

# Student Grief Processes

School Resources to Support Military-Connected Students is a project by the Clearinghouse for Military Family Readiness an applied research center at The Pennsylvania State University and is funded by the Department of Defense Education Activity Grant number HE1254-19-0009.

For more information click on the links below:

<https://schoolresources.militaryfamilies.psu.edu/>

<https://militaryfamilies.psu.edu/>

<https://www.psu.edu/>

<https://dodeagrants.org/>

Our goal is to provide school personnel with free, evidence-based resources to support military-connected students. This training is part of our *Suicide Prevention* series.

## Important Reminders

Before starting this training, please read the items below carefully and check the box in front of each item to indicate your understanding.

- The following content discusses suicide and may be upsetting to some individuals.
- Follow all district, local, state, and federal regulations. This training is **NOT** intended to replace or override existing procedures or laws.

## Introduction

### What is the purpose of this training?

Grief processes can be complicated—especially in the context of a death by suicide. As part of the immediate response process, it is important to review common grief reactions in your school and continue to normalize feelings for students.

*“An abnormal reaction to an abnormal situation is normal behavior.”*

- Viktor Frankl, *Man’s Search for Meaning*

## Objective

The goal of this training is to increase your confidence in your ability to:

**Recognize age-appropriate grief reactions in your students.**

*How confident are you in your ability to do this now?*

Please click on the link below to submit your response.

[https://pennstate.qualtrics.com/jfe/form/SV\\_6Gp3iBHlvhcTluR?modulenumber=suicide31](https://pennstate.qualtrics.com/jfe/form/SV_6Gp3iBHlvhcTluR?modulenumber=suicide31)

Verify that you have completed each of the tasks below before proceeding with this training.

Answered the survey question in the link.

Clicked the arrow underneath the survey question to submit your response.

Recorded the ID number provided after you submitted your answer to the survey question. You will need it to complete the survey at the end of this training.

## Research

### What is most important for me to know?

For school-based mental health professionals, grief and related symptoms are common knowledge; however, complicated grief and trauma add another layer that can be difficult to recognize. The sudden loss of a friend or loved one—by any means—is often so shocking and unbelievable that grief work becomes more prolonged and symptoms may be more severe. Generally speaking, grief and trauma both include intrusive thoughts, sleep disturbances, re-experiencing, and other distressing symptoms, and function similarly in the aftermath of a death by suicide. For students experiencing this kind of loss, trauma-specific psychoeducation and referrals for assistance will continue to be important.

This table from Lehman and Cozza (2006) provides potential emotional and behavioral responses to a family death but is also a useful tool for better understanding emotional and behavioral responses to a peer suicide as well.

#### Age:

Infants and toddlers

#### Emotional and Behavioral Responses to Death:

- Crying
- Searching for parents/caregivers
- Clinging
- Changing sleeping and eating habits
- Regressing to earlier behavior (e.g., bedwetting, thumb sucking)
- Repeating play or talk

#### Age:

Preschoolers (age 3-5)

#### Emotional and Behavioral Responses to Death:

- Fearing separation (e.g., from parents/loved ones)
- Clinging
- Throwing tantrums, having irritable outbursts
- Fighting
- Crying
- Withdrawing
- Regressing to earlier behavior (e.g., bedwetting, thumb sucking)
- Sleeping difficulty (e.g., nightmares, difficulty sleeping alone)
- Increasing occurrence of usual fears (e.g., the dark, monsters)
- Magical thinking, believing the person will reappear
- Acting and talking as if the person is not sick or is still alive

#### Age:

Younger school- age children (ages 6-9)

#### Emotional and Behavioral Responses to Death:

- Reacting in anger, lying, bullying
- Denying

- Acting irritably
- Blaming self
- Fluctuating moods
- Fearing separation, being alone, or experiencing recurring events
- Withdrawing
- Regressing to earlier behavior
- Having physical complaints (e.g., stomachaches, headaches)
- Experiencing school problems (e.g., avoidance, academic difficulty, difficulty concentrating)

**Age:**

Middle-school children (ages 9–12)

**Emotional and Behavioral Responses to Death:**

- Crying
- Longing for someone who has died
- Acting aggressively, irritably, bullying
- Experiencing resentment
- Experiencing sadness, isolation, withdrawal
- Having fears, anxiety, pain
- Suppressing emotions, denial, avoidance
- Blaming self, guilt
- Sleeping disturbance
- Worrying about physical health and having physical complaints
- Declining academic success, discipline, attendance, memory
- Thinking and talking repetitively
- Expressing “hysterical” concerns and need to help

**Age:**

Early teens and adolescents (ages 13–18)

**Emotional and Behavioral Responses to Death:**

- Experiencing resentment, loss of trust
- Feeling guilt, shame
- Experiencing depression, having suicidal thoughts
- Distancing, withdrawal, panic
- Swinging moods, irritability
- Experiencing anxiety, panic, dissociation
- Experiencing anger
- Involving self
- Exaggerating euphoria
- Acting out (engaging in risky, antisocial, or illegal behavior)
- Using substances
- Fearing similar events, illness, death, the future
- Changing appetite and sleep patterns
- Experiencing physical complaints or changes
- Declining academics, refusing to go to school

## Application

How might this look in my professional practice?

The objective of this training is to:

## Recognize age-appropriate grief reactions in your students.

Below is you will see a series of common emotional and behavioral responses to death. Identify each reaction as common for preschoolers (age 3-5), younger school-age children (ages 6-9), middle-school children (ages 9-12), or early teens and adolescents (ages 13-18).

