A STUDY OF CHILDHOOD GRIEF AND THE CHURCH’S RESPONSE

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Abstract: The objective of this article is to assist Christian educators as well as the Christian community as a whole in understanding the characteristics of childhood grief by noting the information obtained in a qualitative study composed of past childhood grievers. The participants were young adults between the ages of 18 and 22 who had lost a significant familial or relational figure when they were between ages 6 and 12. The overall purpose of the investigation was to identify constructive ways in which to support childhood grievers as they work through the grieving process.

Key Words: children, childhood bereavement, childhood grief, grief, bereavement

The purpose of this article is to present the basic characteristics of childhood grief, share how past grievers viewed the church’s responses to their individual experiences, and offer suggestions of what assistance they remembered as beneficial at the time of their loss. Although grief touches every person at some point, all too often the unspoken taboo is the tug of war in one’s emotions when it occurs.

The grief process in children is dependent upon their emotional and cognitive development as well as the particular environmental changes that can occur following a loss (Shuchter & Zisook, 1993, p. 43). In the Christian community, maturation is best achieved as children realize there is a loving God who cares for them (Jackson, 1957, pp. 41, 113). This is not a denial of the necessity of cognitive, physical, and emotional development, but the additional importance of spiritual support and a focus on God. Kenneth Doka (1993) notes that the rituals and beliefs of one’s faith undergirded by the relationships found within the community can provide comfort during the grieving process (p. 185). Alice Cullinan (1993) speaks of the importance of the community of faith as a whole, not necessarily just the trained clergy, extending a compassionate heart to the brokenhearted (p. 196). As a result, the Christian church must understand the importance of assisting childhood grievers (O’Connor, 2004, p. 133).
Definition of Terms

Christian community is a group of individuals with the same belief and verbal confession that Jesus is God's son. Jesus died on the cross and rose again to new life, destroying the boundaries that lead to eternal separation from him (MacArthur, 2006; Romans 10:9–13). In this study the church is not just a physical building located in a definite place, but a masterpiece of God that includes Christians who lovingly serve others where they live (Grenz, 1994, p. 467). O'Connor (2004) notes that the distinguishing mark found in the Christian community resides in the hope or assurance that God is in control even when believers recognize they are unable to fully know how God works (p. 133).

Cognitive development is the result of individuals interacting with their environment and coming to some kind of an awareness of their ability to reason and adapt; this should enable them to use information in an appropriate manner. The process appears to reflect the scaffolding concept where prior success of less advanced concepts is essential for growth to occur (Bayley, 1976, p.120).

Death occurs when a living organism can no longer function as a result of disease, deterioration, trauma, or personal choice. Silverman (2000) emphasizes that death is a universal reality and is an aspect of the life process that is often unplanned (p. 5).

Grief is an “emotional response to loss” (Raphael, 1983, p. 33) that usually is more psychologically taxing when a relationship is severed (Weiss, 1993, p. 271). The length of the grieving process varies as a result of individual differences among the grievers as well as cultural conditioning (Shuchter & Zisook, 1993, p. 43). Grief is not “a specific emotion like fear or sadness but instead is a constellation of feelings that can be expressed by many thoughts, emotions, and behaviors. Grief is the internal meaning given to an external event” (Wolfelt, 1983, p. 26).

Loss “refers to an event that produces persisting inaccessibility of an emotionally important figure” (Weiss, 1993, p. 272).

Mourning occurs when a “person seeks to disengage themselves from the demanding relationship that has existed and to reinvest their emotional capital in new and productive directions for the health and welfare of their future life in society” (Jackson, 1957, p. 18). It is the painful process associated with changing how one relates to what was lost (Furman, 1984, p. 187).

Rituals are “symbolic acts performed in a certain way and in a certain order, and may or may not be accompanied by verbal formulas” (Doka, 1993, p. 186). When it comes to loss, “it is important for us to realize that the rites and rituals that we use to mark the end of life are our efforts to say a significant and appropriate ‘good-bye’” (Jackson, 1965, p. 32).
Uncomplicated grief or normal grief occurs when the grieving process does not permanently hinder how one lives (Cohen, Mannarino, & Deblinger, 2006, p. 16; Worden, 1982, p. 23). Developmentally there will be no "social, emotional, or physical" disability because of the loss; the child will continue to function in a healthy, age-appropriate manner (Webb, 2005a, pp. 21–22).

