A hundred years ago, death was dealt with in a more appropriate manner. People died at home, bodies were prepared for burial by family members, wakes were held in the parlour of the family home. Family members were available to assist in picking up the pieces after a loss occurred.

Grief and its accompanying emotions could not be avoided. Birth and death were accepted as life’s cycle. Today, we tend to administrate or anesthetize grief...keeping the pain of loss at arm’s length. Death, coupled with the increase of divorce in families, created the need for emotional support of people, young and old alike, grieving their loss.

Many years ago, support groups were created for adults grieving a death of their spouse. Then divorce support groups were added for adults. No one ever addressed the needs of children and adolescents impacted by a death or divorce in their family.

In the late 1960s, Dr. Elisabeth Kubler-Ross was a pioneer in naming the feelings of grief when faced with death and the process of working through them.

In the 1970s, Dr. Judith Wallerstein did research on the impact of divorce and children. She did follow up research ten years later. Adding to her documentation, Dr. Earl Grollman wrote and researched the impact of death and children. The research concluded these events, when left ignored, have potentially debilitating effects on youth.

Many well-educated, well respected people talked about the negative results loss has on children...no one did anything in a concrete, organised way to support youth while they grieved...until RAINBOWS.

RAINBOWS was founded in 1983 by Suzy Yehl Marta and Reverend Medard Laz. RAINBOWS was established to support and heal grieving children. The first groups implemented were in the Chicago, Illinois metro area. There were 53 children who participated within three schools.

During the next ten years, three other programs were developed: Spectrum, adolescent edition, Kaleidoscope, adult children edition and Prism, single and stepparent edition.
Children know, hear, listen, observe, and incorporate much more than adults realise. Their antenna is finely tuned to picking up cues from those around them. They want to protect adults from further pain just as we have that natural inclination to protect them. Just because they’re not verbalizing what’s going on inside doesn’t mean they’re not grieving. Adults can find it difficult working with grieving children due to three barriers that interfere. One is our own fear of death and the resulting avoidance of uncomfortable realities. A second is a lack of understanding of what words to use, how to act, and what children need. The third and perhaps most insidious is the troubling truth that it is demanding and difficult to ‘be with’ a child whose pain we can’t fix or take away.

We need to understand that grief is not an illness that needs to be cured. It’s not a task with definable, sequential steps. It’s not a bridge to cross, a burden to bear, or an experience to ‘recover’ from. Grieving children do not need to be fixed. Grief is a normal, healthy and predictable response to loss. Its symptoms are normal reactions and may include changes in appetite, sleep, motivation, and energy. Their duration and intensity will vary from individual to individual based on multiple issues including personality, support systems, the child’s relationship to the deceased, and the meaning the child derives from the loss. Not all grieving children or adolescents need therapy, support groups, counselling or professional help. Some do. But in either case, our roles as parents, counsellors’ and teachers are to support and assist, not to ‘fix’, ‘help them get over it’ or ‘move beyond.’

Grieving children don’t need to be ‘taught’ how to grieve as much as be ‘allowed’ to grieve, and to make their own meaning. They will do this naturally, and in healthy ways, if we let them, while we provide safety, honesty, permission, and example. We can get caught up in fixing and instructing, when the skills of evoking and listening better suit the need. We need to be truly available to a grieving child if we do not want to miss ‘the reality of the living soul before us’. Each child is a teacher, and adults who want to assist them need to be willingness to learn from them. Even the youngest children share with adults the insatiable desire to understand, and to make meaning from experience. Why me? and Why did this happen? are questions even three-year-olds ask as they try to make sense of their world. How we assist them in finding their own answers to these critical questions will shape their lives forever.
Often we will want to dismiss children who are ‘acting out’, as if their attention-getting behaviour is best ignored. We need to remember they are acting out their pain, fear, confusion, uncertainty, questioning, and anger. These children are scared and if we disregard their behaviour or are too quick to label, they may need to ‘act out’ in more attention-getting ways. There is a direct link between mental and physical health and the feeling expression of emotions due to grief. However it is not just the expression of emotions that builds positive mental health for the child, it is the belief that they are understood.

