Grieving and Loss during Preschool and First School Age: (Mini Review)

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Abstract

The following short article focuses on how children perceive and deal with grief and loss during preschool and first school age. It also refers to the stages of grief based on the developmental age of the children as they emerge from the international literature, as well as in the parameters that plays an important role in the processing of grieving for each child. Special mention is made in case of loss of one of the parents.

Keywords: Grieving; Loss; Development Phases; Effects of Parent’s Death

Introduction

We consider it natural and necessary, nowadays, to explain to children what is related to birth and life but difficult and inconceivable to discuss what is related to death and loss. This difficulty comes from the fact that death and loss are two concepts that are considered sad and incompatible with childhood which, in itself, is a symbol of the beginning of life, creativity and hope for the future [1].

However, it is very important to realize that the issue of loss and death concerns children early in life. Indeed, research has shown that they are very often confronted with the loss of a close relative (grandparents, or even one of their siblings), friends or peers whereas one in eight children experience the loss of one of their parents before they reach the age of eighteen [2].

The concepts of loss and grieving: how children experience grief during their preschool and early school years.

Loss does not only involve death, in other words, the loss of a loved one but a series of events such as: divorce, a friend’s betrayal, moving home, a disease that either threatens the children themselves or one of their loved ones, an accident, a natural disaster (earthquake, fire) or the loss of a friend, a toy or a pet [2-4].

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Grieving, on the other hand, has to do with an unhappy situation and describes the reaction of a human soul that experiences the loss of a loved one and manifests itself in sorrow, grief and unhappiness. Himebauch, Arnold and May [5] argue that children experience bereavement in a way that depends on their developmental stage and re-grieve later when they have a better understanding of death and of the changes that take place in the world around them.

There are four main stages of grieving in childhood: during the first one the child realizes the loss; during the second one grieving begins through feeling the pain caused by the loss and is accompanied by an expression of their feelings; in the third stage an internal symbolic connection with the deceased takes place in order to keep the latter’s memory alive and finally, during the fourth stage the child develops the ability to adjust to the new reality, continue their life and make investments in new relationships [6,7].

Kubler-Ross, on the other hand, has described the successive phases through which a person goes until they reach a point when they accept death. The initial stage is that of denial. On the announcement of the imminent death –either theirs or that of a loved one– they react in denial of reality. There is intense anger and resistance. This is a very short phase lasting only for a few hours or days that serves to protect the individual from the intense shock created when the sad event is announced. What follows is the phase of coming to grips with what has happened. They begin to realize the consequences of the imminent loss and start to make an effort towards dealing with them. Anger and sadness coexist as well as crying and arguing (why is it me that has to go through this?) This period may last for days or even weeks.

Then comes a period of depression when the person fully realizes the reality of events and that protests and war are not at all beneficial. It is usually accompanied by symptoms of depression such as loss of appetite, loss of sleep and social isolation. There is often suicidal ideation and a high risk of committing suicide.

The final phase that of acceptance brings comparative calmness. The individual has thus far come to grips with the fact that death is irreversible, settles affairs and pending cases or adjusts to an environment where the deceased will have been away. During this painful stage the patient has great emotional needs, regresses, desperately seeks a maternal protective relationship and may become a burden, even torturous to those around him. Their response and the potential of embracing the sick member of the family during this last stage of their life depend on their personality. If they have themselves have successfully gone through the process and have reached the point of acceptance they will be able to metabolize the stress that the patient reflects on to them and take up a motherly soothing role.

Oltjenbrums (2001) supports that the way in which someone deals with death depends not only on developmental abilities and skills but also on the primary psychosocial needs of a child from birth till adolescence. More specifically, during preschool age the process of grieving is quite different because of the development of language skills and the understanding of the concept of death. Children understand the world from their own perspective and usually deal with loss by means of isolation and dramatization (e.g. aggressive play) because they find it difficult to express their feelings. Many times they use play as a defense mechanism against the pain caused by the loss. Play serves to help them escape from reality, the confusion and worry caused by the sad event, the separation and the dissolution of the relationship between them and the deceased.

Their cognitive development does not allow them to perceive death as something definite; on the contrary, they believe that the deceased continues to "live" like before, e.g. in the clouds or in the sky or that they just sleep [7,8], expecting that they will return at some point [9]. Also, during this developmental stage children give their parents and themselves supernatural powers (egocentric thinking) with the result that they consider, in a magical manner, their acts or words against the deceased responsible for the loss which, in turn, creates feelings of guilt and self harm [7,9,10]. At the same time, they may have the need to express their grief, as long as the adults allow for this, while they appear to experience changes in feelings where laughter is followed by crying without missing play, and use denial mechanisms as well as reverse emotion displaying joy instead of sadness. There is high probability of emotional regression, search for substitutes, attachment to adults or imitation of adult behavior [11,12].

During the early school years (up to the age of seven) the child belongs to a highly sensitive group because the understanding of speech is literal and due to that, the use of figurative phrases such as “Dad has slept forever” or “we lost Mum” misdirect and create phobias.

Furthermore, the child’s cognitive development provides them with the ability to partially understand the permanence of death without having, at this point, the social skills or the abilities of “me” necessary to overcome the intensity of feelings and mainly the stress caused by the loss [13]. Therefore, death seems to be irreversible and the child believes that it can be avoided or that it is not a universal event. At this stage there are also feelings of guilt because of the thoughts and wishes they may have for the deceased.

