

Bureau d'éducation des patients Patient Education Office



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IMPORTANT: PLEASE READ

Information provided by this booklet is for educational purposes. It is not intended to replace the advice or instruction of a professional healthcare practitioner, or to substitute for medical care. Contact a qualified healthcare practitioner if you have any questions concerning your care.



This material is also available at: MUHC Patient Education Portal muhcpatienteducation.ca

WHEN PARENTS HAVE HEAD INJURIES: Helping Children Cope

Children, like adults, can be deeply affected when a close relative, especially a parent, suffers a head injury, also known as a traumatic brain injury (TBI). It may be especially frightening and difficult for them when one of their family members is in the hospital.

The good news is that there are ways that you can explain a parent's head injury to your children and help them cope. This booklet, put together by your MUHC Traumatic Brain Injury (TBI) Program healthcare team, is meant to help you support your children throughout this challenging time.

The word "parent" means any adult relative in the family who has had a head injury, including moms and dads, grand-moms and grand-dads, aunts and uncles and even older brothers and sisters.

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How might my child react to a parent's head injury?

When faced with stressful situations, children react differently than adults. Depending on his or her age, your child may experience a range of different behaviours and emotions. Fortunately, most children are strong and quick to recover when facing a crisis. They are often able to pull through and bounce back, despite a negative experience.

Infants and toddlers (0-2 years)

 Are often affected by events going on around them, even if they cannot understand them yet.

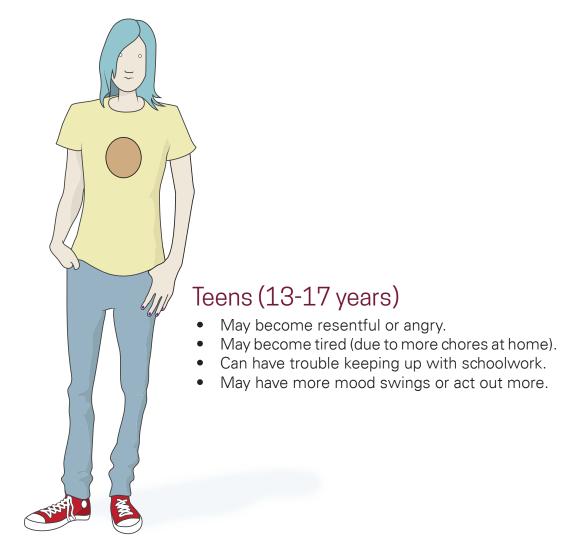
Can have difficulty in settling down (crying), or trouble with sleeping or feeding, when there are changes in their daily routines.

Preschoolers (3-5 years)

- Can become "clingy" or have separation anxiety.
- May have more temper tantrums.
- May lose some of their previously learned skills.
- May develop new fears (for example, of the dark).

School-aged children (6-12 years)

- May be teased about their "weird" parent.
- May become sad and distance themselves from others.
- May fall behind in school work.
- May fear that others in the family will get hurt.



Try to keep up your child's daily routine as much as you possibly can. This is the best way to protect your child from any added stress.

How do I speak with my child about a parent's head injury?

- **Listen.** Listen carefully. What is your child trying to tell you?
- **Be honest and open.** Open communication is key! Talk *with* your children, not just *to* your child.
- Choose your words carefully. When speaking to your child, use
 words that he or she can understand. Offer concrete examples.
 This will help your child make sense of what you are saying. It may
 lower any anxiety he or she might have.
- Manage how much you say. Do not overwhelm your child with too much information. Only give your child as many details as you feel that he or she can comfortably handle. Remember: your child will ask if he or she wants to know more!

Below are a few tips to help you when speaking with your child.



Communicate using simple words and/or picture books. Give dolls to play with to recreate what is happening at home or at the hospital.

Preschoolers (4-5 years)

- Are more confident.
- Are able to play with others.
- Engage in "magical thinking" (e.g., fairies, Santa Claus, talking toys, imaginary friends).

