Children and Grief
A Guide For Parents and Caretakers
— The Goldstein Family Grief Center —
Hospice of Cincinnati opened The Goldstein Family Grief Center in 2011 as the first comprehensive grief center in Greater Cincinnati focusing on both adult and children’s grief. The Center provides a place for people of all ages in our community to share their feelings of loss, deal with their grief and learn to find joy in their lives again.

Hospice of Cincinnati, in partnership with its affiliate Fernside, is committed to providing the highest quality and most comprehensive grief support services in our community.

Hospice of Cincinnati is a not-for-profit hospice sponsored by Bethesda Inc. in a collaborative community partnership with TriHealth and Bon Secours Mercy Health.

Hospice of Hamilton, Fernside and Conversations of a Lifetime® are supported by Hospice of Cincinnati.
The Goldstein Family Grief Center offers two distinct programs for children who are grieving the loss of someone they love due to death—

Individual/Family Counseling through The Goldstein Family Grief Center
Sometimes professional help is needed because of the circumstances surrounding the death or a child’s individual emotional well-being. Below are some general guidelines for determining if your child may benefit from seeing a counselor for individual/family support:

Your child is experiencing:
• Persistent generalized anxiety or ongoing specific fears
• Ongoing physical complaints with no apparent cause
• Persistent symptoms of depression which may include:
  • Sad or depressed mood almost every day
  • Loss of interest in activities that were enjoyed previously
  • Changes in sleeping and/or eating habits
  • Feelings of hopelessness
  • Trouble concentrating

Peer group counseling through Fernside—A Center for Grieving Children
Fernside offers groups for children ages 3-18, who are grieving the death of a family member or friend. In the groups, children and teens meet with others their age grieving a similar death. Trained facilitators address a theme each meeting. These themes include telling our story, feelings, changes and rebuilding, memories and many others. Facilitators address these themes through expressive arts, games, music and group discussion. Parents and guardians of the children attending groups also meet in a support group to address their own grief as well as receive support and education on how to help their grieving children.

Evening groups meet twice monthly and are held in the following neighborhoods: Anderson Township, Blue Ash, Bridgetown, Downtown and West Chester/Liberty/Hamilton. To register or learn more, contact Fernside 513-246-9140.
Anticipatory Grief and Children

Anticipatory grief occurs before the death has occurred and often generates feelings of fear and confusion. Educating and preparing a child for the anticipated loss can help ease the experience and facilitate healthy change.

1. Be honest and direct
Trust is a basic foundation in a child’s psychosocial development. Dealing with the truth, even a sad and upsetting truth, in a supportive family environment, has the benefit for the child of reducing anxiety and too much uncertainty.

2. Let the child’s questions guide the discussion
Adults may think they need to share or explain everything, but children are often satisfied with short answers. It is important to understand what the child is asking; we need to address the question and underlying feelings. The response should be open-ended, enough to allow the child clarification and reassurance. It is okay to say “I don’t know” in response to a question.
3. Provide opportunities for the child to express feelings
Feelings can include sadness, anger, guilt, ambivalence and anxiety, among others. Adults can help by listening, validating the child’s feelings and sharing their own feelings and ways they cope with them.

4. Be sensitive to the child’s readiness to communicate
Don’t force the issue. Understand that for varied reasons the child may not be ready, or have the desire or energy to communicate.

5. Communicate with school, neighbors and other social supports
The experience of impending death can impact a developing child and his/her ability to function and learn. Children may “act out” or isolate themselves from friends and school activities. It’s important to share relevant information with teachers and family friends/classmates.

6. Invite children to help with care, but don’t force it
For example, a small child may bring a cup of water to Grandpa, a teenager might help prepare a meal, and a 17-year-old might drive to the grocery store to get food/supplies.

7. Visiting
The child should be given information, options and support. Fully inform the child how the person looks, feels and responds. Explain any medical equipment as well as their physical appearance. If the child does not want to visit, do not force them.

8. Some important don’ts
Don’t lie. Don’t make promises you can’t keep. Don’t be afraid to say “I don’t know.”
15 Ways to Help Grieving Children

As a concerned and compassionate adult, trust your instincts, hunches and gut feelings. Kids are resilient. You will not say something that will cause them irreparable damage. At the same time, be open and honest with yourself and examine your own thoughts, feelings and understanding.

1. Listen and listen some more
Allow the child to tell their story. Don’t give advice or make judgements. Paraphrase the child's words and ask clarifying questions.

2. Be honest and answer questions children ask
Never lie to a child. Despite our desire to protect, the hard and painful reality must be addressed. Be sensitive and age appropriate. Talking around or avoiding issues only complicates and confuses.

