

# RESPONDING TO TRAUMATIC

## CRISIS INTERVENTION FOLLOWING A MULTIPLE MURDER

by

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On the night of 1st May, 1987, four people were murdered at a small village outside Bergen, Norway. A 20 year old boy shot and killed his mother, father, sister and her fiancé. A six month old baby was spared. The murderer was considered a 'loner'; he was isolated, but known for his hunting and fishing interests. Nobody had ever believed he could do such a thing.

The murder took place in a small community, part of a somewhat larger county. The crime and violence rate is low and the valley is known for its beauty. There is a long hunting tradition in the area, and many youths are trained to handle weapons from an early age.

The event strongly upset the community, which was rapidly invaded by the press. National radio and TV coverage was considerable, and the newspapers gave it front page attention.

The family was well respected in the area, and the mother of the murderer was a teacher at a local school. She had primary responsibility for a 9th grade class who were scheduled to leave school in June. She was well liked and respected both among the students and among her colleagues. The killings came as a shock to the students as well as the teachers. Requests for intervention came from the school and affected family and friends in the area.

### **Crisis intervention**

On the first school day following the killings, the school contacted the child psychiatric unit at Haukeland Hospital and they in turn contacted me on the basis of my experience with crisis and disaster situations. Together with another

psychologist, I met with staff of the school the next day to discuss how to help the adolescents cope with the event. On the first school day

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**When a 20 year old boy suddenly murdered his family, the small rural Norwegian community was deeply shocked, especially the school where the boy's mother had been a teacher. Intervention and bereavement counselling of the school staff appeared to be successful. An interesting finding was the different way in which adolescent girls and boys reacted to the event. Girls reacted more strongly and in a greater variety of ways. Boys used fewer words than girls to describe their reactions, and boys closest to the murdered family used fewest of all. Girls were more ready to talk about the event to parents or close friends.**

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after the event the school had organised a memorial service which all students and teachers attended.

At our first meeting we agreed that our goal was to assist the staff of the school in dealing with the events both inside and outside the classroom. As mental health professionals, we did not see our role as discussing the event with the students directly, but rather to help teachers cope effectively and constructively with this, using their existing knowledge and expertise in dealing with young people. The same afternoon we had a meeting with all the teachers to guide them in how best to address the event in class. We began by praising them for their wise handling of the memorial service, and for their interest in assisting the students to cope with the tragic loss. We also emphasised their ability to handle this event in the classroom.

The teachers themselves were deeply affected by the loss. Several of them had experienced periods of anxiety and fear, as well as grief over the loss of a friend and colleague. Part of this first meeting consisted in helping the teachers

to share feelings and experiences. They talked about their relationship with their murdered colleague, how she was as a person and friend, and they recalled their last meeting with her. They also talked about her son, a former student of the school, now in prison for the brutal killings. The question that soon arose was: Could we have done anything to prevent what happened? These and other themes were ventilated and discussed during the meeting.

When we outlined the reactions they could expect among the students, this triggered further discussions of their own feelings. The teachers had already gathered during the weekend following the event and supported each other. In our meeting with them we used parts of the psychological debriefing process outlined by Mitchell<sup>1</sup> to further foster group solidarity and support. The teachers' own problems of grasping and understanding what had happened were used to motivate them to think about how upsetting it must be for the students.

The main aim of the meeting was to provide teachers with informa-

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# STRESS SITUATIONS IN EUROPE: \_\_\_\_\_

tion, both verbal and written, on how children react to and cope with such dramatic events. We outlined the common symptoms and signs of stress among children and adolescents and suggested helpful measures and recommendations on how they could respond to the event in class. Among the recommendations were:

- Open, honest and direct discussion of the event in the classes.
- Encouraging the students to take part in the funeral.
- Informing the students about normal reactions to such events.
- Giving the students an opportunity to write down their impressions, thoughts and feelings about what had happened.
- Recognising the absence of the murdered teacher at the reception at the end of the school-year.
- Encouraging the teachers to share their own feelings, and not to be afraid of letting their students see that they cared for their colleague.

The teachers were urged to talk about the event in the classroom and to deal with the students' fantasies, anxieties and problems with grasping the event.

## The Funeral

Together with the headmaster and two representatives of the teachers, we planned how the funeral could be handled so that the students had a chance to take part and give tangible expression to their grief. The parents were sent information about the school's plan for handling this, as well as information on normal reactions to bereavement. With the co-operation of the church authorities, students were allowed some private time in the church an hour before the funeral started. This gave them a chance to say farewell to their teacher. Each student put a flower on the coffin. We also discussed how each class could deal with the event after the funeral.

Only a few individual sessions were requested by the students and teachers, including a 9th grader who came upon the scene of violence shortly after the killings, together with one of the two surviving sons in the family. In addition there was frequent telephone contact between the school staff and myself to address different questions that arose in the first weeks following the murder. As part of a small study, to be reported later,

conversations were held with several of the teachers at the school and particularly with those who had responsibility for the three 9th grade classes.

