Understanding Childhood

bereavement

helping parents and children cope when someone close to them dies

How best can you help your child when someone close to them dies? What if you are grieving too? Do children grieve in the same way as adults? What about very young children? What is 'normal' grieving in a child and what do you need to worry about? This leaflet suggests ways that adults can help children to come to terms with grief and bereavement.

Understanding Childhood is a series of leaflets written by experienced child psychotherapists to give insight into the child's feelings and view of the world and help parents, and those who work with children, to make sense of their behaviour.

This leaflet was originally published by the Child Psychotherapy Trust.

Leaflets available from:

www.understandingchildhood.net

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Children's thoughts about death

Children will have many experiences of loss and separation as part of their normal development. Even when they have not experienced a bereavement, children will have lots of thoughts about death. This is part of their healthy curiosity about life – like thoughts about their body, sex, or birth.

Adults may find it difficult to talk about death because of anxieties about their own mortality or for fear of upsetting other people, but children may be ready and willing to talk about their anxieties. It is important for a child to feel that there are adults who are strong enough to bear whatever they want to talk about and to answer their questions. Indeed, being prepared to listen to their child's thoughts, beliefs and fears can be the most useful way in which parents and other important adults in their lives – such as teachers, carers and GPs – can help children.

Breaking the news

It can be very difficult to tell a child about the death of a parent, brother or sister, close relative, or friend. You may want to protect the child or feel that it is better if they do not know the truth. But children are quick to pick up when their own observations about important things are denied. A conspiracy of silence will not spare them from pain – it will bewilder and frighten them. They need to be told about the death in simple terms that are appropriate for their age, so that they can begin to grapple with the implications and will continue to trust you as someone they can turn to.

It is harder for everyone when the death is sudden. If there have been weeks or months in which to prepare the child for the death, they will find it easier to accept. But that does not take away the pain. Death is always a shock.

Religion

Religious beliefs often include a concept of life after death. This may be comforting for the child if you really believe it. However, it does not erase the loss of the loved person now – in this life – nor does it answer questions about why God took them away, especially if the person who died was young.

Children's responses to death

Children have different responses to death and dying depending on their age and experiences. There are no clear-cut stages, no

correct order, no set time for grief to last, so try not to think about it in terms of a 'right way' to grieve.

The age of the child affects the ways in which they are likely to express their feelings and the kind of support they need from the adults around them. It is important for children not to feel under pressure to display more conventional signs of grief and for them to be allowed to grieve in their own way and in their own time.

Parents need to be prepared for young children to slip in and out of grief in a way that can be shocking and upsetting to a grieving adult.

- They may switch between tears and misery and demands for food and treats, which is very hard for adults to sympathise with or respond to.
- They may make requests that appear extraordinarily heartless to an adult – 'As granny is dead, can I have her blue necklace?' 'Can I sleep in John's room now that he's died?'

It may help to know about some fairly typical reactions that you may notice.

Very young children and babies

If a significant death occurs in the life of a child aged under two years, they will not have much language to express their loss. However, even very young children and babies are aware that people they were attached to have gone, and experience the dawning realisation that they are never coming back and that death is permanent.

For very young children, who are unable to speak, death might be described as an unnameable fear or dread. You know how inconsolably a baby or young child can cry if they feel unsafe, or if a parent goes out of the room or leaves them for longer than they can bear. If the loved one does not return, young children can be left with fears for their own survival.

Adults can usually comfort children if they are not too upset themselves. Even very young babies will be affected by their parents' emotional state and a death in the family will affect other family members. This may disrupt their care, so some scar may well be left. Try to minimise other disruptions and changes. In time, within the setting of a steady and loving environment, the loss can be repaired to some extent.

It is important for the child, and those caring for them, to keep the memories of the dead person alive. As the child grows up, there will be opportunities to understand better what they suffered before there was shared speech.

Young children

Children aged between two and five years are beginning to grasp that death is final, and that the dead person is not coming back. This is difficult for them to acknowledge fully as it threatens the security of their safe familiar world. Deep down, any too-long separation leaves them feeling frightened for their own survival.

During these years they will form several very important attachments to adults and

children. If their development has gone well, they will have a reasonably secure picture of their loved ones inside them – a sort of 'mummy or daddy inside their mind' – that provides solace during separations.

If the loss is not of a very close relative, they may be curious and affected by the event, but will probably absorb it in their play and everyday activities. If, tragically, it is the death of someone very important, they will go through a similar grief process to adults.

Children aged 6 to 12

Children in this age range begin to develop a more mature understanding of death and life, and are becoming aware that everyone dies one day, including themselves. They want to know more about the actual cause of death – 'Why cancer?' 'Why suicide?'

They may retreat into denial, unable to express feeling. If they appear stuck and cannot grieve, they may need professional help – someone who can bear their withdrawal – especially if the important adults in their life are grieving too.

