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ABSTRACT

The purpose of this paper is to increase teachers' understanding of children's conceptualizations of death to enable them to respond to the symptoms of grief in both early and middle childhood. John Bowlby's theoretical framework of childhood mourning is elaborated, and research on teachers' facilitation of children's grief is briefly noted. The developmental stages in children's conceptualizations of death are reviewed, and the nature of their grief in relation to the loss of a parent is explored. Symptoms of grief for children ages 3 to 5 and ages 6 to 11 are detailed. Nine suggestions for teachers supporting a grieving child are offered including: (1) be aware of personal attitudes toward and experiences with death; (2) allow children to openly discuss their loss; (3) use small deaths such as the death of a classroom pet to help children understand the concept of death; (4) use direct and child-appropriate language to provide information about death; (5) be sensitive to delayed or subtle grief responses; (6) create an open, continuing opportunity for the expression of grief; (7) provide reassurance; (8) educate parents about children's needs to participate in death rituals; and (9) be ready to respond to children's unexpressed guilt. (MCF)



THE CHILD IN GRIEF: IMPLICATIONS FOR TEACHING

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THE CHILD IN GRIEF: IMPLICATIONS FOR TEACHING

...most of a child's education is for life which leaves him helpless in dealing with death. (Budmen, 1969, p. 11)

Death is a fact of life which enters the world of the child as well as the adult. It can be a painful, and sometimes frightening experience, leaving the child in need of comfort and reassurance.

According to Furman (1984), the bereaved child faces the threefold task of 1) coming to terms with death, 2) grieving, and 3) resuming the appropriate progression toward development of personality. Caretakers who are sensitive to children's grief can help them accomplish these tasks.

Child educators are in a position to provide a safe environment in which children can explore the concepts of death and dying. For the bereaved child the classroom can be a place where support is offered and expression of feelings toward the loss is allowed. In addition, teachers can help educate parents about various behaviors children manifest in expressing their grief. Given such information, parents may be better able to cope and respond to their child's needs.

This paper draws upon John Bowlby's theoretical framework of childhood mourning (Bowlby, 1961). Bowlby likens the child's grief to



rheumatic fever which may cause the formation of scar tissue which in later life may le to more or less severe dysfunction. He states that the young child's separation from a close relationship naturally precipitates yearning for and anger with the lost object. If not given expression, these feelings may persist at the unconscious level. In healthy grief, anger and yearning prompt the child to achieve recovery of the relationship that has been lost. As the child attempts to recover the lost relationship again and again, slowly the child begins to detach from the memory of that relationship. Thus, in Bowlby's conceptualization, the child's overt expression of grief, though stormy, leads to a healthy outcome.

Children's overt expression of grief is facilitated if adults encourage such expression (Galen, 1972). However, parents (Kubler-Ross, 1983) and teachers (Galen, 1972; Ames, 1973) are often not comfortable or skilled in facilitating children's expression of grief. In a recent study (Pratt, Hare and Wright, in press) examining preschool teachers' comfort in discussing death with children, teachers were found to be uncomfortable talking about a death to bereaved young children. This was particularly true if the conversation focused on the death of a parent or a close relative. Comfort scores of teachers tended to be higher if they had greater exposure to death and dying through classes and readings. They also tended to be higher if they had previously discussed death wi'h children. From a sample of 98 teachers, 91% believed it was important for them to be able to deal with the subject of death in class as it naturally arose. However, 58% felt unprepared or only minimally prepared to do so. Therefore, the purpose of this paper is to increase teachers' understanding of children's conceptualizatious of death and to enable teachers to recognize and respond to the symptoms of grief in both early



and middle childhood.

Children's Conceptualizations of Death

Children's conceptualizations of death develop over time. Nagy's (1948) study of Hungarian children in the 1930's is a classic in the area of children's conceptualization of death. Using children's writings, discussion and drawings, she concluded that children's understanding of death was age-related and proceeded through three developmental stages. In Stage I (age 5 and under) children did not see death as irreversible. They typically attributed life processes and consciousness to the dead. For example, many imagined that the dead person ate and slept underground in the coffin. Children in Stage 2 (ages 5-9) personified death (often described as a "white skeleton") and represented death as having fearful and mysterious powers. Nagy described the major advance, which occured during this stage as the recognition that death was final, understanding that a person who had died would not return. During Nagy's Stage 3 (ages 9 and beyond), children conceived of death as personal, universal, and inevitable, as well as final. This new awareness was compatible with a belief in some form of afterlife, which Nagy argued could only occur when children appreciate death as final and inevitable.

