

- PreSchool
  - 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.
  - Possible reactions include:
    - Crying or screaming
    - Clinging to caregivers or other trusted adults
    - Fear of separation
    - Regressive behaviors such as wetting pants and thumb sucking
    - Decreased verbalization
- Elementary School
  - 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.
  - Possible reactions include:
    - Behavioral difficulties
    - Decreased concentration
    - Poor school performance
    - Depression
    - Irritability
    - Withdrawal
    - Somatic complaints (headaches & stomachaches)

**Grieving/Mourning Characteristics of Age Groups (to be used only as a general guide)**

**Infants - 2 Years Old:**

- Will sense a loss
- Will pick up on grief of a parent or caretaker
- May change eating, sleeping, toilet habits.

**2-6 Years Old:**

- Family is center of child's world
- Confident family will care for her needs
- Plays grown-ups, imitates adults.
- Functions on a day-to-day basis.
- No understanding of time or death
- Cannot imagine life without mum or dad
- Picks up on nonverbal communication.
- Thinks dead people continue to do things (eat, drink, go to the bathroom), but only in the sky.
- Thinks if you walk on the grave the person feels it.

- Magical thinking
- you wish it, it happens (bring the dead back or wishing someone was dead)
- Death brings confusion, guilt [magically thought someone dead]
- Tendency to connect things which are not related.

#### **6-9 Years Old:**

- Personifies death: A person, monster who takes you away
- Sometimes a violent thing.
- Still has magical thinking, yet begins to see death as final, but outside the realm of the child's realistic mind.
- Fails to accept that death will happen to them - or to anyone (although begins to suspect that it will).
- Fears that death is something contagious.
- Confusion of wording [soul/sole, dead body, live soul].
- Develops an interest in the causes of death (violence, old age, sickness).

#### **9-12 Year Old:**

- May see death as punishment for poor behavior.
- Develops morality - strong sense of good and bad behavior.
- Still some magical thinking.
- Needs reassurance that wishes do not kill.
- Begins an interest in biological factors of death.

#### **Teenagers:**

- Views death as inevitable, universal, irreversible.
- Cognitive skills developed
- Thinks like an adult
- Questions meaning of life if it ends in death
- Sees aging process leading to death
- Sees self as invincible - it will not happen to me.
- Sees death as a natural enemy
- Need for adult guidance (grief process, coping skills).
- Needs someone to listen; to talk with.
- May feel guilt, anger, even some responsibility for death that occurred.
- Not sure how to handle own emotions [public and private].

#### **Signals for Attention From a Grieving Child**

- marked change in school performance.
- poor grades despite trying very hard.
- A lot of worry or anxiety manifested by refusing to go to school, go to sleep, or take part in age appropriate activities.
- not talking about the person or the death.
- Physically avoiding mention of the deceased.
- frequent angry outbursts or anger expressed in destructive ways.
- hyperactive activities, fidgeting, constant movement
- beyond regular playing persistent anxiety or phobias.
- accident proneness, possibly self-punishment or a call for attention.
- persistent nightmares or sleeping disorders.
- stealing, promiscuity, vandalism, illegal behavior
- persistent disobedience or aggression (longer than six months) and violations of the rights of others.
- opposition to authority figures.

- frequent unexplainable temper tantrums.
- social withdrawal
- alcohol or other drug abuse.
- inability to cope with problems and daily activities
- many complaints of physical ailments
- persistent depression accompanied by poor appetite, sleep difficulties, and thoughts of death.
- long term absence of emotion
- frequent panic attacks
- persistent symptoms of the deceased.