A Grief Counseling Group Design for Hispanic Children

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Abstract

The loss of a loved one happens to most every person at some time in their lives. When this loss occurs for children, they may not have the proper skills or life experience to effectively cope and heal their grief. Repressed grief can potentially result in an explosion of pent up, misunderstood emotions. If a child’s repressed or misunderstood grief is not effectively addressed, dysfunction and pathology may plague them into their adult years. Hispanic children may have specific cultural impacts on their grieving process. To address this issue, a grief counseling intervention was designed to help Hispanic children heal the emotions of grief and loss so they may have the opportunity to develop into healthy adults. Each group counseling session is briefly explained, and each concludes with hypothesized objectives. Although the group sessions keep Hispanic children in mind, just as death and grieving are a part of everyone’s life, it is believed most children across cultures can benefit from this program.

Introduction

Children who suffer the loss of a loved one are likely to struggle more than an adult, because they have not yet had enough life experience and personal development to learn effective coping skills for bereavement. “Experiencing the death of a parent during childhood is one of the life’s most challenging and stressful events and has a tremendous impact on the physical and psychological development of the children involved” (Darman, 2011, p. 1). Based on their developmental stages, family dynamics, cultural and cross-cultural influences, the surrounding community, and environment, children experience death and grieving differently than adults and are often not equipped to express themselves and their feelings appropriately (Darman, 2011). As a result, children frequently need assistance and guidance through the loss and bereavement process.

When a loved one dies, children are often overlooked in the grieving process because their parents and families are too overcome with their own shock and emotional
Children, unlike adolescents, have less ability to identify their feelings or physically care for themselves, and they have emotional needs for attachment and safety that need to be met. Therefore, at this crucial time of crisis, a counselor may be the only person in the child’s life who can help him or her through this emotionally difficult grief process (Lenhardt, 1997). Mourning the loss of a significant loved one can be the most difficult trauma people encounter in their lifetime. This is especially true for children because they also lack the life experiences and skills to cope with emotions related to the death of a loved one (Lenhardt & McCourt, 2000). The process of childhood grief is very complex and can result in myriad internal and external changes in the child’s life (Lohnes & Kalter, 1994). If childhood grief is left unaddressed, some of these changes may negatively impact children’s development, as well as hinder them in achieving healthy levels of physical and emotional functioning (Greef & Human, 2004). Therefore, it is imperative that children be encouraged to express their feelings of grief in their own unique way and timeframe. Helping children accomplish the task of grief resolution at an early age can prevent them from being at risk of pathology later in life (Punamaki, 2001).

It is only through education, prevention, and intervention programs that children can process their grief and move on to live healthy lives (Norris-Shortle & Young, 1993).

The Hispanic population in the U.S. has increased to over 42.7 million, making them the largest minority group in the country and giving rise to the strong likelihood that counselors will be working with Hispanic clients (Alvarez, 2011). Moreover, in 2009 alone, 321 million children in the U.S. lost a parent, readily justifying the need for grief counseling for them, as early intervention lowers the risk of poor behavior in their adolescence and adulthood (Alvarez, 2011). Hispanics are more likely to be in a lower socioeconomic stratum, introducing additional abrupt financial and family hardships when a family member dies (Alvarez, 2011). Unfortunately, the Hispanic community is also more likely than others to experience violence because they live in low income, high population areas (Alvarez, 2011). According to Alvarez’s extensive research, over 50% of Latino children are likely to experience community violence in their lifetime (2011).

Hispanics and Latinos come from many countries and pride themselves in their differences. However, there are some cultural similarities with which counselors may work to increase improved outcomes in grieving Hispanic children. For example, the majority of Hispanics are Catholic with a faith-based outlook on life and death. Within the Hispanic Catholic tradition is a belief in “fatalismo” (fate) which carries with it a variety of separate beliefs including: the lack of control over one’s life, the Will of God, and good or bad luck, all of which can cause anger and confusion, particularly in children whose attitudes are still in development (Houben, 2012; Kuehn, 2013; North Carolina Healthy Start Foundation, 2008). Believing they have no control over what occurs in their lives may make them less optimistic or willing to take action to move through grief (Houben, 2012). This belief can also be utilized by the counselor to remind children that the loss was not their fault, as some children come to believe. Prayer and quiet meditation go hand-in-hand with “novenas” and “rosarios” (saying the rosary) for the dead throughout the Hispanic culture (Lumsden, 2012; North Carolina Healthy Start Foundation, 2008).