Foundational Cognitive and Psychological Developmental Theories

The most prominent and referenced scholar in the area of childhood cognitive development is Jean Piaget (Tallmer, Formanek, & Tallmer, 1974, p. 17). He distinguishes between adult and child ways of thinking by focusing on how a child logically puts things together by building on information as it is gained. This is how children progress from immaturity to maturity (Wass & Corr, 1984, p. 3). Development is dependent upon how each new experience fits into the child's previous and current mental structures, his or her personal emotional balance (Piaget, 1976, p. 192), and their social and physical environment (Vasta, 1989, p. 92). Piaget proposed four stages in a child's cognitive developmental journey: sensorimotor, preoperational, concrete operational, and formal operational (DeSpelder & Strickland, 2005, p. 46). He believed that each stage demanded a stretching and expanding of oneself that involves a very active engagement of the mind (Piaget & Inhelder, 1969, pp. 5–6). When these concepts begin to take shape and loss is experienced, a child's cognitive, emotional, and social perspectives have the opportunity to mature (Silverman, Nickman, & Worden, 1992, p. 502).

Erik Erikson proposed that the primary development of children prior to adolescence occurs within their social context and is foundational for self-esteem and all succeeding interactions (DeSpelder & Strickland, 2005, p. 46). When examining his four stages associated with childhood (trust vs. mistrust, autonomy vs. shame and doubt, initiative vs. guilt, and industry vs. inferiority), the relationship between the physical, mental, and social aspects becomes apparent (Hamachek, 1988, p. 140). These stages emphasize the importance of trust for a child especially when focusing on appropriate versus inappropriate psychosocial transitions brought on by a crisis such as grieving. Crisis needs to be understood as an event which is emotionally uncomfortable that forces a person towards a positive or negative resolution (Balk, 2004, p. 367).

Two of the most prominent scholars in the area of childhood development as it relates to grieving are Sigmund Freud and John Bowlby. Both highlighted the importance of the relationship with the deceased prior to death as well as how grieving progresses from initial awareness of loss onward (Webb,
2005b, p. 9). Another viewpoint shared by both was that children who are unable to successfully grieve, from onset of sadness to mental acceptance of loss, will exhibit some form of psychological damage in adulthood (Christ & Christ, 2006, p. 198; Dowdney, 2000, p. 819). Their findings do not mirror each other in every detail, yet there are untold implications for anyone interested in assisting grieving children.

Freud’s primary concept regarding grief is based on the idea that individuals must release their emotional bonds to what is lost in order to gain personal peace with what has occurred (DeSpelder & Strickland, 2005, p. 281); his word for this process is “decathexis” (Christ, 2000, p. 72). Two characteristics of healthy mourning prior to full “decathexis” are sadness followed by emotional stagnation in the ability to accept new attachment objects because of the intrusive thoughts of the lost loved object (Middleton, Raphael, Martinek, & Misso, 1993, p. 45). When successful progression occurs, restoration emerges, revealing a healthy emotional state (Hurd, 1999, p. 18).

Bowlby’s attachment theory for children has had a major impact on bereavement research and understanding the grieving process (Stroebe, 2002, p. 127). His theory establishes a framework for understanding the inclination of children to seek ties with others that can bring out strong emotional responses when these ties are severed or believed to be threatened (Worden, 1982, p. 8). The behaviors brought out by these possibilities are biologically motivated by the vulnerability associated with the need to survive (Shapiro, 1994, p. 34). Worden (1982) acknowledged the connection between Bowlby’s theories on attachment/loss and Erikson’s concept of trust versus mistrust that is foundational to relationships (p. 8).

Bowlby (1960a) defines mourning as “the psychological processes that are set in train by the loss of a loved object and which commonly lead to the relinquishing of the object” (p. 11). He explains grieving as an “instinctual response” that begins as soon as a loss occurs and can be emotionally stunting if not navigated through successfully (Bowlby 1960b, p. 96). Bowlby identifies four grief phases: shock and numbing, yearning and searching, despair and disorganization, and reorganization and adaptation (Wortman, Silver, & Kessler, 1993, p. 351). He believes that although the progression of childhood grief appears to be brief in comparison to an adult, the perceptible upturn may be a façade that hides lingering desires and animosity for the deceased (Parkes, 1965, p. 16). Bowlby (1980) states,

When the effort to restore the bond is not successful, sooner or later the effort wanes. But usually it does not cease. On the contrary, evidence shows that, at perhaps increasingly long intervals, the effort to restore the bond is renewed; the pangs of grief and perhaps an urge to search are then experienced afresh. The person’s attachment behavior appears to remain and under various conditions may be reactivated anew. (p. 42)
For most, the pain of the loss forces the griever to adapt existing bonds with the deceased (Bonanno & Kaltman, 1999, p. 764). Margaret Stroebe (2002) emphasizes that the “link between the person’s attachment style, internal working model, and way of letting go following an irrevocable loss” has a great deal to do with how one heals emotionally (p. 133).

