Children and Parental Death:

Effects and School-Based Interventions

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ABSTRACT

A significant number of children experience the death of a parent within the United States. At the same time, many misconceptions have formed leading to many individuals lacking knowledge and understanding of the grieving process of children including school counselors and educators. Numerous factors affect a child's grieving process including the child's developmental stage, gender, personality and surrounding environment. Due to such variability, research has indicated children experience their own unique grieving process. As a result, school personnel struggle to provide effective interventions for children who have experienced a parental death. This paper summarizes research implications regarding the needs of a grieving child and ways in which adults and school personnel can prevent problematic outcomes. Findings from this literature review indicated many children who experience the death of a parent do not experience mental health problems as adults. In addition, findings also indicated a lack of research regarding effective evidence-based interventions for the grieving child. Further research should be conducted regarding the foundation of effective school-based interventions to assist the grieving child.

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Chapter I: Introduction

It is commonly known and understood by adults that with the gift of life there follows an inevitable death. One may be given life for a short or longer period of time. When considering human life, complex emotions and psychological implications accompany the death of humans. The complexity intensifies when taking into account the various developmental stages of family members who are coping with such a loss.

In American society, it is more common for children to experience the death of a parent after they have entered adulthood. However, within the United States population, an estimated 1.5 million children have experienced the death of a parent resulting in them living in a single-parent household according to the 1989 United States Census Bureau (cited in Kirwin & Hamrin, 2005). In addition, it has been estimated that one in every twenty children will experience the death of a parent before the age of fifteen (Kirwin & Hamrin, 2005). With the large number of children under the age of eighteen who experience such a traumatic event, research has begun to address ways in which community members, surviving parents and schools can help those affected children experience a healthy grieving process.

Children experience the death of a parent and the subsequent grieving process in various ways dependent upon numerous factors such as their developmental stage, gender, surrounding environment and the availability of a strong support system. In addition, children coping with this significant loss are often required to experience events that may be novel and bizarre. For example, children may assist in the preparation of the funeral and burial and also choose to attend these events. Further, during this time of loss, the surviving parent may develop an emotional reliance on his/her children which could result in the children witnessing emotions that are unfamiliar to them while they struggle to cope with similar feelings themselves (Cait, 2005). Because of the abundant internal and external variables that can affect them, the needs of these children and the proper response to these needs from surrounding adults and family members become complex and obscure. In addition, school personnel may struggle to develop and implement a successful intervention that meets all of the child's needs.

The developmental stage of children can influence how the children may conceptualize and respond to the death of their parent. For example, younger children may be informed about the death; however, young children commonly lack understanding of the irreversibility and finality of the situation. Adolescents and teenagers, on the other hand, have the mental capacity to not only understand the complexity of death, but also are able to identify and verbally communicate their feelings and reactions (Christ, 2000). Dependent upon their developmental stage, children may express various demands in an attempt to reach their emotional needs. At the same time, it seems children require common supports from those around them (MacPherson & Emeleus, 2007). For the adults who seek to help these children, they should be knowledgeable of their basic needs to provide children with the most effective and advantageous support system.

In addition to meeting the basic needs of grieving children, adults should also strive to provide an environment in which children feel comfortable to communicate their feelings and thoughts regarding the death of their parent. According to Hurd (2004), children need this open environment to also gain knowledge about the death which includes asking uncomfortable questions to significant adults in their life. Gaining knowledge and understanding of the facts of the death while feeling comfortable sharing deep emotions with others may be difficult for adults, but research suggests these are the basic ingredients for the most optimal environment for these children (Cait, 2005; Hurd, 2004). Providing children with this optimal environment will inadvertently decrease the amount of stress they experience through this unwanted transition.

Limiting children's exposure to stressful events will help them maintain their emotional health (Haine, Ayers, Sandler, & Wolchik, 2008). The responsibility of creating such an environment is that of the surviving parent and other significant individuals and role models in the child's life.

To create an optimal environment, adults need to become familiar with the child and grieving process he/she will be undergoing. Research indicates surviving parents and school personnel need to be educated and knowledgeable of the complex grieving process to give the child what he/she needs (Auman, 2007; Eppler, 2008). Hurd (2004), for example, encouraged parents to take initiative in assessing and positively developing their parenting skills. Reflecting on school personnel and parents' own strengths and weaknesses regarding the concept of death and the grieving process should be done for each individual to be aware of how beneficial he/she can be to the child.

Statement of the Problem

There is a significant occurrence rate of children experiencing the death of one or both parents. It is essential that school counselors and personnel recognize and understand the complex nature of the grieving process and various developmental stages of children to provide effective therapeutic interventions to students who experience such a traumatic event.

Purpose of the Study

Research regarding the grieving process of children who have been required to cope with the death of one or both parents seems to be extensive and complex. This paper attempts to summarize the literature based on numerous factors including the developmental stages of children under the age of eighteen, their gender, their personality characteristics and their support system. In addition, positive coping strategies, the composition of an optimum environment and beneficial interventions for these children will be addressed.

Research Objectives

The five objectives of this literature review are a) To understand past and current conceptions of children grieving the loss of a parent(s); b) To discuss various theoretical assumptions of the grieving process; c) To understand children's comprehension of death based on the various developmental stages of life; d) To present positive coping strategies for children under the age of eighteen; and e) To identify effective school-based interventions for students who have experienced the death of one or more parents.

