How can I talk with my child about the fact that a loved one is very sick and may not survive?

- If at all possible, calm yourself before talking to your child; take some slow, deep breaths. Children take their cues from adults’ emotional reactions. You don’t have to make yourself look “normal” to your child, or even be able to talk without crying, but calming yourself down enough that you are able to pay attention to your children’s reactions will be helpful to them.

- Take some time to think about what you will say. Some parents even write notes for themselves.

- If your conversation should happen soon, but need not happen immediately, consider whether a certain time of day might be better than another. It will likely never feel like a good time to share bad news, but perhaps there are times when there are fewer distractions, when you can spend as much time with your children as they need, when they are not hungry or tired.

- If you are checking in with a child who you think already knows what is happening, try to find out about the child’s understanding of the events, and address any worries or misunderstandings. Or, if there have been changes at home that are obvious to the child, you might start by asking what they have noticed has been going on, or has been different, and why they think that is happening. Both of these strategies help you assess how children are explaining things to themselves, which you can then either correct, or build on.

- If your child has witnessed your distress, acknowledge your feelings and share why you were feeling that way.

- Provide a simple explanation of what is happening that starts with what they noticed and describes what has happened recently and is happening now.

- Share your understanding of what will happen soon (in the next several days). If a loved one is likely to die, be honest about this, as painful as it is.
• Often, you will not have all the facts, so let your child know that more information will be available later. Try to describe what is known and what is not yet known, focusing on the details that will matter most to your individual child.

• At every point, look for ways for the child to feel a sense of control over the situation-through offering choices about how much information they want to hear going forward, or ways they can manage feelings, or opportunities to be helpful. This will of course be different depending on how the loved one is doing.

• When talking about your own or others’ reactions, try to use words that are truthful but also lower emotion. Especially for younger children, words like “upsetting,” “scary,” “very, very sick,” are better than words like “horrifying,” “totally awful,” or “devastating.”

• Children have a wide range of reactions to these conversations, depending on their ages and personalities. Some become emotional, some ask a lot of questions, and some want time with adults to snuggle or just sit together. Others do not say much or ask questions, ask to go back to playing or retreat to their own rooms, or may not even seem to fully take in the news. You know your own child best- trust your instincts in deciding how best to comfort them right away and in coming days. Let children know you will continue to check in with them, and that you want them to come to you with any and all feelings, questions, or worries.

Finding the words to talk about serious illness

Sometimes parents we work with in the MGH Cancer Center and ALS clinic ask us to write down a “script” to help them talk with their children about difficult news. Of course, there is no one correct way to talk about illness and death with all children, but sometimes examples can make it easier to imagine how to say things to our own children in ways that they can understand. In that spirit, we offer some suggestions for talking.

Start by asking what they have noticed has been going on, or has been different, and why they think that is happening. This helps you assess what they understand, which you can then either correct, or build on. If your child has witnessed your distress, acknowledge your feelings and share why you were feeling that way.

• “You’ve been seeing my worried face and noticed I seem grouchy lately. You’ve been thinking I’m upset about your math grade/fight with your brother/frozen computer.”
• “You might have also heard me talking to Grandma and wondered what’s happening.”

Provide a simple explanation of what is happening that starts with what they noticed and describes what has happened recently and is happening now.

• “I’ve been worried and talking to Grandma a lot because a couple of days ago Grandpa started to feel sick. He was coughing and had a fever.”

• “Now we think/know that he probably/definitely has the COVID-19 virus.”

• For mild illness: “Right now, Grandpa feels achy and really tired and is staying in bed all day. Grandma is taking care of him at home and also taking good care of herself so she can stay healthy. They are talking to their doctor a lot and doing what she tells them.”

• For more advanced illness: “Right now, Grandpa is feeling very, very tired and is running a fever. He’s also feeling short of breath- kind of like after you’ve run really fast and are breathing hard (or like when you have an asthma attack), but he feels that way even when he is lying in bed. The doctor said that the coronavirus affects people’s lungs.”
  
  o Lungs are a part of our body inside our chest. They help us breathe/help our bodies use the air we breathe, just like our stomachs help us use the food we eat to stay healthy.

  o We need oxygen to live, and we need healthy lungs to get the oxygen we need. Grandpa’s lungs aren’t working well now, and it seems that they are getting worse.”

Share your understanding of what will happen soon (in the next day for young children, to several days to weeks, for older children).

• “Hopefully Grandpa will start to feel better in the next week or so. I’ll let you know how he’s doing when I get updates.”

• “Grandpa’s doctor wants him to go the hospital /Grandpa was moved to the hospital where he will be cared for by a whole team of doctors and nurses. We hope that they will be able to give him medicines and treatments to help him heal. One hard part of this is knowing that we/Grandma won’t be able to visit him because the hospital is trying to do their best to keep everyone safe by keeping the number of people coming there as small as possible. Fewer people means there is less chance that the virus can be shared by accident. Even though we can’t visit, we can talk to Grandpa on his phone and text him. I know how much it would mean to him to hear from you.”
“Even in the hospital, Grandpa has continued to be very, very sick and now is having a very hard time breathing because his lungs have been damaged by the virus. The doctors have a machine called a ventilator that can help him breathe. Using a ventilator to help with breathing is hard work/is uncomfortable so the doctors will give him medicine that makes him sleep. We are hoping that having this breathing help will give Grandpa’s body time to fight the virus and his lungs time to heal so he can breathe on his own again. We will be checking in with his doctors every day.”

“Even though the doctors and nurses at the hospital have been doing everything they can to help Grandpa get better, he is getting sicker. He is still having trouble breathing and now other parts of his body aren’t working well either. There is a good chance that even with everyone’s best efforts, he might not live very much longer. It’s possible/likely he could even die in the next few days/as soon as today or tomorrow.”

Let your child know you will follow up with him in coming days and that you want him or her to come to you with any and all questions or concerns. Choose follow-up times when children are more likely to share feelings (bedtime, car rides and doing side-by-side activities are often good times for talking).

“If you overhear more, or learn more about this on your own, or have questions, will you let me know?”

“Please don’t ever worry alone.”

“What else have you been noticing/have you seen and heard?”

“What else have you learned about this?”

“What are you wondering or worrying about?”

“If __________ (a familiar adult) asked about what happened, what would you tell her?”

“If __________ (a peer or sibling) asked you what happened, what would you tell him?”

“What is scary or confusing about this?”