

Age by Age Grief Guide

Understanding how children grieve at every stage of childhood

Toddlers

Ages 5–7

Ages 8–12

Teens

This guide is offered to parents, caregivers, and educators who are walking alongside a grieving child — whether after the loss of a beloved pet or another meaningful relationship. Each child is unique. Use this as a gentle compass, not a rigid map.

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A note before you begin: Children grieve differently than adults — and differently from one another. The ages below are guides, not rules. A nine-year-old with a younger sibling may respond more like a seven-year-old. A sensitive five-year-old may surprise you with adult-level questions. Trust what you observe in your own child above all.

Toddlers (Ages 1–4)

COMMON REACTIONS

- ◆ Searching repeatedly for the pet or person who died
- ◆ Increased clinginess, separation anxiety, and crying
- ◆ Regressive behaviours: thumb-sucking, bedwetting, baby talk
- ◆ Sleep disruptions, night waking, refusal to sleep alone
- ◆ General irritability, fussiness, or unexplained sadness
- ◆ Little visible distress — toddlers often seem to 'move on' quickly

COMMON QUESTIONS

- ◆ "Where did [pet] go?"
- ◆ "Is [pet] coming back?"
- ◆ "Will you go away too?"
- ◆ "Can we get another dog/cat?"
- ◆ "Did [pet] go to sleep?"

COMMON MISUNDERSTANDINGS

- ◆ Toddlers do not understand death as permanent — they may ask repeatedly
- ◆ They may not connect 'died' with 'gone forever'; euphemisms confuse them
- ◆ Absence of visible grief does not mean they are unaffected
- ◆ They sense adult emotion deeply even when they don't understand cause
- ◆ Brief, intense outbursts followed by play are completely normal — not callousness

HEALTHY SUPPORT APPROACHES

- ◆ Use honest, simple language: 'Buddy died. His body stopped working. He won't come back.'
- ◆ Avoid euphemisms like 'went to sleep' or 'went away' — these create fear
- ◆ Maintain consistent routines; predictability is deeply reassuring
- ◆ Allow them to see you grieve in gentle, manageable ways
- ◆ Offer physical comfort: holding, rocking, extra closeness
- ◆ Read simple picture books about loss together
- ◆ Answer the same question as many times as they need to ask it

Ages 5–7 (Early Childhood)

COMMON REACTIONS

- ◆ Beginning to understand death has permanence — may be frightened by this
- ◆ Magical thinking: believing they caused the death or can reverse it
- ◆ Intense, unexpected bursts of sadness followed by normal play
- ◆ Physical complaints: stomachaches, headaches with no medical cause
- ◆ Increased fearfulness about other loved ones dying
- ◆ Difficulty concentrating at school; regression in behaviour
- ◆ Curiosity about death that may seem matter-of-fact or jarring to adults

COMMON QUESTIONS

- ◆ "Did [pet] hurt when they died?"
- ◆ "Is it my fault?"
- ◆ "Can dead things come back to life?"
- ◆ "Will you die? Will I die?"
- ◆ "Where is [pet]'s body now?"
- ◆ "Why did this happen to us?"

COMMON MISUNDERSTANDINGS

- ◆ Children this age often believe they caused a death through a thought or wish
- ◆ Short grief bursts don't mean they aren't grieving deeply — attention spans are short
- ◆ Curiosity about death details is normal, not morbid
- ◆ They may seem 'fine' at school and fall apart at home — both are real
- ◆ Adults sometimes over-explain or philosophise, which overwhelms this age group

HEALTHY SUPPORT APPROACHES

- ◆ Gently but clearly correct magical thinking: 'Nothing you did caused this.'
- ◆ Answer questions honestly and simply — avoid over-explaining
- ◆ Normalise all feelings: sad, angry, confused, even relieved
- ◆ Use creative outlets: drawing, storytelling, clay, building a memory box
- ◆ Let them help with rituals if they choose — a small ceremony, planting a flower
- ◆ Keep routines stable; grief can feel safer within a predictable structure
- ◆ Watch for prolonged regression, school refusal, or sleep disruption beyond a few weeks

