991 introduction of National Curriculum Tests. Commonly called SATs²³⁰, individual pupil test-results were set against nationally representative samples of pupils' work. From the test scores, a numbered level of achievement was found. The material informed published League Tables (Ball 2008: 112),²³¹ ostensibly to enable the public to make a comparison of schools to make school-placement choices, but also providing evidence of the progressive ability of individual children (Ball 2008: 112). However, although end of Key Stage assessments were purportedly introduced for charting the progress of individuals (Tomlinson 2005: 63) at age seven (and later at eleven and fourteen²³²) teachers' perception of the assessments was that they were primarily used to assess the performance of individual teachers and schools (Tomlinson 2005: 62).

Schools accountability focused teachers on the tested areas, reducing time for talking with upset children and for expanding other subjects. Dylan Wiliam (2002) berates the tests for achieving nothing more than encouraging teachers to 'teach to the tests' (in Henry 2002, cited by Tomlinson 2005: 138). Furthermore, teachers focused on core

²³⁰ Standard Assessment Tests

²³¹ In 2002, Wales stopped setting National Attainment Tests and Tasks for 7 year olds at the end of KS1. Teacher Assessment was still used and from 2005, end of KS2 tests made non-statutory. [online] Available at http://www.nfer.ac.uk/shadomx/apps/fms/fmsdownload.cfm?file_uuid=67EAAF91-C29E-AD4D-07F1-A9373EA17105&siteName=nfer (accessed 9.8.14)

²³² National Attainment Testing at age 14 was ended in 2008 and is now not statutory in England. *Assessment Consultation Response* (March 2014:6) [online] Available at https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/297595/Primary_Accountability_and_Assessment_Consultation_Response.pdf (accessed 4.8.14)

subjects from the wider-reaching consequence of reduced allocated resources should their published results reveal under-achieving pupils (Tomlinson 2005: 62).

Dearing Report

Arguably, the published levels for tests in English, maths and science²³³ were neither indicative of the affective curriculum nor of children's non-written achievement; a particularly relevant dilemma for many SEN children. Outside of the school community, account was not taken of children's difficult home circumstances or emotional problems, and their possible effects on test results. Even after a reduction in national curriculum content in 1993 (Dearing 1993, cited by Tomlinson 2005: 63) and decreased reported 'levels of performance' from ten level descriptors to eight in 1994 (Dearing 1994: 28, para.4.3: s1), teachers continued to feel pressurised to prioritise the academic curriculum and achieve good national test results. The intention of Dearing's earlier stipulation that teachers should 'exercise professional judgement on how best to respond to the particular needs of their pupils' (Dearing 1994: 28, para. 4,s1) was clearly restricted to improving test-related academic needs and skills in literacy, numeracy and oracy (Dearing 1994: 28-9, paras. 416-420), or exploring 'in more depth' other national curriculum subjects (Dearing 1994: 7: paras. 4.3-4.4; section 2.4).

To show that released time was used 'effectively,' schools were to make 'available for inspection' (Dearing 1994: 8; para.3.26; section 2.5a) records of how teaching time was used. This caused problems for teachers needing curriculum time for managing emotional children. Arguably, insufficient understanding of the effect of unresolved grief on children's wellbeing and achievement, coupled with the knowledge that allocated funds could be reduced, resulted in non-prioritisation of the social and emotional needs of troubled children highlighted as 'disruptive' (*Elton Report*: DES and Welsh Office 1989: Chapter 2, page 57)²³⁴. The Elton Report noted the high cost of help for SEN children with learning difficulties²³⁵ although at least one LEA cited in the report determined no need for special financial provision for emotionally disturbed pupils, since this was not specifically recorded as a 'learning difficulty' (DES and Welsh Office 1989: 151, s.31). This was myopic for two reasons: teachers untrained as psychologists but accountable for troubled children 'have a standard educator role and a duty of care role' (Rowling 2003: 35) which includes the bereaved; and many children are likely to underachieve academically with their concentration affected by grief.

²³³ Core subjects.

²³⁴ DES England and Wales, *Elton Report* (1989) [online] Available at <http://www.educationengland.org.uk/documents/elton/elton1989.html> (accessed 2.9.14)

²³⁵ SEN children requiring 'School-Action plus' intervention, and Statemented children.

Furthermore, despite being originally intended as 'complementary' (Dearing 1994: 57, para.7.7) to national tests, summative teacher assessments for the core subjects were clearly under-valued by government. Consequently, with teachers' time with children hindered by 'a very heavy assessment workload' (Ball 2008: 103), and demands of excessive paper-work, the accusations of 'superficial teaching' (Tomlinson 2005: 63) further plummeted teacher morale (Ball 2008: 150). However, shortly after this period of professional unrest, and high academic expectation, the government was reminded that the wellbeing of children was insufficiently catered for and the discussion now turns to bereaved children's wellbeing, and *Every Child Matters*.

2003 *Every Child Matters* and wellbeing

Five Outcomes

Children's wellbeing relies on their physical and emotional needs being met and there is a direct link between troubled children's wellbeing and low academic success. The various losses experienced by troubled children can include the outcomes from divorce, parental imprisonment, and the loss of adult protectors, turned perpetrator. Following the high-profile death of Victoria Climbié in 2000 (Barker 2009: 9), the Laming report (2003)²³⁶ condemned the lack of co-ordination between the services of education, social care and health (Laming 2003: 3, s. 1.18, cited by Tomlinson 2005: 133). Alongside the report, which stresses the importance of the safety and wellbeing of children, the consultation green paper *Every Child Matters: Change for Children* (DfES September 2003: 5)²³⁷ was published; its aim being to address the previous lack of coherence between components of the children's workforce. Part of this initiative was *Every Child Matters* (DfES: 2003), which outlines the reforms for children's services in England. Within the document are the five outcomes that were suggested by children and young people as necessary for both achievement and wellbeing:

1. Be healthy
2. Stay safe
3. Enjoy and achieve
4. Make a positive contribution

²³⁶ *The Victoria Climbié Inquiry* (2003) [online] Available at https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/273183/5730.pdf (accessed 7.9.15)

²³⁷ *Every Child Matters: Change for Children 2003* [online] Available at <http://webarch.nationalarchives.gov.uk/20130401151715/http://www.education.gov.uk/publicatio ns/eOrderingDownload/DFES10812004.pdf> (accessed 10.8.14)

5. Achieve economic wellbeing (*Every Child Matters*, DfES 2003: 4, s. 1.1)²³⁸.

Apart from outcome five, interestingly the first four outcomes are not specifically related to academic success, but relate to emotional competence. After Laming the government suggested that the existing plans for the final publication *Every Child Matters* should focus on four main themes (Barker 2008: 9), the fourth being:

4. ensuring that the people working with children are valued, rewarded and trained (DfES September 2003: 10, s.20, cited by Barker 2008: 9).

Training

The Children's Workforce Unit was set up within the Department for Education and Skills (DfES) to support the improvements, and the green paper suggests the need for:

a common core of training for those who work solely with children and families and those who have wider roles (such as GPs and the police) to help secure a consistent response to children's and families' needs and a better understanding of professional roles. (DfES, *Every Child Matters*: 2003: 11, s.20)

However, within those public agencies specified as needing 'a common core of training' (DfES 2003: 11, s. 20)²³⁹ apart from the suggestion that teachers receive training to 'close the achievement gaps for ethnic minority students' (DfES 2003: 28: s. 2.14) there is nothing outlined as to what training teachers in *their* wider role would look like. Without specifically identifying them, the implied expectation is that teachers will cope without the training afforded to other professions. Perhaps more worrying, is the suggestion that support staff could be trained to do some counselling (DfES 2003: 86: s. 6.4), which shows a misunderstanding of what that entails²⁴⁰. Nonetheless, the *Every Child Matters* (2003) green paper informed several further initiatives, including *Every Child Matters: Next Steps* (DfES: March 2004a). This coincided with, and set out the timetable for, implementing *The Children Bill* (Great Britain 2004) which outlined the need for children's services to address wellbeing (2004: Part 2, 6)²⁴¹.

²³⁸ *Every Child Matters* (2003) [online] Available at <http://webarchive.nationalarchives.gov.uk/20130401151715/http://www.education.gov.uk/publications/eOrderingDownload/DFES10812004.pdf> (accessed 3.9.14)

²³⁹ *Every Child Matters* consultation paper (2003) [online] Available at <https://www.education.gov.uk/consultations/downloadableDocs/EveryChildMatters.pdf> (accessed 5.9.14)

²⁴⁰ This finding is supported by the quantitative data.

²⁴¹ Great Britain: 2004 [online] Available at <http://www.publications.parliament.uk/pa/ld200304/ldbills/035/2004035.pdf> (accessed 3.9.14)

The Children Act 2004 (November 2004: part 2, s. 9a-11)²⁴² became law, setting out the government's approach to the wellbeing of 'children and young people from birth to age 19'²⁴³. The act clearly states that schools should contribute to the improvement of children's wellbeing (2004: 3, Part 2: 10:2 a)²⁴⁴ (2004: 6), defined within the areas of:

- physical and mental health and emotional wellbeing;
- protection from harm and neglect;
- education, training and recreation;
- the contribution made by them to society;
- social and economic wellbeing.

Formal implications for schools

The 2004 Act was followed by the white paper *Every Child Matters: Change for Children* (DfES: December 2004), which explicitly addresses the involvement required from schools, Social Care, the Criminal Justice System and Health Services (Cheminais 2008: 5, Table 1.1). The non-statutory guidance, *Common Core of Skills and Knowledge for the Children's Workforce*²⁴⁵ published in 2005 (DfES 2005) as part of *Every Child Matters*, makes tentative steps towards alerting practitioners to 'how children and young people respond to change' (DfES 2005: 17). It clearly states that some children 'may have to face particular and personal transitions, not necessarily shared or understood by all their peers' (DfES 2005: 16). These are shown to include: 'family illness or the death of a close relative; divorce and family break-up' (2005: 16)²⁴⁶. However, whilst the *Every Child Matters* series of resources and the *Children Act 2004* demonstrate the expectations that primary schools will share responsibility for children's wellbeing, accountability can only be equally assigned to all the children's workforce if funding for appropriate training for teachers is available.

²⁴² Great Britain: 2004 [online] Available at http://www.legislation.gov.uk/ukpga/2004/31/pdfs/ukpga_20040031_en.pdf (accessed 3.9.14)

²⁴³ Available at <http://webarchive.nationalarchives.gov.uk/20100113202026/dcsf.gov.uk/everychildmatters/about/> (accessed 3.9.14)

²⁴⁴ Great Britain: 2004: section10: 2, a-e [online] Available at http://www.opsi.gov.uk/Acts/acts2004/ukpga_20040031_en_3 (accessed 4.8.14)

²⁴⁵ *Common Core of Skills and Knowledge. Transitions.* [online] Available at <http://webarchive.nationalarchives.gov.uk/20100202100434/http://dcsf.gov.uk/everychildmatters/strategy/deliveringservices1/commoncore/supportingtransitions/supportingtransitions/> (accessed 10.8.14)

²⁴⁶ *Every Child Matters* [online] Available at <http://webarchive.nationalarchives.gov.uk/20100202100434/http://dcsf.gov.uk/everychildmatters/strategy/deliveringservices1/commoncore/supportingtransitions/supportingtransitions/> (accessed 10.8.14)

Arguably, the effect of loss on academic potential should suggest widespread changes in policy and I now suggest there is a case for therapeutic education to have a significantly higher status.

2003-5 Social Emotional Aspects of Learning (SEAL)

The place of therapeutic education for reducing the effects of loss on children, is detailed in an innovative, government-commissioned report by Weare and Gray (2003) 'looking at [w]hat works in developing children's emotional and social competence and wellbeing' (DfES 2003: 456). It determines that since cognitive processes 'need input from the emotions to be effective' (Weare and Gray 2003: 35) children's poor emotional wellbeing detrimentally affects their learning. While a sense of wellbeing, including feeling safe and valued can promote learning, emotions such as sadness and anger can block learning. However, the positive feelings from managing negative emotions can ultimately assist learning (Greenhalgh 1994, cited by Weare and Gray 2003: 35). The findings were instrumental in formulating the government-funded strategy used in schools: *Social Emotional Aspects of Learning (SEAL)*^{247 248} which recognises that emotionally troubled children are disadvantaged in both their learning and their social and emotional wellbeing. The SEAL targets are: new beginnings; going for goals; getting on and falling out; good to be me (DCSF [2003] 2008: 3).