Definitions of Terms

In an attempt to develop a comprehensive knowledge and understanding of the psychological impact on children who have experienced the death of a parent, the following terms are defined:

Bereavement. According to the *Diagnostic and Statistical Manual of Mental Disorders*, Fourth Edition, bereavement is a category that can be used when the focus of attention for the clinician is on the survivor's reaction to the death of a loved one. As part of the reaction to the loss, the individual may have symptoms of a major depressive episode, but the depressed mood is considered normal (cited in Kirwin & Hamrin, 2005). Steen (cited in Kirwin & Hamrin, 2005) described bereavement as "the internal process of having lost a significant other" (p. 67).

Grief. According to Steen (cited in Kirwin & Hamrin, 2005), grief is "the personal response to the loss" of a significant other (p.67).

Mourning. Steen (cited in Kirwin & Hamrin, 2005) has described mourning as "the external expression or public expression" of the loss of a significant other (p. 67).

Parent. A parent can be understood as "a person who brings up and cares for another" or "an animal or plant that is regarded in relation to its offspring" (Merriam-Webster, 2008, n.p.).

School-based intervention. According to Lentz, Allen and Ehrhardt (1996) school-based interventions can be defined as when school personnel develop a plan to do "something different to solve some perceived problem" (p. 120). An effective school-based intervention can be further defined as an intervention that promotes "meaningful changes in academic and/or behavioral problems" (Lentz, Allen & Ehrnhert, 1996, p. 120).

Assumptions and Limitations

For the purposes of this literature review, it is assumed that the children who experienced the death of a parent held a relationship with the deceased parent prior to the incident. It is also assumed that this relationship consisted of the parent being a role model for the child. Limitations of the review lie in the availability to all research regarding the topic as well as past research papers providing a clear definition of a parent.

Chapter II: Literature Review

Introduction

This chapter will begin with a discussion of past and current conceptions of children who have experienced the death of a parent. This discussion will also provide information regarding the occurrence rate of this life event. The chapter will then present the major concepts of various childhood-focused developmental theories and how development can affect the grieving process. A discussion of reported beneficial coping strategies and the importance of family involvement will also be included. The chapter will conclude with suggested interventions community members and schools can provide to the students to encourage positive outcomes for the child following the death of a parent.

Conceptions of Grieving Children

The United States is rich in cultures and traditions. Concerning issues of death and dying, research suggests that our culture in the United States "avoids grief and denies the inevitability of death" (Auman, 2007, p. 34). This aspect of the culture has led to the development of misconceptions of children who have experienced the death of one or more parents. According to Auman, there is a startling lack knowledge and understanding of the grieving process of children and their need for support within American society. Professionals trained to work with children also reported a lack of training regarding childhood grief (Rowling & Holland, 2000). Findings from a study done by Wass, Miller and Thornton (cited in Rowling & Holland, 2000) indicated 40% of teachers in the study reported being trained about grief while 75% reported they were trained about death.

Many adults falsely believe that children "bounce back" after grieving for a short period and that their grief will progressively lessen until it no longer is there (Black, 2005, p. 29). In fact, Eppler (2008) suggested that children who have experienced the death of a parent tend to report lower self-esteem, experience depressed states and have higher levels of anxiety. It is imperative that adults understand and acknowledge the fact that children do not grieve the same way as adults. If their unique grieving process is not taken into consideration, there may be detrimental effects on the children's development and overall psychological well-being.

Theories have been generated regarding the grieving process of children who have experienced a parental death. Bowlby (1980) spoke of the importance for adults to recognize that children have limited understanding for figures of speech. When children are told their deceased parent is sleeping, they tend to fear falling asleep themselves. Bowlby emphasized that children should be told two essential pieces of information: a) that the deceased parent will never return, and b) the body was either buried or turned to ashes. Because of their developmental stage, children must be given facts regarding their parent's death. In addition, research points to the difference between childhood and adulthood grieving. Bowlby noted that problems occur given that children have significantly less understanding and knowledge of concepts and issues pertaining to life and death than their adult counterparts. In addition, children tend to live more in the present and have difficulty remembering past events. Bowlby's research and theories pertaining to children's grieving process were novel concepts of the time. Since the 1980s, there has been ample opportunity for current researchers to expand upon, confirm, or reject Bowlby's original research theories.

Occurrence Rate

A significant number of individuals experience the death of a parent before they reach the age of eighteen. In fact, Harrison and Harrington (cited in Melhem, Moritz, Walker, Shear & Brent, 2007) reported that an estimated 4% of children have had this experience in Western countries. The Social Security Administration (cited in Haine, Wolchik, Sandler, Millsap, & Ayers, 2006) estimated that 3.5% of children under the age of eighteen experience the death of a parent within the United States. This percentage equates to the United States Census Bureau's estimation of more than two million children who have had this experience (Black, 2005). Within urban areas of the United States, more than half of children experience an unexpected death of a close friend or relative, resulting in death being the most common serious negative life experience for this population (Breslau et al., 2004, as cited in Melhem, et al., 2007). The frequent occurrence of such a traumatic event has given rise to a demand for information and commonly shared knowledge regarding ways in which others can help bereaved children cope with their experience.

A contribution to the demand of information about the effects of parental death on children and adolescents was the traumatic series of events that took place during and following the terrorist attacks on September 11, 2001 on United States territory. An estimated 10,000 to 15,000 children lost one or both parents in the attacks (Kirwin & Hamrin, 2005). The terrorist attacks gave attention to the importance of understanding how individuals cope with the death of a parent in their own unique ways. In addition, according to Kirwin & Hamrin, the attacks brought attention to the significant role of mental health professionals and the importance of understanding how children grieve. As a country, the United States experienced the death of thousands of civilians and has since realized the pressing needs of the surviving families. The large number of children affected by the terrorist attacks highlighted the importance of developing a common knowledge and recognition of the need to develop interventions that foster effective coping strategies to help the children and the country move forward.