All cultures, including Hispanic cultures, differ in their death and bereavement rituals (Kuehn, 2013; The Workgroup on Adapting Latino Services, 2008). However, most people, including children who are grieving, experience emotional, physical,
psychological, and behavioral reactions to the death of a loved one. Emotional responses include anger, fear, sadness, withdrawal, even happiness; physical responses include illnesses, weight gain or loss, inability to sleep or focus; psychological aspects may include depression, dysphoria, rage, fear, confusion, and post-traumatic stress disorder; behavioral problems may result in acting out, hurting oneself or others, running away, lack of motivation or other problems at school or in the community (Alvarez, 2011). Fear alone may result in strong feelings of “instability, uncertainty, and insecurity,” causing significant “negative impacts on the child’s developmental, emotional, or mental health” and questioning what, if any, control they have over their lives (Kuehn, 2013).

Inherent in several Hispanic cultures is maintaining a certain level of connectivity to loved ones who have passed away. Rituals and practices, both religious and iconic, include those that create a bond with the dead (Alvarez, 2011). For example, in the Mexican culture, “Dia de los Muertos,” or the Day of the Dead, is an annual celebration to honor lost loved ones, which exposes children to the idea of death and the continuation of the spirit (Kuehn, 2013). It is a time when Mexicans celebrate the lives of lost loved ones, seeing death in a more positive light, as a transition to a higher place where they may be joined sometime in the future (Kuehn, 2013). The underlying theme of these festivals is not to fear death but accept it as part of life, making it a viable cultural coping strategy.

An important aspect of most Hispanic families is a cultural hierarchy in which men are head of the household, women are somewhat secondary and defer to men, and children, as the youngest, are lowest in the familial system (Bougere, 2014). This is referred to as “respeto” or respect for one’s elders and guides social relationships (Bougere, 2014). While many Hispanic families make decisions together, following the family hierarchy is paramount (Bougere, 2014). As a result of family hierarchy, parents often do not discuss “taboo” subjects such as sex and death with their children until it becomes necessary and even then not fully (Alvarez, 2011). The Hispanic element of “machismo” is an often misunderstood masculine pride in maintaining self-control, stoicism, and strength, that men are expected to adhere to in every situation, including loss of a loved one (North Carolina Healthy Start Foundation, 2008). Such prevailing cultural attitudes and beliefs can result in children not receiving the pertinent information or support they need because adults are overwhelmed by their own bereavement and changes in their lives. Without parental or adult support, Hispanic children have a higher propensity for a longer grieving process, emotional instability, or permanent negative effects (Kuehn, 2013). As a result, childhood traumatic grief may be more prevalent than previously thought (Kuehn, 2013). Peer support for grieving children becomes important, as well as having adults to turn to for guidance and care.

When a parent dies, it is important for the surviving parent to play an active role in the counseling process of their children (Van Poppel, 2000). Further, when young children receive counseling early on, they develop better coping skills and tend to be more creative later in life (Punamaki, 2001). Lastly, it has been found that when family members emotionally support one another in an optimistic manner, they tend to heal more quickly. These families also tend to rely on religious beliefs and close family and friends for support (Greef & Human, 2004).

Dealing with grief and loss is a complex process, but it is often exacerbated by a lack of social and educational skill levels and life experience that young people
encounter. Therefore, it is of paramount importance that counselors allow children the time and space needed to heal their grief in safe, creative ways. Equally important is teaching the child different coping skills and providing the child the opportunity to express their fears and feelings of pain regarding the death of a significant individual. By dealing with grief in effective ways at a young age, children are less likely to be vulnerable to long-term bereavement pathology and are more capable of growing into healthy, compassionate adults (Lohnes & Kalter, 1994).

Hispanic children may experience several cultural and cross-cultural issues surrounding death and the loss of a loved one that are essential for a counselor to understand. It is incumbent on healthcare providers, including counselors, to become cross-culturally competent, particularly in view of Westernized attitudes toward death that make it difficult to accept one’s mortality and the Western cultural inability to readily cope with death (Kuehn, 2013). Awareness of cultural differences and cross-cultural impacts (i.e., the commonality of Hispanic children living in a Westernized culture with Spanish-speaking parents and grandparents who still maintain cultural ties and rituals), along with using cultural coping mechanisms and strategies, can aid counselors in bringing grieving children to a semblance of peace and acceptance (Carteret, 2011; Kuehn, 2013).