The Grief Experience

The grieving process for children depends upon their developmental level (psychological and cognitive), relationship to the deceased, and prior personal experience with a loss, as well as familial and social connections (Corr, 1999, p. 445). Additional socio-demographic factors contributing to the process are gender, faith system, and culture (Raphael, 1983, p. 63).

When all of the contributing factors are taken into account, grief is understood as a “subjective experience and behavior” of individuals yearning to find emotional and mental equilibrium following a loss (Clements & Burgess, 2002, p. 39). A conscious awareness of the essential concepts regarding the nature of death is crucial for a grieving child’s initial as well as subsequent experiences when loss does occur (Furman, 1964, p. 331).

The concepts that indicate children understand death are universality, irreversibility, non-functionality, causality, and the belief in some type of continued life form following death (Corr, 1995, p. 7). When children understand universality, they know that all living things (which includes vegetation, animals, and people) die (Nguyen & Gelman, 2002, p. 495). The second concept that is needed in the process is an understanding that death is permanent or irreversible, and thus final (DeSpelder & Strickland, 2005, p. 42); the physical body cannot be revived (Speece & Brent, 1984, p. 1671) or “fixed” (Willis, 2002, p. 221). When this is understood and decomposition begins, then the concept of non-functionality is acquired (Wass & Cason, 1984, p. 33). This includes the “external or observable functions, such as breathing, eating, walking, or playing” as well as “internal . . . such as feeling, thinking, or dreaming” (Corr, 1995, p. 6). When children begin to comprehend these aspects they can separate death from sleep, which allows their attachment to the deceased to change; this is known as accommodation (Smilansky, 1987, p. 28). One’s understanding of the concept of causality is evident when death is known to be the result of outside as well as internal forces. For children, it is essential that they begin to comprehend that death is not just the consequence of being old (Corr, 1995, p. 7).

In life as a child knows it, acquisition of facts concerning death is not just a building on or “a simple straight trajectory that follows a clear line of logic,” but a comprehension of the process as it relates to his or her personal experience (Silverman, 2000, p. 48). Therefore, knowledge acquisition in the con-
crete realities of universality, irreversibility, non-functionality, and causality as well as identifying his or her belief of a continued life form establishes the coping skills essential for traveling through the grieving process (Zambelli & DeRosa, 1992, p. 492).

Personal Hope in the Midst of Pain and Suffering Applied to Childhood Grief

Adults who know grieving children must acknowledge the pain and suffering associated with such a loss while providing as much assistance as possible: “The opportunity to help a child face reality and handle his deep emotions wisely is a privilege to be treasured. . . . When this help is given, the child moves into his future better equipped for life” (Jackson, 1965, p. 78). “Grief is a process, not an event,” which provides caring adults with the privilege to prepare children for this inevitable experience while giving them the assurance there is hope even on the days when they are hurting (Wolfelt, 2004, p. 34).

Pain and suffering are a reaction to unpleasantness resulting in physical, emotional, spiritual, or psychological responses (Feinberg, 2001, p. 882). The cause of pain and suffering has been linked to deprivation, misery, loss, tribulation, anguish, and trouble (Holloman, 2005, p. 521). When pain or suffering occur, the only path to be taken is one of unrelenting determination to rely on the assurance of a relationship with God based on faith, supported by his character, and ignited by hope only found in the knowledge of his eternal purpose.

Theological Principles Applied to Childhood Grief

The premise for Romans 8:18–25 is God’s provision of hope in pain and suffering. It points to the eschatological expectation of Christ’s return, which provides the foundation of hope giving spiritual strength to endure current suffering (Schreiner, 1998, p. 440). Suffering will exist until eternity is fully realized, but faith in Christ gives a daily peace while focusing on the glory that is to come.