Nagy's study has been criticized as being too culturally bound to be readily applied to American children. For example, no study of American children has produced findings which supported her view of the personification of death as typical of an intermediate stage in children's conceptualization of death (Wass, 1984). Nevertheless, Nagy's work did point to the age-related development of the concepts of the universality and irreversibility of death.

More recently, Childers and Wimmer (1971) studied the



development of the concepts of the universality and irreversibility of death among four-to ten-year-old children. Results revealed only 11% of the four-year-olds and 20% of the five year olds recognized death as universal. By age nine, 100% of the children viewed death as a universal occurrence. On the other hand, the development of the concept of irreversibility was less clear. Children's responses to the question, "Can people come back to life?", indicated that they did not lack comprehension of the concept, but often responded in terms of religious beliefs, such as reincarnation or resurrection.

In a review of the literature, Wass (1984) concluded that children at the Piagetian preoperational stage of intellectual development have an incomplete understanding of death. They conceive of death as a reversible event, such as sleep. For example, one young child (Schilder & Wacksler, 1934, p. 421) said, "They put him in a grave. He stays there until Saturday, then he may come out." However, children's thinking shifts as they enter the concrete operations stage at about eight years of age. Death is now understood as an irreversible event.

"They put you in a casket and you get buried in the graveyard. Then you start rotting and you not until all there is is a bunch of soil. Maybe the coffin rots too, and all that soil turns into part of the ground" (Wass, et al, 1977, videotape).

These findings provide a general guide for understanding children's developing conceptualizations of death. However, the ways children conceive of death cannot be reduced to a formula based solely on maturation. Circumstances and experiences may significantly contribute to the way children conceive of death. For example, by age five some children may have experienced death several times through the death of a pet, a grandparent, a sibling, and/or a school teacher. On the other



hand, some five-year-olds may have never experienced any death.

Nevertheless, understanding the various ways children of different ages typically understand death will help the teacher to respond more appropriately to children's grief.

The Nature of A Child's Loss

The loss of loved ones through death is not the same for everyone. Each relationship is characterized by a different closeness, intensity, frustration, gratification, anger, and a different kind and amount of love. Grieving differs significantly among children according to the particular relationship that was lost through death (Wass, 1984).

There is agreement throughout the literature that children at greatest risk for pathologic bereavement are those children who experience mother loss in early childhood (Barry & Lindemann, 1960; Raphael, 1983; Furman, 1984). The death of a parent for young children is always untimely, and often unexpected. Bowlby (1980) explains that because these deaths may be sudden, unexpected, and the result of trauma, there is an increased likelihood that these deaths will be poorly explained to children. Thus, without adequate, accurate information about the death their fantasies are enhanced and they have a diminished capacity to understand what has happened. Based upon many years of both clinical and empirical work with grieving children, Furman (1984) concludes that children can be helped to survive their grief if it is recognized and responded to by teachers and parent.

Symptoms of Grief in Children (Ages 3 to 5). It may be difficult for the younger child's ego to sustain the pain of prolonged and continuous grief (Nagera, 1970). Consequently, children may initially respond as if nothing important has happened. At another time, they may be intensely upset and indicate longing for the dead person.



Preschool-aged children who experience loss through death often respond with regressive behavior, including: loss of bowel and bladder control, wanting the breast or bottle again, thumb sucking, and "babyish" eating habits. Objects such as soft toys and blankets are likely to be sought, and the child may cling to them all day. Stomach aches, sleeplessness or excessive sleepiness, loss of appetite, frequent crying spells, and bedtime fears are also common. If the death occured as the result of an illness, bereaved children may dread their cwn illnesses, even minor ones, imagining that they also are about to die (Raphael, 1983; Wessel, 1984).

Grief reactions may be strongly influenced by the surviving parents' distressed response. For example, parents may be no devastated by a death that they cannot offer comfort and security to the child. Therefore, having first experienced the death of a loved one and then the loss of the grieving parents' support, the child's loss is compounded.

