

SUPPORTING CHILDREN AND TEENS THROUGH LOSS AND GRIEF

LOSS AND GRIEF

From an early age, children constantly experience loss, whether it is something like misplacing a library book or forgetting a favourite sweater at the park. Each loss has its own dynamics and experiences. Sometimes one loss creates several other losses, such as a move that severs connections to a childhood home, neighbourhood, school, and friends. Parental separations or divorces can also create a loss within the family, and a family member may no longer be a regular fixture. The question should not be how we protect children from loss and grief; rather, it is how we can prepare and support students so they can cope with loss.

Grief does have a purpose; it is a normal and natural response to loss. As one adjusts to a life that is missing something significant, it affects our feelings and thinking. It may even physically affect our bodies. The purpose of grief is to move from the anguish of loss, to process the feelings and thoughts surrounding the loss and to adjust to the changed life the loss has created. It is important to recognize the normalcy as well as the complexity of the grief.

Grief and healing varies for each individual as a loss has personal meaning within the individual's environment and context. In addition, the time it takes to grieve also varies because there is not a 'right' way to grieve. Many people are afraid of the pain of grieving process and may want to avoid it by keeping busy, using substances, denying grief, or avoiding others, etc.

When we have an accident and there is an injury, the physical pain is a message that we need to obtain first aid as soon as possible to help with healing. The grieving process is like the first aid kit for the pain we experience from loss. By disallowing grief, the pain of loss often lies just under the surface of our attention like an old wound which keeps reopening as we go through life's changes.



We are constantly exposed to the idea of death and dying through movies, tv shows, games, and the news. However, the impact of the death of a significant person can trigger a complex grief process, especially for the school aged child, who is also dealing with other developmental tasks.

GRIEF AND DEVELOPMENT

(Adapted from: Lyles, 2010, <http://www.childgrief.org/howtohelp.htm>)

Regressive Behaviour

During stressful times, people tend to "regress" to an earlier stage of life, when it felt safer that being taken care of. For example, adults may curl up in a fetal position; a three year old may show behaviours similar to ones seen at the "terrible two's". 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.

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 the person who died. 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. 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. 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. As with all ages, the maintenance of routines is important.

ANTICIPATORY GRIEF

(Adapted from Williams, 2013 from <http://www.education.com/magazine/article/anticipatory-grief/>)

Anticipatory grief is similar to the normal process of mourning, but it occurs before the actual death (in anticipation of the death).

While mourning is usually discussed in regards to the family and loved ones of a dying person, anticipatory grief can be experienced by the family, loved ones, and the child dying. Anticipatory grief occurs before death, often as a result of a terminal diagnosis or to a life-threatening illness, when death is a possibility. This grief has some common stages among people in the same situation; however, every individual and family is different and experiences grief, death, and illness in their own unique way.

Different Reactions to Anticipatory Grief

Grief and mourning do not have specified volumes or time restrictions. Each individual expresses his/her grief and bereavement in his/her own way and time. Anticipatory grief may include the following reactions, though not exclusively in this order.

Realization: The individual realizes that death is inevitable and there is no expectation for a cure. Sadness, anger, and fear are often associated with this realization.

Concern: In anticipatory grief, often the individual may show concern for the dying person. Family members, friends and others may regret arguments or negative thoughts they had about the dying person. For the dying person, concern may be increased for themselves and their own fears of death, or because of the emotions expressed by loved ones around him/her.

Rehearsing: Individuals may start to rehearse the actual death: For example, it may be thinking about the physical process of death and what may happen after death are concerns in this phase. Funeral arrangements and saying good-bye to loved ones may occur as a result of some anticipatory grieving.

Life after the Death: Family members and others may be imagining what their lives are going to be like without the person who is dying: How they will survive after the death? What changes will the death bring? How will they cope with holidays, anniversaries and other milestones? The person dying may think about life after death. The person dying may also try to imagine what it will be like for his/her loved ones to live without him/her. Children may worry that they, or others, will die from the same illness.

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CHILDREN'S GRIEF RESPONSES

(Adapted from <http://www.childgrief.org/howtohelp.htm>)

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.

It is important to remember that we cannot always assume that the child/youth had a close, loving, positive relationship with the person who died. Some of the responses to the loss may be a myriad of emotions surrounding the *context of the relationship* between the child/youth and the person who died.

Emotional Responses

Sadness: 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 do not want to cry in front of peers. Providing an option for 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 is not just about crying. Anger is common among those who have lost someone important in their life. They may feel that it is not 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 verses being sad. Acknowledgement of anger can be an effective way of de-escalating 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.)”, 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. 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.

