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Counseling elementary students through bereavement

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Counseling elementary students through bereavement

Abstract

One of the latest controversies in American society is whether we have desensitized our children to the tragedy of death by our everyday display of death on the news and in other media. Some believe that television violence is so routine that it barely makes an impact on children and may also make them less sensitive to the suffering of others (Jenish, 1992; Leo, 1992). Researchers on the experience of death in American culture may differ with this opinion. Perhaps Americans are not desensitized to death, but we are possibly in denial that death is a universal experience that affects us all. Death is one thing humans are powerless to control; thus, most people who feel this lack of control would rather deny the power of death than face its reality (Smilansky, 1987). Rather than trying to discuss this uncomfortable subject with children, adults often ignore the fact that children are aware of death, which leaves children trying to cope alone (Bertoia & Allan, 1988). Unfortunately, denial is not a realistic way to approach the topic of death even with early elementary-school children. One out of seven children will lose a parent to death before the age of ten (Lord, 1990). If the death of a parent does not occur, it is still important for children to understand death and how to cope with the death of relatives, neighbors, and pets that may occur.

COUNSELING ELEMENTARY STUDENTS THROUGH BEREAVEMENT

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One of the latest controversies in American society is whether we have desensitized our children to the tragedy of death by our everyday display of death on the news and in other media. Some believe that television violence is so routine that it barely makes an impact on children and may also make them less sensitive to the suffering of others (Jenish, 1992; Leo, 1992). Researchers on the experience of death in American culture may differ with this opinion. Perhaps Americans are not desensitized to death, but we are possibly in denial that death is a universal experience that affects us all. Death is one thing humans are powerless to control; thus, most people who feel this lack of control would rather deny the power of death than face its reality (Smilansky, 1987). Rather than trying to discuss this uncomfortable subject with children, adults often ignore the fact that children are aware of death, which leaves children trying to cope alone (Bertoia & Allan, 1988). Unfortunately, denial is not a realistic way to approach the topic of death even with early elementary school children. One out of seven children will lose a parent to death before the age of ten (Lord, 1990). If the death of a parent does not occur, it is still important for children to understand death and how to cope with the death of relatives, neighbors, and pets that may occur.

Because society has not prepared adults to help their children cope with death and grieving, school personnel must frequently help children with this issue. School counselors often take the parental role in helping a child cope with death if a support system is not available or, in the case of one parent dying, if the remaining parent is too distraught (Lord, 1990; Crase & Crase, 1989). For counselors to effectively handle each unique experience, they must acquire several skills. They must learn to recognize the cognitive understanding of the child and acceptable reactions to death, along with assessing and supporting the emotional state and concerns of the child, and intervening to give support, education and sympathy to the bereaved child (Glass, 1991; Lord, 1990). By taking children past the American tendency to deny the existence of death, a child can begin coming to terms with the death and resuming his or her life (Cunningham & Hare, 1989).

Developmental Conceptions of Death for K-6 Students

Cognitive Understanding

To begin the important task of counseling a bereaved elementary student, the counselor needs to know what the average child comprehends about death from ages 4-12. Comprehension starts early with most understanding of death taking place from ages 4-6 (Smilansky, 1987). It is important for someone with a close relationship with a child to honestly explain

death at the child's developmental level of understanding.

Around ages 4-5, a child may feel that death is not final, but a temporary state like sleep (Smilansky, 1987). He or she may also believe that this reversible state only happens to others and is not to be feared for self (Bertoia & Allan, 1988).

When a child reaches the ages of 6-10, he or she recognizes that death is final, but may not accept that it happens to young people. Toward the end of this period, a child usually begins to accept the universality of death and that she or he will die some day, too. A child age 6-10 also tends to personify death as a skeleton or monster, which makes the child more fearful of death (Bertoia & Allan; Smilansky, 1987).

The cognitive understanding of death for children heightens during the age range of ten to twelve. At this point a child reaches an understanding similar to an adult's. The child sees death as a " . . . universal phenomena that follows certain laws which are not in our power to control" (Smilansky, 1987, p. 33). As inevitability is accepted, counselors may see a child reaching a higher level of intellectual ability which also gives the child the emotional security to accept the death (Heath, 1990).

