Introduction

The death of a child is devastating and often referred to as the worst experience a parent can endure. A child’s death causes a profound family crisis. It shatters core beliefs and assumptions about the world and the expectations about how life should unfold. The overwhelming suffering and intense emotions that flood the days, weeks, months, and years following the loss is called grief.

The pain of grief is extremely intense as parents digest the finality of never seeing their child again and the loss of future hopes and plans. While memories of the child flood their mind, they also experience a deep emptiness and unimaginable void in their lives. Grief impacts a parent’s whole identity as well as the identity and security of other members of the family.

Some emotions of grief can be shared with others, while other intense feelings of loneliness or guilt, may never be put into words. The ways in which feelings and emotions of grief are experienced and expressed differ from person to person. One parent may need to talk a great deal about the loss and the pain, while another may become quiet and withdrawn. Some try to avoid facing their pain by holding feelings inside and acting as though they are fine. Although painful and difficult, expressing grief is vitally important. It helps a parent work through the pain of the loss. With time, the pain of loss, although always there, becomes less intensive. The parent-child relationship often takes on new forms as a parent connects with their child in new ways.

The hope in offering this e-book is to provide what might happen in the grief process and the many responses that may be experienced. Just as everyone has a different fingerprint, so is your grief journey. It is not expected that anyone will experience every aspect of what is written here. You may have aspects of your grief that are particularly difficult. Other descriptions may not fit with how you feel or what you experience. In the end, this is only meant to aid in understanding and expressing your grief your way.

The love you have for your child is not severed but rather your relationship continues in a different context, for it’s not how they DIED, but how they LIVED.

Grief Responses at the Time of Death

When parents first learn of the death of their child, their response is often one of shock, denial, disbelief, or numbness. I was out of town when my son, Tony, drowned while cleaning our pool. He had to torturous task of calling to give me the news. Kindly, he had arranged for my sister to be with me when he called.
He started the conversation telling me he loved me and to try and be strong. His next words were simply, “Tony is gone.” Somehow, I knew exactly what he meant. After I hung up, I started to cry, sob, and scream inconsolably as my whole body trembled. This just couldn’t be true. It couldn’t be happening. Only moments before, I had been going about my life. Only moments before, my life had felt intact. Overwhelmed with emotions, I fell to the floor, my knees buckling under the weight of what I had just learned. I remember a haze of emotions flooding my mind. As my sister reached to hold and hug me, I remember that I could hear her words but yet couldn’t understand them.

These reactions help cushion the full impact of the loss until ready and able to face the devastating reality of our child’s death and the multiple meanings it has for everyone involved. These reactions may last for only a few minutes or they can last for hours, days, weeks, or even months.

Shock is particularly profound when death is sudden and tragic such as an unforeseen accident, suicide, or murder. These sudden phone calls or knocks at the door are a parents’ worst nightmare. If parents have an opportunity to see their child after death, although very difficult, it may help in facing the reality of the tragedy. Sudden deaths also occur with newborns such as a stillbirth, fatal birth defect, or when a seemingly normal infant dies of Sudden Infant Death Syndrome (SIDS). With any child’s death, no matter the cause or age, the shock is profound.

If a child has died after a long, lingering illness such as a chronic disease, the death may still be sudden, perhaps following an acute relapse, or it may be expected as when the medical team and parents understand and agree that nothing more can be done. When you have faced a chronic illness and related intensive treatments for weeks or months, feelings of relief when the child is no longer suffering and is at peace may be experienced. However, parents have indicated that, even when the death of a child is expected, it isn’t real until the final goodbye.

When the sense of shock wears off, there is often a period of emotional release when the parents become aware of the devastating meaning of their child’s death. Some parents will weep and cry, while others might talk incessantly. The emotional release is important and should never be discouraged. The time to deal with emotions is when experienced. One should not try to postpone their feelings until a more convenient time or place.

The Grief Journey

Grief is normal. It is our reaction to loss but nothing prepares for the loss of child, whether sudden or expected. The grief journey has many emotional peaks and valleys for which society generally does not recognize. Because each person’s grief journey is as unique as their fingerprint, you may find that you, your spouse, and your family are all processing grief at different speeds and in different ways. The death of a child isn’t something you will get over; it is something you learn to live with.

When your child dies, the grief journey does not end in a week, a month or even a year. Don’t let others’ expectations be a guideline for your progress. Be patient with yourself and with your family members. It also helps to be tolerant and accepting of the different approaches others may take on their own grief journey.
Guilt

Grieving parents may be flooded with negative emotions such as guilt, regret, and fear. All of these are normal feelings for bereaved parents but they can be difficult to accept, to understand and to share with others.

Feelings of **guilt** occur as bereaved parents begin to flounder for the reasons for their child’s death. During this process, many parents blame themselves by thinking that something they did, or neglected to do, may have in some way contributed to the child’s death. Mothers of infants who die of various causes may feel guilty for not protecting their child during pregnancy or may feel their body failed the infant.

