

GRIEF BY AGES & STAGES

SUPPORT CHILDREN & TEENS NEED WHEN FACING GRIEF & LOSS

(BEFORE & AFTER DEATH):

- A sense of safety
- Constant love, comfort & care
- Reassurance that the child will still be cared for with guidance/support
- Routines maintain regular schedules, particularly around eating & sleeping
- Respect for their own coping style & their time required to process grief
- Inclusion in ceremonies & rituals provide opportunities to make-meaning/learn/grow/grieve
- Acknowledgement of their grief

GRIEF REACTIONS FOR CHILDREN & TEENS DEPEND ON:

- The nature of the child's relationship with the person
- The child's age, personality & developmental level
- The support and good communication from adults/peers/school
- Inclusion in funeral, tangi & rituals: opportunities to talk and make-meaning/learn/grow/grieve
- Adults seeking their own support

If concerning symptoms continue beyond 3-6 months contact a professional.

SOME 'NORMAL' WAYS CHILDREN & TEENS MAY SHOW GRIEF:

EMOTIONS

Anxiety: particularly separation anxiety

Fear

Sadne

Anger

Guilt

Gunt

Relief

oneliness

PHYSICAL SENSATIONS

Hollowness/aches in stomach
Tightness in throat/chest
Nausea
Oversensitivity to noise
Feeling short of breath
Weakness of muscles
Lack of Energy
Sense of depersonalisation

Headaches

COGNITIONS

Disbelief
Confusion
Preoccupation
Sense of presence
Making up things that aren't 'real'
Poor self esteem
Increased questioning
Lack of concentration

BEHAVIOURS

Defiance/Acting out
Regression
Trying to please
Sleeping/eating disturbance
Absentminded behaviour/Restlessness
Social withdrawal/loss of
interest/detachment
Dreams of deceased
Protecting others in family from pain
Avoiding reminders of loss
Searching behaviour, calling out
Sighing/crying



INDICATIONS FOR PROFESSIONAL HELP

- Becomes withdrawn, stops socialising with others
- Changes in eating/sleeping
- Continually shares no thoughts/feelings around loss
- Becomes angry and has angry outbursts
- Has not been told about the loss or had a difficult relationship with the deceased
- Threatens to hurt others/themselves or becomes increasingly depressed/anxious
- Becomes involved with risk taking behaviour e.g. drugs, alcohol, fighting, promiscuity, vandalism
- Declining at school (poor grades, inability to concentrate, inappropriate behaviour, head or stomach aches)
- Exhibits sudden change of behaviours/personality

AGES & STAGES & GRIEF

0-24 months The concept of death and separation are linked, it as if a person is no longer visible then they don't exist.

Before Death:

- child may become clingy and show separation anxiety and become emotionally distressed if the sick person has to spend time in hospital/hospice
- use basic language to explain the situation e.g. "_____ is sick"
- the child needs to be involved in knowing what is going to happen
- reassure the child that they will continue to be loved/cared-for

Grief Reactions Include:

- irritability/fretfulness
- toileting difficulties
- despairing
- relationship difficulties
- constant searching/longing, may try to find someone to replace deceased person

How to Help:

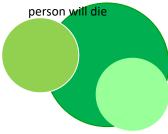
- explain clearly that the dead person is not coming back
- Use concrete explanations about lifecycles (human, animals, plants) illustrated through play, storytelling or art
- hold the child often- touch & soft talking provide comfort
- offer the child clothing/personal possessions belonging to the person who has died

2-5 years Thinking can be "magical", there is an understanding of death but not necessarily as permanent, children may expect the return of their deceased loved one. Children of this age group can imagine guilt, believing in some way they have caused the death/illness, for example "if I think it, it will happen, so I am to blame for it." Due to this type of thinking in this age group it is important to use clear language "dead" and "died" instead of "gone to sleep".

Before Death:

- child may experience distress around changes
- will think changes are caused by them and their relationships
- cannot anticipate death
- require constant explanations of illness
- Need to be told that the

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Grief Reactions Include:

- Feelings of guilt/self-blame
- More distressed after death as they cannot anticipate it
- cannot tolerate others strong emotions
- expressions of sad/angry feelings with intermittent intensity as they cannot hold strong emotions for a long time
- exaggerated reactions to minor injuries
- fixation on dead person

How to Help:

- children cannot reverse their thinking, so won't understand logical explanations try to reinforce reality through play
- children assume that adult know what they think, so ask them questions around their thoughts/feelings
- Try to limit displaying big emotions, explain what you feel & why
- involve the child in aspects of death/dying for short periods
- ensure child has opportunities to engage in regular activities



6-12 years Children at this age are shifting to concrete thinking and begin to understand death is forever.