Despite the cognitive pattern of understanding seen in most children, the degree of understanding also depends on the individual's cognitive abilities and previous experiences with death (Bertoia & Allan, 1988; Smilansky, 1987). Getting to know the child and checking with parents and teachers will help the counselor to

find out where the child is in her or his understanding of death.

Reactions to Death

In American culture, the accepted reactions to death for adults are crying and a melancholy mood for several days. The grieving process for a bereaved child follows no such societal guidelines. The reaction of a child depends on several factors: relationship to the deceased, child's cognitive level, past experiences, family support, child's personality, nature of the death, and the response of others (Cruse & Cruse, 1989).

If the deceased was a close friend or relative of the child or if the death was unexpected, the child's reaction would usually be more severe than if it were a stranger who died. A child's cognitive level will also help determine what the child has understood about the death, which also affects his or her reaction. If the family has had past experiences with a loved one dying, the child may be more prepared for the rituals of death. The same is true if there is a strong family support system to explain the death to the child. Lastly, the child's personality and the response of others near him or her will determine if the child reacts openly or has a tendency to hold grief in and act it out in other ways.

Many of the behaviors that are symptoms of other problems or disorders could be the result of grief, so it is helpful to

keep behaviors in the context of the child's recent experience. For a preschool age child, the reaction might include regressive behavior like thumb-sucking and bedwetting (Cook & Dworkin, 1992). Physically, an elementary student may experience headaches, stomachaches, loss of appetite and insomnia (Lord, 1990; Cook & Dworkin, 1992). Other common reactions that may be observed at home or in school are angry outbursts, distractability, negativism and deviant behavior (Lord, 1990; Cook & Dworkin, 1992). Because our society often squelches the discussion of death, the pain a child feels inside often erupts in these unexpected ways. A counselor needs to look for more than tears and a sad face.

Sometimes a child's reaction to the death of a loved one is delayed. In the future, it may arise in behaviors we do not associate with grief, but are secondary symptoms. This can cause long-term problems for the child if no one is there to help her or him deal with it properly. Without the chance to come to terms with death, a child may experience depression, psychosomatic disorders, adjustment disorders, and conduct disorders (Cunningham & Hare, 1989). The child needs to take time when the death happens to begin grieving, then reorganize and resume life.

Assessment of the Bereaved Child

Common Patterns of Grieving

In 1969, Dr. Elizabeth Kubler-Ross brought comfort to many people by describing five stages that the grieving individual

typically experiences (Kubler-Ross, 1969). Counselors need to take the stages of denial, anger, bargaining, depression, and acceptance into consideration in their efforts to understand another person's grief.

Kubler-Ross described the denial stage as the initial reaction of people faced with death, but it is also seen later from time to time (1969). Those who are facing their own death or the death of a loved one need the chance " . . . to put this consideration away in order to pursue life" (Kubler-Ross, 1969, p. 39). The thought of death is initially hard for a child to cope with, so the child often puts away the idea for a while.

The second stage made known by Kubler-Ross is anger. Whether in the patient or a loved one's survivor, denial gives way to the realization "Oh yes, it is me [or my loved one], it was not a mistake" (Kubler-Ross, 1969, p. 50). The anger comes from the question "Why me?" At this time, the bereaved is hard to console and often displaces the anger on others. For example, a grieving child may show her or his anger toward the remaining parent.

According to Kubler-Ross, when people reach the third stage of bargaining, they have decided that anger does not get them what they want. A grieving child who is in the bargaining stage may hope to postpone or reverse the death of a loved one by offering good behavior or making a promise to never ask for

more (Kubler-Ross, 1969). Bargaining for the return of the deceased to a healthy life may also accompany a feeling of guilt over the death.

The fourth stage is depression. When the inevitable truth looms larger than ever, a bereaved child may become depressed with its reality. Rather than just trying to cheer up the child, a counselor or parent can help him or her face the loss. "If she or he is allowed to express his or her sorrow, she or he will find a final acceptance much easier" (Kubler-Ross, 1969, p. 87).

Acceptance, the final stage, means the patient or loved one is no longer angry or depressed. He or she has accepted the loss, but feels little emotion anymore. Time may be spent on looking ahead to how life will be carried on without the deceased.