Whilst this initiative no longer receives monetary funding²⁴⁹, its inclusion in classroom practice is still valuable for accentuating the importance of emotional health. The contribution to be made by primary schools towards a pupil's wellbeing is detailed in the later 2005 Education Act (Great Britain: 2005: section 5f)²⁵⁰. Ecclestone and Hayes (2009) challenge the role of therapeutic education (T.E.). They suggest that the goal of T.E., addressed through teacher-led Circle Times (Ecclestone and Hayes 2009: 28) and Nurture Groups (Boxhall 2002, cited by Ecclestone and Hayes 2009: 36) over-emphasises 'eradicating anti-social behaviour' (*ibid*: 163). Many teachers would find it challenging to justify non-academic lessons in the face of mandatory syllabi, national curriculum targets and overcrowded timetables (Cranwell 2004: 2) however, they would

²⁴⁷ This initiative now receives no government funding (PSHE Association [online] Available at <http://www.legislation.gov.uk/ukpga/2005/18/section/5> (accessed 25.8.14)

²⁴⁸ The SEAL targets are differentiated by Year group and displayed in classrooms.

²⁴⁹ This report by Katherine Weare and Gary Gray was carried out by the *Health Education Unit*, Research and Graduate School of Education, University of Southampton and the findings are widely used in Primary Education as Appendix 2: Principles and features of effective SEAL programmes.

²⁵⁰ Great Britain: 2005: section 5, [online] Available at <http://www.legislation.gov.uk/ukpga/2005/18/section/5> (accessed 4.8.14)

find it equally challenging to teach during disruptive episodes. Ecclestone and Hayes (2009) also assert that improving emotional wellbeing is not an educational goal and whilst they admit there is little empirical evidence to defend their argument, they suggest that 'children who are emotionally damaged need therapy from mental health specialists outside the classroom' (Ecclestone and Hayes 2009: 147).

Other chapters have critically discussed whether teachers are qualified to provide certain therapies, such as bibliotherapy, and it should be reiterated that in primary schools, the wellbeing and academic learning of individual children; bereaved, emotionally-disturbed or otherwise, is often managed at short notice by the class teacher who will use any helpful resource available to reduce interruptions to teaching the remainder of the class. Nonetheless, the possibility that teachers should be passing emotionally damaged children to other members of the children's workforce, would be approved by those teachers who feel uncomfortable discussing bereavement and have no wish to include death and loss education in the curriculum.

2004 Select Committee for Health

The possibility that some children in mainstream schools will die from, or experience bereavement from, a terminal illness whilst at primary school increases likelihood that teachers will need to manage bereaved pupils. A memorandum submitted to the Select Committee for Health by the Association for Children with Life-Threatening or Terminal Conditions and Their Families (ACT)²⁵¹ explored the general lack of support for dying and bereaved children, and the effects of absent death education. The supplementary memorandum from the later meeting in July 2004, cites problems encountered by children who are spoken to in 'euphemism and metaphor'²⁵² and further maintains that:

Children are not encouraged to talk about death and so they do not learn the appropriate language to use and in turn they are unsure about how to express emotions regarding loss and grief. (ACT: PC38A: 27: 2004)²⁵³

²⁵¹ ACT Memorandum (PC38A: July 2004) (HC) Minutes of evidence. [online] Available at <http://www.publications.parliament.uk/pa/cm200304/cmselect/cmhealth/454/4050617.htm> (accessed 1.9.14)

²⁵² ACT Supplementary Memorandum (PC38A: July 2004) (HC) Minutes of evidence. [online] Available at <http://www.publications.parliament.uk/pa/cm200304/cmselect/cmhealth/454/4050617.htm> (accessed 1.9.14)

²⁵³ ACT Memorandum (PC38A: July 2004). HC Minutes of evidence. [online] Available at <http://www.publications.parliament.uk/pa/cm200304/cmselect/cmhealth/454/4050617.htm#note27> (accessed 1.9.14)

Although the findings of select committees are not necessarily considered more than advisory, in point 29 of the fourth report, summarised in the recommendations, the Select Committee recognises the role of education in cultivating an awareness of death within the curriculum (HC Select Committee For Health, 22 July 2004: PC38A: para. 135, s29)²⁵⁴. Further recognition of the wider influence of cultural attitudes on death education is realised in the final summary of the report, which not only extols the need for greater openness about death within schools, but also emphasises the role of society to generally change attitudes to discussing death. The committee suggests that:

The right to 'a good death' should be fundamental. We believe that social attitudes are part of the problem, and that a willingness to be open about death will facilitate better communication and ultimately better provision. We hope that this is an area the Department for Education and Skills will address, both by examining the place of education about death within the curriculum and within teacher training. (HC Select Committee for Health, 22 July 2004: Para. 135, s29)²⁵⁵ ²⁵⁶

It can be seen below that the Select Committee supports the suggestion by ACT that there is a need for teachers to face death education head-on via training, and possibly through the curriculum.

ACT proposals to the committee were:

1. Schools should have a policy on how they should support an individual bereaved child, their peer group and the wider school community;
2. Adults need to learn to talk in honest language so that children can understand and learn the facts about death;
3. Schools should address death and loss as a natural part of the curriculum, not as a separate subject;
4. Children should begin to learn about death as part of the curriculum at Key Stage 1;

²⁵⁴ The excerpt is taken from pp1-5 of the government paper, Hansard Archives Research Minutes of Evidence. [online]

<http://www.publications.parliament.uk/pa/cm200506/cmhansrd/vo051013/text/51013w08.htm>
²⁵⁵ *Select Committee for Health. Fourth Report.* [online] Available at <http://www.parliament.the-stationery-office.co.uk/pa/cm200304/cmselect/cmhealth/454/45410.htm> (accessed 30.8.14)

²⁵⁶ *Select Committee for Health. Fourth Report.* [online] Available at <http://www.publications.parliament.uk/pa/cm200304/cmselect/cmhealth/454/45403.htm> (accessed 1.9.14)

5. Training is essential for teachers to give them confidence in talking about death and supporting children who are bereaved or experiencing other losses.

The summary of recommendations above suggests how death can be ‘a natural element of many other subjects’ (ACT: PC38A, July 2004: 26)²⁵⁷ and the proposals stress the specific recommendation that ‘death is taught as early as Key Stage One, so that children can begin to learn the appropriate language²⁵⁸ and develop an awareness of death based on fact’ (ACT: PC38A, 2004: 26 July). The Commons Health Select Committee therefore supports the need for young children in the primary school to hear the language of death in order for them to understand it.

2008 NICE recommendations

Seventeen years ago, Spall and Jordan identified unsupported teachers as feeling ‘inadequate’ and ‘emotionally drained’ from the experience of dealing with bereaved children (Spall and Jordan 1999: 4) However, since the recommendations in their study, *Teachers’ Perspectives on Working with Children Experiencing Loss* (Spall and Jordan 1999: 5), which suggest supporting teachers to learn about the different reactions to loss, there has been little evidence of death education existing for primary school communities (Potts 2013: 96). In 2008, the National Institute for Health and Clinical Excellence (NICE) was asked by the Department of Health (DoH) for guidance into social and emotional wellbeing in primary education (2008) which was reviewed by the Public Health Interventions Advisory Committee (PHIAC). Recommendations from NICE followed, suggesting that more research should be carried out into possible costs and methods to measure the health and wellbeing of primary-school children (NICE 2008: Recommendation 3²⁵⁹).

Furthermore, under the NICE recommendations for targeted approaches with children of four to eleven years of age, the public health guidance states that teachers and practitioners should be trained to ‘identify and assess the early signs of anxiety, emotional distress and behavioural problems among primary schoolchildren’ and that this may include children who have experienced ‘adverse life events, such as bereavement or parental separation, and those exposed to abuse’ (PHIAC 2008: Chapter 1, Recommendation 3).

²⁵⁷ ACT Supplementary Memorandum HC Minutes of evidence. [online] Available at <http://www.publications.parliament.uk/pa/cm200304/cmselect/cmhealth/454/4050617.htm> (accessed 1.9.14)

²⁵⁸ This thesis has already discussed the need to avoid euphemisms.

²⁵⁹ NICE [online] Available at <http://www.nice.org.uk/guidance/PH12/chapter/1-Recommendations> (accessed 14.8.15)

2005, 2007 Parliamentary debates

Death education CPD for teachers is not common, and aside from financial priorities, the lack of interest from government could influence schools to relegate its importance. Despite attempts to clarify the role of schools for managing bereavement, outside of children affected in Northern Ireland, there has been little success in achieving House of Commons debates (Rt. Hons. Villiers and Eagle: 13 October 2005). Moreover, there has been insufficient interest to even lead to a debate. The Child Bereavement Network (CBN) campaign, *Grief Matters for Children*, which was launched publicly in 2006, motivated a parliamentary Early Day Motion²⁶⁰ led by Edward Davey MP, supporting the CBN and suggesting the need for teachers to be trained to support bereaved children (Davey 2007, cited by Potts 2013: 3).²⁶¹ Despite gathering support from sixty-two MPs, the motion did not provoke enough support from backbench opinion to be debated in the House of Commons (HC 25.7.07: 2023)²⁶² and provides a further example of cultural uninterest.

TEACHERS' SKILLS IN RELATION TO POLICY CONCERNS

Embarrassed denial

Stokes (2004) states that despite adult misconceptions about what is acceptable for children to discuss, '[c]linical observations of over 2000 children...suggest that being given permission to talk about, and remember their dead family member in a way that is meaningful for them is very comforting for most children' (Stokes 2004: 4)²⁶³.

However, in exploring the role of schools in addressing death and loss, Jackson and Colwell(2002) note that whilst it is essential that children receive correct information for them to cope with death, adults frequently avoid the subject, believing that children will somehow manage better by not knowing (Jackson and Colwell 2002, cited by Aris 2005: 50). This attitude of 'embarrassed denial has been highlighted above as harmful, and is summed up by Aris:

If something appears to be kept mysterious and the children are given the impression that it is wrong to ask about it, then they are left to work out their

²⁶⁰ Early Day Motions [online] Available at <http://www.parliament.uk/business/publications/business-papers/commons/early-day-motions/> (accessed 10.8.14)

²⁶¹ Available at <http://www.parliament.uk/edm/2006-07/2023> (accessed 25.7.14)

²⁶² Available at <http://www.parliament.uk/edm/2006-07/2023> (accessed 5.10.14)

²⁶³ *Every Child Matters* (2004: 4) [online] Available at <http://webarchive.nationalarchives.gov.uk/20130401151715/http://www.education.gov.uk/publications/eOrderingDownload/DFES10812004.pdf> (accessed 4.8.14)

own explanations – and this may be much more disturbing than the facts could be. (Aris 2005: 51)

This assertion gains support from an earlier survey into the health needs of British primary school children undertaken by Balding and Shelley (1993), which reveals a disparity between children's needs, and adult perceptions of them. Despite children being interested in death and loss, the survey shows that it was not prioritised by teachers and parents (Balding and Shelley 1993, cited by Rowling, in Best 1996: 272). Bowie's more recent study of two non-denominational Scottish primary schools looked at death education in the primary curriculum (Bowie 2000) and underlines this inconsistency. Not only did seventy three per cent of primary school children questioned think about death and dying to some extent, but over a third of the children 'revealed this as a subject which they would like discussed in their class' (Bowie 2000: 24, 26). However, teachers in the study relied upon a passive approach to death education, only informing children about death when required to do so ²⁶⁴. Bowie(2000) qualifies a possible reason for differences in attitude, suggesting that adults avoid the topic of death, considering it 'morbid' (Bowie 2000: 22).

Moreover, by disassociating themselves with its inevitability, they can perhaps become impervious to it (Bowie 2000: 22) exacerbating death denial. Alternatively, earlier research in England by Spall and Jordan (1999) assumes that teachers' reticence comes from fear of losing emotional control and being thought 'unprofessional' (Spall and Jordan 1999: 3). Both reasons are credible, but regardless of the overriding reason, Potts identifies that despite the *Grief Matters for Children* campaign by the CBN (2006), any progress made towards elevating the profile of death and loss education in schools remains slow (Potts 2013: 96).

Other research, by Eiser, Havermans, Rolph and Rolph (1995), explored the resources teachers perceived were available to them for discussing death and loss with children, and how teachers felt about including the area of loss and bereavement in the curriculum (Eiser *et al* 1995: 32). The research reveals a lack of bereavement training for teachers and negligible death and loss education curriculum time for children (Eiser *et al* 1995: 32, cited by Best 2002: 27). Further empirical research into how teachers can be enabled to feel more confident with bereaved children, is therefore potentially useful, and the inclusion of death education in initial teacher training and continuing

²⁶⁴ Although the teachers were working in Scotland, it is unclear whether the teachers were all Scottish.

professional development is now discussed.

