

# Talking to Children About Fatal Overdose Deaths

## For Caregivers

While fatal overdose deaths are increasing across the country and here in Philadelphia, the stigma around substance use can leave many caregivers feeling worried or hesitant to share a loved one's cause of death with a child. We may worry that children are too young to understand, or that this knowledge will negatively impact them.

These feelings are valid and make sense. You may not feel ready to share this information, and that is okay! As you continue to support a grieving child, we hope this handout will be helpful for whenever you are ready to start that conversation.

### SUPPORTING YOURSELF AS A CAREGIVER

If you are also experiencing feelings of grief and loss, remember that you need supports as much as your child(ren). Find someone you can speak to openly and share your worries and concerns. The Philadelphia Department of Public Health provides free grief counseling for bereaved survivors of fatal overdose deaths, and on-going grief peer support groups and workshops. Learn more about PhillyHEALS services, [here](#).

Remember that the feelings you have around this cause of death are likely not the feelings or reactions your child will have. Again, you may not feel ready to have this conversation with a child yet, and that is okay.

### STATISTICS

In 2021, 1,276 people died in Philadelphia, due to a fatal overdose.

Overdoses are the number one cause of accidental death in the United States.

It is estimated that for every death, there are at least 5 grieving survivors (this number is likely higher!) and this often includes grieving children.

### THE BENEFITS OF SHARING A LOVED ONE'S CAUSE OF DEATH

Often for kids, their feelings of grief are centered around the absence of the person they love, and not how they died. But this is still an important piece in understanding why their loved one is no longer here, *especially* when the death was sudden and unexpected.

When kids are unclear about the cause of death, they will typically fill in the blanks and may create an alternate story that is much worse.

Developmentally, kids up until the age of about 12 tend to personalize their experiences. This means that they may blame themselves, believing their behaviors or thoughts caused someone to die. It's important to be clear that the death was not a child's fault and could not have been prevented by a child.

### ADDRESSING SUBSTANCE USE STIGMA

The reality is that stigma around people who use substances does exist, and we cannot always shield children from overhearing harmful or derogatory language. However, we can educate children on stigma in an age-appropriate way, and we can make sure that the first narrative they hear about people who use substances is a kind and understanding one.

Caregivers might share something like, *"Some people are unkind to people who use drugs, and you may hear people say mean, hurtful or untrue things about them. It's important to remember that in our family/home we talk about and treat all people with respect and kindness."*

## TALKING TO CHILDREN ABOUT DEATH

When talking to children about fatal overdose deaths, it's important to first make sure they have an understanding of what death is. For some kids, this may be the first person they know to die.

Avoid euphemisms when explaining death for the first time (i.e. "*They have passed on*", "*We lost your mom*" etc.) and try to use clear and specific language instead.

You can explain to a child, "*We can both blink our eyes and move our bodies in different ways. We are breathing in air, and our hearts are beating. We have thoughts and feelings. This means we are alive. When someone is dead, they cannot move their body. They do not breathe in and out and their heart has stopped beating. They don't have any thoughts and they can't feel anything. Even though we still carry their memories in our hearts and minds, their bodies are dead.*"

Developmentally, children up to the age of 5 or 6 often have difficulty understanding the permanence of death and may ask repetitive questions about where their loved one is. Continue to explain to them that their person has died, and what that means. As they grow and develop, they will begin to understand more, and these questions should stop.

## TALKING ABOUT SUBSTANCE USE AND FATAL OVERDOSES

If your loved one had a history of using substances, you may want to explain what drugs are, and explain that they are used for a variety of things (a child might have a grandparent who takes prescription medications, or may know peers who take ADHD, anti-anxiety or anti-depressant medications.) If a child receives the message that "all drugs are bad", it can lead to confusion or worry when they see other people they love taking a prescribed medication.

You can explain, "*Dugs can be used for a lot of different things. Sometimes doctors will use them to help people who are sick or who are feeling a lot of pain. Vets will use them to help animals too. Drugs from a doctor or hospital can really help someone who needs them.*"

*"Sometimes people take drugs that didn't come from a doctor, or too much of a drug a doctor gave them. Doing this can be unhealthy and people can accidentally really hurt themselves. When a person dies from misusing drugs, this is called a fatal overdose."*

If you feel it is best to be even more brief, you might share something like, "*Your \_\_\_\_\_ died from something called a fatal overdose. That means when someone uses a drug, and it ends up hurting their body and they die.*"

## REMEMBER:

Information can be true and still be age appropriate.

Expect to have more conversations with your child as time goes on and as they get older. You may feel it is best to wait to share more details or explain addiction more thoroughly. **If a child does not have follow-up questions, this is a good indicator that the information they have received is enough for the time being.** Typically, if a child is able to ask a question, they are able to handle the answer.

Sharing with a child, "*I know that this might feel confusing, and I want you to know you can come and talk to me about it, or ask me questions*", will let them know that you are capable of supporting what they're going through.