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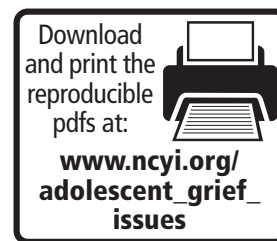
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Table of Contents

About the Author	7
Forward	8
Chapter One: Experiences and Observations	11
Chapter Two: Uniqueness of Adolescent Grief	17
Chapter Three: Normal or Abnormal? Grief or Trauma?	23
Chapter Four: Sudden Death Versus Anticipated Death	29
Chapter Five: Adolescent Suicide	37
Chapter Six: Common Adolescent Grief Concerns	43
Chapter Seven: Basics for the Caring Adult	49
Chapter Eight: Advice for the Caring Adult from Adolescents	55
Chapter Nine: Returning to School	61
Chapter Ten: Developing and Facilitating a Grief Support Group...	67
Appendix:	77
"Thinking of You" Information Sheet	79
Dedication and Memorial Journal Page	80
Specific Grief Issues, Fact or Fiction?	82
Common Triggers.....	84
Fundamental Steps for Grief Survival	85
Parental Release Form	86
References	87
Index for Reproducibles	89

Forward

“A difficult age.” “The awkward period.” “Raging Hormones.” “The age of many varied mood swings.” Such quotes we have often heard concerning adolescents in today’s world. You may even have heard many others. Although at times, many of these quotes are true in an adolescent’s life, adults must never use them as an excuse for not communicating with adolescents or showing them compassion, empathy and understanding during difficult times.

Adolescents are not supposed to die. They feel invincible. They expect themselves and their friends to live a long time. It’s against all the norms of nature. It is not fair. It is not right. Although it should never happen, the harsh reality is that it does happen, and when it does, it is a terrible shock for the adolescent. This is a time when a caring, unassuming adult can make a positive difference in a young person by fostering growth and maturity. If it were offered as a course in life, none of us would sign up for it, but we can be better off for having had this experience when handled in a caring and compassionate manner.

The death of a parent can result in the adolescent experiencing adult depression, neurosis, suicide, and physical illness later in life. (Breier 1988, Osterweiss, Solomon and Green 1984) At the time of death, adolescents may exhibit immediate reactions of withdrawal, helplessness, guilt, lack of concentration, insomnia and/or eating disorders. (McIntyre 1987, Osterweiss, Solomon and Green 1984) Experts conclude, however, that in time, healthy accommodation can take place following the death of an adolescent’s parent if circumstances are favorable; that is, if caring, understanding and compassionate adults are willing to take an active approach to enhance the grief process of the adolescent.

In dealing with adolescents, as with any other group, respect must be demonstrated by the caring adult. They are not children or adults. They make up a special group of griever who deserve a special kind of care and consideration from the adults in their world. Many times, however, adults expect teens to grieve like they do and expect that “time will heal all.” Because of these “adult” expectations, communication barriers arise, and the caring adult loses his or her effectiveness in guiding the adolescent through this emotionally turbulent time.

Although there are cases where clinical help is necessary, one of our most common fundamental beliefs about grief is that it is best handled outside of the psychologist’s or psychiatrist’s office. Ordinary people who care and have compassion for their fellow human beings play an extremely important role toward the healing process of the grieving person. Many adolescent referrals to professionals would never have to be made if adults would take more time to learn about some simple supportive fundamentals in guiding the adolescent through the grief process.

We will never have all the answers as to why things happen. We will never always know what to say. The adolescent in a grief crisis may not be able to communicate any feeling soon after the tragedy. Because of these factors, it is easy for the adult to withdraw or even make an immediate referral for the adolescent to professional counseling. Although professional counseling may help, our research and experiences clearly show that the adolescent, in most cases, prefers to talk to a trusted adult where they already have an established relationship. Also, it doesn't matter to most adolescents what profession (factory worker, custodian, teacher, secretary, etc.) this trusted adult may belong to, as long as they show empathy, caring and compassion. My experience in working with grieving people is that the greatest immediate need is comfort. Comfort before counseling can make the counseling experience more beneficial. Comfort promotes self-regulation, safety, and makes it easier for the person being counseled to "connect the dots." Counseling is a cognitive activity, and comfort helps the cognition process.

As much as adults may wish to protect adolescents from the pain and sorrow that accompanies death, life's experiences will lead to these encounters. Statistics indicate that one of every six children will lose one parent through death before they reach the age of 18. (Van Dexter, 1986) These experiences influence the total lives of the adolescents – their academic pursuits in school, their social lives, their relationships with family and friends, and their emotional selves.

Although we will never always know what to do, we do know that when our hearts are right, most of our instincts about what to do or say will be helpful. We cannot give a cure but we can give care. This unique group of griever needs a caring touch from a caring adult if they themselves are to become caring, emotionally mature adults.

Understanding and Addressing Adolescent Grief Issues is a work dedicated to helping the caring adult guide the adolescent through this turbulent time.

CHAPTER

1

Experiences and Observations



Experiences and Observations

In this chapter, we will attempt to share some of our experiences of working with adolescents struggling through the grief process. Please note that we use the word “*process*” because grief is a *process*, not an *event*. We feel that sharing our experiences is the most effective way to communicate tested techniques, as it is clear from our research that adolescent grief is an area in need of much more attention. Many of the studies that have been done in the area of adolescent grief have some inherent problems. (Wolfelt’ “Healing the Bereaved Child”) There are discrepancies among control groups and definition of terms, causing gray areas that further frustrate the efforts of counselors, educators, and caring adults.