Because their understanding of death has developed to the point where death is a reality, children in middle childhood usually realize what has happened when told of a death. However, Furman (1984) notes that although children in middle childhood have already formed a basic concept of death and burial, they need help in understanding the specific cause of death. Children in this age group sometimes resort to denial as a defense (Nagera, 1970). They are likely to carry on as though nothing has happened, to laugh, play and become almost manic in behavior (e.g., laughing hysterically). In spite of these overt behaviors, their inner lives are markedly affected by the loss. These children may experience profound sadness, uncertainty about the survival of other loved ones and possibly fear of what the future holds. But grieving children may lack



the skills to express such feelings in a manner that would allow others to helpfully respond.

Another symptom of grief which may occur at this age level are feelings of excessive guilt, often exhibited in self-destructive thoughts and behaviors. For example, children may believe that their angry thoughts or actions toward the person who died are responsible for the death. Guilt reactions may be more common when death occurs by suicide or by accident when grieving children are the survivors (Gardner, 1983). If guilt arises, it may be reinforced by accusations, overt or covert, from other surviving members of the family. One mother, overwhelmed with increased responsibilities after her husband's death, was heard yelling at her children, "Taking care of you two will probably give me a heart attack just like it did your father."

A stressor which faces bereaved children during middle childhood is their acceptance by peers. The loss of someone close makes them "different", singled out, and stigmatized. Yet being like their peers is desperately important during this developmental period and these children may suffer an intense embarrassment over their status loss among peers (Raphael, 1983). Consequently, they may compensate by hiding their grief feelings in order not to draw attention to what seems like a stigmatizing loss.

Finally, it is important to note that children in both early and middle childhood may experience a sudden intensity in grief as a response to the anniversary date of a loved one's death. In a recent exploratory study (Fox, 1985) children identified the following times as points during the previous year at which they missed the person who had died most incensely: a) special holidays such as Thanksgiving, Christmas, and Easter; b) the dead person's birthday; c) the day of the week when the



death occurred; d) times when they were doing things they used to do with the dead person; e) times when they saw friends of the dead person; and f) at bedtime. These findings point to the importance of recognizing that grief is a process which may increase at several points during the years following the death of a loved one.

Guidelines for Supporting a Grieving Child

Grief is a constellation of feelings in response to the loss of a close emotional attachment. As such, there can be no right or wrong way for teachers to help a child who is experiencing the pain of loss. Perhaps, more than at any other time, presence may be far more important than words. Teachers may not have the answers or even particularly comforting words to offer the child, but they can be willing to listen (to both behavior and words), and willing to give comfort and willing to answer questions honestly even when the only possible answer is, "I don't know." Based upon the literature (Lonetto, 1980; Raphael, 1983; Wass, 1984) the following suggestions for discussing death and loss with children are offered.

Teachers' awareness of personal attitudes toward and experiences with death are essential to effectively helping children in grief. Personal and professional lives intersect when a teacher discusses death in the classroom (Gordon & Klass, 1979). No matter what a teacher's emotional relationship to death is, it is important not to confuse personal feelings with the feelings of the bereaved child. The ability to make this distinction frees the teacher to grow in self-awareness and to more sensitively guide the child through the grieving process. Furthermore, it frees the child to move through the grieving experience unemcumbered by another person's fears or perceptions.



- 2) Children on talk about anything that falls within their experience. However, fear and anxiety about death can prevent teachers from openly talking to children about their loss. Such a "conspiracy of silence" may quickly be translated by bereaved children to mean that whatever feelings they may have in response to the death must be suppressed. Such lack of communication may result in children's misinterpretation about what has actually happened. Instead they may create fantasies that are far more frightening than reality.
- 2) Teachers can use the small deaths that most children experience to help them understand the concept of death. For example, when the classroom gerbil dies, children can feel that the body is cold; it doesn't move, and it has no heartbeat. As a group, they can plan a funeral and participate in the burial. Sensitively guiding children through such experiences can transmit not only the facts about death to children, but also a healthy attitude toward it.
- 4) In discussing death and dying with a child, a teacher should use the language of the child to provide information that the child desires. Children operate in a very concrete world. They need concrete, unambiguous words to explain death. Unfortunately, they are often told about a death with vague expressions such as he "passed away," "went to sleep," "went to a better place." Such expressions are likely to be incomprehensible to the child, and may arouse fears. For example, a young boy who was told that his dead grandfather was simply in "a long sleep" suddenly became frantically resistant to falling asleep at night. It wasn't until the pediatrician was consulted that the young boy finally explained, "I don't want to fall asleep and never come back like Grandpa did."

