

*Helping
Children
Cope
with
Separation
and Loss*

*Divorce
Death
Absence
Adoption
Foster
Care
Sibling
Loss*



CLAUDIA JEWETT JARRATT

AUTHOR OF *Adopting the Older Child*

REVISED EDITION

Helping Children Cope with Separation and Loss



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**REVISED
EDITION**

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*To the Giver of Health,
who provides for the return
of love, hope, joy, and meaning;
to Fran, whose dying began it all;
and to Bob, just because.*

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Introduction: Who this Book is for

Any adult who is involved with children, whether caregiver or professional, may need at some point to help a grieving child. Census statistics document that over a quarter of all children in this country under the age of eighteen live with only one of their parents (Rawlings 1993). Almost every child will experience the death of a significant other—pet, friend, or relative. In an average-size school, a child will die about every three to four years, affecting the lives of the child's friends, schoolmates, teachers, and family (Linn 1980, 13).

Parents are particularly likely to be anxious when their children experience separation and loss, especially if they themselves are devastated by grief and pain. At school, teachers and other personnel must find ways to cope with children whose behavior and performance suffer drastic changes following loss. Doctors and nurses need to be alert to the physiological connections between grief and physical changes such as hyperactivity, serious lethargy, increased susceptibility to colds and flu. Therapists, ministers, social workers, and other counselors all need techniques to help children understand and accept what has happened as well as to guide caregivers as to how best to respond appropriately to grieving children. Close neighbors, relatives, or friends of the family often want to help; they, too, need to understand better how to support a child during a time of grief.

Children's immediate reactions to loss and their responses to the challenges that follow it are striking: fears for personal survival; separation anxiety; impaired ability to make emotional attachments; sadness, anger, guilt, shame, depression, and despair; problems with control issues; diminished developmental energy; loss of self-esteem; ongoing pessimism and feelings of futility are all normal in grieving children. Many believe that childhood bereavement and the consequent changes within children and their social and familial circles can create severe emotional and behavioral challenges that last well into adult life. Growing evidence links childhood loss with depression, alcoholism, anxiety, and suicidal tendencies in adolescence and adulthood.

Clearly, adults who care about children can benefit from learning how to recognize and work with grief. But partly because of the paucity of training in grief work with children, even professionals may not understand that much of the difficult behavior the child displays can be directly connected to grief or that appropriate support can help the child replace troubling behaviors with more constructive expressions of inner turmoil. Many children are denied help after a loss because those around them discount the severity of its effect on them. Or they receive help only at the beginning of the grief process, leaving them to meet the subsequent challenges alone. Sometimes children themselves are reluctant to talk to their caregivers about a shared loss for fear of creating more pain. It is no wonder that children are sometimes called "the forgotten mourners."

Even when a child is given good support over a long period of time, it appears that losses and separations may leave vulnerabilities that can be retriggered by new developmental tasks, new relationships or achievements, or any of the changes that come to people in the course of their lives. Loss is a cumulative experience; unless the child is helped to resolve a major loss, even trivial subsequent losses are likely to provoke intense stresses and reactions. Still, research finds that children who are given high-quality care by available family members during the mourning period or who are effectively helped by alternate caregivers or other helpers experience less distress and perhaps fewer long-lasting repercussions (Garmezy 1983).

Until the first edition of this book, there were almost no guidelines to follow nor methods advanced as to how to help children manage grief constructively. This book presents practical advice for those concerned with helping children through the recovery process. It identifies specific

behaviors one can expect in a child who has suffered a loss, showing when and how these behaviors may arise, discussing those that may immediately follow a loss and those that may appear or recur years later, and offering clear suggestions on how concerned adults might best respond. The original techniques and descriptions of simple props that were the mainstay of the first edition of this book have been expanded as an outgrowth of my continuing work as a child and family therapist. The theoretical underpinnings that helped previous readers clarify what to look for and how to respond have been refined and enlarged as well. Parents, primary caregivers, and other helping adults—therapists, school counselors, teachers, day-care providers, doctors, nurses, ministers, friends, or relatives—will find plentiful descriptions of practical methods for helping children through the strong feelings, difficult behavior, and confusion that follow a loss.

Because the first problem is usually how to tell the child about the loss, the book begins with a general discussion of how to convey the news and support the child, followed by a chapter offering suggestions on how to tell children about specific losses. The next chapter traces the normal progression of grief, and chapters 4 and 5 discuss ways to help children who appear stuck at various points in the grief process to work through their problems. The final chapter deals with letting go and moving on. Examples and dialogues taken from a wide variety of situations are used to demonstrate how children can be supported as they weather the challenges and stress of acute grief, move through the subsequent adjustments and reactions, and become more able to get on with a healthy, functional life.

We assume a crucial task when we seek to help mourning children. Our success depends on our willingness to offer support during a troubled and baffling time. The methods this book describes can make this task clearer and easier. The challenge is great, but the rewards are greater, for these methods offer the promise of health and full, rich lives for the children you know and care about.

1. TELLING CHILDREN ABOUT LOSS

Greg has spent summers with his grandma and grandpa since he was quite young. He and his grandpa have always been very close, sharing jokes, rooting for rival baseball teams, and going fishing together as often as possible. Just as school is ending for the year, Greg's grandfather dies of a sudden heart attack. Greg must be told. His stricken parents not only must help their son come to grips with the death of his beloved grandfather but must also deal with the funeral arrangements and quickly make other plans for the summer.

Lisa Disaro stands at her bedroom window, listening to the muted sounds of her children at play outside, as tears stream down her cheeks. Though she and their father have struggled to work things out, they have decided that one of them must leave. Lisa feels overwhelmed and vulnerable. Her children must be told but the telling seems unbearable. She wishes time would just stop.

