

Adults Can Help Children Cope With Grief, Loss

by Anne Moffett

Children experience grief reactions when faced with other forms of separation, such as marital separation and divorce, hospitalization, military service, placement in an alternate living situation (for example, going to live with grandparents or other relatives or placement in foster care), or even separation caused by a family move. The process of grief in these situations is quite similar to the grief over a loss due to death, and it is important that adults in a position to help do not underestimate the depth of mourning that can occur.

In “Helping Children Cope with Separation and Loss,” Claudia Jewett describes three basic phases of mourning that children typically go through after each loss, even though the length and intensity of the mourning will differ depending on the circumstances. She calls these phases early grief, acute grief, and subsiding grief (or integration of loss and grief). Although each child will grieve in his own unique way, each phase does tend to follow a somewhat predictable order.

This article will focus on early grief, the first phase, which involves the emotional reactions of shock, alarm, and denial.

Shock or numbness is an automatic reaction to a traumatic change or loss. It helps to screen out painful information and to prevent us from becoming emotionally overloaded. When a painful separation has occurred, many children experience a lack of sensation and feeling at first, and may appear to be operating mechanically or robot-like, seeming to be withdrawn, showing little interest in their normal activities, and sitting for long periods of time staring at nothing. Sometimes this numbness can alternate with outbursts of panic, distress, or anger as the reality of the separation sets in.

The period of shock and numbness usually lasts anywhere from a few hours to a week. If there has been time and support for the child to prepare for the separation experience, she is less likely to be overwhelmed and thrown into a state of shock when the actual event occurs.

Separation from a parent or from family members is experienced by children as a loss of safety and protection in most cases. The alarm a child feels as a result of this loss of security often brings about bodily reactions that exist in all of us to help us defend ourselves from danger. These reactions can include a racing heartbeat, muscle tension, sweating, shortness of breath or rapid breathing, among other physical changes.

Trying to reassure an alarmed child by saying, “Don’t worry” is not useful. Helping adults can provide support by reassuring the child that someone caring and capable is there to take care of him. Comforting physical contact, such as a hug or snuggling, can help to create a sense of safety, as can special foods (especially the particular foods the child is used to eating when ill) and bodily warmth (such as an extra blanket on the bed or extra layers of clothing).

The normal, day-to-day experiences of separation, such as a parent leaving for work, will become much more emotional for a child at this stage. It is important to go over the daily schedule to be sure that the child knows what to expect, to reassure the child that you will return for him, and to be reliable about returning on time!

Denial or disbelief is also a part of the first phase of grief due to a separation. The child simply does not accept that the loss has happened or is going to happen. Denial can be noticed when a child “forgets” that Daddy has moved out, expects to hear his voice each time the phone rings or to see him walk in the door after work as usual, or believes he sees the missing family member in a crowd or on the street. Some children refuse to believe that the missing parent or family member is no longer available, while others may react by rejecting the absent person whom they feel has rejected them.

It is not unusual for children to use constant, almost frenzied activity or talking to avoid thinking about the loss. They may have trouble being alone, seeking constant company and diversion to keep their minds off what has happened. Headphones, the telephone, and Nintendo games are often used to help forget or block out feelings.

Because denial is a predictable and normal part of grieving, helping adults do not need to become concerned unless it continues for three to six months without interruption, according to Jewett. If it does continue longer, it is likely that the child will need professional assistance to move forward through the grief process.

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