After loss of any kind, it is normal, natural and healthy to have feelings that do not feel so good. As adults we encourage children and adolescents to run from, bury, or ignore their emotions much more than we model healthy expression. Often it is because we don’t like the form the emotion displays itself in. anger is a great example. Rather than finding healthy modes of expressing justifies anger, we tend to stifle it because we don’t like how it looks. Instead of saying, “you’re angry because your father died, and I would be too”, and finding healthy ways to vent that anger, we say I don’t like what you’re doing with that anger, so stop it. The child is left unheard and unsupported and has even more to be angry about it.

Many adults struggle with what to tell children after a death. Children need, want, and deserve honesty, truth, and choices. When children are not kept informed what they imagine in their own heads to be happening can be far more frightening than the truth. We build trust by giving honest answers to the questions children ask, even when the answer is “I don’t know”. Allowing children informed choice and multiple options rather than making decisions for them helps them to regain a sense of stability after their worlds have been rocked by loss and by the realisation they can not control everything that happens. None of us can, of course: all we can control is how we respond. But we should not assume we always know what is best for children. When we allow for informed choices, we bypass the common complaint that children were either forced or not permitted to attend or participate in decisions around the deceased. We also empower them to regain some lost control, and to take responsibility for the decisions they make.

Sorrow always needs expression, but it’s not always with words. The more tools and permission we provide for children the more likely they will find their own forms of expression rather than the narrow options we might offer. Give them words to express their sorrow, but also paint and glue and hammers and nails and walks and quiet and music and play and all other possible forms of expression, including silence. This support will enable them to rebuild their self esteem, feel more in control of their lives and become more resilient.

The best thing parents, teachers and other adults can do for grieving children is to listen. To listen, that is, not just with our ears, but with our eyes, our hearts, and our souls. To not presume we have (or have to have) all the answers. To allow for individual differences. To not rush into judgements or pat answers. Grieving the death of a loved one is a process that unfolds in different ways, time frames styles and intensities. Our foremost job is to listen.
Differences in Loss Due to Divorce/Separation/Abandonment verse Death

Fantasy
Permanence of death helps child and family get on with the task of rebuilding their changed family unit. Children in a family break fantasise about their family being reunited. This is especially true if there has been a previous periods of conflict, separation and reuniting. They may believe that if they “behave better” then the absent parent will return. When this fails to happen their sense of self-esteem can be further eroded. Keeping the loss at a distance prolongs the mourning process. Restructuring is also affected by acrimonious and tense relationship between the adults. Children may have strong loyalties to both parents resulting in ongoing conflict, tension, and stress for the child.

Parent – Child Relationship
With a death a bereaved parent is likely to draw closer to the child to make up for the missing parent. In divorce the parent can often see the child adding to their stress – “driving me crazy”.
In most cases death is not by choice. A parent leaving the family can be experienced as being abandoned. Thus the child feels not good about themselves, can lead to more anger. The custodial parent may also feel rejection and anger which also can affects the child’s adjustment. Children often feel responsible for the break-up experiencing self blame and intense guilt. (33% compared to 5%). Child maintenance can often be used to create conflict between separating adults, increasing conflict and resulting financial hardship.
These children also fear repeating their parent’s mistakes. Divorced parents often begin dating earlier than bereaved parents, sparking issues of loyalty and effecting fantasies. Girls from divorced families in some research generally showed more flirtatious and accelerated relationships with men. Parental loss for early adolescents, due to developmental tasks appears to make adapting to changes for this age group more difficult as is the idea of parental remarriage.

Community Attitudes and Support
Children experiencing death of a parent or a family member usually evoke compassion in others and an acceptance of the need to mourn often with accepted bad behaviour. The death is usually openly acknowledged in the class room. This is often not the case with children from separation/divorce families. They are labelled as ‘trouble-makers’ from a ‘broken-family’. Less than 10% of children in a study by Wallerstein & Blakeslee (1989) had an adult speak sympathetically to them as they experienced a family divorce. Within the family itself a child may feel it is not appropriate to mourn due to conflict between other family members and the absent parent. Others do not acknowledge this type of loss as ‘real loss and grief’ while bereaved children are encouraged to grief.
Academic Difficulties
In younger children there is significant school adjustment after divorce (Hoyt & associates, 1990). There is often a marked decrease in academic performance found in children following parent separation. This was still evident 3 years latter (Brisnaire et al. 1990). Significant poor academic motivation and achievement has been found in children after a divorce (Mullholland & colleagues, 1991).

