

Conversation guide health professionals and children



This conversation guide is intended for health professionals who encounter children and young people, either together with their parents/other carers or alone. The aim is to make children feel secure, help them understand what is happening and how their parents' mental illness, substance dependency, serious somatic illness or injury affects everyone in the family.

The choice of words and the arena for conversations with children and young people will depend on both age and situation. Irrespective of this, it is important to remember that children and young people change quickly, and that telling them something once is often not enough, and that something that was a good approach before, is not a necessarily a good one now. Children's questions can often arise gradually after the conversation as they gain new experience or when the situation changes.

It is important that information for children and young people is coordinated between parents, and between parents and health professionals.

In the 'Points to consider' section, you will find age-related information and examples.

RECOMMENDATIONS AND EXAMPLES:

1. Prepare yourself

Find out when and where it would best suit the child to have the conversation. Ensure that parents or others close to the child have also prepared themselves in advance. Prepare for a number of short conversations rather than one long conversation. Turn off your mobile. Have colouring books, games, information booklets or children's books readily accessible. You might also offer them something to eat and drink. Be aware that children can perceive their surroundings differently from adults. For example, keys, locked doors and medical equipment can be frightening for children.

2. Adapt the information

Start with what the child knows and has experienced, in addition to what they need to know. Specifically describe the illness and its consequences and treatment and say that the parent is being taken care of and whether visits are possible. Use words that the child will understand. Explain any relevant medical words and expressions. Tell the child that it is completely normal to feel upset, afraid and angry. Stress that the situation may improve, but do not promise more than you can deliver. Make sure that the child understands that the responsibility for helping the parent rests with adults and not with the child. Nevertheless, it is important to show recognition to children for the efforts they make.



- "Clever doctors and nurses are responsible for treating your dad, and they are doing everything they can to make him better."
- "When asked, somebody I know usually says that mum's mood changed after she injured her head in a car accident."
- "When someone dies, everything in their body stops working: their heart stops beating, they stop growing and they cannot think or feel anything."
- "All reactions are normal. There are no answers as to how you should react. The most important thing is to be honest with each other."

3. Be clear

Repeat the things that you want to say several times, preferably in a different way each time. Be honest and sincere, even if it is difficult for both you and the child. Ask what the child is thinking or feeling, and allow space to think about things together. Children are often afraid to open up in case they say something wrong, hurt someone's feelings or are rejected. Be clear towards children that they are not to blame for the illness or the reactions of their parents, and that it is OK to be happy and feel good. Provide support for participation in leisure activities and spending time with friends.

- "Both adults and children often don't say what they think because they believe that it is wrong. This is silly. This is because we can never be entirely sure what others are thinking, and therefore we often have hurt inside us for no reason."
- "I think you look sad."
- "You seem to be going through a bit of a difficult time at the moment. If I ask you whether there is anything wrong, you might answer no because you can't talk about what is troubling you. But you could actually tell me that there is something wrong, but that you can't talk about it right now. That way I would know things weren't as good as they could be for you at the moment. And you would also know that I know. Perhaps we could talk about it some other time."

4. Show sincere interest and consideration

Ask about and recognise the child's thoughts, emotions and resources. Listen and be actively present. Try to make eye contact. Preferably squat down if you are talking to smaller children, so that they feel that you are on the same level and that you wish the child well. Children need to meet adults who show that they care without appearing to be experts on their behalf. Children are often aware of the situation but do not have the words to describe it. Take the fact that it is difficult to talk about difficult subjects seriously. Therefore, be clear that it is natural to be uncertain and afraid.

- "Sometimes parents say and do stupid things. Deep down, they don't want to be like that, but they can't help it because of their illness."
- "I know that when parents are sick, children help a little more at home than other children they know. Is that true for you?"
- "You know what - I have some tricks that I use when I feel upset. What sort of tricks do you use?"

5. Plan the conclusion

It is important to summarise what you have talked about and find out what the child has taken away with them, regardless of their age group. Explain in very specific terms what will happen in the immediate future. Children need to know that they will be taken care of and who will be responsible for them. Children also need to know about the family's situation and who they can talk to.