Literature Review

There is significant literature to support the implementation of grief group counseling for children who have suffered a loss through death of a loved one, as well as incorporation of cultural sensitivity in such sessions. For example, Alvarez (2011) designed a weekend bereavement camp and 8-week (meeting once a week) support program for Latino children ages 7 to 10 who had lost a parent, to teach them adaptive skills. She readily justified the need for grief counseling for children, pointing to the potential for susceptibility to depression, anxiety, complicated grief, post-traumatic stress disorder, and the increased likelihood for acting out aggressively or becoming socially isolated if grief treatment is not provided in a timely manner (Alvarez, 2011). Further, grieving children may face loss of self-esteem, loss of direction, trouble in school, even a loss of identity with difficulty adjusting to other ancillary changes that often come with the death of a parent or loved one (Alvarez, 2011). According to Alvarez and the studies she examined, these issues are even more likely to occur for Hispanic children (2011).

Another family bereavement program developed by Murphey and Wahiba (2012) created a successful small-group, 8-session counseling program for children and their caregivers. They utilized modeling, role-playing, homework assignments, and collaborative group learning activities to assist grieving children through the process (Murphey & Wahiba, 2012). Measured against a control group, the children in the bereavement program developed better coping skills, a more positive outlook, improved belief systems, and were better at expressing rather than internalizing problems (Murphey & Wahiba, 2012). This supports implementation of a group counseling program for grieving children, offering community outreach to families suffering loss.

Houben (2012) helped create Grief and Trauma Intervention for children ages 7 to 12 with posttraumatic stress. Their 10-session, one-hour group therapy begins with a first meeting with parents/guardians and the children and a single one-on-one session with
each child (Houben, 2012). Their system incorporates art, drama, and play; an ecological perspective; and culturally relevant approaches, including death rituals, spiritual beliefs, coping strategies, historical occurrences, and the child’s language (Houben, 2012). Sessions are based upon cognitive behavioral therapy, narrative therapy, and expressive therapies such as drawing and writing to help the children get in touch with their deepest feelings, learn coping strategies, and find meaning in their loss (Houben, 2012). These kinds of strategies will be utilized in the sessions under discussion. Such work can be conducted in most any community-based setting.

For years it was believed that Hispanic families preferred not to seek assistance outside the family; however, more recent examinations have found this trend has changed somewhat for many acculturated Hispanic families (Murphey & Wahiba, 2012; North Carolina Healthy Start Foundation, 2008). According to Kuehn (2013), in many Hispanic cultures death becomes a community event in which the family turns to others for help. However, research and literature also support the concept that many Hispanics are not open with their emotions, preferring not to express them outside the family (Murphey & Wahiba, 2012; North Carolina Healthy Start Foundation, 2008; Workgroup on Adapting Latino Services, 2008). The Hispanic value of “familismo” stresses the importance of family and extended family as primary support for families in distress (North Carolina Healthy Start Foundation, 2008; Workgroup on Adapting Latino Services, 2008). An aspect of family in the Hispanic community is one of closer personal space than Westernized culture tends to allow; a Hispanic child may seek out and welcome a warm, loving embrace when feeling distraught or unhappy (Houben, 2012). Another example is the concept of “personalismo” in which friendly relationships are paramount over discussing private family matters such as death (Alvarez, 2011). Therefore, Hispanics, including children, express their grief physically as much or more than emotionally. Moreover, it is more culturally acceptable to Hispanics to seek help for somatic symptoms such as headaches, intestinal disorders, nervousness, and other physical manifestations of grief than to seek mental health care (Alvarez, 2011; North Carolina Healthy Start Foundation, 2008).

 Hispanic children have difficulty expressing their anger, sadness, confusion, and other emotions tied to bereavement as a result of these cultural norms. They may believe they are helping the family by not showing their emotions, by displaying machismo when they are in pain, by suppressing questions, and not wanting to be a burden to the family (Athan, 2014; Houben, 2012). Unaddressed grieving can manifest in many ways, such as acting out behaviors (e.g., bullying, aggression, violence toward self and others), anxiety, eating disorders, isolation, learning problems, perfectionism, and suicidal ideation and attempts. It is imperative for counselors to help Hispanic children and families be aware of and address the multitude of potential byproducts of grief (Athan, 2014). Simply encouraging Hispanic children to share their feelings will help lighten the burden and may also help other children in the group recognize that grief is a normal process. Counselors need to emphasize to the children that it is important to share their feelings with others and that they are not alone in their grief (Houben, 2012).

