

Grief & Loss during Adolescence



Identifying the impact of grief and loss upon adolescents & how to help them heal.

LOSS: COMMON & UNIQUE

The experience of mourning a loss varies across the lifespan. The manner in which an adult approaches loss, such as the death of a loved one differs from how a child approaches death as well as an adolescent. Differences amongst these groups are not better or worse, just unique.

It is important, as a professional, to look at the cultural background of those you work with, as well as the developmental stage, so as to assess the needs and experiences of that person, couple, or family and identify the best approach to pursue.

Loss is both a common and unique component of human existence. It is common in the sense that all human beings undergo separation and loss of significant relationships throughout the course of their life experiences and share a

collective need to learn ways of coping with the impact and aftermath of serious losses. Yet, at the same time, loss is unique in that each individual has a distinct life history of contact with loss and develops a particular set of beliefs about loss which reflect that life experience (Valentine, p.312). The focus of this newsletter is upon the impact of loss and grief upon adolescents and the uniqueness of the adolescent's experience.

Reference: Valentine, LaNae (1993). Professional Interventions to Assist Adolescents Who Are Coping with Death and Bereavement. In C. A. Coor & D. E. Balk (Eds.), Handbook of Adolescent Death and Bereavement (pp.312-328). New York, NY: Springer Publishing Company.

IT IS COMMON THAT ALL HUMAN BEINGS UNDERGO SEPARATION AND LOSS OF SIGNIFICANT RELATIONSHIPS THROUGHOUT THE COURSE OF THEIR LIFE EXPERIENCES.

ADOLESCENCE & GRIEF

The word "adolescence" is derived from a Latin root (adolescentia), which refers to the process or condition of growing up and designates a "youth" or person in the growing age. In more modern times, "adolescence" refers to the period in the human life cycle between childhood and the maturity of adulthood. A rite of passage, if you will.

Grief is a natural reaction to a loss that has occurred; it is the painful feelings associated with a loss. Loss, on the other hand is the disappearance of someone or something from a person's life. People can have a loss occur and not experience grief. Only when we as humans are connected or attached to the relationship do we experience grief.

An adolescent can experience loss in moving through normative life transitions (i.e. starting high school) or with unanticipated life events/crises (i.e. suicide by friend/peer). There are many different losses that an adolescent can go through, such as, the end of a relationship, experiencing abuse, loss of abilities, a move to a new place, the loss of childhood,

running away, a life threatening illness of someone close, multiple deaths, divorce and adoption.

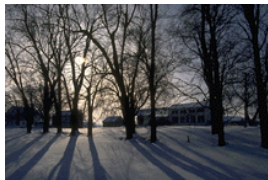
It is important to recognize that situations like these are losses to an adolescent and should be treated just as seriously as experiencing the death of someone close. Allowing adolescents to grieve appropriately can evoke growth and maturity. If grief is responded to poorly, then harm and maledvelopment may occur. The occurrence of a traumatic, unanticipated life event, such as the death of a parent, might threaten healthy resolution of his or her developmental tasks.

References: Balk, D. and Corr, C. (1993). Adolescents, Developmental Tasks, and Encounters with Death and Bereavement. In C. A. Coor & D. E. Balk (Eds.), Handbook of Adolescent Death and Bereavement (pp.3-14). New York, NY: Springer Publishing Company.

Noppe, L. and Noppe, I. (1993). Ambiguity in Adolescent Understandings of Death. In C.A. Coor & D.E. Balk (Eds.), Handbook of Adolescent Death and Bereavement (pp.35-36). New York, NY: Springer Publishing Company.



HOW DOES GRIEF & LOSS IMPACT ADOLESCENTS?



**Mourning is a process
not an event.**

The intensity and duration of the mourning process for an adolescent are influenced by several factors, such as who the person was that died, the nature, strength, and security of the relationship attachment to the deceased, the presence and intensity of ambivalence in the relationship, early childhood experiences around loss, kinship, timeliness of death, previous warning, preparation for bereavement, the need to hide feelings, as well as the blame the adolescent feels for bringing about the death, historical antecedents, such as the number of previous losses experienced by the survivor and how they were grieved; the survivor's mental health history is important to consider, as well as personality variables (how emotions expressed, coping with stressful situations), one should also consider the position of a bereaved adolescent within their family system; and grief and mourning in adolescents will be influenced by broader social and cultural variables.