The fourth section of Matthew, which includes 18:1–6, 10, is known as the “Community Prescription.” It highlights the importance of the entire church body in living out kingdom priorities while being faithful witnesses of what Christ taught (Wilkins, 2003, p. 611). Jesus encourages the disciples to live a life of serving others (Walvoord & Zuck, 1983, p. 61). God’s undeniable concern for those who are in need should propel those in the church to continually evaluate and be vigilant in their attentiveness so proper care can be given to all who fall under the label of “little ones” (Allen, 1969, p. 183). Christianity
was significantly different from many faith systems during this time because of its recognition and even encouragement in regard to full family participation; there are no divisions in God’s kingdom (France, 1985, p. 284). Jesus continually seeks to teach the disciples an important lesson about God’s grace regardless of what one has to offer in return (Minear, 1982, p. 105).

Research Design and Participants

This study was a reflective exploration into childhood grief and the response of church communities and individual believers to these hurting children. The investigation included young adults 18–22 years of age who had lost a significant familial or close relational figure to death when they were between the ages of 6–12 years.

The design used grounded theory research was primarily qualitative, using semi-structured interviews (face-to-face or through Skype) with additional times of clarification until saturation occurred, meaning no new information was being obtained. Quantitative data concerning the characteristics of the sample group at the time of the loss and currently, as well as their church affiliation information, was noted.

Although the study was composed of 24 participants, many had experienced more than one death during the time they were between the ages of 6–12 years old. As a result they were able to discuss those deaths in the interview sessions as well. The reflections on these other deaths are first shown on Table 1. In order to protect the anonymity of the participants, each was assigned a pseudonym and given an identification number known only to me and the participant.

Students involved in the Christian community at the time of their loss were asked to share their experience. The majority of churches the participants were involved in at the time of their grieving experiences were primarily small congregations, approximately 200 or fewer weekly attendees.

Participants were provided with a questionnaire (Table 3) that allowed them to identify what they specifically felt about their grieving experience. The completed questionnaires were returned prior to the interview sessions, which allowed the information to be further reviewed and clarified during the discussion.

Following the analysis of the questionnaires, individual interview sessions were set so that additional questions could be asked. The questions asked were the following:

1. Tell me a little bit about yourself and your family.
2. If I wanted to understand you better as a child, what would you tell me about your interests, friends, school, town you grew up in, etc?
Table 1

Sample Group Demographics (N = 24)

<table>
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<th>Demographics</th>
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<td>Friend</td>
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<td>Type of Death</td>
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<td>Anticipated</td>
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3. You volunteered to participate because you experienced the death of someone close to you during your childhood. Please tell me about the deceased and the relationship you had with them.

4. You noted on the questionnaire the death was (anticipated or sudden). Can you explain to me how it occurred and how you were told?

5. Tell me if you experienced any prior incidents in which you had permanently lost someone or something of importance to you, and if so can you explain?

6. What positively influenced your ability to deal with this and subsequent losses?

7. What are some specific incidents involving individuals from the church community which encouraged or discouraged you during your adjustment to the loss?

8. You noted on the questionnaire your involvement in a church congregation during your childhood. Could you discuss this association prior to and at the time of the loss? How did this death affect your connection to the church in the time following the loss?

9. A ritual following a death is a symbolic act which allows the individuals who are grieving time to remember and mourn their loss. If
there were rituals you participated in after your loss, can you explain how they helped or hindered your movement towards understanding and healing?

10. If there is one aspect from a ritual that specifically stands out for you, please explain to me what it was and why it was significant.

11. How did you as a child determine what others believed or demonstrated were the proper and incorrect ways to express your emotional pain?

12. What has your experience been with loss and grieving following this death?

13. If your experience with the church was positive, how do you think their response and teachings equipped you to face future losses as a result of death?

14. If you could provide the church with information on what you believe would better equip them to help grieving children, what would you tell them?
These sessions were tape recorded, transcribed, and reviewed at length. As a result of the analysis used to review the questionnaires and interviews, recurring themes and categories were recognized. Because the interview session was semi-structured, there were instances when additional avenues were discussed with some of the participants; this allowed for greater depth and understanding to occur. The insights obtained from the questionnaires as well as the interviews provided a glimpse into what was corporately viewed as important by the sample group. As a result, recurring themes and categories were recognized.

Although the themes may appear at first glance to be very different in their importance, the underlying interconnected aspect is vital. None can stand on its own when it comes to knowing how to effectively understand and assist a childhood griever. Colby explained this best: “It’s not always the initial experience, but the whole of childhood grief at least in my experience. It’s how death affected everything else around it.”

