Helping Children Cope with Death and Dying

If you’re worried about talking with your child about death, you’re not alone. Most of us hesitate to talk about death, especially with children, but by talking with them, you can discover what they know and don’t know, what myths they believe, and even some things about your own feelings surrounding loss and grief. What you say to children about death and dying depends not only on their age, developmental level, and experiences, but also your experiences, beliefs, and feelings.

As children encounter illness, loss, and grief, they seek to understand the events and make sense of what they’re feeling and experiencing. Whether adults realize it or not, children are aware of death. Most have seen a bird, insect, or animal lying on the ground. They may have seen death on television or in a movie, and they hear about it in fairy tales.

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While they may not yet have an adult’s sophistication as they seek answers, they can turn to their beliefs, faith, rituals, and practices to help them gain understanding. This process makes children “spiritual pioneers,” a phrase first used by Dr. Robert Coles to describe children who are trying to make sense of the world without the cognitive-spiritual maps that most adults possess.

Children have a complex development process influenced by many factors, including religious and spiritual organizations, mainstream media, books, magazines, celebrities, public figures, and other cultural icons. Unlike adults, children don’t make clear distinctions between spirituality and religion. Even very young children may have clear, though often fluid, ideas about faith, prayer, and divine experiences. Religious and spiritual experiences can exert a powerful influence in their lives, affecting their moral development, their idea of social relationships, their way of perceiving themselves and their behavior, and their way of integrating daily occurrences into a broader spiritual view.

Communication Barriers

Not talking about something isn’t the same as not communicating, and children are great observers. They read body language and watch our faces and hands, or they sense the mood in the room. Since all of us express ourselves by what we do, say, and do not say, we’re communicating all the time and sending children messages about our own feelings.

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whether we intend to or not. If we appear upset when
talking about illness or death, or avoid talking about
it altogether, children might receive the message
that these subjects are taboo, that it is not good to
talk about any of it because it is bad and wrong. This
suppresses emotions and may cause them increased
anxiety and worry.

Although death is a normal part of life, it’s often not
treated that way anymore. Just a few decades ago, it
was still an integral part of family life because people
died in their homes, surrounded by loved ones. Adults
and children experienced death together, mourned
as a family, and comforted one another through the
process of grief. Today, death is a lonelier experience
for most people, especially those who die in hospitals
or nursing homes. Their loved ones may not be able
to support them through their last moments of life, so
death has become more removed, more mysterious,
and more frightening.

Ultimately, treating death as a taboo doesn’t support
the dying person or their friends and family spiritually,
emotionally, or physically.

Further, spiritual and emotional support for a child
who is dealing with death and/or dying must include
talking with the child about death. Elisabeth Kübler-
Ross (1983) wrote:

Every person, big or small, needs one person in which
to confide. Children often choose the least expected
person: a nurse’s aide, a cleaning person, or at times
a handicapped child who comes to visit them in a
wheelchair … and since they have gone through the
windstorms of life at an early age, they know things
that others of their age would not comprehend….They
become stronger in inner wisdom and intuitive
knowledge. (p. 2)

Talking with children does not mean confronting
them with information they may not yet understand
or want to know. The best approach is a balance that
encourages children to communicate and remains
sensitive to their feelings, age, and ability to articulate
what they want to say.

Questions often arise about spiritual and religious
issues. Why us? Why now? and Why this? may be asked,
and support for all members of the family is important.
Religion and spirituality are sources of strength and
sustenance to many individuals, including children,
when they’re dealing with death. However, if religion
has not played a major role in a child’s life, suddenly
introducing it in association with death or dying
may be frightening to the child. Children often
think literally, and religious explanations such as “it’s
God’s will” or “your brother is with God now” can be
frightening rather than reassuring. (“God took my little
brother. Will He come and get me next?”) But if the
child already has a concept of a loving God, the idea of
reunion with God may be comforting.

Developmental Stages
Children experience a series of stages in their
understanding of death.

- Infants (0 to 2 years of age) will often sense a
  loss and may pick up on the grief of a parent or
caretaker. Infants and children with limited verbal
ability may have no concept of death and instead
react to their sensations and physical relationship
to their surroundings. They may also experience
changes in their eating, sleeping, or toileting
habits.

