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# Identifying Catholic School Teachers Attitudes and Perceptions about Death and Grief

Death and Grief are not frequently discussed with children as a normal part of life. Previous studies show that teachers are not comfortable discussing the subject in the classrooms. As a trusted source, school nurses are able to help school staff recognize potential signs and symptoms of death and grief with a student dealing with a loss, providing information, educational resources and support.

The purpose of this study was to identify the attitudes and perceptions about death and grief of Catholic School teachers working among elementary school age children kindergarten through eighth grades. A convenience sample of 47 teachers from three Catholic schools located in Northern California were approached and participated in the project. Using a Likert type scale, an anonymous survey about death and grief attitudes and perceptions was given to teachers at a regular staff meeting. Results indicated that the teachers were comfortable discussing death and grief with their students, but were not completely confident in locating information about death and grief or integrating it into the classroom curriculum. In order to help children deal more effectively with death and loss, school nurses need to be more aware of how school staff deal with death and grief, and provide support and resources when needed.

KEY WORDS: bereavement, death, elementary teachers, grief, mourning

Identifying Catholic School Teachers Attitudes

and Perceptions about Death and Grief

A Research Project

Presented to

The Faculty of the School of Nursing

San Jose State University

In Partial Fulfillment

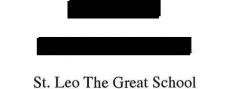
Of the Requirements for the Degree

Master of Science

By

Stephania Ann Higdon

May 17, 2006



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#### Abstract

Death and grief are not frequently discussed with children as a normal part of life. Previous studies show that teachers are not comfortable discussing the subject in the classrooms. As a trusted source, school nurses are able to help school staff recognize potential signs and symptoms of death and grief with a student dealing with a loss, providing information, educational resources and support.

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#### Introduction

The death of a loved one can dramatically impact a family, producing an aching pain of grief lasting for many years. Unfortunately, the topic of death and grief is frequently not addressed with children in our society (Fitzgerald, 2000). Kirwin and Hamrin (2005) state that when a child loses a parent to death this is considered a significant and stressful event in the life of the child as well as the family. This in turn affects many aspects of a child's world such as self-concept, health, social, and economic conditions (Steen, 1998).

Embracing loss and grief as a normal part of life and providing a means for children to cope with loss and grief can be effectively addressed in an educational setting (American Hospice Foundation, 2005). Children need adult assistance to help move through the grieving process; yet some educators report feeling anxious or inadequately prepared to discuss death and grief with students in the classroom (Mahon, Goldberg, & Washington, 1999; Steen, 1998). Educators need to learn to effectively address their own attitudes, feelings, and thoughts about death in order to help children understand death and grief as an integral part of the life cycle (Cunningham & Hare, 1989; Fredlund, 1977).

Turner (1996) states that "school is where we equip children for life, and loss is a part of life" (p.1). The purpose of this study is to identify the attitudes and perceptions about death and grief of Catholic School teachers working among elementary school age children enrolled in kindergarten through eighth grades. According to Steen (1998) the operational definition of bereavement is "the state of having lost a significant other to death; grief is the personal response to the loss; and mourning is the public expression of a loss" (p. 54).

In the United States today, children do not hold the same views of death as those of children from past generations (Charkow, 1998). Many older adults may remember first hand

how their family dealt with death. Families cared for each other at home providing assistance to the family member who became ill or was dying. This allowed children to learn family rituals surrounding death, including how to mourn. Past generations appeared to embrace death as a 'normal' part of life, whereas present generations, however well intentioned, avoid the subject (Charkow, 1998). As society becomes more culturally diverse, an appreciation and understanding of how children and families respond to the loss of a loved one needs to be considered, because cultural differences may influence and dictate how children understand death. (Hanna, 1996; Scholzman, 2003).

Steen (1998) suggests that children need adult assistance in order to move through the grieving process. In a society that tries to avoid death, children need to learn how to handle death when it happens in their families; teaching children how to talk about death before it happens, and learning how to use the language of death can help children accept the reality that death really does happen to everyone (Naierman, 1997; Fredlund, 1977).