At this age, children like to feel that the world is an ordered place, with routine and structure playing a significant part. They are beginning to move away from the family to make important relationships with other children and with school. The death of someone close can easily throw them back to feeling unsafe, and to being more dependent. They may feel less calm emotionally, and more like a younger pre-school child, who is up and down in their feelings.

Adolescents

Adolescents are often full of thoughts about life and death issues, or the 'meaning of life'. On the other hand, they can be so busy living life to the full that they rarely stop to reflect deeply. They may be unaware of their feelings, burying them until they surface much later at a vulnerable time in their lives.

A significant death can make a teenager feel particularly thrown because it may go against their strong belief in their own future and that of others. They can feel insecure just when they are starting to separate more from the family. You may notice that they do any of the following:

- withdraw into a very private existence
- go back to behaving like a younger child
- appear to be very matter-of-fact and detached, worried about emotions overwhelming them
- become angry and protesting.

As these tendencies are often a part of normal adolescent development, it may be difficult for you to know when to persist in your offers of help.

If the young person is managing school and social life, as well as eating and sleeping reasonably normally, you can probably wait for the normal grieving process to run its bumpy course. The support of their friends may be particularly important for them.

More than ever, they need the love that you have tried to provide all along. They also have even more need of the limits that you have set.

They may like to talk to someone outside the family who is not in danger of being too upset by hearing about what they are feeling, but it is best not to assume that this is automatically wanted or needed.

Traumatic death

Children who have witnessed one or more dramatic deaths, or been involved in a disaster, accident, or other trauma – including terrorist attacks – may need specialised treatment. This may also be the case if a loved one has died in a sudden, dramatic or violent way.

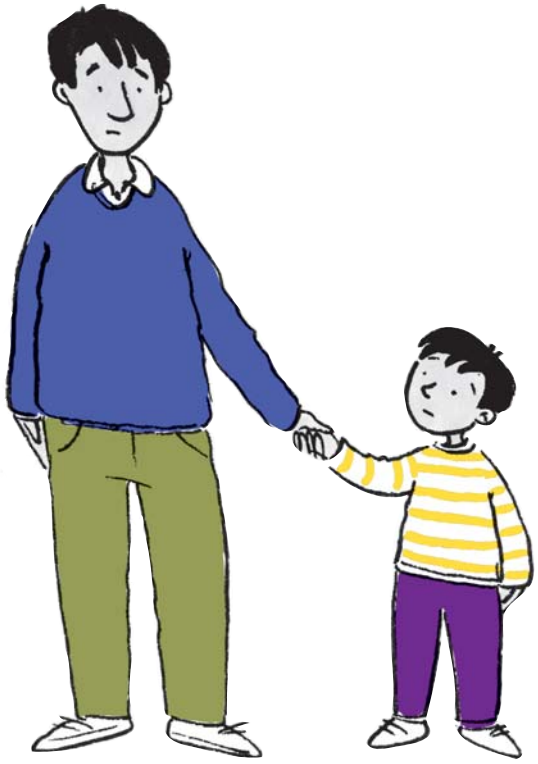
If there has been a tragedy at school, or the school has been exposed to violence, parents need to be prepared for the 'ripple effect' of a trauma, even when the child has not been directly involved. Parents, schools and other groups in the community may also need help. These experiences are often too shocking and disruptive to be absorbed and may need to be worked through over time.

Children who watch appalling events on television may shift unpredictably between anxiety, excitement, indifference, obsessive interest and unreality.

If you are in any doubt about the matter, in general it is better to seek help than not to do so.

Specialised help is available through: The Children's Team, Traumatic Stress Clinic, 73 Charlotte Street, London W1T 4PL. Phone 020 7530 3666 for enquiries about referrals to the team; you may need to request a referral from your GP.

