

# The Mourning Process for Children

The death of a parent is one of the most fundamental losses a child can face. Ideally, parents support their children, both physically and emotionally; they provide a stable home environment in which children can grow and mature; and they serve both as the children's protectors and as their models. In reality, the extent to which parents fulfill these roles varies. Nevertheless, for the great majority of children, parents remain their most significant others; in effect, their partners in negotiating the essential developmental tasks that will take them to adulthood. The loss of a parent to death and its consequences in the home and in the family change the very core of the child's existence.

## DO CHILDREN MOURN?

Most professionals agree that the ability to grieve is acquired in childhood as ego functions mature and the child is able to comprehend the finality of death. But there has been a lengthy and often contradictory debate among professionals as to when children acquire this capacity. On one side, people such as Wolfenstein (1966) believe that the capacity to mourn is not acquired until adolescence when the person is fully differentiated. On the other side of the debate, Bowlby (1963, 1980) posits that infants as young as 6 months experience grief reactions resembling those seen in adults. A middle position, represented by R. Furman (1964), places the capacity to mourn at around 3½ to 4 years of age.

Deutsch (1937), in her classic paper on the absence of grief, identified adults who had lost a parent in childhood and who reported a lack of appropriate emotions at the time of the loss. From her limited number of observations, she concluded that "the phenomenon of indifference is due to the fact that the ego of the child is not sufficiently developed to bear the strain of the work of mourning and it therefore utilizes some mechanism of narcissistic self-protection to circumvent the process" (pp. 227-228).

Part of the controversy focuses around the definition of mourning, which has been used with varying meanings in the literature of parental death. For example, psychoanalysts such as Wolfenstein (1966) posit that mourning involves the task of detaching from the attachment object and recognizing oneself as a separate entity. Likewise, Anna Freud (1960) subscribes to a highly specialized meaning of the term that involves withdrawal of libido from the lost object. For both analysts, young children cannot mourn because they have limited ego capacities such as reality testing, and lack of control of id tendencies. However, unlike the position usually taken by the psychoanalytic schools, some theorists, such as Kliman (1968), do not see mourning in terms of outcome, but rather as a broad spectrum of responses set into motion with the death of a loved one. Despite differences, however, most would agree that the child must have achieved a coherent mental representation of important attachment figures, such as parents, as well as object constancy for mourning to occur. Most children develop these capacities by 3 or 4 years of age.

### MOURNING AND THE CHILD'S UNDERSTANDING OF DEATH

The child's comprehension of death and the role this comprehension plays in the process of mourning is a major component in our understanding of childhood bereavement. Concepts such as finality, causality, and irreversibility are abstractions, the understanding of which is clearly related to a child's cognitive development (E. Furman, 1974; Piaget, 1954; Smilansky, 1987).

In her classic study on the subject, Nagy (1948, 1959) posits three distinct conceptual stages of childhood mourning: Stage 1 (ages 3 to 5) when the child sees death as departure with the

deceased existing somewhere else, Stage 2 (ages 5 to 9) when death is personified and can sometimes be avoided, and Stage 3 (ages 9 or 10) when the child understands that death is inevitable and affects all people, including him- or herself.

More recent researchers hold that certain children develop a realistic understanding of death much earlier than Nagy suggested. For example, Spinetta and Deasey-Spinetta (1981) and Bluebond-Langner (1978), who work with seriously ill children, note mature understandings of death in children between 6 and 10 years of age.

Researchers such as R. Furman, who believe that very young children can grieve, emphasize other factors that facilitate such mourning: It is more likely to occur in an environment where family members, particularly a consistent adult, reliably satisfy the child's reality needs and encourage the expression of sad affect. Some go as far as to say that it is not necessary for a child to have a realistic concept of death in order to grieve. Schell and Loder-McGough state that the focus should be placed on separation and the emotional response to separation. Such reactions can be seen quite apart from the cognitive development of the child.

In the Child Bereavement Study we took the position that a certain process begins when a child loses a parent to death. We wanted to look at this process both as described by children themselves and as described by their surviving parent. It was our hope that with a more thorough understanding of the process it would be possible to identify the specific interventions that may facilitate the adaptation of bereaved children to their loss.

In this book (and in the Boston study) I define "bereavement" as the adaptation to the loss, and "mourning" as the process children go through on their way to adaptation. I use the term "grief" to describe the child's personal experience, thoughts, and feelings associated with the death. Although similarities were found among children's experience, there was, as one would expect, a wide range of grief experiences.

