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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. (McIntrye 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 grievers 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. Our first response to a grieving teen should not be to simply make an appointment with a professional for them, but to listen, talk, and communicate with them about their issues.

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.

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Chapter Four

Sudden Death Versus Anticipated Death

Is there a difference in the grieving process if the adolescent experiences an anticipated death as opposed to a tragedy involving a sudden death? Although grief is grief any way you look at it, the process of grieving is much different when experiencing a sudden death compared to anticipated death. In no way are we suggesting that any one experience is harder or easier than the other. Both experiences are tough. People, however, often de-value a person's grief when they say things like "at least you were expecting it" (anticipated) or "at least he didn't have to suffer" (sudden). When anyone says things like this, they usually take themselves totally out of the picture for helping the grieving adolescent.

So What Is the Difference?

There are different dynamics in each situation that affect the grief process. The grief process in an anticipated death starts for the family while the dying person is still living. The shock, numbness, denial and guilt phases of the grief cycle are usually present for family members as they work to cope with the situation. The greatest time of need for these griever is while the person is lingering and, of course, at the time of death. However, for most griever, at the time of death, they are well along into the grief process, although a slide back to the beginning grief stages is normal for a shorter period of time.

Relief or Guilt?

Usually, if the deceased suffered while lingering, the surviving loved ones will feel relief. The caring adult must be aware that the survivor may at some future point feel guilty for feeling relieved at the time of their loved one's death. This may occur as long as six months after the death. This is normal. The caring adult may help the grieving adolescent to see that the suffering of their loved one caused them great pain and anguish. To feel relief from this situation is normal and healthy. The caring adult must reassure the grieving adolescent that he is not a bad person for feeling relief at the time of his loved one's death, and that many other people have had similar feelings. Because the grieving adolescent starts the grief process while their loved one is lingering, they usually "recover" sooner than does a person who suffers the sudden death of a loved one. Although we should never tell people how or what to feel, the caring adult may comfort by asking the questions on the following page. Copy and use the form on the following page as you talk to grieving teens.

**People often *de-value*
a person's grief when they say things like
"at least you were expecting it" (*anticipated*)
or "at least he didn't have to suffer." (*sudden*)**



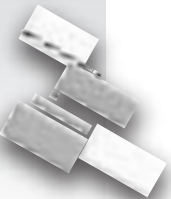
Relief or Guilt Inventory Worksheet

1. Why do you feel guilty? _____

2. Is your guilt realistic in light of the suffering and pain your loved one experienced?

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3. Would you want him back the way he was the last few months of his life?



Denial

For the adolescent who experiences the sudden death of a loved one, the process of denial is much more severe. Denial may last long after the funeral. During the funeral process, many grieverers are not aware of the situation or don't accept what happened. This denial becomes a stumbling block for the grieving person as they begin the grief process.

Anger or Revenge?

Those who experience the sudden death of a loved one are often angry. This anger is either internalized or vented at family members or close friends. In the case of an innocent person dying because of a drunk driver, the survivors are often livid. Although we can understand the reason for them feeling so, they make the common mistake of focusing on catching and punishing the guilty person. This anger and revenge, or as we call it "rage fantasy," will prevent the grieving person from entering into the grief work they must do if healing is to occur.

Feelings of anger or revenge can be refocused by doing the following:

About one month after the funeral, help the adolescent make a genuine effort to focus on the person who died and not the cause of death. What happened cannot be changed, so we must press on the best we can. To accomplish this goal, the caring adult can do two things:

- Help the teen focus on the good memories of the deceased. Someone once said, "a person is not really dead until they are forgotten." Although we may disagree about this person's definition of death, he has a good point in not forgetting the person who died. Great comfort can be found in the fond memories.
- Help the adolescent concentrate on the legacy of the dead person. Focusing on the legacy can give reason for hope and the assurance that the deceased person's life was not in vain. It also can give the adolescent an appreciation of life and of his living loved ones.
- Guide the teen to use their energy to do something positive in their loved one's memory.
 - A. Organize a fund-raiser walk, etc. in their honor and give proceeds to an organization that supports a special cause. (MADD)
 - B. Make a memory quilt about their life and display it or keep it as a comfort to themselves.
 - C. Organize a balloon release with thoughts of the loved one attached to the string.

In guiding the adolescent through the sudden death of a loved one, the caring adult must remember that *grief is not the problem, it is the solution*. Help the adolescent focus away from the cause of death and focus on happier memories of the deceased loved one.

