

Assisting ways for bereaved children: theoretical considerations on grieving, psychosocial development and possible empowerment

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Abstract. The main focus of the research of this phenomenon, in this paper would be mostly put on:

- a) bereaved children's grieving process analysis having in mind pre and post traumatic contexts along with both internal and external influential factors (e.g. time passed, social support system, self-esteem etc.);
- b) experienced loss influence to such children's behavioral, emotional, and cognitive levels and the importance of setting the empowerment models;
- c) intercultural researches in specified area and selection of socio-culturally appropriated and ethically based methodological way-outs.

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Introduction

Loss (as the consequence of death of a loving one, divorce, migration etc.), being universal both physiologically and socially, is experienced by a separate individual in its unique way [1]. It is also highly stressed that experienced loss within the family closely relates to individual's negative psychosocial implications for his/her further wellbeing, i.e. withdrawn, loneliness, guilt or even social deprivation states.

All of that may be pondered as social risk factors that in many cases eliminate much favorable ways for such person's psychosocial development, e.g. children of age 6-7 after the death of a loving one usually experience the guilt or they become angry with the deceased due to the abandonment [2-3].

On the other hand, adults would avoid discussing openly such a morbid topic with children as they are afraid of possible youngsters' negative reactions; thus it is better in some ways to avoid such conversations [1, 3-4]. Consequently, the gap between generations and different social contexts is created, not to forget violation cases against children's rights to participate fully in their social environment, to be heard, and to get a full support by all means from persons who take care of children favorable socialization.

However, longitudinal researches in the US and Canada [4-5] show that children are quite keen on holding such

conversations on existential issues with adults. Thus, while *operationalizing* loss phenomenon, we may indicate the following empirical variables that are very important in settling appropriate methodological strategies identifying bereaved children as socially vulnerable and legally less protected group along with their empowerment through favorable psychosocial environment. These variables, as many researchers [1, 3-4, 6] would point out, could be both internal and external emotion reactions of children with such experience:

- a) guilt;
- b) fear;
- c) uncertainty;
- d) low self-confidence;
- e) low self-esteem;
- f) anxiety;
- g) loneliness i.e. social isolation;
- h) social distance and deprivation elements.

Therefore, the object of this paper is theoretical analysis of bereaved children's (aged from 3 to 18) grieving processes within their psychosocial development and possible considerations for these children empowerment.

Based on both theoretical and empirical findings, the goal would be revealing the links between bereaved children's (starting from early ages) grief processes and influential fac-

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tors for their further psychosocial development, and sequentially to consider possible empowerment models while making those children's psychosocial state much more favorable.

1. Grieving, psychosocial development and possible empowerment of bereaved children

In this part of the paper we briefly introduce some theoretical considerations on bereaved children surveys done in the areas of their grieving, psychosocial development, and modelling the empowerment strategies.

1.1. Bereaved children's grieving process

There are numerous various losses that individuals experience throughout their life span and the main reaction to such negative events would be *grieving* [3, 6]. Evidently, the most vulnerable groups within these moments are children; as they have firstly, to deal with unknown feelings, and, secondly, with great changes in their daily routine [7]. As L. Goldman [8] would argue: frustration, pent-up anger, sadness and loneliness are the consequences of grief. They would negatively affect child's normal social integration and adaptation. These feelings externally may appear through anger expression or antisocial behavior; internally - through suicidal thoughts or even actions [4, 1, 9]. On the other hand, main reactions towards loss of a loving one mainly appear as an *apathy* and *inability to concentrate* [7, 3]. Also some physiological changes occur as well (e.g. sleep disorders etc.).

1.2. Experienced loss influence on such children's behavioral, emotional, and cognitive spheres and importance of setting the empowerment models

It has been still arguing on scientific basis whether or not, the emotional reactions towards experienced loss are mainly influenced by cognitive maturity and what are the other factors, except gender or age, may affect individual's emotional welfare. According to N. Webb [3], children grieving process differs from adults in few psychosocial aspects:

- a) the lack of children cognitive maturity doesn't allow them to grasp loss inevitability, its universality, and causality;
- b) children much less than adults would deal correctly with an emotional pain;
- c) it is quite harder to verbalize feelings for children than for the other grown-ups;
- d) children are more sensitive while accepting a different status among peers;
- e) children feelings are expressed easier through games and other activities.

