

Grief and Loss

IMPACT ON

OCCUPATIONAL PERFORMANCE:

Social Participation

Changes in behavior, such as irritability, acting out, social withdrawal, or clinging to parent.

ADL

Changes in appetite and the development of unhealthy eating habits, bedwetting, or alcohol or drug abuse.

Education/Work

Difficulty following directions or concentrating on schoolwork or changes in academic performance and challenges assuming responsibility at internships or volunteer or paid opportunities.

Play/Leisure

Limited participation in activities of interest (Ayyash-Abdo, 2001).

Sleep/Rest

Altered sleeping patterns.

The stress associated with grieving may negatively affect health in the following ways:

- Physical symptoms: headaches, stomachaches
- Emotional symptoms: anxiety, panic attacks, depression, irritability, absence of emotion

These expressions of grief can manifest themselves in many areas of a child's life, including home, school, and community.

OCCUPATIONAL THERAPY PRACTITIONERS

use meaningful activities to help children and youth participate in what they need and or want to do in order to promote physical and mental health and well-being. Occupational therapy practitioners focus on participation in the following areas: education, play and leisure, social participation, activities of daily living (ADLs; e.g., eating, dressing, hygiene), instrumental activities of daily living (e.g., meal preparation, shopping), sleep and rest, and work. These are the usual occupations of childhood. Task analysis is used to identify factors (e.g., sensory, motor, social-emotional, cognitive) that may limit successful participation across various settings, such as school, home, and community. Activities and accommodations are used in intervention to promote successful performance in these settings.

GRIEF AND LOSS

Grief is conflicting feelings caused by a change in or an end to a familiar pattern of behavior (James, Friedman, & Landon Matthews, 2001). This broad definition encompasses a wide variety of losses that might result in grieving, including death of a loved one (e.g., parent, friend), parental divorce, a major move, death of a pet, military deployment of a parent, or loss of function as a result of illness or injury. It is estimated that 1 in 20 children will lose a parent by death before 18 years of age; 1 in 5 families will move each year; and 1 in 3 children 18 years or younger have divorced parents (McGlaufflin, H. (1998). Given all of the possible situations that bring about loss for children and youth, it is likely that occupational therapy practitioners will routinely interact with children who are grieving.

"The death of a loved one can be one of the most severe traumas one may encounter and the sense of loss and grief which follows is a natural and important part of life" (Ayyash-Abdo, 2001, p. 417). The grief process in children differs from adults because children do not have the communication skills to express how they feel (especially young children). Also, because of developmental changes, the grieving process tends to be more cyclical in youth, resulting in the child revisiting and processing feelings in different ways based on maturity (Willis, 2002). When addressing grief and loss with children and youth, it is important to remember that grief can manifest itself in many different ways, depending upon the individual experience of grief and where the person is in the grief process.

It is important that all school personnel and adults involved in youth activities learn about grieving as a normal response to significant loss and also learn appropriate strategies for supporting healthy grieving and minimizing further stress. When children receive support from parents and other adults around them, it helps the child and entire family cope (Schonfeld & Quackenbush, 2009).

MILITARY FAMILIES

Because of issues unique to military families, all school personnel need education about how to support grief and loss particular to children in military families (Swank & Robinson, 2009). These children experience many challenges, including deployment and the potential death of a parent. Deployment may cause feelings of loss for children. Families may only have a short period of time to emotionally and physically prepare for the change. Experiences associated with the death of a parent in the military are unique because of the number of changes that occur following a funeral. If families live in military housing, they generally have a limited time to move, which reduces the time that children have to say good-bye to friends. Children may attend a new school that is not a Department of Defense School, resulting in the loss of support from other military children. Professionals in the new school may lack an awareness of issues specific to military families.

Additional Resources:

- Educator's Guide to the Military Child During Deployment—<http://www2.ed.gov/about/offices/list/os/homefront/homefront.pdf>
- Working with Military Children: A Primer for School Personnel—<http://nmfa.convio.net/site/DocServer?docID=642>

continued

Occupational Therapy's Role in Addressing Childhood Grief and Loss

With knowledge and skills in the therapeutic use of self and facilitating therapeutic groups, **occupational therapy practitioners can help support children in their grieving process through the use of meaningful occupations.**

OCCUPATION-BASED STRATEGIES

- Help children get back to regular routines and activities, because these can have an organizing effect on feelings of well-being.
- Consult with teachers to help modify assignments or learning environment if behavioral changes cause difficulty with completing homework or participating in class.
- Encourage participation in enjoyable but low-stress activities with close friends to minimize feelings of isolation.
- Provide creative activities such as art projects and journaling to foster self-expression, which can help with processing difficult feelings. Drawing, painting, craftwork, scrapbooking, making memory boards with photographs, and collages naturally lend to meeting the needs of the grieving child (Milliken, Goodman, & Bazyk, 2007).
- Provide activities that create memorials of those who have died (e.g., picture frame, potted plant, dipped candle) to help to preserve what was cherished in the relationship.

TIER 1: SCHOOL-WIDE

Grief awareness training could be provided to all school staff in order to promote interactions that support the grieving process. School staff also need to be educated on what not to do, such as acting as if nothing happened, making comments that minimize the loss (e.g., "You'll be stronger for this"), or telling the student that it's time to move on (McGlaulin, 2003).

TIER 2: TARGETED

Services provided to small groups of children experiencing loss provide opportunities to offer and receive support while participating in meaningful activities. Such groups can be co-led by staff with expertise in mental health, such as school nurses, occupational therapists, school psychologists, and social workers.

TIER 3: INTENSIVE INDIVIDUAL

For a student demonstrating functional changes due to grief, occupation-based services are used to engage the person in meaningful activities to foster the expression of feelings (e.g., journaling), help establish routines (e.g., organizing school materials), and maintain feelings of wellness (e.g., yoga, taking daily walks).

THERAPEUTIC USE OF SELF

Everyday interactions can help or hinder the grieving process. Sometimes children worry that they will forget the person who died, so it is important to help the child remember what was valuable in the relationship and preserve such memories through stories, pictures, and mentioning the person in everyday conversation. It is also important to anticipate grief triggers, such as anniversaries of important events, the birthday of the deceased, and favorite family meals. Such triggers can bring about strong emotions. Reassuring children that these experiences are natural can help normalize the experience (Schonfeld & Quackenbush, 2009).

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Occupational therapy practitioners can help children recognize that "grieving can last a lifetime but should not consume a life."

(Schonfeld & Quackenbush, 2009, p. 19)

TALKING WITH CHILDREN ABOUT DEATH

Talking with a child provides an opportunity to share feelings and when feelings are understood, it is easier to cope with them.

- **Let children know that it's okay to express their feelings.** Let them know it's acceptable to cry and that crying may help them feel better.
- **Let children know it's okay to take time to feel and process their emotions.** This validates their feelings.
- **Pause the conversation when the child is crying if that seems best.** Provide support and comfort. Plan to continue the talk another time soon.
- **Acknowledge that these conversations can be difficult.** Let the child know that talking about feelings helps to process them.
- **Maintain an emotional and physical presence** with the child in order to support their needs.
- **Allow children to express their anger.** Recognize that anger is a normal and natural response. Help children identify appropriate ways to express their anger (e.g., doing something physical, expressing anger through creative arts activities).

(Schonfeld & Quackenbush, 2009)