Often when people discuss how the bereaved is coping with the death of a loved one, we hear statements like, "Oh, I believe he is still in denial" or "She has finally accepted that Dad is gone." People have interpreted the stages as a gauge for determining when someone will be done grieving (Wolfelt, 1989b). Kubler-Ross did not intend for these stages to be seen as sequential events that everyone experiences in a rigid order. But as she wished, her stages have helped us to recognize the wide range of emotions as a normal reaction to loss.

Some find the Kubler-Ross stages helpful for determining when to discuss issues of death with a child. In her study with

bereaved Israeli children, Smilansky (1987) found it important to discuss the irreversibility of death during the denial stage. Adults need to help the child understand that the deceased is gone forever, so the child can begin reorganizing his or her life (Smilansky, 1987). Similarly, during the anger stage, Smilansky (1987) would explain why the parent died in order to help alleviate the child's guilt or anger at the parent leaving. By explaining the cause of the parent's death, the counselor tries to encourage the child to eliminate unrealistic reactions, which helps him or her to establish new behaviors. To assist the child's level of acceptance, the adult should discuss the inevitability of death for all of us. Helping the child to see death as a universal and natural process may introduce the idea that he or she is not alone in his or her grief.

Other grief counselors hesitate to think in stages when assessing a child's bereavement needs (Wolfelt, 1989c; Children and death, 1988). They suggest that grief follows more closely the pattern of a roller coaster - - - with times of anger, sadness, denial, depression, and contentment (Children and death, 1988). Actually, grief may continue in varying intensity for years, so a timetable and sequential steps are unsympathetic restraints (Wolfelt, 1989c). Counselors can help children who feel societal pressure to get over a death by assuring them that grieving is very personal and encouraging them to take their grieving process

at their own pace. Just as people mourn for different periods of time and with different intensity, people also mourn with different behaviors. As counselors assess the bereaved child, the following attitude is helpful: "Teach me about your grief and I will be with you. As you teach me I will follow the lead you provide me and attempt to be a stabilizing and empathetic presence" (Wolfelt, 1989b, p. 26).

Determining Pertinent Issues

A counselor should also spend time assessing what issues are pertinent for the individual child. Children often have difficulty verbalizing and specifying important issues, so a counselor needs to focus on listening, giving open-ended chances to discuss, and hearing the whole story before intervening (Bertoia & Allan, 1988). Some issues are common when working with certain age levels. A preschool child is often concerned about who will take care of his or her basic needs now that the loved one has died (Cook & Dworkin, 1992). Anxiety sometimes develops if the child feels responsible for the death, possibly because of earlier arguments or angry thoughts about the deceased (Bertoia & Allan, 1988). Because the finality of death has not sunk in, a preschool child will also wonder how the deceased will eat or breathe (Bertoia & Allan, 1988). Accepting the child's feelings and giving honest answers will help the child settle these pertinent issues.

For an elementary student, age 6-10, details on the funeral and societal rituals are important. Their cognitive level warrants questions on the concrete details of what happens to the body physically, too (Bertoia & Allan, 1988). As mentioned earlier, a child may begin to personify death at this age, so another issue is the fear of the deceased returning or watching them in their sleep (Bertoia & Allan, 1988). To help a child overcome the fear of sleep or of the deceased watching, a counselor could direct the answer toward what the child believes about the afterlife and the likelihood of the deceased returning. The counselor may want to discuss with the parent how she or he would like this issue addressed. A child, age 6-10, like people of all ages, are initially concerned that an angry thought or wish may have caused the death (Glass, 1991). The counselor can encourage the child to share these various feelings of anger and guilt and reassure him or her about not being the cause of the death.

When a child reaches the age of ten and into adolescence, the pertinent issues center around accepting his or her own immortality. A child may start to understand death as irreversible and inevitable, but still find it hard to imagine his or her own death (Glass, 1991). The anxiety that an older child feels also may lead to anger, depression, or guilt (Glass, 1991). "Older children can picture the future effects of the loss" (Glass, 1991, p. 141). But a young adolescent may not feel comfortable

discussing grief with an adult. This stage of development leaves the child aged ten to fourteen in between childhood and adulthood, so a counselor who provides an outlet to discuss pertinent issues may help the child open up.

