Understanding and helping the Grieving Child

Safe Crossings - A Program for Grieving Children at Providence Hospice of Seattle

Each of us will face the death of a significant person at some time. We seek other people, books, counseling or other outlets for support during the grief process. But who helps a child deal with a death or an impending death of someone they care about? Naturally children turn to other significant persons – family, friends, neighbors, relatives, and teachers. Although children may understand and respond to terminal illness and to death differently than adults, helping the grieving child is not that different from helping the grieving adult. Your interaction can have an important impact in helping the child deal with a significant person's terminal illness and death in a healthy way. Here are some insights and suggestions

GENERAL FACTORS

Children grieve as part of a family.

When someone is diagnosed with a terminal illness, it affects the way in which the entire family functions. Roles and responsibilities will adjust to accommodate new needs in your family. In addition to grieving the illness of a significant person, your children will also grieve the many small and large changes that follow, such as:

- Changes in daily routine
- Decreased emotional availability of adult caregivers
- Increased individual responsibilities within the family
- Changes in the ability of the sick person to interact as they have in the past

Children re-grieve.

Caregivers often express surprise when their children shift from "being fine" to having difficulties in school or relationships as a result of the illness or death. It may be helpful for you to know that children work through grief in cycles. As your children develop, they will use new skills to gain further understanding and an ability to express how the death impacts their lives. A 7- year old may again grieve a death that occurred at age 3 because they have now reached an age where they understand that the death is final. Also, the child's history of loss and coping strategies as well as the age and developmental stage will affect their re-grieving experience.

Children are repetitive in their grief.

Your children may ask the same questions repeatedly about the details of the illness; this is a normal way children attempt to better understand what is happening in their life. When you answer your child's questions with consistent information, it enables a greater sense of stability and trust, a necessary foundation for them to be able to process their grief in healthy ways.

Young children are concrete thinkers.

You many find yourself wanting to use "softer language" to describe the illness to your children, but we've learned from other families that this can actually lead to more confusion. The best way to communicate with your children about the illness is through concrete, truthful language that utilizes correct medical terms. For example, "We've been told by the doctor that your grandma has a very serious illness called cancer."

Children have "magical thinking."

It is common for all children to think they have the power to make things happen in their lives, which can lead them to feeling responsible for the illness. It is important to convey to your children that thoughts and feelings are not powerful enough to cause sickness, emphasizing that the illness is no one's fault.

Children worry about their own wellbeing.

It is developmentally normal for a child to be most concerned with their own security and well-being. As the needs of an ill person become an increasing focus, children may worry about how they will be taken care of. Many caregivers describe their children becoming clingier, as well as the challenges involved in balancing time between caring for the children and the person suffering from illness.

Children have regressive behaviors.

In the midst of this challenging time, your children may revert to behaviors they have previously outgrown (i.e., bedwetting, thumb sucking, etc). This is a common and normal expression of grief in children of all age groups. Your children may benefit from individual attention in a way they were comforted at an earlier age, for example

Talking to your Children

You may find it challenging to share difficult information with your children if a significant person has been diagnosed with a serious illness or has died.

It is normal to...

- Want to protect your children.
- Worry about how they will be affected by your emotions.
- Be concerned about the effect of the illness on them.
- Be unsure of their ability to understand what's happening.
- Receive mixed advice from others.

However, without good information your children may...

- Intuit that something has changed.
- Interpret body language, stress & tone of voice.
- Become concerned or anxious.
- Overhear confusing conversations
- Imagine a situation to be different than it actually is.

Helpful Suggestions

Anticipate the best time and setting to initiate the conversation with your children. Be aware of any initial fears that may need to be addressed, such as relocation and changes in routine.

Allow some choice and control about when and where your children would like to hear the information, such as at dinner, bedtime or in the car.

Example: "Would you like for us to talk about it now, or would you prefer a different time?"

Inform your children that there is information about their significant person' health that you would like to talk about. This honors your children's importance in the family.

• Example: "The doctor told us some information about your dad's health that feels important for us to share with you."

Tell the truth using simple, correct medical language.

• Example: "You know dad has been in the hospital all week. We've learned from the doctor that he has an illness called glioblastoma, which is a type of brain cancer. Your dad will have to start taking a medicine called chemotherapy, which means he will have to be in the hospital for a while." If the information feels too difficult to share at this time, an example of being truthful would be, "It's too difficult for me to give you all of the information right now."

