Grief, Loss, and Bereavement
Fact Sheet #2: Responses to Grief Across the Lifespan

This series of fact sheets, developed by the MHTTC Network, is designed to help mental health professionals and school mental health personnel support patients, students, and families who may be experiencing grief at any time, including during the COVID-19 pandemic.

Responses to Grief Across the Lifespan

Does Everyone Grieve the Same?

Grief is a natural reaction in response to the death of a loved one, or to a significant life change. While grief is a shared life event, experienced by all individuals at some point in time, everyone experiences grief differently. Despite the variability in grief expressions, there are behaviors and emotions commonly expressed or experienced, and it is helpful to view these using a developmental perspective across the lifespan. Below are common grief reactions based on age/developmental level as well as strategies that may be helpful for supporting the bereaved individual.

Infants and Toddlers

Infants and toddlers (ages 0-3) often do not fully understand that death is permanent and universal. They may see death as reversible and are most likely to express their emotions through their behavior and play. Common grief responses in very young children include irritability, crying, disrupted sleep, clinginess or difficulty with separation, behavioral regression, and distress by the absence of the loved one. Strategies for Support: Clinicians should provide support to the surviving caregiver and loved ones. Provide caregivers with resources for their own grief. Discuss the importance of creating a consistent routine to re-establish safety.
and predictability. Provide caregivers with strategies to comfort the child and to provide short and honest explanations of death. It is important to avoid euphemisms such as “gone, passed away, and lost.” Provide caregivers with strategies for flexible limit setting and discuss the importance of play.2, 3

**Preschoolers**

Preschool-aged (ages 3-5) children are concrete thinkers with magical/fantasy thoughts. They may still see death as reversible and may start to worry that they did something to cause the death. Common grief responses include behavioral regression, disrupted sleep, changes in eating patterns, repetitive questions, concerns about safety, physical complaints, and nightmares.2, 3

**Strategies for Support:** Clinicians should provide support to the surviving caregiver and loved ones. Provide caregivers with resources for their own grief. Clinicians and caregivers should assure children that they did not cause the death and should avoid the use of euphemisms for explaining death. Consistent and predictable routines should be established. Caregivers should be prepared for repetitive questions and should provide opportunities for children to talk about the experience. Children in this age group may express thoughts and feelings through art, play, and gross motor activities, and should be encouraged to do so. In addition, caregivers should provide children with choices about their daily routine and recreation activities whenever possible, because it will assist the child in maintaining a sense of autonomy.2, 3

**School-Aged Children**

School-aged (ages 6-12) children begin to understand abstract concepts such as death and grief and begin to understand that death is permanent. Children in this age group may focus on the details of what happened to the person who died and how the death will impact them long-term. Common grief responses include worries about safety (for self and others), difficulty concentrating, nightmares, physical complaints, hypervigilance, and social withdrawal.2, 3
Strategies for Support: Clinicians should provide support and resources to the surviving caregiver and loved ones. Language skills of school-aged children are increasing rapidly during this time; thus, literature interventions may be useful. Clinicians and family should provide accurate portrayals of death using developmentally appropriate language. Clinicians should collaborate with teachers and school counselors to best support the child. Open and honest communication should be encouraged. Caregivers and clinicians should listen and allow children to control the pace and content of the discussion. Affirm the child’s feelings and allow them space to experience them. Clinicians can help children identify people and activities that help them feel safe and supported. Children in this age group may benefit from talking, art, physical activity, play, and writing about their experiences. Caregivers should be encouraged to be emotional role models for their grieving children.2, 3

Adolescents

Adolescents (ages 13-18) understand and process abstract concepts about death and grief. Adolescents often turn to peers and others outside of the immediate family for support. Common grief reactions include increased risk-taking behavior, difficulty concentrating, disrupted sleep, changes in eating patterns, intense emotional reactions, attempts to take on caregiving role for younger siblings, and identity confusion.2, 3