Gwenn Pettway placed Tabor, who has lived with a series of caretakers, in the Tucker's foster home two years ago. Though the family has tried their best to work things out with this angry, difficult child, they feel as if they are getting nowhere. They have talked again and again about their increasing frustration about the lack of change in Tabor's behavior and their worry that this placement is having a negative effect on their other children. Eventually they call to ask Gwenn to begin looking for another home for Tabor. They express two concerns: will Gwenn be responsible for telling the child that she has to move again, and can she advise them on what to expect and how they should respond?

A neighbor stops Robert as he returns home from work. "Did you hear what happened to the Johnsons? Some drunk hit them. Jackie's dead; Kendra is still in surgery." "Dear God," Robert thinks. "It could have been Caroline." He braces himself as he moves quickly to his door, wondering what he will say to his family.

The first and foremost concern of adults in these situations is likely to be how they can best soften the pain and shock of the news they must tell. They may wonder what the children can bear to know and how much they should be told. How much can children understand about such matters? When should a child be told about a loss? Who should do the telling?

Because children's sorrow often evokes deep memories and triggers strong feelings in the adults who care about them, it is not unusual for them to wonder whether it might be better not to tell the children at all or to wish that they could avoid having to talk with the children about the loss. Sometimes adults skip past the difficult areas quickly, rushing through the hard facts to focus on anticipated benefits: "Now you'll have a new family with more people to love you." "Your mother and I will be happier, and I will be able to spend more time with you because we'll have the whole weekend together." "Your grandma was really sick for a long time. It's better this way." The truth is, however, that the child may not feel it is better for him or her. Such approaches may make the telling easier for adults, but they are likely to leave children feeling confused, misunderstood, and reluctant to risk trying to talk out and resolve their upset, either because they are afraid they will irritate their caregivers or because they have decided that such conversations will prove pointless.

Adults may also try to protect children from hurt and pain by deciding to keep things as normal and pleasant as possible. Too often, those around a child facing loss act (and encourage others to act) as if nothing out of the ordinary has happened, hoping to minimize the impact of the loss. Adults may fear that a child is too young or too fragile to handle direct information. Unfortunately, such choices join family members in a conspiracy of silence that deprives children of the right to express and resolve their own grief and concerns or to check out their own observations.

John Bowlby, whose work on separation and attachment laid much of the foundation for

understanding how children experience and respond to loss, believes that a child can resolve losses appropriately when:

1. The child has enjoyed a reasonably secure relationship with the person who is leaving (or is gone).
2. The child receives prompt, accurate information about what has happened and is allowed to ask all sorts of questions, which adults answer as honestly as possible, acknowledging that they do not know the answer if that is the case.
3. The child is allowed to participate in the family grieving, both publicly and privately.
4. The child has easy access to a trusted parent or other adult who can be relied upon for comfort and a continuing relationship.

WHO SHOULD TELL THE NEWS?

Because all children appear to harbor some degree of fundamental and primitive terror that something catastrophic might happen to their caregivers and that without their caregivers' protection and care they themselves might die, it is best if the news comes from the adults to whom a child feels closest—whether parents, foster parents, or other caregivers. Access to someone with whom the child shares an ongoing history of trustworthiness, concern, and involvement is an important buffer during crisis or change and reassures the child that he or she is not alone, that there are other people available to provide protection and vital caretaking.

If the loss entails the departure of a parent (whether because of a new job assignment, parental separation, serious illness, or incarceration), it is best for both parents to tell the news together, so that the child has the chance to understand that everyone is involved in what is happening and that, regardless of the change, they are still a family. If the loss is the result of parental conflict (separation or divorce), it is particularly important for each parent to take special care to avoid influencing the child's reactions and to do whatever is necessary to reduce the likelihood that the child will feel caught in the middle of a parental conflict that requires choosing a side. If it is impossible for parents to tell the child together, then they should each talk to the child as soon as can be arranged. Whatever the situation, when parents share the news, whether separately or together, they should both make it clear that their love and positive concern for the child have not diminished and that the child is not the cause of the family change.

WHEN SHOULD I TELL THE CHILD?

The best way to help children face significant changes or losses is to let them know what is happening as soon as the loss, separation, or change seems definite. When parents try to delay telling the news, they often underestimate how sensitive children are to parental preoccupation and tension. Telling a child about an impending loss not only prevents the distress and anxiety that may build as the child increasingly wonders what is wrong but also allows the child to begin to prepare for what lies ahead rather than being caught off guard. The child has a chance to start getting used to the idea, to raise questions and concerns, to participate in the adjustments parents are making, to play and replay the separation experience as a way of integrating the changes that will occur, to practice coping skills before they must be called into action, to begin to grieve. Talking about the change can promote the awareness that, though the adjustments may be hard, the child can manage both the grief and the loss. What has happened is not so awful that it cannot be faced and talked about.

There can be problems with direct prompt approaches. Imagine a mother who has only the brief time it will take someone to bring her children home from school to prepare herself to tell them that their father has suddenly died. Reeling with her own shock and bereavement, it is understandable that she might wish to postpone talking to them, to avoid seeing them, or at least to discourage their expressions of distress. It would be better, however, for her to remember that she need not hide her own pain and strong reactions as long as she makes it clear that the children are not expected to solve her problems or make her feel better. Her children will be most able to believe this if they know which adult friends and relatives will be helping her, since this is most likely to reassure them that their mother is in competent, caring, grown-up hands. If the mother subsequently joins a loss group or seeks counseling, it might be helpful for the children to be invited to meet the therapist or pastor or group leader so that they can get direct reassurance that the helper understands how important the parent is and that the helper will be available as long as help is needed.