Expressing your own emotions can give your children the confidence to share their feelings.

• Example: "The reason that I am crying is because this news makes me sad. It's okay for you to have feelings too."

Invite your children to ask questions. Provide honest, simple answers. If you don't know the answer, it is okay to say, "That's a really good question, but I don't know the answer either. Would you like for me to try to find out some more information about that for you?"

Reassure your children that their needs will continue to be met by the people in their lives who care about them. Your children may need specific details, including names of those who will help care for them, and should definitely be told if there will be significant changes in their routine.

• Example: "Grandma will be staying with us and helping while dad is receiving treatment. She will drive you to school and soccer practice."

Causation and contagion. Explain to your children that no one caused the illness, and if it is true, that they cannot catch the illness.

• Examples: "It's no one's fault." "There's nothing anyone did or said that could have caused your mom to get sick." "It is important to know that your mom's illness is not the type that others can catch."

If the ill person is discharged home from a hospital setting and needs increased care, provide information to your children about any equipment and treatment that will be provided in the home. Keeping your children's routines as normal as possible is helpful. Acknowledge the impact and talk openly about any changes which will occur in their routine. If possible, involve your children in simple care giving tasks, such as sharing a comfort item or glass of water.

If your children are school age, it is important to consult with each child in your family about their wishes before sharing any private information with school staff or other families. It is not unusual for a child to desire that no one at school be told about the illness.

Talking to your children about...

Sadness

- Your children need to know why you and others are sad
- They must be told that it is the death that has made you sad. (Without an explanation, they may think your sadness is caused by something that they did or said.
- Start by saying... "A very, very sad thing has happened..." or "Mommy and Daddy are sad because...
- Acknowledging your feelings lets them know that it's okay to be sad
- Tell them, "This is how we feel when someone dies."

What "dead" means

- · Provide children basic information about the human body to assist their understanding of alive versus dead
- Try to use language and ideas appropriate to the age of your child to communicate that a dead person's body
 won't do any of the things it used to do; it won't talk, walk, move, see, or hear, and the person won't be able
 to feel pain, sadness, anger or discomfort.
- Avoid the use of euphemisms such as "passed away," "left us," and "gone on." To a child, this may sound as if the person is taking a trip and can cause him/her to fear that others may not return from trips in the future
- Refer back to these biological explanations when answering your child's questions that arise, such as:
 - When will she come back? (She can't. She didn't leave, her body stopped working.)
 - Why doesn't she move? (She can't move because her body has stopped working.)
 - Why can't they fix him? (Once the body has stopped working, it can't start again.)
 - o Is he sleeping? (No, when we sleep our body is still working, just resting.)
 - o Can they hear me? (No, they could only hear you if their body was working.)

The cause of death

- Old age: "When a person gets very, very, very old, his body wears out and stops working..."
- **Terminal illness**: "Because the disease couldn't be stopped, the person got very, very sick and her body wore out and stopped working..."
- **Accident**: "A terrible thing happened (car crash, etc.), his body was badly hurt and couldn't be fixed. It stopped working..."
- **Stillbirth**: "Sometimes something causes a baby's body to stop working before it is born. We don't know why, but it is nothing anyone did or didn't do..."
- **Suicide Absolute**: (when there is no doubt the person killed themselves): "Sometimes a person's body gets sick and just doesn't work right, and also sometimes a person's mind doesn't work right. When that happens, they can't understand things clearly and they think the only way to solve their problems is to stop living so they kill themselves. However, this is never a solution to problems, the only reason they thought of it is because they weren't able to think clearly."
- Suicide Questionable: "Sometimes people take pills to relax or to sleep. Sometimes they forget how many they have taken and think that they need more. These pills make their body slow down, and too many of them make their body stop working. We don't think the person wanted to die, but that's what happened to their body."
- Homicide: "Your mom's body was hurt very badly by a killer, and she died."

The funeral / memorial service

If a service is planned in honor of your significant person, it is recommended to give your child the choice of attending, after a thorough discussion. Answering questions they may have will help them to feel welcome but some children will still opt not to attend.

• It is important to prepare them in advance by telling them as specifically as possible what will happen.

