

Term paper

Effects of Parental Death on Children

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May 9, 1997

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Effects of Parental Death in Childhood

“Childhood is the kingdom where nobody dies.”

- Edna St. Vincent Millay, *Collected Poems* (1950, p.286)

Abstract

Death of a parent is an extremely difficult thing for a child to withstand. A review of the literature and information available supports some common themes for childhood grief, and indicates some variables affecting the process. In addition, some long term effects might occur later in adulthood such as certain psychopathologies, depression or increased death anxiety. This information contributes to our understanding of childhood grief and can help us support the child who is experiencing this tragedy.

Introduction

Death is an inevitable event. This fact that it is a certainty does not lessen the impact towards friends, family and other people. The stresses are enormous and come in many different flavors - loss of companionship, loss of emotional support, etc. The circumstance of the death is a large factor in the resultant grief which is magnified for a child whose parent dies, possibly causing long term effects. In this paper we will examine the effects of parental death on children. We will look at how children deal with death - the grieving process- then progress to some information about specific impacts the death creates in the child's life and in later years.

Children and Grief

What compares to the death of a parent? We all remember reactions to the death of President Kennedy. Children's reactions have, in an individual sense, been compared to this kind of societal sense of stunned, dazed, shock (Wolfenstein, 1965). Parents influence on a child's development are obviously critical until post adolescence. Loss of a parent may be one of the most significant events in a persons life. For a child this is significant because they may not have the emotional strength to weather the process effectively, their family structure is changing, and they have also lost support (the deceased parent). To more full understand this we will review children's particular grief characteristics and look at one model of the grief process.

Characteristics of Children's Grief

Grieving children have unique reactions compared to adults. Baker and Sedney (1996) identified seven distinctions about these.

1. They appear to be longer in duration than adults.
2. Children need an adult parenting figure around often.
3. Kids under 11 have limited cognitive means by which to understand the death.
4. Children have different coping methods. For example, they are more likely to distract themselves, cling to familiar activities, deny the loss and use fantasy.
5. The reaction is affected by the strong developmental need to identify with the dead parent.
6. A child's identity are more likely to be affected because self-development is still in process.
7. These processes can become intertwined with the normal developmental processes already occurring.

These factors must be considered when reviewing information on children's grief. These are very significant differences compared to adults.

The Grief Process

The grief process for children is affected by all of the factors above, but there have been some identified patterns that seem to emerge in the process. Some feel that grief occurs in stages and at these stages there are tasks to complete before we can move on to the next stage. What follows is a model specifically developed for children that describes this process (Baker, Sidney & Gross, 1992). While some may feel that

this task based model is too restrictive, I feel it is, at the very least, a good organization of the subject matter so as to examine the process.

Early Tasks

The child must know they are safe before grieving for a lost parent. Therefore they must first understand the death and what it means - then they must know they are safe. Therefore, the two sequential tasks a child performs are *understanding* (of the death) and *self-protection*.

Understanding of the death process is hampered in many cases by the cognitive abilities of the child, but often poor information is also provided to the child. Often relatives describe death as “she’s in heaven now” or “he’s watching you from heaven now” (Baker & Sedney, 1966, p.120). These are well-meant statements but reinforce children’s fantasy that there has just been a change in residence. Mom or Dad may just show up again. It may even create a degree of paranoia - the youngster better not misbehave because now the parent can see everything he or she does from heaven. Because of the child’s tendency to misunderstand what death is, where the parent has gone and what this means for the future, it is especially important to give accurate information regarding death. Kids should know the appropriate details of the death so they can begin the grieving process. They need to know its permanent. They should also be part of the events (funerals, etc) surrounding the death.

