

CHILDREN'S GRIEF RESPONSES

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Reactions and expressions of grief vary at different levels of maturity. It helps to know how children express grief at various ages. As a child matures, he or she will “revisit” a loss, thinking about it with a new level of understanding. Your child may be moody for what seems to be no reason sometimes. It is possible he or she is thinking about and perhaps missing the loved one who is gone.

REGRESSIVE BEHAVIOR

Everyone tends to “regress” to an earlier stage of life, when it felt safer, during stressful times. Adults may curl up in a fetal position. A three year old may return to “terrible two's” behavior. Potty-trained children may need diapers for a short time (see a physician if the problem continues). A preschooler may want a bottle again. A teenager may want to be independent and need increased attention at the same time. Your patience and understanding is important. Allow your child the freedom to regress. Seek professional help from a grief therapist or grief support group for your child if the behavior threatens the child or family's well-being.

ANNIVERSARIES

Anniversaries, such as birthdates, the date of the death, 3, 6, 12 & 24 months following a death, and holidays can be especially difficult. A child or adult may not even be aware that it is the anniversary date, but just feel that something is “off” that day. Being aware of these times and sensitive to your child can help him or her move toward healing.

FEELINGS OF GUILT

Even when there is no connection between a child or teen's actions and the death, feelings of guilt can still be powerful. Thoughts of “If only I had...” or “I wish I had not said....” and similar thoughts can be a part of feelings of guilt. Small children will even think that some minor stress, such a leaving toys in the floor, caused the death. It is important to help young children understand that nothing they said or did caused, or could have prevented, the death. Sometimes choosing to feel guilty or responsible gives children a needed sense of control.

AGES 3-5

As children learn to utilize our symbolic language of words, they can begin to share feelings verbally. They learn what sad, mad, and scared mean. They communicate about the concrete world: what they can see, touch, hear, taste and smell. The future, the idea of “never”, is outside their understanding. They fully expect the return of their loved one.

AGES 6-10

Around the age of six, children begin to understand that the loved one is not returning. This can bring about a multitude of feelings at the time of other significant changes in a child's life, including entering first grade. Children who do not remember their parent may feel an acute sense of loss as they see peers with their parents and hear their family stories.

Elementary age children are interested in biological processes about what happened to their loved one. Questions about disease processes and what happens to the body are of keen interest. When asked questions, it is important to clarify what it is the child wants to know.

Children's worlds are sometimes messy and have a high level of energy. Grief is also messy sometimes. It does not always take a form that makes adults comfortable. Allowing your child to express feelings through creative, even messy, play can be helpful (i.e. finger painting, making mud pies and throwing them, etc). You may want to join in the creative play.

Peer group support is helpful for children of this age.

AGES 11-13

Middle schoolers are faced with a tumultuous time of body changes and increased performance expectations. When a death loss is added to that, it increases their sense of vulnerability and insecurity.

Grades may be affected by the death. Read the CGEA Newsletter "How Grief Affects Thinking & Learning" in the Newsletter Archives. Share this information with your child's teachers and coaches.

Middle school is also a time when abstract thought begins to accelerate. Children may be considering spiritual aspects of life and death, perhaps questioning their beliefs. Be open to talking with them or support them in finding someone who is comfortable discussing these issues.

AGES 14-18

Teens are usually in a place of growing independence. They may feel a need to hide their feelings of grief to show their control of themselves and their environment. Teens often prefer to talk with peers rather than adults when they are grieving.

Teens are more likely to engage in high-risk behavior, especially after a death loss. One young person expressed that her mom was always careful and followed all the safety rules, but died anyway. She asked, "Why should I be careful?"

As with all ages, maintain routines. If one parent died, be clear about who will care for them and what to expect if you die.

CHILDREN'S NORMAL GRIEF RESPONSES

A multitude of emotional, physical, and psychological responses can accompany a loss. As a child or adult experiences these disturbing reactions, behavior may be altered in ways that impact his or her learning style, relationships and behavior.

Emotional Responses

Sadness may be observed in others in a variety of ways. Crying is the most obvious indication that something is disturbing someone. It can be a great relief for the griever to have an opportunity to share tears with another, or even solitude to release the tears. Children report that there will be moments when in a classroom that they will feel overwhelmed with feelings of loss, but they don't want to cry in front of peers. Providing an option for newly bereaved students to go to a quiet spot in the school to release their feelings creates a safer emotional environment. Sadness may manifest in other ways, such as through deep sighing.

Anger - Grief isn't just about crying. Anger is common among those who have lost someone important in their life. They may feel that it just isn't fair, that life is unjust. The loss may be understood as preventable, giving rising to blaming and outrage. There are many possibilities of carelessness, neglect, and deliberate intent to kill that bring tragedy into the lives of children and their families. A child may be angry at the one who died. Displaced anger arises when the energy of anger is directed at someone or something other than the true source of pain. It may be easier for a child to express anger than sadness because there is less perceived emotional vulnerability in being angry versus being sad. Acknowledgement of anger can be an effective way of deescalating the intensity of anger.

Irritable - The bombardment of unpleasant feelings of loss can create a sense of irritation. Feelings of anger over the loss may not come out in explosive ways, but in a general sense of irritation.

Guilt and self-reproach - Because children are ego-centric (the cause and effect world revolves around them), they are likely to feel like they are the cause of the loss regardless of the circumstances around the death. Children may believe that "if only I had"put my toys away, made better grades, helped around the house more, asked her to wait five minutes more, not talked back to my mom, etc, etc, etc. their loved one would still be alive. There are times when these thoughts may be the only sense of power and control the child feels. At other times, these beliefs may be carried into adulthood, contributing to difficulties in later life.