Recent research regarding the death of a parent has brought forth a deeper understanding of grieving children. Eppler (2008) suggested that children who have experienced the death of a parent do not feel disconnected from other people in their lives. Children in the Eppler study expressed frustrations with others who believed that the children were not normal. The children reported they preferred that others notice their strength and resiliency.

Research also emphasizes that the outcomes following the death of a parent are dependent on numerous variables such as developmental stage of the child, the nature of the death and family make-up and reaction (Holland, 2000; MacPherson & Emeleus, 2007). Problems that surround how a child responds his/her parent's death are complex and unique for each child. It is important for others to understand how specific variables can positively and negatively affect the child's grieving process to provide adequate, optimal support to the children. By acknowledging and accepting the inherit complexities within these children's situations, supporters can begin to offer meaningful comfort and assistance.

Conceptualization of Death and Grief

Any traumatic childhood event can potentially have a detrimental effect on a child's psychological well-being. Dependent on the child's chronological age and stage of development, the death of a parent can be perceived and understood in various ways. Children do not have the mental capabilities of adults; and, therefore, they understand and respond to death in various, unique ways that are also influenced by their age at the time of the event.

Considering the short time frame in which humans tend to experience the majority of their cognitive development, it is not surprising that there is a variety of ways in which children respond to the death of a parent. This response seems to be dependent upon the child's developmental stage and ability to understand the concept of death. Infants tend to respond to alterations within their daily schedule as well as tension they may feel as a result of the emotional state of those around them (Kirwin & Hamrin, 2005). Children this age may not have the intellectual ability to understand death, but can sense and react to an undesired change. For children to have the ability to mourn, Worden (1996) suggested that children must have acquired the ability to recognize significant figures, such as their parents, and understand the constancy of objects. According to Christ's (2000) explanation of how grief effects children at various ages, those who have reached toddler and preschool age may be knowledgeable of the concept of death; however, preschool children struggle with understanding concepts of irreversibility and non-functionality that accompany the death of a parent. Christ also indicated that these children tend to repetitively ask about the deceased parent's whereabouts.

By the time children are approximately six to eight years old, they begin to understand the finality and permanence of death and react with an age-appropriate level of sadness (Christ, 2000). However, these children also tend to communicate feelings of guilt for the death and a desire to die to be with or visit their deceased parent (Black, 2005; Christ, 2000).

According to Christ (2000), children who experience the death of a parent around the ages of nine to eleven often demand detailed, factual information about the death to gain a complete comprehension of the event. Christ also indicated children at this age are able to briefly discuss feeling sad, often expressing it in indirect ways such as being argumentative, stubborn or withdrawn.

Christ (2000) stated children from twelve years old to fourteen years old reported feeling a strong sense of their deceased parent's presence in their lives. This was evident in their willingness to discuss dreams they had of their parent, admitting they had frequent conversations with the parent and being comforted by the parent's material possessions. At this point in children's developmental process, it is assumed that the children have entered Piaget's formal operational stage in which most individuals can understand abstract concepts such as death.

In the final two years of childhood, according to Christ (2000), children tend to have an increased worry about their own vulnerability to death. Children from the ages of fifteen to seventeen also communicate and demonstrate thoughtfulness and empathy to others who are affected by the death, but also report a common feeling of being overwhelmed by their surviving parent's emotional dependence (Black, 2005; Christ, 2000).

According to Clark (1997), despite developmental trends, there is a large variation in which children may understand and respond to the death of a parent. While research provides guidance on the kinds of behaviors that can be expected of parentally bereaved children at different ages, it is not inclusive toward all children.

Research has also discovered similarities based on developmental stage, not chronological age. Christ (2000) noted that younger children and early adolescents tend to have a greater risk for maladjustment. In addition, children as young as three years of age may enter a grieving process; however, this process is much different than one seen in their adult counterparts.

As previously discussed, children have a variety of needs dependent upon their developmental stage. Stein, Riedel and Rotheram-Borus (cited in Rotheram-Borus, Weiss, Alber & Lester, 2005) concluded that adolescents appear to have more developmental resources than young children. These resources may result in greater familial expectations and a variety of needs for support from adults. Children may require assistance with their bereavement based on their developmental stage and their personal resources that are available for use. To provide adequate support for a child that is grieving, surrounding adults should take developmental factors into consideration.

Gender

Research has also indicated variations of children's response to the death of parent that may be influenced by their gender. Dowdney, Saler and Skolnik suggested that females tend to internalize their problems, while males externalize their difficulties (cited in Haine et al., 2008). Generally speaking, females who experienced the death of a parent during childhood tend to exhibit more anxiety-related behaviors. On the other hand, males tend to demonstrate more outwardly aggressive behaviors and exhibit more learning difficulties in school (Worden, 1996). Males also tend to have more delinquent behaviors than their female counterparts (Ellis & Granger, 2002). Within the family relationships, females tend to be more sensitive to family disagreements while males, particularly teenagers, express feeling pressured to be strong for other family members (Worden, 1996). The gender of the child seems to influence how the child may respond to the death of a parent. However, it is important to understand that the previously mentioned responses are tendencies, not prescriptive reactions.