Parents of children with a health problem may feel guilty because they think they might have detected the symptoms of the illness earlier or because they signed the operative permit giving their approval for the surgery from which the child did not survive. When the death was caused by an accident or suicide, parents often feel guilty because they were not somehow aware of what was going to happen and did not prevent it.

Since parental guilt feelings are often closely related to the cause of death, it is vitally important that parents have a good grasp of the cause of their child’s death. If this is unknown, or if there are still unanswered questions, parents should contact someone who can help them find the answers.

Guilt also floods parents in other ways. Parents often begin thinking of all kinds of things they wish they had done differently with or for their child. For example, a father may experience guilt because of feelings that he didn’t spend enough time with the child. A mother may feel guilty because she had gone back to work. Sometimes parents feel guilty because they did not take the child to a requested activity or did not buy the child some desired object.

I felt guilty because I was not there when Tony drowned while cleaning our pool. I had irrational thoughts that if I had been home, instead of away for work, somehow, I might have prevented his death. My husband felt guilty for asking Tony to clean the pool. My daughter felt guilty as she was home but not outside at the pool when he drowned. The coroner indicated his drowning was due to a “heart event” but none of us felt any less guilty originally though now we all understand nothing could have saved him in or out of the water.

Sometimes parents blame themselves when they enabled something linked to the child’s death such as purchasing the car in which the accident occurred, giving permission to go out with a friend who was driving, or owning a gun involved in a child’s death. Feeling one was not a good enough parent is also common.

When there has been a conflicted parent-child relationship or a child exhibited difficult behavioral issues, guilt can be particularly profound. Guilt may occur when parents feel some sense of relief that the conflict or behavioral issue no longer must be worried about. Some experience guilt feelings as they believe the child’s death was a punishment for their own past transgressions such as a pregnancy before marriage, a past abortion, extramarital affairs, or even poor attendance at church.
Guilt can even emerge when older children have moved away from home, often times causing communication to falter as the child moves into a new stage in life with new friends and, possibly, even a new family. Even knowing that the causes for any feelings of guilt are irrational or not based on reality does not make the feelings any less intense.

Guilt feelings are difficult to share. However, it is helpful for grieving parents to find someone with whom they can share these feelings, especially if the guilt feelings are intense and prolonged. Bereaved parents also should try to learn to forgive themselves so they are not haunted by the guilt.

Guilt and regret are common emotions of grief. By openly sharing feelings of guilt and regret with others who understand your loss, you may come to a better understanding and ability to live with your child’s death.

**Anger**

**Anger** is another common reaction. Parents may feel angry toward the health care team for not saving their child or for poor communication that left the parent confused and unsupported. Parents of teens and adults who died under circumstances in which their friends’ behavior and lifestyles contributed to the death may fuel anger toward the child or the child’s friends. Although difficult to express when a child dies by suicide, parents may feel anger toward the child for not sharing their emotional state, for not seeking help, or for they themselves believing they should have seen signs. Some may feel anger towards friends who have children and the friends having the good fortune to be able to watch them grow older and reach particular milestones such as graduation or marriage.

A mother who has a miscarriage, stillbirth, or whose infant dies of a birth defect or acute illness can feel anger towards friends or relatives who continued risky behavior during pregnancy, such as smoking or drinking, and still gave birth to a normal infant. It is not uncommon to feel anger toward others in society, especially friends and family members who do not acknowledge the child, or who discount parental grief responses and go on as if the child’s death did not happen. Couples who experience a miscarriage may experience their grief all alone, as few people may have known of the pregnancy loss.

Parents of infants often hear, “You are lucky! You can have another baby.” If a child was sick, they may hear: “He is better off now.” Parents of teens or young adults may hear remarks such as, “You should be grateful for the time you had.” Though extremely difficult, try to hear the person’s intention in what they say. Even though things said may be insensitive and even hurtful, they are not said to try and inflict additional hurt but rather to try and console. It is just that unless you have lost a child yourself, you have no idea that these phrases are hurtful rather than helpful. One of the most devastating comments said to me was actually a question. The individual was a relative and sheepishly asked, “Couldn’t you have afforded to have someone else clean your pool?” Anger is not always a necessarily bad emotion or expressed in negative ways. Many bereaved parents have directed their anger in positive ways, by working to change laws, build foundations, raise money, fund scholarships, and other avenues serving as a catalyst for positive change.

Death of a child may shatter parental beliefs and assumptions about the world and cause stress. Initially, I did not want to leave the house. I did not feel safe in the outside world as I
feared something else terrible would happen. I then did not feel comfortable staying at home so near the pool where Tony drowned. Looking back, I realize it was that my world had been shattered and I could no longer make the same assumptions about my family’s well-being that I had previously.