Initial training and continuing professional development

The 2010 white paper *The Importance of Teaching* (DfE November 2010) acknowledges that schools have a fundamental role in the health and wellbeing of children (DfE 2010: 28; 2.48) agreed by the 2013 Public Health research paper on ITT provision in the South East of England, (Shepherd J, Dewhurst S, Pickett K, Byrne J, Speller V, Grace M, *et al.* 2013: 20). However, there is no suggestion that the 'importance of teaching' requires CPD for death education. Since the *Education Reform Act 1988*, the pressure on schools to use CPD for raising academic standards has clearly been influenced by the need to address subject-based testing. The continued emphasis on raising standards is reflected in the intention that from 2016, primary schools will have at least eighty five per cent of eleven year olds 'secondary-ready'. This will be measured by 'tests, pass marks and minimum standards' (Clegg 2013²⁶⁵) as recently reiterated by the Right Honourable Nicky Morgan MP²⁶⁶(2015)²⁶⁷. There is no suggestion that disadvantaged pupils are possibly bereaved pupils, whose emotional state could affect academic achievement.

Additionally, findings from Shepherd *et al* (2013: 107) in which Initial Teacher Training (ITT) providers and trainee teachers were interviewed, confirm that provision for health and well-being on ITT courses was 'variable.' Furthermore, a 2011 report on CPD for a cluster of primary schools suggests that priority was given to courses attracting government-led funding, and centrally-based supply costs (Ridley 2011: 10) to cover teacher absence. This left little room for CPD for children's emotional needs from bereavement, despite teachers having historically shown reduced confidence in managing situations for which they are not trained (Spall and Jordan 1999: 4). However, an experienced local Headteacher of an infant school with a successful death education policy and programme, suggests that CPD would be easily arranged and financed:

²⁶⁵ *Raising Ambitions and Standards for Primary Schools* [online] Available at <https://www.gov.uk/government/news/raising-ambitions-and-standards-for-primary-schools> (accessed 10. 6. 2014)

²⁶⁶ Secretary for Education.

²⁶⁷ *Hundreds of Coasting Schools to be Transformed. (Notes to Editors)* [online] Available at <https://www.gov.uk/government/news/hundreds-of-coasting-schools-to-be-transformed> (accessed 31.8.15)

“We don’t have money in the budget to teach death and loss” – another excuse in my opinion. A study day at *Winston’s Wish*²⁶⁸ for teachers is £115 – a small price to pay for one member of staff to then cascade the information to others. (Local Infant School Headteacher, name withheld, and permission given for the quote).

The role of counselling

Before 1999, there is little evidence of schools in Britain approaching counselling services to support the emotional and behavioural wellbeing of pupils in primary education (Thompson 2013: 3). This suggests that schools either didn’t recognise the need, or mostly tried to solve problems in-house by other means. However, if they are to fulfil the goals set out by ECM and SEAL, school-based counselling should be readily available. Since teachers are not usually also counsellors, the question arises as to why more schools are not employing services from charities such as *Place2Be*²⁶⁹ which was the only service for primary-school counselling identified in the MindEd report (Thompson 2013: 1). There are several possibilities: understanding, finance, and embarrassed denial.

Teachers’ understanding of counselling

One possible setback to provision is a full appreciation by teachers of what counselling is and what it can achieve; a situation possibly hindered by the DfES (2003) green paper for the Children’s Workforce, already discussed. The situation is outlined in a recent report into the availability of school-based counselling and its effects on primary schools (BACP 2013: 3). Commissioned by the British Association for Counselling and Psychotherapy (BACP)²⁷⁰ the MindEd project (Thompson 2013) Thompson identifies that misinformation on the role of counselling leads to teachers either having ‘unrealistic expectations’ of what counsellors can do, they do not think to refer pupils in need (Thompson 2013: 27). The report findings state that the majority of school-based counselling appointments are provided not by counsellors employed by schools but by external counselling organisations whose services are bought in. Whilst not all troubled children are bereaved, I have taught many that are, and the discussion above reveals that this situation is not unusual.

²⁶⁸ A bereavement charity with a base in Southern England.

²⁶⁹ *Place2be Guidelines for Head teachers*. Available at <http://www.place2be.org.uk/media/2168/P2B%20head%20teachers%20guide.pdf> (accessed 26.8.14)

²⁷⁰ Available [online] at <http://www.bacp.co.uk> (accessed 4.10.14)

Improved wellbeing

A 2014 report by the Childhood Wellbeing Research Centre (CWRC) citing Holland (2001), maintains that with training and support, and knowledge of the additional resources available to bereaved pupils, teachers could not only help children but reassure themselves that responsibility for counselling pupils will not be an expectation (CWRC 2014: 21). However, the suggestion that schools use counselling is not new. In 2003, Weare and Gray's report suggests that schools and LEAs should 'consider the use of counselling services for pupils and staff' (Weare and Gray 2003: 59). They cite Rutter *et al* (1998) who found that counselling helped 'at-risk and behaviourally disturbed pupils' (Rutter *et al* 1998, cited by Weare and Gray 2003: 58). Further evidence of improved academic and emotional wellbeing comes from a recent report (2012/ 2013) by Herlitz, Naag and White (2013) on behalf of the charity *Place2be*, strongly linking the relationship between children's attainment and their general wellbeing²⁷¹ (Herlitz, Naag and White 2013: 10).

Academic improvement

Teachers who had referred pupils, whose 'difficulties' had previously adversely affected classroom learning (*ibid.*) reported academic improvement after counselling in sixty five per cent of children and in seventy per cent of children who had been considered a 'burden on the teacher or class' (*ibid.*). Parents suggested an even more optimistic figure of seventy four per cent of children improving (*ibid.*). Additionally, over two-thirds of children, sixty seven per cent, were reported to have improved their wellbeing after counselling (*ibid.*). Whilst the majority of head teachers who responded to the MindEd survey (2013) reported that school-based counselling services 'had led to improvements in pupils' behaviour, educational attainment and school attendance' (Thompson 2013: 5), Atkinson (2013) from *Place2be* states that only fifty per cent of UK primary schools 'may have counsellors' (Atkinson 2013, cited by Thompson 2013: 6).

This could be not only from lack of understanding, but from the Gillick ruling (1985) in England and Wales that followed the case of Gillick vs. Norfolk and Wisbech Health Authority. This ruling is interpreted to mean that for children under thirteen to agree to counselling they must have 'sufficient understanding and intelligence to do so' (Bailey and Harbour 1999, cited by Thompson 2013: 4). In some situations, teachers might

²⁷¹ Herlitz, Naag and White [online] Available at <http://www.place2be.org.uk/media/2168/P2B%20head%20teachers%20guide.pdf> (accessed 26.8.14)

have doubts that full understanding is apparent or in certain cases, parents might withhold consent. However, regardless of understanding, a reason cited for teachers not referring pupils for counselling is finance.

Funding for counselling

Thompson cites responses from counsellors and service managers, blaming insufficient funding to pay for the counselling service (Thompson 2013: 11). Furthermore, Jenkins and Polat (2006) assert that unless it is used for SEN pupils, counselling has not the 'legitimate claim on scarce resources' (Jenkins and Polat 2006: 8) despite the benefits for educational achievement (Ibid: 9). Were the numbers of SEN children small, it would be expected that the need for counselling would be rare. However, Wilson and Refson (2006) report that the children accessing *Place2Be* were 'three times more likely to have special educational needs status than the general population' (Wilson and Refson 2006, cited by Thompson 2013: 39) with more than forty-four per cent of the children counselled by *Place2be* being SEN children²⁷² (Herlitz, Naag and White 2013: 5). Although it is not clear whether referrals were also bereaved, the discussion above details that troublesome children are often troubled from loss-related situations. Nonetheless, financial constraints from funding appear to have historically been an unequivocally contributory factor in school-based counselling provision; an assessment agreed by Jenkins and Polat (2006: 10).

Financial constraints are particularly evident in the provision for counselling services in England. In April 2012 the Welsh government allocated £4.75m to provide accessible counselling services for Year 6 primary school pupils (Thompson 2013: 4). However, a third of respondents in the BACP survey (2013) voiced concern not only over schools receiving insufficient funding for them to continue using school-based counselling services (2013: 11), but the variance in counsellor qualifications.

Comments supporting these concerns include:

Primary schools [are] ending contracts because of the lack of funding, then using inappropriately qualified people to cover the work with children because it is cheaper.' (Service manager, MindEd BACP survey response, cited by Thompson, 2013: 11)

²⁷² Compared with 20 per cent of the local population (Herlitz, Naag and White 2013: 5) [online] Available at <http://www.place2be.org.uk/media/5688/Childrens%20outcomes%202012-13%20primary%20schools.pdf> (accessed 27.8.14)

Further concern was that school budget cuts would leave some with no means for counselling services (Thompson, 2013: 11) and no available room to conduct private, uninterrupted sessions. However, since 2011, schools have been granted a sum of money for disadvantaged pupils, known as the Pupil Premium. In a local infant school with nineteen eligible pupils, the amount awarded to the school for 2012-2013 was £6230 and the impact from the finance is available to parents on the school website. The Ofsted evidence report *Unseen Children Access and Achievement: Twenty Years On* (Ofsted 2013) asserts that schools have autonomy on how to spend the pupil premium but that the funding was not always targeted closely on those pupils who needed it, or on those interventions that had a track record of successfully raising achievement (Ofsted 2013: 62). However, an analysis report of impact data based on 2010 figures from *Place2be* states that:

A conservative assessment of the economic impact of Place2Be's services indicated that for every £1 spent on early intervention support for children, there was a return on investment of £6 in terms of savings to society. (*Cost-Effective Positive Outcomes for Children and Families*, Place2Be, 2010: 8)

Clearly, happier children could enable schools to raise their academic results.

Counselling in the geographical area of sample

To support findings in this chapter, I explored attitudes to counselling in the geographical area of sampled schools and I also obtained figures for the number of trained counsellors assigned to primary schools²⁷³ in that area. At the time, the revealed figure was startlingly low. Out of 112 primary schools²⁷⁴, only one was listed as having a counsellor 'to support bereaved children and families' (Counsellor Grid One for 2009, accessed 12 February 2009,), with two schools having access to the same counsellor who, for one day a week, was assigned to the local secondary school. One further school had a Family Support worker, and a Special School was supported by two charities: *Winston's Wish* bereavement charity, and the ***** *Snowdrop Trust*, a charity based in the locality providing care at home for children with terminal illnesses. More recently, information obtained through the *Freedom of Information Act 2014*, states that 'there is no longer a *****²⁷⁵ County Council Counselling Service available to schools. This ended in 2014' (September 2014, by email, see

²⁷³ For 'primary' this includes infants, juniors and through primary schools up to Key Stage 2.

²⁷⁴ This figure did not count special schools.

²⁷⁵ name withheld

appendix). The expectation that schools will employ a service that offers teacher education as well as help for children, is problematic when it relies on schools financing the involvement. This is particularly so in schools where a high proportion of troubled children, some bereaved, already pulls on finance. However, lack of understanding from teachers and a reduced school-based counselling service are situations that could have arisen from a school culture of discomfort with discussing 'difficult' subjects with children.

CHAPTER CONCLUSION

This chapter has explored a trajectory of Education Acts and reforms in an attempt to expose possible reasons for the lack of policy for death education in primary schools. Three main areas have been proposed as probable explanations for the problem; academic expectations, financial implications and teacher's reluctance to discuss bereavement. The absence of school-based policy for managing daily death and loss is doubtless partly motivated by the lack of commitment from successive governments to train teachers in death education, and the priority given to national testing. Whilst the need to fulfil the academic potential of all children is important in preparing them for life, meeting one criterion of *Every Child Matters* (DfES 2003), research suggests that children with unresolved grief find it hard to concentrate on academic work and fall behind their peers. Some of these children will be labelled as SEN and will attract individual educational plans. Teachers untrained to recognise grief symptoms will continue to experience the challenging behaviour of some troubled children.

Arguably, although some teachers do understand the root of a child's behavioural problems, the pressure on schools to increase academic standards to result in eighty five per cent of primary school pupils being secondary-ready, creates a climate where the time needed to improve their emotional wellbeing comes second to that needed for core subject teaching and academic testing. It is debatable whether schools are unable to finance death and loss education for teachers, or whether they simply prioritise other areas. A potential recent obstacle to monitoring good death education practice in Britain is the fragmented, multiple-funding arrangements brought about from educational change, making it increasingly difficult to generalise about what directives are in place in all primary schools. Some schools are LEA managed, but increasingly

more have Academy status, or are 'Free'²⁷⁶ Schools, less impeded as to what is taught and how funds are used for teachers' CPD.

