

## PRACTICE BRIEFS



# Grief and Loss Counseling for Children and Adolescents

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## Overview

Children and adolescents are disenfranchised grievers whose experiences are often misunderstood or invalidated by the adults in their lives. The COVID-19 pandemic brought more death exposure and complications to this young population as well. Counselors should be equipped with knowledge of diverse grief reactions, cultural competence to address the intersectionality of a youth's identities and their grief experiences, a variety of assessment tools, developmentally appropriate intervention strategies, and advocacy recommendations to support their young clients.

## Prevalence

Approximately 6.4 million, or 1 in 11, children and adolescents in the United States will experience the death of a parent or sibling before the age of 18 (Childhood Bereavement Estimation Model [CBEM]; Judi's House/JAG Institute, 2025). This estimate does not account for grandparents, extended family, caregivers, friends, and other relationships that may impact youth, which means the number of grieving children and adolescents is likely much higher. Though youth from all demographics may be impacted by death of a loved one, children from low-income families are more likely to be bereaved than children from higher income families. Moreover, with increased deaths during the COVID-19 pandemic, children of color experienced significantly higher parental bereavement than their White peers (Burns et al., 2023). Pandemic-related deaths posed unique challenges that may have exacerbated the grief experience such as multiple losses, separation from loved ones before death, disrupted grief rituals like funerals, and lack of access to mental health support (Harrop et al., 2022; Jordan et al., 2022).

Manifestations of grief can differ depending on the age and developmental level of youth. Younger children may feel a sense of responsibility for their loved one's death or worry that others in their lives may die as well (Chandran et al., 2025). Adolescents may turn to their friends for support as opposed to their parents (LaFreniere & Cain, 2015). There may also be some role confusion as adolescents may take on a more parentified role to support their caregiver who may also be grieving. Grief can also disrupt academic functioning due to difficulty concentrating (Oosterhoff et al., 2018) or even manifest somatically (e.g., stomachaches, headaches, fatigue; Chandran et al., 2025). Moreover, youth take their cues from their primary caregiver, so how the caregiver copes with loss can have a profound impact on the youth's grief (Alvis et al., 2022).

Bereaved children and adolescents often experience disenfranchisement across multiple dimensions because

- the relationship is not recognized (e.g., friends, family outside family of origin),

- the loss is not considered significant (e.g., pet loss); and
- the griever, mainly younger children or those with developmental delays, are viewed as incapable of grieving (Doka, 2017).

Chandran et al. (2025) noted several myths about grief in children including that they are too young to understand death, that they move on from their grief easily, and that they do not grieve as intensely as adults. Due to their experience of grief being marginalized, children and adolescents are frequently disenfranchised. This disenfranchisement can lead to internalization and stigmatization of grief, which can inhibit the healing process. Youth might also anticipate that adults will not respond to their grief in helpful ways.

As counselors work with this population, it is important to validate each youth's grief experience as it may be dismissed by other adults. Counselors should be prepared to work with children and adolescents on primary loss and aid in adjusting to secondary losses. Secondary losses, which are a result of the primary loss, can include moving to a new home or school, loss of lifestyle due to reduction in income, or loss of friends, and may be especially painful for youth. Additionally, counselors should recognize that grief and grieving are not limited to death experiences and should listen for other types of primary loss that may elicit a grief response such as divorce, incarceration, pet loss, etc. (Chandran et al., 2025; Doka, 2017). Providing support to both the youth and family in the aftermath of the loss can help with adjustment and lead to positive outcomes for all (Alvis et al., 2022).

## Assessment Strategies

Children's and adolescents' developing minds and bodies pose a complicated dynamic to the grieving process. Assessment plays an important role in understanding these dynamics. The identification and assessment process are crucial to understanding the impacts of grief on young clients' functioning. Locating and choosing the appropriate assessment tools can assist counselors in effectively aiding their client in getting the necessary and appropriate individualized treatment. A proper identification method can also aid counselors in better understanding youth bereavement (Zhang et al., 2025).

In a systematic review of the grief instruments available for children and adolescents, Zhang et al. (2025) found 24 different instruments developed between 1987 and 2022. The different measurement tools can be grouped into three categories including general symptom grief scales, instruments measuring maladaptive grief reactions, and specialized grief scales. Although these measures may be helpful tools, providers should be aware that evidence for their validity is still emerging and therefore may be incomplete.

There are various measures that may be helpful in identifying child and adolescent bereavement. One such assessment is the persistent complex bereavement disorder (PCBD) checklist for youth (Layne et al., 2015). This checklist is a clinical tool designed to help identify prolonged and impairing grief responses in youth following the loss of a loved one. It is structured using the diagnostic criteria for PCBD as outlined in the American Psychological Association's (2013) *Diagnostic and Statistical Manual of Mental Disorders* (5th ed., *DSM-5*) and adapted to be developmentally appropriate for younger populations. Another identification tool is the bereavement risk assessment tool (BRAT; Victoria Hospice Society, 2008), which can be adapted for use with young clients and may be used to assess youth that may be at risk for significant impairment after the loss of a loved one.

