



WHAT IS GRIEF?

Grief is a normal and natural reaction to death. Love and grief are inseparable – they are yin and yang. So when we lose those we love we experience grief. It is a normal response and it has been a part of the human condition since the beginning of time. You can see grief in every culture. Some cultures embrace this experience more directly than others. Some, unfortunately, sweep this experience under the rug or pathologize it as an abnormality.

Grief is not just an emotional reaction, though. Grief is an emotional, physical, spiritual, and intellectual experience.

Emotional – It is not uncommon to feel anger, numbness, relief, uncertainty, anxiety, fear, depression, apathy, sadness, and joy as a part of the grief experience. All emotions are valid and they vary based on all sorts of circumstances. See some of the variables that influence the grief experience below.

Intellectual – We experience a range of thoughts about grief, which can include blame, the idea that we could have prevented the death, we often try to “wrap our heads” around the fact that someone is gone, we frequently try to make sense of things, we may try to make meaning, and we may think that the death and our consequential circumstances are unjust. This component also forces us to reimagine our lives and change our expectations, hopes, and plans.

Spiritual – As humans, we try to understand “how” and “why” bad things happen. Often times, this is where we do our meaning making. Religion may play a role, but our understanding of our lives and the meaning of life itself is often at play here. “He was such a good person. How could this of happened to him?” or “why didn’t she ask for help?” etc.

Physical – Grief is exhausting! For adults, fatigue and feeling like you’re in a fog is not uncommon. For kids, they often experience bellyaches and headaches. Without a safe environment to express their grief, kids often bottle it all up which leads to behavioral expressions that may get a child into trouble. It is not uncommon for grief to cause people to overeat or under eat. It is also not uncommon for a grieving body to be susceptible to illness, as the immune system is often weak during intense grief.

Here are a few variables that will influence grief:

Culture
Support system
The nature of the relationship
Religion
How the person died

Comments that people make
Stigmas
...And many external variables that are outside of the grieving person’s control.

GRIEF IN DEVELOPMENTAL STAGES

AGES	LEVEL OF UNDERSTANDING	REACTIVE BEHAVIORS	NEEDS
2 AND UNDER	<ul style="list-style-type: none"> • Can sense that something is different at home. • Does not yet understand what death is. • Probably won't remember the person who died. 	<ul style="list-style-type: none"> • Fussiness • Clinging to adults • Regressive behavior 	<ul style="list-style-type: none"> • Non-verbal care (such as hugs and rocking) • Stable routine
2 – 5 (GREEN)	<ul style="list-style-type: none"> • Sees death as temporary – believes person will return. Don't fear death, but fear separation. • Usually can't comprehend the concepts of heaven, afterlife or soul. • Feels sadness, but often periods of grief are interspersed with normal playing behavior. • Substitutes attachment from the deceased person to another person. • May not remember the person who died. 	<ul style="list-style-type: none"> • Regression (bed wetting, thumb sucking) • Fear of separation • Nightmares • Aggression • Non-compliance 	<ul style="list-style-type: none"> • Stable daily routine • Structure • Honesty, use the words "dead" and "died" • Answer to questions honestly but simply • Love • Reassurance • To be heard, so listen
6 – 9 (ORANGE)	<ul style="list-style-type: none"> • Begins to understand that death is permanent. • Develops fear of death and of others dying. • May feel guilt and blame self for death; see it as punishment for bad behavior. • Magical thinking; may see self as cause of death. 	<ul style="list-style-type: none"> • Grief ebbs and flows • Compulsive care giving • Aggression • Possessiveness (e.g. of remaining parent) • Regression • Somatic complaints • School phobia • Exaggerated fears 	<ul style="list-style-type: none"> • Ways to express their feelings (art, writing, etc.) • Concrete answers to questions • Validation of feelings • Love • Reassurance that they are not to blame • To be heard, so listen
10 – 12 (BLUE)	<ul style="list-style-type: none"> • Has a realistic view of death and its permanence. • Asks specific questions about death, the body, etc. Interested in the gory details. • Concerned with practical questions. (Who will take care of me? How will my family's life style change? Etc.) • Identifies strongly with deceased. 	<ul style="list-style-type: none"> • Upset by the disruption in their lives • Blame others for the loss • Separation anxiety, some denial and/or guilt • Difficulty concentrating • Decline in school performance • Want to be "fixers" 	<ul style="list-style-type: none"> • Permission and outlets to express feelings, including anger, relief, sadness, etc. • Validation of feelings • Offers of support and assistance and to know who can help them to be heard, so listen, listen, and listen
13 – 18 (PURPLE/TEENS)	<ul style="list-style-type: none"> • Recognizes that life is fragile; death is inevitable and irreversible. • May worry about own death. • Often tries not to think or talk about the death. • Sometimes hides feelings so as not to look different from peers. • Ponders and questions religious and philosophical beliefs. • Often angry at the deceased or at people involved in the death (e.g. doctors). • Fears the future. 	<ul style="list-style-type: none"> • Aggression, anger • Possessiveness • Somatic complaints • Phobias • Increased risk taking • Promiscuity • Increased drug/alcohol use • Defiance • Delinquent acts • Suicidal ideation 	<ul style="list-style-type: none"> • A trusted adult or peer for support • Parental openness in sharing feelings • Help in learning to manage feelings • Continued emotional support • Presence of parents • Encouragement of efforts toward independence



WHAT IS GRIEF?

What we tell a child before and after a death occurs relies on the same variables:

Honesty – Admit what you don't know and always tell the truth. Details are not always important, but lies never help and the truth always catches up.

Facts – Children need the truth in order to construct their narrative and process this life event. Without facts, a child is forced to re-grieve at a later date as they process new information and they then have to re-examine their grief and makes sense of the death. Providing facts is one critical way that adults can be helpful to a child. Without facts, a child will often imagine something much more complicated and scary than what actually happened.

Inclusion – Children should be included. Period. If a child does not want to participate in a ritual or in saying goodbye that is a perfectly fine choice, but the choice should be entirely theirs and they should be given unbiased facts in order to make their decision. A child who is left out of a funeral will carry that with them for the rest of their life.

Preparation – In order for a child to understand what is happening or what they will see, they need someone to honestly explain what to expect and what they will likely experience. With facts and preparation, most children can appropriately handle an end-of-life experience or funeral.

Invitation – Children need to know that it is okay and safe to share their thoughts and feelings without judgment or punishment. Their thoughts and feelings need to be honored and respected even if they diverge from the truth or your experience. By expressing their perspective, they are doing their grief work and processing. Grief is an organic process, so for a child who demonstrates magical thinking and blames himself for the death, know that with support those thoughts will evolve. It is not uncommon or bad. Rather, it is an opportunity for a child to process why they are arriving at such conclusions and when given the information they need they will begin to think and feel their way towards a more realistic conclusion.