A final way to assess the issues pertinent to the bereaved child is to ask questions. The counselor can assess whether the child had the opportunity to participate in grief rituals. Sometimes the child did not get the chance to ask questions or maybe the answers were confusing. Often the counselor can respond to these questions or help the child with ways to approach his or her parents with concerns. When the child tires of answering questions, the counselor can turn to teachers or parents about the child's past experiences with death and his or her current level of functioning at home and school (Cook & Dworkin, 1992). By creating an atmosphere of nonjudgment and security, the counselor can assess a child's needs and plan interventions to specifically address the individual's experience with death and bereavement.

Effective Interventions with Bereaved Children

Acceptance of Grief and Emotion

Part of the emotional support that a counselor can give is to educate the child about normal feelings associated with the death of a loved one, the natural process of life and death, and the universality of death (Glass, 1991). The counselor would not want to lecture on the grieving process, but listen

to the child's concerns and address these issues as they arise.

Children will have learned from society that they should not express grief, especially for long periods of time, so some reassurance of its acceptability in the counselor's presence may be necessary. Tears in particular are one part of grieving that a counselor can reframe as a healthy expression rather than a sign of weakness. Adults often say things like "Tears won't bring him back" because they do not like to see loved ones weakened by the confrontation with death. Yet crying is a natural way of relieving tension and communicating our emotions (Wolfelt, 1992b). The counselor can model by words and actions that tears are appropriate and necessary for reconciliation.

It is also important for a child to learn to accept his or her negative feelings, like guilt and anger. A child needs to feel safe expressing himself or herself, but often a counselor will need to point out a nonverbal cue showing anger or guilt to initiate discussion. The counselor should reflect the conflict the child may be feeling inside that she or he needs to resolve, such as sadness of the parent dying and anger that he or she left without coming to the school concert (Cook & Dworkin, 1992; Glass, 1991). By accepting these negative emotions, the counselor can reassure the child that these feelings are normal and part of the process of coping with the loss of a loved one.

Along with helping the child accept the reality of death and negative feelings it brings, a counselor can also help a child take a reprieve from mourning. The natural reaction of a child who hears of the death of a loved one is often to go off and play for awhile. This does not show insensitivity, but it is the child's way of coping and facing the grief at a rate she or he can handle (Wolfelt, 1989c). "Denial in the sense of the mourner's need to temporarily block out the reality of the death happens because the pain at that point is overwhelming the person's capacity to cope" (Wolfelt, 1989a, p. 11). When adults criticize this practice, they give children the message that play and happiness are not acceptable after a loved one dies. The counselor can begin to refute this belief by giving the child permission to take a break from grief and to spend time having fun with friends and meeting his or her physical needs to run and play (Glass, 1991). The heart takes time to catch up with the head's understanding of the way his or her life has changed (Wolfelt, 1989a).

Individual Counseling Techniques

Discussing the death of a loved one with a bereaved child is certainly ideal, but often with a lower elementary student, verbal skills are not as strong as his or her play and drawing abilities. In these cases, following the child's strength is the best way to reach the child's feelings.

Art therapy is one way to find out what the child is feeling and understanding about his or her loss. Art gives children a creative way to vent feelings. If the child has difficulty describing the death or the funeral, drawing can help show his or her point of view and also gives the counselor areas to probe for more information (Cook & Dworkin, 1992). Drawing can also bring up issues in a nonthreatening way because the child does not have to verbalize the feeling alone; the picture will help.

Another nondirective method for helping a child express his or her grief is to use sand play. Vinturella and James (1987) used sand play to help a child go back through the steps of his father's death, from the day it happened to life afterwards. The child manipulated toy people in a sand environment in an attempt to describe his own experience and feelings. The counselor reflected the child's descriptions and feelings until he felt comfortable talking directly about his own experience.

Using puppets in a play therapy session is another method for communicating with a child at his or her developmental level. Carter (1987) used puppets to help a child cope with witnessing his father's murder. The puppets helped the boy to test what would be acceptable emotions and behaviors in the real world. Going through the events and emotions indirectly also helped the boy to relieve the pressure and anxiety he was feeling. The puppets served as a manipulative to start his catharting until he was

ready to work on his grief and anger directly.