Also of importance to counselors is the awareness that relationships are complicated and full of conflict and that not all memories are likely to be happy ones, nor should they be (Athan, 2014). Children across cultures often need direct encouragement to express their feelings when grieving, feel free to ask questions, discuss and display
their anger and frustration appropriately, acknowledge their pain and loss, and understand that they are not disappointing their family by doing so (Athan, 2014). Athan (2014) encouraged the use of journals, art, music and movement, helping children identify their support system, and allowing a safe place for children to express their feelings in counseling sessions to help them through the grief process. Athan (2014) also urged that children commemorate their loss, give it meaning and significance, light candles, make a memory box, create a collage of photographs, cook a favorite meal shared with the loved one; in short, take action that keeps memories alive and supports expression of feelings. This also requires that the counselor be patient, keep answers simple and honest, include the child in rituals, have art supplies on hand that help children creatively express themselves, and facilitate discussions in a group setting (Athan, 2014).

Based on my experience leading this group, I recommend that counselors seek input from Hispanic community leaders, church and school officials, the families and clients themselves, as well as engage in their own research to better understand how to help in a culturally sensitive manner. They need to seek outside consultation, as needed, to develop culturally aware techniques and strategies when working with Hispanic children on their grief, especially in a group setting. Counselors need to consult previous research on conducting grief-related group counseling interventions with Hispanic children and families (Alvarez, 2011; Houben, 2012; Murphey & Wahiba, 2012). Additionally, Athan (2012) offered valuable recommendations for counselors seeking culturally sensitive interventions and practical materials essential to conducting such groups.

**Grief Group Design**

It is imperative for counselors to be mentally and emotionally prepared to help children and their families deal with grief and loss. A group counseling intervention setting provides a safe place for children to share their feelings as well as listen to other children’s experiences. This mutual sharing which occurs in the group setting helps to decrease feelings of isolation and will ultimately help the children process their grief appropriately. Children and families within the Hispanic community experience death and loss at a greater rate than the larger community (Alvarez, 2011). Therefore, an effective group intervention is needed to help Hispanic children cope with their experiences with grief and loss. The focus of this intervention is to create a group designed specifically for any counseling setting where a counselor may work with Hispanic children who are dealing with complications related to the death of a loved one. It is based on an extensive literature review and my over 15 years of counseling experience in the field both in private practice and in the public school system. I have successfully utilized this intervention in multiple counseling settings including schools, inpatient and outpatient psychiatric settings, and private practice. It is designed to be practitioner friendly and easily adaptable to the specific needs of the counselor or child clients. This group design provides practicing counselors with a practical, thoughtful, and well delineated group counseling intervention for working with Hispanic children who are dealing with grief and loss.

Counselors who wish to implement this group design could begin by advertising the group in pediatric offices, elementary schools, hospices, churches, or community
agencies. This particular group is designed for Hispanic and/or Latino children between the ages of 7 and 11 who have experienced the loss of a significant loved one. This loss experience would qualify them to participate in this bereavement group. Facilitators may alter the activities to adjust the developmental appropriateness as needed. For the purposes of this group, there should be around five to six children as part of a closed group. If during the screening process the facilitator, the guardian and the child believe the group would be beneficial, an informed consent and disclosure statement would be discussed and given to the guardian to sign and return to the counselor.

Based upon past clinical experience with this group model, I suggest that the diversity of the group be split by gender as much as possible. This gender diversity provides opportunities for participants to observe the unique circumstances surrounding the death of a significant individual in the lives of like peers of varying ages and genders. This gender and age diversity works to normalize the participant’s feelings and experiences. It is likely the children will share many similar fears, feelings, questions, and thoughts. This commonality serves to comfort and support the participants. Ideally, the group is designed to last 1 hour and meet once a week for 9 weeks. Group facilitators should provide members with pencils, colored pencils and/or crayons, personal journals, butcher paper, and worksheets.