WHAT SHOULD I DO FIRST?

Sometimes when we are responsible for helping a child with the initial impact of a loss, we feel anxious about where to begin. One way is to begin with the adult reality. "The doctors say that Mommy is very sick and that she may not be able to get well and come home to us. They think that she may die." A social worker who needs to move a child to another caregiver might say, "Your foster mom and dad are getting pretty old. They have trouble doing the things that they want to be able to do for you. We all think that it's time to get a different mom and dad to help you grow up and to take care of you." When a loss is sudden, sometimes it is impossible to prepare the child. If the loss comes with no forewarning, the facts should be conveyed in as straightforward a way as possible: "Mom and I have been having some grown-up troubles lately. We have tried to work them out together. We didn't want you to worry so we have been pretending that everything was all right. But now we can't keep our troubles with each other a secret any more." Or, "Today when your sister was riding her bike, she had an accident and died." Or a social worker might explain, "Your mom has been having a lot of grown-up worries lately. She needs time to figure out how to take care of herself and take care of you. She will be going [to the hospital, to a counselor, for help with a drug or abuse problem], and she needs us to find someone else for you to live with while she is figuring things out."

Adults may find that when they try to prepare a child for a forthcoming loss, the child may discount the information, refusing to accept that the loss will actually happen: Maybe Daddy will change his mind, the child thinks. Maybe their sibling will get better. It is not unusual for a child to believe the news only when the event has actually occurred, and even then the child may cling to a conviction that the separation will be short-lived. Some may react quite matter-of-factly and then begin to cry later, perhaps at bedtime, begging to be told again. Others casually resume their play, apparently untouched. Children may be unwilling to listen; they may urgently try to change the subject, drown the news out with chatter or noise, cover their ears, or even fall asleep. Or they may be too overwhelmed to listen and shut down or glaze over. Adults are often dismayed and confused when they try to figure out what the child has actually heard.

The more directly the knowledge of loss is conveyed, the less chance children have to become confused, to deny the truth, or to blame themselves for what is happening, which helps them become more ready to begin the internal readjustments needed to come to grips with loss. Children normally take in what they can understand or are ready to understand; what is too much or beyond them is likely to be come up later when they are older or more emotionally ready to accept it. It doesn't matter when helpers start or if they remember everything the first or second or third time. The information shared with the child does not have to be perfect. It can be corrected, expanded, rediscussed, and reapproached as adults clarify their own thinking or rethink what they have said and how they have said it. Often children will lead the way, showing what they need and when. Listen to their questions, and let them serve as guide to what the child might be thinking or needing to hear. For example, listen for emphatic all-or-nothing statements that often contain hidden questions: "You hate me!" ("Do you love me?") "Daddy never cared what happened to me!" ("Did he leave because he didn't care about me?") Be sure to follow up on statements that suggest underlying confusion. "Ryan's parents were having trouble over money, and then his father got a raise and now everything's OK," your child might say to you. "It wasn't just money that was the problem between me and Daddy," you need to point out and go on to explain the situation again, clearly.

If the child doesn't give you clear cues, initiate conversations, or ask questions about the separation or loss, then follow your instincts and bring things up when it seems appropriate to you.

There are many good books for children of different ages that can help children express their own feelings and help you open up a supportive discussion. Such books also help children feel that they are not the only ones to have to struggle with these kinds of challenges. A visit with the children's librarian at your local library can be enormously helpful, and many loss-support groups have good bibliographies that will help you find books appropriate to the type of loss your child is dealing with.

Besides being approachable and frank, another important thing is to let the child know that you care and are concerned about what has happened; that you want to do your best to help; that you are willing to listen without judging how the child thinks, feels, and needs; that the child may take his or her own time reacting and adjusting to what has happened.

Understanding How Children Think

It is a little easier to tell children about loss if one understands that children take in, think about, and absorb information differently from adults and that the way they process it changes as they get older. Something that might make perfect sense to a nine-year-old could leave a five-year-old lost and confused. Devising ways to talk about things in a style tailored to a particular child's capacity for understanding may avoid significant troubles later.

Magical Thinking: The earliest stage of understanding and processing observations and discussions appears to be firmly in place in most children by about eighteen months and remains until they are around seven. Because children in this stage tend to personalize everything and believe that their own thoughts, or wishes, or actions are responsible for whatever happens to them (and to other people), their thought process is often called "magical thinking." Children at this stage typically focus primarily on the *you* part of any message. For example, an adopted child told, "Your parents couldn't take care of you," may understand this as "There was something so bad or unlovable about *me* that even my own parents couldn't manage or tolerate it." This particular misunderstanding could be avoided or eased by changing the wording, simply eliminating the word *you* and saying, "Your parents couldn't take care of *any* child at that time." (If you find it difficult to imagine how a child might react "magically" to the news you have to tell, try to remember an incident from your own childhood when you had a similar sense of unlimited power and responsibility. Many adults are familiar with the children's rhyme, "Step on a crack, break your mother's back," which is a prime example of magical thinking. Some may remember believing it, maybe taking anxious care to step over the cracks rather than to risk jeopardizing a parent. Later, some may have experimented with tentatively stepping on those same cracks and then checking to be sure that the parent was fine, that the magic hadn't worked. Still later, some of us may have discharged angry feelings by stomping deliberately and gleefully on every crack: No longer truly convinced of our power to make bad things happen, we could safely vent our frustrations or our wish to get even.)