Thus, in the context of these differences, some changes of children emotional and behavioral spheres could be seen

much more clearly. According to C. Pfeffer [6] findings, 40% of bereaved children much frequently face emotional difficulties than non-bereaved peers. Also these findings have showed that 13% of non-bereaved children did not need psychological support in comparison with those who have experienced loss in the family. T. Butvilas [10] research has revealed that grieving children (age 7-12) experience more negative emotions (sadness, guilt) than positive ones (joy, self-confidence etc.). This fact would closely match with other researchers [11, 2, 12] data on how bereaved children express their emotional and behavioral reactions (they are more angry with themselves and those who have abandoned them, experience inner guilt etc.). Besides, such group of children much frequently encounters behavioral issues - demands attention from others, expresses aggressiveness, shows asthenia, experiences various forms of fear, fights against concentration [6, 9-10, 13-14]. Putting all that in other words, two common behavioral problem groups arise:

- 1) *exaggerated anxiety-belonging* type problems include much interiorized reactions: seeking for guardianship, creating attachment bounds with the surviving parent etc.;
- 2) *antisocial-aggressive behavior* type problems include much exteriorized reactions: aggressiveness, asthenia, negativism, lack of discipline, learning difficulties.

Summarizing all of these facts, it is important to stress out that grieving children, as socially vulnerable group, are much withdrawn, less confident and initiative, and lacking respect towards the others [8, 11, 4, 15].

A. Dent [9], N. Webb [3], D. Black [1], A. Tomer et al. [16] support those findings while saying that experienced loss negatively affects individual's further physical, emotional, cognitive, behavioral, sexual identity, and spiritual wellbeing development and growth (especially having in mind the duration of such feelings expression and time after the trauma occurred). Thus, the creation of support model for such individuals would be of high importance eliminating possible health disorders or other complications in the nearest future [9].

As M. A. Zimmerman [17] states that most of the works on *empowerment* focus mainly on psychological aspect, measured by collective efficacy (i.e. the belief that people together can make a difference). The youth's health empowerment strategies, promoting young people as participants and as advocates for community norm and policy change, are growing [18]. The evidence shows that engaging young people in structured organized activities that link them to each other and to the institutions enhances their self-awareness and social achievement, improves mental health and academic performance and reduces rates of dropping out of school, delinquency and substance abuse. While overviewing young people empowerment interventions, it could be stated that they have been related to various empowerment outcomes: strengthened self and collective efficacy, stronger group bon-

ding, formation of sustainable groups, increased participation in social action and actual policy changes. These empowerment outcomes, in turn, have been linked to improved health and educational outcomes.

On the other hand, A. Krüger [19] analyzes the necessity of various empowerment tools for the young people within different social contexts and points directly to these critical aspects that mainly have negative influence on the individual's psychosocial development, i.e. almost every day societies are exposed to cope with crises in their general environment where children are growing up, such as: the educational system (especially school); the family, the neighborhood, and economies; all of which may lead to increased school failure and drop-out, high unemployment rates, drug abuse and etc. In today's increasingly complex, as A. Krüger [19] continues, diverse and rapidly changing world, the children and the youth constitute a large part of the increasing groups which are socially excluded, disconnected from the society and morally deprived, resulting in a growing number of young people turning away from the democracy.

A growing number of children and youth are exposed to economic, social, environmental, and technological risks which are actually or potentially harmful and which exclude young people from contributing their full talents to the society and violate, in some cases, the children's rights to be equivalent participants.

These specific problems are, on one hand, linked up with social class, with growing up in deprived, poverty-stricken, non-supportive environments. On the other hand, children from more privileged backgrounds might also be liable to become a part of these groups: the risk of being disconnected, the risk of living in the virtual world of computer games, the risk of being disoriented, not being supported in their individual capacities and in what they could contribute to the society.

Far too few resources are invested in prevention, in long-term, holistic and sustainable solutions aiming at systemic change and the ways in which they are conceptualized and delivered. This includes family and community development, reform of early childhood provision and school development, children and youth services, vocational training and employment, economic and social development as well as transformation of neighborhoods.

N. Herriger [20] supports the ideas mentioned above while saying that empowerment concept mainly looks at individual development from the perspective of participation.

The development of children and adolescents can be conceived as a process of participation in an increasing number of social contexts. Young people are, from the moment they are born, active participants in social transactions: they learn to participate in complex and sometimes conflicting systems of social environment. The social context, in which young people participate, starts at the micro-level of the family and kinship, expands to peer groups and peer culture, school envi-

ronment, neighborhood and youth culture, to the labor market and the public cultural system. If these complex processes of learning to participate succeed, young people develop a sense of competence and self-efficacy, connectedness and respect, belonging and responsibility [19-20].