<table>
<thead>
<tr>
<th>Themes</th>
<th>Categories</th>
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<tbody>
<tr>
<td>Importance of Relationships</td>
<td>Family</td>
</tr>
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<td>Church Community</td>
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<td>Friends</td>
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<td>Perceptions on Assistance Received</td>
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<td>Suggestions for Rituals</td>
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<td>The Nature of Childhood Grief</td>
<td>Emotions Experienced</td>
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<td>Verbalized Thoughts</td>
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<td>Suggestions for Future Assistance</td>
<td>Community Focused</td>
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<td>One-on-One Help</td>
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Themes and Categories

Importance of Relationships

The participants identified different relationships they viewed as an essential part of their childhood grieving experience. Gabby emphasized this point by stating, “Relationship is vital!” The three categories of the relationship theme to emerge are family, church, and friends.

Family. For this study, family is defined as the individuals the 24 participants understood as being related through a shared genetic pool or were intricately involved with them on a consistent basis: parents, grandparents, siblings, or close family friends. The reflections concerning the deceased focused on the positive, especially the love shared and the pleasure of spending time with them prior to their death. This demonstrated they were still very much a part of the participants’ emotional framework.

During the interviews, the participants all noted the importance of their family as they learned how to deal with their losses; for many it was the first time they had experienced grief. Consistent interaction with family was the only apparent relational stability they could rely on when life was chaotic. In the majority of cases, their families clarified any questions as well as provided the loving stability necessary to travel through the grieving experience successfully. It is important to note that not all families provided this to the grieving children within their midst. It is vital that the church continue to be a consistent presence for children who may not have the needed support and assistance from their families when they are grieving. The desire of the children was not to forget what had occurred, but to find some means to gain comfort and clarity concerning the death as well as how they were feeling.

Even if children were able to handle the grieving experience they were enduring, there is an area in which the church’s interaction and assistance could be beneficial. Believers in Christ cannot impose their presence, but being aware of the situations the children are in can allow them to support and assist the adults within the family the children are going to for counseling and answers.

Church Community. The perception of the participants regarding their definition of the church was that it is not confined to a particular congregation or parish, but is inclusive of every individual who believes in Christ as his spiritual savior. The undercurrent of hope found within the church’s faith was a sustaining power for many childhood grievers during their loss experience and it still is for many even today. The most obvious characteristic of each participant’s story was the importance of prior relationships with the in-
dividuals associated with a church who stepped in to assist him or her following the death. Two participants specifically spoke on this point:

   Ruth: They (her Sunday school teachers) were family friends of ours. They were a part of the process.
   Debbie: The pastor helped me... I was close friends with his son.

These participants identified the importance of fostering an atmosphere of trust, care, concern, and an openness to listen and help when it was needed. The thoughts shared demonstrate the importance of developing and maintaining strong relationships.

**Friends.** The study demonstrated that it was not only the children's friends, but also friends of the family that played an important part in assisting as they grieved. Children found confidence and security in relationships that had proven substantial prior to and following the death of the person they love.

The participants knew exactly whom they could turn to and who were the special friends who cared and wanted to help. It has been said that love is spelled “T-I-M-E,” and the participants in this investigation showed that they wholeheartedly agree.

Some participants did say that their personal friends were not as beneficial as other relationships in assisting them deal with their grief. This was not a lack of concern on their part, but perhaps the lack of knowledge on what to do or say.

The concept of grief not only affected grievers, but their friendships as well. Most participants admitted that their friends were hesitant to spend time with them or even discuss what had occurred. It was refreshing to see how friends of the family and even children who had experienced a loss as well were very beneficial in helping the grieving child feel loved and not alone.

**Perceptions of Assistance Received**

It is important to note both the helpful as well as negative aid that occurred immediately after the loss and even after an extended time. Because grief is not linear, the type of assistance given a grieving child has far more benefits as well as repercussions than one would first recognize.

The interviews highlighted the fact that past childhood grievers most often have a very vivid recollection of what occurred and what did not take place during their grieving experiences. The data indicates that the partici-
pants’ personalities and genders very often determined whether they thought the assistance they received was positive or negative. It was interesting to note that very often the younger the children were (6 years old) at the time of the loss, the more positive their reflections, while the older participants (7–12 years old) as well as the ones who had multiple loss experiences tended to be more negative of the Christian community as a whole.