In addition to the sense that everything happens to or because of them, children in this cognitive stage have limited life experience, so they are likely to connect unrelated things together causally. The helping adult must be very careful to avoid using euphemisms or figures of speech, especially in the case of a death. "We lost Grandpa" is all too easily absorbed by the child as literal information ("Where did you lose him, and why aren't you looking for him?"). "She has gone to her eternal rest" can make a child terrified to go to sleep at night. Remarks such as "the good die young" invite a child to link good behavior with death and accordingly to act as bad as possible. One family shared a story about a five-year-old who suddenly developed an acute fear of closets. Not only would the child not go near them, he became hysterical if his mother did. It turned out that it wasn't the dark, or monsters

hiding inside, or the fear of being trapped that bothered him. Instead, his fear stemmed from having heard that someone "came out of the closet" and had AIDS. His reasoning convinced him that anyone who went into a closet might catch the disease, and he was not about to take any chances.

In this stage, children also lack the ability accurately to discriminate reality from fantasy, which can compound their confusion. The child at this age sees the world as a place of magical endings where everyone lives happily ever after or where death and violence are casual, reversible events. The cartoons so popular with this age group reinforce this misunderstanding. Characters are seemingly annihilated only to reappear again and again. Sometimes children this age react quite casually to news of someone's death because they are waiting for the person to stop "playing dead."

Magical thinking diminishes as we grow older, but the ability or tendency to fall back into it may never leave any of us completely. Wishful or stricken, we may catch ourselves (and others) attributing the power to change our lives to external circumstances: "If only I had a different job [spouse, living arrangement], my life would be fine." "When I lose weight, I will be happier." "What if I found a different doctor? There must be someone who knows what to do."

The most important things to say to children who suffer a loss at this stage are:

1. Someone [name who, preferably] will take care of you. [If it is not going to be you, continue...] will not be me, but I will stay with you until [name] is here to keep you safe.
2. It was not your fault. It was not because you were bad in any way or because you were unlovable. There is nothing you could have done, or can do, to make things different.
3. It is OK for you to know about what happened, to think about it, and to figure it out.
4. You can have your own feelings about what has happened. You may feel differently from other people, even those you live with. No one has the right to tell you what you feel or what you should feel.
5. 5. You can take as much time as you need to figure things out and to have your feelings. You do not have to rush or pretend that you don't think or feel as you do.

If you don't feel comfortable giving any one of these messages, then you would probably be wise to arrange for the child to get this support from a helper who can give these permission statements objectively.

Concrete Thinking: Children move increasingly from magical to concrete thinking somewhere around age six, and concrete thinking remains their primary way of processing what they are told until they are eleven or twelve or older. In this stage, children think in absolutes such as good/bad, always/never, either/or. As they try to understand what they hear, they break down sentences into individual words, which they then translate into individual pictures. This can lead to misunderstandings even when an adult has tried to be clear and straightforward. (A Funky Winkerbean cartoon illustrates: "News bulletin: Today three armed men held up the First National Bank. Police are wondering how they could lift such a heavy building. Probably the fact that they had three arms helped.")

During this stage, there is little if any ability to deal with subtleties, ambiguities, or euphemisms. Adults must be careful not to lay land mines that may cause worries later. Think of an adopted child who has been told that money troubles caused his birth parents to give him up. Guess how that child might react to the news that a new caregiver had been laid off or fired. It is wise to remember that children grasp information most accurately and clearly when you frame what you have to tell them in terms of the senses. For example, "If you had been at court today, you would have seen the grown-up arguing about what really happened. Then after everyone said what they thought, you would have heard the judge tell your Mama...." Asking yourself, "If I made what I am saying into a literal picture

one word at a time, where might the child become confused?" can help you avoid making statements that are misleading if taken absolutely literally. It may help to note how frequently adult thought patterns and speech revert to concrete thinking, especially in times of stress. The always/never, good/bad scorekeeping can often be observed in situations that involve assigning blame, dealing with moral or religious issues, or wrangling about politics, and it often shows up in domestic disagreements: "You always expect me to pick up after you." "What do you mean? I'm always happy to help." "Well, for one thing, you never wash the dishes." "And what about you? Three times this week I've had to remind you to put things back where they belong."

It is important to remember that, just as adults under stress may revert to concrete thinking, so children under stress often regress to earlier thought processes and patterns or mix different types of thinking. Consequently, even if a child's age suggests that he or she is in the concrete thinking stage, care should be taken to heed the guidelines appropriate for magical thinking as well.

Helping Children Trust Themselves

Because young children get their understanding of life primarily through their senses, tying news to a sensory or physical connection often helps them grasp it. Such an approach can also reinforce their trust in their own powers of observation. So talk with children about what they might have seen or heard: "When you heard us fighting, you may have wondered what was happening and felt worried and scared." "Today when Aunt Ruth came to get you at school, did you guess that something bad had happened?" Beginning this way also encourages the child to think, "I am the sort of person who can figure out what is happening." Corroborating what the child has noticed sends one more reassuring signal that the child is a thinking person, able to make sense of the world and therefore able to understand significant happenings. In fact, acknowledging that they have been aware of the adult actions or situations that led up to the loss may help reassure them that it was not their fault.

