

The Center for Health and Health Care in Schools and the Wendt Center for Loss and Healing have partnered to provide trainings and materials on grief, loss and trauma among children and youth. This series is funded through the generous support of the J. Willard and Alice S. Marriott Foundation.



Grief Defined

The experience of and reaction to any loss - not just due to death. Grief is always a multi-faceted, time-varying response that contains physical, cognitive, behavioral, social, spiritual, and philosophical components. These components are often experienced in “waves” across the grief process.

Preschool

Common Response to Loss

- Crying or screaming
- Clinging to caregivers or other trusted adults
- Fear of separation
- Regressive behaviors such as wetting pants and thumb sucking
- Decreased verbalization

How to Support

- Avoid euphemisms as preschoolers have trouble understanding death and may believe the death is reversible.
- Provide opportunities to express thoughts and feelings about death through play activities and drawing.
- Answer questions using concrete descriptions and be prepared to repeatedly answer questions.

Elementary School



Common Response to Loss

- Behavioral difficulties
- Decreased concentration
- Poor school performance
- Depression
- Irritability
- Withdrawal
- Somatic complaints (headaches & stomach aches)

How to Support

- These students may ask questions and seek to try to understand what happened. Be patient and refer them to adults that can answer their questions.
- Students below the age of eight may engage in magical thinking and believe they could have prevented the death. Recognize these feelings and fears but do not validate them.
- Students ages nine through twelve may feel less comfortable showing feelings and seeing expressions of grief in others. Make sure to provide these students with a variety of ways to express grief.

Middle and High School

Common Response to Loss

- Poor school performance
- Anxiety
- Depression
- High risk behaviors or substance use
- Emotional numbing
- Suicidal thoughts

How to Support

- Provide opportunities for students to share both individually and in group settings, while being mindful not to force sharing in a context the student does not prefer.
- Students often seek support via social media. Be aware of what is being posted and shared.
- Encourage students to seek support for a friend in need.
- High school students may use physical contact to show their support and empathy (e.g., hugging or touching the arm).



Avoid Unhelpful Phrases

Many of us have learned particular phrases or responses when dealing with difficult events that actually have the potential to be harmful. Even if we have the best intentions, it is the impact on the child that really matters.



Even with the best of intentions, words can be harmful to kids and teens:

- DO NOT suggest that the students have grieved long enough.
- DO NOT indicate that the student should get over it and move on.
- DO NOT expect the student to complete all assignments on a timely basis.
- DO NOT act as if nothing has happened.
- DO NOT say things like:
 - “It could be worse, you still have one brother.”
 - “I know how you feel.”
 - “You’ll be stronger because of this.”

Instead of:

"It's okay, don't cry."



"What's wrong?"



"Just think about something else."



Try Saying:

"I have some ideas that might help with your big feelings."

"I can see that something is bothering you - want to talk about it?"

"Do you need help finding a coping skill?"

Steps You Can Take to Help



- Tell the truth, use accurate words such as died, killed, died by suicide.
- Listen without judgment.
- Say something that acknowledges you know about the death and care, like “I’m sorry about your mom’s death, and I would like to help in any way I can.” [Some kids say they don’t like people to say they’re sorry because it’s not their fault.]
- Talk about the person who died, using their name and sharing memories.
- Provide structure and routine with flexibility as needed.
- Seize those special moments that may arise in class to teach about grief.
- Know that you can’t take away the pain, fear, aloneness or feeling of being different. And understand that your role is not to get rid of those feelings, but to provide a safe atmosphere where they can be expressed.
- Provide a structured, safe environment for grief.
- Comprehend that the student’s life has changed forever, and that it will never be the same.
- Allow for grief, sorrow, anger, and other feelings.
- Provide a support group in the school for grieving students.
- With young children, give concrete examples about death. For example, you can say that when a person dies they don’t have to go to the bathroom; they don’t get cold or hungry; they don’t sleep or think; they don’t get scared, etc. Help students understand that a dead body does not do what a live body does.

How to Tell When Students Need Additional Help

Most children and teens are “in and out” of their grief. They experience sadness, anger and fear, but also are able to have fun and engage in activities.

This is a normal grief response. Prolonged or chronic depression, anger, withdrawal or fear over a period of several months may indicate that the student needs professional help in dealing with loss.

If a child or teen displays severe reactions or you notice disturbing changes in behavior, professional intervention should be sought. If behaviors become problematic or debilitating or persist over time, professional help by a qualified mental health professional should be sought.



Additional Resources

Addressing Grief: Tips for Teachers and Administrators.

A tip sheet created by the National Association of School Psychologists (NASP) in 2015.

Helping the Grieving Student: A Guide for Teachers

A practical guide for dealing with death in your classroom developed by the Dougy Center: The National Center for Grieving Children & Families in 1999.

Talking to Kids about Grief

A tip sheet created by The Wendt Center for Loss and Healing in 2021.



Behaviors Which Suggest Complications in the Grieving Process and Indicate the Need for Referral to a Mental Health Professional

- Suicidal thoughts or behaviors
- Chronic physical symptoms without organic findings
- Depression with impaired self-esteem
- Persistent denial of the death with delayed or absent grieving
- Progressive isolation and lack of interest in any activity
- Resistant anger and hostility
- Intense preoccupation with memories of the deceased
- Taking on the symptoms of the deceased
- Prolonged changes in typical behavior
- The use of alcohol and/or drugs
- Prolonged feeling of guilt or responsibility for the death
- Major and continued changes in sleeping or eating patterns
- Risk-taking behaviors that may include identifying with the deceased in unsafe ways