Strategies for Support: Clinicians should provide support and resources to the surviving caregiver and loved ones. Clinicians and caregivers should reinforce assurances of safety and security. Flexible routines should be established, as well as implementation of empathic limit setting. Adolescent questions should be answered to the best of the clinicians’ and caregivers’ abilities. Caregivers can be encouraged to ask open-ended questions and listen without judging, interpreting, advising, or placating the adolescent. Caregivers should also be encouraged to be patient with adolescents’ expressions of grief. Adolescents should be encouraged to identify people and activities that help them feel safe and supported. Because peer support is common among adolescents, discuss possible questions from peers and
practice answering them. Clinicians are encouraged to collaborate with teachers and school counselors to best support the adolescent.2, 3

Adults

Adults understand and process abstract concepts and understand that death is permanent. While the grief process is highly individualized, common grief reactions may include shock and disbelief, guilt, sadness, anger, physical symptoms, disrupted sleep, and changes in appetite. For adults in an uncomplicated grief process, painful experiences are often intermingled with helpful feelings such as relief, joy, peace, and happiness.4

Strategies for Support: Adults grieving the loss of a loved one should be encouraged to identify and engage with safe sources of support (e.g., friends, family, spiritual activities/traditions). They can consider expressing emotions in tangible or creative ways (e.g., writing, making a scrapbook or photo album, getting involved in an organization or cause that was important to their loved one). Clinicians should encourage adults to maintain involvement in valued activities or interests and to seek additional support through community support groups or individual therapy when deemed appropriate.

Summary

Amid the ongoing COVID-19 pandemic, children and adults may be confronted with the loss of a loved one or news of a death in extended social circles or the community. Each person is unique in his or her understanding of grief and response to death. Any death can be especially difficult for a child, and a wide range of emotional and behavioral responses can be expected. A person’s experience with grief and bereavement differs according to their age, developmental level, previous life experiences, emotional health before the death, cultural beliefs, and family and social environment. Awareness of these differences can guide clinicians as they help people of all ages cope with death and other losses.

Resources

American Counseling Association: Grow-Connect-Empower! Toolkit
American Psychological Association: Grief in Childhood: Fundamentals of Treatment in Clinical Practice
Center for Complicated Grief at Columbia University: Webinars
Child Mind Institute: Helping Children Cope With Grief
Resources (cont.)

Intervention in School and Clinic: Coping With Grief: Guidelines and Resources for Assisting Children
National Alliance for Grieving Children: The Interaction of Trauma and Grief in the Age of a Pandemic: The Role of Bereavement Programs in Promoting Child and Family Resilience
National Alliance for Grieving Children: This too shall pass: Planning and Adapting for the Next Way of Grief Service Delivery
National Alliance for Grieving Children: Through the Lenses of Grief
National Association of School Psychologists: Addressing Grief
National Association of School Psychologists: When Grief/Loss Hits Close to Home: Tips for Caregivers
National Child Traumatic Stress Network: Childhood Traumatic Grief: Information for Mental Health Providers
National Child Traumatic Stress Network: Childhood Traumatic Grief: Information for Parents and Caregivers
National Child Traumatic Stress Network: Childhood Traumatic Grief: Information for Pediatric Providers
National Child Traumatic Stress Network: Helping Children with Traumatic Separation or Traumatic Grief Related to COVID-19
National Hispanic and Latino MHTTC: Complicated Grief: Cultural Considerations When Working with Loss in Hispanic and Latino Students and Their Families
Pacific Southwest MHTTC: Crisis Readiness, Response, and Recovery Webinar Series: When school starts back: Helping students, staff, and yourself cope with crisis during the COVID-19 pandemic
Pacific Southwest MHTTC: Crisis Readiness, Response, and Recovery Webinar Series #1: Principles of Commemoration and Memorialization
Pacific Southwest MHTTC: Crisis Readiness, Response, and Recovery Webinar Series #2: Supporting Grieving Students During a Pandemic
Pacific Southwest MHTTC: School Mental Health Crisis Leadership Lessons: Voices of Experience from Leaders in the Pacific Southwest Region
School counselors 4 MTSS: Webinars

Please visit the MHTTC COVID-19 Grief, Loss and Bereavement Webpage for additional resources, webinars, and training toolkits.

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References