The Grieving Process

Development not only affects individuals' conception of death, but also the grieving process in general. Researchers have attempted to understand and develop an all-encompassing theory of the grieving process, but tend to disagree on a definite composition of its course (Holland, 2000). Kubler-Ross (cited in Holland, 2000) suggested that grief can be best understood within a staged model that begins with shock and disbelief, which is then followed by anger, depression, resolution and an eventual acceptance of the loss. Black (2005) focused on the response to grief and suggested there are three levels of care required dependent upon the level of grief the child may experience.

According to Black (2005), the first tier requires support from individuals based on friendship and compassion. Individuals with this type of relationship with the bereaved child could be teachers, counselors, parents and friends. Relationships with individuals who provide therapeutic interventions with training in grief counseling would be the second tier. Finally, Black's third tier includes therapy given to children who are experiencing impairments due to their grief. The third tier of therapy would be provided by psychiatrists, clinical psychologists or family therapists specializing in grief counseling.

Another example of a staged model consists of an initial stage in which children require support from family members, a middle stage having a clinical focus on the child's grief and emotions and a late stage that focuses on reorganizing a child's identity and meanings of significant relationships with others (Auman, 2007; Kirwin & Hamrin, 2005). However, Parkes (cited in Holland, 2000) hypothesized that the grieving process is more fluid in nature. According to Parkes, individuals may go through the stages that Kubler-Ross suggested; however, they can experience them at any time and not in a sequential order. Cait (2005) stated that "the grieving process is not an encapsulated process that is neatly packaged and contained in a person's life," rather grief is a process that evolves over time (p. 92). In summary, there seems to be a process individuals experience following the death of a parent; however, the process is not clearly defined and is dependent upon each individual and his/her situation.

Other Factors

The grieving process may be dependent upon numerous factors. One factor influencing the grieving process may be the type of grief the individual experiences. Some children experience complicated grief which is defined as a combination of symptoms involving great distress such as anger, bitterness, continuous thoughts about the deceased, sense of purposelessness, detachment and difficulty accepting the death (Cohen, Mannarino & Deblinger, 2006; Melhem et al., 2007). Other children have other responses to the death of a parent. Their responses may be more congruent with the symptoms of uncomplicated grief. According to Cohen, Mannarino and Deblinger (2006), uncomplicated grief is the grieving process experienced upon the loss of a significant relationship. Symptoms of this kind of grief seem to be more similar to those of major depressive disorder. Harrington and Harrison indicated that despite the type of grief, neither increased the risk of developing a long-term mental illness into adulthood (cited in Cohen et al., 2006).

While complicated and uncomplicated grief did not necessarily result in an increased risk of mental illness later in life, children who experience grief tend to exhibit more problem behaviors than their non-bereaved counterparts (Rotheram-Borus et al., 2005). Researchers have identified specific reasons why these children may have problems with emotional and behavioral control. Hurd (2004) emphasized the significant influence external and internal protective factors have on children. External factors, such as a child's environment, can help or hinder the grieving process. In addition, internal factors or a child's skills, attributes and self-concepts also can have significant effects on resiliency.

Worden stated there were five factors that influenced the grieving process (cited in Kirwin & Hamrin, 2005). The first factor, relational, considered the type of relationship the surviving individual had with the deceased individual. The circumstance that surrounded the death of the individual may also have an effect. For example, if the deceased individual was missing and a body was never found, the grieving child may react with noticeable unhealthy behaviors. Other factors Worden identified included the child's history of experiencing grief in the past and his/her resiliency and personality characteristics. The final factor influencing a child's grieving process included social aspects such as any social stigma that may be attached to the death, the lack of adequate support for the child and surrounding adults acting as if nothing had happened. There are numerous aspects of a child's life and personality that can lead to a healthy or an unhealthy grieving process. With knowledge of the significant impact of these factors, adults can begin to provide children with proper support to assist them in experiencing a healthier grieving experience.

Suggested Coping Strategies and the Optimal Environment

A variety of unique events take place when an individual passes away. Such an exceptional series of events can lead to confusion and disarray in the surviving child's life. Haine and colleagues (2008) suggested that "children's adjustment following a major stressful event such as parental death is heavily influenced by the cascade of stressful events that occur following the death" (p. 114). This concept is known as the transitional events model. The model indicates that children who experience the death of a parent also tend to experience numerous other stressful events in relation to the death. By minimizing unnecessary stressful events, the child may have the opportunity to experience less distress throughout the grieving process. Intervention goals that follow the transitional events model seek to minimize a child's exposure to stress-filled changes after the death of the parent and to increase the number of resources available to the family and child that assist in coping with the stressors (Sandler et al., 2003). The transitional events model can provide individuals who are experiencing the loss of a loved one a framework to follow when attempting to assist children who are mourning the death of their parent.

Children are dependent on their parents and/or other adults to help them meet their physical and emotional needs. According to Hurd (2004), it is important that the adults surrounding the child provide an open and comforting environment in which the child can freely communicate his/her emotions when the child enters the grieving process. Unfortunately, as stated previously, research has suggested that adults tend to assume that children overcome the grieving process quickly, experiencing grief at a continually decreasing rate with a definite ending (Black, 2005). Children who experience the natural grieving process do not generally have severe mental health problems as adults (Brown, Sandler, Tein. Liu & Haine, 2007). However, this process can last months or years with the child experiencing varying intensities of grief (Black, 2005). Kirwin and Hamrin (2005) suggested that adults who did not experience the entire grieving process are more likely to have symptoms related to depression and anxiety. In summary, bereaved children who have lost a parent present needs that are not necessarily present in children who have not experienced this traumatic event. If these needs are not met, negative emotional effects may surface in the child's adulthood (Kirwin & Hamrin, 2005).