Most of our recommendations were followed, and the school staff have been highly appreciative of the help they received. Although, as in most catastrophic events, we have no way of thoroughly evaluating the intervention, we take the massive positive feedback from the school authorities to be a good indication of its success.

## Families

In addition to the work at the school, a local psychiatrist and I have seen many of the more directly affected families and family members, including remaining sons, other close family and friends. In providing grief counselling, we offered human support and comfort. We also looked back with them in detail over the event, and at their relationship and reactions both to the event and to the people involved. The emphasis in the intervention was on normalisation of reactions, preparing the clients for what to expect, and mobilising their social support resources. Throughout the intervention a major aim was to promote the mourning process and prevent pathological grief. Part of this intervention still continues for some clients. Several of the families needed only a few sessions where the focus was largely on normalising reactions, while others have needed many intensive and long-lasting sessions.

This has been no large-scale intervention using a lot of resources. It has been relatively inexpensive and low-profile, with the emphasis on the school's and the families' own ability to cope with the event. Such intervention does not overtax the resources of the health care system, and is therefore a viable method for providing crisis intervention and consultation in even small, remote communities in Norway. And, perhaps most important, the skills for carrying out such an intervention can easily be acquired by local mental health professionals.

Although this is a limited intervention in scope and time, we firmly believe that such rapid intervention prevents the development of more serious problems, and that it is a cost-effective way of meeting tragedy. As health professionals we would do well, however, to be care-

ful not to interfere with the natural coping resources of the community.

## Reactions in the students: a follow-up after one month

One month following the murders we administered a short questionnaire (four pages) to all the students in the three 9th grade classes. All but one student answered the questionnaire.

The students were asked to relate their first reaction upon learning about the event. Eighty-three per cent of the students described their response in terms which indicated a shock reaction, i.e. they could not understand, they felt disbelief, felt unreal, and said to themselves or others that the news must be wrong.

'I asked who and what, and did not understand. I learned about it through the telephone and that was terrible, it didn't seem real to me. I didn't believe it. I didn't know whether I should laugh or cry. I stood with the receiver in my hand and said: 'No, no, no.' I hardly knew what I was saying. I got a shock. Everything seemed unreal, like things that happen in movies and far away from us. It was terrible.' (Girl)

It is interesting that at the age of 16 most students experienced periods of disbelief about the reality of what had happened, much like adults do. Pynoos and Eth<sup>2</sup> found that this was absent in the population they studied (pre-schoolers, school children and adolescents who had witnessed their parent's homicide). Many of the youths still felt disbelief when answering the questionnaire, but several indicated that the funeral had helped them to progress to a full knowledge of what had happened, as well as triggering an emotional reaction.

Following the murders some of the adolescents also seemed to have lost their illusion of invulnerability. This was most evident in the answers to open-ended questions:

'I could not believe that something like that could happen here in Fusa. I became somewhat afraid.' (Boy)

'I didn't believe it, I thought it was a joke. But then I knew that no one would joke about something like that. The reaction came afterwards. I couldn't sleep during the nights, and I had

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nightmares. Even though I did not know the teacher well (I had her for some hours in the 7th grade), the event was very frightening. I kept thinking "What if this was my family?" (Girl)

The fact that the teacher's death was the result of human violence and was also committed by a member of the family added to the problems of coming to grips with the event and increased the sense of vulnerability. It triggered questions such as: Could this happen in my family? Are we all able to kill? These reactions are similar to those reported in traumatised adult populations<sup>3,4</sup>.

What really surprised us when we analysed the data were the differences between the reaction of girls and boys. Table 1 shows the percentages of boys and girls for some selected reactions. The percentages for those who indicated that they had experienced a reaction 'to some extent' or 'very much' after the event were combined.

### Girls and Boys

Girls indicated stronger reactions than boys on almost all items except 'keeping one's thoughts away from what happened', where boys scored higher than girls. Around 80% of both girls and boys had felt that everything was unreal. Boys' and girls' scores differed significantly on many items, most notably on 'easily crying/want to cry', 'prefer not to be alone', 'sadness', 'lack of energy', and 'jumpy when hearing loud noises'. Girls acknowledged many different reactions, while boys acknowledged only some of them.

When reading the answers to open-ended questions on how they reacted initially and what they considered the worst aspect of what happened, we were also struck by the differences between the boys and the girls. Boys wrote less than girls. The mean number of words the boys used to describe their first reaction was 18.7 compared to 42.7 for girls. For the question about what made the greatest impression on them, the scores for boys and girls were 8.1 and 35.2 respectively. It was also apparent that boys in the classes most affected (the class whose teacher was murdered [9C], and the class where many of the students knew one or more of those killed [9B]) used the fewest words to describe their reactions on both questions.

Almost all girls (96.2%) had a close friend that they could confide

**Table 1. Boys' and girls' reactions to the killings.** Percentages refer to those who indicated that they reacted 'much' or 'very much' to the reaction in question.