Along with puppets, a child is usually more comfortable discussing problems in the atmosphere of familiar activities like games and storytelling. Games help a child to relax his or her defenses and express feelings as just part of the game (Cook & Dworkin, 1992). Rules can be flexible to follow the child's lead should he or she want to discuss more. The child's reflections are more important than finishing the game. Another fun way for a child to share his or her feelings is through storytelling or bibliotherapy. A counselor can read a story about a bereaved child so the child can compare experiences and see death's universality. Storytelling can also be a chance for the child to imprint his or her feelings and viewpoints onto an imaginary character and play out his or her experiences with bereavement (Cook & Dworkin, 1992). Either by directly or indirectly exploring the feelings associated with grief, an elementary student begins the process of coping with his or her individual experience and going on with life.

Group Counseling

For students who have difficulty discussing the death of a loved one individually with a counselor, group counseling may be the answer. The benefits of a grief group are similar to the benefits of any situational group, like divorce, substance abuse, or moving. Seeing peers in a similar situation helps a child

feel less alone and alienated. The child also gains strength by seeing others coping with their grief. Another benefit is that sometimes a child feels she or he must not grieve in front of a parent, but must be strong and not upsetting. Being in a group with other students gives the child the chance to be a child and not feel or act as an adult. A last reason to use grief groups is that a child naturally turns to peers when she or he needs emotional support, and working together on grief can help build even greater understanding between peers (Cook & Dworkin, 1992).

When setting up a group for bereaved elementary students, the counselor should follow certain guidelines for helping the group succeed. One important guideline is choosing students for the group who are all past the initial shock of a loved one dying. The issues pertinent to a child whose parent died a week ago will be much different from one whose parent died two years ago, so a counselor should keep in mind how recently the loss happened. The counselor should also keep age differences between students less than three years, unless siblings would benefit from meeting together. For lower elementary students, it is also helpful for the counselor to plan activities for each session that can later open up into free discussion. For a group who has had little chance of expressing their bereavement, the counselor can help by modeling the acceptance of expressing feelings, emotions, and

and needs. Once the children become comfortable with each other, the leader can take a secondary position and allow the children to question each other about their experiences with death.

Suggestions for Parents

Explaining Death

Often when an elementary student needs support after experiencing a death, a parent may need support, too. Optimally, getting information to parents before a tragedy faces their family will help a family prepare for the universal experience of death. It is suggested that parents take the opportunities of a pet or public figure dying to explain to a child the nature of death (Smilansky, 1987). The child's ability to understand death will be easier when she or he is not personally involved with the deceased (Smilansky, 1987). The information provided to the child is easily regulated by listening to the child's questions and refraining from more details when the child seems satisfied or no longer is interested.

Some adults are uncomfortable with explaining such a sad occasion to a child, but children sincerely want to know about this cycle of life and death and deserve honest answers. The National Funeral Directors Association recommends telling a child immediately about the death of a loved one before she or he hears it from an impartial observer. Keeping it a secret will make the child suspicious in the future when a loved one

is late getting home or when family members seem upset about something. They also suggest answering questions honestly and simply according to what the child requests to know. Part of the details the child needs to know is what will happen next, such as funerals and burial rites (Children and death, 1988). The family can help the child prepare for the days ahead by keeping the child informed of the truth.

An important factor in telling the child the reality of death is to tell it in a concrete manner without euphemisms or metaphors. Hearing "Grandpa went away on a journey" will only make a child afraid of traveling and never returning home. Telling a child a half-truth only gives the child room to fill in the blanks with ideas that are usually worse than the truth (Wolfelt, 1989c). Another metaphor to avoid is that "Mother has gone to sleep" or the euphemism "God loved sister, so he took her to be with him." Both only create fear in a child that the same thing will happen to him or her.