Tips

Choose books with stories that resemble your family's situation.

Use pictures and photographs to teach your child new objects and concepts related to the hospital.

Play with a "doctor's kit" to recreate and help your child understand what is happening.



School-aged children (6-7 years)

- Can follow rules.
- Enjoy having responsibilities.
- May not understand how and why injuries happen.

Base their self-esteem mainly on their parents.

Tips

Use interactive communication (e.g., create a story with your child).

Create a family photo album with your child. Talk about your photographs and family memories.

Watch movies with story lines similar to the situation that is happening to your family.



School-aged children (8-11 years)

- Have a more logical understanding about how and why injuries happen.
- Are less centered on themselves and able to understand others' feelings.
- Can feel for others (or empathize).



Tips

Listen to your child's thoughts and opinions.

Ask questions that go beyond yes and no answers.

Offer real (not magical) explanations.

Explain what will happen, step by step. Include real facts and details on what to expect.

Tweens /teens (12-17 years)

- Are going through the emotional and physical changes of puberty.
- Are seeking out freedom and independence.
- Are very concerned with being accepted by their peers.
- Are developing a greater interest in intimate relationships.



Tips

Be honest and realistic.

Give your child the facts (diagnosis, outlook for recovery, treatments, what to expect). Talk about your child's concerns regularly.

Pay attention to sudden and extreme changes in behaviour.

Speak to your doctor or nurse if you notice more serious changes in mood, eating and sleeping habits, or acting-out.

How do I prepare my child for the hospital visit?

There are a number of ways you can prepare and support your child through a hospital visit to see the parent. Here are a few suggestions:

Give your child a choice. If your child expresses an interest in visiting his or her parent, take it seriously. Be supportive so that your child may feel as comfortable as possible during the visit.

Prepare your child. Tell your child what to expect in advance. A photo of the hospitalized parent can be helpful.



Bring an extra adult. Do not force your child to stay if he or she wishes to leave. That way your child can leave when he or she is ready, even if you need to stay.

Talk after the visit. Your child may experience different emotions during or after the visit. Your child may have questions or concerns about what he or she saw. Watch for any changes in behaviour. Sometimes a child may not react right away.

Avoid a stressful visit. Whenever possible, avoid bringing your child to see the parent while the parent is agitated or confused.

What if my child does not want to visit the hospital?

If your child does not want to visit a parent in the hospital, explore the reasons why. Try to address your child's concerns. (Is your child afraid? Does your child think that he or she is responsible for the parent's head injury? Does your child understand what is happening?)

If your child is not ready for a visit, you may offer alternatives to a visit (e.g., writing a letter or card to the parent, making a picture to hang in the hospital room, helping with a care package).

Did you know that your hospital social worker and other members of your treatment team can help with your child's visit? Ask us if you have questions or concerns. We are here to help.

Where can I find more information?

Websites:

Association Québécoise des Traumatisés Crâniens

Website: www.aqtc.ca

Phone: 514-274-7447 (Montreal); 450-629-9911 (Laval)

Local Community Services Centres (CLSCs)

Website: www.santemontreal.qc.ca

Office des Personnes Handicapées du Québec

Website: www.ophq.gouv.qc.ca

Phone: 1-800-567-1465

Neuro-Patient Resource Centre

Website: www.infoneuro.mcgill.ca

Phone: 514-398-5358

Books for children:

A Pillow for My Mom
By Charissa Squoros (3+ years)

My Parent Has a Brain Injury
By Jo Johnson (6+ years)

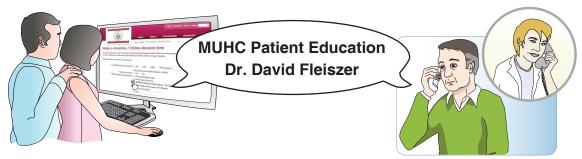
Big Boss Brain: Learning About Traumatic Brain Injuries

By Shannon Maxwell (6+ years)

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