

## Impact of Loss and Grief on Children's Mental Health



### ASSESSING LOSS AND GRIEF

**Assessing loss and grief experiences** is essential for youth in foster care, adoption or guardianship. The losses for these children are much more pervasive and complicated than most parents or clinicians understand.

*It's not just the loss of the birth parents, but the extended birth family...sibling separation and loss...the loss of non-biological caregivers...all of those foster parents, teachers, previous therapists, previous friends, coaches, that the child had formed connections with that typically are gone once the child is moved to their adoptive family.*

Dr. David Brodzinsky

For children adopted from other countries, there are even losses of sights, sounds, smells and language that are familiar and comforting.

### Ambiguous Loss & Disenfranchised Grief

These are two concepts introduced in **Lesson 1** that explain some barriers to resolving losses.

**Ambiguous losses** do not have finality – although children no longer live with past attachment figures, these people continue to exist. Often children have ambivalent feelings about the separation, including anger, sadness, guilt, and rejection.

**Disenfranchised grief** happens when the loss is not publicly acknowledged, mourned, or supported. Children often do not understand why the loss occurred or if they did something to cause it. Many of their behaviors may be symptoms of grief.



**Think of a loss** you or someone you have worked with experienced that is ambiguous and characterized by disenfranchised grief. What emotional and behavioral symptoms were evident and what strategies helped with resolution?

### Losses Continue to be Processed

Another important insight to remember about grief in children is that it resurfaces as children's cognitive abilities advance and in relation to triggers, such as birthdays, Mother's Day and other subsequent losses.

### Adult Losses Need to Be Supported

It may be hard for both parents and clinicians to help children express their loss-related feelings and support them in grieving if they have not resolved their own grief related to past losses. **Consider how this reality may apply to your own experiences of loss.**



See page 2



**Review the handout in Lesson 3,**  
*Understanding and Treating Adoptive Families.*

### Broaden Your Assessment Lens

Dr. Brodzinsky notes that there is often an overlay of complex loss and grief that is overlooked by clinicians and frequently goes untreated. Some factors he recommends be included in assessments are:

- The impact of infertility and previous child loss through miscarriage, abortion, and death
- The extent and nature of contact with birth family
- The extent of adoption communication in the family and barriers that inhibit more open discussion
- Parent attitudes about searching and what efforts, if any, have been made to find information about, or seek contact with the child’s birth family
- Youth’s perspective on adoption and related issues.

### Treatment Techniques for Addressing Grief



Choose at least one of the techniques listed below to use in your current practice with a foster or adopted youth. Check all of the boxes that apply.

- Lifebook work
- Loss box
- Therapeutic rituals
- Narrative therapy
- Storyboarding
- Letter writing & role play writing
- Journaling
- Art & music
- Group therapy

### Maintaining Connections and Openness



**Keeping in contact** with people who have been important to the child in the past, when in the child’s best interest, can reduce the severity of a child’s losses and mitigate symptoms of grief. They help a child feel that he or she matters! Important points to remember are:

- Openness of information and contact exists along a continuum from completely closed to fully open. Contact can be through letters, phone calls, or visits and vary in frequency.
- Clinicians can help parents redefine family and become more open to helping children preserve relationships with a special foster parent, family member, or mentor.

Note: Some professionals may have a negative bias toward the idea of children maintaining connections with birth family members.



**Evaluate your own experiences** and attitudes related to youth in adoptive or guardianship families maintaining contact with previous attachment figures.

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Funded through the Department of Health and Human Services, Administration for Children and Families, Children’s Bureau, Grant #90CO1121. The contents of this publication do not necessarily reflect the views or policies of the funder, nor does mention of trade names, commercial products or organizations imply endorsement by the U.S. Department of Health and Human Services. This information is in the public domain. Readers are encouraged to copy and share it, but please credit the National Adoption Competency Mental Health Training Initiative.