

## DEVELOPMENTAL CONSIDERATIONS

Children have varying capacities, both emotionally and intellectually, to comprehend, understand, and integrate the concepts of loss in general as well as with death and its physical finality. The following are meant to be used as a guideline and need to take into consideration the individual nature and also individual life experience of the child.

### Needs of Children at all age levels:

- Patience, love, and permission to grieve.
- Age appropriate ways to release anger and pain.
- Honest, clear information and direct answers to questions.
- Support and help in finding ways to go on with life.
- In the interest of establishing safety at all age levels: firm, clear, fair limits and follow through with consequences.
- Return to normal routines and schedules as soon as possible.
- Avoid overprotecting the child-help them take reasonable risks with support in the interest of reclaiming life.
- Help the child to resume their place as a contributing member of the family as soon as possible. (Chores, responsibilities, etc.) This helps the child to move out of the victim mode.

### The Preschool Child (4 years and younger)

- May not comprehend that physical death is final and may persist for some time in believing and insisting that a person who died is coming back.
- The burn-injured child may think that their scars will one day disappear and lost fingers, ears etc. will magically re-grow. She/he may feel angry and disappointed when this does not happen.
- May regress in toilet training, develop bed wetting, clinging behaviors, whining, may resume thumb sucking or want bottle again, etc.
- Separation from or loss of primary attachment figures profoundly affects infants and toddlers. Allowing parents and primary caregivers to stay with the child while he/she is hospitalized in order to prevent damage to attachment cannot be overstated.
- Holding, rocking and offering physical as well as verbal reassurance that the child will be taken care of helps the small child to reestablish a sense of security in the world. The use of touch with children of all ages after burn injury provides an essential physical connection and reassurance regarding attachment.

### The School Age Child (5-12 years):

- Child has an increasing capacity to grasp reality of the permanence of loss as well as physical death.
- May have misconceptions about the cause of the trauma, loss, or death, (may have a distorted view about their role in these and often blame themselves in some manner).
- It is important to determine the child's perception relevant to the cause of the trauma and loss and to correct and clarify misconceptions.
- May have difficulty focusing and concentrating in school.

### **The Adolescent (13-18 years):**

- Is able to accept the finality of loss and also physical death as a biological fact.
- Grief may be masked by: substance abuse, truancy, social isolation and withdrawal from family and/or peer group, impulsivity, sexual acting out and promiscuity, reckless, risk-taking or self-defeating behaviors.
- Burn-injured adolescents are particularly vulnerable to changes in appearance and or loss of function, and issues of low self-esteem related to these. Avoidance of social activities can further isolate and alienate the teen from peers. Involvement in groups, teen camps, retreats, and burn camps are essential.
- Grief may also be masked in over achieving for underachieving. The child who is trapped in perfectionism demands as much concern as the child who is apathetic, cynical, and underachieving.
- Mood swings are common in adolescence and in all likelihood this will be intensified by the loss. The adolescent may also develop low self-esteem.
- Often adolescents seek emotional support more readily from peers than adults and age-appropriate support groups can be very helpful.
- May have difficulty focusing and concentrating on studies or may become lost in intellectual pursuits such as reading, and computer related activities

Megan Bronson RN, MSN, CS., *Helping Children Heal the Effects of Loss and Trauma After Burn Injury, A guide for parents and caregivers, the Phoenix Society for Burn Survivors, 2003, pp. 8-10.*