In working with youth experiencing grief, there are various ways to approach assessment and identification. Counselors should consider the client's developmental capabilities when determining the form of assessment that will produce the most internally valid result. Probing the client to first determine what they know about death and bereavement would be an appropriate place to begin this process. With

youth, the clinician may need to consider what the client understands about the permanence involved in death. The behavioral signs that youth display can also be a glimpse into better understanding their level of grief. In the behavioral health field, counselors understand that when youth are unable to communicate their thoughts and feelings, their behaviors do it for them. As such, it is important to consider the behaviors of a young person and the functions of those behaviors.

Another aspect of assessing a young person is gathering the perspectives of the caregiver(s) or trusted adults in that client's life. These individuals can offer additional information regarding the state of the youth and the degree to which their grief impacts their functioning. Consulting with caregiver(s) about their child's grief can also offer valuable insight into family functioning and adaptation to the loss. Because caregiver adjustment to loss can impact the youth's adaptation to the loss (Alvis et al., 2022), this can also help the counselor determine if referrals for individual counseling for the caregiver(s) or family counseling are appropriate.

## **Treatment Approaches**

Children and adolescents may grieve differently than adults, and it is important for counselors to modify their therapeutic approach to fit each client's unique needs. Children engage with play to make sense of their world, so utilizing creative interventions (e.g., art, music, movement) can assist with processing their grief experiences and emotions (Hill & Lineweaver, 2016). Additionally, incorporating a trauma-informed approach that considers intersectionality of youth who are experiencing grief is crucial. Cognitive behavior therapy (CBT) and trauma-focused CBT are evidence-based counseling approaches that can be used for bereavement in children and adolescents (Djelantik & Spuij, 2025). CBT demonstrates treatment effectiveness for youth experiencing grief, including prolonged grief, by decreasing symptoms associated with prolonged grief and co-occurring mental health issues such as trauma-related symptoms, depressive symptoms, suicidality, and substance use (Djelantik & Spuij, 2025; Thielemann et al., 2022).

Counselors may need to modify their approach when working with children who are experiencing prolonged grief (Boelen et al., 2021). Grief-Help is an evidenced-based manualized treatment designed for children ages 8 to 18 with prolonged grief disorder (Boelen et al., 2021; Djelantik & Spuij, 2025). Thorough assessment is completed in the beginning of treatment and throughout as needed. Common interventions used in Grief-Help include writing, Socratic questioning, exposure (in vivo and imaginal), behavioral experiments, and psychoeducation on grief. Boelen et al. (2021) note the four primary tasks of psychoeducation as:

- confronting the pain and reality of the loss;
- increasing overall confidence;
- prioritizing personal problems over the problems of others; and
- resuming previous activities of enjoyment.

The primary goals of Grief-Help are to replace unhelpful thoughts and coping skills with helpful thoughts and coping skills. Relapse prevention plans and review of skills are also included with this manualized treatment, typically toward the closure of therapy.

Counselors can also consider combining treatment approaches for increased effectiveness. As demonstrated in a case study, a client experienced a reduction in nightmares and intrusive memories associated with prolonged grief after the completion of eye-movement desensitization and reprocessing (EMDR; Djelantik & Spuij, 2025). However, additional clinical symptoms including depression, avoidance, and

hypervigilance remained. As a result, the Grief-Help protocol was used, which clinically decreased grief and depression symptoms.

Counselors need to choose therapeutic interventions that are culturally relevant when working with children and their families (Gold, 2020). They must consider their clients' spiritual, religious, and culturally diverse mourning traditions. Moreover, counselors should ensure that they engage in broaching and honor the ways in which their clients view and experience bereavement in culturally specific ways. To name a few examples, Christians tend to incorporate a visitation or a "viewing" prior to the funeral; Hindus tend to view death as a change in the journey of one's *atman*, or soul; Buddhists tend to believe in reincarnation; Jewish people tend to prioritize respect of the person who died; and Muslims tend to require a specific time period of mourning (Gold, 2020). This is not an exhaustive list and there are likely within-group differences. Counselors should refrain from assuming the mourning practices of their clients even if they are practitioners of a specific religious affiliation. Instead, they should respectfully broach with compassionate curiosity, letting the client teach the counselor about their mourning practices and rituals. Additionally, specific populations may be more likely to experience prolonged grief, such as refugees, due to factors associated with the loss (Hilberdink et al., 2023).

Children and adolescents with neurodevelopmental conditions or intellectual disabilities may grieve differently than their peers. Counselors must carefully choose interventions that are consistent with neurodevelopmental needs (Mair et al., 2024). When working with children with neurodevelopmental conditions, counselors should consider including the caregiver(s) in the therapeutic process and provide them with psychoeducation about how to include their children in death and grieving rituals. Incorporating stories and video games that include topics of grief and loss have been shown to enhance emotional identification, empathy, and processing of grief through the character's experiences (Bonin et al., 2024).