On the other hand, if these processes of participation and integration in larger social networks fail (one of the causes of that might be the experienced loss in the family), the individual is at risk of marginalisation. A lack of connectedness and belonging, a feeling of alienation and disrespect is a fertile soil for egocentric and ruthless behavior. Namely, these very consequences of loss in the family we have already discussed in previous chapters. Empowerment can, thus, be seen as an activity directed at creating new opportunities for participation in social programmes and networks on a community level.

2. Lack of intercultural researches and methodological solutions

Loss phenomenon and its psychological process aspects are still less evaluated and explored fields on intercultural basis. Also the topicality of this chosen scientifically problematic field is based on today's world utilisation manner when such topics are mainly avoided in public sphere, especially by adults along with their over-domination style on children [2]. Some problematic fields are still argued and unknown within grief studies as well, e.g. J. Archer [21] discusses whether or not differences in grieving produce marital problems in the family; J. van den Bout et al [22] would reveal uncertainty that symptoms of traumatic grief constitute a distinct form of bereavement-related emotional distress apart from bereavement-related depression and anxiety; the role of negative interpretations of grief reactions in emotional problems after bereavement [22] etc.

Thus, grieving and loss phenomena could be seen and explored more deeply through those methodological approaches such as:

- a) *Positivistic Psychology* when the main accent is put on to individual's ability to learn positivistic attitudes towards negative life events [23-24];
- b) *Existentialism* with the main aspect of the meaning that comes out of different experiences in life [16, 25-26];
- c) *Attachment Theory* that stresses the importance of belonging to someone from early ages [27-29, 3];
- d) *Psychoanalytical Stream* combining individual and contextual aspects for each person's strategies to cope with existential challenges [30, 3];
- e) *Child's Ecological Development Theory* stressing the meaning of healthy child's socialization factors [31-32];
- f) *Behaviorism* that analysis the relations between behavior reasons and possible consequences [33-34];

- g) *Cognitive Theory* that deals with individual's cognitive abilities to survive crucial events in life [35-36].

Conclusions

Loss, being universal both physiologically and socially, is experienced by a separate individual in its unique way. Experienced loss within the family closely relates to individual's negative psychosocial implications for his/her further well-being, i.e. withdrawn, loneliness, guilt or even social deprivation states. All of that may be pondered as social risk factors that in many cases eliminate much favorable ways for such person's psychosocial development.

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ated anxiety-belonging type problems that include much interiorized reactions: seeking for guardianship, creating attachment bounds with the surviving parent etc.; antisocial-aggressive behavior type problems that include much exteriorized reactions, such as: aggressiveness, asthenia, negativism, lack of discipline, and learning difficulties.