There is a very broad range of responses an adolescent can experience in grieving and mourning. It is important to know the indicators of "distorted mourning reaction" for an adolescent, so as to determine when he or she should be referred for an evaluation by a mental health professional. It is not so much the symptom but the intensity. An example might be, if an adolescent continues to deny the reality of the loss even months after the funeral, or a prolonged bodily distress, or a persistent panic, or an extended guilt, or an unceasing idealization, or an enduring apathy and anxiety, or an unceasing hostile reaction to the deceased and to others.

The mental health professional must evaluate an adolescent's ability to carry out his or her usual activities and

proceed with his or her developmental tasks despite the grief (Valentine, 314). Also what must be considered is the social, emotional, or physical development of an adolescent and whether there are signs of interference due to the grief process. In such circumstances, "the grief has become all-encompassing and detrimental" (Valentine, 314). Professional services are sought if there are concerns about suicidal risk or if the adolescent has been involved in some way in the death of the deceased. Other indicators that professional help is needed are: psychosomatic problems, difficulties with schoolwork, nightmares or sleep disorders, changes in eating patterns, suicidal hints, and temporary regressions (Valentine, 314). *An adolescent may display behaviors such as angry acting out, destruction of property, decline in school performance, truancy, substance abuse, and depression. Now it is not necessarily that any one of these on its own suggests a diagnosis of dysfunctional grieving, however each could possibly be an indicator that an adolescent is having difficulties in his or her mourning to the extent that professional intervention is indicated (314).*

Reference: Valentine, LaNae (1993). Professional Interventions to Assist Adolescents Who Are Coping with Death and Bereavement. In C. A. Coor & D. E. Balk (Eds.), *Handbook of Adolescent Death and Bereavement* (pp.312-328). New York, NY: Springer Publishing Company.

THE LOSS OF DIVORCE

It is important to remember that divorce is an adult problem yet, parents need to "acknowledge how their separation and untoward feelings about each other wound their kids" (Trozzi, p. 219).

It is important to acknowledge that your adolescent has these feelings. It is possible that your child will be afraid to deal with their feelings directly because of fear of what they will experience as a result (for example, intensified anger or tears). By talking to your children about what happened and reinforcing the love that you have for them, the process can be much easier on them.

Divorce can "represent the death of the family that a child has known" (Trozzi, p. 219). The level of development your child is at, is one piece that guides how they come to terms with this loss. Preadolescents (ages 9-12) can get angry at their parents' preoccupation with their own needs. They can become bullying as a defense mechanism to their grief. Adolescents (ages 13-adulthood) are more concerned with themselves. How they cope with divorce will depend on how

sensitive and respectful their parents are towards their issues.

A few things you can do to help your children/teens are:

- Do not allow your children to hear negative comments about their other parent.
- Allow them to talk about their feelings about the divorce, validating however they may feel.
- Try to avoid other major changes in their life, such as moving. Reassure them about what is constant in their lives.
- Ask your child's high school counselor about divorce groups for your adolescent.
- "A dictum to go by is 'together for our children, separate for us'". Tell them it is not their fault.

Reference: Trozzi, Maria. (1999) *Talking with Children about Loss*. Canada, Berkeley Publishing Group.

**Each adolescent
has his or her own
mourning
process. Be patient
and allow it to
unfold.**

WHAT'S AN ADOLESCENT TO DO?

Mourning is a process for any human being. Adolescents need to mourn their loss(es) through processing and gaining an understanding of each loss. More appropriately, understanding their feelings that surround it and be able to move on with their life having made sense (emotionally and intellectually) of what has occurred and how it fits into their understanding of how their world works. Each person expresses their feelings of grief in a unique way; some of these include anger, difficulty concentrating or sleeping, feelings of guilt, loss of appetite, isolation from others, irritability and loneliness. In order to grieve in a healthy manner, an adolescent must actively grieve. This means they must accept the loss, acknowledge the feelings they are having and adjust their life without that certain someone or something.