It is believed that most children will begin group counseling with little understanding of death, which may lead to upsetting feelings and/or fantasies (Lohnes & Kalter, 1994). Hence, it is the purpose of this group to provide an opportunity for Hispanic children to discuss their feelings, decrease their feelings of isolation, normalize their experiences, and help them develop effective coping skills for dealing with their grief and loss. The group is designed to meet the developmental needs of all children ages 7 to 11. However, it is specifically designed to meet the culturally impactful needs of Hispanic children by incorporating: the support network of the extended family, spirituality and the Catholic church, a focus on collective connectivity, strengths-based interventions, appropriate expression of feelings inside and outside of the family, and sensitivity to the child’s level of acculturation. The following is a suggested format for a 9-week group counseling program for Hispanic children who have experienced grief over loss of a loved one in their lives.

**Session One**

The initial part of this session is geared toward getting to know the members of the group and gaining comfort in disclosing personal stories of loss. There are many available activities to accomplish this goal. One activity I have used is to have a variety of culturally relevant sentence completion cards in a basket that focus on basic personal information; each child draws a card from the basket and completes the sentence. The activity may be repeated three to four times. Following this activity, the counselor will explain that in the remaining 8 weeks, the children and the counselor(s) will ‘connect’ with one another during their counseling sessions. This connection can be manifested by playing the ‘Knots’ game to demonstrate the interconnectedness that already exists in the group. Below is a description of this game.

**The Knots Game.** All the children stand in a circle and take both hands of another child standing across from them, but not next to them, until every child is holding two hands with another child across from them. This will form a knot in the center of the
circle. The feeling of connectedness demonstrates to the group how they are all connected through the grief they share. Finally, without letting go of anyone’s hand, the group members will try to untangle themselves. It is a fun and effective exercise to create rapport and demonstrate, in a developmentally appropriate and concrete manner, the interconnectedness they all share.

In the second part of the initial session, the counselor will explain and discuss the concepts of grief and loss. Throughout each session, an attempt should be made to normalize the children’s experience with grief at a basic life level. For example, the counselor may explain that everyone experiences loss, often many times throughout his or her life, and that grief is a natural human response to loss. The counselor will explain that loss often leaves a void in our lives and that they may have feelings and/or thoughts they assume no one else would understand. The counselor will work to normalize the children’s experiences of fear, longing and regret, heartache and anger, and a wide variety of other emotions emphasizing that everyone grieves in their own way.

In this session, the focus will be on grief and the grieving process. The counselor will explain that the loss of a loved one may arouse an initial feeling of shock and denial, disbelief that the loss is occurring; grief and sadness over the loss; anger directed at those left behind; and anxiety and fear. The counselor will explain that there is always a period of readjustment, and that period may last a very long time. The counselor will explain the stages of grief, pausing to discuss each one and allowing the children to comment on each stage and what each stage means to them. The counselor will hand out the “Stages of Grief,” designed-for-children, and ask the children at what stage of grief they think they are and why (Margolin, 1996). It should be explained to the children that the stages of grief are not linear and that they may pass through or experience all of the stages during their grieving process. By the end of Session One, the children will have a greater understanding of the concepts of grief and how to recognize aspects of grief in themselves.

Session Two

In this session, the counselor will ask the group to create a list in their personal journal of all the emotions they are feeling surrounding their loss. The counselor will pay attention to the child’s level of acculturation and their level of comfort sharing feelings about death outside of their family. Once the list is compiled, the children will be encouraged to discuss and reflect on each emotion on their list. Particular attention should be paid to describing the emotions, as well as the behavioral manifestations of that emotion. For instance, “What do you do when you feel angry/sad/scared?” An integral aspect of this exercise is for the children to reflect on the interplay of their emotions and behaviors.

The counselor will explain that we all need one another, especially during difficult times such as loss and grieving. To demonstrate this, Session Two (and each session thereafter) will be closed by performing the ‘Needing Each Other’ exercise. Below is a description of this exercise.

Needing Each Other. Pairs of children sit on the floor back-to-back with their elbows linked. Without using hands, the children must rise to the standing position. Pushing against each other, they will need to support each other’s backs until both are standing. After all children are standing, the counselor will make the point that each child
needed the help of the other in order to stand. It should be emphasized that in life, we all need one another sometimes for understanding and support. Through this exercise, the children will gain a greater understanding of their emotions and that it is acceptable to ask for and receive help. It is especially important for the counselor to be sensitive to the child’s cultural value to not reach beyond the family for help especially around death. The children should be encouraged, in an aware and sensitive manner, to begin to trust certain people outside of the family (counselors) to help them deal with their feelings of grief and loss.