It is likely that some schools only introduce training once they have experienced the death of a child or teacher. A further consideration is whether the pupil premium grant is spent on additional educational resources or counselling and related therapies, such as sand or art therapy. Undoubtedly, the 1990s cultural emphasis placed on academic results contributes to a pedagogical climate in which the trend for academic achievement has outweighed the significance of successful therapeutic education. Having a knowledgeable teacher to talk to whilst waiting for external help could make a huge difference to the wellbeing of some children waiting for counselling. However, excluding expense, some teachers lack insight of what counselling can achieve and who should be referred for it. When Sir Al Aynsley-Green completed his term as Children's Commissioner for England in 2010 and was appointed patron of the CBN, his vision of the network was that 'in every community there would be someone for children and families to turn to, and in every school someone who understands how to support grieving children' (Aynsley-Green 2010, cited by Potts 2013: 95).

This statement follows the earlier expressed hope by the Parliamentary Health Select Committee that 'a willingness to be open about death will facilitate better communication and ultimately better provision' (DoH 2004: 6: 135). That hope remains largely unfulfilled in many primary schools. Ultimately, if the wellbeing of children bereaved, or to be bereaved is not met in primary education, the detrimental effects on academic progress and unresolved emotional problems could prevent those children being 'secondary-ready'. However, notwithstanding policy and finance, the possibilities explored are that death is still a taboo subject in Britain and a climate of denial infiltrates primary schools²⁷⁷. Having established that there is no legislation requiring that schools write and publish a policy for daily death and loss education²⁷⁸, nonetheless, having worked in a school that has one, I would argue that the benefits to the whole school community are clear.

There is an obvious benefit to the academic progress made by emotionally challenged children who are given extra school support from the head teacher and class teacher in liaison with educational psychologists and counsellors. Whilst researching, I taught a

²⁷⁶ Free schools do not have to follow the National Curriculum and are not LEA controlled. *Types of School* [online] Available at <https://www.gov.uk/types-of-school/free-schools> (accessed 11.9.15)

²⁷⁷ Notwithstanding other religious cultures with an open ethos.

²⁷⁸ Available for parents to read on school web-sites.

class with forty per cent SEN children, some of whom had unresolved losses and severely challenging behaviour. Four children were initially extremely disruptive to teaching, and required a range of incentives²⁷⁹ that were only possible due to the addition of extra support staff and learning support assistant time on a daily basis. All children made academic progress, and due to the emotional needs of the SEN children being addressed, the end of Key Stage levels of achievement in the remaining sixty per cent of the class rose significantly in value added²⁸⁰, equalling those of the other two Year Two classes.

However, lack of time and finance are unlikely to be the only reasons that schools do not prioritise CPD, or writing a policy for daily death and loss. Despite children obviously welcoming intervention, teachers' attitudes to helping bereaved children have been shown to affect their willingness to talk to them. Hopkirk (1988) suggests that adults commonly perceive that 'the pain of children is so distressing that it is very much easier to devote our energies to working around them than to working directly with them' (Hopkirk 1988, cited by Kroll 1994: 29). This is likely to be the scenario for teachers untrained in bereavement management and unsupported by an environment in which death is not freely discussed. The 2014 Primary National Curriculum (NC) for England clearly hinders progress. It states that 'lessons should be planned to ensure that there are no barriers to every pupil achieving (DfE 2013: 8, s. 4.3). There is, however, no statement suggesting other than academic achievement.

The tendency for the restrictions in the curriculum to exacerbate the problem, is illustrated in the new *Primary National Curriculum* (DfE: 2013) for science, which expresses a statutory requirement that 'Year Five should be taught to 'describe the changes as humans develop to old age' (DfE 2013: 168). There is no mention of dying, a discussion of which could naturally develop. It seems reasonable to expect that by Year Five, some children might at least have experienced the death of a grandparent or be doing so in the future and research suggests that shrouding a life-changing event in mystery, and making it taboo, could detrimentally affect children's psychological wellbeing (Jackson and Colwell 2002, cited by Aris 2005: 50). Consequently, it can be said that whilst the factors of finance, legislation and academic results, coupled with constraints on teacher time, undoubtedly contribute to the lack of death education in schools, it is nevertheless realistic to suggest that enduring cultural death denial of

²⁷⁹ These comprised: Social Stories, behaviour charts, Home-school books with positive statements in, reward times, art therapy, extra 'time' out' with a teaching assistant, extra support during inputs and a daily behaviour log written by me and sent to the Educational Psychologist.

²⁸⁰ Some children moved up 3 to 4 assessment levels.

invisible death prevails, and affects teachers' confidence in dealing with bereavement, and possibly parents' attitudes to teachers discussing loss with children. Nonetheless, it is time that schools fulfilled their requirement to help all children achieve wellbeing through the five healthy outcomes in *Every Child Matters* (DfES 2003: 4, s. 1.1)²⁸¹ and for initial teacher training and CPD to include resources to ensure that every bereaved child matters.

²⁸¹ *Every Child Matters* [online] Available at <http://webarchive.nationalarchives.gov.uk/20130401151715/http://www.education.gov.uk/publications/eOrderingDownload/DFES10812004.pdf> (accessed 3.9.14)

Chapter 8

CONCLUSION

CHAPTER INTRODUCTION

The purpose of this study was to explore the management of death and loss in primary schools in a largely ethnically homogenous and historically 'Christian' shire county and to fill an apparent gap in research detailing what teachers feel able to do to help bereaved children. An initial premise led to a suggestion that teachers are largely untrained to manage bereavement. Prior research by Crenshaw (1995) and later Holland (2001) and Holland and McLellan (2015) agree that bereaved children's wellbeing is not sufficiently met by schools, but that this situation derives from causes largely out of teachers' control, with inappropriate training cited as a reason for schools not knowing how to respond (Holland and McLellan 2015: 124).

Obstacles considered in the previous chapters for their influence on schools include a cultural climate of embarrassment about death in which teachers inevitably live. Teachers' attitudes to death have been reported (Pratt *et al* 1987), however, the possible internal or external obstacles affecting teachers' confident practice with bereaved children have been under-reported (Lowton and Higginson 2003). Chief among these, I argue, are: a deficiency of government policy for death and loss education; policy emphasis on raising academic standards; and insufficient finance for other than academic curriculum with the possibility that policy and finance are related. These factors are manifest in many teachers' experience by both an increased workload and reduced available time for development outside a narrowly conceived 'academic' focus, an absence of ITT and CPD in death and loss education and a lack of available support for bereaved children from school-based counsellors.

I have argued that the cultural climate of 'embarrassed denial' is historically specific and is distinct from attitudes and expectations in the nineteenth century, which have been radically changed by two world wars, economic changes, the position of women, secularisation and medicalisation. In many respects these changes are reflected in the children's literature I examine. I conclude that despite the obstacles some low-cost interventions by teachers are possible, through bibliotherapy, though I do not advocate its amateurish adoption.

The cultural and psychological context

The literature review began by tracing a changing trajectory from 1870 to 2015 detailing innovative empirical research by Gorer (1965) and Parkes (1972), and later studies by McLeod (2006), and more recently Walter (1994) Jalland (2005; 2010), Strange (2010) and Whaley (2011). This research collectively demonstrates that wars, secularisation, medicalisation and the psychologising of grief have impacted on current cultural²⁸² attitudes to discussing death and loss, mourning and bereavement. Data show that this change is not countered by the high profile of 'visible' deaths prominent via the media, or even a 'revival of death' supporting greater freedom of choice in how and where to die. The review revealed the nineteenth century emphasis on religious 'good death,' which has metamorphosed into a more publicised desire for death to be dignified and 'pain-free'. Yet despite openly discussing choice, communities are noticeably inhibited when sharing condolences, and apprehensive if contemplating including children in death rituals.

This account has therefore supplied a scaffold on which to research other disciplinary areas, in particular the parallel history of death and loss in children's literature. Arguably, the deployment of this aspect of interdisciplinary data as a way of contributing to the field of educational policy provides an original approach to suggesting workable resources for primary schools. The second area of the literature review, exploring attachment theory and the psychology of loss, provides a further understanding of grief and its long-term effect. The concepts explored here confirmed that adults lack appreciation of the effect on children of death, and suggest that there is misunderstanding of the effects on children of so-called 'lesser losses,' such as divorce and parental imprisonment.

From discussing theory from psychoanalysts such as Fonagy, and particularly the innovative work of Bowlby and Winnicott, an analysis of comparable psychological themes in a range of children's death and loss fiction could be explored. This included didactic texts, more recent picture books, and one book in which the author's portrayal of childhood mourning changed from the original, during language translation. The book analysis not only supports the claim that cultural attitudes to death and loss are set in a social context, but that they have changed over time, following significant world events. This framework provided a foundation to inform the under-researched field of developmental bibliotherapy. As consideration of this process for its use in British

²⁸² All references to culture do not include non-Christian religions.

primary educational practice is a neglected area, this element of the thesis fills a significant gap in research and makes an original contribution to knowledge in the fields of literature and education.

The key findings of the thesis will now be considered, before making suggestions for future recommendations and policy implications. Whilst not directly asking children for their views, they are nonetheless represented in this study from my research, and I start with an argument that due to teachers being untrained in death and loss education, an aspect of children's wellbeing, outlined in the *Children Act 2004* (Great Britain 2004: 3, Part 2: 10:2 a) is not being met. To recap, the questions arising from the two literature review chapters comprised:

*How have teachers' attitudes to helping bereaved children been affected by the historical trajectory of death and mourning, and what evidence exists from research into loss psychology that teachers should be trained for bereavement management?
What are schools doing to prepare and support teachers for death and loss?*

Does children's literature from the nineteenth century to the twenty-first reflect a similar trajectory to the historical evidence of adult attitudes to death and loss?

Could teachers untrained in psychology use books bibliotherapeutically to begin the process to help bereaved children?

Have constraints of time, finance and expected academic standards significantly reduced the opportunities for teachers to improve the wellbeing of bereaved children?

I now discuss these questions with reference to the findings of the thesis.

DISCUSSION

*How have teachers' attitudes to helping bereaved children been affected by the historical trajectory of death and mourning, and what evidence exists from research into loss psychology that teachers should be trained for bereavement management?
What are schools doing to prepare and support teachers for death and loss?*

Politicians and teachers are part of a community who influence, and have been influenced by, the cultural context in which they live. The effects of the events detailed in the trajectory of death and mourning reveals that discussion of death and loss has

become more awkward and that an 'embarrassed denial' has suffused British culture and the micro-culture of schools. Loss psychology clarifies that adults are largely unaware of children's need to have teachers and peers acknowledge bereavements and that a lack of understanding can cause bereaved children to be bullied for being different. Research reveals that seventy-three per cent of primary school children questioned, admitted they think about death and dying to some extent, and over a third of the children in a British study 'revealed this as a subject which they would like discussed in their class' (Bowie 2000: 23).

Findings of a recent parliamentary debate which explored whether teachers understood mental health issues, exposed surprise from politicians that thirty-eight per cent of those children asked said they wanted to know more about bereavement²⁸³ (HC Deb: March 2015). Although the question did not necessarily relate only to primary school children, the reply demonstrates the trustworthiness of my assertion from the literature review that adults misunderstand the need for younger children to talk about death or feel ill equipped to help them. Despite the evidence in the literature review revealing that at least 24,000 children a year are bereaved, recent research by Draper and Hancock (2011: 289-290) states that because statistical data on bereavement is not compiled centrally, figures for the number of bereaved children in Britain are difficult to verify, with 'significant' bereavements very hard to quantify. The figure could therefore be higher, and I would echo Draper and Hancock in asserting that since childhood bereavement holds a high risk of later delinquent behaviour, identifying bereavement is a crucial role of schools.

Whilst I have discussed the negative role model for children that fettered adults can bring to a situation (Dyregrov 2007: 72), and the benefits of an open school death and loss ethos, my data showing that schools do not provide enough support for teachers, confirms others' qualitative findings that teachers' attitudes are affected by what is considered acceptable in wider culture. I have reported a good deal of material from many different sources to uphold the premise that attitudes to discussing death and loss have altered over time. My quantitative research suggests that the reticence with which personal death and loss is discussed could well impact on teachers' professional unease. Whilst ninety-three per cent of my respondents had at some point taught a bereaved child, only thirteen teachers out of thirty-four who had spoken with bereaved

²⁸³ (DoH: CAHMS) Available at [online] <http://www.theyworkforyou.com/debates/?id=2015-03-03a.883.0&s=bereaved+children+in+school#g901.0> (accessed 11.5.15)

pupils commented on how that experience felt, suggesting that they found it hard to admit the difficulty. Only four teachers stated that suffering personal bereavement helped them talk to grieving children.