Emancipation: There are times when a relationship is so painful that there is relief when the person is gone. There may have been physical, emotional, or sexual abuse. While there may be conflicted emotions following a loss, the sense of freedom from the abuser can be exhilarating for the griever.

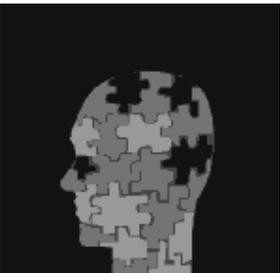
Relief: When someone has suffered through a lengthy illness, families may be relieved that the suffering is over for their loved one. This feeling is most common in an anticipated death. A child may be at peace about feeling relief, or may question his loyalty to the loved one and feel guilty for feeling 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. 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, short of breath, weakness, low energy, dry mouth, sensitive to noise or light.

HOW GRIEF AFFECTS THINKING AND LEARNING



Because grief is about processing, the student’s cognitive functioning is hard at work, but not necessarily on academics. Working through the death and grieving is challenging, and it could last for months, sometimes years. It can reoccur in cycles triggered by incidents or events that are significant to the individual.

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. Children’s minds are flooded with very powerful emotions that they may be experiencing for the first time. These emotions can activate children’s stress response leaving them feeling overwhelmed physically anxious and sick (i.e. headaches, stomach aches).

Confusion: Short term and long term memory may be impacted for a period, which can be disconcerting to students. They may or may not have done their homework and cannot remember anything about it. The student will appear irresponsible and unmotivated, which can be frustrating to teachers and parents.

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. Nightmares can affect sleeping patterns for children and teens which influences the body's natural rhythms. Students may be late to class, appear sleepy and/or lack focus.

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.

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.

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.



HOW TO SUPPORT GRIEVING STUDENTS

(Adapted from Perry, 2013: <http://www.scholastic.com/browse/article.jsp?id=4040>)

Create an emotionally safe classroom: Help other students in the class understand that their classmate is dealing with a loss. Explain that this child may be more tired than usual, more irritable, and less interested in playing.

Make it clear to students that this is a completely out-of-bounds topic for teasing. You can teach the children to respect the grieving process and avoid the emotional tender spots for a child. Also help students to understand that this will be a long process and a major challenge for their classmate.

Create a supporting environment at school: Schools can provide a quiet spot for bereaved students to privately release their feelings if they have a sudden flood of emotions during class. It can be a chair in a counseling office, or an empty hallway, but in a safe, private environment where students know that they will not be questioned or reprimanded for being there during class time. Create an understanding amongst staff at the school regarding these spaces and procedures.

Sometimes, children/youth act as if they have not heard anything you have said, but they have. Remember that in the midst of distressing experiences, children/youth are not very capable of processing complex or abstract information. Be prepared to repeat the same information again and again.

On the other hand, some students may not show any overt signs of grief at all. Younger children will not talk like adults about their feelings and may act them out more through play. It is common for children to bounce back and forth from deep sorrow to happiness, fun and play. Teens may prefer to seek support from peers, or may not even want anyone to know about the death. They may not know how to express feelings or know they

have permission to grieve. They may delay grief to avoid upsetting others. Make a connection and open opportunities for the student to talk, but avoid pushing the student if they are not ready.

Don't be afraid to talk about death or loss: Children/youth do not benefit from "not thinking about it" or "putting it out of their minds." Share important facts about death in general and encourage discussion regarding how children/youth think about it. Use appropriate death terminology such as dead, death, died. Acknowledge that there are different cultural beliefs about death. Answer students' inquiries truthfully without over explaining. Have patience with a child's or teen's need to repeat facts over and over. Help children and clarify their own understanding by listening, being curious, validating and acknowledging their wisdom.

Be aware of your own experiences with death and grieving: Sometimes your own experiences with the grief process may be triggered by a student's situation. Make sure that you have your own supports and your own self-care plan.

If children sense that you are upset by the loss, they may not bring the topic up even when they want to. Be a good role model, showing children how to express emotions in a healthy and non-disruptive fashion. It can be very helpful for children to know that you have been affected by the event and that you are willing to talk about how you feel. Sometimes it may be appropriate to share some of your own feelings and thoughts with a bereaved student. Empathy is validating.

Understand that sometimes the death is not just about the death: Circumstances surrounding the death may be very complex, inducing major changes and/or emotions for the student. Family systems may also be impacted and therefore, students may grieve many losses and changes.

Be aware that students who did not know the person may still experience deep feelings of grief, which may be reactions from earlier losses or fear of their own mortality.

Pictures: Microsoft Clip Art