Helping Adolescents Work Through Grief And Loss

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https://www.youtube.com/watch?feature=player_detailpage&v=9fIAE2JFGjl
We grieve because we love

We all grieve; the difference is our behavior
Being a teenage is about struggle between dependence and independence. It’s about the desire to abandon childhood patterns while feeling frightened by the consequences of adult behaviors. It’s about sorting out a tangle of physical, emotional, moral and social changes. It’s about deciding, “What do I want for my life?”

But life for the teen — in — grief is even more complex. The emotional turmoil of grieving can be unnerving for even the most secure teen. Intense and frightening mood swings make some question their sanity. (Perschy & Barker, 1990, P.42)
Yes....
It’s Normal for Adolescent to...

- Argue for the sake of arguing.
  - Keep in mind that, for adolescents, exercising their new reasoning capabilities can be exhilarating, and they need the opportunity to experiment with these new skills.

- Jump to conclusion
  - Instead of correcting their reasoning, give adolescents the floor and simply listen. You build trust by being a good listener.
  - Allow the adolescent to save face by not correcting or arguing with faulty logic at every turn. Try to find what is realistically positive in what is being said and reinforce that; you may someday find yourself enjoying the intellectual stimulation of the debates.
Yes....

It’s Normal for Adolescent to...

Developing Adolescents, A Reference for Professionals, American Psychological Association

- Be self-centered (Jaffe, 1998)
  - It takes time to learn to take others’ perspectives into account; in fact, this is a skill that can be learned.

- Constantly find fault in the adult’s position (Bjorklund & Green, 1992)
  - Sometimes they will be most openly questioning or critical of adults with whom they feel especially safe.

- Be overly dramatic (Jaffee, 1998)
  - For some adolescents, being overly dramatic or exaggerating their opinions and behaviors simply comes with the territory.
Tips for talking with Adolescents

Engage adolescents with non-threatening questions.

Ask open ended questions
- Ask question that require more that a yes or no answer

Avoid “why” questions
- “Why?” questions tend to put people on the defensive (Plutchik, 2000)
- Why did you say that?
  - Say instead;
    You seemed to be really trying to get across a point when you did that. Can you tell me more about what you meant?
Adolescents Risk – Taking Behaviors

“Unless otherwise noted data on all risk behaviors that follow are from the CDC Youth Risk Behavior Surveillance report for 1999 (Kann et al 2000), a large scale nationally representative school – based survey of students in grades 9 through 12. For the purposes of this publication, only national averages are reported state and local data may differ.”
Adolescents Risk – Taking Behaviors

Cigarette Smoking

- 70% of high school students have tried cigarette smoking. 25% before the age of 13.

- About one quarter of high school students smoke at least one cigarette per day, with male students smoking more than female students.

- Smoking has been on the rise for girls in 1991, one in eight girls in the eighth grade reported smoking (13%), but by 1996 more than one in five reported smoking (21%) (Lee, 2000).
Adolescents Risk – Taking Behaviors

Developing Adolescents, A Reference for Professionals, American Psychological Association

- Alcohol Use

- 81% of high school students have tried alcohol; 32% had their first drink before the age of 13.

- Half of all high school students report having had more than one alcoholic beverage in the past 30 days, and approximately 30% report having had more than five alcoholic beverage at one time during this period. Girls ages 12-18 are now as likely as boys to drink alcohol (Lee, 2000).
Adolescents Risk – Taking Behaviors

Other Drug Use

- 47% of high school students have tried marijuana, with males more likely than females to report such use. 11% tried marijuana before the age of 13.

- 9% of high school students have used some form of cocaine, and 4% have used cocaine more than one time in the past 30 days.

- 14% of students have used inhalants to get high; 4% more than once in the past 30 days

- 9% of high school students have used methamphetamines and approximately 4% have used steroids.
Risk Taking Behaviors

WHY?

- One theory;
  - Need for excitement, fun, and novel, intense sensations that override the potential dangers involved in a particular activity (Arnett & Balle-Jenson, 1993).