#### **Literature Review**

Losing a parent to death is one of the most painful and stressful events for children, noting that children under the age of 15 will lose one or both parents due to death (Steen, 1998). Harris-Lord (2005) found that before the age of ten, one out of every seven children will lose a parent to death. Black (2005) reported that about 15 per cent of the deaths in the United States take place in households with school age children, and Kirwin and Hamrin (2005) stated that an event as traumatic as losing a parent can produce severe psychological distress in children and their families. Goodman (2002) asserts between 10-15 percent of children are at risk for adjustment problems and may experience depression following the death of a parent. However,

after one year these children usually begin to adjust emotionally, returning to a healthier state at home, with their friends, and improved performance in school.

Teachers are role models for students but often feel uncomfortable and inadequate discussing death and grief in the classroom (Reid & Dixon, 1999). It is important to stress how teachers can help children when they experience a loss, since it is likely that at some time a child in the classroom may be grieving over the death of a loved one (Black, 2005). In an environment with increasing loss and violence, teachers are dealing with a greater number of grieving students (American Hospice Foundation, 2005). The National Vital Statistics Report stated that a total of 172 children between 5 and 18 years of age (between 1994 and 1999) died from being on or near school property or at school related activities (Anderson & Smith, 2003).

Reid and Dixon (1999) surveyed elementary and middle school teachers, teaching assistants, counselors, librarians, and clerical staff validating the discomfort teachers felt discussing grief in the classroom. Reid and Dixon (1999) found that 61 percent of the respondents had previously discussed death with their students, but that 54 percent felt *minimally prepared* to handle the subject based on their level of preparation and training. Only 18 percent of the respondents believed that their academic preparation was adequate, and 27 percent felt *completely unprepared* to address the subject of death with students in a formal learning experience. This study also addressed teacher comfort level dealing with specific deaths. A majority of teachers reported some level of uneasiness discussing the death of a parent or sibling with a student.

Mahon, Goldberg, and Washington (1999) recognized understanding required to intercede with a child when they suffer a profound loss. A group of teachers including education student's from three universities were examined concerning their attitudes and beliefs in a

survey to see how death was addressed in the classroom. The school teachers came from 12 elementary and middle schools representing a cross section of various socio-economic backgrounds from both private and public schools. Findings from the study showed that 75 percent of teachers and education students believed that death-related interventions should be part of the school curriculum, however, participants who did not respond felt discomfort in discussing death and stated this was the reason they did not finish filling out the survey.

A child may die at the elementary school level, suddenly and accidentally or after a short or prolonged illness. Although the circumstances will help guide one in how to approach such a death, the death of a classmate should not be ignored; a teacher may wish to collaborate with the school nurse, counselor, psychologist or a social worker (Fredlund, 1977). Studies have found that most teachers need assistance in successfully dealing with death in the school setting (Hare & Cunningham, 1988; Lowton & Higginson, 2003; McGovern & Barry, 2000; Papadatou, Metallinou, Hatzichristou & Pavlidi, 2002; Reid & Dixon, 1999).

Educators and school nurses need to begin addressing the topic, of death and grief. Several authors believe providing assistance to teachers would be helpful for addressing death and grief in the classroom (McGovern & Barry, 2000; Molnar-Stickels, 1985; Reid & Dixon, 1999; Steen, 1998; Rublee & Yarber, 1983) to assist teachers feel more adequate and comfortable dealing with grief in the classroom (Hare & Cunningham, 1988; Naierman, 1997).

Health care professionals, in particular school nurses, provide that valuable link in schools between teachers and students (Braund & Rose, 2001). Nurses are positioned within the schools to advocate for crisis intervention and preventative mental health services and may be the only source giving factual information and caring assistance (National Association of School Nurses, 2005; Schonfeld,1993).

In California, the educational system beginning in kindergarten through eighth grade mandates teaching the concept of life stages from infancy to old age (California Department of Education, 2003). Public school educators do have the Health Framework for California Public Schools available as a resource in the classroom (California Department of Education, 2003). However, it is challenging to find any specific information about death and grief for kindergarten through sixth grade cited in the framework. The same challenge is evident in the curriculum for older children. Beginning in middle school and continuing throughout high school, mental health issues are mentioned in the curriculum; however, there is no specific information to help guide a teacher to discuss death and grief in the classroom.

A literature search was conducted to identify studies that discussed death and grief in Catholic or parochial schools, but specific literature was not located. Information was eventually identified and located through a personal conversation with a religious teacher at a local Catholic school, (J.-Moody, personal communication, November 22, 2005). Mrs. Moody stated that nothing exists in the current curriculum to teach children specifically about death and grief however, when the opportunity arises within the school community, teachers will use the opportunity to discuss the issue with students within their grade level.