When a parent dies, one of a child’s first concerns is “*Who will take care of me now?*”. Because of the painful emotions associated with such a significant loss, a child

needs to feel physically, emotionally and mentally safe and protected before allowing the emotions to rise up and be recognized. Without feeling these emotions they will not be dealt with and the process cannot continue (i.e. the task may not be completed). These self protection issues are often more important when the parent died under traumatic circumstances. Sometimes the child can be concerned that the same tragedy may occur to them. Family disruptions due to the loss may hinder the family from helping the child feel safe and delay progress in completion of these tasks. Because the emotional well-being of their parents may influence their own feelings of safety, some kids will become protectors of the parents (e.g. a girl who turned into a performer to try and make her parent smile after her brother died). We will see in other studies the importance support has on a child.

Middle Tasks

After the child has an understanding of the death, and feels reasonably safe, they can proceed onto tasks that can be described as facing the pain and mourning the loss. These are identified more specifically as tasks of emotional acceptance of the loss, reevaluating the relationship to the deceased, and bearing the emotional pain that accompanies the loss.

The emotional acceptance of the loss cannot be realized until the intellectual understanding is in place. In this phase, the child can allow themselves to react emotionally to the death (e.g. mourn about never seeing mom again). At this point they have thought and *felt* about the consequences of their parents loss and are fully aware that their life is changed forever.

Even though the parent is dead, Baker and Sedney encourage an internal continuation of the relationship. Some argue that there should be a loosening of the tie with the deceased (Furman, 1974), but other studies have found this connection with deceased parents to be adaptive (Silverman, Nickman & Worden, 1992). Some children use transitional objects (e.g. bringing a birthday cake to your dead brother at the cemetery) or imaginary friends (e.g. a boy with a friend the same name as his dead brother). In this way the child remains connected on some level and able to process the death in a developmentally appropriate way.

While a family support structure can help a child, the child themselves must, ultimately, bear the pain. This difficult task is approached slowly, tentatively and intermittently by most children. Since their emotional maturity cannot allow intense sustained pain, they experience it in small doses. This may be observed as being upset, crying and hurting on the outside for a while, then shortly thereafter, playing with a friend as if nothing is wrong. This should not be misinterpreted as a conclusion of this phase.

Late Tasks

The loss of a parent by a child will change them forever. Grief, therefore, has no discrete ending, instead continually, the child will reintegrate pieces of the death into themselves and their understanding and view of life. Once the middle tasks have been completed, the reality of the loss has been acknowledged, and the child can now continue along their “normal” development with these late tasks influencing the process. These five tasks include forming a new sense of personal identity, investing in new

relationships, constructing a durable internal relationship, returning to developmental tasks, and coping with periodic resurgence of pain,

Part of the normal developmental process for any child is forming a personal identity. This is affected by bereavement over a lost parent. Dietrich (1989) supports, from a psychoanalytic perspective, an impact on object relations that is crucial to deal with in this process. Some kids choose an overly close identification with the parent, almost “picking up the others life course” (Baker & Sedney, 1966, P. 124). This may be particularly troublesome if, for example, the parent was an alcoholic. Some choose a counteridentification to avoid any similarity to the one who died. These identifications and potential pitfalls should be dealt with carefully based on the individual child and situation, but also recognizing that it is normal to be affected by the death in some ways.

An important task to work on is investing in new relationships. It may feel scary for kids to try another relationship because they may be concerned about suffering another loss, or because a previous task (issues with the deceased) may be unresolved. Another problem occurs sometimes when a child tries new relationships but the other person can never live up to the idealized image of the deceased. Kids usually take longer to work through the middle tasks than adults, they are not often as ready for new relationships as soon as the surviving parent. For example, there may be a lot of tension accompanying a remarriage as a result of this dynamic.

Similar to the middle phase task of reevaluation of the relationship with the deceased, Baker and Sedney (1996) support construction of a durable internal

relationship. This may be a way to remember the person who died in a special way. For many children, the parent becomes like an inner presence that comforts them but doesn't prevent them from forming new relationships.