Here are some things that an adolescent can do to work through the grieving process. (None of these suggestions should be forced upon someone because they may or may not be what they want to do to mourn their loss.)

- *Allow them to talk about their feelings regularly.

*Take warm baths for comfort.

*Write/journal.

*Prayer can be useful when dealing with death, to whatever higher power the teen identifies with, a sense of spirituality.

*Listening to music is a helpful outlet to deal with emotions.

*Take walks or exercise regularly as stress relief.
*Find resources on the internet on grieving, talk with others, such as a support group.

*Talk about what was lost in an attempt to deal with the feelings that surround the loss.

Adolescents need to find a balance between daily life and grieving. They need to allow themselves to grieve but not have it become consuming. By using coping skills while maintaining routine in their lives, the mourning process can occur.

Reference:
www.mtech.edu/counseling/healthy_grieving.html



**Adolescents need to find a balance
between daily living
and grieving.**

HELPING ADOLESCENTS HEAL

As a parent or professional, it can be hard to understand what an adolescent is going through. Here are some things that you can do to help the teen get through the feelings associated with grief and loss.

It is equally as important to look at where the teen child is developmentally as well as what type of loss/losses they are experiencing and how many are occurring or have occurred.

*Understand that “grieving is a process, not an event”.

*Be honest about what happened, sharing what is appropriate with the teen, and how you are feeling about the situation to show or model that it is normal to grieve.

*Let an adolescent know that “you really want to understand what they are feeling and what they need”.

*Be there for emotional support in any way that the adolescent needs you to be. This could be a time when your relationship is strengthened.

*Show an understanding that dealing with these feelings is challenging and it takes time and effort to heal.

*Give the adolescent options of where they can get sup-

port. Offer support groups, friends, family or simply help them find an avenue where they feel they can get the most support. This may be a mental health professional.

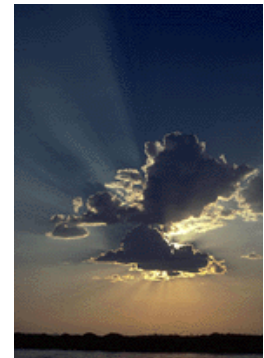
* Keep family, school, extracurricular routines in tact as much as possible

They can benefit from your reassurance in matters of grief and loss.

Note: This is not intended to be an exhaustive list of how to help an adolescent heal from loss and grief. Consult with a mental health professional should you have questions or concerns.

References: www.nasponline.org/NEAT/grief.html
www.nmha.org/children/prevent/loss.cfm

www.hospicenet.org/html/teenager.html
www.mtech.edu/counseling/healthy_grieving.html



You can play a significant part in helping an adolescent heal.

ADOPTION

Adoption is another situation where children and teens can feel loss. From the beginning, children experience the loss of his/her biological parents. Starting at infancy, children begin to develop a sense of trust. Trust is something that develops over time as an infant learns to trust both himself and the people that take care of him. When a child is adopted, they must form an attachment to their new caregivers, who they are meeting for the first time. As the child becomes a toddler, they begin to develop independence, and begin to learn about the physical differences between themselves and their parents. When a child reaches middle childhood, they begin to understand the meaning of adoption as well as start to cope with their physical differences from their parents. As children grow into adolescence and young adulthood, they will begin to explore further what is implicated in adoption and adjust to

the fact that they were adopted.

The process of understanding adoption is exactly that—a working process. As parents, it is important to understand the impact adoption can have on your child and be open to discussing any questions that your child might have. “The experience of loss is usually felt in the context of the search for self” (Brodzinsky, Schechter, Henig, 1993, p. 12). Adolescence encapsulates “the search for self”. While discovering their ‘self’ may take some time and effort, any emotional support you can offer your child, will help them understand and cope with being adopted.