1. Experiencing depression, having suicidal thoughts.

- a) Preschoolers (age 3-5)
- b) Younger school-age children (ages 6-9)
- c) Middle-school children (ages 9-12)
- d) Early teens and adolescents (ages 13-18)

Correct Answer: d) Early teens and adolescents (ages 13-18)

2. Regressing to earlier behavior (e.g., bedwetting, thumb sucking).

- a) Preschoolers (age 3-5)
- b) Younger school-age children (ages 6-9)
- c) Middle-school children (ages 9-12)
- d) Early teens and adolescents (ages 13-18)

Correct Answer: a) Preschoolers (age 3-5)

3. Having physical complaints (e.g., stomachaches, headaches).

- a) Preschoolers (age 3-5)
- b) Younger school-age children (ages 6-9)
- c) Middle-school children (ages 9-12)
- d) Early teens and adolescents (ages 13-18)

Correct Answer: b) Younger school-age children (ages 6-9)

4. Fearing separation, being alone, or experiencing recurring events.

- a) Preschoolers (age 3-5)
- b) Younger school-age children (ages 6-9)
- c) Middle-school children (ages 9-12)
- d) Early teens and adolescents (ages 13-18)

Correct Answer: b) Younger school-age children (ages 6-9)

5. Acting aggressively, irritably, bullying.

- a) Preschoolers (age 3-5)
- b) Younger school-age children (ages 6-9)
- c) Middle-school children (ages 9-12)
- d) Early teens and adolescents (ages 13-18)

Correct Answer: c) Middle-school children (ages 9-12)

6. Throwing tantrums, having irritable outbursts.

- a) Preschoolers (age 3-5)
- b) Younger school-age children (ages 6-9)
- c) Middle-school children (ages 9-12)
- d) Early teens and adolescents (ages 13-18)

Correct Answer: a) Preschoolers (age 3-5)

7. Acting out (engaging in risky, antisocial, or illegal behavior).

- a) Preschoolers (age 3-5)
- b) Younger school-age children (ages 6-9)
- c) Middle-school children (ages 9-12)
- d) Early teens and adolescents (ages 13-18)

Correct Answer: d) Early teens and adolescents (ages 13-18)

8. Expressing “hysterical” concerns and need to help.

- a) Preschoolers (age 3-5)
- b) Younger school-age children (ages 6-9)
- c) Middle-school children (ages 9-12)
- d) Early teens and adolescents (ages 13-18)

Correct Answer: c) Middle-school children (ages 9-12)

## Implementation

**How can I effectively implement this content in my professional practice?**

Please review the considerations below regarding potential implementation strategies, barriers to implementation, and collaboration strategies related to this content. This will help you coordinate the next steps as you begin to incorporate the information presented in this training into your professional practice.

**This information can also be found on a handout that you will be able to download at the end of this training.**

## Implementation Strategies

- Train in advance, and continue to remind, all school personnel of signs to watch for related to grief.
- Ongoing training for cognitive behavior therapy techniques, for school psychologists and counselors, that are brief and manualized may be helpful for a variety of student needs and prepare your team for dealing with a death from suicide.

## Overcoming Barriers to Implementation

- Lack of training and awareness may result in unintended, yet harmful, consequences. Assumptions that students “should” or “should not” be experiencing certain effects can result in students not getting the attention and support that they need.
- All members of the school faculty should be aware of the procedures for referring students in need both in the immediate and longer-term aftermath of a death by suicide.

## Collaboration Strategies

- Provide avenues for discussion and consultation for all school personnel so that they can get assistance when faced with students at increased risk.

## Resources

**Are there any resources available to help me implement this content?**

Click on the link below to download a tool that you can use to implement this content in your professional practice.

<https://documentcloud.adobe.com/link/track?uri=urn:aaid:scds:US:bd1067f0-2fad-4e29-ad0f-c55858d3a3ab>

## Feedback

### How can I help improve this training?

The objective of this training was to increase your confidence in your ability to:

**Recognize age-appropriate grief reactions in your students.**

Answer the questions in the link below to let us know how well this training increased your confidence in your ability to accomplish this objective. Once you have answered all of the questions, click the blue arrow button underneath to submit your responses.

[https://pennstate.qualtrics.com/jfe/form/SV\\_d771mLr9ZgW3kyx?modulenumber=suicide31](https://pennstate.qualtrics.com/jfe/form/SV_d771mLr9ZgW3kyx?modulenumber=suicide31)

Verify that you have completed each of the tasks below.

Answered all of the survey questions above. You may have to scroll to see all of the questions.  
Clicked the arrow underneath the last survey question to submit your responses.

## Additional Readings

### Where can I learn more about this content?

The following resources were used to create this training. If you would like more information about the information presented in this training, we encourage you to start here.

Lehman, D. H., LCSW, & Cozza, S. J., MD. (n.d.). The Families and Children of Fallen Military Service Members. Retrieved from [https://ke.army.mil/bordeninstitute/published\\_volumes/combat\\_operational/CB M-ch33-final.pdf](https://ke.army.mil/bordeninstitute/published_volumes/combat_operational/CB M-ch33-final.pdf)

## Thank You!

Thank you for taking the time to complete this training. If you have any questions or comments, please email us at [schoolresources@psu.edu](mailto:schoolresources@psu.edu).

### Proceed to the next training

Click on the link below to move on to the next training titled *Psychological First Aid*. In this training, you will increase your confidence in your ability to reduce initial distress as a result of a traumatic event experienced by students or other school personnel.

[https://learning.militaryfamilies.psu.edu/school-resources/modules/suicide\\_32-psychological-first-aid\\_201022/](https://learning.militaryfamilies.psu.edu/school-resources/modules/suicide_32-psychological-first-aid_201022/)

### Return to the module directory

Click on this button to return to the module directory.

<https://schoolresources.militaryfamilies.psu.edu/modules/>