The child must also return to their normal developmental tasks. Major trauma such as this interrupts development, and can sometimes cause harmful delays. It is difficult to determine where the grief process ends and "normal" development begins since this is such a central loss for the child. Some of the tasks aforementioned include the normal developmental tasks (i.e. Identity formation), but the previous tasks must be reasonably addressed before return to age-appropriate development. However, even after completion of the tasks, the person who develops will indeed be changed by the experience, and the new family context.

The grief never really fully goes away. Dates, people and situations will remind the child of the parent or the circumstances around the death. Around holidays, birthdays or anniversaries there are difficulties. This is very common at graduation events when the child may feel a lot of emotion and express sorrow that the parent isn't sharing the joyful transition. While painful, this may be a good opportunity to re-experience the loss with new developmental capabilities, possibly more fully completing one of the previous tasks than had been done before.

Impact on Children - As Kids and In Adulthood

Above we have looked at general grief processes for children. The specific impacts of the event of a parents death are related to some characteristics of the child's

and the surrounding environment. There are both long term and short term impacts of a parent's death on a child. In the short term, this is effected by four principal variables that we will examine. These effect the task completion as well as the immediate state of the child. The long term effects (into adulthood) are more difficult to determine, but there have been various studies that have indicated some tendencies towards depression, certain pathologies, and other milder effects.

Short Term Factors

Berlinsky and Biller (1982) noted that nearly all studies reported differences in functional areas which included "emotional disturbance, sex-role and related behavior, delinquency and criminal activity, and cognitive, academic and creative performance". (Berlinsky & Biller, 1982, p. 126) They further concluded that

The analysis of the literature has thus demonstrated that parental bereavement may be a significant event in the child's life, one that will result in the individual's behaving in ways that he/she would not if the family were not disrupted in this fashion. The relationship between parental bereavement and subsequent behavior is complex, however. It is not the simple fact of a death having occurred, but rather the variables associated with the loss of the parent as well as characteristics specific to the child that will predict the child's subsequent adjustment and development (P.127)

It is clear that this is important. Now we will examine the four principal variables that have been identified by Hatter (1996) that can affect this outcome: the unique characteristics of the child, the meaning and power of the relationship with the deceased, the characteristics of the death itself, and the availability of support for the bereaved child.

Unique Characteristics of the Child

The characteristics of the child with regards to a parental death can be broken down into four areas: their age and developmental level, their personality, their loss history, and their overall background. Each of these are strong factors influencing the resultant impact on the child.

Developmental level and age may significantly effect grief responses. Most children before 7 years old are unable to understand death in a very full manner. Kids tend to try and understand in a piecemeal fashion as they are able. When they can assimilate new pieces, they can integrate them into their understanding. At age 2 it is thought children try and call out for the missing parent (by crying, asking for the person, or searching for them). Children in the ages 5 to 7 are a particularly vulnerable group because they have developed cognitively (so as to understand that death is permanent), but they have very little coping capability for emotional protection. In latter years (8 to 12), kids may hide behind the newfound independence (normally developed at this age), and not seek opportunities to share their grief. Each age and developmental range has its own difficulties that require special attention(Hatter, 1996).

The child, of course, has a unique personality. This personality is going to present its own coping style. More fearful or sensitive children may be overwhelmed by the event. Rando (1984) identified a list of effected traits as “self-esteem, conscious and unconscious conflicts, emotions, beliefs, attitudes, values, desires, needs, strengths” (p. 46). This is pretty all encompassing. The point here is that a child’s pre-death coping

style will determine some of the later effects and help us understand their unique responses.

This may not be the first loss the child has had to deal with. Loss of their dog, friend, grandparent, etc. may create multiple stressors that can lead to extreme difficulties in coping. Thorough assessment of their loss history is important to understand their response to the parental death and to help care for the child. The Loss Inventory for Kids (Wolfelt, 1983) is an available instrument that measures the impact of accumulated loss on a child. It has the child list impacts of losses. The process of completing the inventory with the child is more important than the numerical score and can be very helpful in creating a mutual understanding of the losses.