## Cultural and Ethical Considerations

An emic (insider) approach that emphasizes decolonized strategies of healing is central to grief support. To practice ethically, counselors should have an in-depth understanding of developmental grief reactions and appropriate ways to support children through the grieving process. Historically, myths have persisted surrounding the capacity of children to grieve, which have decreased access to responsive services (Chandran et al., 2025). These myths and lack of acknowledgment of normalized grief reactions can ignore a child's experience and potentially lead to misdiagnosing behavioral issues that are more likely symptoms or behaviors rooted in grief and trauma.

Furthermore, the differing grief reactions of neurodivergent children is an additional consideration to make. For example, their outward emotional expression could either be more muted or, conversely, more extreme than expected, and they may also demonstrate their grief in more physical or behavioral ways (Children's Bereavement Center, 2023). Recognizing the unique grieving process experienced at different developmental levels is the first step in improving access to services. This education could further include the many types of grief experienced by young people including non-death related loss, loss of community, loss of safety, loss of relationships, and more.

In addition to the unique developmental needs of children and young people, consideration of their intersectional identities is paramount in addressing disparities in grief support. The prevalence of bereavement in children from some racial and ethnic minority groups is oftentimes higher due to the proportion of deaths in these communities (Burns et al., 2023; Judi's House/JAG Institute, 2025). For instance, bereavement rates in African American children are higher than in children from other racial groups (Cunningham et al., 2017). Youth with marginalized identities may experience compounded grief

from other collective or individual losses as well. Racial or ethnic minorities may experience collective grief related to instances of racism, mass deportation, or other mistreatments of minoritized individuals. LGBTQ+ youth may experience collective grief for national policy concerns and compounded individual grief for personal losses due to their identities. Recognizing the higher rates of loss and grief experiences within these populations and taking a culturally informed approach to understanding unique communal needs are crucial to supporting these youth.

## Advocacy

A culturally informed approach to grief support might include connecting with and supporting trusted leaders in different communities such as religious authorities, elders, or teachers. In working with these leaders, counselors can also gain understanding of how individuals from different backgrounds mourn and grieve in relation to their cultural traditions.

Counselors can advocate and educate on the local level by working within communities and providing resources. More broadly, they can become further involved in grief-support advocacy through organizations such as the National Alliance for Children's Grief (NACG), which provides resources for practitioners and resources for grief-support services across the United States including grief-support centers and camps. Additionally, counselors can advocate on local, state, and federal levels for funding and support to meet the unique needs of different grieving children. Multilevel advocacy across different systems and involving different identities is key to ensuring that the needs of all grieving children and adolescents are addressed.

Barriers to grief support for young people include lack of developmental understanding, lack of culturally informed support, stigmas, or misunderstanding of loss (Griese et al., 2017). To adequately serve this population, increase knowledge, and reduce stigma, proper education and understanding of grief reactions must be prioritized. Counselors can educate clients and community members on normative grief reactions across developmental levels and provide psychoeducation to decrease shame around discussing death and loss.

Additional areas of advocacy include increasing access to services specifically geared toward supporting LGBTQ+ youth. Counselors must recognize the disproportionate way in which those in the queer and gender-expansive community are impacted by loss in both death and non-death related ways. Resources such as the Trevor Project provide further support. Grief services like support groups specifically for LGBTQ+ youth or inclusive community remembrance activities can provide culturally sensitive support for loss that is not traditionally recognized or acknowledged.

## Resources

- American Counseling Association Grief Counseling Best Practices: [https://www.counseling.org/docs/default-source/competencies/gcctf-grief-counseling-best-practices.pdf?sfvrsn=11f5bd0\\_1](https://www.counseling.org/docs/default-source/competencies/gcctf-grief-counseling-best-practices.pdf?sfvrsn=11f5bd0_1)
- Center for Loss and Life Transition: <https://www.centerforloss.com/>
- Children's Grief Awareness Day: <https://www.childrensgriefawarenessday.org/cgad2/index.shtml>
- Comfort Zone Camp: <https://comfortzonecamp.org/>
- Judi's House/JAG Institute for Grieving Children and Families: <https://judishouse.org/>
- National Alliance for Children's Grief: <https://nacg.org/>
- The National Center for School Crisis and Bereavement: <https://www.schoolcrisiscenter.org/>
- The National Child Traumatic Stress Network: <https://www.nctsn.org/>

- *After a suicide: A toolkit for schools*, 2nd ed., American Foundation for Suicide Prevention and Suicide Prevention Resource Center: <https://www.sprc.org/resources-programs/after-suicide-tool-kit-schools>
- Dougy Center the National Grief Center for Children and Families: <https://www.dougy.org/>
- Grief Resources, Weill Cornell Medicine Center for Research on End-of-Life Care: <https://endoflife.weill.cornell.edu/grief-resources>

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