The Catholic Schools, beginning in the fifth through the eighth grade, integrate the sacraments of the Catholic church including the anointing of the ill and the sick and the viaticum or 'last rites' into the curriculum; students are taught to pray for ill and deceased persons as part of the family life curriculum (Fragomeni, Gallagher, Goggin & Horan, 2004). Both of these sacraments are usually taught from a more academic context, although the emphasis does include a strong Catholic theological and spiritual foundation (J.-Moody, personal communication, November, 2. 2005).

#### **Theoretical Framework**

Children, like adults, need time and understanding to process death and dying; however, the process is expressed much differently in children than in adults (Willis, 2002). It is important to explore how children experience the grieving process, noting some of the differences separating children's grief and adult grief, in order to provide helpful insights to parents and caregivers (Willis, 2002). Multiple circumstances can significantly influence a child's concept of death such as age, personality, stage of development, previous death experiences, past relationships with the deceased, the cause of death or communication within the family (Cullinan, 1990).

McGlaufin (as cited in Willis, 2002) found that children grieve in cycles. Grieving in children is addressed and readdressed at different developmental stages. They revisit previous feelings and behaviors related to the grief response especially at significant milestones in their life. High school, college graduations, marriage or birth of a child can precipitate these feelings. Secondly, while adults may be more articulate in expressing their grief, children may not display their feelings as openly as adults, may be confused, and may not really understand what or why they feel a certain way. Another difference is the concept of time. Children usually do not have the same concept of time as adults and don't always understand that feelings of loss or grief will lessen with time (Willis, 2002).

Piaget's theory of development and learning identifies four developmental stages through which children normally progress systematically; sensorimotor stage, preoperational stage, concrete operation stage, and formal operation stage. Disequilibrium occurs when children experience a loss in their lives (Piaget, 1972). Children must be able to integrate the new change before reaching accommodation, thus attaining equilibrium again in their lives.

Because the death of a parent is so difficult, often children experience discomfort and awkwardness, leaving them to feel lonely and unsure of how peers and adults expect them to respond to their loss. Depending on the nature of that loss and their developmental age, children will differ in their response to grief (Schlozman, 2003). Willis (2002) found varying responses from children which may make it necessary to consider questions such as: Was death anticipated or sudden? What was the relationship of the child to the deceased? Does the child understand what dying means? What kind of support will the family provide? Is the child allowed to mourn?

#### Methodology

This study was a descriptive non-experimental survey designed to identify Catholic School teachers attitudes and perceptions about death and grief working among elementary school age children within three Catholic schools in Northern California. Teachers' attitudes concerning death and grief were measured by using a twelve-question Likert-scale survey and a demographic questionnaire. Demographic information including age, gender, highest education level and grade taught in school were collected. An introduction letter was personally delivered to each principal to describe the study and to request time to attend a staff meeting to administer the survey to the staff in each participating school. Before data were collected, the study was reviewed and approval obtained from the university institutional review board (IRB), and the Catholic school principals. Following this approval, a staff meeting was attended at each school where teachers were invited to participate in the study, a consent form was reviewed, signed and the survey was then completed. To ensure the return of as many surveys as possible, the surveys were distributed and collected the same day. Maintenance of confidentiality was insured and, no identifiable participant information was obtained in the questionnaire.

#### Subjects and sampling

A convenience sample of 47 elementary school teachers, kindergarten through eighth grade, participated in the study. Ages ranged from 24-73 years; with the predominant age groups between 40-59 years. Four participants had some college, 42 were either bachelor or masters prepared and one person was doctorally prepared. Thirty-nine (83%) females and 8 (17%) males participated. Although this project is not comparing private schools with public schools, both public and private Catholic schools appear to address death and grief more from an academic context, yet have a very different philosophical approach and theological purpose when dealing with death and grief in the classroom. The majority of teachers indicated having a Catholic background.

#### Instrument

An untitled survey developed by Linda Molnar-Stickels (1985) was used to measure the comfort level of elementary school teachers when discussing death in the classroom. The Journal of School Health, publisher of the article that contained the survey tool, provided written permission to use information from the article, including the tool, specifically for this research project. The four-question survey was then combined with eight additional researcher questions developed and submitted to five credentialed expert school nurses for evaluation and recommendations. Recommendations were received from four out of the five school nurses and implemented in the survey. The questions were then organized into a Likert scale questionnaire designed to identify and elicit information from Catholic School teachers about their attitudes and perceptions regarding death and grief working among school age children in the classroom. Teachers preferences were indicated as 1-strongly agree, 2-agree, 3-neutral, 4-disagree, and 5-strongly disagree. Twelve questions (table 1) were included in the first part of the survey.