(Change the sample explanation to fit your plans and special traditions.) __will be taken from _____, where they died, to the funeral home. A funeral home is a special place that takes care of a person's body after the person has died. At the funeral home, _____ will be dressed in clothes that they liked and put into a casket. A casket is a box we use so that when _____ is buried in the ground, no dirt will get on them. Because _____'s body isn't working any more, it won't move or do any of the things it used to do. But it will look like_____. People will come and visit us and say how sorry they are that _____ died. After ___ days, the casket will be closed and taken to church where people will say prayers for _____." Also provide information about who will attend, and what people might say or do at the service Describe the room in the funeral home / chapel: color of carpet, music, flowers, paintings or religious symbols that may be present • Give details of what to expect if viewing the body in an open casket. (This is helpful for young children to grasp that the person is, in fact, dead.) Explain that the person will be lying down, not moving, and what they will be wearing. Explain any change in appearance due to illness, weight loss, or trauma. "It's still Grandpa's body but you know he was sick and lost a lot of weight so he will look thinner."

Burial

"Then we will go to the cemetery, where	will be buried in a hole in the ground in a spot that
picked out. If you like, you can come to the fu	uneral home and visit for a while, even go to the cemetery. You
could bring something to leave with if	you want, that would be nice."

Cremation

"After we leave the funeral home, _____ will be taken to a crematory, a place where their body will be turned into ashes. Then we will take those ashes and (scatter them, keep them in an urn, etc.) Since 's body doesn't work and doesn't feel anything, being cremated doesn't hurt."

Children's common reactions to Death

Grief looks very different for each person. There are many variables which may affect a child's reactions including but not limited to: age, relationship to person, reason for death, past losses, personality, cultural / religious background, etc. Sadness, anger, guilt, and responsibility are strongly felt emotions that often occur after the death of a significant person. Other typical reactions include: denying that the person is dead, not seeming to care at all, or romanticizing the death.

Sadness may look different for each grieving person but is most definitely a component for all. Your child will feel supported by you as you share your own thoughts and feelings of sadness with them. Watch for some or all of the following signs of sadness in your child:

- Confusion about what is happening
- Withdrawal emotionally and/or socially
- Refusing to discuss the death at all
- Wanting to join the deceased (suicidal thoughts)

Anger is common at the time of a death; it can cause the family even more pain. Understanding it and anticipating it helps parents deal with both their own and their child's anger. Children may be angry with...

- Their parents for; not telling them that the person who died was so sick, spending so much time with the sick person, just because they need someone safe with whom to be angry.
- **Themselves** for; not intervening earlier (if caused by a preventable cause), having wished that the person would die, not visiting or helping the dying person, not saying good-bye.
- Others for; not taking care of the person who died, hurting or killing the person.
- The person who died for; not taking care of self or putting self in danger; leaving, dying, abandoning them; causing such family upset; using up the family money before dying; not telling anyone she was sick; completing suicide; not fighting harder to live.
- **Their siblings** for; no apparent reason, grieving differently, not seeming to care, not wanting to talk about the death, seeming more privileged.

Guilt is another common feeling at the time of a death. Guilt may stem from...

- Anger: How can I be angry at the person who died? How can I be alive when they are dead?
- "Should haves": I should have visited before they died. I should have told them that I loved them.
- "Shouldn't haves": I shouldn't have left the hospital. I shouldn't have let them drive the car.

Responsibility. Guilt and a feeling of responsibility go hand-in-hand. It is crucial that you help your child understand the cause of death and watch for signs that they are feeling responsible.

Children may feel responsible for a person's death for many reasons:

- They may have been told something that they misunderstood and took literally ("You're driving me crazy!" or "You'll be the death of me yet!")
- They may connect events that don't belong together ("If I had sent a 'get well' card maybe they wouldn't have died.")
- They indulge in magical thinking ("If I wish hard enough, they'll come back." "I got mad and wished that they would die, and now they did!")
- They may feel that God has punished their bad behavior by causing the person's death or that if they had prayed harder the person wouldn't have died.

Supporting Children as they grow and change

As your children grow and develop, the way they experience, understand and interact with the world around them changes as well. As you have probably experienced already, this journey also requires you to grow in an understanding of their needs. Below is a simple outline of behaviors to anticipate at the different stages of your child's development, as well as suggestions to assist you in supporting your children. Note that many characteristics described are interchangeable between age groups, depending on each child's unique development.