The younger side of this spectrum may still engage in magical thinking, overwhelming feelings as well as peer pressure to have an "intact family". Towards the older age of this spectrum children tend to be more engaged with outside world, can use reality/logic, can test fears, and begin to be aware (perhaps interested in) their own mortality.

Before Death (younger):

- need to plan for death to provide less trauma
- need to plan for separation (scheduled visits to sick loved one)
- feel rejected if excluded
- require consistency
- need permission to ask questions

Before Death (older):

- can be mistrustful/jump-toconclusions if not kept informed
- value being included in talks with professionals
- want to talk about illness/treatment
- some ability to anticipate death/grief
- active role in all aspects (information, visits, rituals etc)

Grief Reactions Include (younger):

- may talk about wanting to die to be with loved one
- anxiety around well family members
- nightmares
- conflicts with peers/siblings
- concerns about loss of "normal family"
- intense feelings and fears

Grief Reactions Include (older):

- desire to cover up feeling to "be brave"
- fear of surviving family members death
- school performance decline
- concerned about own/others mortality
- dreams of dead person
- interest in activities dead person enjoyed

How to Help (younger):

- help them to accept reality & not take responsibility for death
- encourage expression of feelings (model emotions)
- be prepared for blunt questions
- notify school bullying can occur with changed social structures
- prepare child for questions they may receive at school
- be supportive of episodic grief
- provide physical touch hug, kiss, pat on the back/head
 How to Help (older):
- important for child not to misunderstand family roles
- model/teach mourning
- encourage engagement in activities
- encourage child to chose mementos of their loved one
- if they rebel encourage them to rebel at home & not at school

13-18 years: Adolescents tend to have an adult-like understanding of the permanence and consequences of death. they may understand the impact of death but choose to avoid/deny it. Their thinking tends to be less optimistic than younger years with a wider range of emotional expression.

Before Death (younger):

- denial of information, refusal to being involved (parents need to facilitate discussions)
- can divert anxiety about illness onto other family conflicts
- can become explosive, oppositional, argumentative and demanding
- intolerance to extra demands (i.e. increased chores)
- some anticipatory grief however needs time to plan for grief

Before Death (older):

anticipatory mourning

Grief Reactions Include (younger):

- avoidant about experiencing grief
- more upset by other difficulties in life
- identification with dead person
- dreams about dead person
- sense of indifference
- exploration of dependence vs independence

Grief Reactions Include (older):

- reactions more like adults (persistent & prolonged)
- concentration and functioning affected by grief
- seek support through peer relationships

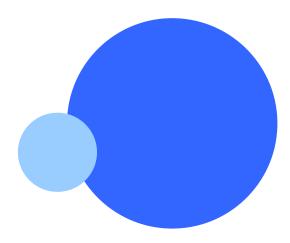
How to Help (younger):

- normalise/recognise any expressions of grief (no matter how short)
- provide opportunities for grief/remembrance
- provide firm limit setting whilst promoting independence
- support participation in activities
- identify positive outcomes of grief and talk about it (i.e. self-growth)
- encourage physical activity as outlet for energy

How to Help (older):

- support maintaining peer relationships
- provide active role in funeral

- grasp the seriousness of disease (important to inform them as early as possible in diagnosis)
- understanding of impact of death on their life
- discuss ways they can be helpful & actively participate
- if showing signs of "acting out behaviours" consider counselling/therapy
- need warning to prepare for funeral/farewell
- identity crisis/ question meaning of life
- assume parental role
- "acting out s & risk taking behaviours"
- communicate with school to encourage peer support
- encourage expression of emotions
- normalise grief
- discuss future
- support independence
- identify need for legacy making
- offer peer/individual counselling
- encourage physical activity as outlet for energy



The Te Omanga Hospice Family Support team provides support for our patients, their children, family and whānau. This includes art and music therapy and counselling. For more information contact: serena.stace@teomanga.org.nz.