Signs of children grieving



- **Numbness and disbelief** Simply try to comfort them. Try not to make them talk about it – they may be too frightened just now. Be patient and offer comfort.
- **Shock** This may include disturbed sleep, being unable to go to sleep, fear of the dark and nightmares. Again, they need lots of comfort and patient attention.
- **Denial** They may well deny that the death has happened. Denial is a necessary anaesthetic. In time the reality will come through their self-protection. There's no need to repeatedly 'put them straight'.
- **Regression** Under the stress of their loss, children of all ages may regress to earlier stages of development (just as adults do) and need extra care and comfort. Although you may worry about this behaviour, it is important to try and see it as expressing a need to be looked after and to be held. It is an opportunity for you to help children rebuild the security they've lost.
- **Anger and appeals** They may protest with anger or appeals – older children and adolescents may say something like 'How could he have left me?' or 'Why didn't the doctors make her better?' Try to acknowledge their anger. It is a very human response to be angry and to feel abandoned. This may be very hard for you when you may feel exhausted and may be angry and desperate yourself. If you agree with any of what they say, let them know that you feel the same way. It is helpful for them to know that they are not alone with their feelings. Give them permission to cry.
- **Change of habits** Children may be restless and unable to settle to anything. Some children will eat a great deal, and even store food, to fill up the emptiness they feel inside. Others may lose interest in eating. Some children start to bite their nails, to pick at themselves, twiddle with their hair and so on.
- **Despair** They may feel despair. Again, it is hard to help a child who is despairing if you are full of despair too, but it does them no harm to see you cry and to know that you are also struggling.
- **Guilt** They may feel that they contributed to the death. You can reassure the child that nothing they did or said or felt caused the death. Tell them that lots of people feel guilty when someone they love dies, or wonder if they did something wrong.
- **Imaginary sightings** They may search for the person who has died, expecting them to come back and even feeling they've seen them in the street. This is a normal universal response. It is a necessary process before children realise that the person who has died is not ever coming back. You may be able to gently help them believe in the finality of the death, but it can take much longer than anyone realises.
- **Acceptance** They will eventually understand that the person has died. Even though they probably feel very low, and perhaps lonely and rejected, it is necessary to truly believe that the person has died before anyone can begin to let them go, while holding on to precious memories.
- **Life goes on** Eventually they will realise that life goes on and that the loved person who has died is alive in their minds – a helpful part of their imagination for ever. Some 'recovery' may begin to take place after a few months, but where the death was particularly sudden and close it takes much longer, perhaps years.

These suggestions may be helpful

- There is no easy way of taking away the pain, although of course we wish we could. Pain is the price we pay for having loved someone.
- Use straightforward words like dead and dying. With young children, try to link it with a known loss, such as the death of a pet (which may also cause more grief for the child than the parents expect).
- Children under the age of about four often think that sleeping and death are the same. Older children sometimes think this too. The difference needs to be explained – for instance 'When you are asleep your body works very well'.
- Avoid phrases like 'He's gone to sleep', or 'She's gone away', or 'We lost Gran'. These phrases can be confused with everyday occurrences, and may lead to fears about going to sleep, being abandoned or getting lost.
- Make it clear to younger children that this means that the body of the person who has died is no longer working, and that they don't feel any pain. Your child needs help to realise the body has not gone anywhere, other than perhaps to the cemetery or crematorium. Go through this carefully as children may need to be clear about what happens to the body. In some cultures or families children may see the body after death. Indeed, it may be helpful to do so.
- Going to the funeral and the cemetery may be very helpful. Many children will choose to go to the funeral if they understand that it's a special time to say goodbye, remember the person and celebrate their life. Try to explain what they will see, in simple terms in advance. For example, 'The body is in a box that gets buried in a hole in the ground' or 'It goes into a fire and the ashes of the body are sprinkled on the ground'.
- Religious rituals and cultural beliefs may be helpful and comforting if they are part of your family's life.
- Be prepared to tell the story, and to answer the same questions, over and over again. It is important for your child to understand and have the story straight in their mind, but be prepared for them to be really confused at times.
- Children can be anxious about expressing their own grief for fear of upsetting you further, especially if they think there is no one else to look after you. You may find that involving another adult to comfort the child helps to share the load.
- Your own grief can be shared with the child, but try not to offload it onto them. This could give them the feeling that there is no space for their own grief. Parents need to avoid robbing children of their own experiences – for instance, by saying 'I know how you feel'. No one can know how another person really feels.
- It is important for the child to continue to have opportunities to share their feelings about the person they have lost. You can help by collecting photos, for instance, or making a story. There is never a time that a dead person is 'forgotten'. They stay in our minds, sometimes in the background, as long as we ourselves live.

Getting help

Even though the grieving process is normal, at times you may feel the need to discuss your anxieties. You may wish to approach a teacher, health visitor, GP, or child psychotherapist for support or guidance for you or your child during this difficult time. However, it is important not to assume that your child needs to see someone. This may be so, but it may also be helpful for you to find the support to think about your own concerns and perhaps strengthen your ability to help the child yourself.

Further help

In every area there are organisations that provide support and services for children and families. Your GP or health visitor will be able to offer you advice and, if needed, refer you to specialist services. To find out more about local supporting agencies, visit your library, your town or county hall, or contact your local council for voluntary service.

Contacts

Cruse Bereavement Care
Phone (national rate): 0870 167 1677 (national helpline)
Web www.crusebereavmentcare.org.uk

Winston's Wish
Guidance and information for families of bereaved children.
Phone (local rate): 0845 2030 405
Web www.winstonswish.org.uk

YoungMinds Parents' Information Service
Information and advice for anyone concerned about the mental health of a child or young person.
Freephone 0800 018 2138
Web www.youngminds.org.uk

Parentline
Help and advice for anyone looking after a child.
Freephone 0808 800 2222
Web www.parentlineplus.org.uk

ChildcareLink
Information about child care in your local area.
Freephone 0800 096 0296
Web www.childcarelink.gov.uk

Contact a Family
Help for parents and families who care for children with any disability or special need.
Freephone 0808 808 3555
Web www.cafamily.org.uk

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