Room for Both

A free guide for grown-ups

Helping a young child who has lost someone close

For parents, grandparents, and teachers · Ages 4–8



from Room for Both, by Twin Garcia

A short companion guide · Not medical advice

Welcome

This short guide is for the grown-ups walking beside a child who has lost someone close — a parent, a grandparent, a sibling, a friend, or another person the child loves.

You do not need perfect words. You do not need to fix the sadness. Being there, telling the truth gently, and making room for all the feelings is already a great deal.

The ideas here come from well-known children's grief programs and pediatric groups, including the Dougy Center, the National Alliance for Children's Grief, Children's Hospital of Philadelphia, the American Academy of Pediatrics (HealthyChildren.org), the Child Mind Institute, Sesame Workshop, and the National Child Traumatic Stress Network. Sources are listed at the end. These organizations are not affiliated with *Room for Both*.

This guide is not medical advice, therapy, or a substitute for professional care. If you are worried about a child, talk with a doctor, a counselor, or one of the organizations in "Find support." If you or a child is in crisis, call or text 988.

A note about the book: *Room for Both* is a picture book about a teddy bear named Carla and two feelings that live in her heart — Sunny (the warm, happy feeling) and Misty (the feeling you get when you miss someone). The story's simple idea is one many grief programs also share: a heart can hold more than one feeling at the same time.

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How young children understand death

Every child is different. Age is only a starting point. A child's past experience, the family's culture and beliefs, and how close they were to the person who died all matter too.

Ages 4–5

Young children often do not yet understand that death is permanent. They may think of it as temporary or reversible — something like a cartoon character who falls down and gets back up. They often use what counselors call "magical thinking," and may wonder if the person will come back if they are good, eat their vegetables, or wish hard enough. Children's Hospital of Philadelphia, the Child Mind Institute, Sesame Workshop, and HealthyChildren.org all describe this as a typical way preschoolers understand death.

They may ask the same questions again and again. That is not because they weren't listening. They are trying to make the idea real.

Ages 6–8

Many children begin to understand that death is permanent around ages 5 to 7, though knowing something and accepting it are not the same thing, as HealthyChildren.org notes. They may still have times when they imagine seeing the person again. They may ask more direct questions about how and why the person died. They may start to worry that other people they love could die too, or that they themselves might die.

Four simple ideas that help

The American Academy of Pediatrics, writing for HealthyChildren.org, suggests offering younger children four plain ideas, in words they can use:

1. **The person is not coming back.**
   Death is not like a TV show. As much as a child might wish things were different, their loved one will not return.

2. **They are not suffering.**
   When someone dies, their body stops working. They do not feel pain, hunger, loneliness, or other hard feelings anymore.

3. **Everything that lives will die someday.**
   This includes people, pets, and even plants. If a child asks, "Will you die too?", HealthyChildren.org offers this kind of honest answer: "I am healthy and doing everything I can to stay well. I expect to be with you for a very long time. If you ever feel frightened about this, let's talk about it."

4. **The child is not to blame.**
   Explain the cause in simple, clear terms, without extra medical detail. Children sometimes think a death happened because of something they did, said, or even thought. It did not. Understanding a simple "why" makes that kind of guilt less likely.

Honest, simple words

Use clear words: died and dead.

> *"Grandpa died. That means his body stopped working, and we will not see him anymore."*

CHOP, Sesame Workshop, the Child Mind Institute, and HealthyChildren.org all recommend this kind of short, concrete language. Soft or vague phrases often create more fear, not less.

Words that help	Phrases that often confuse
• Died, dead • "Their body stopped working." • "We will not see them anymore." • "I don't know, but we can wonder about that together." • "That did not happen because of anything you did." • "You will always be cared for."	• "Went to sleep" or "is at rest" — may make bedtime feel scary • "We lost them" or "passed away" — a child may wait for the person to be found or to come back • "Gone on a long journey" — may make travel feel unsafe • "Up in the sky" — can be confusing in a concrete way

CHOP, the Child Mind Institute, HealthyChildren.org, the Dougy Center, and Sesame Workshop all caution against the phrases on the right.