The second part of the survey was designed to elicit basic demographic information from the teachers about age, gender, education and grade currently taught, along with their own personal experiences with death and grief. The participants were selected for convenience, and availability and willingness of the agencies to participate in this research project. It was anticipated the participants would be more sensitive to or aware of this topic as educators in a parochial school setting.

#### **Data Analysis**

Due to the small sample size, descriptive statistics were selected to analyze the data. A frequency distribution, means and standard deviation were used. No comparison of the data was intended or collected during the research. Data was collected to gain information for future inservices regarding death education topics.

#### Results

Table 1 delineates the responses to the survey questions 1 through 12. Forty -one of the responders either strongly agreed or agreed that they would talk to a child about the topic of death. Six responded as neutral and one disagreed. Talking to a child about his/her imminent death (question 2), resulted in 32 participants responding either strongly agree or agree, and 7 respondents identified the neutral response and 8 disagreed. Thirty-two of the respondents indicated they would be comfortable teaching the topic of death education. Twelve were neutral and only 3 disagreed that they would be comfortable teaching this topic.

In response to question 4, teachers would hide the death of a classroom pet, the majority of participants indicated a disagree (n=14) or strongly disagree (n=30). Question 5, feeling comfortable talking to a child about the death of a parent, received 35 strongly agree or agree responses (table 1), 7 were neutral and 4 disagreed.

Questions 6 and 7 addressed talking to a child about the death of a sibling or a grandparent, had the same responses for strongly agree (n=16), agree (n=27) and neutral (n=4). The respondents indicated a high level (strongly agree=23; agree=22) of comfort in preparing students to help another student suffering loss. Responses to having spontaneous classroom discussions on death (question 9) and addressing death and dying in the classroom (question 10) were mixed. Although the majority of responses were strongly agree and agree (see table 1), there were also several neutral responses (n=7 for question 9 and n=10 for question 10).

The teachers responded agree (n=23), neutral (n=13), and disagree (n=7) to knowing how to access information to help with classroom discussions. Only 3 respondents strongly agreed that they would know how to access information. Participant responses to question 12 that addressed integrating information about death and grief into the curriculum ranged from strongly agree (n=5) to strongly disagree (n=2). Twenty-two of the responders indicated neutral or disagree, and 18 agreed that they attempt or would attempt to integrate this topic into the curriculum.

Questions 13-16 solicited answers concerning age, gender, highest education level attained and grade in school currently taught. Questions 17-20 solicited answers abut personal experiences with death and grief. In response to question 17, 46 out of 47 participants (98%) stated that they had experienced the death of someone close to them. Responses to question 17A, when the death occurred ranged from one year ago to 42 years ago. Responses to question 17B, what relationship were they to the person who had died were immediate family (n= 23), extended family (n= 17), and other (n= 6); with *other* including persons close to the participants, but not immediate or extended family. Responses to question 17C, regarding how difficult the experience was to lose someone close to them was not very difficult (n= 5),

difficult, (n=17), extremely difficult, and life changing (n= 9); responses to question 17D, on how long they grieved the loss were none (n= 4), 3 months (n= 8), 6 months (n= 4), more than a year (n= 6), and ongoing (n= 22). The responses to question 18, closeness to a person who died but they did not mourn were yes (n= 16), no (n= 28), and no response (n= 3). Questions 19 -20 involved asking about classroom experiences surrounding death of a child (n= 5), death of a child's parent (n= 23) or the death of an adult other than a parent (n=33), divorce (n= 45), and custody changes (n= 34). These questions were included to show that other types of loss can occur with grieving.

#### Limitations

A limitation of this study is the small sample size, making it impossible to generalize the results to other schools. Another limitation was the inclusion of teachers from three private Catholic schools. Public, private, and other secular, and religious school teachers were not part of this study and may have provided more opportunities to make thoughtful comparisons.