The environment the child deals with will play a large part in the impact of a parental death. Because young children are dependent of the family, this structure (as mentioned above) is of utmost importance, but there are also other factors including their social, cultural, ethnic and religious context. For example, a family that is religious in a way that there is a strong feeling about life after death will typically have lower death anxiety than one that has a weaker belief system in this area (Rasmussen & Johnson, 1994). It is important to determine what the child has assimilated from these areas and help “fill out” their cognitive process. These associations and the informal learning acquired from the family and environment play an important role in the child’s response to death.

Meaning of the Relationship with the Deceased

While, as stated earlier, the loss for a child takes many meanings, the degree of attachment is related to the feeling of how much is lost and the strength of the child/parent bond, combined with the type of roles played by the parent in the child's life. Young kids often define their time in terms of parental contact (i.e. who wakes them, feeds them, etc.). In some situations (e.g. if a parent was estranged for a while, etc.) the child may need to identify the unique relationship that existed with the parent and frame it in healthy terms (Hatter, 1996)

Specific Circumstances of the Death

The specific circumstances of the death may be an important factor. Children who are told of the death in a considerate, honest way, and who is supported may be able to help later events. Children struggle with understanding when the death is sudden, unexpected or tragic and leaves no chance to say good bye. In the case of a prolonged illness (Cancer, etc.) the family resources may be drained - both emotionally and financially. In this case, children may feel relief when the death occurs, followed by guilt over this reaction. In a case like suicide, murder, drug use, or other stigmatizing events, many children will experience a mourning process complicated by the stigma. A child who observes a death in this fashion may feel that they could have prevented it (Hatter, 1996).

Nature and Availability of Support

Kids can't easily ask for help directly, particularly from a parent who may be stressed due to losing their spouse. Often this results in a child's needs being put on the

“back burner” (sometimes they’re sent to a grandparents house - even further away from the surviving parent). The amount and quality of the support a child receives over the time subsequent to the death may be the most important factor in determining the magnitude of the difficulties that the child will experience.

Long Term Effects

Effects of parental death may extend into adulthood. This may manifest itself into many forms. These range from indications of increased death anxiety to indications of higher risk for pathology such as schizophrenia. Though there are some who argue about the statistical significance of the data (Tennant, 1988), I will present a brief literature review on the matter to illustrate possible long term results after a parent dies.

Assessment of Psychopathology

There have been a few studies to review pathological tendencies of bereaved children in later life. One study by Dietrich (1984) investigated early bereaved (parent died before age 7) and late bereaved people (ages 12 to 18) compared to a control group. The Minnesota Multiphasic Personality Indicator (MMPI) was used (the MMPI attempts to describe some forms of psychopathology). In 50% of the early bereaved people, 2 or more MMPI scales were pathologically abnormal compared to just 28% for the control group. Notably there was a significant effect found for early bereaved on the schizophrenia scales. In a later study (Breier, Kelsoe, Kirwin, Beller, Wolkowitz & Pickar, 1988) the Home Life and Personal Adaptation (HAPA) scale was used in a psychiatric study looking at neurobiologic results. They concluded that

early parental loss alone is not predictive of adult psychopathology. However the occurrence of loss followed by increased affective symptoms in the context of a nonsupportive relationship with the surviving parent is related to the development of psychopathology. (p. 992)

This sounds like the previous recommendations for helping a child through the grieving process and illustrates some of the dangers when we don't support a child properly through the process.