Some parents have questions about religious beliefs. Sometimes this causes anger toward God or a higher spiritual being. This can be confusing, difficult to accept, and a source of guilt or anxiety. Yet, questions and confusion about spirituality and life in general is a common and normal response. With support and time, the resulting feelings can usually be resolved. However, if anger toward God, confusion over religious beliefs, and loss of meaning persist, parents should try to share them with a trusted person, particularly an understanding clergy or member of your religious community.

Feelings of anger can be difficult to deal with because the reasons for that anger may be hard to express and share because they are often not socially acceptable. Anger that is not expressed may lead to a general feeling of irritability that is hard to understand and very hard to shake. A father may become grouchy at work or with surviving children. A mother may find herself shouting at her husband or at a friend. As with guilt, it is important to be able to talk about anger issues with someone who cares and understands. Parents have reported finding relief from their anger by such behavioral responses as throwing eggs at a tree or finding a private place to scream.

When I returned to work, I already knew I had a much, much shorter temper than I had previously. Knowing this, I warned by co-workers and employees. I told them that I was angry and short tempered but it was not against them personally. I then asked them to help me know when I became this way. I had them simply ask, “Debbie, do you need more coffee?” Whenever they asked me this question, it was my hint to know I needed to step away and give myself the time and space to rebalance my feelings.

Fear

Fear or generalized anxiety could be a manifestation of grief. This sometimes stems from a deep concern that something else terrible and devastating is going to happen. It leaves one feeling even more vulnerable. Fear can be particularly intense when a child has died suddenly, tragically, or unexpectedly as in SIDS, a vehicular accident, homicide, or suicide.

Fear can lead to lingering doubts about the safety of other children, a spouse, or, in the case of a subsequent pregnancy, the next baby. If such fear persists, parent can become overprotective towards children, interfering with their children forming external relationships and their social development. Facing feelings of fear can be helped by journaling or sharing these feelings with others. This can help gain insight into the sources of fear and anxiety and one’s resultant behavioral responses.

I did not journal everyday but I did journal from time to time. I found it very helpful to write down what I was feeling. This not only helped me in the moment, but also helped when I picked up the journal to write again. Often on this grief journey, we look ahead and think of what we are no longer able to do that we had previously been able to. What I would forget is how far I had actually come in my journey. When looking at past writings, it reminded me of
the success and improvement made rather than just looking ahead to what I still could not achieve.

Emptiness and Loneliness

Ongoing intense feelings of **EMPTINESS** are perhaps some of the most difficult experiences for parents. Many have reported feeling empty, dead inside, almost as if a part of them died, too. One mother described this feeling poignantly, “A child is a part of you in a way that no other human being can ever be. When my child died, a part of me died with him.”

Another emotion is **LONELINESS** and a deep aching desire to hold and touch their child again. For a long time, parents may find themselves preoccupied with thinking about their child and how they died. Some are haunted by the memory of the child at the time of death or during an acute illness. With a sudden violent death, parents may be haunted by visions of how the death happened or the last moments their child was alive, whether the parent was present or not.

It seemed for months that every second of every day, I thought of Tony’s drowning. I wondered feverishly if he suffered or was aware that he was drowning. I would go to sleep at night with this my last thoughts and awaken with it my first thoughts. It was exhausting. After many months, I thought of his death less and more of his life.

At times, it may feel as if your child is still around. Some say they think for a moment that they hear their child cry, see their child in a crowd, or feel their child’s presence in the room. When a child was chronically ill, parents may feel a deep void when their caregiving role has
stopped. They may automatically get up at night to check on their child or to give a medication, only to be suddenly faced with the reality of the death all over again.

For a long while, I would hear the front door open and immediately think, “That must be Tony coming in” only for reality to sink in that he was forever gone. It was very difficult for my oldest son who lived in another state. For him, he only saw Tony when he and his family would come home for a visit. It took much longer for Tony’s death to sink in with him.

Some suddenly feel a sense of panic when they feel they can no longer remember things about their child and desperately attempt to recall the child’s appearance, voice, or behavior. One of my biggest fears as Tony’s mother was that I would forget him say, “Hey mama,” the way he often greeted me when coming into the same room. On the other hand, as a way of coping with painful memories and the pain of grief, some may try to escape triggers of memories by avoiding places that evoke particular memories or by not talking about their child.

It is impossible to completely escape these triggers. Parents will often encounter reminders of their child such as a favorite song or TV program. When parents see a child the same age, there may be an intense desire to hold and touch that child and, at the same time, a desire to run away to avoid being near the child. Events like entering first grade, graduation from high school or college, and marriages of their child’s friends are very difficult.