There are times when a child may be responsible for a death, such as the tragic stories of teen drivers who are involved in fatal accidents due to reckless driving, or road conditions for which they were unprepared, accidental shootings, falls, etc. Under these circumstances, it is likely that these feelings may need to be addressed by a grief therapist.

Anxiety, Insecurity and Fear - After the loss of a loved one, a child's world may feel unfamiliar and unsafe. The question, "Who is going to take care of me?" is important to answer. Family circumstances may have changed dramatically. The remaining parent is required to take on the responsibilities left by the other parent. This leaves less time for nurture and care of the children in the family. This further destabilizes grieving children. In these cases, we see either an overly parentified child, one who takes on adult mannerisms and responsibilities, or attention-seeking, often disruptive behavior. Even negative attention is better than no attention at all.

In addition, the loss of a loved one creates high loss awareness. To the child this means that since this happened once, the reality of potential future losses is underscored. If a parent dies, children express concern over what will happen to them if the remaining caregiver dies. There are times when children lose both parents simultaneously, or within a brief period. When a sibling dies, the child may wonder if he or she is next. This further complicates feelings of anxiety.

Abandoned - The absence of a loved one may contribute to a feeling of abandonment regardless of whether the loss appears to the child to be caused by the one lost, is accidental or the result of a lengthy illness. This feeling may attack the child's sense of self-esteem. The cry, "Why did you leave me?" is common in both children and adults.

Worried - Children have concerns about many things. They may worry about other family members who are grieving, finances, and the overall welfare of the family. These worries may be grounded in true difficulties facing the family. Children will often hide their pain from family members to try to "protect" others. One child reported pretending to be asleep when her surviving parent came in to say goodnight so that her tears would not disturb him.

Lonely - When a significant loved one is removed from a child's life, a pervasive sense of loneliness often sets in. The talks, emotional interactions, and activities once shared are also lost, leaving a void in the child's life. Extended family members, aunts, uncles, cousins, grandparents, and friends may help by spending time with the child, but the special role of the one lost is still missing. In today's society, many families are far from extended family, so the needed support is lacking.

Yearning - Longing for and seeking the lost one is common in the first year or two following a loss. Life adjustments are in progress, but aching and longing for the loved one remains. During this time, children may talk with the deceased, have vivid dreams about interacting with the person, or think they see the person in a public place. A scent, song, phrase or other sensory experience may throw the griever into a place of acute yearning and sense of loss.

Helplessness and Powerlessness - The child who cries out, "I WANT MY DADDY BACK!" is faced with the continued absence of Daddy. No matter what she says or does, Daddy does not return. She has no impact on engaging the return of her father. She is powerless to change this critical issue so vital to her emotional and physical health. It is important for the child to find areas that allow her to produce her desired outcome.

Shock - Shock may work as a defense against the loss, shutting down mental and emotional circuits that are overloaded with feelings and loss. This is a time when feelings of numbness and being "out of body" may happen. Shock is more likely to occur following an unexpected death, but happen even when a death is anticipated.

Numbness - Absence of feeling can create a surreal sense for the child. No feelings replace intense feelings about things and people before the loss. This experience does not usually last more than a few months, but can be disconcerting and confusing while it lasts.

Relief - When someone has suffered through a lengthy illness, families may be relieved that the suffering is over for their loved one. This feeling is most common in an anticipated death. A child may be at peace about feeling relief, or may question his loyalty to the loved one and feel guilty for feeling relieved.

Turmoil - A melting pot of emotions can create inner turmoil as children try to sort through the feelings. A child is not likely to tell you, "I'm feeling inner turmoil." She, however, may demonstrate it through chaotic artwork, disorganization, forgetfulness, and disruptive behavior in the classroom.

Physical Sensations

Grief is about more than emotions. Feelings of loss have physical components as well. These feelings may be frightening to a grieving child and his or her family.

After medical causes have been ruled out, the following physical symptoms may be attributed to normal grief reactions:

- Fatigue, Stomach pains, appetite changes, headaches, tightness in throat, or chest, shortness of breath weakness, low energy, dry mouth, sensitive to noise and light

Thought patterns

Denial - "I can't believe it happened" is a defense that allows the unprepared bereaved person time to absorb the reality of the loss. When someone first learns of an unexpected death, the first response is often "NO!". This response changes over time as a person is psychologically able to tolerate the loss without being completely overwhelmed. One should not attempt to convince the bereaved of what they are denying. Allow the natural process of grief to unfold this defensive thought.

Confusion - Short term and long term memory may be impacted for a period. This can be disconcerting to students. They may or may not have done their homework, and cannot remember anything about it. This is frustrating to the teacher, parents, and disheartening to the student.

Thoughts about deceased - Shortly after a death, it is common to think about the deceased almost constantly. It is also common for the bereaved unconsciously to adopt behavior characteristics of the deceased. This will diminish over time. If not, referral to a grief therapist is appropriate.

Sense of presence of the deceased - Children and adults alike may experience a sense that their loved one is watching over them. One child said that his mom was in the walls of his room and would come out at night to visit him. This sense of presence may help the bereaved cope or may be disturbing. When a group of about 15 bereaved children was asked who had seen their loved one since the death, all but one responded that they had.

Difficulty concentrating - In the first few months, most bereaved individuals find that it is difficult to stay focused on a task. Intrusive thoughts about the deceased and moments of overwhelming feelings contribute to these lapses of concentration.

Nightmares - Nightmares are common for children. When safety and security are threatened, thoughts and feelings are likely to be expressed in the form of frightening dreams.

Behaviors

- Eating changes, more or less
- Absentmindedness
- Withdrawal from others
- Avoiding places or people who remind one of deceased
- Searching and crying out for the deceased
- Sighing
- Crying