September 2010

Coping with the Loss of a Child

Naomi Brower, MS, CFLE, and ***Kimber Peart,*** MS

Death is a topic that is commonly difficult for people to discuss. For parents, dealing with the death of a child can be one of the most excruciating events that occur in their lives. No matter what age the child is at the time of death, it is one of the most difficult events that parents can experience. Most of the time parents to do not expect to outlive their children. Dealing with the loss of a child is a traumatic event that often creates a reaction of intense grief and feeling of unfairness as they seek for ways to cope with the loss (Miyabayashi & Yasuda, 2007; Murphy, Johnson, & Lohan, 2003).

For bereaved parents, there really is no time limit to recover from the loss of a child. The death of a child creates a change in the lives of parents that alters their way of life for the rest of their lives. It is important for parents to understand that it is completely normal to continue to experience periods of sadness and grief when they have thoughts about their child for the rest of their lives. One of the aspects of coping with the loss of a child is being able to begin the process of finding joy and happiness again, even though the child they once had is now gone.

Common Experiences Following a Child's Death

When a child dies, parents are confronted with very intense emotions (Lohan & Murphy, 2005-06). They need to know what emotions to expect following a child's death and to understand that these feelings may affect their relationship with each other and with other family members.

It is very important to understand that individuals often grieve in different ways (Toller & Braithwaite, 2009). Some parents find comfort in discussing their deceased child frequently, while other parents prefer to talk very little about the child. Other parents may feel as though others are trying to push them to move on too quickly. When one parent feels this way he or she may assume that the other parent is less devastated by the loss. The devastation is probably equal for both parents, but each one will cope with the loss in different ways (Doka & Davidson, 1998). There is no right or wrong way to grieve for a child who has died. However, for the sake of the parenting and/or marital relationship and for personal well being, the couple must keep the lines of communication open and talk about their feelings. It is important to accept the other's feelings and affirm these feelings as legitimate, even when they seem hard to understand.

Listed below are some common experiences that parents may have following a child's death. Some suggestions are included for coping with grief responses.

Anger

Initially, many parents feel anger (Cimete & Kuguoglu, 2006). This anger may occur because the child's death seems so unfair and parents feel so helpless. The anger may be directed toward oneself, one's spouse, the medical profession, an outsider or even God. Parents often look for someone to blame, even each other, so they can make sense of a needless loss. When anger and blame can be openly expressed, they usually give way to the more rational feelings of loss and grief. It is best to acknowledge the anger one feels and try to determine the source of the anger rather than deny the feelings. Repressed anger may resurface later as depression. If talking about angry feelings with one's spouse is difficult, perhaps a third person, such as a counselor or minister, might help minimize the stress of such discussions and, hopefully, direct the negative feelings to their appropriate source.

Guilt

Another common emotion parents feel is guilt (Zunin & Zunin, 1992). Society expects parents to be able to protect their children, and a child's death may make the parents feel they have failed in this responsibility. Fathers may wish they had spent more time with the child, or mothers may feel guilty if they were employed outside the home. The child's every unfulfilled wish may be remembered with guilt. Parents need to remember that these circumstances are out of their control and feelings of guilt can become somewhat irrational. It is important that parents be able to discuss these guilty feelings as they occur and to understand that, in most cases, the child's death was unrelated to the events that have caused their guilty feelings (Mitchell et al., 2009).

Physical Concerns

Because emotional health is so closely tied with physical health, the traumatic and emotional events of a child's death may affect parents physically (Zunin & Zunin, 1992). Bereaved parents often report physical symptoms such as loss of appetite, restlessness and/or sleeplessness, tightness in the throat, empty feelings in the abdomen, general fatigue, etc. Parents report that they take more medication than they did before the death, including tranquilizers and alcohol. Drugs may eliminate some uncomfortable feelings temporarily, but in the long run, they will only prolong the recovery period. Increased use of drugs also may adversely affect the marriage relationship. Parents who engage in healthy coping mechanisms as a way to face and deal with their grief instead of using other means to avoid their feelings will ultimately be able to better cope with the death and loss of their child.

Emotional Concerns

Parents may think about the dead child constantly (Wheeler, 1996). They may also think they hear the child's voice or see the child in a crowd. These thoughts may cause the parent to question his or her sanity. These feelings are not unusual in the early months of grieving, and it is not wise to deny their presence. Parents may also feel like they are riding a roller coaster of emotions and may sometimes even think they are going crazy. These intense emotions are normal. Holidays and anniversaries, such as the child's birthday or date of death, are especially difficult times for parents, even for many years after the death (Lohan & Murphy, 2005-06). In fact, some parents believe that holidays are never the same again. Parents should be sensitive to each other's sadness at these times.