It is important to know that all of these feelings are normal, unless exaggerated or prolonged. In time, you will think about your child’s life first rather than their death. These thoughts someday will bring you more happiness and less pain, allowing you to treasure your child’s life, no matter how long or how short lived. Some ways of moving to this point in your grief journey is to include finding family and friends willing to share stories and memories, continuing special rituals on birthdays and anniversaries, making scrapbooks, and starting to journal. Memorials to the child, such as a tree planting or creating a scholarship fund, have helped many parents.

**Sadness and Depression**

As a result of this struggle to come to grips with the inner feelings that result from the loss of a child, parents who experience deep **SADNESS** and **DEPRESSION** often confuse the two. There will be periods of feeling blue and unhappy, preoccupation with sad thoughts, fatigue, and bouts of confusion. Most grieving people do have a period when they feel disorganized and find it difficult to concentrate on tasks or to keep up with work. Parents may find that their usual household tasks pile up and the other children’s’ needs seem almost to go unmet. If parents work outside of the home, they may find it difficult to manage the demands of their jobs.

Prolonged sadness and depression may lead to subtle bodily distress and physical symptoms. It is not unusual for a grieving parent to have difficulty sleeping, to have a diminished appetite, to become easily fatigued or to develop frequent headaches. Sexual interest may be greatly diminished or impotence may occur. Medical problems such as ulcers, allergies, or blood pressure elevations may appear.
In order to cope with the difficult emotional feelings and the nagging physical symptoms, some may turn to the use of drugs or alcohol to help shut out the pain. Although medications prescribed by a doctor may allow one to feel “better” in the short run or help one sleep better at night, they may mask the pain of grief and diminish the process of working through the sorrow. Buried sorrow can cause problems in future years.

Alcohol, an even more accessible mask, may be tried to ease the pain. Alcohol, however, can increase depression, anxiety, sleeplessness, digestive disorders, and problems with concentration. Be cautious as the use of either drugs or alcohol can become addictive and lead to serious problems that affect every aspect of one’s life. Bereaved parents who find themselves overusing or dependent on alcohol or drugs need to find help through a doctor, clinic, or self-help group.

Grieving parents coping with this deep sadness or depression should seek someone who will listen to their feelings and experiences. If you are that someone, it is important to know that it is just as helpful to listen silently than to try and offer any words of advice. Such a person is a gift. However, if depressive symptoms continue and impact work and family life, if sleep problems persist, if a parent starts to feel devalued and worthless, or if plans to carry-out suicide prevail, it is critical to seek professional counseling.

Fears About Going Crazy

Because of the many reactions caused by grief—loneliness, anger, guilt, fear, deep sadness and depression, and disorganization—some parents may begin to think what they are feeling is abnormal and have FEARS ABOUT GOING CRAZY. However, it is not uncommon to have these feelings, which usually lessen over time.
It is important to have someone to share and discuss their grief and pain with. Since grief and depression are discomforting, both to the grievers and those around them, some may try to deny or mask their feelings. Society tends to give grieving persons the impression that strength consists of covering up painful feelings. “Look how well she is taking it,” is often said about someone who is likely suffering quietly and hurting deeply inside.

Some parents may have a more difficult time during the grief process following the death of a child requiring professional help. Some signs of problems resulting from inadequate processing of grief could include

- inability to cry,
- ineffective in expressing feelings of sorrow,
- unable to talk about their deceased child,
- prolonged deep depression,
- poor self-esteem,
- persistent guilt,
- excessive anger, or
- exaggeration of any of the other normal grief responses.

If there is no one to share feelings and experiences with or you are worried about the intensity or duration of grief, it may be helpful to find and talk with a counselor, nurse, doctor, minister, psychologist, psychiatrist, or other professional.

Almost every bereaved parent will experience thoughts of not wanting to wake up or to not go on with life, but these should not be persistent thoughts or accompanied with a plan of suicide. If these escalate, professional help is critically important. Suicide is never the answer to eliminating the pain and hopelessness felt after a child dies. Suicide leaves behind another trail of tears for family and friends, preventing any opportunity to have a positive impact on others on the same grief journey or to honor your child’s memory.

**Decision Making**
Grieving parents may find DECISION MAKING difficult, even if only simple decisions. One major decision which all seem to struggle with when their child was young or not married is what to do with their belongings whether it be toys, clothing, furniture, car, or any other possessions. Some feel they are pressured to quickly remove these items from the home. For some, their child’s possessions may cause too much pain and are stored or given away soon after the death. Many parents, however, have reported that seeing the child’s belongings helped them face the reality of their loss and helped them grieve. Sometime later, some of these items became important memories of their child to hold onto.

There is no correct length of time to decide on what to do with your child’s belongings. For myself, it was very emotional when someone else drove Tony’s car away. After that initial experience, we knew we were not “ready” to go through or part with anything else. Months later, we gradually started to go through things. When we did, it was still tearful but it also brought much joy to see some of the items he was most proud of or to read some of the things he had written. We now refer to things we continue to find as “gold nuggets”.