In some families, children are discouraged from observing, commenting on, or questioning what is going on with adults, especially their parents. Such children may now need assurance that it is all right for them to have noticed that things were not going well. Consequently, when talking about a loss, you should deliberately relax any unwritten rules that children should not be "nosy" about the affairs of their elders and encourage your children to voice their questions and to confirm their own observations about what has been going on in the family. Remember: when a child suffers a loss, very little about what has happened is none of the child's business. A significant separation or loss definitely *is* the child's business and needs to be explained as thoroughly as possible to help avoid serious repercussions later. If the questions are too personal to handle or if the separation hinges on sexual or financial matters inappropriate for discussion with children, you might say, "That's an OK question, but I feel private about the answer, and I really don't want to talk about it."

WHAT CAN I DO TO MAKE ADJUSTMENT EASIER?

Helping Children Say Good-bye

After the news of the upcoming loss or change has been introduced and explored, children need to be given the opportunity to say whatever good-byes are involved. Having the chance to say actual thought-out good-byes to people, places, or a familiar family structure is among the most healing things a child can experience. Not only do such good-byes give the child a chance to review and acknowledge the good things that will be lost, they also allow the child an opportunity to express those feelings face to face with the others who are involved. Wishes and blessings can be exchanged, and the child can be given loving permission to have a successful, satisfying life. A thoughtful good-bye visit leaves less unfinished business to complicate the grief that follows the loss. Youngsters who do not have the chance to exchange good-byes or to receive permission to move on sometimes are more likely to sustain additional damage to their basic sense of trust and security, to their self-esteem, and to their ability to initiate and sustain strong relationships as they grow up. (See [chapter 2](#) for more details on how these visits can be structured to do the most good for all concerned.)

Understanding Teenagers' Need to Turn to Friends for Support

When there is a serious illness or a death in the family, well-meaning adults sometimes suggest that children be sent to a friend's or relative's in order to protect them. But keeping children from their caregivers, for several hours, let alone days, during an emotionally charged time is likely to raise the anxiety much more acutely than would allowing them to remain at home. Adolescents, however, not only depend on their caregivers but also rely a great deal on the emotional support and protection of their friends. Consequently, some adolescents may ask to stay with a friend during an acute family illness or after a death. It is as if they need to withdraw to a neutral corner to recuperate from dealing with the constant pain, resentment, or helplessness that may be stimulated by being at home. In such cases, teens often prefer to spend time both at home and elsewhere, with the freedom to switch back and forth as their comfort and convenience dictate. Such arrangements are not intended to be disloyal or disrespectful to other family members, and if they do not conflict with the needs of others in the family, they can be quite helpful for grieving teens.

Supporting Memories and Maintaining Ties after Permanent Loss

Strengthening positive memories (without glossing over the negative ones) and validating past ties are thoughtful, kind things that caring adults can do for a child who has suffered a loss, even those who do not know the child intimately. "I remember your father always hung up your pictures and notes by his desk at the office. He was so proud of you."

Another way to help children following a separation or a loss is to plan and facilitate ways that enable and encourage the child to remember and to talk about the important person and places that are gone. Having access to pictures, talking about memories, and marking significant anniversaries all support the child and the validity of the child's relationship to those who have been important and are no longer as available.

On Mother's Day or Valentine's Day, or on other occasions, if the child chooses to write a letter or make a card, perhaps it can be sent directly or in care of the agency (or orphanage, if the child came from another country). When the loss is the result of a move or a leave-taking, it is useful to plan and talk about how the people involved will keep in touch: the parent who is leaving; the grandparents who no longer live close by; friends and classmates.

Children who have had neglectful or abusive relationships with their parents or are separated from their parents by circumstances such as mental illness or incarceration are often able to use visits to understand more about who their parents are without either denying or overemphasizing their particular difficulties. If there is concern about the child's safety when visiting, safeguards can be set up, and visits can be supervised.

For those children who are unable to maintain contact because the separation is final, due to death, family conflict, or a closed adoption, several things can be done. One is to continue to talk about the person who is gone and to keep pictures around, in plain sight. Adoptive parents often make it a point to talk about their child's birth parent(s) on the child's birthday. Many of them will express gratitude to those who gave their child the gift of life and a birthday. Some families make it a practice to include the birth parent in the meal blessing on that special day (and others). Increasingly, adoption allows for some ongoing exchange of information, even contact, between both sets of parents and may include visits by the birth parent with the adopted child or teen.

Children who have suffered the loss of someone close to them because of death may decide to decorate an area with pictures and other mementoes to serve as a shrine.

In one community, when a senior and the classmate he was driving home from school died in an accident, other students spontaneously hung a cross and a Star of David on the telephone pole where the crash had occurred. Several months later, students and their parents were still taking the time to update notes and add ribbons and fresh flowers.

Visits to the cemetery precipitate very different reactions in children and adolescents, and it is important that each child's needs and feelings be respected. Some youngsters seem to get a good deal of comfort from going to the cemetery to visit the grave of the person who has died. Others protest, refuse to visit, or go sullenly. Some children prefer to go alone rather than with their caregivers because they feel uncomfortable with the strong feelings that the adults express. Others want to go alone in order to have their own special, private time with the deceased. Clearly, there is no right or disrespectful reaction. Whatever the child wishes and needs to do should be supported.

Avoiding Cumulative Losses

At the time of a family loss or separation, when a child faces so many drastic changes, it is wise to try to maintain as much of the familiar daily routine as possible. Following the usual rules and expectations will give the child a sense of reassuring continuity and regularity. Children may want to know who will empty the rubbish or do the laundry now. Such questions stem from a basic need for reassurance that life will go on and that things (and people) will continue to be taken care of even in the current chaos of grief and change. If Friday night has been pizza night, then the sooner Friday night becomes pizza night again the better.