Social Isolation

Most parents believe that people who have never experienced the death of a child cannot understand their grief. They often feel resentment when well-meaning people offer "solutions" for their grief. Parents who feel socially isolated from others may find it more challenging to overcome their grief. Support groups, composed solely of bereaved parents, are available in many communities. Members can offer comfort and understanding to grieving parents (Konrad, 2007; Toller & Braithwaite, 2009). Sometimes support groups may not be readily accessible, and it is important for grieving parents to understand that following the death of a child is a time where they can turn to other family members, friends, their faith and online resources for help. Parents should never feel like they are alone in grieving the loss of their child (Smith, Jaffe-Gill, & Segal, 2009).

Sexual Adjustments

Bereaved parents report that sexual problems often occur following a child's death (Mitchell et al., 2009). Often one or both parents may not want to have sexual relations for some time after the child has died. Both mothers and fathers may associate the sex act with the birth of the dead child, thereby arousing painful memories during this intimate experience. When a difference occurs between spouses regarding the resumption of sexual relationships, they should discuss their feelings at that time. If a couple is still in the child-bearing stage, they may believe that having another child will help diminish the grief. However, it is important for parents to understand that every couple is different, and they need to engage in whatever is best for them at that time. It may be better for a couple to wait before conceiving a child, but it may also bring healing to experience the birth of a new life again.

How Parents Can Help Each Other

Some people believe that marriages are more likely to suffer following a child's death. While some studies show that relationships can suffer due to such challenging circumstances, most relationships are able to overcome these challenges, especially if they have been together for many years (Murphy et al., 2003; Schwab, 1998). The key to maintaining a functional marriage during bereavement is good communication between parents (Toller & Braithwaite, 2009).

Each parent will experience the death of their child differently and grieve differently. Most parents need time to grieve alone and with others. Recent studies suggest that through accepting and embracing these differences, parents are allowed to connect and share their loss together and strengthen their couple relationship (Toller & Braithwaite, 2009).

How Parents Can Help Siblings

Parents can do much to help their other children cope with the loss of a sibling. While parents sometimes believe that children should be protected from discussing the dead child because they are too young or should not see how grief stricken the parents are, children of almost any age will sense that something is wrong by the reactions of parents. Children will feel comforted when parents talk with them in an open, honest manner. They will also sense how valued they are as children when they see parents openly grieve for the dead sibling.

Children should be encouraged to express their feelings, as they too may have feelings of guilt, anger, fear, and/or loneliness. Sometimes using books or movies can help youth to discuss some of these intense emotions and learn to cope with the situation (Heath et al., 2008). Parents should be alert to grief reactions in children. Children may react to grief in many ways depending on their age, maturity level, previous experiences, and level of social supports (Melvin & Lukeman, 2000). Any behavior that does not seem normal for that particular child should be attended to by parents with open discussion and reassurance of parental love for that child. Some parents may be so grief stricken that they lack the resources to attend to the needs of remaining siblings (Melvin & Lukeman, 2000). When seeking professional help, family counseling rather than individual counseling may be most helpful for youth (Lohan & Murphy, 2005-06; Melvin & Lukeman, 2000).

How Others Can Help Parents Grieve

When a child dies, family members and friends are often at a loss in knowing how to comfort grieving parents. Unfortunately, most bereaved parents do not find well-meaning family members or friends very helpful. The following are suggestions on how to help parents going through the grieving process (Maurer, 1996; Wheeler, 1996).

1. Don't offer clichés such as "time heals all wounds" or "it is God's will."
2. Don't tell parents that you know how they feel, unless you, too, are a bereaved parent.
3. Don't deny parents the right to grieve by telling them how well they are bearing up or that they must be strong for others.
4. Do LISTEN. A true friend of the grieving parent will listen as long as the person wants to talk or cry about the child. This may take months or years, but a friend doesn't keep track of time.
5. Continue to visit and call the bereaved parents until they indicate this is no longer necessary. Don't assume that the grieving period is over. Bereaved parents often feel very alone the first 6 months following the death because friends and relatives stop talking about the deceased child before enough time has elapsed to complete the period of mourning.
6. Remember that bereaved parents probably suffer the most acute grief possible. Their recovery may seem slow and relapses will occur. Be patient and caring as they work toward recovery.