Some have found it meaningful to donate some of their child’s clothing and possessions to a pediatric ward, homeless shelter, or other charity. What is important, however, is that your child’s room and possessions do not become a museum or shrine which can never be changed or moved. If this happens, it may be an indication that there is a need for professional help to support facing the loss more realistically.

Eventually, we changed Tony’s bedroom. We wanted to do something very special with it rather than just turning it into another bedroom. We made a special room, almost a magical room, for our grandchildren when they visited. Tony was very much a dreamer and loved
outer space. Instead of referring to it as Tony’s room, we started to call it the “Dream Room”. We also decorated with items dealing with outer space.

While some parents find decisions difficult to make, it is also possible to begin making decisions impulsively and without foresight and planning. The attitude is often, “What do I have to lose?” Thus, important decisions, such as moving, should be made carefully and with deliberate thought and planning. The needs of all family members and the long-term effects of all decisions should be carefully considered.

One of the biggest decisions parents of childbearing age face is often whether to have another child. There can be an intense desire to fill the emptiness created. However, no child can ever replace another child. Sometimes parents have conflicts because one parent wants another child, while the other does not. If this occurs, the couple may need to talk over the problem with a skilled professional. Once the decision is made to have another child, the couple may experience difficulty in getting pregnant because of tensions and anxieties. It is helpful if the couple shares the story of their loss and subsequent grief with health care providers.

Though difficult to imagine if your loss is recent, another big decision for parents is realizing that it is okay to be happy again and that it is okay to laugh. It is not easy and may even evoke feelings of guilt when the first laughter sneaks back into your life. Though difficult, it is important to know that just because you laugh or you experience happiness again, it is not a betrayal to the child that died but rather a tribute to them that they lived, especially when the laughter is from a memory they created.

**Time Frame for Grief**

Grieving the death of a child is a lifelong journey. You learn to live with the grief. I liken my grief journey to going on a hike with a backpack. Initially, when I put on the backpack loaded with water and supplies for the day, it feels so very, very heavy and I wonder how I will ever make it carrying that pack. However, after some time of walking with the backpack, it still weighs the same but I become more accustomed to carrying it. I learn how it is most comfortable to carry and adjust along the way.

Carrying the loss of my son, Tony, is much the same way. It is a heavy burden to carry the loss of a child with you for the rest of your life. It never goes away and you really cannot just set it aside. You will learn how to carry it that it is not as heavy when you first started. You will not forever continue to the daily, agonizing pain you feel in the first months and years.

The **time frame for grief** cannot be tightly defined. There are marked differences among individuals, even between a mother and father. There are many ups and downs. One day or week, a grieving parent may feel better and think the difficult times are behind. However, some minor experience can suddenly cause sharp, piercing pain. Over time, the good days out-number the bad ones.

Parents can become involved with life activities fully and can see options and possibilities for the future. Happy and constructive memories can be remembered and discussed with painful memories less prominent. Still, these bursts of grief pain can be just as intense decades later although they do not occur as often.
Special dates such as your child’s birthday, major holidays, and the anniversary of your child’s death can trigger these periods of pain. Likewise, events that the child missed such as high school or college graduation and marriage can be difficult. It is extremely important for grieving parents to be patient with themselves and with their spouse when the bad days come. Gradually, over time, the grief softens, the backpack seems a little lighter, and you can enjoy life again.

Even though others will expect and yearn for you to “be your old self again,” it will not happen. We are forever changed. We find our “new normal”. We are not forever sad but it is impossible to be the person we were before this profound loss. On the positive side, a tragic loss such as ours over time can give rise to renewed meaning and personal growth. Many have refocused their lives, becoming a better person, developing clearer spiritual beliefs, and finding important ways to contribute to society.

**Grieving is a Family Affair**

The death of a child affects everyone in the family in similar but yet different ways. It is important to remember that everyone grieves but does not express their grief the same. You will likely find that your family members exhibit feelings of loss in a variety of ways.

Even though we are keenly aware of the experience of our loss as parents, it is important to remember that if you have other children, they too suffer a unique loss of their own. It is ironic that there are countless books on preparing a child for accepting a new baby brother or baby sister but you will find little on the death of a brother or a sister.

Siblings are often referred to as the forgotten mourners. Siblings lose their brother or sister but also lose the parents that once were. If your other children are older, they are often asked how you or the other parent are doing rather than being asked how they are doing.

Grandparents suffer as well. Grandparents often set their grief aside to help the parents, brothers, and sisters of the family. If you are fortunate enough to still have your parents, remember that they grieve too. The mission of The Compassionate Friends is to provide support not only to parents but to also support siblings and grandparents.

**Grief, Communication, and Marriage**

In couples, fathers and mothers may find they express their grief differently than each other. Men, in our society, have often been programmed from early childhood not to show feelings; thus, some fathers may tend to hide their feelings or have difficulty talking about their child. Fathers may also hide their feelings because they have been led to believe that they must “act strong” for the sake of their spouse who is grieving deeply.

