

## Helping Children Cope with the Death of a Loved One

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The death of a loved one is a time of powerful emotional upheaval. Infants, children, adolescents, and parents all sense that power and respond in different, highly personal ways.

Successful grieving after the untimely death of a loved one is an extremely difficult task. There is no one right way to grieve. Grief is a process, and not an event. How, and how long, children grieve may be entirely different than how their parents grieve; parents must take care not to impose their own grieving timeline and expressions onto their children.

A child's understanding of death and expressions of grief are influenced by her developmental level, her experiences with death, her relationship to the deceased, and by the family's cultural and religious beliefs. Chronologic age alone is not a reliable indicator of how a child will deal with the death of a loved one.

But it is the reactions of the surviving family members that are the most important factors determining how children cope with death. How parents and caregivers themselves grieve, and how they understand and guide a child's grieving process, plays the largest role in a child's successful grieving. Understanding how children conceptualize death within the context of their developmental level is crucial.

### Children Younger Than 2 Years:

Very young children are in the sensorimotor stage, using their senses and developing motor skills to learn about the world. They express feelings primarily through their behavior. Although children this young do not understand death, they can sense both separation and the emotions of those around them who are experiencing loss. In response, children may withdraw, decreasing their activity, responsiveness, or appetite, or may become irritable.

In the case of loss of a parent, very young children will immediately sense something amiss. The sudden absence of a parent causes a clear biological reaction. This can be quickly remedied if the other parent, or another caregiver, assumes primary responsibility for the young child's care. Passing an infant or toddler from caregiver to caregiver, however, may cause anxiety, irritability, or even withdrawal, and may lead to long term attachment disorders.

Toddlers, sensing the anxiety and sadness in their environment after a death, will require frequent, large doses of loving care: holding, cuddling, and stroking. Explanations of death are meaningless. What one does is far more important than what one says to a child this young.

### Children Ages 2 To 6 Years:

During this stage of childhood, children's cognitive understanding of death evolves, but they do not yet have the capability to think logically. Initially, children use the word "dead" to mean "not awake" or "not around". They often confuse death with sleep, or with being away, and believe that death is temporary. Viewed through their limited conception of time and death, bereaved children may expect the deceased to be alive again soon. They may even wonder in what activities the dead can still engage (Can Rover still eat?),

Therefore, it's best to explain death in physical, concrete terms; for example, "His heart stopped beating and no one can make it start again. We won't be seeing him move or talk anymore." For children raised in traditions that believe in an afterlife, concepts such as heaven may be difficult for them to grasp. They will see a discrepancy between burial of the body and the description of "going home", or

“going to heaven”. While young children probably cannot grasp this idea, parents might address this distinction as “the part that we loved, the part that smiled, laughed, and loved us, is the part that has gone to heaven.”

Children at this stage sense the sorrow of others and respond by mimicking or crying or being consoling. Because children in this stage lack full understanding of what can cause death, and that death is irreversible, they may use magical thinking or ask specific questions for which there may be no real answer.

Magical thinking, the belief that thoughts can cause actions, may lead to guilt and fear. The child may believe that Rover is dead because he was mad at the dog earlier for eating his crayons. If the child appears to be wondering about what caused the death and his potential role in it, it is important to provide reassurance with simple, straightforward explanations directed at correcting misconceptions.

Children 2 to 6 years will also have a great need for physical nurturing after a death in the family. If it is a parent who has died, the other parent or another caregiver (a grandparent, for instance) must quickly assume primary care, and give the child the security of knowing who will care for them.

Children this age are learning to express themselves verbally, but are most effective in expressing themselves through play. Allow children to play act out traumatic events with their toys or dolls or stuffed animals – by admonishing such play acting, you will stifle their grief, and it will likely eventually find other, less productive or more harmful outlets.

Children 4 to 6 years of age might even ask specific, even painful and repeated questions that stem from their immense curiosity about death. These questions are part of the struggle for consistency and understanding of the permanence of death. As painful as it might be to receive these questions, answer them patiently, and never make the child feel as if she cannot ask them.

Invite children at this stage to be present at the funeral, memorial service, or scattering of ashes. Although they should be encouraged to attend, children should never be forced. Likewise, they should not be required to view, kiss, or touch the deceased, although it is perfectly all right if they wish to do so. It is important for children to say goodbye in their own way.

Children Older Than 6 Years:

Much of what was discussed in the section on 2 to 6 year olds applies to older children, as well. However, by this age, children recognize that death is final. Possibly because of this realization, grieving children can have heightened behavioral reactions. Children may develop school phobias, hypochondriacal concerns, aggressive and destructive behaviors, withdrawal, or separation anxiety. Early recognition, followed by the seeking of professional mental health counseling, is crucial to successful grieving and to the child's long-term mental health.

Children 6 years and older will have developed logical thinking about the physical world, and become more verbally communicative about their thoughts. Some children even go through phases of almost morbid fascination with dead things, the symbols of death (for instance, skeletons or graveyards), or the biological aspects of death.

Throughout this stage, children move from thinking that death only happens to “others” (especially older people) to an awareness that they, too, will someday die. By the age of 9 to 10 years, children's use of the word “dead” approximates adult understanding of the term as final, and universal. By adolescence, the ability to think abstractly allows them to question the existential implications of Death: the grieving teen often asks the question, “Why not me?” or may attempt to confront death as if it were an adversary. As such, high-risk behaviors that “challenge mortality” may occur.