Summary

Even though parents will get to a place in their grief where they can begin to experience joy and happiness again, the loss of a child will be forever etched in their minds. They will be reminded of their loss for the rest of their lives. Many parents have a difficult time discussing the feelings associated with losing a child, but it is important for parents to lean on each other and those close to them for support and help in coping with their grief. Parents need to know that it is normal to experience anger, guilt and sadness after losing a child and that they have resources to help manage these emotions. Parents express grief for the loss of their child in many different ways, and partners may show different emotions when experiencing grief over their dead child. These are all normal reactions to the grief associated with losing a child. Being able to come together as a family and communicate openly about the emotions each person is feeling leads the family toward a healthy way of coping with the loss of the child.

Acknowledgment

This article is based on Rowlins, J. 1989. When Parents Grieve. Utah State University Extension publication.

References

Cimete, G., & Kuguoglu, S. (2006). Grief responses of Turkish families after the death of their children from cancer. *Journal of Loss and Trauma, 11*, 31-51.

Doka, K. J. & Davidson, J.D., Ed. (1998). *Living with grief; Who we are, how we Grieve.* Cheverly, MD: Page Productions.

Heath, M., Leave, D., Hansen, K., Ryan, K., Lawrence, L. & Sonntag, A. (2008). Coping with grief: Guidelines and resources for assisting children. *Intervention in School and Clinic, 43*(5), 259-269.

Konrad, S. C. (2007). What parents of seriously ill children value: Parent-to-parent connection and mentorship. *Omega: Journal of Death and Dying, 55*(2), 117-130.

Lohan, J. A. & Murphy, S. A. (2005/2006). Mental distress and family functioning among married

parents bereaved by a child's sudden death. *Omega: Journal of Death and Dying, 52*(4), 295-305.

Maurer, L. K. (1996). *I don't know how to help them: A book for friends and families of bereaved parents.* Boulder, CO: Johnson Printing.

Mitchell, E., Volpe, R., Long, A., Levine, P., Kasden, M., Goldstein, B., Eisenberg, B., Colleti, L., Cohen, A. & Barlan, C. (2009). *Beyond tears: Living after losing a child, Revised ed.* New York, NY: St. Martin's Press.

Melvin, D., & Lukeman, D. (2000). Bereavement: A framework for those working with children. *Clinical Child Psychology* & Psychiatry, *5*(4), 521-539.

Miyabayashi, S. & Yasuda, J. (2007). Effects of loss from suicide, accidents, acute illness, and chronic illness on bereaved spouses and parents in Japan: Their general health, depressive mood, and grief reaction. *Psychiatry and Clinical Neurosciences, 61*(5), 502-508.

Murphy, S., Johnson, L. & Lohan, J. (2003). Challenging the myths about parents' adjustment after the sudden, violent death of a child. *Journal of Nursing Scholarship, 35*(4), 259-364.

Oliver, L. (1999). Effects of a child's death on the marital relationship. *Omega: Journal of Death & Dying, 39*(3), 197-227.

Schwab, R. (1998). A child's death and divorce: Dispelling the myth. *Death Studies, 22*(5), 445-468.

Smith, M., Jaffe-Gill, E., & Segal, J. (2009). Coping with grief and loss: Support for grieving and bereavement. Retrieved from http://helpguide.org/mental/grief_loss.htm

Toller, P. & Braithwaite, D. (2009) Grieving together and apart: Bereaved parents' contradictions of marital interaction. *Journal of Applied Communications Research, 37*(3), 257-277.

Wheeler, S., (1996). Helping families cope with death and dying. *Nursing, 26*(7), 25-30.

Zunin, L. M. & Zunin, H. S. (1992). The art of condolence: What to write, what to say, what to do at a time of loss. New York, NY: Harper Collins Publishers.

Utah State University is committed to providing an environment free from harassment and other forms of illegal discrimination based on race, color, religion, sex, national origin, age (40 and older), disability, and veteran's status. USU's policy also prohibits discrimination on the basis of sexual orientation in employment and academic related practices and decisions.

Utah State University employees and students cannot, because of race, color, religion, sex, national origin, age, disability, or veteran's status, refuse to hire; discharge; promote; demote; terminate; discriminate in compensation; or discriminate regarding terms, privileges, or conditions of employment, against any person otherwise qualified. Employees and students also cannot discriminate in the classroom, residence halls, or in on/off campus, USU-sponsored events and activities.

This publication is issued in furtherance of Cooperative Extension work, acts of May 8 and June 30, 1914, in cooperation with the U.S. Department of Agriculture, Noelle E. Cockett, Vice President for Extension and Agriculture, Utah State University. (FC/Family/2010-01pr)