Helpful Aid

Helpful aid experiences were identified by the encouragement given to the griever. It demonstrated individuals cared when they were hurting emotionally. Encouragement and consistent love in action were two characteristics of the positive actions identified. The clarity of detail and the appreciation in the voices of the participants were a true indicator of how important these acts of kindness were to each of them in the midst of emotional pain.

Immediate Support. Nearly every participant could remember at least one if not more than one incident of support received within the first few days after the death. Some of the examples offered were “. . . actually sat down and talked with me,” “prayed for me,” “explained everything,” “cooked for us. . . so many flowers,” and “leave notes.” It appeared that the urgent need for comfort was dealt with more effectively than long, extended care. It is vital that a working plan be developed for the extended care often needed by grieving children who require time to comprehend all that is occurring. It was refreshing to hear of how many within the community of faith stepped up and made sure the childhood grievers knew they had someone to depend on days and even months after the death occurred.

Extended Support. As painful as grief is, the reality of the experience is that it does not end as quickly as it appeared. The church must find and implement ways to extend care and ministry to hurting children and their families who are hurting. Some examples were the following: “continually reminding me she was an ear to listen or a shoulder to cry on,” “I went through two different counselors that helped me a lot,” and “my teacher always gave me a card on Father’s Day or Thanksgiving.” Suggestions offered by the participants are viable options in the Christian community’s ministry to grieving children: being allowed to honor the deceased (i.e., read a poem in their memory, plant a tree, etc.) and/or being able to identify a “safe person” to whom they could go to for a hug or word of comfort. These do not cover all viable means of support, but they do begin to show what can be done.
Negative Aid

One essential concept when assisting childhood grievers is to remember they are often thinking in terms that adults may not comprehend. Their minds are constantly trying to figure out or deal with the emotional upheaval they are experiencing for the first time. One participant who had lost her grandmother to an apparent suicide recalls a specific incident where she was trying to understand:

Annie: There was a kid there that told us suicide that God didn’t forgive . . . We asked our Sunday school teacher about it and she never really gave us an explanation.

Not addressing a child’s questions as well as lack of ongoing visible concern is a difficult thing for children to grasp. One specific concept that kept appearing was the idea that the children were invisible: “everything was addressed to my parents . . . I was never talked to or asked questions.” Not acknowledging that children are grieving can lead to far more negative repercussions than will ever be verbalized.

Immediately After Death. Children need time to comprehend, analyze, and even mull over their losses as well as the emotional roller coaster they will experience after the death of people they love. One young lady noted why she was hesitant to discuss her pain shortly after her loss: “When I went to church after that it was never brought up again . . . I never told them I was sad, but they never asked either.” The community of faith must remember that focused, ongoing attention from adults who have built a relationship with the child is a necessity for positive assistance to occur. This also means that children need time and freedom to express their feelings and deal with their grief without feeling as though they are being rushed to “get over it.”

Elapsed Time after Death. The participants remembered not feeling as if they had the freedom to explore the pain of grief months after the loss incident. They felt hampered by their shyness and abandoned after the focused attention ended immediately after the funeral. One suggestion was offered by a participant who noted she was extremely shy as a child: “I think if the church had been more involved to see that we were getting back to normal . . . if they would have come and visited.” Participants also noted that within the teaching periods at the church they did not discuss the subject of death or grief, which further convinced them that they were taboo subjects. They spoke of the importance of speaking on these subjects: “At church especially you need to be able to talk about the hard things in life.” Time and personal
interaction with someone they know who cares for them would have helped to avoid some if not all of the negative experiences identified.

**Impact of Rituals**

Cultures are often identified and characterized by the rituals they perform. Rituals provide a time to emotionally release that attachment while adjusting the bond to fit the current reality (Jackson, 1965, p. 32).

**Helpful**

How refreshing to see the age-old rituals initiated after the death of a loved one can indeed be beneficial for childhood grievers. Time with the deceased, the songs sung, an opportunity to participate in the ritual even in an honorary position, the presence of friends at the service, as well as a time to ask questions answered by trusted individuals were for many the things that made the experience less daunting and even healing. The positive reflections showed that the act of remembering and interacting with others brought some order and reason to the chaos they had been experiencing following the death.

**Disturbing**

Unanswered questions, ignoring the uncomfortable, as well as facing the unknown are all fears that could easily be alleviated if adults would stop and reflect on the complexity of the rituals and grieving experience as a whole. The majority of participants had no prior knowledge of anything they would experience as well as the turbulence of the emotions they would be enduring over time.

