

What to Expect: Developmental Responses to Grief A Primer for Parents & Caregivers

Developmental Perspectives

Infants (0-2 years): Infants do not cognitively understand death, but can sense uneasiness in a grieving household. And, in the event a caregiver dies, the infant may exhibit repeated protests (crying). If the caregiver does not return, the infant may develop despair, followed by detachment. Infants may feel intense abandonment and exhibit intense separation anxiety. A detached child does not readily form healthy new attachments to new caregivers. Grief may also be exhibited as physical manifestations and behavioral and developmental regression may occur. Infants may model the distress exhibited by their caregiver.

Suggestions: Providing abundant love and a warm, caring environment are essential. To provide stability, keep routines and schedules as normal as possible. Avoid separation from surviving significant others as much as possible.

Preschool (2-6 years): Toddlers may view death as temporary and reversible and they interpret the world in concrete and literal manner. They may express grief by regressing to thumb-sucking and toileting accidents, fear of the dark and may have nightmares or trouble sleeping. This is often due to their limited cognitive understanding at this age. Grief may be expressed via irritability, stomachaches and repetitious questions. They may experience intense separation anxiety and express feelings and fears through their play. Hostile play is sometimes observed as toddlers may have trouble verbalizing their feelings. Asking for a replacement parent is also typical. As children tend to sense grief in caregivers, a surviving parent hiding their grief may make toddlers feel unsafe. Be clear with toddlers that their loved one 'died' as euphemisms such as they are 'sleeping' could make the child fearful of going to bed.

Suggestions: Toddlers who lose a parent need consistent caregiving. It is important to be honest with the toddler if they see a surviving parent tearful. It is important to ensure toddlers that they did not cause the death or grief as they often feel it is their fault or that they behaved badly, which caused their parent to leave them. Toddlers might also need reassurance that others in their lives will not die and will be there to take care

of them. Meet toddlers at their cognitive level by encouraging expression of emotions through play, by drawing pictures of their loved one, making up stories about the person or enjoying things they used to do together. Help toddlers feel safe to talk, make it acceptable for them to cry or be angry, and continue to talk about their loved one and share favorite memories. Provide straightforward explanations to toddlers and answer questions repeatedly as needed as toddlers may be seeking consistency. Remind them that their loved one will not return and correct misperceptions. Bibliotherapy can be helpful. When culturally appropriate, share spiritual or religious comforts to instill hope. Go back to structure and routine as soon as plausible to provide safety and security. Physical comfort, hugs, and touch may be calming to these young children.

School-Aged Children (7-11 years): a school age child may demonstrate appropriate emotions when grieving such as anxiety, depression or anger and often experiences physical symptoms such as stomachaches. Separation anxiety may be heightened and children at this age may think they caused the death or were somehow responsible for it. Or, they may exhibit anger toward the deceased or towards those they perceive should have been able to save the deceased. A child of this age may maintain a relationship with the deceased in a fantasized way or may find a place for their deceased parent such as heaven whereupon their loved one can watch over them. Children at this age may retreat socially and academically, losing interest in friends or scholastic activities. Some may disguise their pain with a facade of coping, while other children may act out with angry outbursts, irritability, sleeping and eating problems, fear of their own frailty, hypochondria, shock, and persistent questioning about the death. School-aged children may have fears about death and be concerned about the safety of other loved ones.

Suggestions: The use of books and age appropriate literature is an excellent intervention at this age as characters in stories can provide role-modeling for bereaved children. It is important to support children at this age in their desire to remain close to the surviving caregiver, while fostering independence. Ongoing discussions are helpful to address the child's concerns, fears, emotions and questions and model identification of your own feelings. Provide clear, realistic information. Some children may benefit more from other expressions of emotions, such as creating artwork or symbolic play. Modeling healthy coping is

important, such as participating in memorial activities, rituals of mourning, and sharing memories of their loved one. Spending time with family may be of utmost importance to rebuild feelings of safety, security and stability. For the same reasons, it is important to return to typical routines and schedules as quickly as possible. Offer to involve school-aged children in funeral activities, but do not require it.

Adolescents (12-18 years): Adults often shield adolescents by limiting discussions about death, but this may isolate the teen and delay the recovery process. Adolescents have an adult understanding of death, are often able to think abstractly and may be curious of the existential realities of death. Teens often have strong emotional reactions including feeling guilt or responsibility for a loved one's death, anger, sadness, shock and disbelief, a sense of unreality and numbness. An adolescent's self-perception may also change as they may feel 'different' from peers after losing a loved one. Teens often feel that no one understands them.

While adolescent perceptions of death are more mature, mourning is complicated by their developmental tasks. Adolescence is already a time of change as teenagers struggle with issues of independence, are undergoing awkward physical changes, and are encouraged to begin thinking of their futures. Teens may engage in high-risk activities in order to challenge their own mortality. Adolescents may experience conflict over how to handle the grief and may feel as if they need to act as grown ups either for younger siblings or to care for a surviving parent.

Suggestions: Allow for a shared social response to the death with family members by discussing it openly. It is important that schools provide a safe a nurturing environment where support services are offered for adolescents to express their grief. Supportive interventions can also involve "open discussions with trusted adults and peers, explorations of questions of life and death, permission to mourn, appropriate assignment of role responsibilities for the age, models of healthy coping behaviors, and toleration of some acting out behavior" (Schoen, Burgoyne & Schoen,). It is important that adults are available to offer emotional support when needed.

The above is adapted from D'Antonio, 2011, Schoen, Burgoyne & Schoen, 2004, & Himebauch, Arnold, May, 2008.