Other phrases that usually do not help

HealthyChildren.org also suggests steering clear of these, even when they come from a caring place:

- "You'll feel better soon." — This can sound like a request to hide the sorrow.
- "At least..." — Comparisons do not help a child say what they feel.
- "You need to be strong (or brave) now." — Children should not have to hide feelings to protect grown-ups.
- "I know just how you feel." — We usually don't, unless we ask.
- "You must be angry / sad / lonely." — This can pressure a child to agree, even if it isn't how they feel.

Helpful habits

- Start with a little information, then add more if the child asks (Child Mind Institute).
- Before answering, you can ask, "What made you think of that today?" (CHOP).
- It is okay to say, "I don't know, but I will try my best to find out" (CHOP, National Child Traumatic Stress Network).
- Be ready to answer the same question more than once (NCTSN, CHOP).
- Listen more than you talk. You do not need the perfect sentence (HealthyChildren.org).
- If your family has spiritual or religious beliefs, you can share them — after the concrete facts are clear, so the child is not left thinking the person is simply "away" (Child Mind Institute).

How grief can look

There is no right or wrong way to grieve, and grief does not follow a set schedule of stages. The Dougy Center is clear about this: grieving may include some, all, or none of the “stages” people talk about, and they do not happen in a fixed order. Grief has no timeline, and it can change as a child grows.

Young children often grieve in short bursts. They may cry one minute and play the next. Playing is not a sign that they are done grieving, or that they do not care. It is one way a child keeps from being overwhelmed. The Child Mind Institute, Sesame Workshop, and the Dougy Center all describe this in-and-out pattern as a normal way for children to cope. The Dougy Center also notes that taking a break, having fun, or laughing is not disrespectful to the person who died. It is part of grieving too.

Feelings and behaviors that often show up

- Sadness, worry, anger (even at the person who died), guilt, or anxiety.
- Clinginess, tantrums, irritability, or withdrawal.
- Changes in eating or sleeping, or stomachaches and headaches.
- Asking the same questions, or “playing out” the death.
- Looking or calling out for the person, or sensing their presence.
- Worry about who will take care of them, or about other people dying.
- Being quieter than usual, or not showing much emotion at all — that can be grief too.

These patterns are described by Sesame Workshop, CHOP, the Child Mind Institute, and the National Child Traumatic Stress Network.

Regressions are common

A child who was already using the toilet may wet the bed again. A child may return to baby talk, want a long-outgrown comfort, or ask to sleep in your bed. CHOP, Sesame Workshop, and the Child Mind Institute all describe this as a typical grief response in young children. It is not misbehavior. Extra comfort, a steady routine, and patience usually help more than punishment.

If several of these changes last, get worse, or make everyday life very hard, see “When to get more help.” Grief itself is not a problem to be fixed. Ongoing trouble with sleep, school, eating, friendships, or safety is a reason to bring in more support.

Room for both: happy and sad at once

This is the heart of the book, and it is something grief programs tell families too.

Sesame Workshop reminds grown-ups that it is okay to feel many feelings at the same time — including sadness, anger, and even happiness or excitement. We can miss how things used to be and still enjoy life now. It is okay to laugh when something is funny, or to feel happy when something good happens.

A child may feel guilty for having a good day, or for not crying when a grown-up is crying. You can say something like:

> *"Your heart has room for both. We can miss them and still laugh at a joke. Feeling happy does not mean we have forgotten."*

When you cry, or smile at a memory, you are teaching. The Child Mind Institute notes that children often take their cues from the grown-ups beside them. Showing your feelings — without becoming so overwhelmed that the child feels they have to take care of you — helps them learn that sadness and love can sit side by side.

You might also say the person's name out loud, and share a small memory. The Dougy Center suggests simple lines such as, "Your dad made the best pizza," or, "Your mom really liked this song." Using the name gives the child permission to remember too.

A small way to try this today
At dinner or bedtime, share one memory of the person who died, and one ordinary good thing from the day — a joke, a taste, a kind moment. You are showing, in a quiet way, that both feelings can be at the table.

If a child says, "I shouldn't be happy," or goes quiet after laughing, you can come back to this idea. Hearts take practice to stretch, just as they do in the story. Feeling happy for a moment does not cancel the missing, and the missing does not cancel the love.

Everyday routines

When a death turns a family's life upside down, familiar days can feel like a soft place to land.