**Session Three**

The focus of this session will be on feelings of anger associated with grief. The counselor will explain that we often feel angry when we cannot get what we want and/or when we do not have control over events that are happening in our lives. The counselor will explain that especially in cases of losing a close loved one, it is common for the child to feel angry with the person for leaving them. The counselor will encourage the children to share feelings of anger with the group.

The counselor will also explain that some people keep their anger inside because they may feel afraid of upsetting others or they may feel guilty for having angry thoughts. Some people will ignore their anger and/or pretend those feelings don’t exist. The counselor will explain that when anger is kept inside, the person may feel bad, have nightmares, be irritable, or feel like they are going to ‘explode.’ The counselor will explain in concrete terms that some people may project their anger externally by being hostile and aggressive. Additionally, the counselor will explain that the children need to learn the difference between thoughts, feelings, and angry actions, and that while anger is okay, angry actions are not appropriate.

The counselor will ask the children to list all the ways that they can deal withanger and will list these actions upon a white or blackboard, reflecting on and discussing the appropriateness of each one. Next, the counselor will encourage the children to create a list in their journals of appropriate ways in which they might handle their angry feelings and thoughts. The children will be taught to use “I” statements (e.g., “I am upset because you won’t let me go to my friend’s house but daddy would have if he was here!”) and be encouraged to tell their parents and close extended family members when they are feeling angry or upset. The children will gain the skill of handling their anger in more productive and positive ways.

**Session Four**

In this session, the counselor will explain what ‘ripple effect’ means to help the children identify the overall impact associated with their primary loss. This information may be brought about by asking questions such as, “What is the hardest part of your grief today?” or “What has been the biggest change since the loss?” The counselor will write on a white or blackboard one of the central losses (e.g., death of father) and draw a circle around it with little lines coming out from the circle like a spider’s web. Next, the counselor will write all the accompanying losses on the lines emanating from the main/central loss as the children think of and offer them. Keeping in mind the importance of extended family, each accompanying loss will be discussed. The children will be asked to write down their own ripple effects in their journals, beginning with their central loss.
and working outward, identifying each impact they have experienced. They will be encouraged to use their journals outside the group to write down thoughts and feelings, ripple effects, and how they choose to cope with them. In addition, the children will be encouraged to reflect on these ripple effects and try to talk to a family member about it during the week.

At the close of the session, the counselor will remind the children that we all need one another, especially during difficult times such as loss and grieving. Following Session Four, the children will have a better comprehension of the ripple effect caused by loss of a loved one and begin to learn coping mechanisms such as journaling.

Session Five

In this session, the group will focus on life changes incurred as a result of the loss. The counselor will ask the group to create a list of all the changes that have taken place since the loss and will focus on the affect of the children as they create the list. Some examples here might include the need to relocate away from extended family, go to a different school and make new friends, death, changes in rules and responsibilities in the household, stressed living conditions, academic problems, and/or social problems. The counselor will attempt to capture the positive changes as well, such as increased bonding with the surviving parent as time passes and the love and support from family and friends after the loss. The counselor will facilitate an open discussion of changes that have occurred in the lives of the children. As the children randomly shout them aloud, the counselor will list them on a white or blackboard. After every child has provided input and they stop coming up with ideas, have each child put an ‘X’ on the board next to those changes that have impacted their own lives negatively and a ‘heart’ next to those that have had a positive impact. When all the children have put X’s and hearts on the board, have them circle the one change that has been the most difficult and allow an open discussion. Subsequently, ask each child what has been the most positive impact and facilitate a discussion around that positivity. If there is time, have the children work on a similar list in their journals, complete with X’s, a circle, and hearts, or suggest they do this exercise on their own at home. At the close of the session, remind the children we all need one another, especially during difficult times, conduct the ‘needing each other’ exercise and emphasize the importance of extended family and trusted adults in helping them cope.

Session Six

The focus of this session is on each child’s support system. The children will be asked to think of all the people in their lives who they can talk to and who understand them. The counselor will list these people on the board. The children will write down their personal support system list in their journals. As they write down names, they might be surprised at how many people they have in their lives for support. The counselor will explain the importance of having family and other trusted people in our lives upon whom we can depend and to whom we can talk about feelings honestly and freely without judgment. The counselor will remind the children of the ‘needing each other’ exercise with which they always close their sessions and elaborate upon this concept. The counselor can ask the children if they have noticed the ‘needing each other’ exercise getting easier and emphasizing the idea that with patience and by sharing their grief with
others, challenges become lighter and easier. The children should be encouraged to think of any time in their lives when someone made it easier for them to accomplish a task. Examples might include a time when a sibling or cousin helped them with household chores or a time when an aunt or uncle helped them understand a homework problem. Discuss ways in which they might help a family member or another loved one cope with the mutual loss. By the end of Session Six, the children should be able to identify their personal support system and understand they have others to whom they can turn for understanding and help.