Ages 8–12 (Middle Childhood)

COMMON REACTIONS

- ◆ Full understanding of death's permanence, universality, and inevitability
- ◆ Deeper sadness, longing, and a sense of the world being 'less safe'
- ◆ May try to appear strong or unbothered — especially boys, due to social messaging
- ◆ Withdrawal from friends or family; wanting more time alone
- ◆ Intense focus on fairness: 'Why did this happen to us and not them?'
- ◆ Increased interest in where people/animals go after death — spiritual questioning
- ◆ May grieve privately and need space to process before talking

COMMON QUESTIONS

- ◆ "What happens after you die?"
- ◆ "Why do bad things happen to good people?"
- ◆ Is it normal that I don't feel sad right now?
- ◆ "What was [pet]'s life like before us?"
- ◆ "Will I forget them?"
- ◆ "Could we have done something different?"

COMMON MISUNDERSTANDINGS

- ◆ Seeming stoic or distracted doesn't mean they're not deeply affected
- ◆ They may grieve in bursts — intense emotion, then apparent calm, then back again
- ◆ Humour is a valid coping mechanism — laughing about a memory is not disrespect
- ◆ Peers may not understand, causing them to feel isolated in their grief
- ◆ Adults sometimes push children this age toward 'moving on' too quickly

HEALTHY SUPPORT APPROACHES

- ◆ Make space for conversation without pushing — 'I'm here whenever you want to talk'
- ◆ Honour their need for privacy while remaining present and available
- ◆ Validate complex, contradictory feelings — they may feel guilty for laughing
- ◆ Encourage meaningful ways to remember: a journal, photo album, legacy project
- ◆ Be honest about your own grief — modelling is powerful at this age
- ◆ Involve them in decisions where appropriate (memorial, donation, keepsake)
- ◆ Connect with school counsellors if concentration or social withdrawal persists

Teens (Ages 13–18)

COMMON REACTIONS

- ◆ Adult-level emotional depth combined with limited emotional regulation
- ◆ Intense anger — at the situation, at others, at themselves
- ◆ Withdrawal into peers, screens, or solitude; avoiding family
- ◆ Numbness or dissociation: feeling like they're watching life from outside
- ◆ Risk-taking behaviours in some cases, especially if grief is suppressed
- ◆ Existential questioning: meaning, mortality, identity, and legacy
- ◆ May oscillate rapidly between adult composure and overwhelming emotion

COMMON QUESTIONS

- ◆ What's the point if everything just ends?
- ◆ "Why do people even bother loving things?"
- ◆ "Do you think [pet] knew how much I loved them?"
- ◆ "I feel like no one else understands — is that normal?"
- ◆ How do I know when I'm okay again?
- ◆ "Is it weird that this is hitting me harder than I expected?"

COMMON MISUNDERSTANDINGS

- ◆ Their grief over a pet can be as intense as grief over a person — take it seriously
- ◆ Needing to be with friends instead of family is not avoidance — it is developmentally appropriate
- ◆ Silence or withdrawal is often processing, not indifference
- ◆ Pushing them to 'be strong' for younger siblings or parents can cause harm
- ◆ Not wanting to talk with parents doesn't mean they aren't grieving or don't need support

HEALTHY SUPPORT APPROACHES

- ◆ Acknowledge the depth of their loss without minimising or comparing
- ◆ Offer presence without pressure — side-by-side activities, a drive, cooking together
- ◆ Respect their chosen ways of processing: music, art, writing, movement
- ◆ Share your own grief authentically — this models that adults grieve too
- ◆ Watch for signs of prolonged numbness, school decline, or social isolation
- ◆ If they're open to it, consider a grief-supportive counsellor or therapist
- ◆ Trust that they can hold complexity — they don't need to be protected from reality
- ◆ Honour small ways they choose to keep the memory alive without overriding them

Every child's grief is their own — shaped by their personality, their bond, and the love that came before the loss. There is no right way, no correct timeline. The most healing thing any adult can offer is consistent, unhurried presence.

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