**Suggestions for Rituals**

The unknown in addition to all the emotional upheaval was troubling. Although the emotions cannot be eradicated, some of the uncertainties can when someone steps up and gives information to child grievers as well as leaving the door open for them to come and ask more questions if needed. If the church is to truly assist children, then there is a need to equip them with knowledge that is age appropriate and insightful. Never assume the families are going to have the insightfulness or time to sit down with their children to do so.
The Nature of Childhood Grief

When someone significant dies, what the griever experiences psychologically is based upon the emotional attachment that existed between the survivor and the deceased. Emotions can be as varied as the individuals involved.

Emotions Experienced

It was interesting to note the conflicting emotions the participants could identify as well as the differences in how each participant handled what they were experiencing: anger, frustration, confusion, shock, guilt, and much more. Several of the male participants noted that it was the first time they had seen their father cry, which helped them to know that it is okay to show emotions when they are hurting. It was also disconcerting to know that others learned that emotions were not appropriate by watching the reaction of the church and others. They deeply desire for the church to understand all that grieving children are experiencing so they will be better equipped to assist them in healing emotionally and not carry the pain into their young adulthood.

Verbalized Thoughts

The participants could vividly recall not only what occurred, but also what they were thinking and had never expressed to others. One specific reflection noted the confusion associated with being told her uncle died: “Oh, okay. So what does that mean really? What am I doing with my life?” Some were also confused by the mixed message they were receiving, especially when a Christian died: “I knew . . . he was going to heaven. In a way I thought . . . , ‘Why is this not more of a celebration: Why is everyone so gloomy?’ I couldn’t figure it out.” The data has shown that children were silent grievers out of ignorance of what to expect, how they were to feel, and how they fit into the big scheme of the grieving process within their family unit.

Suggestions for Future Assistance

When asked to give the church some possible concrete actions, not one participant hesitated before answering. These suggestions are not inclusive of every childhood griever, but are nonetheless important to those who may be seeking to assist children and their families in the grieving process.
Table 5

**Suggestions for Assisting Future Childhood Grievers**

Prior to grief experience
- Get to know children in congregation
- Build relationships based on trust
- Know what is occurring in the child’s life under your care

Communication vital
- Let them know of your concern.
  - Verbally
    - Tell them
      - You are there if they need you
      - You care about them
    - Ask
      - How they are doing
      - If they have questions
  - Technology tools
    - Call them
    - Send them e-mails
  - Be an encourager
    - Through actions
      - Prayer cards or notes
      - Food
      - Hugs
      - Smiles
- Do not assume they know what is going on.
  - Explain
  - Listen more than you talk

Focus on the child holistically

Education
- Teach them about difficult life situations and answer their questions.
- Death
- Grief
- Use books and stories to help them understand

Spiritual
- Have ministers who are geared for children.
- Provide counseling if needed.
- Focus on immediate and follow up care.

Emotional
- Help them find numerous positive ways to express themselves.
  - Crying
  - Drawing
  - Writing
- Give them the freedom to express themselves without censor.
- Focus attention on children of immediate and extended family not just adults.
- Establish mentoring program with past childhood grievers as mentors.

Educate adults on childhood grieving
Concluding Remarks

The reality is that most of the time grieving children live and interact with adults who may not understand or have the necessary tools to assist them in dealing with the emotional disruption death has caused. Not having a plan to assist children who are grieving is no longer feasible for churches. If they truly believe and speak on the importance of everyone within the believing community as well as the undeniable gift of hope found in the Christian faith, then ministry must be oriented towards the whole church. Therefore adults who choose to step in and assist childhood grievers need to understand several basic points. Each child’s experience is unique, so a relationship based on openness, time together in which discussions can occur, and encouraging love tangibly evident is vital. Never assume children know what is going on or that they understand how they are feeling even months or years after the loss event. Lastly, the church must seek ways to develop mentoring relationships as well as family friendships that will be in existence prior to and long after the death of a child’s loved one. As one participant so eloquently stated, “Focus on children on all aspects . . . take a more active role in their lives.”

The church, as the body of Christ, has the undeniable privilege of making a positive difference in a grieving child’s life. This can only occur as relationships are encouraged and education on the subject of grief is incorporated into the church’s curriculum.

REFERENCES


POND: A Study of Childhood Grief and the Church’s Response


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