The Dougy Center, Sesame Workshop, the Child Mind Institute, and HealthyChildren.org all recommend keeping daily routines as steady as you can — meals, bedtime, school, and after-school rhythms. Routines tell a child, "The world can still be predicted. You are still cared for."

Build in a little flexibility too. The Dougy Center gives a simple picture of this: a child can know that homework is usually done by a certain time, and also trust that tonight, if the feelings are too big, they can take a break and come back to it.

Other steadying things

- Keep the same trusted grown-ups around when you can (Sesame Workshop).
- Offer extra hugs, hand-holding, and closeness. Physical closeness helps children who are afraid of losing you too (HealthyChildren.org, Sesame Workshop).
- Reassure them about who is taking care of them now, and that they will always be cared for (Child Mind Institute, Sesame Workshop).
- Keep ordinary, kind limits. Boundaries help children feel safe (Sesame Workshop).
- If you need time to yourself, ask a relative or friend to help keep the child's day as normal as possible (Child Mind Institute).

Familiar anchors

You will not keep every routine perfectly, especially in the first days. That is all right. A few familiar anchors can be enough:

- The same breakfast, or the same mug or bowl.
- The usual walk to school, the bus, or daycare — and the usual hello at the door when you come back.
- A regular bath and the same bedtime story.
- A small goodbye ritual, such as a hug, a wave, or a phrase you always say.

If a routine has to change because of the death — a different pickup person, a new bedtime place — tell the child ahead of time, in simple words, who will be there and what will stay the same.

Simple things you can do together

These are invitations, not assignments. Let the child lead. If they say no, that is okay. The Dougy Center reminds grown-ups to offer ideas and then respect a “no.”

1. ### A memory box
Sesame Workshop and many grief programs suggest making a memory box or scrapbook. Together, choose a box or folder. Invite the child to put in drawings, notes, a copied photograph, a ticket stub, a button from a favorite shirt, or anything that reminds them of the person. Ask which keepsakes matter to them, rather than choosing for them. For photos, the Dougy Center suggests making copies so a young child can carry one without fear of ruining the original.

2. ### A feelings check-in
Naming a feeling can make it less huge, as Sesame Workshop notes. Once a day, or at bedtime, you might ask: “What color is your feeling right now?” “Is Sunny visiting, or Misty, or both?” “Where do you feel it in your body?” You can use simple faces (happy, sad, mad, worried, calm) drawn on paper or a paper plate. The child points, or draws their own. There is no right answer, and they can pick more than one.

3. ### Drawing, stories, and play
Many children show grief more readily with crayons, clay, or pretend play than with long talks. Sit beside them. You might offer, “Would you like to draw a picture for them, or of a day you remember?” You can also read a gentle picture book about death and grief together. If they want to “play out” what happened, CHOP suggests joining gently and honestly, rather than shutting the play down. Some children would rather run, stomp, or toss a pillow than draw. The Dougy Center treats big-energy play as a valid way to let feelings out, as long as no one gets hurt.

4. ### Special-day rituals
Birthdays, the anniversary of the death, Mother’s Day, Father’s Day, and holidays can be especially tender. HealthyChildren.org and the Dougy Center both note this. Invite the child — without forcing them — to help decide how to mark the day. Families often light a candle and share a memory, cook a favorite meal, visit a meaningful place, plant something, or look at photos and tell stories. The Child Mind Institute also mentions planting a tree or sharing stories as gentle ways to say goodbye, including for a child who does not attend a funeral.

Taking care of yourself

You are grieving too, or carrying someone else's grief while you care for a child. That is heavy work.

The Dougy Center puts it plainly: one of the best ways to help a grieving child is to take care of yourself. They note that how well a child does after a death is linked to how well the adults in their lives are doing. That does not mean hiding your grief. It means making sure you have people and activities that give you comfort, so you have the energy to be present. By getting support, you also show the child a healthy way to care for themselves.

HealthyChildren.org says the same for the youngest children: taking care of yourself while you are grieving will help your child. Accepting help with meals, rides, or a few hours of rest is not a failure. It is part of the care.