Session Seven
In this session, the focus will be on encouraging the children to remember and memorialize their loss. The children will be asked for all the ways they can think of to remember their loved ones, and the counselor will once again list these ideas on a white or blackboard as they are suggested. Some examples here might be to include having a special/votive candle for the loved one signifying warmth and eternal love; keeping a journal, (this is a good way for the child to continue to ‘communicate’ with the loved one); planting a tree or flowers in memory of the loved one; creating a collage of pictures, or creating a memory box of their loved one. Where appropriate, the counselor can infuse spiritual concepts and/or religious artifacts from church into the remembrance and memorial. The counselor will facilitate discussions, assuring that all ideas for remembering their loved one are acceptable. It should be made clear that it is not a competition, it is about honoring their loved ones in a manner that has significance for the child. By the end of this session, each child should have an idea for a way in which they would prefer to memorialize their loved one and commit to completing a project of their choosing.

Session Eight
The memories of people the children have loved and lost are precious—good ones and bad ones. Have the children share a story or experience with the group about the person they have lost. It can be happy, sad, or funny—any story the child wishes to share. It can be something they want other people to know about the person they have lost or a simple memory they hold dear. The counselor should circle around the group at least twice to make sure each child has their chance to share. If the child shares a sad story, gently encourage him or her toward a happy story the next time. It is important not to push too hard for this type of sharing as this may be a culturally difficult task for the for the child. Most importantly, the child’s feelings need to be validated and normalized in this process.

Next, provide the children with markers and butcher paper and have them draw their first emergent emotion. It can be abstract or realistic—any kind of artistic expression that the child chooses. Have the children reflect on their drawing and share it with family members.

Before they leave the session, ask the children if they have a safe place to go for alone time. If they can’t identify a safe place, have them imagine one. In a guided imagery exercise, have them close their eyes and guide them through a simple meditation or prayer (‘novena’ or ‘rosario’). Have them mentally going to their safe place along a special walking path or at a church, seeing it in their mind’s eye. If they wish, they can
invite the person they have lost to come into their safe place or church for a visit. This exercise teaches children the serenity that can be derived from meditation and prayer, as well as offering them a way to ‘commune’ with the person they have lost in a safe way.

Session Nine

In this final session, important concepts, issues, and feelings about grief will be reviewed and the group will end with a ritual to help solidify learning and change. The counselor will encourage the children to share what they have learned about their feelings, about their support systems, about newly developed coping skills, and about their personal grieving process.

Following the review, the counselor will hand out one large sheet of butcher paper to each group member to be used as a folder for papers they have completed during the group’s sessions. The counselor will have the children fold it in half and staple it up the sides. On the front they can name their folder whatever they like, draw a picture, and write their names as the author. A personalized ‘certificate of achievement’ should be provided to each child and be put in the folder. A small party at the end will celebrate a job well done. It is important to provide culturally appropriate food and treats at the end of this session to respect the ritual process.

Summary

The death of a loved one can negatively influence anyone at any stage of his or her life, but loss and bereavement are especially difficult for children to deal with in a healthy manner without proper guidance. Cultural influences such as those that Hispanics often hold dear throughout their lives can positively contribute to the process of grieving and how a counselor can assist a child in attaining resilience. When children know that an adult is fully listening to them, validating them, helping them express their feelings, and understands their cultural influences, trust can be built to create a therapeutic alliance (Houben, 2012). When children of cross-cultural influences come together, they can learn from one another. This group model/intervention is designed for all Hispanic children between the ages of 7 and 11. It’s main purpose is to provide a safe and culturally sensitive place for them to understand and learn to cope with their feelings of grief and loss. It is developmental in nature and designed to gently guide children through stages of grief and the common issues related to grief. Ultimately, it provides them with tools to aid in their journey through bereavement. I have effectively utilized this counseling group intervention in my work with Hispanic children in schools, inpatient and outpatient psychiatric settings, and private practice settings, and it is adaptable for counselors in other settings as well.

References


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