Ages Newborn - 4

Characteristics:

- Senses when the family routine is disrupted and is impacted by feelings such as sadness, anxiety and other feelings.
- Notices the presence of new people and the absence of significant people, including parents being gone at odd times.
- Exhibit altered eating patterns, fussiness or disrupted sleep schedule.

Ways to support:

Watch your child to see if they start acting differently and respond sensitively to their needs.

Ages 2 - 4

Characteristics:

- Because language is not yet mastered, feelings are seen in behavior. Grief responses are intense but brief.
- Are highly aware of other's reactions.
- Often regress in behavior and skills.

Ways to support:

- Provide comfort and reassurance that they will be cared for. If there will be changes in who will provide care, share specific names and any other details.
- Continue to meet basic needs, such as healthy meals and snacks, consistent bedtimes, and other activities related to maintaining a regular schedule.
- Provide honest information.

Ages 4-7

Characteristics:

- May act as though nothing has happened, grieving in spurts
- Are often concerned about how and why their significant person became sick, and ask repetitive questions about this.
- Exhibit regression in behavior and skills

Ways to support:

- · Provide clear, honest information regarding the illness
- Provide consistent answers to questions

Ages 7-11

Characteristics:

- Have morbid curiosity
- Wish to "fit in;" are more socially aware and concerned with how others are responding.
- May desire privacy, and not want information shared, i.e., with friends and teachers

Ways to support:

- Encourage and validate healthy expressions of feelings.
- Engage in physical activities as an outlet for grief expression.
- Be available, but also allow alone time.
- Consult with them about what information they want shared

Ages 12-18

Characteristics:

- Have a more complex understanding of death and loss
- Experience an emotional struggle between independence and dependence
- More likely to talk with someone outside the family
- May demonstrate grief through physical or behavioral expressions

Ways to support:

- Encourage and validate healthy expression of feelings
- Listen, listen, listen with openness
- Recognize and affirm the need for time alone and with peers

For Further Reading

You may borrow some of these resources by contacting Safe Crossings at (206) 320-4000 or look for them at a local public library. Most are also for sale at online retailers such as www.amazon.com, unless otherwise indicated.

Ages 3-6

The Goodbye Book

By Todd Parr

• a moving and accessible story about saying goodbye through the lens of a pet fish who has lost his companion

The Color Monster: A pop-up book of feelings

By Anna Llensa

 By illustrating such common emotions as happiness, sadness, anger, fear, and calm, this book encourages young children to open up with parents, teachers, and daycare providers

Remembering Crystal

By Sebastian Loth

A beautifully written and illustrated book that introduces a big subject to young children

Ages 6-12

Grief Is A Mess

By Jackie Schuld

• An illustrated book for grieving children and adults who need a healthy dose of understanding, comfort, and laughter

My Many Colored Days

By Dr. Seuss Paintings by Steve Johnson and Lou Fancher

• Using a spectrum of vibrant colors and a menagerie of animals, this unique book provides a way for parents to talk with children about their feelings

Ida Always

By Caron Levis and Charles Santoso

• A beautiful, honest portrait of loss and deep friendship told through the story of two iconic polar bears.

Gentle Willow: A Story for Children About Dying

Bby Joyce C. Mills, Ph.D

• A gentle book that addresses changes that often take place when a death occurs

Wherever You Are My Love Will Find You

By Nancy Tillman

A picture book that expresses the depth of love and how it exists each and every day

Anh's Anger

By Gail Silver

• A beautifully illustrated book that gives children and caregivers some concrete tools for dealing with anger and other difficult emotions

Everett Anderson's Goodbye

by Lucille Clifton

• A touching portrait of a little boy who is trying to come to grips with his father's death

The Invisible String

By Patrice Karst

A story explaining that bonds exists no matter the circumstances.

A Terrible Thing Happened

By Margaret Holmes

A simple story that normalizes feelings and provides coping strategies after a traumatic experience occurs

Ages 13-18

Healing Your Grieving Heart for Teens: 100 Practical Ideas

By Alan D. Wolfelt, Ph.D.

• This book provides practical ideas to help support teens through their unique grief experience

Help for the Hard Times: Getting through Loss

By Earl Hipp

 A guidebook that helps teens understand their experience with grief and loss. This book provides healthy coping strategies for teens to work through their grief