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References

1. Black D. Bereavement in childhood. – *British Medical Journal* 316 (1998) 931-933.
2. Mishara A. L. Narrative and psychotherapy - the phenomenology of healing – *American journal of psychotherapy* ISSN 0002-9564 49(2) (1995) 180-195.
3. Webb N. B. *Helping Bereaved Children*. 2nd Ed. – New York: The Guilford Press, 2002.
4. Worden J. W. *Children and Grief: when a parent dies* – New York: The Guilford Press, 2001.
5. Kübler-Ross E. *On children and death* – USA: First Touchstone Edition, 1997.
6. Pfeffer C. R. *Severe Stress and Mental Disturbance in Children* – American Psychiatric Press, Inc., 1996.
7. James J. W., Friedman R. *When Children Grieve* – New York: Harper Collins Publishers, 2001.
8. Goldman L. *Helping the Grieving Child in School*. – *Phi Delta Kappa Fastbacks* 460 (2000) 7-40.
9. Dent A. *Supporting the bereaved: theory and practice*. – *Healthcare Counseling and Psychotherapy Journal Counseling at Work*, 2005.
10. Butvilas T. Šeimoje patirtos netekties poveikis pradinių klasių mokinių elgesiui ir emociniams išgyvenimams. – *Jaunųjų mokslininkų darbai*. ISSN 1648-8776, Nr. 3 (7). – Šiauliai: ŠU leidykla, 2005 – 11-20.
11. Perry B. D. *Children & Loss* – New York, (N.Y.): Instructor. No. 6, 2001.
12. Reeve J. *Understanding motivation and emotion*. – New Jersey: Wiley, Hoboken, 2005.
13. Butvilas T. *Grieving Children Socialization*. Monograph. – Vilnius: MRU Publishing House, 2008.
14. Tramonte M. R. *Linking Support Systems for Students and Family: Helping Disenfranchised Mourners Grieve a Death* – National Association of School Psychologists Annual National Convention. Orlando (FL): Reports-Research, 1998.
15. Wolfelt A. *Dispelling 5 Common Myths about Grief*. *Living Our Losses* – Edmonton, Alberta: Otters Publishing Corporation, pp. 5-7, 1999.
16. Tomer A. et al. *Existential and Spiritual Issues in Death Attitudes* – New York, London: Lawrence Erlbaum Associates. Taylor&Francis Group, 2008.
17. Zimmerman M. A. *Empowerment theory: psychological, organizational and community levels of analysis* – In: Rappaport J, Seidman E, eds. *Handbook of community psychology*. – New York, Kluwer Academic/Plenum Publishers, 2000.
18. <http://www.euro.who.int/HEN/Syntheses/empowerment/20060119_5>, accessed 02-09-2016.
19. <<http://www.yepp-community.org/downloads/empowerment/Empowerment%20AK.pdf>>, accessed 06-08-2016.
20. <www.aforts.com/colloques_ouvrages/.../herriger_norbert.doc>, accessed 09-08-2016.
21. Archer J. *The Nature of Grief*. – New York: Routledge, 1999.
22. Van den Bout et al. (2003). *Traumatic Grief as a Disorder Distinct From Bereavement-Related Depression and Anxiety: A Replication Study with Bereaved Mental Health Care Patients*. <<http://ajp.psychiatryonline.org/cgi/content/full/160/7/1339>>, accessed 09-02-2016.
23. Lopez Sh. J., Snyder C. R. *Positive Psychological Assessment* – Washington, DC: American Psychological Association, 2006.
24. Norem J. *The positive power of negative thinking* – Cambridge (Mass.): Basic Books, 2001.
25. Yallow, 2005. – In: Stewart J. (ed.) *Kierkegaard and Existentialism*. – Farnham, England: Ashgate, 2011.
26. Boss M. *Psychoanalysis and Daseinanalysis*. – New York, 1986.
27. Parkes C. M. *Bereavement in adult life*. – *British Medical Journal* 316 (1998).
28. Bowlby J. *Attachment and Loss*. Vol. 3. – New York: Basic Books, 1980.
29. Holmes J. *John Bowlby and Attachment Theory* – New York: Routledge. Taylor&Francis Group, 1993.
30. Freud & Horney, 1974. – In: Cioffi F. *Freud and the Question of Pseudoscience*. – Open Court Publishing Company, 1998.
31. Bronfenbrenner U. *The Ecology of Human Development: Experiments by Nature and Design*. – Cambridge, MA: Harvard University Press, 1979.

32. Huitt W. A systems model of human behavior – Educational Psychology Interactive. Valdosta, GA: Valdosta State University, 2003. <<http://chiron.valdosta.edu/whuitt/materials/sysmdlo.html>>.
33. Skinner B. F. *Beyond Freedom and Dignity* – Penguin, 1971.
34. Bandura A. Toward a Psychology of Human Agency. – *Perspectives on Psychological Science* 1(2) (2006). – DOI: 10.1111/j.1745-6916.2006.00011
35. Kohlberg L. *Essays on Moral Development* – Cambridge: Harper&Row Press, 1984.
36. Piaget J. *The Moral Judgment of the Child*. – New York: Free Press, 1965.

Child psychosocial well-being across "high" and "low" levels of quality of care showed negligible differences between residential- and community-based care settings, suggesting the important factor in child well-being is quality of care rather than setting of care. Practical and policy implications and future research are discussed.Â Indeed, some studies demonstrated powerful negative effects of deprivation on infant development, and positive development when the infants were moved to live with well-trained and paid foster parents.[18,24] These studies of infants in a very specific and negative caregiving environment have been generalized to a belief that all residential care settings across the world must have the same poor caregiving. Maltreated children's reports of relatedness to their teachers. *New Directions for Child and Adolescent Development*, Vol. 1992, Issue. 57, p. 81. CrossRef.Â Developmental considerations in the investigation of conduct disorder. *Development and Psychopathology*, Vol. 5, Issue. 1-2, p. 331.Â Psychosocial resilience and protective mechanisms. *American Journal of Orthopsychiatry*, 57, 316-331. Rutter, M. (1989).