Understanding Separation, Loss and the Grief Response

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Biological Aspect of Attachment

Humans have a biological need for connection to other people. In the beginning of life, the attachments we form ensure that someone is meeting our needs for food, interaction, care and rest. When primary attachments are broken, such as the reliance and affection we have for a parent or caregiver, we first engage in reattaching behaviors such as seeking, anxiety, yearning, and pleading. If the attachment cannot be reestablished, we begin to grieve.

Types of Losses

There are two classifications for loss: primary and secondary. Primary losses are obvious losses, such as a person, object or job. Primary losses are easy to identify. Secondary losses, sometimes referred to as "hidden losses", are harder to recognize and are most often associated with the impact or meaning of the loss. For example, a primary loss is the death of a pet. The associated secondary loss would be the comfort, companionship, activity and responsibility the pet provided.

We all experience loss. Whether we lose someone we love through death or a change in relationship, the loss of a home, our belongings, a pet, an income, an important opportunity, or community connection, all loss has an impact on our physical and emotional selves. The personal impact of any loss depends on the *meaning* associated to the loss. For instance, the loss of a distant relative may not trigger a large degree of emotional response whereas the loss of a treasured possession may be truly upsetting.

When managing loss, it helps to first recognize the primary loss and then to define the possible secondary issues which may be associated with the loss. Secondary losses may be harder to identify, but identification of these losses is important as they can become the issues which may impede healing if they are unacknowledged or not addressed.

Predictable Stages of Grief

Grief follows predictable stages. Firstly we experience some form of *denial* about the loss. This may be outright denial that the loss as occurred or that the circumstances of the loss are only temporary. It may present itself more as disbelief. A child might be certain that a previous caregiver is going to arrive at the usual time or that a parent will sort everything out and come to get her in the morning. During the denial stage a person might experience a range of physical symptoms such as numbness, nausea, weeping, hysteria, appearing in a daze, chattiness, loss of bladder control, sweating, profound fatigue or confusion.

The second stage of grief is *bargaining*. During this stage we are concerned with changing the situation in order to regain what has been lost. For example, a child might believe that if he changes his behavior, or takes certain action, he might be able to return to a previous caregiver.

The third stage of grief is *anger*. It's important to note that this is the beginning of acceptance of the loss. Anger about the situation which lead to the loss or about the loss itself is common. In addition, blaming others is a hallmark of this stage. While often difficult to witness, anger is a healthy, expected and required response to loss and can be channelled and expressed safely.

After anger comes *despair*. Typically this looks like hopelessness, helplessness or depression. Crying may increase during this stage. The individual likely feels powerless to effect any change and may need some help to move beyond despair. Often, in cases of profound despair or depression, counselling can be helpful.

Finally we come to *acceptance*. This is when an individual can think about the loss without pain. Self-esteem and functionality has returned, acceptance of the new situation is evident and setting new goals is possible.

The stages of grief tend to move in cycles. Whereas the stages themselves are predictable, one may move through these stages quickly or slowly but likely repetitively for a period of time. The greater the loss, the ability to heal between experiences of loss, and whether or not there are multiple losses are all considerations in how long it will take to heal and move through the stages of grief. As the overall acceptance of the loss becomes more pronounced the need to revisit denial and bargaining is less so. Keeping in mind, however, that, as children reach various stages of development, they will turn their attention to their historical losses in order to assign new, age-appropriate meaning. This occurrence often leads to cycling through the stages of grief again until they have come to a new acceptance of their loss.

Spotting Barriers to Healing

Children who are in foster care have often experienced multiple separations from people they have grown close to and, depending on their past experience, may try to protect themselves from further loss by becoming detached. Detachment is a barrier to healing grief because the child does not acknowledge or express their feelings, therefore arresting the grief process. Children who respond with detachment may seem to fit right in to a new home with little concern for their new situation or they may be quiet and sullen.

Children who are managing unresolved grief often display physical symptoms of chronic illness, behavioural problems, difficulty with concentration, developmental or learning issues. If grief has not been addressed or multiple losses have occurred, there may be layers of secondary losses to work through.

When supporting children through a loss experience and grief process, allowing expression of all thoughts and feelings in a supportive and safe environment is necessary, not only for the child to work through grief, but also to gather information that will help you support the child. Children are all about "me" and therefore, most will create some way to take responsibility for the loss they have incurred. Finding out the thoughts and feelings a child has about the loss can assist you in relieving them of their feelings of responsibility.

Foster parents are often called upon to support children who experience necessary losses. For instance, a child who is removed from an abusive parent; although the loss of abuse is a positive outcome, the child will likely experience conflicting emotions and have a difficult time accepting support. They may feel defensive about the parent's behavior or they may blame themselves for it or feel they deserved it. On one hand the loss can be seen as a "positive loss" in terms of the abuse. However, an abused child may consider abuse to be "normal" and therefore reframing the loss for an abused child can be a complex issue. Understanding that abuse can feel like love to a child who has known nothing else may provide insight to those who support children who will need to learn a "new normal".

Healing Grief and Working Together

With each loss we have a renewed experience that can lead to grief, although not all losses will touch us so deeply. Adults and children alike suffer through the discomfort and reorganization that comes with grief. Grief is a process that we move through, not a state of being. Thinking of the process of grief like an injury is helpful. When we break an ankle or have an ailment, time to heal is recognized, supported and encouraged by doctors, family members and community. Grief is an invisible injury. A few days to convalesce are inadequate to heal the traumatic injury to our emotions. Some advocate getting back into routine and returning to previous tasks. While some degree of normalcy is definitely comforting and necessary, routine will not address the readjustments to the psyche, which are required.

Whereas no two people grief in the same way, understanding our unique physical and emotional response to loss provides some insight into helping others. Supporting ourselves in ways that bring comfort and allowing ourselves to experience the stages of grief creates an opportunity to heal fully and move on with our lives. Providing support to others, either yourself or through a community service for those who are grieving is a key ingredient to future health. Whether you are supporting a foster child, your family or yourself, practicing empathy, providing time to communicate feelings, proper nutrition, exercise and rest are all helpful in helping the body and mind to rejuvenate after an experience of loss.

Creating Opportunities for Assisted Loss – A Word About Transitions

Foster parents agree that, whenever possible, positive transitions include time to prepare themselves and the child involved for an anticipated separation. This lessens the impact of the loss and allows the processing of feelings and emotions to begin before the loss or separation occurs. In this way you can support the child by encouraging dialogue, incorporating new routines, visiting the new family and building positive skills to cope with and adapt to change. Planning and preparing in advance, wherever opportunities arise, provides the child and all family members involved with a more positive experience and puts all members of the foster family in a better position to adapt to the inevitable shifts in relationship that comes with fostering.