Modeling Grief

Besides the educational role parents can play in helping their child cope with bereavement, they can also model appropriate emotional reactions to death. Often when one parent dies, a child feels she or he has to play a strong, parental role for the grieving parent. Parents need to watch for the "parentified child" and express concern about the grief this

child is going through as well (Cook & Dworkin, 1992). While some children take on the parent role, others hold in their grief. A lack of communication can make a child feel responsible for the sadness in the family (Wolfelt, 1992b). A child is often afraid to bring up his or her own grief for fear of making others feel worse. Parents can model that it is acceptable to cry and express grief, not only for them, but for the child to feel free to express grief, too.

Returning to a Routine

At the time of a death in a family, the grief seems to flood over all other concerns. As a parent, returning to normal routines can help a child see that life will continue its cycle, even after the loved one dies (Children and death, 1988). Part of this task can be done by the school as the child gets back into the routine of the school day, homework, and bedtime hours. Some variation may be seen in the child's eating and sleeping patterns, but keeping on the family's regular schedule will help regulate the child over time and give him or her a sense of security.

As the family follows the usual daily routine, the adults in the family should address the obvious missing presense of the deceased. The relationship with the deceased has changed, not ended (Children and death, 1988). Keeping momentos and sharing memories of the times together will help the child reorganize his or her life.

Conclusion

Helping children cope with bereavement is a skill often denied as necessary by American adults, but a school counselor can help by assisting students as they experience grief. Counseling can be done individually or in groups to help a child realize that the death of a loved one evokes many feelings and takes time to reconcile. A counselor can create an open and supportive atmosphere for a child to ask questions and then respond at the child's developmental level of understanding. Rapport and patience are what a child needs most to explore the issue of death. Grief is a universal experience, and counselors can assist parents and children as they reflect on what has passed and reorganize their lives for the future.

References

- Bertoia, J., & Allan, J. (1988). School management of the bereaved child. Elementary School Guidance and Counseling, 23, 30-38.
- Carter, S.R. (1987). Use of puppets to treat traumatic grief: A case study. Elementary School Guidance and Counseling, 21, 210-215.
- Children and death. (1988). Milwaukee, WI: National Funeral Directors Association, Inc.
- Cook, A.S., & Dworkin, D.S. (1992). Helping the bereaved. USA: Basic Books, Harper Collins.
- Cruse, D.R., & Cruse, D. (1989). Single-child families and death. Childhood Education, 65, 153-156.
- Cunningham, B., & Hare, J. (1989). Essential elements of a teacher in-service program on child bereavement. Elementary School Guidance and Counseling, 23, 175-182.
- Glass, J.C. (1991). Death, loss, and grief among middle school children: Implications for the school counselor. Elementary School Guidance and Counseling, 26, 139-148.
- Heath, C.P. (1990). Children and reactions to death. Handouts. Alex Thomas (Ed.), National Association of School Psychologists.
- Jenish, D. (1992). Prime-time violence. Maclean's, 105, 40-44.
- Kubler-Ross, E. (1969). On death and dying. New York: Macmillan.

- Leo, J. (1992). One poke over the line. U.S. News and World Report, 113, 34.
- Lord, J.H. (1990). Death at school: A guide for teachers, nurses, counselors, and administrators. Dallas, TX: Mothers Against Drunk Driving.
- Papenbrock, P.L., & Voss, R.F. (1988). Children's grief: How to help the child whose parent has died. Redmond, WA: Medic.
- Smilansky, S. (1987). On death: Helping children understand and cope. New York: Peter Lang.
- Vinturella, L., & James, R. (1987). Sand play: A therapeutic medium for children. Elementary Schol Guidance and Counseling, 21, 229-238.
- Wolfelt, A.D. (1989a). Denial of reality: There is a difference between the head and the heart. Thanatos, Sum 89, 11-12.
- Wolfelt, A.D. (1989b). Dispelling 5 common myths about grief. Thanatos, Fäll 89, 25-28.
- Wolfelt, A.D. (1989c). What bereaved children want adults to know about grief. Bereavement Magazine, Oct-Jan 1989-1990, 34-35.
- Wolfelt, A.D. (1992a). Ten common myths about children and grief - part I. Bereavement Magazine, Jan 92, 38-40.
- Wolfelt, A.D. (1992b). Ten common myths about children and grief - part II. Bereavement Magazine, Feb 92, 38-40.