

Grief and Bereavement in Children

Characteristics of Age Birth to Six Months	View of Death & Response	What Helps
<ul style="list-style-type: none"> ❖ Basic needs must be met, cries if needs aren't met ❖ Needs emotional and physical closeness of a consistent caregiver ❖ Derives identity from caregiver ❖ View of caregiver as source of comfort and all needs fulfillment 	<ul style="list-style-type: none"> ❖ Has no concept of death ❖ Experiences the death like any other separation – no sense of “finality” ❖ Nonspecific expressions of distress (crying) ❖ Reacts to loss of caregiver ❖ Reacts to caregiver's distress 	<ul style="list-style-type: none"> ❖ Progressively disengage child from primary caregiver if possible ❖ Introduce a new primary caregiver ❖ Nurturing, comforting ❖ Anticipate physical and emotional needs and provide them ❖ Maintain routines
Six months to Two Years	View of Death & Response	What Helps
<ul style="list-style-type: none"> ❖ Begins to individuate. ❖ Remembers face of caregiver when absent. Demonstrates full range of emotions. ❖ Identifies caregiver as source of good feelings and interactions 	<ul style="list-style-type: none"> ❖ May see death as reversible ❖ Experienced genuine grief ❖ Grief response only to death of a significant person in child's life ❖ Screams, panics, withdraws, becomes disinterested in food, toys, activities ❖ Reacts in concert distress experienced by caregiver ❖ No control over feelings and responses; anticipate regressive behavior 	<ul style="list-style-type: none"> ❖ Needs continual support, comfort ❖ Avoid separated from significant others ❖ Close physical and emotional connections by significant others ❖ Maintain daily structure and schedule of routine activities ❖ Support caregiver to reduce distress and maintain a stable environment ❖ Acknowledge sadness that loved one will not return – offer comfort

	Two Years to Five Years	
<ul style="list-style-type: none"> ❖ Egocentric ❖ Cause-effect not understood ❖ Developing conscience ❖ Developing trust ❖ Attributes life to objects ❖ Feelings expressed mostly by behaviors ❖ Can recall events from past 	<ul style="list-style-type: none"> ❖ Sees death like sleep: reversible ❖ Believes in magical causes ❖ Has sense of loss ❖ Curiosity, questioning ❖ Anticipate regression, clinging ❖ Aggressive behavior common ❖ Worried about who will care for them 	<ul style="list-style-type: none"> ❖ Remind that loved one will not return ❖ Give realistic information, answer questions ❖ Involve in “farewell” ceremonies ❖ Encourage questions and expression of feelings ❖ Keep home environment stable, structured. ❖ Help put words into feelings; reassure/comfort
	Five Years to Nine Years	
<ul style="list-style-type: none"> ❖ Attributes life to things that move; may fear the dark ❖ Begins to develop intellect ❖ Begins to relate cause and effect; understands consequences ❖ Decreasing fantasy life, increasing control of feelings 	<ul style="list-style-type: none"> ❖ Personifies death ghosts, “bogeyman.” ❖ Interest in biological aspects of life and death ❖ Begins to see death as irreversible ❖ May see death as punishment; may feel responsible ❖ Problems concentrating on tasks; may deny or hide feelings and vulnerability 	<ul style="list-style-type: none"> ❖ Give clear and realistic information. Include child in funeral ceremonies if they choose ❖ Give permission to express feelings and provide opportunities; reduce guilt by providing factual information. Maintain structured schedule, individual and family activities; needs strong parent.

	Pre-Adolescent Through Teens	
<ul style="list-style-type: none"> ❖ Individualization outside home. ❖ Identifies with peer group; needs family attachment. ❖ Understands life processes; can verbalize feelings. ❖ Physical maturation. 	<ul style="list-style-type: none"> ❖ Views death as permanent. ❖ Sense of own mortality; sense of future. ❖ Strong emotional reaction; may regress, revert to fantasy. ❖ May somaticize, intellectualize morbid pre-occupation 	<ul style="list-style-type: none"> ❖ Unambiguous information ❖ Provide opportunities to express self, feelings; encourage outside relationships with mentors. ❖ Provide tangible means to remember loved one; encourage self-expression, verbal and non-verbal. ❖ Dispel fears about physical concerns; educate about maturation; provide outlets for energy and strong feelings (recreation, sports, etc.); needs mentoring and direction

American Hospice Foundation
 2120 L Street, NW
 Suite 200
 Washington, DC 20037
 202-223-0204 Fax 202-223-0208
www.americanhospice.org