In addition, fathers are often not shown the same kind of support from friends and relatives that is given to the mother. One father complained bitterly that whenever he ran into a friend or relative they asked how his wife was doing and totally avoided asking how he was doing. The resultant bottled-up feelings may lead to physical symptoms or behavioral change such as extreme irritability or bossy, demanding comments.
Mothers often grieve more openly. They need to talk frequently about their child, about the circumstances of the death, and about their feelings. Too, their deep grief responses may continue for a long period after death, whereas fathers may be forced to move forward faster. It’s not unusual that a mother may share most of her pain with the child’s father. This may be difficult for some fathers. If the father cannot face his wife’s expression of pain, he may begin to avoid discussions or stay away from home. The mother, on the other hand, may begin to think that her husband doesn’t really care about the child or about her when he refuses to listen to her or to talk about the death. In addition, both the mother and father may become irritable which also affects their relationship with each other.

Initially, I assumed what was comforting for me would be comforting for my husband as well. I scrambled to find every picture we had of Tony. I wanted to make sure they were put together and stored safely. I wanted to look intently at each picture as if reaffirming my memories, I would cherish forever. I wanted my husband to do this with me. After a few tense weekends, I learned he could not handle looking at pictures where looking at pictures provided me comfort.

Since our ability to share feelings is not gender related but based on many variables including our personalities and experiences with feelings as a child, these stereotypical views of grief should not be considered cast in stone. Mothers may have difficulty in expressing their pain and fathers may be the more open and verbal of the couple. Sometimes both parents may feel it is important to appear “strong” so as not to upset the other person or the rest of the family. It may be difficult to face and share these very personal and painful feelings even with each other.

Sharing the pain is an important aspect of grief work and is vitally important in maintaining the relationship. It is important during these difficult periods for couples to keep open the lines of communication, even though communication when under stress is very difficult. To keep the communication open and to restore a feeling of closeness, parents may need to plan times to be together—alone. A night out for dinner or a weekend away from the family may be necessary. Communication with one’s spouse also involves developing an understanding of what he or she is experiencing or may need to communicate. Talking to a professional or to other bereaved parents may help to enhance communication if there are problems.

Many professionals have heard, believe, and repeat that 70-90 percent of marriages fail after a child dies. **Studies have proven this a myth.** In actuality, a very low rate of marriages fail after a child dies. Generally, these marriages were in trouble before the child died. When a couple has had a child die, it is reassuring to know that it is rare for them to face the additional stress of a failed marriage. Marriages survive because the life of the child—and the death of the child—was a shared experience. Those memories can never be shared and remembered in the same way with any other person.

**Issues for Parents of Adult Children who Die**

Parents of adult children who die may feel that their grief is discounted because society views their child as an adult and not really a child. At any age, facing the reality that a child has died before the parent and living without the child is difficult. If the child was married and left behind a spouse and children, the focus of support and concern often goes to them with
limited support to the parents or grandparents. On the other hand, the presence of the spouse and especially grandchildren can be extremely comforting.

Parents of married children may be comforted by having involvement in the planning of the funeral and burial arrangements. However, exclusion from these decisions and plans by the remaining spouse, can be a very painful loss as well.

Parents of single adults are immediately plunged into dealing with authorities, arranging the funeral and burial, and cleaning out the belongings while also still in a stage of shock and acute distress. Cleaning out the belongings is a reminder of the child’s daily life, furthering the deep feelings of loss. Too, often the dwelling needs to be vacated quickly to reduce hefty rental or mortgage payments.

Another burden for these parents is managing the finances and estate of an unmarried child. This sometimes can involve legal complexities if the adult child did not leave clear direction such as power of attorney or a will. If the child was married and the spouse also died, as can happen in a vehicular accident, the complications can be overwhelming. These legal demands are immediate and cannot wait until the initial emotional trauma has subsided.

**Grandparents Grief**

When a child dies, whether a baby, a child, or an adult child, there may also be grandparents who also grieve. Grandparents experience the same feelings of grief as parents, albeit the loss is a different experience. It is particularly difficult for grandparents to experience a grandchild’s death when they feel their lives have been lived fully but the child’s life was severed prematurely. Especially when an adult child has died, the grandparents’ feelings of
loss and grief are often not acknowledged. As a result, grandparents may not get the support they need. Too, some elderly adults do not easily share their feelings with others, even their own children.

Parents who lose an adult child may also be grandparents if their child had children. It can be very comforting to feel that one’s child is living on through their own children. However, complications can occur if for some reason the adult child’s spouse, the remaining parent of the grandchildren, severs relationships with the grandparents and cuts off visitation between the children and grandchildren after the death. Not only is this another huge loss for the grandparents but also for the grandchildren who have already lost a parent. At the time of such a profound loss for everyone, it is important to pull together rather than splintering apart. Grandparents may have to assume the legal guardianship of the children left behind. Though done with love, taking on parenting roles can be an emotional, physical, and a financial burden for grandparents, especially while also mourning the loss of their own child.