## TASKS OF MOURNING FOR CHILDREN

If mourning is defined as the process of adaptation to loss, what does this process look like in children? Readers who are familiar

with my earlier book, *Grief Counseling and Grief Therapy* (Worden, 1982, 1991), will recognize the concept of the "tasks of mourning." Borrowing from developmental psychology, I conceive of the mourning process as consisting of four tasks. The bereaved must grapple with and bring some degree of resolution to each of these tasks as part of their overall adaptation to loss. Tasks do not have to be accomplished in any specific order and they can be revisited and reworked by the grieving person over time. The use of a task model is superior to a stage or phase model because of its dynamic fluidity and because it is a useful model for the clinician who may be intervening with bereaved individuals and families.

Do tasks of mourning apply to bereaved children? My answer would be a qualified "Yes"—they do apply but they can only be understood in terms of the cognitive, emotional, and social development of the child. Loss through death is experienced and expressed in different ways at different developmental phases. For example, a child who has not developed the cognitive abstractions of irreversibility and finality will have difficulty with Task I, accepting the reality of the loss. When dealing with the emotional impact of the loss (Task II), a child age 4 or 5 with magical thinking may believe that he or she caused the death to happen and must deal with guilt from this belief. This is less likely to happen once the child moves beyond the magical thinking stage. A young child with less well-developed coping skills may take longer than an older child to adjust to an environment where the deceased is missing (Task III). Children renegotiate the relationship with their dead parent over time, as they pass through the various developmental mileposts in their lives (Silverman, 1989), and this affects the way they deal with Task IV, emotionally relocating the deceased.

Researchers who apply my "tasks of mourning" concept to children have suggested various numbers of mourning tasks. Fox (1985) identified five tasks of mourning whereas Wolfelt (1996) and Baker et al. (1992) identified six. Although their conceptualizations are interesting, I do not believe we need to include additional tasks. The issues concerning bereaved children can be subsumed under the four tasks of mourning described in my earlier work, but I have modified them here to take into account the age and developmental level of the child.

## Task I: To Accept the Reality of the Loss

When there is a death, adults often experience disbelief that the death has occurred. This is heightened in the case of a sudden death or a death in which no body is retrieved, or when the survivor does not see the loved person dead. The sense of disbelief can range from a hope that the loss hasn't occurred to a full delusion that the person is not dead at all. It is not unusual to hear a car pull into the driveway and to think it is the loved one, only to have to remind oneself that the person is dead. An adult whose parent has died may want to share some experience with the deceased and reach for the telephone, only to realize that they can no longer simply pick up the phone and talk to the parent. Over time, however, adults come to realize and accept that their lost loved one is dead and is not coming back.

Like adults, children must believe that the deceased is indeed dead and will not return to life before they can deal with the emotional impact of a loss. "I always forget and I think he's going to come through the door or something but he doesn't. It's, like, hope and then it's just, like, rejection again." This requires that the child comprehend the nature of abstractions such as finality and irreversibility, an understanding that only emerges when the child is capable of operational thinking (Piaget, 1954). An awareness of one's relationship to the physical and social world is acquired through reality testing, and young children who do not yet have this capacity may also have difficulty understanding the reality of the loss. For example, they may believe that the parent is just "away" and will return, as if from a business trip or a vacation.

To negotiate the first task of mourning, children need to be told about the death in ways that are accurate and in language that is age appropriate. They also need to be told repeatedly over time. The repetitive questions that children often ask about a death are a way for them to grapple with the reality of the death, as well as a test to be sure that the story has not changed. Children who are not given accurate information make up a story to fill in the gaps. Sometimes this can be more extreme and more frightening to the child than what actually happened.

As children develop cognitively, they acquire the ability to understand the finality of loss. "I thought when she died, 'It's all a

dream,' and then I wake up and it's true," said a 10-year-old boy who lost his mother. But with both children and adults, there is always the delicate balance between wishing that it had not happened, or that the deceased will return, and the reality of the loss.

## **Task II: To Experience the Pain or Emotional Aspects of the Loss**

It is necessary to acknowledge and work through the variety of emotions associated with the loss or these affects will manifest in other ways, perhaps somatically or in aberrant behavior patterns. Children need to approach this task gradually and in ways that do not overwhelm their coping capacity, which is generally less well developed than that of adults. Children between the ages of 5 and 7 years are a particularly vulnerable group. Their cognitive development enables them to understand something of the permanency of death, but they still lack the ego and social skills to deal with the intensity of the feelings of loss. One 6-year-old girl began having nightmares and high levels of anxiety after she learned her mother had less than 6 months to live. Her 3-year-old brother and 13-year-old sister did not experience such anxiety. Although she was sent to Sunday school in order to have a better understanding of what death is, her high levels of anxiety continued long after the mother's death.

Affects experienced by children are similar to those of adults. They may express sadness, anger, guilt, anxiety, and other feelings associated with loss. A child's ability to process the pain of loss will be influenced by observing the adult's experience of this process. If the child sees an adult express grief without being overwhelmed, this can serve as a salutary model for the child. On the other hand, if children see adults dysfunctional with grief, they may be frightened of feelings in general and their own feelings in particular.