Seven teachers, in different schools, none of whom had received any significant death and loss training outside of a single staff meeting, acknowledged that talking with bereaved children was 'hard', 'difficult', that they felt 'at a loss' and that they felt they should 'have the answers,' especially when children became distressed. The five teachers who did feel they had coped suggested good listening skills helped them. Training teachers in death and loss education and bereavement management seems essential. Notwithstanding seven studies from different geographical regions, spanning from 1995 to 2013, there are insufficient empirical data outlining the classroom practice employed by teachers to meet the needs of bereaved children. My findings make an original contribution to a neglected area of educational research, and support the indications in the literature review that teachers of bereaved children employ a mainly passive approach. This maybe due to lack of expertise or awkwardness, and the concern that children might become inconsolable or that the teacher might lose emotional control.

As regards what schools are doing to support teachers, my findings suggest that schools are doing so little that it is easier to report what they are not doing. Despite seventy per cent of schools dealing with a bereaved child at any one time, the 2001 finding (Shipman *et al*) that ninety per cent of primary schools have no school-based policy for death and loss education appears not to have noticeably improved over time. Research by Tracey and Holland (2008) and Potts (2013) shows a similar shortfall in sampled schools in different geographical areas. This deficit of current policy for death and loss suggests a failed top-down approach to school-based policy writing. Further evidence for the influence of government policies on the virtual absence of death and loss education comes from the finding that no schools in the purposive sample had a written death and loss policy, either at the time of sending questionnaires or in 2015.

Although these findings relate to a small geographical area, they nonetheless contributes original data to previous research and confirm that other schools might also be doing 'not very much' in raising the profile of death and loss education. Furthermore, some teachers and teacher researchers confuse a policy about dealing with death and loss with a critical incident policy. This finding is important, not only for confirming the low profile of death and loss education, but also for recognising that a lack of policies

about them could have arisen from teachers and heads not realising that the two policies are different.

Although one headteacher volunteered a statement that in her opinion, finance is not the overriding reason why teachers are untrained for death and loss education, the likelihood that finance contributes to choices made by headteachers cannot be discounted. Furthermore, I have shown that the 2011 report on CPD for a cluster of primary schools prioritised attendance at courses attracting government-led funding. The centrally based supply costs (Ridley 2011: 10) to cover teacher absence were not for death and loss courses. My teacher respondents confirmed this. Although over ninety per cent of them had taught a child bereaved by death, only twenty per cent of the sample had ever received any CPD training, sometimes restricted to just one staff meeting. The teachers were often at a loss to know what to do or say when faced with a distressed child. Prior research asserts that teachers in different geographical areas of the UK are not receiving death and loss education (Crenshaw 1995; Eiser *et al*²⁸⁴ 1995; Bowie 2000; Jackson and Colwell 2002; Rowling 2003 and Potts 2013), either during Initial Teacher Training (ITT) or Continuing Professional Development (CPD).

My own and other's qualitative findings suggest that a 'conspiracy of silence' about death seems to include the fear of incorporating death into the curriculum (Aris 2005: 50) and that this possibly affects training provision and even teachers' willingness to utilise helpful resources. In my purposive sample few County and charity bereavement resources were known by respondents, and were not utilised by teachers who did know of them. As I have pointed out, the usefulness of social and emotional learning (SEAL) for primary school-aged children is agreed by the report from NICE (2008),²⁸⁵ yet although sixty-eight per cent of teachers knew of SEAL²⁸⁶ (Weare and Gray 2003) 'loss and relationships' literature, only thirty-nine per cent of teachers had ever used it. This suggests that written resources without discussion do not sufficiently equip teachers to help bereaved children. The teachers I surveyed confirmed other research that the national provision for death and loss education in ITT and CPD for primary school teachers is 'variable' (Shepherd *et al* 2013).

There is also a clear need for government finance to re-introduce school-based counsellors, and for there to be a clarification for what teachers can realistically

²⁸⁴ Eiser C., Havermans T., Rolph P. and Rolph J. (1995)

²⁸⁵ NICE [online] *Social and Emotional Wellbeing in Primary Education* (PH12) Available at <http://www.nice.org.uk/guidance/PH12/chapter/1-Recommendations> (accessed 11.11.15)

²⁸⁶ Social and Emotional Aspects of Learning

provide. Having highlighted a gap in research seeking teachers' opinions on proactive and effective support for children (Lowton and Higginson 2003) over a third of teachers in my sample confirmed that counsellor support would help them manage bereaved children, despite research discussed in the educational policy chapter suggesting that the benefit of counselling resources and the role of the counsellor are not sufficiently understood by schools. This supports the research I also cite from the MindEd project (Thompson 2013) that identified teachers' distortion of the counselling role. The report shows that whilst some schools, my own included, use their pupil premium funds to buy-in counsellors, others do not, despite the proven benefits to children's emotional happiness and academic success.

My survey showed that in 2009, although no schools had a full-time counsellor, there were nine part-time. A change of policy subsequently removed the school-based counselling service in the area, most likely for financial reasons. Although additional LSA and TA help is regularly purchased to raise academic results, there is no guarantee that schools will redirect funds and pay for counsellors from Place2be or similar organisations. Furthermore, whilst I maintain that teachers should be trained to understand how to talk with bereaved children, which is arguably a counselling skill, clarification is needed for the terminology of 'counselling' to be reconsidered and for teachers to be defined as 'loss-support'. Eighteen teachers in my sample saw counsellors as being necessary for their own use, as much as the children's, and agreed that a school-based counsellor would be 'someone to talk things over with', 'trained to understand and support them'. Furthermore, when asked whether anyone held a responsibility post for death and loss in their schools, only six teachers in the sample thought someone was responsible, fourteen confirmed no-one was and nineteen teachers stated that someone should be responsible.

As nineteen teachers were unsure if anyone held the position, the survey confirms the low profile of death and loss education and the lack of support for teachers in the sampled schools. This finding also makes an original contribution to the research into what teachers actually do to help the bereaved and what they feel equipped for.

Does children's literature from the nineteenth century to the twenty-first reflect a similar trajectory to the historical evidence of adult attitudes to death and loss?

The decision to research and analyse the contents of some well-known children's books from the nineteenth century to the twenty-first century achieved two gains.

Firstly, it filled a suggested gap in knowledge, since description, rather than analysis, of children's loss-related literature has been more usual (Moore and Mae 1987: 54, citing Kimmel 1980, and Walker 1978). Secondly, such analysis confirmed a similar trajectory of adult attitudes to death and loss as that discussed in the chapters of the literature review. A particularly valuable contribution of the children's literature data is the analysis of books depicting child-attended death ritual. The didactic element of earlier books demonstrated that children were once expected to be involved in death rituals and mourning, and that dying was discussed with reference to religious 'good death'. The obvious later decline in stories affirming that death was not only normal but promised something better than life, supports the premise that the exclusion of children from death-talk and ritual is an adult construct reflected in cultural history through books.

By examining books after the Second World War, during which time Britain became more secularised, hints of death and after-life are mainly suggested from the use of portals into magical worlds. The themes discussed in the second chapter of the literature review, which charted psychological research into attachment theory and loss, are reflected in the story concepts of reality and non-reality, this world and another, the me and the not me, and internal and external realities. Moralistic messages are less pronounced and didactic 'teaching' texts less obvious, although some didacticism is unavoidable. The inclusion of books that do tackle the theme of death presented a new, twenty-first century finding of the current taboo of not discussing terminal illness.

Could teachers untrained in psychology use books bibliotherapeutically to begin the process to help bereaved children?

In exploring what teachers do to manage bereaved children it was clear that a lack of government policy, finance, training and school-based counsellors might be an obstacle to supporting primary school teachers in death and loss education. However, my exploration of using books, particularly fairy-tales, to help bereaved children clearly argues that there are inexpensive resources that teachers untrained as counsellors already use to good effect every day, a use which could be further developed with external support if needed. Bettelheim detailed how fairy tales could also be used for problem-solving, a skill promoted in the primary curriculum. An understanding of how this genre and other children's fiction might be employed by teachers of bereaved children, updates past research suggesting that from 'broad exposure to differing

problem settings, children will be exposed to the idea that there are many different ways to solve problems and make decisions' (Riecken and Miller 1990: 62).

As a result of this original research I would seek to define and promote developmental bibliotherapy as a natural curriculum area, not least because it has been suggested that the importance of personal qualities including empathy and patience, hopefully present in teachers, are possibly more relevant to the success of the process than psychotherapeutic training (Afolayan 1992: 144, citing Edwards and Simpson 1986). This argument does not detract from the need for educational psychologist support for some children, or for teachers to be trained to recognise when that support is required.

I have also pointed out the scarcity of British books for younger children that are bereaved by parental imprisonment²⁸⁷. This reflects the assumption shown by my sampled teachers and my educational policy findings that divorce and parental imprisonment are widely perceived as 'lesser losses'. Consequently, affected children become 'hidden mourners' and it is worth restating that in England and Wales, 200,000 children each year have a parent imprisoned (Action for Prisoners' Families 2013; Morgan *et al* 2014: 269),²⁸⁸ which is a significantly higher figure than the annual number of children whose parents newly divorce.

Have constraints of time, finance and expected academic standards significantly reduced the opportunities for teachers to improve the wellbeing of bereaved children?

An analysis of educational policy, scrutinising data from a wide range of education acts and reports, demonstrated that over time government provision for death and loss education has not changed. I pointed out in the educational policy findings that in the last ten years the success of parliamentary motions to discuss the role of schools in helping bereaved children is negligible outside of Northern Ireland. Past research suggests that in the UK as a whole, schools have echoed this failing by not writing school-based policies for bereavement (Lowton and Higginson 2003; Rowling 2003). My findings also suggest that historically, 'bereaved children' have gone undetected, mis-diagnosed as 'troublesome children'. My findings suggested that this deficit of

²⁸⁷ This is relevant from the need for schools to teach children English spellings, rather than American

²⁸⁸ Action for Prisoners' Families (2013) *Facts and figures About Prisoners' Families*. [online] Available at

http://www.prisonersfamilies.org.uk/uploadedFiles/2010_Publications_And_Resources/Facts_and_figures_about_prisoners_families_June2013.pdf (accessed 24.6.15)

policy for death and loss could be linked to the 1990s introduction of a content-based national curriculum and national attainment testing. This data demonstrated the pressure on schools and the effects on teachers of increased teaching workload (Osborn *et al* 2001: 55), reducing time for teachers to talk to troubled children. My own classroom experience agrees with the premise that time to talk with bereaved children is an issue, especially if there are several 'disturbed' children needing help in one classroom.

However, insufficient time is not the only reason, nor necessarily the dominant reason for the present situation. Recent government reports (*The Importance of Teaching* 2010; *Raising Ambitions and Standards for Primary Schools* 2014) still neglect to acknowledge the relationship between good emotional wellbeing, and improved academic success; only measuring children's ability to be 'secondary ready' from the results of academic testing. I would argue that emphasis on raising academic results is an obstacle to finding time and money for death and loss CPD for teachers. My evidence also argues that despite *Every Child Matters*, the emphasis on raising educational standards through a test-driven policy culture ignores the needs of troubled pupils whose emotional state affects their learning potential²⁸⁹. Although Ecclestone and Hayes (2009) suggest that emotional wellbeing is not an educational goal (Ecclestone and Hayes 2009) sampled teachers responded that children known to be bereaved 'lacked concentration,' suggesting a link between emotional health and academic achievement.

Arguably, neither wellbeing nor school achievement have been helped from bereavement not being traditionally considered a 'learning difficulty', despite a contrary view articulated as far back as 1989 (Elton), and despite the *Education Act 1996* stating that the progress of non-SEN children should not be affected by those unable to behave appropriately. Iwaniec and Pinkerton (1998: 143, cited by Potts 2013: 98) discuss the concept of a 'hidden population' of children who are not represented, despite their behaviour often reflecting their distress. These findings are important for summarising a generally unacknowledged link between troublesome children and bereavement.

Additionally, the increased numbers in mainstream schools of children with special educational needs from terminal illness has long contributed to a situation where

²⁸⁹ SEN pupils were admitted to mainstream classrooms following the Great Britain: 1981(Chapter 60: 2: section 3a-c)²⁸⁹

teachers are increasingly required to teach children who will die, as well as supporting other pupils affected by the loss (Eiser *et al* 1995: 32). Although recent funding promised in 2013 for trainee teachers to be offered placements in 'special schools'²⁹⁰ it does not change the lack of support for qualified teachers in mainstream schools.