3. Encourage consistency, routines, rules and limits
This helps rebuild a sense of stability and security for the child. Many changes accompany death and each change is, in effect, another loss and possible source of stress. Children can be helped by maintaining consistency in certain routines to establish a sense of order.

4. Talk about and remember the person who died
This is part of the healing process. Children need to remember and share their memories. Allow children to talk about the deceased person and choose personal keepsakes.

5. Help your child find a safe grieving person and/or place
It is important for children to have at least one person with whom they feel safe in expressing their grief. This could be a parent, teacher, older sibling, friend, counselor or support group.

6. Expect and allow all sorts of emotions
Help the child feel safe by listening and validating their emotions. This will help children recognize, feel safe and know that it is acceptable to feel a variety of feelings.
7. Attend to the child’s physical aspects of grief
Grief hurts. Sometimes children experience physical aches and pains.

8. Forget about the “grief stages”
Grief is not linear. It does not neatly proceed through stages.

9. Respect differences in grieving styles and when they wish not to talk about the death
Children’s grieving styles can be very different. Even siblings can grieve in very different ways. There is no right or wrong way to grieve. Talking about death can be helpful but pushing a child or teen to talk isn’t always helpful. Show compassion but don’t force them to talk.

10. Provide reassurance
Children need lots of reassurance after a death. Many grieving children will exhibit anxiety and will need help reestablishing a sense of security.

11. Inform school
Children spend a lot of time at school. It can help to inform teachers and staff so that everyone can support the child.

12. Help children know that they are not alone in their grief
Children want to belong. Helping a child find peers who have experienced a death in their family helps decrease their sense of loneliness and isolation.

13. Remember special days and holidays that impact the child
It can be helpful to set aside time to remember the person who died on these special days. Invite the child(ren) to make suggestions on how to address these occasions.

14. Seek additional help for the child if needed
If the child’s physical, emotional or behavioral symptoms are persistent and ongoing, seek additional help from a counselor.

15. Take care of yourself and your own grief
Children take their cues from their parents and other adults around them. If you are doing your own grief work, your child will most likely do the same.

Remember: You cannot take away the child’s concern and worry. You can only be there for them as a source of honest and accurate information, emotional support and companionship.
Grief is a normal, natural process. This experience comes with challenges for everyone, regardless of age or circumstance. However, there are significant differences between adults and children that make coping with the death of a loved one especially challenging for children. Adults have passed through childhood and its developmental stages and have a complete understanding of death. Children, on the other hand, are still developing an understanding of death.

The information in this handout is intended to inform and guide you as you support grieving children. Note that the information in the earlier stages of development may also apply to children in older stages. Grief is different for every child.

Infants & Toddlers

At this young age, babies and toddlers don’t have an understanding of death nor the language to say how they are feeling. However, they can definitely experience feelings of loss and separation and are likely to pick up on the anxiety or distress of close adults or others around them.
How they might respond to the death
• You may see them looking for the person who has died
• You may notice a disruption in their sleeping and/or eating routines
• You may notice a change in their general disposition, more irritable, clingy or quiet

How we can help
• Keep routines as normal as possible
• Hold and cuddle them more, speaking calmly and being calm
• Be flexible when setting limits

Early Childhood (ages 3-5)
At this age, children find it hard to understand that death is permanent. Their thinking is literal and concrete. They see death as temporary or reversible. They may think the dead person is coming back or believe the dead body functions as if it were alive. Preschoolers believe in “magical” thinking. They may feel confused, guilty, and/or responsible for the death and may believe that their thoughts/wishes caused the death. They understand separation and feel insecure and frightened when the familiar things around them change. This age group needs a lot of reassurance that they will be safe and looked after.

How they might respond to the death
• They use play to act out the death and their feelings about it
• They may show regressive behaviors (e.g., bed-wetting, baby talk, clinging, thumb-sucking)
• They may have difficulty sleeping, or a change in eating habits
• At times they may seem unaffected by the death

How we can help
• Keep routines as normal as possible
• Give simple, factual information about the death (e.g., his body stopped working)
• Encourage questions and give honest, age-appropriate answers
• Check to make sure they are not confused about the death or feel responsible for it; clarify any misunderstandings
• Avoid euphemisms (“Mommy is an angel now”)
• They are often concerned with security issues (e.g., who will take care of me if you die?)
• They may or may not feel comfortable expressing these new and intense feelings verbally
• They may show regressive behaviors (e.g., separation anxiety, difficulty sleeping, etc.)
• At times they may seem unaffected by the death
• They may have a fear of ghosts/monsters/spirits and experience bad dreams/nightmares
• They may become fascinated by details of the death and in what has happened to the body
• They may experience difficulty with friend/peer relationships (e.g., teasing)

How we can help
• Keep routines as normal as possible
• Encourage questions and give honest, age-appropriate answers
• Avoid euphemisms (“Mommy is an angel now”), and provide honest answers

Middle Childhood (ages 6-9)

Primary school children are still learning to understand death and can have some confused thoughts about it. Children in this age group understand that death is permanent but may think the dead person still feels things, such as coldness, hunger or loneliness. They may ask where the person is now, and have questions about what happened to them and their body. They have an awareness that they can die as well as others. They recognize that death means changes in the family system. Explaining death to them is very important.