Reference: Brodzinsky, David, Schechter, Marshall, Marantz, Robin. (1993) Being Adopted: The Lifelong Search for Self. New York, First Anchor Books.

**Adolescence
encapsulates
“the search for self”.**

GRIEF ACROSS THE CHILDHOOD & ADOLESCENT LIFE CYCLE

The most important thing you can do is be aware of the developmental level of who. When helping children go through the grief and loss process, regardless of what has been lost, keep in mind the age and developmental level of who you are dealing with. Everyone handles these issues differently and some need more support or more time to deal with their loss than others. The most important thing you can do is be aware of the developmental level of your child and what their needs are according to that level.

Children under the age of five believe everything is alive. Their only concept of death is that of being asleep. Children this age are also developing a sense of responsibility which could contribute to feelings that they may have caused their parents’ problems.

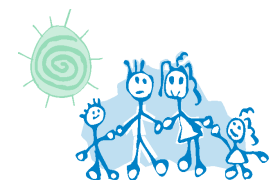
Children between ages 5-10 are beginning to develop a sense of human mortality and have a general fear that their parents will die. Children this age can also hide their feelings of sadness when parents separate.

Children around the age of 9 or 10 understand that death can happen to children as well as to parents. Kids this age are becoming more independent but still need emotional support to adjust to new situations, as in divorce.

By the time children reach puberty, or adolescence, they view death as universal (happens to everyone); however, their high-risk activities often suggest that they operate according to the principle of “it can’t happen to me”. Adolescents know that death is irreversible, just as adults do, however they fail to contemplate the significance of death for bereaved survivors. Adolescents are at a stage where they do not have a mature concept of death.

Reference: Kaplan, Harold, Sadock, Benjamin. (1998). Synopsis of Psychiatry. Maryland, Williams & Wilkins.

Noppe, L and Noppe, I. (1993). Ambiguity in Adolescent Understandings of Death. In C.A. Coor & D.E. Balk (Eds.), Handbook of Adolescent Death and Bereavement (pp.35-36). New York, New York: Springer Publishing Company.



Believing in Kids & Families

Consider the developmental level of your teen before helping

FUTURE NEWSLETTERS:
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ABOUT BELIEVING IN KIDS AND FAMILIES

Believing in Kids and Families is a private counseling practice located in historic downtown Littleton. Believing in Kids and Families was established three years ago by Camille H. Pojar, LPC and Sue E. Coffey, LCSW, with the goal of helping children, teens, and families rediscover their strengths so they may enjoy peaceful living through improved personal relationships. Believing in Kids and Families provides individualized counseling services for children, teens, adults, couples, and families.

Sue E. Coffey is a Licensed Clinical Social Worker in the State of Colorado. Sue earned her Master of Social Work in 1993 and her Master of Psychology in 1999. She has worked with children, teens, and women, providing direct care and counseling services. Sue's experience in helping people spans 14 years in a variety of settings with multicultural groups of people from varying life stages permitting her to conceptualize situations and circumstances in a variety of ways, as well as assist people in accessing resources.



Camille H. Pojar is a Licensed Professional Counselor and earned her Master of Counseling in 2000 after working with teens and families in crisis, as well as in the American Indian Community. Camille taught HIV/AIDS prevention and education workshops for two years and has worked with homeless people, youth, and those involved with the justice system. Camille comes from a perspective that promotes understanding of each individual's search for meaning in life.



We have enhanced the services provided to the children, teens, and families of Believing in Kids & Families with clinicians who possess additional areas of expertise.

Heather Luehrs is a Licensed Clinical Social Worker with 17 years of experience helping infants, children, teens, and their families achieve enjoyable living. Heather is a warm and caring woman who believes in the human spirit and ability to change. Heather also has a Master's in Divinity.



Ed Lowery is a Licensed Clinical Social Worker with 15 years experience in working with children, teens, and their families. His experience spans work as a probation officer, social services worker and supervisor, with specific knowledge in the investigation of sexual abuse, child fatality, and institutional abuse incidents. He has a Master's Degree in Social Work from the University of Denver.

