

Children and Grief

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Grief is a natural response to loss. Children, like adults, grieve when someone close to them dies or they experience other types of loss. Children also may grieve when they lose a friend or a pet, move to a new home or school, or experience sexual abuse. The duration and intensity of grief are unique for each child. With support, children usually have the capacity to integrate grief in their lives if the environment provides acceptance, compassion and safety.

How do children express grief? Factors such as age, personality, developmental stage, and environment can impact how a child experiences losses. Children in mourning can become afraid of school, have learning problems, develop aggressive or antisocial behavior, become overly concerned about their own health (and may develop "symptoms" of an imaginary illness), or withdraw in general. Children may seem to show grief only occasionally and briefly, but in reality a child's grief usually lasts longer than that of an adult.

Mourning in children may need to be repeatedly addressed, as the child gets older. As the surviving child grows, he or she may again think about the loss, especially during important times in his or her life, such as going to camp, graduating from school, getting married, or giving birth to his or her own children. This longer period of grief is due to the fact that a child's ability to experience intense emotions is usually limited.

Infants do not recognize death, but feelings of loss and separation are part of developing an awareness of death. Children who have been separated from their mother may be sluggish, quiet, and unresponsive to a smile or a coo, undergo physical changes (for example, weight loss), be less active, and sleep less.

Children Ages 2 to 3 often confuse death with sleep and may experience anxiety as early as age 3. They may stop talking and appear to feel overall distress.

Children Ages 3 to 6 often see death as a kind of sleep that means the person is alive, but only in a limited way. The child cannot fully separate death from life. Children may think that the person is still living, even though he or she might have been buried. Children of this age may ask questions about the deceased (for example, how does the deceased eat, go to the toilet, breathe, or play?). Young children know that death occurs physically, but think it is temporary, reversible, and is not final. The child's concept of death may involve magical thinking. For example, the child may think that his or her thoughts can cause another person to become sick or die. Grieving children under 5 may have trouble eating, sleeping, and controlling bladder and bowel functions. Children age six and under may ask for details over and over, and may alternate between crying and going out to play as if nothing had happened.

Children Ages 6 to 9 are commonly very curious about death. They may ask questions about what happens to one's body after it dies. Death may be seen as final and frightening, but only for old people and not to themselves. Although

children this age react more maturely than younger children, they may behaviorally regress. Some children can become too attached or clinging. Boys usually become more aggressive and destructive instead of openly showing their sadness. Children may feel neglected and abandoned by both their deceased and surviving parent because the surviving parent is grieving and unable to emotionally support the child.

Children Ages 9 and above experience death as inevitable, and it is not seen as a punishment. When the child reaches 12, death is seen as final and something that happens to everyone. Teenagers often have an adult understanding of death but fewer coping abilities. The teenagers' responses are superimposed onto the emotional roller coaster of adolescence.

What helps the process?

- Ceremonies may help children. He or she should be invited to attend the funeral but do not force him or her to go. He or she may want to visit the grave.
- Some children may want to have his or her own private ceremony for the person. He or she can light a candle, draw a picture, or write a letter to the person.
- Writing in a journal may help.
- Parents, teachers, and caregivers should spend time with the child and give him or her lots of support.

- Be a good listener. Invite the bereaved child to tell stories about the person. Encourage him or her to share favorite memories and pictures of the person.
- Tell children it is okay to be sad or angry. It's okay if he or she cries. Encourage children to talk about feelings.
- When a family is grieving, adults may not be able to give children the support and care needed. Advise them to ask friends, neighbors, and relatives to help out.

When is professional help needed? Children who are having serious problems with grief and loss may show one or more of these signs:

- An extended period of depression in which the child loses interest in daily activities and events
- Inability to sleep, loss of appetite, prolonged fear of being alone
- Acting much younger for an extended period
- Excessively imitating the dead person
- Repeated statements of wanting to join the dead person
- Withdrawal from friends and family
- Sharp drop in school performance or refusal to attend school
- Use of alcohol or other drugs

If these signs persist, professional help may be needed. A child and adolescent psychiatrist or other qualified mental health professional can help the process.