The Next Einstein

Data mining is the key to preventing the development of prolonged grief disorder (t) - and associated functional impairment that will cost societies billions for years to come - amongst children who are forced to move away from home and placed on an institution or crisis center due to parents who have become sick or died from novel mutations of COVID-19.

This is the case because professionals want live data streaming from the grieving children’s daily lives, enabling the tracking of grief trajectories, and because children need unrestricted access to the digital legacy of their parents, in order to reconnect to them.

The digital urn will facilitate this.

As a thanatechnological artifact the urn is online at all times, connected to servers and the associated app, and will at all times - unless confiscated by professionals or rejected by the child - be in the vicinity of the child as an artifact of stability during the first hard months after the loss.

As a sense-making tool the urn provides the child an opportunity to carry around his parents’ digital ashes, to document his own grieving process and thus to rebond with the deceased.

In simple terms, the urn will always stay physically close to the bereaved child (c). This will most likely induce a sense of felt presence whereby already existing natural processes (d) are reinforced to invoke a stronger interconnection between the child and the deceased (i). Add to this that the child may access the app and go deep into the digital memories of the deceased.

We do not know how the novel Delta mutation will impact hospitalizations in the long run - but there is a chance that a worst case scenario will unfold in the near future, meaning that billions of people will die worldwide. In such a scenario, crisis centers should be activated for homeless children to reside while grieving their parents, older siblings and other family members.

Ideally, we want technology to automatically reduce symptoms of prolonged grief disorder on a large scale (e). Otherwise, we may find ourselves short on staff which will greatly impact the risk of a shadow pandemic of grief. Imagine 25% of all surviving children being diagnosed in the coming years and the longterm negative impact on the workforce. What if 25% translates to 100 million individuals?

Let us hope that such a scenario will not unfold in the near future. But let us not waste time not...
preparing for it.

What if the next Einstein is out there somewhere but will never see the light because of the shadows of the disorder?

**Playing FIFA with Father**

Why will it help the child to have a small plastic urn or mini urn around her neck, watching hours and hours of digital footage from the shared life with her parents, or playing while interacting with the urn as if her mother is there and watching herself reaching out to her mother on the app afterwards?

This is because individuals who are 0-10 years old need special tools for reestablishing a bodily grounded continuing bond with the deceased. This will provide stability, regular routines and predictability in a chaotic life cycle. Most likely, a forcibly placed child will be surrounded by hundreds of other orphans on the crisis center, and the urn provides an opportunity to make this her temporary home with a personal space or digitally shared world with the deceased. In addition, the urn should link up to medical journals about the child, instrumental in designing a holistic strategy for intervention tactics (p).

The virus might have killed most social workers or other professionals, so caregiving (o) on a day to day basis will overshadow specialized grief interventions (n). This is where the digital urn comes in.

All the data about the parents is already out there in the cloud, on the servers (v). It just needs to be catalogized and collected for the child to navigate on the app.

All the technology for live data recording is already there on the phones, tablets or FitBit.

We must prioritize digital recordings that the child has not previously seen or heard (h). A wide variety of apps on the parents' phones make this readily accessible. For example some weeks before the child’s mother became terminally ill, at breakfast, having a fun conversation with her 6 year old daughter. Or when father was sick (s) and his 10 year old son visited him on the hospital and engaged in a game of FIFA.

Well - if you play the conversation or the FIFA game for the child, this will provoke a felt sense of presence, an intimate bonding experience and reactivation of body memories and subconscious interaction patterns. This, in combination with the child’s innate ability to fantasize and imagine alternative worlds, will serve to integrate the deceased into the child’s new life going forward (k).
**Ground Zero: The Home**

A possible scenario is that the parents and the children are forced to leave home in just a few weeks. Once the caretaking role of the parents collapses, if they become very sick or die, the child must be placed with family members or friends, but due to national lockdowns the crisis center could be the only way forward (f).

That means that the home will be completely emptied for people and stay empty perhaps for months. All the possessions of the parents and the children will stay in the home, though, and this represents an excellent opportunity to revisit at a later stage (u).

The app should incorporate this revisit as an important event in the child's (and his sibling's) life, perhaps as a "reward" for some months of productive grieving, that is, when following the guidelines from the app and from professionals at the center (l). Contrary to this, if the child does not cooperate - which is of course absolutely understandable due to extreme conditions (a) - the upcoming diagnosis (six months after the loss) will hang as a dark cloud and alternative approaches could be in order. In any case, the child will miss home and will want to visit the house, so this could provide a motivational strategy actualized by the urn and the app.

If the home is equipped with sensors, it is possible to bridge a live transmission from the (empty) home to the app: This could represent a first step to motivate children who do not take full advantage of the digital urn.

Key to all of this is to be crystal clear about the fact that the child will not go back home to live there (m). Subsequently, the child will move from the crisis center to foster care, an institution or a supervised child village. For young people or adolescents (r), they can look forward to living in an apartment.

Moreover, the revisit may unlock feelings of guilt. However, the relationship between guilt and grief is not clear (g), but the revisit staged as a ritual could improve the child's understanding of the reasons for the death of the parents.

**A Dream Come True**

It is a known fact that most bereaved individuals have dreams about the deceased (j). We want the urn to monitor sleep activity, collect dream content, etc. in order to modify post-dream reactions.

Dreams represent potentially forgotten memories about the deceased, just like we invoke a
subconscious response from displaying previously unknown digital footage on the app. This is to guide post-traumatic growth in a more internalized, controllable and symbolic direction (b) from the perspective of the continuing bond in traumatizing settings.

What if you could envisage a preventive intervention strategy - a symptom reducing context - that didn’t require you to speak one single word to the child?

Especially for preschoolers, but also in general, we want an intuitive and bodily grounded intervention mechanism by which we make maximum use of children’s preferential learning strategies (q).

In general, this process is about the child rediscovering himself, reidentifying himself as an orphan. Times will be challenging, but maladaptive reactions to grief can be reduced if we build on the child’s forces, not his weaknesses. We must be there to pick him up when all hope is lost, but our ambition is to use digital interventions to help the child write his own story about a terrible loss that eventually became a source of strength, optimism and self-realizing.

We do not want his parents to linger on as shadows in his new life - but as light from a new horizon of opportunities. He will no longer need to go back and contemplate his loss, but will want to go back to reenergize his ambitions for the future.

References


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