Reaction	Boys n=33 %	Girls n=30 %	Chi <sup>2</sup>
Sleep disturbances	3.2	20.7	10.56*
Anxiety for parents	6.1	27.0	5.92
Feeling depressed and sad	21.2	66.7	19.05***
Keeping thoughts away from what happened	34.4	20.0	7.07
Life got new meaning	6.3	31.0	12.22**
Anger towards the murderer	36.3	43.4	.40
Became more jumpy than usual	0.0	40.0	15.91**
A more pessimistic view of the future	3.0	20.0	15.73**
Cried easily/wanted to cry	3.0	50.0	24.21***
Concentration difficulties	9.1	56.7	16.70***
Strong reaction came long afterwards	25.8	66.7	11.80**
Jumpy at loud noises	6.1	26.7	16.75***
Did not want to be alone	6.5	58.6	20.58***
Thoughts about event always present	9.7	46.4	10.21*
Sometimes difficult to stop talking about the event	9.4	53.3	16.11**
Everything seemed unreal	78.2	80.0	6.63
Lack of initiative	9.7	62.0	18.99***
Made inner 'picture' of the event	43.4	69.0	6.10
All in all, how upset were you by this event?	87.5	96.6	6.68

\* p 0.05. \*\* p 0.01. \*\*\* p 0.001.

in, who was of comfort and support, while less than 40 per cent of the boys had such a relationship.

Of the girls, 70 per cent had also talked much or very much with their parents about the event, compared with 34.4% of the boys.

### Discussion

We interpret these results as a confirmation that boys and girls differ in their ability to express feelings, and that this difference is well established before they reach the age of 16. Not only did the sexes differ in their reporting of reactions following the murder of their teacher, but they seemed to differ in their use of other people to confide in.

Children's play activities and play preferences differ at a relatively early age<sup>5</sup>. Girls' play usually occurs in twos or in small, intimate groups, where they typically play with just one or two 'best friends'. This may give girls experience and training in disclosing intimate information and discussing feelings and emotions. Boys' play usually involves games that stress their participation in socially-approved competitive activities. Play activities may thus help girls to be more comfortable in expressing their emotions than boys.

During adolescence, boys and girls are trying out different sex roles. Boys during this period may be more 'men' than ever after, and 'girl-like' behaviour is disapproved of and punished more than reinforced. Girls, on the other hand, can be more emotional and caring, trying out the role more 'typical' for their sex, maybe being more 'emo-

tional' than later in life. Thus our results may also reflect a particular polarity in 'emotionality' at this life stage.

Girls were more able to put their feelings into words, to admit openly how they reacted to the event, and to use their friends and family to talk about what happened. It is interesting to speculate whether the boys' learned, automatic or conscious suppression of reactions will have negative consequences in the long-term. Pennebaker *et al's* research indicates that traumatic events that are not discussed with others are associated with health problems<sup>6,7,8</sup>. Talking about a traumatic event may help to organise and integrate thoughts and meanings, it may help to abreact feelings, and it may trigger comfort and support. It can also help normalise feelings as one finds that others are reacting similarly to oneself.

By the end of the school year the students left for different schools, and both practical and ethical considerations precluded a formal follow-up.

Schools represent continuity for children and adolescents in times of crisis. When a traumatic event directly strikes a school, it is important that the school continues as a supportive and stable part of the students' environment.

It is hoped that distress and long-term adaptation problems were prevented by the way the school handled the situation following this murder, with considerable emphasis on letting the children take part in rituals, and in letting the students

deal with the event through classroom discussions.

To provide adequate crisis intervention we need to know more about differences in reaction between the sexes in order to tailor our intervention to the needs of children and adolescents. One of the questions raised by our research is: Is the value of expressing or suppressing a traumatic event the same for the two sexes? We hope to continue our research in this area, as well as refine our work in crisis intervention. The models we create must be tailored to the culture and tradition of our continent, region and country.

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### TWO POEMS by Alan Harris

#### Continuation

John the Arthritic lumps in on crutches,  
finds, in his path, the inconvenient widower

whose unexpected grief and first public  
showing silences the talk and glasses.

How can he reconcile the need for chair,  
warmth,  
normality, with the pub's decencies; what  
does one say

(coping with giraffe-like tendency to  
sprawl)  
to grief roaring in a sound-proof cage?

Thankfully there are no buns or nuts. The  
locals  
adhere to customary rounds. John's chair  
is sorted out. Collapsed, yet with a dignity  
relieving all embarrassment: "My  
condolences",

he says. And conversation, of a sort,  
resumes.

#### Give Sorrow Words

Shakespeare was very good  
at doing so. 'The grief that does not speak  
whispers the o'erfought heart  
and bids it break.'

If I had such talent  
grief would be an ease.

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INTERNATIONAL CONFERENCE ON GRIEF AND BEREAVEMENT IN CONTEMPORARY SOCIETY. 12th-15th July, 1988.

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