- Second Theory;
  - Risk behaviors occur in a group context and involve peer acceptance and status in the group (Jessor, 1991).

- Third theory;
  - Risk behaviors take the form of modeling and romanticizing adult behavior (Gibbons & Gerrard, 1995)

- Keep in mind that teenagers are not all alike and that they may have different reasons for engaging in the same risk behavior (Jaffe, 1998)
https://www.youtube.com/watch?feature=player_detailpage&v=gsYL4PC0hyk 4 min
DEFINITIONS:

- **Grief;**
  - Signifies one’s reaction, both internally and externally, to the impact of loss

- **Morning;**
  - Indicates the process of coping with loss and grief

- **Bereavement;**
  - Identifies the object situation of individuals who have experienced a loss of some person or thing that they valued (Corr, Nabe, & Corr, 2000, pp. 213, 220, 212).
https://www.youtube.com/watch?v=SoWrd8fAnwA&feature=player_detail_page; 3 min, w/ Dr Ken Doka
Signs of Grief in Teens:

- lack of concentration
- shock, numbness
- avoidance and retreat
- constant thoughts of the loss
- jealousy aimed at those who have what you do not
- anger
- self blame
- confusion and feeling disoriented, feeling in a fog
- nervousness
- irritability
- declining grades (ask a teacher to help you, ask a friend to help too, as this becomes another loss)
Signs of Grief in Teens:

- loss of interest in usual activities
- over-activity, acting too busy (to block out pain)
- wanting to be alone a lot
- deep sadness
- drug and/or alcohol use or abuse
- eating too much or too little (eating disorders)
- risk taking behavior (especially when guilt is involved, like in an accident that another teen was involved in)
- self destructive, anti-social or criminal behavior (cutting)
- promiscuity (often teens tell me they really only wanted someone to hold and comfort them. Be careful now as you are vulnerable)
- thinking about suicide (talk to a trusted adult)
- somatic manifestations of grief (stomach upsets, headaches, fatigue, symptoms similar to the deceased prior symptoms)
Young Teens; 11-13 Years

- **Basic Behaviors and Needs**
  - Wants to be accepted and respected
  - Seeks autonomy; assumes more responsibility for self
  - Struggles to establish a personal identity
  - Self-conscious; fragile sense of self
  - Considers peers more important than adults; seeks greater intimacy with Peers
  - Less monitoring by parents and caregivers

- **How they react to loss**
  - Withdraws from friends and activities; academic decline or indifference
  - Displays range of negative behaviors; lying, stealing, cheating
  - Loss of identity; low self-esteem; feels powerless
  - Insecure, vulnerable
  - Appetite and sleep changes (often excessive fatigue)
  - Worries about custody arrangements following divorce
  - Demands explanation from adults
  - Ashamed that family is different or changed because of divorce, death, chronic illness, or incarceration
  - Headaches, stomachaches, extreme anger, depressed, Lonely
Young Teens; 11-13 Years

What you can do

- Encourage communication; set aside special time to talk and listen
- Answer all their questions
- Affirm feelings; teach positive coping methods
- Encourage healthy adult friendships with coach, teacher, or minister
- Allow more personal freedom
- Ensure the home setting is comfortable, inviting
- Seek help from school, religion, counselors or therapist, if needed
Adolescents/Young Adults: 14 to 20 Years

- **Basic Behaviors and Needs**
  - Moody; often expresses negative ideas or feeling as a way of testing their own beliefs and those of others
  - Overwhelmed with additional responsibilities
  - Craves peer approval; prefers friends to family
  - Fears parental illness

- **How they React to Loss**
  - Denies inner turmoil following divorce or separation
  - Conflicted loyalties between custodial and noncustodial parents
  - Sensitive to family tensions
  - Avoids reminders of trauma following natural disaster or major crisis
  - Experiences flashbacks to traumatic event
  - Experiments with drugs and alcohol, and sexual activity
  - Drawn to troubled peers and possible gang involvement
  - Decline in academic performance
  - Depression (often severe)
  - Aggressive behaviors, tests limits
  - Craves material goods to compensate for loss
Adolescents/Young Adults: 14 to 20 Years