Complexities concerning the developmental stages of children contribute to the unique needs that parentally bereaved children develop as a result of their parent's death. Because the concept of death is understood by children differently due to their developmental or cognitive levels, they have different needs than adults. Developing children face other obstacles regarding their rapidly maturing bodies and minds. In addition to the unique grieving experience, they also experience changes in their health, self-perception and their social and economic situation (Auman, 2007). The complex maturation process serves as a contributing factor toward these children's needs throughout the grieving process.

MacPherson and Emeleus (2007) also recognized that grieving children, ranging from young children to adolescents, have numerous and unique needs that should be met. In their study, bereaved children identified the following needs: the need for others to be educated about death and the grieving process, the need for consistent relationships, the need to have techniques that keep memories meaningfully and privately, the need for normalcy and continuity, the need for empathy or an individual the child connects with who can identify with the child's situation, the need to escape the distress and intensity of the situation, the need for a prompt response when requesting for support and the need for having their own understanding of death. By meeting these needs, according to MacPherson and Emeleus, children have the opportunity to experience a healthy grieving process with an optimal chance to overcome the traumatic incident.

Because children have needs they must meet throughout the grieving process, researchers have suggested that adults respond in particular ways. According to Clark (1997), a child may need an explanation of what happened following the death of a parent. Adults are encouraged to explain the death concretely because children tend to develop a better understanding of the series of events and receive answers to questions they may have. If children are not given the facts, children may begin to create a story to fill in the gaps to develop an understanding. The story can potentially be more upsetting than what actually took place (Worden, 1996). In addition, children should be part of the process following a parental death. This gives them an opportunity to say their good-byes in a healthy manner (Clark, 1997).

Specific tasks have been identified that children must go through when entering the grieving process. Worden (1996) identified four tasks that need to be met for grieving children. The first task is that children must accept the reality of the death. To do so, they may need to be told the facts of the death repeatedly over time. The second task involves the need for children to experience the emotional aspects of the death. Third, children are required to adjust to a new environment in which the deceased parent is no longer there. Finally, children must develop methods to memorialize the deceased parent and relocate that person within another realm of their life. Ultimately, children need to feel accepted regardless of their reaction to the death (Clark, 1997). Such acceptance respects the uniqueness of the child's grieving experience and acknowledges the emotional difficulty that may be felt in the series of events following the death of a parent.

Although people may strive to assist in meeting the needs of a bereaved child, other challenges may surface when helping the child with this abrupt, undesired transition into life after a parent's death. The transition begins with chosen funeral rituals. Surviving adults may question whether or not the child should be actively involved in these rituals. Some research suggests that it would be in the best interest of the child if he/she chose independently whether to attend the funeral and burial rituals (Clark, 1997; Holland, 2004). However, other researchers assert that adults should strongly encourage these children to attend the events for a variety of reasons (Auman, 2007; Clark, 1997; Holland, 2004). Research completed by Saldinger, Porterfield and Cain (cited in Auman, 2007) suggested that participation in funeral rituals can have a significant effect on children because they provide a sense of closure to the deceased parent's life, the reality of the finality of the death and a supportive environment to encourage healthy mourning. Clark asserted that children should be given the opportunity to say good-bye to their deceased parent in the way they desire. At the same time, a child's level of participation should be examined dependent upon the individual child's needs and wants. Because children tend to feel confused about events following their parent's death, they desire factual information and a sense of clarity in language they can understand (Holland, 2004). It has also been suggested that children be briefed in familiar terms about the funeral to mentally prepare them for the unique series of events (Holland, 2004). By communicating with children in developmentally appropriate language, adults can effectively meet the needs and wants of the child while providing necessary support for the child when deciding if he or she should attend the funeral ritual for the deceased parent.

Following the funeral ritual, children begin to experience the reality of their transition into life after their parent's death. Researchers tend to agree that family members are the most influential individuals who assist these children through this transition and the grieving process (Auman, 2007; Cait, 2005; Ellis & Granger, 2002). Furthermore, Balk (cited in Cait, 2005) noted that the children who have had open communication and reported feeling closer with family members also tended to report fewer symptoms of depression and other emotional difficulties. In summary, theorists agree that bereaved children tend to experience a smoother transition and a less tumultuous grieving process when they have support from family members.

Specific family members seem to be more influential than others when attempting to help these individuals. Siblings have reported closer relationships with each other later in life when they experienced the death of a parent during their childhood (Mack, 2004). According to Mack, these individuals often reported their siblings were among their closest friendship circle as adults. Siblings may be able to provide the necessary support for their brother(s)/sister(s) due to the natural ability to identify with and meet each other's needs.

Although siblings are important, research has indicated that the arguably most significant individual on a bereaved child's grieving process tends to be his/her surviving parent (Auman, 2007; Kennedy, McIntyre, Worth, & Hogg, 2008; Kirwin & Hamrin, 2005). Further, the way in which the surviving parent copes with the loss is the "strongest predictor of risk" to the child's own emotional health (Kennedy et al., 2008, p. 164). Pfeffer and colleagues (cited in Brown, et al., 2007) found a relationship between surviving parents' psychiatric symptoms and their children's reported mental health and social adjustment problems. According to Auman, the surviving parent seems to serve as a role model to his/her children as to how to handle the death of their partner and has the most influence on the children's response to the adaptation and transition to life after the death. Clark (1997) also noted that children and parents both tend to attempt to hide their grief to protect the other. However, as stated earlier, open communication within the family decreases the likelihood of survivors experiencing a dysfunctional grieving process (Procidano & Fisher, 1992). This relationship between the surviving parent and their children is thought to have the most significant influence on the health of the child's grieving process.