**Children Grieve Too**

The death of a sibling or a parent is upsetting to the children in a family. It is easy for adults to overlook the needs of the siblings or playmates when a child has died. Parents and grandparents may be so involved in their own pain and grief, and the demands of making plans after the death, that it is hard to help someone else. Some parents think they are protecting their children from the reality of death and the resultant pain by not talking about it. Others may be unclear or uncomfortable about how to talk to the other siblings. Parents of young siblings may mistakenly think they are too young to understand or that the death had no impact on them. As a result, children may receive incomplete information about what happened to the child and lack needed support in understanding death and grief.
There is no way of protecting children from the fact of the death and the resultant distress and
grief of the parents and other family members. Children are astute observers of behavior,
especially the behavior of their parents. They need to know why parents are behaving so
differently now. Children do notice the grief and depression of adults around them. Some of
the tears, grief, and pain of the parents should be shared with them and they need
opportunities, when ready, to share their own sad and often times scary feelings. They need
to grieve with the family by being given opportunities to be involved in funeral and grieving
rituals. The impact of death and the way children respond to the loss of a sibling depends on
many factors such as their age and developmental level, the relationship they had with the
child who died, the relationship with their parents, their previous preparation for the
experience of death, and their observations of parental grief reactions.

One of the main challenges confronting adults is how to explain death to surviving children.
Explaining death to children forces one to come to terms with the finality of death
themselves. This is not easy. Children need to have an understanding of physical death. The
correct terms, “dead,” “death,” and “died,” should be used when discussing the situation—
ever suggesting that the child is sleeping. Even though young children don’t know what the
words mean, they will eventually develop an understanding. Death as a physical event can
best be discussed as part of the cycle of nature. “Dead means not alive anymore. It's like the
leaves on the trees in the winter or flowers that die. Life is over. The body doesn’t work
anymore. It doesn’t move or hear or breathe or feel pain or sleep or need to eat. It just stops.”
A clear simple explanation should also be given to each child about the cause of death. It
should be geared to the developmental level of the child and may need to be repeated several
times. It is important to reassure them that they did nothing to cause the death. They also
need to be assured about the normality of their body so they are not scared they, too, may die.

The religious or philosophical explanation of death involves helping children understand their
family’s beliefs about life and about death. Some families have deep and clear religious
beliefs about the continuation of the soul after death, while others may focus more on the
memory the child has left behind and ongoing love that continues. Parents need to share with
and help children understand an outlook on life and death which they really believe. Children
are sensitive to dishonesty in parents. Remember when discussing religious beliefs with
children that abstract concepts are very difficult for young children to grasp. Young children
can understand mostly what they can see and feel. They will want to know in concrete terms
where God and Heaven are located. It may be many years before they can understand abstract
religious concepts.

Children have different ways of coming to grips with the full meaning of death. Some of
them will ask many questions while other children may mull over things quietly for a long
time. Questions should be openly and honestly answered with simple, brief explanations.
Sometimes the real questions will be disguised. Find out what the child is really asking: “I’m
not sure what you mean, can you explain a little?” Through the years children may continue
to ask questions about death. As they grow and mature, they will try to master the full
meaning of the death. It is not abnormal if they suddenly ask question six months, a year, or
even two years later. Their questions may come in the most unexpected time and place.
Maintaining an open and honest communication system between the parent and children,
although difficult, will be rewarding in the long run.

Like parents, children grieve too! Sometimes children feel guilty about bad feelings they had
toward the new baby or the child who died. Young children may mistakenly believe that a
bad thought could have somehow contributed to the death. Fighting and disagreements are a
normal experience between siblings, yet the surviving sibling may feel guilty about their
actions. Fear in children usually involves fear of separation, that they too could become
separated from their parents.

Children often work out their feelings through behavior. Young children may use play
activities to help them understand or express feelings. Playing dead or acting out funeral
scenes is not uncommon. Some children also draw or paint sad pictures. All of these play
activities help the child gradually understand and cope with the death. Some children may
become boisterous and noisy, may laugh a lot more than usual, and may even become
hyperactive for a time. Some of the behavior of children is aimed at getting the attention of
parents because they desperately want to know their parents understand them and care about
them. Older siblings, especially teens, may hide their grief but exhibit their pain through
depressive symptoms, behavioral outbursts, and lowered school grades. The inability to
concentrate and loss of organizational skills happens to children too. Teachers need to be
alerted to the child’s loss and grief.