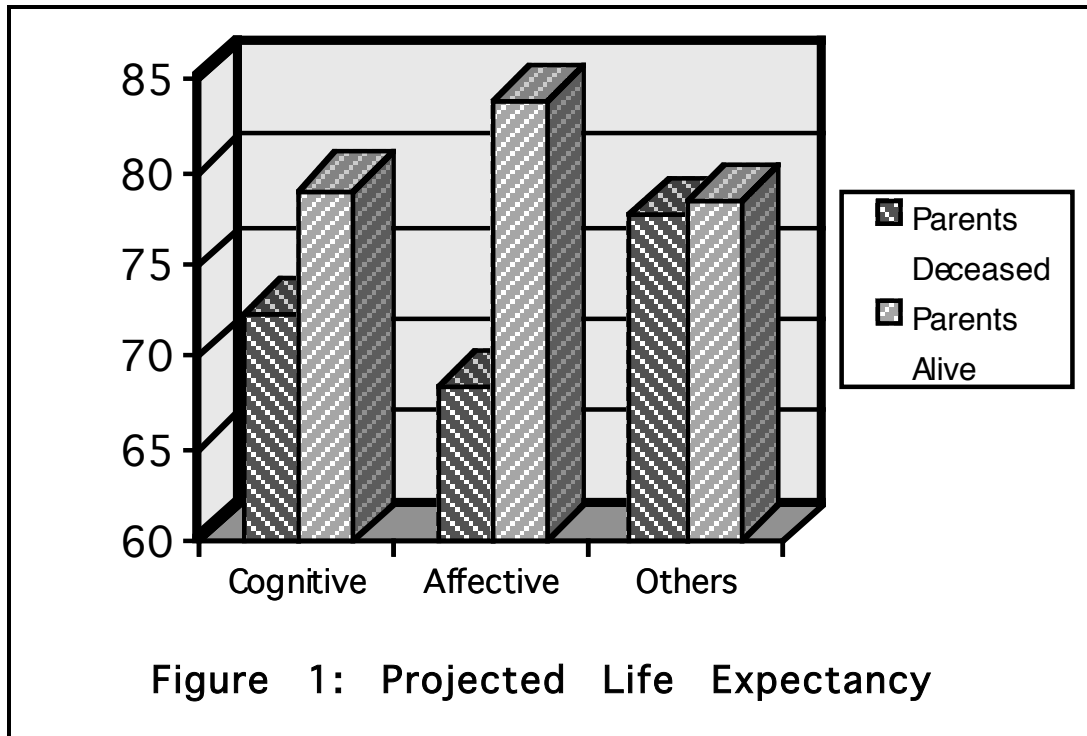
Depression

A review of literature has yielded different findings. The most consistent finding is a relationship between early mother death and later depression - particularly severe forms of depression. Some findings show that either parent death may be related to later depression, but few studies have associated early father death with adult depression (Finkelstein, 1988).

Increased Death Anxiety

Early parental death has been shown to have a significant effect on death anxiety. As illustrated in figure 1, in a study by Denes-Raj and Erlichman (1991) cognitive life expectancy (their logical guess at when they would die) was 7 years lower for a person who had one parent die than for a person with both parents alive. More strikingly, peoples guess of life expectancy based on personal feelings (affective) was 15 years less than those who had living parents. There was very little difference between the groups regarding life expectancy for others, but the early parental death

group both “logically guessed” (cognitive life expectancy) and “felt” that they would die sooner than others.



These subjects also reported worse health behavior such as heavy cigarette smoking, and unsatisfactory diet patterns. Their fatalistic attitude toward life may create a self fulfilling prophecy and actually result in an early death (Denes-Raj & Erlichman, 1991).

Increased Intelligence?

One surprising study found that among a group of people with an IQ greater than 155, the rate of early parental death was three times higher. They suggest that early death of a parent may be an impetus for constructive creative achievement. (Finkelstein, 1988).

Conclusion

The process of grief is longer and possibly more difficult for a child - they have to try and rebuild their lives, recover and grow without the lost parent. As we have seen, death of a parent has a multitude of effects on a child. These disturb every aspect of their early life and can result in developmental delays, later pathology or, long term depression. The power and magnitude of the event should not be underestimated - the child's care should take the discussed features into account to facilitate the mourning process (though not to force it through predefined steps). This is reinforced by almost all studies - even those examining later adult psychopathology - in that the later problems are less likely to occur when there was good support at home. Social workers, mental health professionals, counselors, teachers, and family members all participate in the process and can use this information to help children who have suffered a tragedy such as this.