What kids need
Fear and anxieties are reduced by security and appropriate discipline. The grieving, stressed, tied adult may have little energy and often give in to the child’s demands. However consistency in setting limits (children inwardly desire this) and enforcing these can make a child feel cared for, reassured and more secure.
Children Need
Adequate information
Fears & anxieties addressed
Reassurance they are not to blame
Validation of feelings
Help with overwhelming feelings. They need a safe environment to express strong feelings appropriately.
Involvement, Inclusion, Continued Routine, Modelling of appropriate behaviours
The opportunity and permission to remember the past as it was
Children and Grief Due to Developmental Stages

Children 3 to 6 years old

Most traumatic period for a child to lose a parent, as both parents need to be available for the child to interact with at this stage of development as home and family are the important centre of the child’s world. They are aware someone is missing from the family unit and yearn for absent parent. They fear abandonment. If mum is emotionally inaccessible and dad is physically inaccessible, the child may be unable to master their anxiety.

Children’s behaviour often regresses to an earlier stage of development Common disturbed behaviour – crying, yearning, bed wetting, thumb sucking, soiling, aggressive, irritable.

Great fear may be experienced by the child of their imagined powers. Believe their actions control other’s behaviours. One parent has left, other might to. Child maintains fantasies of the non-residential parent’s return.

Does not have a good understanding of space and time so death may be seen as temporary with little understanding of the ongoing absence of the person.

Positive Parent Responses

Give lots of attention and time together
Nurturing through cuddling
Explain changes that are occurring
Teach appropriate ways to release hostility and aggression
Reassure them of your love
7 to 10 year olds

These children will often show a lack of consistency in their behaviour. They can either be aggressive or withdrawn. Some excel at school but most children's grades will usually drop, as concentration is difficult. They experience fears for the future, concerns about money, food, shelter. Are self conscious about family being different Conflict in their loyalties to parents Are angry and blame the parent they are living with or visiting Prevailing sadness, increased crying or withdrawal Reconciliation fantasies Problems with self-identity Insatiable hunger for material things, bikes, clothes, money Experiences conflict with friends Death seen as punishment for being naughty. Thinks of death as a person (ghost) to be outsmarted. May be preoccupied with death images of blood and gore.

Positive Parent Responses

Give constant reassurance both physically and verbally Maintain consistent routine Discuss the situation with teachers Ask family and/or friends to give additional support Teach appropriate ways of acting out aggression
11 to 14 year olds

The overriding concern of this age is to fit in with their peer group, ‘in group’. They are highly sensitive to changes that make them different to their peers, resulting in rejection, isolation and loneliness. Peers are a critical reference group & essential for development of an adolescence identity. They are self conscious about their family being different. 

Experiences anger, denial, intense pain, shame, fear of being forgotten. Their extreme anger is often to cover their intense emotional pain. Loyalty conflicts with parents and worry about custody arrangements


Busy themselves with activities & friends to win approval or will withdraw from friends and activities.

Academic decline and indifference. Feel powerless over their life. Demand adult explanations.

May begin lying, cheating, stealing/shop lifting, drug and alcohol misuse, and become involved in inappropriate sexually active

Understanding that death is final. May have a preoccupation with the way the person died. Sees themselves as immortal.