Following a parental death or separation, children are apt to suffer multiple losses. The primary caregiver may need to begin to work outside the home or to work longer hours. Changes in financial arrangements may cause surviving or separating parents, custodial or noncustodial, to move. The family's standard of living may drop, making it necessary to eliminate the extras that had been part of

the familiar pattern of life.

~~Children who lose a sibling suffer massive changes. They may become only children; they may become the oldest and feel an extra burden of responsibility as a result. They have lost a playmate, companion, and rival, and all the familiar interactions and expectations that were connected to those relationships.~~

When a custodial parent remarries, there is often a move to a new home, school, or neighborhood for at least one set of children in a blended family. The child may have to get used to sharing a parent not only with the new spouse but also with the spouse's children. Or the child may see a beloved brother or sister being drawn into a tight friendship with a new stepsibling. Or lose a customary role: the oldest, the only girl, the youngest, the most capable. An only child may have to adjust to being one of a crowd. If the child has been used to being treated as an equal by a parent during the years between marriages, it may be a rude, unwelcome shock to be relegated to the status of a child again.

When a child moves into a new family, everything changes: the way the light comes through the window as the child goes to sleep or wakes up, the smells and sounds of the house, the colors and furniture the child sees, the food the child eats, parental expectations, routine, and tempo of daily living. It is much like being in an unfamiliar country: Nothing is the same.

It is believed that young children between one and five years of age may fear an immediate threat to their security more than they grieve over an actual loss (in part because they still believe the loss is reversible). For this reason, if it is at all possible, try to delay subsequent major changes immediately after a significant loss. Postpone the switch to a new neighborhood, a new school, or a new church, the cutting of ties with friends or grandparents. If there must be a relocation or if it is not possible to continue in the familiar place with the familiar routines, it is important to involve children as much as possible in anticipating and discussing what is to happen. Remember that, for children, the loss of their familiar home can seem like the loss of a family member; because they tend to identify themselves with specific spaces, repeated events, and familiar people, moving can cause disorientation. Include them as much as you can in decisions about the change and conversations about new routines and roles and in choosing the new home, visiting the new neighborhood, and meeting the neighborhood children.

Involving the Child in the Changes

Lauren, who is sixteen, still actively resents what she feels to have been her parents' insensitivity toward her when they separated. Her mom and dad had been honest about the stresses in their marriage. She knew that they were in counseling trying to work things out. So when they had told her five years ago that her dad was moving out, she was upset but not caught off guard. Her current resentment and pain are connected to how they handled things after that. The weekend after she was told, Lauren's mom went shopping, leaving Lauren at home. Shortly after her mother left, some of her dad's friends came by with a truck. Lauren remembers standing there, watching her father go through their house, systematically taking one of the chairs, one of the bookcases, their piano, a small table, the bed from their guest room, some of the pictures from the wall. Her mother returned just before the final load was taken away and barely spoke to anyone, including Lauren. As soon as the cars were out of sight, her mother began a cleaning frenzy, enlisting Lauren's help in rearranging furniture, washing walls, and cleaning things out. "My mom was like a crazy person, opening cabinets and drawers, pitching things into different cartons, some for Dad and some for the Salvation Army. She sort of swept through the house, yanking things off walls and shelves, talking to herself about what a bastard he was. And that was just Saturday. On Sunday, he came back, and they went through the photo

albums and the Christmas stuff, arguing about who was going to get what. It was the first time I knew what a 'broken heart' meant, and I wondered if they would just cut me in half, too. I'll never forgive them for that day, ever."

This is not just a divorce issue. And it is not unusual. A child who loses a sibling suddenly as a result of miscarriage or stillbirth or SIDS, may come home to find all traces of the nursery gone. Or pictures of the family member who is no longer at home may be removed from the house, the person's room dismantled, his or her belongings given away. Certainly, it is not the intention of the adults involved to inflict additional pain on their children. But caught up in their own anguish or anger or hostility or in an attempt to erase the pain by erasing the evidence that the person existed, they may force children to accept changes too quickly, depriving them of the comfort of a more gradual transition.

Whenever possible, children should have some say as to when and how things are to be dispersed and dismantled. They should have the opportunity to request that certain mementos be left in place or that they be allowed to keep belongings special to them.

One six-year-old, when asked which of his great-grandmother's things he might like to have, requested her cane—it was the thing that brought her most clearly to his mind.

The night her brother died, a surviving sister carefully brought his hermit crab into her room because she "knew it would be lonely and Ben would want her to take care of it."

Children whose beloved grandparents had died within a few months of each other were given the chance to spend as much time as they wanted just walking through their grandparents' home, which had been sold but not yet dismantled and cleared out. Photographs were taken of the various rooms, and the children were encouraged to help the parents make a list of the things they wished to take home to use or to have kept safe.

Helping a Child Return to School Following a Death or Separation

When a classmate or a teacher dies, the child's whole community experiences the loss together. They can cry and hug and mourn with one another. But when a child who has lost a parent or a sibling returns to school, the community that the child reenters is not grieving, and the child faces what can be a difficult transition alone. Many children find returning to school after a family tragedy to be as difficult as the tragedy itself, especially at the beginning. In very painful situations, such as the sudden death of a sibling, or complicated situations, involving perhaps suicide, AIDS, or violent death, especially if caused by another family member, children are most likely to be at risk. Almost everyone knows about the loss, but no one, including adults, knows what to say. Bereaved children may become convinced that they have done something awful or disgusting or disgraceful, and this deals them an additional blow at a time when they most need and deserve reassurance that they are worthwhile, acceptable people. Their schoolmates, fearing that they, too, could suffer a similar catastrophe, may avoid them, and the resulting social isolation is likely to cause them to behave in ways that annoy or irritate others, which in turn isolates them all the more. They may become more and more withdrawn, develop ever more serious behavior problems, or fall even farther outside the community's pale, where they may become scapegoats or the subjects of classmates' rejection and ridicule.