Even if the surviving parent understands that he/she is influential on their grieving child, they may not necessarily recognize whether his/her influence is positive or negative. This is because the surviving parent is also grieving the loss of a partner and may react in ways that may seem abnormal or unfamiliar to his/her children. As noted by Cait (2005), children are aware of whether or not their parents are emotionally healthy and are quick to provide support for them if needed. This supportive behavior from the children may seem beneficial; however, their support can come at a cost of the children's own emotional health. According to Cait, if the surviving parent relies too heavily on the child's support, the child may begin to feel as though he/she is responsible for raising himself/herself. This may also lead to the child feeling as though there is no support coming from his/her surviving parent. Assisting the bereaved child in the most effective manner requires the surviving parent to develop the ability to balance the amount of support the parent receives from and gives to his/her child while providing the child with the most optimal environment for the child to grieve.

Hurd (2004) suggested that parents should be taught how to "maximize the potential of existing external protective factors and to nurture the internal protective factors of each bereaved child" (p. 351). This can be accomplished by taking the initiative to assess and improve their own parenting skills while promoting the child's strengths, uniqueness, interests and goals. When the surviving parent is self-aware of his/her own emotional and mental health, the parent can then begin to provide a beneficial, healthy environment for children to openly grieve.

According to Black (2005), children entering the grieving process can also utilize self-monitored coping strategies suggested by children who have previously lost a parent. Black offered several healthy coping mechanisms for children who experienced a parental death. The healthy mechanisms included: joining a support group, expressing the grief, listening to music, crying alone, using the word death or the name of the deceased parent, telling a teacher their personal preference regarding sharing information about the death with others and their own comfort level of expressing their grief.

Research suggested that children tend to express their need for their lives to be as normal as possible after a parental death. This includes returning to familiar activities that took place prior to the death in an attempt to develop a known rhythm for school and family life (MacPherson & Emeleus, 2007). In summary, it appears as though a child can experience a healthy grieving process if they have support from surrounding adults, an optimal environment and a willingness to partake in the previously mentioned healthy coping strategies.

School-Based Interventions

When a death within a family occurs, the entire family enters a grieving process. Unfortunately, there are times in which the surviving members of the family are not able to help the children bereave due to their own grieving. When this occurs, children tend to express their feelings of loss at school (Eppler, 2008). Preparation by all school faculty and staff is necessary to prevent children from retreating in their academic and personal lives. Rowling and Holland (2000) asserted that school personnel can help children to "understand the patterns of loss experiences, identify feelings associated with their loss and encourage them to seek support or be supportive of others" (p. 36). According to Auman (2007), children who experience the grieving process require support to continue their growth and psychological health. Kennedy and colleagues (2008) asserted that providing support for children who are bereaved is challenging for any school. Therefore, schools must focus on preparing for such circumstances through providing optimal educational services to all of their students.

As stated previously, each child experiences their own unique grieving process (Clark, 1997). Even though there is such a variety of experiences a child may have, research suggests there are commonalities between those who may be at risk as a result of a parental death. Stokes (cited in Kennedy et al., 2008) identified the following risk indicators of a grieving child: being under ten years old, having a learning disability, experiencing a previous loss and having a history of psychological disorders within the family/child. Further risks identified by Stokes were: when the death resulted from a sudden, traumatic or violent death, when circumstances of the death threatened the child's own life, when the child suffered from multiple hardships and when the surviving parent struggled to take care of the child. All grieving children are at risk due to the intense, unfamiliar emotions they may experience. However, children who may experience some of the previously mentioned problems may be in need of more support from those around them, beginning with school personnel.

Given children tend to spend a significant amount of time at school, institutional staff can be influential in providing support for grieving children. Research has indicated that children need support, guidance and counseling throughout the grieving process (Auman, 2007). However, schools and school-based counselors and psychologists should understand that providing supportive services to a grieving child can also put the child at risk by possibly setting the child up for another loss when counseling sessions terminate (MacPherson & Emeleus, 2007). With effective transitioning and a change in a school's overall approach, this risk may be minimized. Holland (2000), Rowling and Holland (2000) and MacPherson and Emeleus (2007) have suggested that school personnel should not only offer reactive support for children who experience a parental death, but also have a proactive approach through the inclusion of the concepts of death, loss and bereavement within the education curriculum. MacPherson and Emeleus also noted that the reactive support should be dependent on the age of the children who are grieving. These researchers suggested that individual counseling would be more appropriate for an adolescent and indirect support through the surviving parent would be most beneficial for younger children. By the proactive approach suggested by Holland, school personnel may benefit children by creating an open environment within the school setting similar to what has been suggested for the home setting. Regardless of the type of support, school-based personnel should provide children with a place to express themselves regarding their parent's death.

Research has offered suggestions for schools to help children who experience the grieving process. Black (2005) spoke of Helene McLaughlin, a practicing school counselor, who suggested six steps necessary when establishing an effective environment for a grieving child.