A few practical ideas

- Let a trusted friend or relative keep some of the child's usual routines going when you need a break.
- Find a place to talk that is not only your child — a friend, a support group, a counselor, or a faith leader.
- Simple things still count: a walk, a meal, sleep when you can, a little music or quiet.
- If your feelings become explosive, or you cannot care for yourself or the child, that is a sign to get help, not a sign that you have failed.

If you can, look for a place to talk that is meant for caregivers too — not only for the child. Uplift in Philadelphia, the National Alliance for Children's Grief, and the Dougy Center can help you find a group or a counselor. You deserve support of your own.

You do not have to be strong every minute. You only have to keep coming back.

When to get more help

Grief has no deadline. The Dougy Center, Sesame Workshop, and HealthyChildren.org all say this. A child may revisit the loss as they grow, and ask new questions years later. Needing more help is not a failure, and it does not mean the child is "doing grief wrong."

The Dougy Center suggests seeking the advice of a qualified mental health professional if you notice ongoing behaviors that interfere with a child's daily life. They also suggest asking about that person's experience with grief and with children, and about their approach to care.

Talk with your child's doctor if, as time passes, the child has ongoing trouble with:

- Sleep, or getting up for school and regular activities.
- Daily responsibilities, such as schoolwork or chores.
- Eating enough, or stopping when they are full.
- Spending time with family and friends.
- Basic self-care, such as bathing, dressing, or brushing teeth.

These checkpoints come from the American Academy of Pediatrics on HealthyChildren.org.

Get help right away if the child:

- Talks about suicide, about wanting to die, or has a plan.
- Hurts themselves, or you worry they might.
- Shows depression or anxiety that does not ease.
- Gets into fights, or stays very angry.
- Takes more risks than usual.
- For older children: uses drugs or alcohol to cope.

If there is immediate danger, call or text 988, call 911, or go to the nearest emergency room. You can also chat at 988lifeline.org.

The National Child Traumatic Stress Network also describes a smaller group of children who develop what they call childhood traumatic grief, when upsetting memories of *how* the person died get in the way of ordinary grieving — for example, nightmares about the death, or avoiding people, places, or memories connected to it. If a child seems stuck on the frightening parts of the death, a professional who understands trauma and grief can help.

After the death of a parent or sibling, the Child Mind Institute notes that therapy can give a child another place to talk, especially when the rest of the family is grieving too.

Find support

You do not have to do this by yourself. These organizations offer real help for families — local groups, tip sheets, and people who understand childhood grief. Phone numbers and addresses were checked in November 2026; if a number has changed, start with the website.

If you or your child is in crisis

Call or text 988 to reach the 988 Suicide & Crisis Lifeline, or chat at 988lifeline.org. It is free, confidential, and open 24 hours a day.

Uplift Center for Grieving Children

Free grief support for youth and families in the Philadelphia area, including groups for caregivers.
Philly HopeLine: 1-833-745-4673. Main line: 267-437-3123.
https://upliftphilly.org/

National Alliance for Children's Grief

A national network that helps families find a children's grief support center or camp near them, plus a library of caregiver resources.
https://nacg.org/find-support/

Dougy Center, The National Grief Center for Children & Families

Tips, activities, and resources for children, teens, and the grown-ups who love them.
https://www.dougy.org/

Children's Hospital of Philadelphia — Bereavement Program

Guidance for families, including how to talk with a child about death.
Explaining death to a child: chop.edu/health-resources/explaining-death-child
https://www.chop.edu/centers-programs/bereavement-program

More reading that shaped this guide is listed on the next page.

Sources

This guide draws on publicly available materials from the organizations below. Where a wording is offered as something you might say, it is either close to that organization's own sample language, or a plain-language restatement of their advice.

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Sesame Workshop. "How Children Grieve and How to Help." sesameworkshop.org, How Children Grieve.

Sesame Workshop. "Understanding and Explaining Change." sesameworkshop.org, Understanding and Explaining Change.

National Alliance for Children's Grief. Find support: nacg.org/find-support.

988 Suicide & Crisis Lifeline. 988lifeline.org.

Uplift Center for Grieving Children. upliftphilly.org.

A last word

You do not have to do this perfectly. A child who is loved, told the truth, and allowed to feel more than one thing at a time is already being cared for.

from Room for Both, by Twin Garcia

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