RECOMMENDATIONS

So far, apart from a sprinkling of small-scale research studies, most research has explored teacher's attitudes to death, rather than what initiatives they employ to deal with bereaved children on a daily basis and this is an area that requires further investigation. To summarise, my findings suggest that there has been negligible improvement in the number of schools writing policies for death and loss and the low profile of death and loss education perpetuates from insufficient government policy and pressure to raise academic standards. This reduces teachers' available time to talk with bereaved children and provides a dilemma for teachers who are untrained in death and loss, have no responsible person to advise them and have no school-based counselling support.

I consider lack of finance to be a smaller problem for schools than the cultural disinclination to discuss bereavement, however, the possibility that adequate finance exists, does not imply that it would be channelled towards helping bereavement without some directive from government. As a result of this research, undertaken over several years of my teaching career, at times teaching very troubled bereaved children, I would make several recommendations. These are divided into areas that have arisen in my research.

My research showed that despite some interest from a few members of parliament, there is negligible debate outside of select committees on the subject of the wellbeing of bereaved school children. Nonetheless, my educational policy findings suggest that mainstream schools need a directive from government to warrant allocating time and finance for something other than raising academic results. Although it is difficult to envisage what that policy directive might look like, there is clearly a need for government to recognise that schools need more support. As my sample findings suggested that teachers lack confidence in knowing what to say to distressed children, death and loss training for teachers must begin with ITT lectures for trainee teachers. A module on the psychology of loss, how to recognise grief symptoms in children; the

²⁹⁰ *Children and Families Bill 2013* (February 2013: 67: 53)

importance of acknowledging a bereavement, what to say about funerals, and not using euphemisms, would be useful tools that have been addressed in my own training of colleagues.

The effect of losses on children perceived as 'lesser losses', such as imprisonment of parents and parental substance abuse, would also raise the profile of 'hidden mourners' and help reduce the stigma. Legislation similar to that implemented for SEAL could provide schools with classroom resources for death and loss education for children. Divided into termly plans, objectives could include allowing discussion opportunities and role-play to help children understand peers' reactions to death and loss, and that talking might help. My findings suggested that bereaved children could feel different. Ensuring that bereaved children feel included and understood is therefore very important for more reasons than personal wellbeing in the current climate. Arguably, by writing policy for death and loss education for teachers and children, government would lead by example. Although this in itself would be insufficient to encourage schools to write their own policies, an effective measure would be to include death and loss education in the list of policies required to be published on school web sites. My findings showed that there is at present no requirement. A sample policy from my own school demonstrates that writing such a policy is a simple task, and ensures all staff are in accord (see appendix). The policy suggests that there should be a support group which would ensure more than one person would be responsible for death and loss. A clear rationale endorsing training, the use of resources and the avoidance of euphemisms is needed as well as agreement that all weekly staff meetings begin with a sharing of information about bereaved children.

There should be documentary guidance for all primary schools to receive death and loss CPD for teachers. This would ideally include a five-yearly refresher course, in-house or with a group of schools, for all staff and for those already in post who received no ITT on death and loss education. Ultimately, the responsibility of schools to provide a duty of care for all children, alongside the lack of time and an increasingly results-driven culture requires headteachers to make a stand and ensure that training occurs and a culture of openness for discussing death and loss exists. My own school has achieved this, partly due to the vision of the headteacher and my research and training of all staff. It is cautiously suggested that in the same way that SENCOs are trained for special needs work, there should be similar training for death and loss responsibility roles. In 2015, SENCOs in my geographical area attended a course for a day a month

over twelve months, demonstrating that schools are prepared to release teachers to be trained in specific areas.

As my research shows a link between SEN children and bereavement, it would be reasonable to extend teachers' knowledge to include grief symptoms, signs and causes, and how to advise colleagues teaching a bereaved child. Furthermore, CPD for the initial process of developmental bibliotherapy, using fairy tales or compassion books to problem solve, would be a useful inset day in schools. My sample findings suggest that some teachers use books with children, and some would like to but haven't; yet all schools have access to books. Whilst books such as *The Snowman* (Briggs: [1978] (2013)) provide opportunities to discuss death and loss, no teacher in my sample mentioned having used it to discuss bereavement generally or more specifically. A library of compassion books, that can be read to and with children, or borrowed by parents, has proved useful in my own school and is used by teachers regularly. As already stated, training would assist teachers in recognising when external support was needed, but my findings also suggested that there is a clear need for government policy to provide finance to re-introduce school-based counsellors, and for there to be clarification for what teachers can realistically provide.

My own experience suggests that the beginning of the school day is often a time when a distraught parent will seek the teacher and wish to talk about bereavement. It is also a time when teachers must be vigilant for children's personal safety due to the extra risk posed by unidentified adults. This led me to write an inexpensive Parent Pack for parents to read until I could meet them later. Often the contents answered many of their questions and prompted others, but one of the most important chapters in the pack details how children grieve, and what to say about funerals²⁹¹. A pro forma for all primary schools in which their own local contact numbers for bereavement and loss support could be added would ensure that parents had initial help and reduce pressure on teachers. My school also has a Memorial Bowl (see appendix) in which children place pebbles on which they have written names of dead people or pets.

FINAL REFLECTIONS

The inductive nature of my research design has suggested there is a situational synchronisation between the world at large and the school. The demands of employers and the esteem with which academic achievement is held culturally, helps determine

²⁹¹ I intend to revise, add to and publish this pack.

government initiatives and school priorities, which in turn influence culture. The widespread disinclination to acknowledge the importance of tackling bereavement in children suggests that culturally, an overriding perception is that small people have small feelings and are not equipped to understand loss. My extensive analytical reading of documentary evidence related to education and children's emotional wellbeing or success has revealed a surprisingly high deficiency of the words 'bereaved', 'bereavement', 'grief', or 'loss'.

In summary, it is debateable whether insufficient death and loss education in primary schools is dominated by one factor. There seem to be several inter-related causes. The lack of government policy influencing school policy, alongside cultural misunderstanding of children's reactions to grief, accompanies a possibly white, middle-class fear of causing offence (Howarth, 1997, cited by Valentine 2008: 149). Media influences on perceptions of death, loss and mourning suggest the need for broadcasters to take greater responsibility for depicting children attending funerals. Similarly, children should be shown seeing 'dead' bodies and discussing feelings of grief openly with adults and other children, non-euphemistically. As the school is in part a reflection of the wider culture in which it is located, such dramas would make good class discussions.

I suggest several areas where more empirical research into death and loss education is needed:

Exploring what more schools are actively employing and what training teachers require to help bereaved children.

Examining how developmental bibliotherapy can be successfully implemented by teachers in primary schools.

Increasing knowledge of the relationship between child bereavement, wellbeing, and educational outcomes, as discussed in the Revised *Child Bereavement Review* (DfE and CRC 2014: 14: 2.2)

Finally, although for reasons stated above this thesis has not included multi-cultural attitudes to death, it is acknowledged that teachers who fear causing offence (Milton 2006: 58) might cite the diversity of religious beliefs in their classroom to support decisions to avoid discussing death and loss. Further research exploring how faith communities can assist teachers with such discussions could encourage greater understanding of children's perception of death across cultures.

APPENDICES

Planning for intended Interviews

As well as the scheduled opportunity for headteachers to alert me to any bereaved respondents prior to interviews, I also aimed to have the contact numbers and web sites of counsellors and organisations to be made accessible for all interviewees. This is in keeping with the ethics of the thesis and the qualitative data informing interview questions, in which the effects of grief, and particularly unresolved grief, and the longevity of the sorrow accompanying loss were to be discussed. I aimed to borrow equipment from the university so that I had two machines operating to ensure that should equipment fail, I had an alternative.

I aimed to put interviewees at their ease, beginning with general chat about the questionnaires. Although I hoped to acquire more indepth answers from interviews, interviewees were to have control over questions they would rather decline answering and be at liberty to stop the interview at any time. Furthermore, interviews were planned to be 'a conversation with a purpose' (Kahn and Cannell 1957: 149, cited by Marshall and Rossman 2006: 101) and it was important to allocate enough time for the respondents to ask and answer questions, whilst clarifying that no interview should exceed one hour. Gillham notes, however, that allowing interviewees an opportunity to add in anything omitted that they consider important and relevant should be part of the closure phase of interviews (Gillham 2008: 79) and this was realised.

Andersen and Arsenault maintain further that by bringing interviews to a definite end the interviewee is clear when the interview is over (Andersen and Arsenault 2002: 187). Furthermore, a time limit focuses the interview pace, reduces the transcription time needed afterwards, and ensures that all interviewees have equal opportunity to respond. Additionally, interviewees were to be offered a choice of venue, bearing in mind the lack of suitable, private rooms in some schools and the possibility of transport problems for disabled teachers.

Questionnaire

1. Are you **male** **female** (please circle)

2. Please *circle* your **age** span:

21-25 **26-35** **36-41** **42-50** **51-60** **61-65**

3. How long have you been teaching? -----

4. What religion are you, if any? -----

5. Could you outline what you would consider to be a '**good death**',
e.g. pain free, quick, at peace with God, controlled by the dying person,
in hospital, at home, unconscious....

Other ideas, please comment

This section is about your own CHILDHOOD bereavements

This section is about your OWN childhood bereavements.

Please comment, in the strictest confidence.

6. Were you bereaved as a child? **Y / N** When? **0-5 years** **6-9 years** **10-12years** **teens**

Please ring the age span or state age

7. Who was the person who died?

8. Was a teacher aware of the death?

9. Did a teacher discuss the death with you?

10. Did a teacher discuss the death with the class?

11. Was professional bereavement counselling offered to you?

12. Did a teacher use a book(s) to help you?

13. If yes, which ones do you remember?

14. Did the support you were offered help? How? Or why not? **Please comment**

15a. Did you see the deceased? 15b. Did you attend the funeral?

15c. If not, in either case, was there a reason for this?

16. Did you suffer **other** losses? (e.g. house moves, parents' divorce, loss of pet, loss of limb, friend) **Y / N**

The next part of the questionnaire will be about your own ADULT bereavements.

17. Have you been bereaved as an adult? **Yes / No**

If you have been bereaved more than once, could you discuss ALL with corresponding numbers?

18. Who died? (relationship to you)

	1	2	3
Relationship			
19. How long ago?			
20. Did you attend the funeral?			
20a Did you see the deceased after death?			

Please continue overleaf if you wish to comment more.

21. If you were teaching, did your school staff know of the death(s)? **Y / N**

21a Did they discuss death(s) with you? **Y / N**

22. Were you offered any professional counselling? **Y / N**

23. Is there a **procedure** in your current school where **all** staff are informed of any death? **Y / N**

Please comment, or use overleaf.

24. Do the children know of **staff** bereavements? **Y / N / sometimes**

25. If yes, **who** informs the children and **how**?

Bereavements of pupils

26. Have you **at any time** taught any child/ren who has been bereaved by a death? **Y / N**

		Child 1	Child 2	Child 3	Child 4
27	Age				
28	As far as you know was the family, broadly speaking, rooted in British culture and traditions or would you say the family culture was influenced by roots or connections outside the UK?	UK elsewhere	UK elsewhere	UK elsewhere	UK elsewhere
29	What religion was the child's family?	Christian	Christian	Christian	Christian
		Jewish	Jewish	Jewish	Jewish
		Hindu	Hindu	Hindu	Hindu
		Muslim	Muslim	Muslim	Muslim
		Sikh	Sikh	Sikh	Sikh
		Other None	Other None	Other None	Other None
30	What was the relationship of the deceased to the child?				
		Child 1	Child 2	Child 3	Child 4
31	Which losses have any children in your class dealt with in the past 12 months ?	Death of parent	Death of parent	Death of parent	Death of parent
		Death of Grandparent	Death of Grandparent	Death of Grandparent	Death of Grandparent
		Death of Sibling	Death of Sibling	Death of Sibling	Death of Sibling
		Death of other close relative	Death of other close relative	Death of other close relative	Death of other close relative
		Death of friend	Death of friend	Death of friend	Death of friend
		Loss of limb	Loss of limb	Loss of limb	Loss of limb
		Divorce of	Divorce of	Divorce of	Divorce of

		parents	parents	parents	parents
		Loss of contact with parent	Loss of contact with parent	Loss of contact with parent	Loss of contact with parent
		School move	School move	School move	School move
		House move	House move	House move	House move
		Parent imprisoned	Parent imprisoned	Parent imprisoned	Parent imprisoned
		Death of pet	Death of pet	Death of pet	Death of pet
Other (please state)					

If there were several children, please choose **one** child to discuss below.