What You Can Do

- Reassure teen of your love and concern
- Establish fair limits and expectations
- Encourage communication; set aside special time to be alone with teen
- Seek additional support from family and friends
- Seek professional counseling or therapy; if needed
- Create a good rapport with the child
- Focus on the child’s strengths
- Be understanding and patient

“Grieving children are exceptionally sensitive. They need sincere, Genuine attention from caring adults. They are depending on us during a difficult time and need to feel our strength. It’s up to us to reach out to them. Our role is to be flexible, and sensitive to the child’s needs.”

(Healing the Hurt, restoring the hope, Suzy Yehl Marta)
Models of Mourning

- J. William Worden (1996) studied children ages 6 to 17 and developed four tasks:
  - to accept the reality of the loss
  - To work through the pain of grief
  - To adjust to an environment in which the deceased is missing
  - To emotionally relocate the deceased and move on with life
Models of Mourning

- Alan Wolfelt, present a slightly different model;
  - To acknowledge the reality of the death
  - To move toward the pain and loss
  - Remember the person who died
  - Develop a new self – identity
  - Search for meaning
  - Let others help you now and always
FIGURE 1 A dual process model of coping with bereavement.
“Probably the most striking implication of the oscillation of morning is that it bears so little resemblance to the conventional idea that grief unfolds in a predictable sequence of stages.”

George A. Bonanno; The Other Side of Sadness
Teenagers can end up in a no-man’s-land of grief

A thirteen year old girl;

- “I didn’t know what to do, so I went out for a walk. I don’t know when anyone missed me that evening. I finally called a friend and she came over, so then I had company too. She was stunned when I told her my father died. Her mother didn’t have any problem bringing her over. As I thought about it that night, I realized that with my father dead, everything was changed.”
This seventeen year old girl felt ignored for a week after her mother’s death from breast cancer

“My father was out of it. No one seemed to be paying attention to my needs and so I decided to go to a friends house after the funeral and spent most of my time there.”
Some break down, as their known universe unravels.

A thirteen year old explains

- “After my brothers death I needed to be sure that the world was still there. I wondered how that was possible when something so awful happened.”
Some seem quite stoic after death. This boy ignores his own needs by almost taking on his father's role, in helping his mother and siblings.

“I was there if my mother wanted to talk. She was there to listen and she knew she could count on me to help with my kid brother to see that he did OK in school.”
How can we help when our youth say?

I’m the only one.

No one understands what I’m going through, but they think they do.

I can’t talk to my friends about this.

I can’t talk to my parent(s) because they get too upset.

Everyone wants me to talk about my feelings and I don’t want to talk.

I just want to be alone.

I wish I didn’t feel so different.

When is this “grief” going to go away?

I am mad. I am sad. I hurt.

I don’t know what I feel.

I hate it when people tell me, “Move on”
“When we honestly ask ourselves which person in our lives means the most to us,
we often find that it is those who, instead of giving much advice, solutions, or cures, have chosen rather to share our pain and touch our wounds with a gentle and tender hand.
The friend who can be silent with us in an hour of grief and bereavement, who can tolerate not knowing, not curing, not healing and face with us the reality of our powerlessness, that is a friend who cares”
~ Henri Nouwen
Do not forget

Everyone grieves differently:

• One teen may want to talk about death
• Another may choose to cry
• One might write about their experiences in a journal or chat room
• Some choose to express their grief in creative/artistic ways
• Others are physical in their grief - participating in sports or other big energy activities
• No one way is the right way to grieve - your way of grieving is right for you
The Bill of Rights of Grieving Teens
By Teens at The Dougy Center

A grieving teen has the right....