Although the survey was reviewed and evaluated by current school nurses, there remains some concern as to whether or not the meaning of the questions were clear to all participating teachers. Several teachers voiced confusion when answering certain questions, asking for clarity while completing the survey, however, the participants appeared to have honestly self reported their responses in this project. Further review of how instructions were given prior to completing the survey and/or review and revision of the survey may be needed before distributing it again.

#### Discussion

Findings from the survey indicate that Catholic School teachers have dealt with death and grief from a personal standpoint. Ninety-eight percent (46) of participating teachers reported experiencing the death of someone close to them whether it was an immediate, an extended family member or others. Eighty-seven percent (41) described the death experience as being difficult, very difficult, or life changing while sixty percent believed that grieving lasted more than a year or was ongoing. Do past death-related experiences affect teachers' perceptions and responses when approaching grieving students? Several studies found that depending how a teacher frames their attitudes towards death communication will be affected between a teacher and child (Cunningham and Hare, 1989; Fredlund, 1977). Papadatau, Metallinou, Hatzichristou, and Pavlidi (2002) suggest that a teacher's previous personal experiences with death affects a teachers' perception and responses to a grieving student were not conclusive and further research in this area is needed. Although this study did not directly address this question findings indicted that teachers past death related experiences may possibly affect how teachers approach grieving students.

When reviewing findings from each school, the individual and group means were consistent yielding no significant differences between the three schools identified (see Table 1). Based on the findings from this study the teachers indicated a positive awareness and sensitivity towards death and grief, and appear comfortable addressing the subject of death and grief in the classroom. These findings are not consistent with previous studies. Only a few studies depict teacher's attitudes and responses towards grieving children and teaching death education in a formal classroom setting (Cullinan, 1990: McGovern & Barry, 2000; Papdatou et al., 2002; Reid & Dixon, 1999).

Further review of the data indicated that approximately fifty percent of the teachers were either neutral or disagreed with how to access information to help with a classroom discussion on death and grief or how to integrate information about death education into the classroom curriculum. While it is usually preferable to take advantage of a spontaneous discussion on death and grief within the classroom, integrating lessons into the curriculum is recommended (American Hospice Foundation, 2005; Jackson & Colwell, 2001; Schonfeld, 1996). Questions were not included in this project asking teachers about how well prepared they felt with their academic training to handle the topic of death and grief in the classroom, whether it was a spontaneous discussion or integration of the topic into curricula. Follow up questions may reveal more insightful information.

#### Conclusion

As a society we may have lost the ability to teach our young how to view death and grief as a normal and healthy part of life. Instead of addressing the topic as part of a life continuum, society attempts to deal with death after it happens (Charkow, 1998). This practice deprives children of knowledge about an integral part of life (Fredlund, 1977; Harris-Lord, 2005).

It is impractical to try to hide death from children since they are exposed to it indirectly without actually witnessing the event (Charkow, 1998). Children encounter loss in a variety of expected and unexpected ways, such as the death of a loved one or a friend (due to accident, homicide, illness, or suicide), divorce, moving and loss of friends, changing schools, or the death of a pet (Garrett, 1998; Turner, 1996).

The results of this study indicate that the attitudes and perceptions of teachers in three Catholic elementary schools perceive death and grief as appropriate topics for classroom discussion, but still feel ambivalent about how to locate information on the topic and/or

integrating the information into the curriculum. Further research should be encouraged and carried out within the public schools, other private religious, and secular schools to make generalizations or assumptions from this project. Recommendations to explore further questions as to how teachers learned their coping skills, such as through a personal experience, taking a class or seminar on grief, or through cultural or family traditions would be helpful. Current data is also needed to gather statistics about the actual number of children grieving. The data that is available is difficult to locate and is outdated.

#### **Implications for School Nursing Practice**

To identify methods to assist grieving children, it is important to understand how a child perceives death and to consider the child's age and developmental level (Busch & Kimble, 2001, Charkow, 1998; Riely, 2003). Grief may present itself in children as sadness, anger, or an inability to focus on schoolwork impacting a child's readiness to be able to concentrate and learn at school (Corr, 2000). Behaviors at school may be seen as inappropriate in the classroom, such as directing anger towards the teacher or classmates. Often when children express anger they are mistakenly labeled as presenting behaviors that are unstable or inappropriate, and as a consequence they may receive punishment for such behaviors instead of receiving support for their grieving process (Reily, 2003). There is a need to provide assistance to teachers dealing with death and grief (Dougy Center, 2003). School nurses can be a resource and support providing educating resources to help educators recognize the signs and symptoms of potential mental health problems (National Association of School Nurses, 2005).