Concerned adults in the school community can make a child's return to school following a loss or change significantly easier for all the children involved. Though bereaved children may protest (out of their own need to deny or because they are following the lead of a parent who has similar feelings and is not yet ready to let others know), it is important for caregivers or other concerned individuals to let the principal, guidance personnel, and classroom teacher know when there has been a family loss or

change so that the school understands and can respond in a supportive manner. Talking to the other children about what has happened before the bereaved child returns to school, explaining how to comfort and welcome the child back, and responding to their fears, curiosity, and concerns can do much to ease the grieving child back into school routine.

Because schools have such an important socializing influence on how children feel about themselves and their life situations, school personnel need to be particularly mindful about how they go about providing supports. Brenner points out that many American school systems have yet to acknowledge that multiparent families exist. Report cards in elementary schools throughout the country still are likely to list only the names and addresses of one set of parents per child. There is no space for information about noncustodial parents or for indications that a second family is to be contacted in case of emergency or informed about academic progress. When children get sick at school and need to go home, school nurses may not think of calling the other parent or a stepparent if the custodial parent cannot be reached. Sometimes only custodial parents are invited to school conferences (Brenner 1984, 36–37). Youngsters may be allowed only enough time to make one card or present on Mother's or Father's Day and then left to decide where it should go. All this makes children feel uncomfortably different. How much better it would be simply to say, for example, "Today, when we make Mother's Day cards, you may make as many as you would like so you can send one to anyone who has helped to mother you." This kind of support can be an important part of helping children resolve losses, alleviating their feelings of difference and encouraging healthy adjustments to an altered family world.

In general, schools would be wise to provide formal or informal ways to support all children who have experienced loss. Organized discussion groups can be very helpful. Teachers can make a point of referring not only to two-parent, intact families but also to separated parents, single parents, and foster and adoptive parents. They can devise class activities or initiate discussions about the diversity of family makeups. They can include books about adoption, divorce, and stepparenting in the class library.

Pains should also be taken on behalf of a child who suffers a serious illness or accident—for example, a child who is in some way responsible for the death of another, or who has almost died, or who returns to school visibly different (missing a limb, in a brace or wheelchair, brain impaired, bald because of chemotherapy or radiation). Children can be brutally cruel to one another, but they can also demonstrate a strong capacity and desire to help if someone suggests ways for them to be supportive. It is when they are not helped to understand how to respond that children are most likely to turn their feelings of inadequacy and anxiety on the hurt child, thereby compounding whatever tragedy may have occurred.

School personnel may find it particularly difficult to know how to handle talking openly with children about the death of a classmate or a faculty member as a result of AIDS or suicide. Concern and confusion about confidentiality and about reactions from the other students' parents raise difficult ethical questions. It is wise, however, to recognize the speed with which such news is likely to travel through a school community to strive to avoid the dramatic convolutions that are likely to result when such charged information travels through the rumor mill instead of being shared in an open, informed, appropriate manner. A forthright approach lets the students know that the school believes they can be trusted with information about issues that affect them or a classmate. Any such effort to share sensitive information, however, must be balanced with the wishes of the family involved and a careful consideration of how to avoid making a youngster returning to school feel singled out, gossiped about, and exposed.

Children are in particular need of clear and accurate information about how AIDS is transmitted so that they won't avoid the individual who is ill or overreact in other ways. In simple terms, they can

be told that the germs that cause this serious illness are transferred through getting blood or feces or, just possibly, saliva through their skin and into their bodies. (Terms such as *feces* and *saliva* should be put into the child's vernacular.) Most importantly, children need to know that they can't get these germs by just being with someone who is sick or playing with them or touching them or their things or hugging them or breathing the germs in. Tell them that it is very hard for children to get AIDS; most children who are sick were born with it because their mothers had it (stress that their own mothers don't have it). Explain how sometimes people who have needed blood transfusions have gotten AIDS because the blood they were given was from an infected person, which is how some children got it before doctors knew as much about testing blood and keeping it safe. And, finally, be sure to state clearly that people who have AIDS are sick and should get the same kindness and sympathy that we would give any person who was very ill.

It is increasingly apparent that death education should be part of the school curriculum. Just as children can be helped to understand death if their parents present the facts to them in developmentally appropriate ways, in the same way they can explore and understand more about death and normal grief reactions before they or their classmates are stricken. Given the dismaying statistics on the number of adolescents who think about or attempt suicide, it makes good sense for the school community to talk about the problem in a general context with high school and perhaps junior high school people. Discussing suicide as a social problem in the school setting can offer important protection and information to students and those who work with them. Not only do such discussions demonstrate that it is all right to talk about very difficult and upsetting things, they also support the notion that help will be available, no matter how serious the problem, as long as one is willing to reach out for it. A culture of understanding will make it less likely that youngsters will isolate themselves during difficult times.

Helping a Child Change Schools

A nine-year-old who lost both of his parents in a commercial airplane crash moved several months later to a new state to live with relatives. He was adamant that he did not want *anyone* to know what had happened to him and his younger sister. Two years later, still assuming that he had managed to keep his tragedy a secret, he became furious when another child said something about it at school. He felt totally betrayed and was convinced that he would be ostracized and victimized as a result of the news having come out. Though he was reassured that those who lived in his small rural town undoubtedly already knew, the reassurance did little to alleviate his concerns that he would become a pariah.