...to know the truth about the death, the deceased, and the circumstances.
...to have questions answered honestly.
...to be heard with dignity and respect.
...to be silent and not tell you her/his grief emotions and thoughts.
...to not agree with your perceptions and conclusions.
...to see the person who died and the place of the death.
...to grieve any way she/he wants without hurting self or others.
...to feel all the feelings and to think all the thoughts of his/her own unique grief.
...to not have to follow the “Stages of Grief” as outlined in a high school health book.
...to grieve in one’s own unique, individual way without censorship.
...to be angry at death, at the person who died, at God, at self, and at others.
...to have his/her own theological and philosophical beliefs about life and death.
...to be involved in the decisions about the rituals related to the death.
...to not be taken advantage of in this vulnerable mourning condition and circumstances.
...to have guilt about how he/she could have intervened to stop the death.

This Bill of Rights was developed by participating teens at The Dougy Center and does not represent “official” policies of the Center.
How to help a grieving teen. The Dougy Center

Six Basic Principles of Teen Grief

1. Grieving is the teen’s natural reaction to a death.

Grief is a natural reaction to death and other losses. However, grieving does not feel natural because it may be difficult to control the emotions, thoughts, or physical feelings associated with a death. The sense of being out of control that is often a part of grief may overwhelm or frighten some teens. Grieving is normal and healthy, yet may be an experience teens resist and reject. Helping teens accept the reality that they are grievers allows them to do their grief work and to progress in their grief journey.
2. Each teen’s grieving experience is unique.

Grieving is a different experience for each person. Teens grieve for different lengths of time and express a wide spectrum of emotions. Grief is best understood as a process in which bodily sensations, emotions, thoughts, and behaviors surface in response to the death, its circumstances, the past relationship with the deceased and the realization of the future without the person. For example, sadness and crying may be an expression of grief for one teen, while another may respond with humor and laughter.

“I hate it when people think I should be grieving according to the ‘stages’ described in some high-school health book. Since my sister’s death I’ve learned that grief isn’t five simple stages.” Kimberly, 17

While many theories and models of the grieving process provide a helpful framework, the path itself is an individual one, and often lonely. No book or grief therapist can predict or prescribe exactly what a teen will or should go through on the grief journey.

Adults can best assist grieving teenagers by accompanying them on their journey in the role of listener and learner, and by allowing the teen to function as a teacher.
How to help a grieving teen. The Dougy Center

3. There are no “right” and “wrong” ways to grieve.

Sometimes adults express strong opinions about “right” or “wrong” ways to grieve. But there is no correct way to grieve. Coping with a death does not follow a simple pattern or set of rules nor is it a course to be evaluated or graded.

There are, however, “helpful” and “unhelpful” choices and behaviors associated with the grieving process. Some behaviors are constructive and encourage facing grief, such as talking with trusted friends, journaling, creating art, and expressing emotion rather than holding it inside. Other grief responses are destructive and may cause long-term complications and consequences. For example, some teens attempt to escape their pain through many of the same escape routes adults choose: alcohol and substance abuse, reckless sexual activity, antisocial behaviors, withdrawal from social activities, excessive sleeping, high risk-taking behaviors, and other methods that temporarily numb the pain of their loss.

“My friend went crazy into drugs, sex, and skipping school after her boyfriend got killed in a skiing accident. She stopped talking about him. Now she’s kicked out of school and is pregnant by a guy she hates. Since my boyfriend’s car accident, I know what can happen if I make wrong choices like her.”
Sara, 18
How to help a grieving teen. The Dougy Center

4. Every death is unique and is experienced differently.
The way teens grieve differs according to personality and the particular relationship they had with the deceased. They typically react in different ways to the death of a parent, sibling, grandparent, child, or friend. For many teens, peer relationships are primary. The death or loss of a boyfriend or girlfriend may seem to affect them more than the death of a sibling or grandparent.

“Expect the unexpected. Emily actually danced and sang after I told her that her mother died. I was shocked. Later I realized the relief we both felt. The relationship had been filled with her alcoholism, lies and illness.”
Father of Emily, 17

Within a family each person may mourn differently at different times. One may be talkative, another may tend to cry often, and a third might withdraw. This can generate a great deal of tension and misunderstanding within the already stressed family. Each person’s responses to death should be honored as his or her way of coping in that moment. Keep in mind that responses may change from day to day or even from hour to hour.
5. The grieving process is influenced by many issues.

