

Factsheet: Adolescent Loss



The Irish Childhood
Bereavement Network

Adolescent Loss

Adolescence is a period of transition marked by rapid physical, cognitive, emotional and social change. Developmentally at this stage teenagers seek to achieve increased autonomy from family and home. They look for greater independence and desire new experiences to satisfy their curiosity. At this time they develop their personal value system while progressively forming their unique identity in the world. Adolescents struggle with the paradoxes of their lives: striving for closeness but fearing intimacy; not given autonomy but expected to act maturely.

Bereavement in the life of an adolescent is seen as off time and demands the reorganisation of their assumptive world and how they view themselves, others and life. It evokes grief responses which can be intense. The most frequent deaths adolescents experience are those of parents, siblings or peers. The responses to their loss will depend on their age, the nature of the death, their relationship with the deceased, their personalities, how the family grieves and the changes the death creates in the family.

Developmental differences:

There is a marked difference in the grieving styles of Early (12-14 years) and Late (15-18 years) Adolescents.

Early Adolescence

- In early adolescence cognitive change is in initial development of formal operational abilities.
- Psychological change involves the withdrawal of emotional investment in the parent
- Social change highlights the importance of peer relationships for teenagers
- Biologically they are changing due to puberty

These factors make adolescence a very complex transitional age.

- Due to their formal operational thinking and their changing need for information, they may in early teens show a diminished interest in and an active avoidance of information about a parent or sibling's illness or treatment.
- The change in their emotional relationship with parents is complicated by a parent's serious illness. They are caught in the need to distance and the longing for closeness.
- They want privacy as they develop their own identity.
- Younger teens may talk with friends more readily about their parent or sibling's condition than with their parents..... this need changes in late adolescence.
- They do not like to be seen as different as they fear being rejected by their peers. Some friends may shy away.

- Avoidance of feelings is common at this stage.
- They experience muted anticipatory grief.

Typical reactions

- Drop in school grades
- Sleep problems
- Anger
- Sadness
- Withdrawal from discussions about the parent's condition

Behaviours

- Oppositional
- Argumentative
- Demanding behaviour
- It is reported that at times of intense anxiety teenagers slept with their parent. If this extends over a longer time span it can indicate more serious problems
- Extra demand of chores at home may interfere with their time with friends and this can cause resentment
- They can become highly anxious and preoccupied with how to manage their emotions. Trying to hold it in and not show their upset.
- They need a final communication with the parent or sibling who is dying
- Adolescents who are informed and prepared for a death can feel more in control of what is happening, this can help in their grieving afterwards
- Adolescents like to be part of the funeral planning and rituals and have a need for such inclusion
- Many are definite about how they want to engage in these rituals
- Some feel oppressed by the crowds at the funeral and long for time with their parent
- Adolescents often cry alone as they do not want to upset the surviving parent and if they see the parent upset they will often leave the room
- The adolescent has to develop a new relationship with their dead parent in their memory while negotiating a new relationship with the surviving parent as a single parent
- Adolescent's mourning is generally episodic, often triggered by specific events such as birthdays or anniversaries

- They may show resistance to talking as they are more preoccupied by school and peers
- They often talk with adults other than their parents about their experience of loss
- Parents often find it difficult to enter their teens experience of loss
- These teen may be more angry and tearful about difficulties in school or homework than about the death
- Some teens may be more expressive and tend to come from families that foster open communication of emotions
- Reminders are important such as birthdays and holidays.
- The surviving parent's mourning can feel threatening to many of the adolescents because the parent appears to be more distraught than they had ever previously witnessed.
- They show early evidence of identifying with the dead parent. Wearing their clothes was not uncommon.
- They often talk about talking with their dead parent, dreaming about them and feeling the parent's presence.
- It is important for them to express the specific meaning this loss has for them. A father may have been a mentor and friend who helped in ways that promoted independence. Others mourn the loss of a confidante.
- They require help in setting limits on potentially destructive regressive behaviours, acting out aggressively, or with drugs and sex.

Late Adolescence (15-18years)

- Mourning takes place in a more adult manner.
- It is a more complex mourning process. They automatically think about and integrate their past relationship to the parent who has died, what the parent had expected of them, and how they might live up to those expectations in the future.
- More painful grief due to their more advanced cognitive abilities as they were able to comprehend the enduring consequences of the loss.
- Firstly they experience anticipatory mourning and secondly experience more persistent and prolonged periods of mourning after the death than did younger children, whose grief was more episodic.

Gender differences

- For adolescent girls a parent's death interfered profoundly with their developmental task of changing their relationship with the surviving parent. Rather than only withdrawing emotional investment from the relationship they now have to renegotiate their relationship with their deceased parent and their surviving parent.

- Girls emphasise the change in relationship with their mothers. Boys on the other hand are usually engaged in more fully separating from both parents.
- At this stage they have the ability to see the situation from another person's perspective.
- They develop deeper personal relationships
- They are in the process of planning for their own future.

Reactions in bereaved adolescents:

- They may mask their fears with rebellion acting out their protest at what has happened
- They may exaggerate their maturity and mask their inability to cope
- They may be moody, negative and rebellious feeling life has become very unfair
- They may use drugs or drink to numb the pain they experience
- They may express blame at anyone they feel might be responsible for the death
- They may drop out of their activities losing enthusiasm as they become disconnected
- They try to finding some meaning in their powerless over what has occurred
- They may struggle in preparing for an uncertain future
- They feel different from their peers
- They don't always want to talk
- They may use sport as a release
- They often watch sad movies or read books on loss, which can give them an excuse to cry

How can we help them?

- We need to be present to them
- We need to listen to them and hear what they are not saying
- We need to give them time to unfold their struggles
- They may talk with another adult who can support them, they do this to protect parents from their pain
- It is important to be patient and not react to their responses to loss

Adolescents need additional help:

- If they deny that the death has occurred
- If they suffer panic, anxiety or fear which interferes with life
- If they suffer physical ailments that continue without identifiable medical causes
- Prolonged feelings of guilt or responsibility for the death
- Chronic depression
- Chronic anger or hostility
- Behaviour that is reckless and life-endangering to self or others
- Prolonged changes in personality, personal appearance and/or behaviour
- Consistent withdrawal from friends, family members, prior interests
- Prolonged changes in sleeping patterns
- Continuing problems with eating (overeating, under-eating, bingeing)
- Drug or alcohol abuse

- Sexual promiscuity
- Self-harming
- Suicidal thoughts or actions

For further information see: www.childhoodbereavement.ie

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