- Preschool children (ages 2 to 5 years) usually see
death as reversible, temporary, and impersonal.
They have often seen cartoon characters that
miraculously rise up after being crushed or
exploded, so they do not yet understand the
permanence of death. Preschool children may
not be able to understand their own death.
Clear, unambiguous explanations about what is
happening to them are important to preschool-
aged children. Keep answers brief, simple, and
repeat them as necessary.

- School age children (ages 5 through 9 years)
usually begin to understand that death is final
and all living things die, but they do not yet
understand the personal nature of death. They
may believe they can “escape” death by bargaining
or by their own efforts. If they are terminally ill,
letting children in this age group have some
control whenever possible (such as participating
in medical decisions when appropriate) is helpful.
They usually associate death with a skeleton or
angel of death or “bogey man,” and some children
have nightmares about these beings.
From 9 years of age through adolescence, children begin to fully understand that death is permanent, that all living things die, and that they, too, may die some day. Pre-teens may see death as punishment for poor behavior and may need reassurance that wishes do not cause death. Some children at this age will develop spiritual or philosophical views of life and death, and older children (especially teenagers) may react by taking unnecessary risks in attempts to confront death and take “control” over their mortality. Adolescents may have an even more sophisticated view of death, so reinforcing self-esteem, respecting privacy, and allowing participation in medical decisions are important.

After a Child’s Death

Losing a child is especially tragic and painful. It’s not the natural order of life, and the death of a child creates special challenges for families. While grief can be shared with the surviving children, they will also have their own grief, and parents should not burden the surviving children with unrealistic expectations, concerns, or worries. Idealizing a dead child or making comparisons between a child who has died and those who survive can create feelings of unworthiness and increase the guilt of the surviving children.

Survivor guilt, suicidal thoughts, inconsolable grief, withdrawal, and self-accusations are common and may require formal counseling, since the intense grief reactions may remain for at least four years. Siblings cope in a variety of ways depending on their developmental stage. Shock, anxiety, and resorting to familiar activities (such as play) are common.

Siblings are also keenly aware of their parents’ or family’s pain and worries and cannot be fooled. If they are allowed to share in the sorrow, they can often provide support in the form of a hug, a smile, or an insightful comment. Sharing feelings with them makes the loss easier to bear, and it helps prevent them from feeling guilty or as if they’re the cause of all the anxiety. Healthy children should be allowed to laugh, giggle, bring friends home, or watch television (Kübler-Ross, 1983).

The following poem was written by a girl when her sister was dying of a brain tumor. It is a powerful example of how children view the death of a sibling.

I don’t want her to go.
She and I always loved to play in the snow.
The silly sled loved to go faster and faster.
Now she is too sick to jump around and glow.
She was always like a dancing rose.
Now she just lays, while the bed hugs her.
And her animals just watch over.
I try to keep positive thoughts, but it’s so hard to know that someday she just might go.

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The death of a close family relative can arouse feelings of anger. You might feel angry because someone caused you pain and sorrow, or “left” you alone to cope with life. You might be angry because doctors and nurses could not save a loved one, or because you could do nothing to prevent the death. Children can have these same feelings and are apt to express anger openly, especially if they have lost someone on whom they depended for love and care.

Remember that anger is part of grief. Children’s anger should be accepted, and they need to be reassured they will be cared for. If their anger turns inward and they become depressed, withdrawn, or develop physical symptoms, they may need professional help.
Individual Reactions to Death and Dying

Children go through various stages in the way they perceive death, and each child will experience an individual reaction to death and dying experiences. However, grieving children who experience the following may need additional parental and/or professional support:

- Marked changes in school performance
- Poor grades despite trying very hard
- Excessive worry or anxiety manifested by refusing to go to sleep, go to school, or take part in appropriate activities
- Frequent angry outbursts or anger expressed in inappropriate or destructive ways
- Not talking about the person or the death
- Hyperactivity
- Persistent phobias or anxiety
- Accident-proneness or possible self-punishment or a call for attention
- Persistent sleep disorders or nightmares
- Stealing, promiscuity, vandalism, illegal behavior, persistent disobedience, alcohol or other drug abuse, or social withdrawal
- Many complaints of physical ailments, including changes in eating habits
- Depression, thoughts of death, or long-term absence of emotion

WHAT CAN YOU DO TO HELP?