How they might respond to the death
• They may fear that they will die or that other people will die
• Role-model and validate feelings
• Share memories of the person who died
• Let the child’s questions guide you as to how much information they need
• Check to make sure they are not confused about the death or feel responsible for it, and clarify any misunderstandings
• Encourage play. Children often can use play to help them process what’s happened. This may include sand play, puppets, dolls, writing, drawing, painting and various physical activities

How they might respond to the death

• They may be especially anxious about the safety of family and friends, and themselves
• They may try very hard to please adults and not worry them, and so not let themselves grieve or act out in order to gain attention and needed security
• They may experience difficulty with friend/peer relationships at a time when these relationships are becoming important to them
• They may experience problems in school (e.g., grades, concentration)
• They may feel embarrassment, feel different from their peers, and/or conceal their loss
• They may become more focused on what’s happened and ask questions, think about it a lot, have dreams about it, and perhaps want to talk about it often to others

How we can help

• Encourage children to express their feelings and encourage questions, be an available listener

Late Childhood (ages 10-12)

All of the above relate to this age group, but it’s important to be aware that this age group understands that death is permanent and that we all die. They begin to think more in the abstract and may begin to ask why. They understand the ramifications of the death (“My mom and I can’t go shopping together anymore.”) They are also more aware of how adults and others around them are reacting to death. They begin to identify more intensely with adults of their gender. As a result, they may assume stereotypical or expected gender roles.
such as anger, guilt and fear overwhelming or scary and are unable to
find the words to talk about it with others. They may want to be seen and
feel as if they’re coping well, but inside they’re hurting a great deal.

How they might respond to the death

- Experiencing a death during adolescence can add stress to the
  physical and emotional changes already occurring
- They are in the process of breaking away from their parents/family
  and a death can complicate this normal developmental task
- Friends/peers are important to teens. They may struggle with peer
  relationships or turn to peers for support. In some instances they
  minimize or deny their grief in order to fit in with their peer group
- They may hesitate getting close to others to avoid further
  hurt/rejection
- They may have an intense sense of loneliness and isolation and
  possibly have suicidal thoughts
- They may want to be near family more, or withdraw and be alone
- They may have physical complaints—stomach and/or headaches, or
  may change eating/sleeping habits
- They may wonder about life’s meaning and the meaning the death
  has for them

Adolescence/Teenagers (ages 13-18)

By adolescence, death is accepted as part of life, but it may not have
affected a teenager personally yet. Their reactions may fluctuate between
earlier age group reactions and reactions that are more adult.

Teens understand death and what it means to them and their family
(e.g., financial concerns).

They also have an awareness of how the death impacts the future
(e.g., graduations, weddings). They may find the intensity of emotion

- Give honest, age-appropriate answers and provide regular
  reassurance
- Avoid expectations of older behavior – allow them to be the age and
  stage they are
- Reconsider making big changes
- Provide security and stability by telling them where you are and how
  they can contact you
- Encourage discussion about the positive ways they are coping and
  provide examples
• They may have trouble concentrating, especially in school, and grades may drop
• Some teens may avoid risks while others feel invincible and engage in risky behaviors
• They may turn to behaviors such as alcohol/drugs to numb their pain or to prove they’re alive and strong
• Research also shows that many teens experience an increase in self-worth and self-esteem and demonstrate a higher level of maturity

How we can help

• Acknowledge the loss experience, and listen in non-judgmental ways
• Role model healthy expression of feelings, help develop coping and problem-solving skills
• Help them build better relationships with family members (e.g., immediate and extended)
• Help them identify and/or build support systems (e.g., teachers, friends, church, religious or spiritual groups)
• Let them know it’s okay and healthy to take a break from grief
• Encourage healthy outlets to express grief (e.g., physical activity, talking with friends, poetry or journaling, sports, playing/writing/listening to music, art/photography)
• Help them maintain a healthy connection to the person who died
• Encourage discussion about the positive ways they are coping, provide examples
• Avoid expectations of adult behavior – allow them to be the age and stage they are, encourage them to express their thoughts and feelings
• Talk about death together and answer any questions they may have
• Let them help in planning the funeral or do something to remember the loss

When Additional Help May Be Needed

Bereaved children and teenagers will need ongoing attention, reassurance and support. It is not unusual for grief to resurface later on, well after the death. This can happen as they move through different life milestones, and develop as individuals.