The child’s feelings and thoughts are often expressed through symbolic play, drawings, and even repeated and continuous questions in regards to death and the circumstances under which it occurred [14]. At the age of 7-8 children can distinguish between fact and fiction but can hardly realize the irreversibility of death and thus insist on asking questions about the dead person’s return. They also believe that they can reverse death with their questions and behavior and give human needs to the deceased while they keep worrying about whether the dead person feels lonely, cold and hungry [15].

The death of a parent and the effects on the child

The effects of a parent’s death are serious and are obvious in many aspects of the child’s life, such as: physical health where physical symptoms (stomachache, muscle pain, headache etc.) may appear [15-17], mental health where strong feelings of discomfort may become present (shock, anger, fear; guilt, anguish, loneliness, despair confusion, denial, stress) but even psychological disorders (e.g. depression) that concern not only their school performance but also their social interaction (e.g. delinquent behavior) [18].

Furman [19], after researching the effects of the death of a parent on a child, mentions that the child is confronted with incomparable stress that threatens their personality development in the future. This is due to the fact that relationships during infancy and early childhood (up to the 5th year of age) are limited.

The energy and the support provided at these ages come from the parents and the emotional investment of a child is wholly attributed to the parents. Therefore, when a parent dies the child is deprived of the chance to love and be loved and appears to have difficulty adjusting.

Many children will deny aspects of the final death of their parent which may sometimes last forever and is usually connected to the emotional significance of the deceased parent more than the actual event of death [16].

The deceased is often idealized and stays in their memory as the good parent while the hostility and the anger that probably preexisted is transferred to the other parent who is considered the one to blame for the incident of death. The idealization of the deceased parent and the abuse of the surviving one possibly constitute an effort on the part of the child to reject previous feelings of anger and hostility towards the parent who has died [16].

As far as behavior is concerned children may exhibit disruption regarding their daily habits such as sleep and eating disorders, social withdrawal, difficulty concentrating, dependence, regression, nervousness and learning disabilities. As concerns long term consequences, people who have faced the loss of a parent in their childhood run a great risk of developing depression [20], problems of sexual identity, autonomy and formation of closer relationships during adulthood [16].

Parameters related to the child, their impact on the grieving process

The child’s reaction to the loss of a parent depends on: individual characteristics (e.g. age; reference has been made above in regards to the different ways they perceive death and that they grief depending on their age), the child’s temperament before the incident of death, the makeup and lifestyle of the family, the relationship not only with the deceased but with the surviving parent too, the circumstances of death, unusual conditions (e.g. when the death is connected to another event) and the last contact of the child with the dead parent.

Every child’s temperament, in other words, the skills they possess to deal with the loss and their mental health before the fatal incident appear to affect the outcome of grieving and the fact that they are influenced after death.
More specifically, aspects of the kid's personality such as self-esteem, beliefs, attitudes, values, wishes, needs and skills may be influenced.

Their family life will never be the same. The child can no longer consider their parents powerful, their trust in the living parent or in other adults decreases and they may exhibit stress, anxiety and fear towards the other parent (e.g. if one parent has died why not the other one?) [21]. Also, the sense of security and the degree of their dependence on the parent before death will affect the way the child will respond after the loss.

At some point during the process of grief the child will have to recognize what has been lost in relation to the unique and irreplaceable aspects of this relationship [21].

The gender of the lost parent is another parameter, which will affect the outcome of grieving. The death of the father is usually related to the financial status of the family which usually changes after death.

Furthermore, the loss of the father often concerns the development of health problems regarding the child especially during the first months after the loss [22]. What has, indeed, been observed is that girls are more vulnerable than boys when it comes to paternal loss, especially when the former are in their teens [16].

Another important parameter is related to the conditions of death. If there is sudden death such as suicide, murder, violent death, accident or death due to alcohol abuse, drugs or other factors of stigmatization the children will experience a more complicated process of grief [16]. Like adults, children find it difficult to understand loss when there is sudden, unexpected death and does not leave time for farewell. In these cases children usually go over their last contact or conversation with the deceased parent again and again. Quite often, this processing concerns things that they wish they had said or done. Moreover, feelings of guilt about the expression of anger in the past or about thoughts and wishes towards the lost parent before the event of death are created [21].

Also, unusual circumstances, such as the incident of death around birthdays, holidays or other conjunctures may stigmatize that period of time [16]. Finally, the last contact with the deceased is of primary importance for many children. A supernatural explanation for things happening just before the event of dying is many times given and this is considered an omen or a warning as regards what was about to happen. This explanation often carries a special significance which will guide their future choices (Dyregrov and Yule, 2008).

In order to facilitate all the above and to smooth out the extent which children's imagination can reach it is appropriate to explain the real causes of death.

Koocher [23] supported that there should be no secrets or things that are not supposed to be mentioned about death because the act of not revealing them teaches that it is a taboo subject and it cannot help children come face to face with their feelings that are connected to the loss [24]. On the contrary, if the child is helped towards grieving the loss of a parent as completely as possible, then the danger of developing further disorders in the future can be avoided [25,26].

Conclusion

Death is an important event that can happen in the life of a child and a teenager. It is especially painful when it comes to the loss of one of the parents, because then the child is called to move abruptly from the paradise of his childhood and face a new hard reality. This process of breaking ties and losing the object/parent is crucial to his or her later life. Despite all the similarities, the process of grieving in childhood differs from that of adulthood, due to its dynamic course. The child goes through relatively quickly the processes that will lead him away from the painful situation; it is enough to be properly informed in order to help him properly mourn his loss.

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