First, a support team should be created that focuses on issues surrounding the grieving child. According to Black, McLaughlin stated this school-based team should meet quarterly throughout the school year to review the recent research regarding successful interventions for helping bereaved children. Next, it is important that all school personnel understand that grieving is a natural, healthy response to a death and children require support at both school and home. Third, schools must understand that each child experiences the grieving process in a unique way. The fourth step includes providing training for staff to answer questions the grieving child may have and how to talk to the child about his/her thoughts and feelings about the incident. McLaughlin stated that schools should also encourage teachers to watch for particular warning signs of a grieving child such as disorientation, confusion, forgetfulness, impatience, inattentiveness, disruptiveness and grief that may re-emerge months later. Finally, school personnel should help students return to their regular schedules and offer counseling for children who may be struggling with their grief. Eppler (2008) indicated that any intervention implemented to a grieving child needs to promote resilience and positive adjustment while responding to the child's feelings of loss.

While McLaughlin (Black, 2005) offered a comprehensive model for school personnel to follow when helping a grieving child, other research has offered further suggestions (Auman, 2007; Clark, 1997; Eppler, 2008). According to Auman (2007) and Eppler (2008), for schools to become prepared in assisting their students who may have experienced such an event, they need to begin with educating their staff. Counselors, teachers and other school faculty need to be educated about the grieving process, become familiar with the developmental stages of grieving and be willing to provide support to children who have and are experiencing it. Clark (1997) posits it is also important for school officials to educate children who are grieving of ways in which they could communicate their experience to their peers by providing them with options.

The primary concern of the school may be the well-being of the children who are enrolled in the district. However, research (Eppler, 2008; MacPherson & Emeleus, 2007) suggests that the central task of any support system should be supporting the needs of all surviving family members. By providing support to all family members, school personnel will provide the student with an optimal environment to experience the grieving process at school and at home.

A large portion of a child's day is spent within the school building. School faculty and staff can provide a grieving student with a helpful environment by giving the student a sense of structure and predictability. However, at some point, the student leaves the school and enters his/her home environment. To provide assistance for grieving children at home, research (Haine et al., 2006; Hurd, 2004; Procidano & Fisher, 1992) indicated that schools should attempt to work with parents and families to educate them about the grieving process and their role in it. According to Haine and colleagues, the surviving parent and family members can benefit from school programs that educate and promote positive parenting regardless of the amount of stress present following the death of a parent. Instruction on grieving may help create a home environment that supports children's goals and needs and has resulted in a direct, positive effect on children's mental health. In addition, Hurd (2004) asserted such programs provide suggestions for helpful parenting skills and communication techniques that can lead to an increase in resilience in children due to consistency of interventions being implemented at school and home. By assisting parents with the communication aspect of grieving, schools can encourage parents to consider the child's capabilities emotionally and cognitively as well as his/her need for information (Procidano & Fisher, 1992). In turn, this will promote a healthy grieving process for the child. Obviously, the consistency between home and school interventions can greatly benefit and maximize meeting the needs of the grieving child.

Although many have offered suggestions regarding how school personnel can help children cope with the grieving process, limited research has examined the effects of specific school-based interventions on the grieving child. Jordan and Neimeyer (cited in Brown et al., 2007) examined the findings of four reviews of grief intervention studies and found small or no effect from the interventions on bereaved children. One successful intervention, mentioned by Brown and colleagues, was the Bereavement Group Intervention. Children within this group experienced the suicide of a parent. Those children who received the intervention reported a significant decrease in depression and anxiety symptoms compared to the children who did not receive the intervention. However, the accuracy of the results was affected by the 75% reported dropout rate of those who did not receive the intervention compared to 18% of those who received the intervention. In summary, Brown and colleagues asserted little is known about the research regarding the effects of interventions programs established for grieving children.

Despite the lack of knowledge about the effectiveness of interventions, there are steps school personnel can take when helping grieving children. School personnel should keep in mind the risk and protective factors of each grieving child (Brown, et al., 2007). Brown and colleagues suggested that decreasing risk factors while increasing protective factors can promote resilience and reduce problem outcomes for these children. It was also noted by Brown and company that certain groups demonstrate more benefits than others. These groups included females, individuals who reported a high level of distress, those who had more time following the death of a parent and children who have voluntarily sought help for their grieving rather than being recruited by others because they were identified as bereaved. Neimeyer (cited in Brown, et al., 2007) noted that many grieving children do not need an intervention program. In fact, participation in a program could increase the probability of these children experiencing problematic effects. As a result, school personnel should help a grieving child upon consideration of the child's personal characteristics, risk and protective factors and their desire to receive help from others.

A school can provide a child with a safe, consistent environment in which they may grieve; however, experiencing a healthy grieving process is ultimately up to the child and his/her family members. Within the school setting, teachers can incorporate students' personal lives into the classroom to encourage students to discuss their feelings and points of view (Winter, 2000). At the same time, according to Winter, the teacher should not force any child to discuss their emotions or personal life. During times in which a child may be grieving a parent death, Winter suggested that the immediate roles of the school are to inform personnel and students and actively participate in grieving rituals. Over time, this role evolves into becoming an observer, consultant and support system for the children and family members that are grieving.

While school personnel are vital to establishing an optimal environment for children when entering the grieving process, they cannot do so alone. It is also important for the grieving child to receive support from the community as a whole (Black, 2005; MacPherson & Emeleus, 2007; Winter, 2000). By including the entire community, grieving children experience support from all relationships, including neighbors, peers, family members and school personnel.

While schools can offer great support to children and family members on multiple levels, some aspects are important to keep in mind when working with these children. Worden (1996) stated that most children have the ability to experience mourning and go through the grieving process in a healthy way. Support systems can help the child do so in an optimal environment. The most helpful task any adult can do for a grieving child is to listen (Clark, 1997). It is important that children have the opportunity to talk about their emotions and concerns. At the same time, Clark reminds us that the behavior of the grieving child is unique to each child following the death of a parent. In addition, one child who experienced the death of parent expressed his feelings about the situation by saying "you never get over a death. You get through it" (Clark, 1997). The grieving process is just that, a process. The death of a parent is a life-altering event for any individual. Such an event will continually have an effect on a child for the rest of his/her life. However, as Hardy (2006) stated, "there's a point where you just have to move forward" (p. 12).