Sometimes professional help is needed because of the circumstances surrounding the death or a child’s individual emotional well-being. If you
are concerned about any extreme reactions contact your doctor or other trained adviser, such as a counselor, faculty or nurse from their school; social worker; community or youth worker; or a local family support agency.

Below are some general guidelines for determining if your child may benefit from seeing a therapist/counselor:

• Your child is experiencing persistent generalized anxiety or ongoing specific fears.
• Your child is reporting ongoing physical complaints with no apparent cause.
• Your child is experiencing persistent symptoms of depression which may include:
  • Sad or depressed mood almost every day
  • Loss of interest in activities that were enjoyed previously
  • Changes in sleeping and/or eating habits
  • Feelings of hopelessness
  • Trouble concentrating

 Seek immediate professional help if your child is demonstrating risky or self-destructive actions or behaviors or expressing suicidal thoughts or making suicidal gestures or attempts.
Saying Goodbye
Children and Funerals

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Often adults are unsure how to deal with the topic of children and funerals. The following are suggestions for helping families make the decision if a child should attend a funeral and how to prepare them for the experience.

Should children attend?

The importance of choice: After the child is given some information about the funeral, wake or service, allow them to make the choice about attending or not. However, if the child is given a choice, be prepared to follow through with the child’s decision. Sometimes, other people (like friends and relatives) may voice disagreement in the child attending the funeral. Try to be firm in the child’s decision and in your own decision.

If a child chooses not to attend: Other ways to say goodbye may be available, either at this time or at a later date. It is never too late to say goodbye. A personal memorial service, a letter-writing activity, a lantern launch or another ritual can be done if the child wishes.
Preparing the children

- Discuss the events of the day step by step, including the service, procession and cemetery.
- To the best of your ability, describe the environment (funeral home, casket, flowers and people who might be present).
- If the deceased is in a closed casket, explain the reason for this and reinforce that the body is actually inside, even though it can’t be seen.
- If there will be an open casket, discuss what the body will look like: how it will feel cool and hard (like a wall); that they will appear to be sleeping; and what the difference is between sleeping and death (when you are dead you don’t breathe and your heart doesn’t beat); and that it’s okay to touch the body if they want to.
- If the body is to be cremated, help the children understand that this is another way to take care of a body after someone has died. You may say that a very hot heat quickly turns the body into ashes and that the cremains or ashes are placed in a very special container called an urn.

- Talk about what will be expected of the child.
- Discuss possible feelings that adults and children may experience and how these will look, like sadness and crying. Let children know that some people, including themselves, may be giggling or laughing. Explain this does not mean that people are not sad, but that people experience a lot of different feelings for different reasons.

At the funeral, wake or service

Encourage the child’s participation such as letters, pictures, gifts or small objects in the casket. It’s helpful to designate a trusting adult to be available for the children. Parents are not always able to deal with their own grief as well as care for their children, especially during a funeral. Remember that children grieve sporadically. They may need to take a break. Allow them to leave and play in a safe area. Bring some favorite books, toys or activities for them to enjoy.
Casket: A special box that holds the body. It can be made out of wood or metal. The vault holds the casket. The casket and vault are then buried at the cemetery.

Cremation: Another way to take care of a dead body. A very hot heat quickly turns the body into ashes. The ashes or cremains are placed in an urn or a container.

Cemetery: A place where remains of dead people are buried in either a casket or a vault.

Dead: When a body no longer works. There is no breathing or heartbeat. The brain does not think and the body does not feel anything. Only then can the body be taken to the funeral home.

Funeral: A special ceremony to say good-bye to the person who died and comfort the family. Some funerals are held in the funeral home, others in churches or other religious or spiritual settings.
Memorial Service: A ceremony to say good-bye when the body is not there.

Funeral Director: A person who knows how to take special care of dead people and plans the good-bye ceremony with the family.

Funeral Home or Chapel: A house or building where people come to be with each other and say good-bye to the dead person.

Grave: The carefully-dug hole in the ground where the casket is placed at the cemetery.

Grave Marker or Head Stone: Something on the grave to tell who is buried there.

Grief: The natural way we feel about the death of a person we love. We may cry, and/or feel lonely, scared, forgetful, or angry. It takes time to learn to live without the person. Sharing our feelings with someone who will listen really helps.

Hearse: The big car that carries the casket to the cemetery.

Limousine: The long car with many seats that drives the family to the cemetery.

Pall Bearers: People who carry the casket.

Urn: The jar where the ashes of the dead person are placed. It can be made out of many things but usually glass or metal.

Visitation or Wake: A time when people come together to share happy and sad thoughts about the person who died.
The Goldstein Family Grief Center
Promoting Healing for Life After Loss

For an appointment call Hospice of Cincinnati at 513-246-9208

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