School nurses can help children succeed in school through early identification of problems that could lead to school failure, and nurses are in the unique position to help advocate for mental health services, to ensure that death and grief education is available in the schools

(National Association of School Nurses, 2005; Schonfeld, 1993). In dealing with death and grief education school nurses must be ready to support teachers and other school staff members, providing appropriate information when a situation arises (Schonfeld, 1996).

Unhealthy behaviors are exhibited if children are not allowed to adequately mourn during the grieving process (Dowdney et al., 1999; Naierman, 1997; Osterweis, Solomon & Green, 1984; Papenbrock & Voss, 1998; Saler & Skolnick, 1992). Bereaved children are easily affected emotionally resulting in long-term negative outcomes, such as depression and nonadaptive behavior (Osterweis et al., 1984). Researchers from the National Institute of Mental Health studied adults who suffered a childhood loss of one or both parents and found that participants were more vulnerable to depression than the general population. Those children that who did not receive quality care and support from a surviving parent, showed a strong predictor towards adult psychiatric illness (Breier et al., 1988). School nurses have the training to provide on-going assessment, intervention and follow up and/or community and referral resources needed for physical and mental health problems in the school setting (National Association of School Nurses, 2005). With this training, school nurses can collaborate with teachers to help identify grieving children in the classroom.

School age children in various developmental stages need a safe and supportive environment where feelings can be shared, and acceptance of their mood swings, encouragement to participate in a support group, and in flexibility completing school assignments (Dougy Center, 2003). These behaviors and feelings are expected and need to be planned as part of the classroom curriculum for a normal and healthy grieving process. School nurses should be part of the process. Within the school environment, school nurses serve on curriculum committees, student study teams, and crisis intervention teams, while part of the

larger community, school nurses have knowledge of community resources, serving as a liaison between the family, school, and mental health provider (National Association of School Nurses, 2005).

To help children with their grief, it is important to assess the needs of teachers to find out their own personal attitudes and perceptions with death and grief and to provide them appropriate resources when needed. Part of being effective professionals, both educators and school nurses will need to effectively address their own attitudes, feelings and thoughts about death to help children understand death and grief as an integral part of the life cycle. School nurses should be ready to help support teachers in dealing with death and grief in the classroom and are positioned within the community and school environment to advocate for mental health services (National Association of School Nurses, 2005). Helping teachers see the importance of discussing these topics with children in a preventative capacity will allow the school nurse to lend the direct support needed when tragedy occurs (Schonfeld, 1996).

As a trusted and respected sources within the school setting, school nurses can provide in-service programs for teachers. The importance of presenting a brief in-service program or workshop has been shown to provide practical ways to teach educators about death and grief when supporting grieving children (Jackson & Colwell, 2001). Collecting the information from teachers about their attitudes concerning death and grief will help school nurses evaluate the usefulness of in-service or educational programs. Teaching about death should not be looked at as a separate topic but viewed as a natural extension of what is already being taught (American Hospice Foundation, 2005; Jackson & Colwell, 2001; Schonfeld, 1996). Encouraging classroom discussion about death and grief provides students the opportunity to learn how to develop healthy coping skills (American Hospice Foundation, 2005).

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# Identifying Catholic School Teachers Attitudes and Perceptions about Death and Grief

Death and Grief are not frequently discussed with children as a normal part of life. Previous studies show that teachers are not comfortable discussing the subject in the classrooms. As a trusted source, school nurses are able to help school staff recognize potential signs and symptoms of death and grief with a student dealing with a loss, providing information, educational resources and support.

The purpose of this study was to identify the attitudes and perceptions about death and grief of Catholic School teachers working among elementary school age children kindergarten through eighth grades. A convenience sample of 47 teachers from three Catholic schools located in Northern California were approached and participated in the project. Using a Likert type scale, an anonymous survey about death and grief attitudes and perceptions was given to teachers at a regular staff meeting. Results indicated that the teachers were comfortable discussing death and grief with their students, but were not completely confident in locating information about death and grief or integrating it into the classroom curriculum. In order to help children deal more effectively with death and loss, school nurses need to be more aware of how school staff deal with death and grief, and provide support and resources when needed.

KEY WORDS: bereavement, death, elementary teachers, grief, mourning