Counselors who work with bereaved children should also pay particular attention to feelings of ambivalence and responsibility. If a highly ambivalent relationship existed between the child and the deceased parent prior to the death, one often finds considerable anger, frequently expressed in feelings of abandonment such as "Why did he [or she] leave me?" Ambivalent relationships may also lead children to feel responsible for the death because of

something they did or did not do or say. Identifying such feelings and helping the child to reality test them is an important task of the bereavement counselor.

### **Task III: To Adjust to an Environment in Which the Deceased Is Missing**

The nature of this adjustment is determined by the roles and relationships that the dead parent played in the child's life, as well as in the life of the family. For example, the mother is frequently the emotional caretaker of the family as well as the child's confidante. An aspect of the mourning process includes adapting to the loss of these roles, which have died with the mother. For most children, including those in the Boston study, the death of a mother results in more daily life changes than the death of a father. These changes significantly affect the child's emotional outlook and create major disruptions to which the child must adjust.

For children, this adjustment goes on over time. As they mature into adolescence, they realize in new ways what has been lost to parental death (Silverman, 1989). Mourning for a childhood loss can be revived at many points in life, especially when important life events reactivate the loss. For example, a girl whose father dies when she is 9 years old may realize anew what this loss means when she prepares to marry at age 23 and she must adjust to a situation in which her father is not there to participate in the wedding. Other realizations arise when she has her first child or goes through other transitional points of adulthood.

### **Task IV: To Relocate the Dead Person within One's Life and Find Ways to Memorialize the Person**

The widely accepted notion that the bereaved need to "let go" of the deceased confuses our understanding of the mourning process. Freud wrote that the function of mourning is to "detach the survivor's hopes and memories from the dead" (1917, p. 65), and while this may be partially true, it is also true that one never forgets a significant relationship. The task facing the bereaved is not to give up the relationship with the deceased, but to find a new and appropriate place for the dead in their emotional lives—one that

enables them to go on living effectively in the world (Marris, 1974; Shuchter & Zisook, 1986; Worden, 1991).

Children seek not only an understanding of the meaning of death but also a sense of who this now-dead parent is in their lives. While the loss of a parent is permanent and unchanging, the process is not; it is part of the child's ongoing experience (Silverman et al., 1992). The child must be helped to transform the connection to the dead parent and to place the relationship in a new perspective, rather than to separate from the deceased. "Does everyone die? Yes, physically, but not in your heart. If you admire the person that much you can say, 'No, they are not dead [in my heart]; only a 'wacko' person would feel that way and I don't feel that way about Mom,'" said a teenage boy who was struggling with this fourth task of mourning.

## MEDIATORS OF THE MOURNING PROCESS

Although I have delineated four major tasks of mourning, it is clear that each child will negotiate these tasks in his or her own individual way. There is a wide range of normal responses to the death of a parent, and the personal circumstances of each child will influence the way in which he or she ultimately deals with the loss. Most, but not all, children manage the tasks of mourning in a healthy fashion. However, during the first 2 years after the death, a significant minority of children in the Child Bereavement Study (33%) was found to be at some degree of risk for high levels of emotional and behavioral problems.

Different children have different sources of support and strength, and different areas of vulnerability. Adjustment to loss is multidetermined. Although these determinants interact in complex and subtle ways, it is possible to identify six major categories of mediators that influence the course and outcome of adaptation to loss. These mediators are as follows:

1. The death and the rituals surrounding it
2. The relationship of the child with the deceased parent both before the death and afterward
3. The functioning of the surviving parent and his or her ability to parent the child

4. Family influences such as size, solvency, structure, style of coping, support, and communication, as well as family stressors and changes and disruptions in the child's daily life
5. Support from peers and others outside the family
6. Characteristics of the child including age, gender, self-perception, and understanding of death

Variations in these mediating factors mean variations in the mourning process for each individual child and will determine the way a child experiences grief following the loss of a parent. In the following chapters I will discuss how these influences played out in the lives of the children in the Child Bereavement Study. Chapters 5 and 6 take a close look at the most important mediators that have clinical utility in predicting a child's experience.

### POINTS TO REMEMBER: THE MOURNING PROCESS FOR CHILDREN

- The ability to mourn is acquired in childhood as ego functions mature and the child is able to comprehend the finality of death.

- There are different opinions as to when children develop the capacity to grieve, but many now think that children mourn earlier than was once believed.

- A key component in children's grief is their emotional reaction to separation. This exists very early and may predate a realistic concept of death.

- Childhood grief is best facilitated in the presence of a consistent adult who is able to meet the child's needs and to help the child express feelings about the loss.

- The mourning process in children involves four tasks of mourning that are influenced by the developmental issues of the growing child.

- Children's reactions to the death of a parent can vary in terms of intensity and duration. Six major categories of mediating factors contribute to the specific grief reactions of a given child.