

## Three Tasks of Grieving Children

**FIRST TASK: To understand that the person is dead. This is a thinking process.**

- 1. Children want to know what happened.** They need honest, direct, factual information in order to understand that the person is dead. Curiosity and speculation about the facts of the death are healthy parts of the process.
- 2. The word “dead” is an abstract concept that takes time to understand, especially for children.** They will use the word “dead” long before they grasp the meaning.
- 3. Impermanence of death.** Children often feel that the person who died is gone temporarily. There can be a lag time between hearing the word “dead” and feeling the feelings about the person being gone. The younger the thinking ability, the longer the lag time.
- 4. The grieving process is cyclical.** Children re-grieve on a daily, monthly and yearly basis as well as throughout their lives. (emotional bedtime, waking in the morning, transitioning, important dates, etc.)
- 5. Children over-generalize the concept first** (if Dad died in the hospital, all people who go to the hospital will die), then accommodate (some people die in hospitals, some people get well). (Piaget)
- 6. Death data bank.** Children’s concepts about death too often come from their death data bank of television, rock music, dead animals along the road, etc. The human experience of death is not easily spoken by adults to children. We must add our contributions as adults to their death data bank with open conversation about death as a part of life.

### WHAT HELPS:

- 1. Circle time, family time, talking time.** Have a telling ritual where family members can tell what has happened, the stories about the death, the memories.
- 2. Talk when they want to,** not talk when they don’t want to.
- 3. Children should be included in the dying process.** Let them make choices about how much to be involved in the illness, death, the viewing and memorial of a loved one.
- 4. Repetition helps.** Answer questions over and over for children. Keep the focus on what the child wants to hear.
- 5. Tell the truth.** Involve them honestly in the process at the hospital, the viewing, the funeral, the cemetery, if they choose. Use correct language such as the word “dead.”
- 6. Children learn from adults.** It is appropriate and helpful for children to witness and be included in an adult's grieving, but not to become a major caregiver for an adult.

# Three Tasks of Grieving Children, cont.

**SECOND TASK: To feel the feelings about the person dying. This is feeling or an affective process.**

- 1. Absence.** Grief becomes a feeling in our bodies of “goneness” of the person who died.
- 2. Grief is a wound to our psyche.** We as human beings have an innate ability to heal our psychic wounds as we do our physical wounds.
- 3. Grief is physical.** Can be regressive: bed wetting, biting, pitching fits, defiance  
Can also be normally expressed: Sweating, crying, sleeplessness, sleeping, eating, not eating  
Grief needs safe physical outlets: Crying, safe yelling, safe hitting, walking, running, cleaning, singing, etc.
- 4. Movement and play** is the language of grief for children. This language is full of symbols and metaphors about their feelings.
- 5. Defenses.** Sharing feelings can be difficult and scary. It's normal to hide our feelings after a death. We use defenses to hide our feelings.

<b><u>Defenses</u></b>	<b><u>Behavior</u></b>	<b><u>Meaning</u></b>
Combative Acting Out	Showing a display of Power	Hiding Powerlessness
Overachieving	Trying to be Good	Feeling Bad or responsible For the Death Hiding Powerlessness
Withdrawal	Quiet, Unproductive	Expressing Powerlessness

- 6. Children often feel responsible** for the death in some way. They may feel guilty for not trying harder to stop a bad thing from happening. This is a child's natural and unrealistic sense of their own power.

## WHAT HELPS?

- 1. Listening, accepting and caring** help children express their grieving feelings.
- 2. Encouraging** safe, physical expression like sports, active play and safe release of anger.
- 3. Reflecting back** to the child what they are doing in language and play, rather than asking questions, giving interpretations or advice.
- 4. Lower expectations.** Grief takes tremendous physical and emotional energy. It will take time to return to normal standards of performance.
- 5. About a child's guilt,** reassure them of the facts that show they could not have prevented the death. Then if they still insist, listen patiently and love them.
- 6. Refer to therapy** if the child's grief behavior is creating more negative events which will further drain his/her coping abilities. Management first, support later.

# Three Tasks of Grieving Children, cont.

**THIRD TASK: To go on living and loving after the person has died. This is a faith process.**

## 1. Different ways of coming to terms with the death:

- For children/adults “it never happened.” The person who died is still “alive” for the one who grieves.
- Children/adults try to “get over it” (the death) by using philosophical, religious or rational techniques.
- Children/adults try to “fill the hole” that is left by the death of someone close with other activities, and/or relationships.
- Children/adults learn over time to “live with it.” The person who died is still a part of their lives in memories. The death is a part of who they are as they go on living.

**2. When we begin to heal**, we move from the “why did it happen” question to the “what can I do now” question, to the “how am I going to do it” question.

**3. Sometimes, someone who is grieving truly enjoys life and then feels guilty and disloyal to the dead one.**

Encourage children and adults to take “time out” from grief. This revives energy for the other times when they are consumed with hard feelings.

## WHAT HELPS?

**1. Believe** in the return to wellness for a child and family even when they cannot.

**2. Celebrate** the steps they take towards healing.

**3. Be aware** of our own grief as helpers and our own need for support.

**4. Allow for “time out” from grief.**

For more information, please contact St Louis Children’s Hospital Bereavement Coordinator, Chaplain Michael Fogas, BCC/314 454 2005 /Michael.fogas@bjc.org