Parents may become distressed because it appears to them that the siblings have adjusted too
quickly, grieved too little, or appeared totally unaffected by the death. Children have
difficulty knowing how to express their grief and may handle their confusion by trying to get
back to their own business of living. They may also be hesitant to speak of their brother or
sister or to express their feelings for fear of upsetting their parents even more. Like adults,
children may also try to deny the reality of the death and pretend it didn’t happen. When this
occurs, the child may experience a delayed reaction several weeks, months, or even years
later. The reaction may occur at the time of another significant loss. Often times teens are
more likely to seek a listening ear from classmates than from their own parents. Not talking
about the loss with parents is not an indication they are not grieving. Lastly, sometimes
young children do not have the vocabulary necessary to explain their feelings. It may take
several years before the experience can be put into words.

Parents may be having a difficult time coping with the behavioral changes, demands, and
needs of the siblings as they are absorbed in their own grief and have little energy to help
others. Sometimes, after a long illness and subsequent death of a child, parents may feel that
their relationships with the remaining children seem less intense than the relationship they
shared with the dead child. They may fear that they have lost their ability to love. This is a
normal and temporary part of grief. When this happens, parents should allow other sensitive
relatives or friends to spend extra time with the siblings so their needs are met. On the other
hand, with sudden, tragic death, parents may feel the need to protect and cling to the
remaining siblings. This, too, is often temporary but if it persists, the parent should seek
counseling.

It is very helpful to arrange to spend periods of time alone with each child, as this will create
better opportunities for communication and understanding. Too, children need to resume
normal life activities as soon as possible. Creating special activities and time as a family
helps to reinforce a feeling of family closeness during this time of stress. All children who
experience a significant death in their family or among friends need parents, or at least
another adult, who will listen to their questions and concerns. They need you, or at least
another adult, to tell them the truth about the death in simple, understandable terms. Be open
to accepting their feelings and behavioral reactions. Consciously provide opportunities for
them to talk, when ready. Allow them to resume life and activities, while reassuring them frequently of your love and understanding.

Finding Help

Talking about and sharing grief in some way with others is helpful. Many parents feel others just do not understand child loss. I, along with many others, have found it helpful to talk with and share my story and grief with other bereaved parents, grandparents, and siblings. Support groups such as The Compassionate Friends offer opportunities to meet and share with others who have had similar losses.

There also are support groups specifically for helping parents who experienced a perinatal or neonatal death. Many support groups are parent-led, but there are also grief support or therapy groups led by psychologists or health care professionals. You may find these sponsored by a local hospice or palliative care program at a hospital. To identify support groups in your community, contact a grief specialist from the local hospital or hospice program or, in most communities, call 211.

Parents who find they are having a particularly difficult time during the grief process may need professional help. This includes severe grief responses that are prolonged such as continued deep sadness or depression; persistent anger, guilt, or anxiety; continued thoughts of ending one’s life; serious communication problems in the family; or an inability to get back to some semblance of normality in work and life activities. If a grieving parent is worried about the intensity or duration of his or her own grief or that of the spouse, professional help should be sought from a counselor, nurse, doctor, minister, psychologist, psychiatrist, or other qualified professional.

Parents inevitably go through an intensive search for meaning in the tragic death of a child. This search often involves trying to find the answer to the questions “why?” or “why my child?” or “why me?” The search for meaning can be never-ending when parents think they must find a true answer to the unanswerable. It takes significant time to incorporate the death of your child into your life. Sometimes you’ll find that as you grow through your grief, positive changes do occur as life becomes bearable and, again, meaningful. Remember that through it all, you “Need Not Walk Alone”.

About The Compassionate Friends, Inc.

The Compassionate Friends offers friendship, understanding, and hope to families grieving the death of a child at any age from any cause. With more than 600 chapters and more than 25 closed Facebook pages, it remains the largest self-help bereavement support organization in the U.S. Local chapters offer monthly, peer-to-peer support meetings. Often special events for bereaved families such as a Walk to Remember, a butterfly release, or lantern launch are planned to allow the families to celebrate the lives of all the children gone too soon. These local chapters also often publish periodic chapter newsletters, maintain a website, or host a Facebook page. Chapters can be found by going to the chapter locator on the national website and simply inputting your zip code.
The Compassionate Friends also has an Online Support Community of a variety of closed Facebook pages and also chat rooms occurring daily. Additional information can be found on the national website at www.compassionatefriends.org. By going to the website, you can request a packet of information to be emailed or mailed to you or a friend. Additionally, there are more than three dozen grief related brochures, and an award-winning, online magazine, We Need Not Walk Alone.

The Compassionate Friends also hosts the Worldwide Candle Lighting the second Sunday in December, officially at 7 p.m. local time around the globe, creating a wave of light in memory of all children who have gone too soon.

The organization also hosts a national conference around the country annually where bereaved parents, siblings, and grandparents gather together to learn from each other. The Compassionate Friends Walk to Remember® is held the final day of the national conference. For more information, call The Compassionate Friends at 877-969-0010 or visit www.compassionatefriends.org.