32. Did **you** discuss the loss(es) with the child? **Y / N** **please comment**

33. With the class? **Y / N** **please comment**

34. Did the child who had experienced the loss indicate a desire to discuss it with you? **Y / N**
please comment

35. Did you discuss the loss(es) with the bereaved child's/children's family? **Y / N** **please comment**

36. With school staff? **Y / N** **please comment**

37 **Please comment overleaf on how discussing the loss(es) was for you.**
If you feel you needed more help in the situation, what would have helped you?

38. Did you notice any unusual behaviour from the child focused upon above? Please ring any applicable.

- Quieter More aggressive Tearful Moody Argumentative
- Clingy to parent or carer/ to you Other-please state

If the loss was a death

- 39. Did he/she attend the funeral? **Y / N / not sure**
- 40. Did he/she view the deceased in hospital or at a chapel of rest? **Y / N / not sure**
- 41. Did he/she ask to do these things? **Y / N / not sure**

For any loss

- 42. Did he/she want to be at school after the loss? **Y / N / not sure**
- 43. Did he/she need time out at school during the day? **Y / N / sometimes**
- Was there somewhere he/she could go? **Y / N**

YOUR SCHOOL. All sections are to be used anonymously for research only.

- 44. Do you have a whole school action-plan in place for dealing with bereavement? **Please comment on how this works.**
- 45. Is there a written *policy* for Death and Loss Education? **Y / N / in progress/ don't know**
- 46. Do you use books to help grieving children discuss their loss?
Please comment how (overleaf if necessary), numbering the answer 44.
- 47. Is there a library of books **IN SCHOOL** to help? Please tick any of the following that you USE...

Badger's Parting Gifts *The Fall of Freddie the Leaf*

Dogger

Goodbye Mog

Goodbye Mousie

Goodbye Daddy

Two Homes

It's Not Your Fault, Koko Bear

Two of Everything

Beginnings and Endings and Life Times in Between

47a. Do you use other books? Please list below or number the question and continue overleaf.

48. Is there a **professional bereavement counsellor** assigned to your school?

Part-time / Full-time / No / Don't know (please ring)

49. Do you think there should be one? **YES / NO / NOT SURE**

50. If yes, what difference do you perceive this would make to dealing with bereaved children/staff?
Please comment...

51. Have you had any **Inset days/ staff-meetings** to provide training in how to deal with loss, death and bereavement?

YES / NO

51a How many in the last 3 years?

51b Are there any planned? **YES / NO / NOT SURE**

51c. Would it / does it, help to have them? **YES / NO / NOT SURE Please comment**

52. At staff meetings, do you and colleagues discuss children who are grieving due to death and loss?

YES / NO

53. Is it a subject you and your colleagues talk about in the day? **YES / NO** **Please comment.**

54. If you had training, would you find it easier to discuss death and loss on an everyday basis?

YES / NO /NOT SURE

55. Do you cover death and loss as part of your school curriculum? **YES / NO /NOT SURE**

Please say where, if you know.

56. Do you personally usually use euphemisms for death with children, e.g. gone to sleep, gone with the angels? **YES / NO**

57. Do you know of the *West Sussex Support for Loss* guidelines? **YES / NO** Do you use them? **YES / NO**

58. Are you aware of the SEAL Relationships curriculum theme of *Loss*? **Y / N** Do you use it? **Y / N.**

59. Is someone in your school responsible for Death and Loss Education? **Y / N / NOT SURE**

60. Should there be someone? **Y / N**

60a. If yes, how would this help?

61. Does your school have a response plan to cope with the **death of a pupil or staff member** through illness or accident? (**not** coach crash or critical incident) **YES / NO /NOT SURE**

62. Do you have an **Information Pack** to give to parents to help them understand children's grief reactions?

YES / NO / NOT SURE

63. Have you heard of : Cruse **Y / N** Winston's Wish **Y / N** Childline **Y / N**

Child Bereavement Network **Y/N**

Other support organisation?

LETTERS TO SCHOOLS

LETTER 1

Dear Head teacher,

Who am I?

My name is Lorna Gray and I am a teacher at *****

What am I doing?

As part of a post-graduate degree I am writing a thesis that hopes to provide a valuable contribution to an understanding of how teachers manage children who are experiencing loss, including death. The questionnaire comprises personal and professional questions. All answers will be protected within the research by being completely anonymous. I will not know which person has a particular subject number. All answers about school are non-judgemental and are of interest only for this research.

How can you help?

Although the questionnaire seems lengthy, many questions are a quick, yes/no answer. As a serving teacher, I am aware of the constraints on teachers' time but I am also aware of the generosity of teachers in helping a colleague. I would therefore be most grateful if you could ask your staff to consider completing the questionnaire which could be placed in the enclosed stamped addressed envelope.

To increase staff confidence in the confidentiality of material, may I ask you to consider keeping the envelope in your room or locked away in the school office until all replies are back. If staff prefer to return the questionnaires themselves, my address is at the bottom of the page. There is a separate covering letter for each questionnaire.

I hope that some of your staff will feel able to assist with my thesis. All findings will be published anonymously and I will not use the name of a school or child in any published material. I would welcome the opportunity to take up a few minutes of a Staff Meeting to discuss the project further, if your staff would like to meet me and know more about what I am doing. Alternately, I am happy for you to e-mail me.

Thank you for taking the time to read this and in anticipation of your support.

Lorna Gray
Teacher and R.E. Subject Leader

LETTER 2

Dear

I am writing to all Headteachers that were in the area 'A' sample of schools to whom I sent questionnaires in 2009 regarding personal bereavement and teaching bereaved children.

Unfortunately, I needed a year off school with a severe back problem and had to delay interviewing those teachers who had been kind enough to agree to interviews. I am now catching up with my PhD. and contacting all schools in the sample, whether or not they completed questionnaires.

The anonymity of respondents prevents me knowing which teachers completed a questionnaire, who said yes to interview and who didn't. I would therefore be very grateful if the enclosed details could be made available to staff so that they can contact me if they wish to do so. I can then arrange interviews with interested parties.

As a teacher myself, I appreciate the constraints on teachers' time and understand that an initial agreement to be interviewed is not binding.

I am very grateful for your assistance and that of any of your staff in helping me finalise my research.

Yours sincerely

Lorna Gray

LETTER 3

Dear Headteacher /Teacher

If you are one of the respondents who still consent to being part of the interviews for my research into the management of bereaved children in the primary school, would you please be so kind as to email me with your name and contact details (and if remembered, your subject number) at:

Anonymity is still assured and no research emanating from interviews will bear the recipient's name, the name of their school or the name of any adults or children discussed.

The interview is to help me gain greater insight and should last no more than an hour. The time and place for interview will be arranged separately with individual respondents and it is hoped that all will be completed by end February 2013.

Thank you

Lorna Gray

LETTER 4

Dear

You may remember a piece of research that was carried out by Lorna as part of her PhD in Social Policy which has partly examined how teachers manage bereaved children on a daily basis. The thesis is now heading towards its final stages and Lorna would be extremely grateful for a last piece of help.

Primary schools usually have a Critical Incident policy for major events such as coach crashes. Your school might also have a written policy for death and loss education, for instance a rationale of how teachers manage bereavement from day to day, the agreed language used, and what has been agreed about school procedures for discussing death and loss with individual children.

If your school has a Death and Loss Education policy, we wondered if you would you be very kind and email it, or post it, **by 4th April 2014**. The update to the original findings will enable Lorna to finish her PhD. If we have not heard from you by this date, we will assume that your school does not have a written policy of this sort.

As previously agreed, all information given by schools is anonymous and is only to be used in the interest of research, and in addition, you may choose to delete the school name. If you would prefer to post the policy rather than email it, a letter will be arriving enclosing a stamped address envelope so that it can be sent to:

Head of Primary Education,

To send by email, please use the Subject Title: *Policy for Death and Loss*. The address is

Thank you very much in anticipation of your help.
Yours sincerely

[name]

Application for Ethical Approval

Form E1

For all staff and postgraduate students

This form should be used by ALL research students, taught postgraduate students and staff who wish to undertake research under the name of the University of Chichester.

THIS FORM MUST BE COMPLETED AND APPROVED by the relevant persons and approved by the relevant Committees prior to commencement of research. Full guidance on the Application process can be found at Appendix 2 and 5 in the Ethical Policy Framework.

APPLICANTS – if the study involves participants each Application must be submitted alongside relevant consent forms, information letters/sheets, and debriefing sheets where appropriate. This documentation should be version numbered and dated.

AUTHORISER:

Please categorise the application (A or B). For category A & B applications please ensure that the signed form and all relevant documentation is submitted to the Ethical Approval Sub-group (research@chi.ac.uk).

Where Applicants are postgraduate research students, supervisors should authorise this form; where applicants are staff members, their Head of Academic Department (or nominated signatory) should authorise this form; where applicants are Heads of Academic Departments, the relevant Deputy Dean (or nominated signatory) should authorise this form.

BOX 1: Basic Information

Title of Study:

The Management of Death and Loss in the Primary School

Name of Applicant	Lorna Louise Gray
Position of Applicant	PGR Student for PhD
Name of Authoriser	Professor Chris Gaine
Position of Authoriser:	Retired Professor of Applied Social Policy, University of Chichester

BOX 2. Authoriser Assessment

<p>Authoriser assessment: (please delete as appropriate)</p>	<p>Category A: Proceed OR Category B: Submit to the Ethical Sub-group for Approval</p>
---	---

<p>1. Brief description of purpose of study/rationale</p>	
<p>This inter-disciplinary thesis began in 2008 for the purpose of exploring the ways that primary school teachers manage bereaved children on a daily basis. Qualitative data has been supported by a purposive sample of 13 schools in Area 'A' of West Sussex to which Questionnaires were sent in 2011.</p> <p>I now need to update the data to ascertain whether the sample schools have since written a whole-school policy specifically for day-to-day Death and Loss education. To do this, I need to approach the original schools and ask the Headteachers to send their policy, should one exist.</p> <p>All schools have the option to post or email the replies within two weeks of the request, and may delete the name of the school should they wish to do so to preserve anonymity.</p>	

<p>2. Does the study involve human participants?</p>	<p>No</p>
<p>NB: the University does not conduct research on animals. If your project involves animals in anyway please seek advice from the Ethical Approval Sub-Group before proceeding.</p>	<p>Yes</p>

If answer to Q2 is 'No' then proceed to Question 20a.

<p><i>Start of section dedicated to studies involving human participants</i></p>	
<p>3. Brief description of methods: (include a justification for using the particular participant group)</p>	
<p>The participants represent a sample of Church of England, Roman Catholic and secular schools; infant, junior and through primary, with both male and female headteachers and staff.</p>	
<p>Location of the study and details of any special facilities to be used:</p>	
<p>Area 'A' *****</p>	

<p>5. Are there any conflicts of interests which need to be considered and addressed? For example, does the research involve</p>	<p>No</p>
--	-----------

students whom you teach, colleagues, family members? Do any of the researchers or participants have any vested interest in achieving a particular outcome?)	
---	--

If conflicts of interest have arisen, indicate how they have been addressed:

6a. Is the study part of routine activity which involves persons with whom you normally work in a typical work context e.g. Teachers working with children in a classroom setting, researchers in the performing arts working with actors in a studio, or research involving students in an academic setting.	No
---	----

Optional: Further information to justify answer to 6a

6b. Are the participants children or members of other vulnerable groups (e.g. elderly, those suffering from mental illness, those whose first language is not English)	No
--	----

Please provide brief details and a justification:

If the answer to 6a is 'No' and the answer to 6b 'Yes', this Application must be categorised as 'B'. If the answer to 6a is 'Yes' and the answer to 6b 'Yes', this Application could be categorised as 'A' or 'B'; the Authoriser would make a judgement depending on the activities and the context of the work. If the answer to 6a is 'Yes' and the answer to 6b 'No', this Application may be categorised as Category A.

7. Basis for selection and rejection of participants in the study: e.g. participants must be clinically obese adults; participants must be social workers over the age of 50; participants must have achieved Grade 5 in an appropriate musical instrument

No selection other than that stated in question 3. Random within the schools chosen, all which will be within ***** and mostly in the West of the county.

Will any payment, gifts, rewards or inducements be offered to participants to take part in the study?	No
---	----

Please provide brief details and a justification:

9a. Is the process of the study and/or its results likely to produce distress, anxiety or harm in the participants even if this would be what they would normally experience in your work with them? <i>If yes this Application must be categorised as 'B'</i>	No
---	----

<p>If you answered Yes to 9a, please answer 9b below:</p> <p>9b. Is the process of the study and/or its results likely to produce distress or anxiety in the participants beyond what they would normally experience in your work with them?</p>	No
---	----

Please provide brief details:

9c. What steps will you take to deal with any distress or anxiety produced? E.g. have a relevant professional on-hand to support distressed/anxious participants. Careful signposting or counselling or other relevant professional services. Other follow-up support.