- Determining what to do to help the child who is experiencing a loss depends on the following:
  - The child’s developmental level
  - Whether the child is experiencing his or her own illness or dying process (and what condition is causing it) or witnessing someone else’s dying process
  - The child’s coping strategies
  - The family’s unique psychosocial, cultural, and economic variables

These healing guidelines are helpful to remember:

- Before a death, help the child with anticipatory grief by giving appropriate information about the physical, emotional, and mental condition of the terminally ill person and then giving the child a choice of visiting or remaining away. If the child wishes to care for the dying person, allow them to do so. Allow the child to participate in meaningful ways of saying goodbye. Keep their schedules and boundaries as close to normal as possible and provide affection, love, care, and supportive listening.

- Death is easier to talk about when children have permission to talk about the subject and believe you are sincerely interested in their views and opinions. While it may not be easy to “hear” what a child has to say, listening attentively, respecting their views, and answering questions honestly help children deal with death in a healthy way.

- It is vitally important for parents, family members, and guardians to respect the process of grief and loss that children experience and talk with them about the experience. Some people are afraid of saying the wrong thing, others feel that spiritual issues are out of their realm of expertise, some have personal conflicts with what is occurring, and others may not understand your family’s cultural practices surrounding death, rituals, and the afterlife. If you need help and support, ask an experienced healthcare professional or spiritual counselor for guidance.

- Take children’s questions about death and dying seriously, and share your own beliefs with them to help them deal with the same issues that are faced by everyone as they journey through life.

- When addressing the child’s needs, consider the child’s developmental level.

- Hold and/or comfort the child, use play therapy, make sure the child has adequate pain control (if the child is the one with the serious or terminal illness), and take the time to participate in activities that support your child’s and your family’s spiritual life.
• Use poems, anecdotes, metaphors, storytelling, and journal writing (appropriate for the particular developmental stage of the child), as well as biographical scrapbooks and literature that the child finds meaningful.

• Listen attentively, asking questions for clarification, answering questions honestly, and refraining from giving glib answers. Alleviate the child’s suffering in any way possible, establish routines, and permit the child to do what he or she can to establish a routine.

• Speak to the child (versus about the child in their presence), be careful about discussing certain topics that might be frightening to the child and would be better discussed privately among adults, and be patient with children who are frustrated, sad, or scared (and reacting in a “rude” manner).

• Support siblings who may experience many different outcomes as a result of losing a loved one. They may develop higher levels of self-esteem as they help the family with responsibilities and activities around the home. They may develop greater empathy and maturity as they strive to cope with the impact of the chronic illness on a sibling. Conversely, siblings may also experience jealousy or resentment about the special attention a sick sibling receives. They may also experience sadness, loneliness, anxiety, or guilt if they feel they somehow contributed to a sibling’s illness.

• Seek out support through family, friends, healthcare providers, counselors, or support group members—anyone who provides a “safe place” for the child and you or other family members to express emotions and vent feelings that might be uncomfortable or unacceptable if they were expressed to other family members. Take advantage of the support you are offered. Support groups, trained healthcare professionals, and compassionate family and friends can provide much-needed support during this difficult time.

• Know that differences exist in the way men and women express grief and mourning. For example, if a newborn child dies, the father may contain his grief in an attempt to care for his wife, who is grieving more openly for the loss of her child. Men often choose anger as a way to express grief, while women choose sadness. Some cultures express grief through tears and communal sharing.

• Try not to romanticize explanations of death and dying, as children often interpret such stories literally. For example, children who are told that “God wanted an angel with him in heaven” may fear that he or she too will be wanted by God and taken to heaven.

• Reminisce with the child about the loved one. Keeping happy memories alive can ease the pain of the loss over time. Help children understand that memories and legacies of someone who has died can be shared, remembered, and celebrated, even if tears are shed during the process. Take the time to reassure the child honestly and simply that the emotions of grief are normal and healthy, and sharing them can help to heal the pain.

• If you haven’t done so, take the time to learn about spirituality, health, and death as they relate to your own culture and religious beliefs. Taking the time to understand these practices can improve your grief and mourning process.

• Remember it is acceptable not to have all the answers. Death is one of life’s greatest mysteries, and coming to terms with it can be a lifelong process. If you have unresolved fears, you may wonder how you can possibly provide comforting answers to children. While you may not have all the answers, you can share what you believe, and when you have doubts, you can say honestly, “I just don’t know the answer to that one.”

References


Fosarelli, P. (2008). The psychospiritual lives of ill or suffering children and adolescents: What we should know, what we should do. In V. B. Carson & H. G. Koenig (Eds.), Spiritual dimension of