Preschoolers need help to comprehend sufficiently what "dead"



means, what causes the death and how we dispose of the dead (Furman, 1984). Children in middle childhood understand the meaning of death but may need help understanding the causes and circumstances of death (Furman, 1984). For example, someone dies in a car accident, children may wonder exactly what happened to the body to cause the death. An uncomplicated explanation such as the person's head hit the dashboard and injured the brain so badly that death was immediate may satisfy the children's need to understand the cause of death. Later children may have more questions which should be addressed sensitively, yet honestly. If the teacher does not know the answer, it may be appropriate to guide the child to someone who does know such as the child's parents or perhaps the physician of the person who died.

5) Children's grief responses may not be immediate or obvious, and will require perceptiveness on the part of the teacher. Children may use many defenses at the time of a death. Consequently, an overt response may be delayed. This is exemplified in the words of one child who said, "When my father died I was only six and I didn't understand much. My dad had a funeral and my mom cried, and I think that's the only reason I cried. I didn't reslize I would never see him again, until I was older in second grade and there in school I was crying. The teacher thought I was sick and she asked me what was the matter. I said, 'My Daddy's dead'" (Sternberg & Sternberg, 1980, p. 28).

Instead of this overt demonstration of his sudden and latent griet, the child mentioned above may have entered into a depression, characterized by withdrawal, poor school performance, altered eating and sleeping habits. In either case, to respond sensitively the teacher would need to be familiar with the family's history, be willing to ask questions, and most importantly be willing to listen. Patience and



availability often encourage a child to expressiveness.

- and should continue over time. The ability to listen and observe are the most basic of helping skills. However, in the case of death, teachers may be tempted either to avoid talking about the subject altogether or to talk about it too much. Saying to the child, "This is a very sad time for you. I hope you will talk to me sometime about how you are feeling" (and then being /available/) may be more helpful than obscuring the child's feelings with too many words of explanation. Younger children may need help putting words to their feelings. "You look very sad. I think you must be missing your sister very much. Is that right?" Children may not respond, or respond only minimally, to the first invitation to talk. Because grief is a process, the invitation must be an open and long-lasting one.
- The class and their family. Profound grief may cause a child to feel separated from peers. The sadness experienced after a significant loss can be suffocating. Feelings of abandonment and loneliness are common. Helping other classmates find ways to express empathy can be one way to surround a bereaved child with loving support. However, in addition to the need for empathetic concern, there is the need for the stability of a normal routine which school can provide. Sensitive yet encouraging statements from teachers and friends such as "you will always miss your sister, but you will be happy again," can help the child face some of the hard times shead.
- 8) Parents may wonder whether or not to allow their children to participate in rituals after a famil, member's decan. Teachers are in



a position to help parents understand that children's involvement may be important. The degree to which children are excluded from a family member's dying process and funeral can affect children's reality cesting about the death (Raphael, 1983). In a recent study (Weber and Fournier, 1985), children who had less participation in a death (i.e., they did not view the body and/or attend the funeral or graveside services) often had more confusion about the death.

Children should not be forced to attend funerals; they should be offered explanations of what a funeral or other ceremony is, what may occur (including people feeling sad) and offered the choice to attend or not. If a parent or other relative is too distraught to support a child during the funeral, the child's teacher may offer to attend to the child inside or outside the funeral.

gain the emphasis is on listening. Children's questions may be "heard" behaviorally more than verbally. For example, children who display self-punishing behaviors such as biting finger until they bleed or refusing to eat for long periods of time may be asking, "Was this death my fault?" Without careful listening, such an important question is not perceived, and children are thus left alone with devastating feelings of guilt. They must be reassured that no one was responsible, and told hon soly that nobody knows the reason for many things that happen in the world.

Conclusion

This paper described the ways preschool and elementary school children conceptualize death and their peterns of grieving. It emphasized the notion that teachers can be most effective in helping bereaved children when they perceive the loss from the child's point of



view. Such perceptions grow out of careful listening to both the child's behavior and words.

Budman (1969) states that most of children's education deals only with life, leaving them helpless in dealing with death. Teachers cannot protect children from death. Teachers can, however, help children respond and recover from loss and should ensure that they do not face their grief alone.



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