Positive Parent Responses

Create times for communication
Honestly answer their questions
Affirm their feelings and teach better copying methods
Encourage healthy adult friendships, coach, teachers, etc
Allow some freedom and choice making
Make home a comfortable and nurturing place to be
15 to 18 year olds

As this age group is prone to depression, a lack of support may result in a high risk of suicide, other forms of self-harm and risk behaviours. Most of all they fear being different from their peers, being launched at and being unpopular. Due to their developing autonomy, being in control is important to teenagers. Thus they may hide their grief, leaving them feel abandoned, lonely and helpless. They are very sensitive to emotional tension in the family and usually express this negatively at home. Often over react and their moods change quickly from joy to depression. Struggle with their identity and self-esteem and may compensate for feelings of loss with a need for better “things”. Worry and fear parental physical and emotional stability, parental job loss, lack of finance, being lonely and they struggle with loyalty issues. They often have to take on extra responsibilities at home. Often are placed in the role of ‘good friend’, ‘partner’, or parent to their parent. Understand death is irreversible and that biological functions stop. May experience a mixture of shock regarding their own mortality or undertake risk taking behaviour to continue to cling to a sense of their own immortality. May even ponder afterlife.

Positive Parent Responses

Reassure them of your love and concern and make a home comfortable and nurturing place to be. Set clear limits and expectations Create times for communication and attention Ask family/friends to add support to teenager Encourage healthy adult friendships, coach, teachers, etc Encourage developing independence and choice making
## LIST OF FEELING WORDS

<table>
<thead>
<tr>
<th>Affectionate</th>
<th>Dubious</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abandoned</td>
<td></td>
</tr>
<tr>
<td>Sad</td>
<td>Infuriated</td>
</tr>
<tr>
<td>Scared</td>
<td>Empty</td>
</tr>
<tr>
<td>Joyous</td>
<td>Jealous</td>
</tr>
<tr>
<td>Excited</td>
<td>Envious</td>
</tr>
<tr>
<td>Exhausted</td>
<td>Lonely</td>
</tr>
<tr>
<td>Brave</td>
<td>Fascinated</td>
</tr>
<tr>
<td>Calm</td>
<td>Burdened</td>
</tr>
<tr>
<td>Tense</td>
<td>Nervous</td>
</tr>
<tr>
<td>Panicky</td>
<td>Cheerful</td>
</tr>
<tr>
<td>Crushed</td>
<td>Threatened</td>
</tr>
<tr>
<td>Pleased</td>
<td>Guilty</td>
</tr>
<tr>
<td></td>
<td>Ugly</td>
</tr>
<tr>
<td></td>
<td>Pressured</td>
</tr>
</tbody>
</table>
Is your child having trouble leaving you?

Separation anxiety is when a child gets upset when separated from a parent or a loved carer. Separation anxiety is normal during early childhood. It usually starts at about six to eight months of age and can last until four years of age. Sometimes it can last longer. It can be very distressing for a child and parent when your child does not want to leave you. It can be a very emotional situation, often making it hard to think let alone come up with a creative solution to the problem.

What do you do?

1. **Let your child know what to expect** with lots of detail before you drop them off at their intended place of care. Books and stories can be very useful in helping your child understand what to expect. Being honest, positive and specific helps to take out the worry of the unknown.
2. **Have small practice separations** e.g. play peek-a-boo or hide and seek. Leave your child for 5 minutes with a close family member or friend before returning. The next time leave your child for 8 minutes and then 15 minutes and so on. Each time you return be positive and show your child you are happy to see them again.
3. With older children when you leave **tell them what time you will return** or show them on a clock where the hands will point.
4. **Talk about the day’s positives** when you pick them up and acknowledge their feelings. Avoid statements like ‘Now now, don’t be silly’.
5. **Show you trust the carer** you are leaving them with and be confident.
6. **Avoid rushing** so your child has time to settle before class starts. Play a puzzle with your child and engage them in an activity that they can return to when you leave.
7. **Be on time when you are picking your child up.** It is ok to come early, however if you are picking your child up from a class be sure to stay out of sight until the time as this can upset your child again if they see you and can not go to you immediately.
8. **Let your child mind something special** of yours and reinforce how special it is so your child knows you must return to collect your special item. This can also give your child a sense of responsibility and control which may assist them to settle quicker.
9. **Let your child keep a comforter** if they desire.
10. **Always say goodbye**, even if you have to go while they are upset and be firm with tears. When saying goodbye do be firm in explaining that mummy has to be somewhere very important like work or a meeting. Avoid telling your child you have to go to the doctors in case this increases their worry.
11. When departing **say goodbye and go quickly**, without hesitation. Don’t linger in the door way or stay to talk to the carer some more.