Chapter III: Critical Analysis and Recommendations

Introduction

This chapter will provide a summary of the information presented in Chapter II, followed by a discussion of the strengths and limitations. In addition, recommendations for educators, school counselors and other school personnel will be addressed. The chapter will then conclude with recommendations for future research.

Notable Findings

Numerous children experience the death of a parent. At the present time, many school systems do not require school counselors and educators to be trained and knowledgeable about grief and the grieving process despite the number of children who experience the loss of a parent. Further, little research has been conducted to determine effective interventions that strive to assist the grieving child. Therefore, the children who inadvertently enter the grieving process may not receive the required help from school counselors and other school-based personnel.

Experiencing the death of a parent can be a traumatic event for children at any age. Research indicates the effects on a child due to the death of a parent tend to be unique for each individual because of the numerous variables that affect each child. Depending on their developmental level, gender, the cause of death and the time that passed since the death, children report their own individual experiences. Other contributing factors include the surrounding environment formed by the surviving parent and other adults, as well as how the school and the community respond to the event. With so many variables affecting the grieving process, it becomes difficult to develop and summarize interventions to help these children progress through and overcome their grief effectively. In addition, research also indicated that not all children experience mental health problems as adults. The natural grieving process for children can include self-produced resiliency or a need for assistance from others to promote their resiliency. Research indicated a grieving child should seek out assistance from others when needed. Children who may not need assistance may experience further problems if formal interventions are imposed on them by well meaning adults. Surrounding individuals should assess each grieving child's personal strengths and limitations as well as those risk and protective factors within their environment before entering the child into a grief-focused intervention.

Critical Analysis

Literature pertaining to children who have experienced the death of one or both parents seemed to emphasize the uniqueness of each child and situation (Cait, 2005). A large body of information is available pertaining to the effects of the developmental stage of each child (Black, 2005; Christ, 2000; Kirwin & Hamrin, 2005). In addition, the published literature has identified numerous variables that could possibly affect the grieving child, such as the way in which the parent passed away, the child's gender and the amount of time lapsed after the parent's death (Brown et al., 2007; Cait, 2005, Eppler, 2008; Haine et al., 2008). The uniqueness of the grief experience was also supported by, and evident within, studies that included reported experiences from siblings (Cait, 2005; Ellis & Granger, 2002; Mack, 2004). In one family, research has found that siblings will report dissimilar experiences when grieving the death of a common parent. In conclusion, researchers tended to agree that children experience the death of a parent in their own individual way dependent on numerous variables (Cait, 2005; Christ, 2000; Eppler, 2008; Holland, 2000).

Although this literature review covered detailed information regarding theories of childhood development and how development affects the grieving process, it became evident that there was a lack of evidence-based interventions that personnel could implement to address the needs of grieving children in the schools. More specifically, no published research identified specific prevention or intervention strategies or curriculum school counselors could use to build resiliency or to help grieving children cope after the death of a parent. In addition, there is also a lack of empirical research evaluating the effectiveness and success rates of interventions for grieving children (Brown, et al., 2007). This overall lack of research on evidence-based practices could be due to a variety of reasons. For example, perhaps no evidenced-based interventions have been developed because of the common understanding that children tend to have their own unique experience when a parent dies. The complex nature of the grieving process in children may hinder school personnel from creating evidence-based curricula that could help all children who are suffering from loss. Another contribution to this limitation could be due to the difficulties in conducting research on children in the schools. Regardless, research that directly evaluates the effects of school-based and community-based interventions for grieving children is needed.

Recommendations for School Counselors and Personnel

Based on the information presented within this literature review, it is important that any school counselors or school personnel become familiar with the grieving process of children. Although this review focused on parentally bereaved children, the information may be generalized to other situations in which children have suffered from loss. As children spend a majority of their day within the school walls, the individuals within the schools should have foundational knowledge about what grieving children may experience and how that experience can affect their personal/social behaviors and academic performance. By accessing this knowledge, school counselors and personnel will be in a better position to identify and develop possible intervention strategies that would be beneficial to the child who is asking for help during the grieving process.

Recommendations for Future Research

The known information regarding children who experience the death of a parent provides a foundation for future research. Because the grieving process is unique to each individual child, researchers could focus on identifying the characteristics common to all successful interventions while emphasizing the need to alter them appropriately for each child. Much information regarding school-based interventions was not available and could be a focus of future research. This may require ingenuity of researchers due to the complexities of developmental factors and the need to develop a variety of interventions that could be beneficial to these children.

Summary

Many children experience the death of a parent. Due to a lack of knowledge and understanding of the grieving process, misconceptions regarding bereaved children have formed. For example, these children do not generally experience mental health problems as adults and can experience a healthy, natural grieving process that does not require assistance from adults. Several factors influence the grieving process and a child's need for assistance such as developmental stage, gender, personality and surrounding environment. As a result of great variability and lack of knowledge, school personnel struggle to develop effective interventions to offer children who have experience a parental death. In addition, findings from this literature review indicated a lack of research pertaining to effective evidence-based interventions for the grieving child. Future research should focus on identifying the foundation of effective school-based interventions to assist the grieving child who seeks help.

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