Most deaths that adolescents’ experience are sudden and untimely. A parent may die of a heart attack, a brother or sister may die of an aneurysm, a friend may complete a suicide or be killed in a car accident. The very nature of these deaths often causes the adolescent to feel a prolonged and heightened sense of confusion and uncertainty. At this point, the trauma affects the Vagus Nerve which orchestrates relaxation, self-soothing, social interactions and fight and flight freeze responses. (National Institute for Trauma and Loss in Children, TLC 2015) They become emotionally wounded by events beyond their control. Loss of this “*control*” coupled with the stress of trauma can and often is a very frightening experience. After the shock and numbness wear off, depression will usually set in.

From our clinical and educational experiences, we easily conclude that adults generally communicate two philosophies to grieving teens: *adolescents should grieve like adults*, and *time will heal all*. Nothing can be further from the truth! Many mental health care professionals claim “it is what we do with time that promotes the healing process.” Most adolescents have not been exposed to the many life experiences of an adult; therefore, when tragedy occurs, the adolescent has fewer life lessons from which to draw comfort and support. The maturity and reasoning levels of an adolescent are usually not the same as an adult’s. Grief is a unique experience for all people. It is a unique experience for every individual adult. We must then conclude that as adults, we are putting unfair expectations upon adolescents to grieve similarly to adults. Many adults do this without realizing it.

Although it is true that time heals, time alone is not enough to heal the deep emotional wounds inflicted by the death of a loved one. The assumption that time will heal all, without any or very few interventions, communicates to adolescents that adults are indifferent. The philosophy that “time heals all” is, in our eyes, a typical adult cop-out. Providing opportunities to explore and share feelings is crucial to the healing process. In a later chapter we will be more specific as to how to make this happen.

Adolescents are also extremely close to boyfriends, girlfriends and best friends. If one of these significant people should die, they need the opportunity to mourn. Many times, unfortunately, we have witnessed their grief being overlooked because society tends to focus on the “primary mourners” – the dead person’s immediate family. Because of this oversight, it is very probable that this adolescent will perceive that his/her feelings are not important; therefore, their sorrow is not validated.

The loss of a sibling is another unique challenge to the adolescent. This challenge is difficult when siblings have close relationships and also when relationships are in conflict. Siblings can be best friends or fierce rivals. In both cases, grief tends to be very intense, complicating the grief process.

Here are some common practical errors adults make when interacting with a grieving teen:

Saying, “I know how you feel”

When we tell adolescents “I know how you feel,” we are actually telling them that they can’t talk to us because they know that we *don’t* know how they feel. Since grief is a unique experience for every individual, it is impossible to know exactly what another grieving person is feeling. Past experiences, plus a host of other unique dynamics in a person’s life, work together to form a singular grief experience for every individual.

Putting unrealistic responsibility on the adolescent

For example, a young adolescent’s father just died in a car accident. A caring adult puts his arm around the boy shortly after the funeral and says, “You have to be the man of the house now and take care of your mother and little sister.” This young adolescent has just lost his father. He will usually wonder if he can care for himself let alone his mother or younger sister. The possibility of the adolescent having to be “the man of the house” is what the adolescent *doesn’t* need.

Saying, “You have some big shoes to fill.”

Many times during the funeral process or shortly after the death of a parent or sibling, the adolescent may hear this phrase several times. This puts unfair expectations on the adolescent to live up to a person who “has lived an exemplary” life. Many times it also causes the adolescent to ask the question, “What is wrong with me?” This may also encourage the adolescent to lose his own self-identity and become a source of frustration when he tries to emulate his loved one who has died and eventually realizes that he can’t.

Saying, “If you need me, call me.”

This call rarely happens and, to be frankly honest, the person who offers the help knows that in most cases they will not get a call. Many times the grieving person is so consumed by his grief he either forgets the offer or is in too much pain to call. Because of this, the “caring” adult has taken himself off the hook. Therefore, in reality, the “If you need me, call me” statement is a cop-out. It communicates to adolescents that “we really would rather not get involved unless we have to.” The adolescent, like the grieving adult, can draw this conclusion rather simply; you don’t want to be involved in a situation that is depressing and painful.

Minimizing the Loss

“At least you still have your mother.” “At least you still have other brothers and sisters.” “At least you were expecting her to die.” “At least he went quickly and didn’t suffer.” We have all too often heard these “well-meaning” statements made to grieving adolescents by “well-meaning” adults. We should *never* minimize the loss of a loved one to anybody. Since the adolescent is feeling very sad, the caring adult lays guilt upon the adolescent for feeling so sad. The adult who makes statements such as these communicates to the adolescent that they have absolutely no insight as to what they are going through and will obviously be of no help.

Saying “She (the deceased) wouldn’t want you to be sad.”

Since the adolescent is naturally sad and has every right to feel sad, a great deal of guilt is heaped upon the grieving adolescent because what is being communicated to him is “you are disappointing the deceased loved one because you are feeling sad.” As we all know, guilt handicaps the progression of the grief process.

The list can go on and on; however, these are the most common mistakes that we have witnessed in our experiences. Please don’t beat yourself up if you made some of these mistakes; however, please read on if you care to make a positive difference in the lives of adolescents grieving the loss of a loved one.