<p>10. Will the study involve withholding information or misleading participants as part of its methodology? (Please refer to Section 10 of the Ethical Policy Framework for other guidance)</p> <p><i>If yes this Application must be categorised as 'B'</i></p> <p>Please provide details:</p>	No
--	----

<p>11.a. Does your proposal raise other ethical issues apart from the potential for distress, anxiety, or harm?</p>	No
---	----

11b. If your answer to 11a. was 'yes', please briefly describe those ethical issues and how you intend to mitigate them and/or manage them in the proposed study.

<p>Will informed consent of the participants be obtained and if so, how?</p> <p>NB: Ethical approval should, in general, be sought before research participants are approached.</p> <p>Informed consent will be given by the willing response of the professionals involved to my inquiry.</p>	Yes
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<p>Date consent obtained: Written or oral?</p> <p><i>Please specify. Oral consent will not be considered adequate other than in exceptional circumstances and must be appropriately justified in your application you may use Box 22 for this purpose)</i></p> <p>Copy of signed consent form attached?</p>	N/A
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13. In legal terms, is there anyone whose permission has to be sought in order to conduct your study? e.g. parents/guardians of child participants.	No
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Please give details.

Date consent obtained:	
Written or oral?	
<i>Please specify. (Oral consent will not be considered adequate other than the exceptional circumstances and must be appropriately justified in your application - you may use Box 22 for this purpose)</i> Copy of informed consent form attached?	N/A
14. It is normally required that the confidentiality of participants is guaranteed at the outset of, during and after the research study. Will this be the case? If the answer is 'yes' please describe how you will maintaining the confidentiality of participants. If the answer is 'no' please justify the exceptional circumstances that mean that confidentiality will not be guaranteed.	Yes
<i>Please give details:</i>	
Date consent obtained: Written or oral? <i>Please provide details:</i> Participants were previously assured of anonymity when completing the questionnaires. Headteachers have been reminded that they have the right to delete the name of the school from any policy sent to me.	

16. It is normally required that the anonymity of participants is maintained and/or that an individual's responses are not linked with their identity. Will this be the case? If the answer is 'yes' please describe how you will be maintaining the anonymity of participants. If the answer is 'no' please justify the circumstances that mean that anonymity will not be guaranteed. <i>NB: in group studies it is likely that each individual in the group will be aware that others in the group are participating in the study – they are therefore not anonymous to each other. However, their identity should not normally be associated with their individual responses. In some studies individual participants may not want their identify known to other participants and the study must be designed and undertaken accordingly.</i>	Yes
---	-----

Please provide details:

The schools will not be named and I am not aware of which teachers responded initially nor which ones may respond this time. All questionnaires were given a Subject Number only.

It is normally required that the anonymity of participants is maintained and/or at an individual's responses are not linked with their identity. Will this be the case? If the answer is 'yes' please describe how you will be maintaining the anonymity of participants. If the answer is 'no' please justify the circumstances that mean that anonymity will not be guaranteed.

No

Please provide details:

As it will be anonymous data, it will not be necessary (or possible) for individuals to veto information.

18. Does the project involve the use of or generation/creation of audio visual or electronic material directly relating to the participants?

No

If yes, please describe how the collection and storage of this will be managed bearing in mind data protection and anonymity issues (see paragraphs 9.7 and 11.7 of the Ethical Policy Framework).

19. Please outline how participants will be debriefed
(Please refer to paragraph 10.2 of the Ethical Policy Framework for further guidance)

A letter will be sent to all participant schools once the thesis is finished offering staff the opportunity to ask me about the material used.

End of section dedicated to studies involving human participants

All applicants to complete questions 20a to 25

20a. Might the research entail a higher than normal risk of damage to the reputation of the University, since it will be undertaken under its auspices? (e.g. research with a country with questionable human rights, research with a tobacco company.)

No

20b. If yes, please describe the potential risk to the University's reputation and how this risk will be mitigated.

21. Will your results be available in the public arena? (e.g. publication in journals, books, shown or performed in a public space, presented at a conference, internet publication and placing a dissertation in the library)

Yes

If yes, please provide brief details:

Dissertation in library, possible journal publication, possible conference presentations locally.

22. Are there any additional comments or information you consider relevant, or any additional information that you require from the Committee?

For Authorisers:

23. Please provide a comment on your assessment of the research project, and where necessary indicate what further information is required.

In my view this application presents no significant ethical issues, and merely updates research that has already been approved by the committee. The intended respondents are responsible professionals who can make an informed decision about supplying information, or not, and are guaranteed anonymity.

24. In your view, does the proposed study potentially contravene any aspect of established codes of practice in your discipline?

(For instance, the codes of practice of the British Sociological Association, British Psychological Society, and British Education Research Association are available on the internet.)

No

25. If yes, please give details and identify issues you wish the Ethics Committee to discuss/resolve:

Approval

Signature of Applicant: Date:

Signature of Authoriser: Date: ...18 March 2014

I the Applicant and I the Authoriser have read the Ethical Policy Framework
(please tick)

CATEGORY B: Signature of the Chair of the Ethics Committee (or authorised signatory)

Signature:

Date.....

EMAILS

1. LETTERS REQUESTING INFORMATION

From: *****> To: lornagray*****
> Subject: Data
> Date: Thu, 30 Jan 2014 16:16:57 +0000

Lorna, it is with great regret that I have to report that the counselling team will not be in a position to answer your request for information. I am very embarrassed in having to relay this message to you, and recognise in turn the considerably more difficult position it places you in. When your original request came in some months ago, it was passed on to the team manager for action, and perhaps naively I had assumed it had been dealt with, with hindsight I should have checked. Subsequently, with your later communication, both ***** and I have chased the information, but I heard from the team this week that they are at full capacity and are unable to respond. The team manager did say that she had communicated to you that they could not respond, but again, I am not aware that this happened.

I am really very sorry about this. Part of the issue is that the team no longer come under my leadership and have moved to a different part of the council, and I have little influence over work requests. I will however follow this up with the service manager, as it is at the very least discourteous and not helpful to leave you hanging on for so long, and ask him to speak with the team about this lack of delivery. I have spoken with ***** who heads up ***** teams, and asked him if he has any information that he may be able to provide in this

respect that may be of help. I have copied him in to this email and he is happy that you contact him if there is anything that might be of help to you. This is not the way ***** would like to be seen to both respond to and help partners, and it is not typical of the service we offer, but in your case you have been very let down, and I can only once again apologise.

With regret, *****

2.

From: Lorna Gray **Sent:** 27 September 2014 13:34 **To:** *****
Subject: THANKYOU FROM LORNA

Dear *****

Thank you so much for your email and the information which I received through the FoI Act.

I understand from your reply that when the need arises, there is support for schools through the Ed. Psychs. I had experience of this when a child in my school died. I

assume it is up to each school to ask for this help and that some school don't ask?

I wondered if you could tell me whether the decision to no longer supply
*****Schools with a Counselling Service is a financial one, and who made that
decision. I assume that some schools are not using their Pupil Premium this way
despite the money being there.

Having researched charities such as Place2be, which seems to have been successful
but doesn't seem to be used in*****, I assume the schools can opt to use external
charities for school-based counselling?

I would so love to wrap up this chapter, and this is the bit I need to finish it! I did phone
you, but it was Friday and I think I missed you.

Very best wishes,
Lorna Gray

3.

From: *****
To: lornagray Subject: RE: THANKYOU FROM LORNA
Date: Sun, 28 Sep 2014 15:28:19 +0000

Hi Lorna

Thank you for your e-mail. You are correct that for our service to offer support to a
school they need to request this from us- schools have varying degrees of confidence
and experience in supporting pupils who have experienced bereavement and may feel
that they do not require external support.

I am afraid that I don't know why ***** no longer has a school counselling service – I
did not manage this team. Their manager was *****if you did want to contact him
directly.

Schools are able to commission their own counselling support from external providers
and some probably do so – either on an individual school basis or as part of a locality
group of schools.

I hope this helps and wish you all the best with the completion of your thesis.

Regards

School-related Material

SCHOOL POLICY FOR DEATH AND LOSS EDUCATION

Rationale

As a church school, we have a responsibility to promote Christian values and to prepare children for adult life. Within and without the curriculum, we will try to allow opportunities for children to investigate and respond to the fundamental questions of human experience, including questions about life, death and loss. We aim to support the staff and bereaved families in the school community.

Aims

We aim to:-

- explore the fundamental questions of life and death in a religious context.
- encourage children to develop their spirituality, by discussing thoughts and feelings about life, dying, death, loss and mourning in Christian and other religions.
- acknowledge and be aware of the many types of loss that result in bereavement and how children may be affected.
- develop empathy towards, and sensitivity to, the needs and feelings of adults and children who are soon to be bereaved or who have been bereaved.
- accept that children and adults who are bereaved may require additional help, support and understanding while in school.
- provide information for staff to assist them in giving the required support to children and adults.

Guidelines

To achieve these aims, a Support Group will;

- provide an Action Plan for whole-school procedure upon the death of a staff member or child.
- be aware of the available, external support associations and how to access them.

Teachers will:

- ensure that all staff are notified of an imminent or existing bereavement.

- offer the School Support Pack to any staff or parents who are soon to be bereaved or who have suffered a recent loss.

- be aware of the resources provided by the school that can be used in class.

- read the relevant material outlining how children grieve, and how they can be helped to manage their grief.

- be aware of the correct terminology to use when talking to a bereaved child.

- offer children the opportunity to question, reflect on and express their feelings about death and loss in the safe environment of the classroom.

- provide opportunities for a grieving child or adult to discuss their thoughts and feelings with the class teacher, or a nominated teacher from the Support Team.

- ensure that all Support Staff and, if appropriate, Supply Staff are acquainted with the school policy for Death and Loss and know which children or adults are bereaved.

- ensure that the next year's teacher is aware that a child has suffered a loss.

- attend staff- training related to Death and Loss education.

- continue to promote the Pebbles Memorial and if necessary, agree a whole school permanent memorial for deceased pupils or staff.

Lorna Gray 2010 (to be reviewed 2015)

2.

School Memorial Bowl



GLOSSARY

Before Common Era (BCE)

A replacement for the previous abbreviation BC, and meaning a time before the accepted era that Jesus Christ was thought to be living.

Circle Times

A whole school approach in early years and primary settings, which helps develop SEAL, PSHE and improves the emotional wellbeing of children²⁹².

Continuing Professional Development (CPD)

Training for staff that is funded from the school budget, either related to subject leadership, such as Literacy, or whole school issues, such as Child Protection. Sometimes, this is during a Staff Meeting time, led by the Staff; or led by a bought-in advisor, or a paid-for course for teachers.

Green paper²⁹³

Green Papers are Government produced consultation documents which aim to allow people both inside and outside Parliament to give feedback to the department on its policy or legislative proposals.

School-Action Plus

This is a measure following from School Action, whereby SEN children are assessed and helped by agencies external to the school, such as speech therapists, art therapists and educational psychologists.

Special School

A school, which is specially organised to make special educational provision for pupils with special educational needs. Special schools maintained by the LEA comprise of community special schools and foundation special schools, and non maintained special

²⁹² *Jenny Mosley's Quality Circle time for Educational Training and Resources*. [online] Available at <http://www.circle-time.co.uk> (accessed 12.11.15)

²⁹³ UK Parliament [online] Available at <http://www.parliament.uk/site-information/glossary/green-papers/> (accessed 3.11.15)

schools are approved by the Secretary of State under section 342 of the Education Act 1996²⁹⁴.

Statemented Children

A statement of Special Educational Needs is a system which, if agreed, allows children under sixteen years of age additional one to one help, with the first £6000 paid for by the school, as stated in the 2013 -2014 School Funding Reform Arrangements (2012: 17: b)²⁹⁵.

White paper²⁹⁶

White papers are Government produced policy documents that set out proposals for future legislation. White Papers may include a draft version of a planned Bill, providing a basis for further consultation and discussion with interested or affected groups. Final changes can be made before a Bill is formally presented to Parliament.

²⁹⁴ Department for Education and Skills (DfES) *SEN Code of Practice 2001: 581/2000* [online] Available at https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/273877/special_educational_needs_code_of_practice.pdf

²⁹⁵ Department for Education (DfE) (2012) *School Funding Reform: Arrangements for 2013-2014*. [online] Available at https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/244364/school_funding_reform_-_final_2013-14_arrangements.pdf (accessed 3.11.15)

²⁹⁶ UK Parliament [online] Available at <http://www.parliament.uk/site-information/glossary/white-paper/> (accessed 3.11.15)

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