When children must move or begin a new school, it is important that they have the opportunity to say both hello to the new situation and a thought-out good-bye to the old. Adolescents in particular will be worried about how they will be accepted by a new peer group—indeed, they are at risk of being as damaged by negative peer relationships in the new setting as they are by the loss that may have precipitated the move. Stuart and Abt suggest:

If a child with recently separated parents newly enters the school district, teachers need to be sensitive to the child's loss of peer support in addition to the parental loss. The child needs to feel a sense of belonging to the class and to acquire a new support system as quickly as possible. To foster this, the teacher could assign the child a valued responsibility, include the child

on committees, have the class members plan a welcoming party or form a "Newcomer's Club," and a unit on the child's previous hometown could be done. (1981, 162)

This kind of responsive support can be helpful to any child entering a new school.

It is useful for hellos and good-byes to overlap, if at all possible, so that the youngster has the chance to explore the new neighborhood before the move. Adults should consider making arrangements for the child to visit the new school (preferably while it is in session) before they leave the old one and to meet the new principal and teacher. They might ask to have their youngster or teen paired with a classmate and allowed to attend the school for a sample day. If school is not in session, children may still benefit from a visit to the new school before classes start in order to meet and talk with their new teacher, to feel welcomed, to see where their desk or locker is likely to be, and to make sure they know how to get to the gym, the lunch room, the nurse's office.

It is a good idea to help children identify the skills and talents they have that they might use to join clubs or take part in other school activities as a way to make friends. For children who move regularly, membership or experience in a national club, organization, sport, or hobby program provides continuity and easy access to finding a place to belong. Participating in church youth groups and other community activities can also help children begin to feel at home. If the move takes place during the summer, careful thought should be given as to how the child or teen might begin to connect with future classmates. Often school personnel are willing to share names of students with similar interests and friendly natures so that activities can be set up to allow the youngsters to meet. Parents should also check out whether there is a summer sports program or enrichment class at the new school where their child might have a chance to meet some potential classmates in advance.

Children also need a chance to say good-bye to current friends and important adults, to tell them when they are leaving, and to talk about how they might keep in touch. Sometimes caregivers and teachers think of creative ways to help classmates provide extra comfort and support, such as having them assemble a scrapbook of letters and drawings as a good-bye gift or suggesting that they sign a card or a tee shirt with their names.

Mimi Robbins, a social worker in Massachusetts, devised a good-bye ritual for children who were leaving their school and moving into a new adoptive family. Wanting the child to feel the good wishes that accompanied them as they experienced this important change, she would make arrangements with school personnel to have a good-bye party in the departing child's classroom that was attended by anyone who had been important to the child during his or her stay at the school—the principal, the gym teacher, the school counselor, the nurse, and the custodian, for example. The child's foster parents and siblings might also be included. The new adoptive parents were asked to bring cupcakes or treats as their part of the celebration. When one second grader arrived at school on his good-bye day, he found his name listed under the special-events heading on the blackboard. Toward the end of the day, the adults gathered for the party. After the goodies had been shared, the child's classmates and adult friends were asked to form a circle around the child who was leaving. Mimi took out a plastic "magic wand" and asked the children to close their eyes and think of one good wish for themselves and another for the child who was to be adopted. Then she passed the wand around, telling the children that they could think of their wish for themselves as a secret to share or to keep but that they should speak aloud whatever magic wishes they wanted to give to the child and the new family. The intently furrowed brows and quiet respect that accompanied the passage of the wand around the circle, the way the participants grasped the wand and spoke their wishes, and the combination of solemnity and giggles with which wishes and blessing were shared left no doubt as to how seriously

the children took their charge. Several of the adults involved found themselves fighting back tears. The ceremony ended with the new parents spontaneously hugging the child they were bringing into their family.

Helping Children through the Transition from School Year to School Year

The end and beginning of the school year create major challenges for many children who have lost or changed caregivers as they anticipate and experience the changing of teachers who have been their primary contacts at school. Starting about six weeks before the end of school and escalating rapidly thereafter, some children may begin to show behavior difficulties, grow anxious, and become increasingly defensive, both emotionally and physically. They worry aloud that their new teachers won't like them or will be mean. In some instances, problems may subside during summer only to reappear two to three weeks before school starts again. Other children appear unconcerned about school but begin to have problems as the first day approaches (or when confronted with a substitute teacher). This can happen to some children year after year after year, although it may become less intense in middle school or junior high if children have grown accustomed to having more than one teacher. School personnel and caregivers are wise to work together with children who are stressed by endings, the loss of the known, and the fear of the unknown that looms ahead, by using the kinds of bridging procedures discussed in the preceding section. It often helps if children are told who their new teachers will be midway through the last quarter or at least before school adjourns for the summer, to help them begin to settle into what lies ahead in the fall. They may still fret and begin to quiz other children about how strict the new teachers are, how much work will be demanded, and whether the teachers yell, but they still seem to derive some reassurance from knowing ahead of time a little of what's in store for them, especially if they have the chance to meet and talk with new teachers. When school is about to start, visiting the new classroom and checking in with the new teachers for a personal welcome can also make a significant difference for such children and help them worry less about going back to school and managing the new classroom situation.

There is no question that a major loss will have a tremendous impact on a child's life in numbers of ways and that the impact may last for a long while. While it may be impossible to protect children from experiencing difficult losses or separation or to prevent the grief that they will feel, we can help a great deal by being open with them about impending losses, by giving them a chance to integrate the information and say a thoughtful good-bye, and by including them in decisions about the changes that occur, respecting their individuality and the uniqueness of the way they will incorporate and manage the effects of loss and grief in their lives.

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