The impact of a death on a teen relates to a combination of factors including:

* Social support systems available for the teen (family, friends and/or community)

* Circumstances of the death - how, where and when the person died

* Whether or not the young person unexpectedly found the body

* The nature of the relationship with the person who died - harmonious, abusive, conflictual, unfinished, communicative

* The teen’s level of involvement in the dying process

* The emotional and developmental age of the teen

* The teen’s previous experiences with death
How to help a grieving teen. The Dougy Center

6. Grief is ongoing. Grief never ends, but it does change in character and intensity. Many grieverers have compared their grieving to the constantly shifting tides of the ocean; ranging from calm, low tides to raging high tides that change with the seasons and the years.

“I’ve had people say that you’ve got to go on, you’ve got to get over this. I just want to shout, ‘You’re wrong! Grief never ends.’ I don’t care what they say.” Philip, 13
"IT IS EASIER TO BUILD STRONG CHILDREN THAN TO REPAIR BROKEN MEN."
— FREDERICK DOUGLASS
What is your definition of First Aid?

- Prevention
- Preparation
Some day, we will all die, Snoopy!

True, but on all the other days, we will not.
Factors Associated with Resilience and Positive Outcomes

- Just as there are a number of factors that can place adolescents at higher risk, there are also factors that can help protect young people from developing problems.

- The term “resilience” is used to refer to having good outcomes despite serious threats to healthy development (Masten, 2001)

- Many psychologists caution against viewing resilience from an individual framework. Instead, resilience should be seen as a function of developmental experiences that are grounded in a community context (Debold et al., 1999; Perry, 2000)
Factors Associated with Resilience and Positive Outcomes

- Stable, positive relationship with at least one caring adult
  - Studies show, strong positive emotions attachment associates with resilience (Garbarine, 1999)
- Religious and spiritual anchors
  - A sense of meaning
- High, realistic academic expectations and adequate support
  - A sense of shared cooperative responsibility and belonging
- Positive family environment
  - Nurturing, clear limit setting, and respect
- Emotional Intelligence and ability to cope with stress
  - More amenable to change
7 Cs Model of Resilience

- Competence
- Confidence
- Connection
- Character
- Contribution
- Coping
- Control

Building Resilience in children and teens, Giving Roots and Wings; 2nd edition
To be strong, children need unconditional love, absolute security, and a deep connection to at least one adult.

Sometimes the best thing parents can do to help children learn is get out of their way.

Children live up or down to adults' expectations of them.

Listening to children attentively is more important than any words parents can say. This applies to routine situations as well as times of crisis.

Nothing parents say is as important as what children see them doing on a daily basis.

Children can only take positive steps when they have the confidence to do so. They gain confidence when they have solid reasons to believe they are competent.

If children are to develop the strength to overcome challenges, they need to know that they can control what happens to them.

Children with a wide range of positive coping strategies will be prepared to overcome stressors and far less likely to try many of the risk behaviors that parents fear.
Parting thoughts
Building Resilience in children and teens, Giving Roots and Wings; 2nd edition

- Care so deeply that your children know that you are absolutely crazy in love with them
- Care so fervently that you hold them to high expectations to be good people because they will rise to your expectations
- Care so intensely that you are willing to let them learn that they control their own world and that the solutions to most problems lie within their developing wisdom. Trust in their natural strengths and resilience to nurture their problem-solving capabilities rather than solve their problems for them
- Care by teaching children to care for themselves. Teach them what to do to relieve stress and move beyond just telling them what not to do
- Care enough about your children so that you really know them
Parting thoughts
Building Resilience in children and teens, Giving Roots and Wings; 2nd edition

- Care for yourself. When you model how important self-care is, you give children the gift of learning that it’s okay to have feelings, human to reach a limit, and necessary to rejuvenate.

- Care so much about our future that you work to make this world better not only for your own child, but for all of our children.
“I came so that they might have life and have it more abundantly.”

John 10:10