References

Baker, J.E. & Sedney, M.A., (1996) How Bereaved Children Cope with Loss. In (Eds) Corr, C.A. & Corr, D.M. Handbook of Childhood Death and Bereavment. New York, NY: Springer Publishing Company.

Baker, J.E., Sedney, M.A. & Gross, E., (1992) Psychological Tasks for Bereaved Children. American Journal of Orthopsychiatry, 62, 105-116.

Berlinsky, E.B. & Biller, H.B., (1982) Parental Death and Psychological Development. Lexington, MA: D.C. Heath.

Breier, A., Kelsoe, J.R., Kirwin, P.D., Beller, S.A., Wolkowitz, O.M. & Pickar, D., (1988) Early Parental Loss and Development of Adult Psychopathology. Archives of General Psychiatry. 45(11), 987-993.

Denes-Raj, V. & Ehrlichman, H., (1991) Effects of Premature Parental Death on Subjective Life Expectancy, Death Anxiety, and Health Behavior. Omega, 23(4), 309-321.

Dickenson, D. & Johnson, M.. Death, Dying and Bereavment. Newbury Park, CA: SAGE Publications.

Dietrich, D.R., (1984) Psychological Health of Young Adults Who Experienced Early Parent Death: MMPI Trends. Journal of Clinical Psychology, 40(4), 901-908.

Dietrich, D. R., (1989) Early Childhood Parent Death, Psychic Trauma, and Organization, and Object Relations. In (Eds) Dietrich, D. R. & Shabad, P. C., (1989) The Problem of Loss and Mourning: Psychoanalytic Perspectives. Madison, CN: International Universities Press, Inc.

Douglas, J.D., (1990) Patterns of Change Following Parent Death in Midlife Adults. OMEGA, 22(2), 123-137.

Finkelstein, H., (1988) The long Term Effects of Early Parent Death: A Review. Journal of Clinical Psychology, 44(1), 3-9.

Furman, E., (1974) A Child's Parent Dies: Studies in Childhood Bereavement. New Haven, CT: Yale University Press.

Garber, B., (1992) Countertransference Reactions in Death and Divorce: Comparison and Contrast. Residential Treatment for Children and Youth. 9(4), 43-60.

Hatter, B.S., (1996) Children and the Death of a Parent or Grandparent. In (Eds) Corr, C.A. & Corr, D.M. Handbook of Childhood Death and Bereavment. New York, NY: Springer Publishing Company.

Millay, E. St. V., (1956) Collected Poems, New York, NY: Harper.

Rando, T.A., (1984) Grief, Dying and Death: Clinical Interventions for Caregivers. Champaign, IL: Research Press.

Rasmussen, C.H. & Johnson, M.E., (1994) Spirituality and Religiosity: Relative Relationships to Death Anxiety . Omega, 29(4), 313-318.

Rudolph, M., (1978) Should the Children Know? Encounters with Death in the Lives of Children. New York, NY: Schocken Books.

Silverman, P.R., Nickman, S., & Worden, J.W. (1992) Detachment Revisited: The Child's Reconstruction of a Dead Parent. American Journal of Orthopsychiatry, 62, 494-503.

Tennant, C., (1988) Parental Loss in Childhood. Its Effect in Adult Life. Archives of General Psychiatry. 45(11), 1045-1050.

Wolfelt, A.D., (1983) Helping Children Cope With Grief. Muncie, IN: Accelerated Development.

Wolfenstein, M., (1965) Death of a Parent and Death of a President: Children's Reactions to Two Kinds of Loss. In (Eds) Wolfenstein, M. & Kliman, G. Children and Death of a President. Garden City, NY: Doubleday & Company, Inc.

Epitaph of Libby Dickson,

1798-1818

Anonymous

Uncertain life, how swift it flies -

Dream of an hour, how brief our bloom -

Like the gay verdure soon we rise

Cut down ere night to fill the tomb.

From an abandoned graveyard in Avon, Connecticut (Dickson & Johnson, 1993, p. 278)