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Grieving Your Child Clinical Practice Workbook

A clinically branded, function-preserving edition retaining the original exercises, psychoeducation, checklists, logs, planning tools, and response space.

DSM-5-TR · ICD-11 CLINICAL ALIGNMENT

1 · Expressing Your Emotions

2 · Writing a Letter to Your Child

3 · List of Cherished Memories

4 · Dealing with Guilt and Regret

5 · Talking to Others About Your Child

6 · Understanding and Coping with Anger

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How to use this workbook

- Use this workbook selectively and collaboratively; it is educational and does not replace individualized assessment, diagnosis, treatment, medical care, or crisis services.
- Skip, pause, or modify any activity that increases distress, danger, shame, or loss of functioning. Adapt language for culture, disability, neurodivergence, health, resources, and lived context.
- Ratings in this workbook are reflection tools unless a named, validated measure and interpretation are explicitly provided.

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Expressing Your Emotions

1. What emotions are you experiencing as a result of losing your child? (e.g., deep sorrow, anger, disbelief, guilt, emptiness, confusion, or fear)

2. How do these emotions manifest in your daily life? (e.g., difficulty getting out of bed, loss of interest in activities, emotional numbness, or physical symptoms such as headaches or fatigue)

3. What emotions are the hardest for you to express openly? (e.g., anger, guilt, fear of the future, hopelessness)

4. How have your emotions shifted over time? (e.g., fluctuating between deep sadness and numbness, moments of anger or relief)

5. What situations or events trigger intense emotions related to your grief? (e.g., seeing children of similar age, important dates like birthdays, specific locations, memories)

6. How do you typically respond when these triggers arise? (e.g., do you withdraw, cry, feel numb, or avoid certain places or people?)

7. What strategies have you used to cope with these emotional triggers? (e.g., talking to someone, avoidance, distraction, embracing the emotions)

8. What creative outlets can help you express your emotions? (e.g., journaling, painting, writing letters to your child, scrapbooking memories, creating a memory box)

9. Have you tried using art, music, or writing to process your emotions? If so, how did it feel? (e.g., did it bring relief, clarity, or feel overwhelming?)

10. How comfortable are you talking about your grief with others? (e.g., do you avoid conversations, feel a sense of relief after sharing, or feel misunderstood?)

11. Who are the people in your life that you feel safe expressing your grief to? (e.g., a close friend, family member, therapist, or support group)

12. What makes it difficult for you to talk about your emotions? (e.g., fear of burdening others, not knowing how to begin, worrying that others won't understand)

13. What emotions or thoughts do you wish you could express but haven't been able to? (e.g., the depth of your pain, how much you miss your child, your fears for the future)

14. What would help you feel more comfortable sharing your emotions with others? (e.g., a trusted listener, a safe and private space, knowing that it's okay to express difficult feelings)

15. How do your emotions manifest physically? (e.g., tension in your body, changes in sleep patterns, feeling heavy or fatigued)

16. What physical activities help you release some of the emotions you're holding? (e.g., walking, yoga, dancing, punching a pillow, deep breathing)

17. If your emotions had a voice, what would they say right now? (e.g., "I'm hurting," "I miss my child," "I don't know how to move forward")

18. How can you create a safe space for yourself to explore these deeper emotions? (e.g., setting aside quiet time, finding a trusted person to talk to, creating rituals for reflection)

Writing a Letter to Your Child

Writing a letter to your child can be a powerful way to express your thoughts, feelings, and memories after their passing.

1. Write a letter to your child to communicate what might have been left unsaid and share your grief. Use the following prompts or write your own:

I miss you more than words can express, especially when...

I wish we had more time together to...

I regret that I didn't get to tell you...

I wish I could go back and do more of...

If I could change anything, it would be...

I wish you could forgive me for...

One of my favorite memories with you is when we...

I love you so much, and I always will...

List of Cherished Memories

1. What are some of your most cherished memories from your child's early years? (e.g., their first steps, their first word, holding them for the first time, a special milestone like their first birthday)

2. Do you remember any special moments from when your child was a baby that brought you immense joy? (e.g., their first smile, rocking them to sleep, hearing them laugh for the first time)

3. Were there any early milestones or developmental moments that you celebrated with your child? (e.g., their first day at preschool, learning how to walk or talk, potty training successes)

4. What were some of the early habits or quirks your child had that you loved? (e.g., the way they clutched their favorite blanket, their first attempts at saying words, their special way of cuddling)

5. Are there particular family traditions or routines that you shared with your child that stand out in your memory? (e.g., Saturday morning pancakes, holiday movie nights, playing outside after school)

6. What were some of the small but meaningful moments that you remember the most? (e.g., sharing a quiet moment while cooking, tucking them in at night, walking hand-in-hand)

7. What were some of your child's favorite daily activities that brought both of you joy? (e.g., playing with their favorite toys, coloring, building with blocks, or singing their favorite songs)

8. What are some major milestones or achievements your child reached that made you especially proud? (e.g., their first day of school, a sports or academic achievement, learning to ride a bike)

9. What are some of the funniest memories you have with your child? (e.g., a funny thing they said, an inside joke, a moment when their laughter was contagious)

10. What are some of your fondest memories of family vacations or trips with your child? (e.g., a trip to the beach, visiting grandparents, camping trips, theme park adventures)

11. What was something unique or special about your child's personality that you remember fondly? (e.g., their curiosity, their sense of humor, their compassion, their adventurous spirit)

12. What were your child's favorite hobbies or activities? (e.g., drawing, reading, playing a sport, collecting something, listening to music)

13. How has your child left a lasting impact on your life, even in their absence? (e.g., through the lessons they taught you, the joy they brought into your life, the memories that continue to shape you)

Dealing with Guilt and Regret

1. What specific feelings of guilt or regret are you experiencing since your child's passing? (e.g., "I wish I had spent more time with them," "I should have done more to protect them," "I failed them in some way")

2. When do these feelings of guilt or regret tend to surface most strongly? (e.g., during quiet moments, when seeing reminders of your child, on anniversaries or special dates)

3. Are there particular moments or actions related to your child's life or passing that trigger your feelings of guilt or regret? (e.g., a decision you made, a moment you weren't there, something left unsaid)

4. Are your feelings of guilt tied to unrealistic expectations you placed on yourself as a parent? (e.g., believing you should have been perfect, expecting yourself to control every aspect of your child's life)

5. When you reflect on the events surrounding your child's passing, are there factors beyond your control that contributed to what happened? (e.g., illness, accidents, external circumstances that you had no power over)

6. Can you identify moments where you did your best, even if things did not go as you wished? (e.g., decisions you made with care and love, efforts to support your child even if the results were not what you hoped for)

7. What self-critical thoughts do you find yourself repeating in relation to your child's passing? (e.g., "I wasn't a good enough parent," "I should have known something was wrong," "I failed my child")

8. How can you challenge or reframe these self-critical thoughts with more compassionate and realistic statements? (e.g., "I did everything I could given the circumstances," "No parent can predict or control everything," "I loved and cared for my child deeply")

9. What would you say to another grieving parent experiencing similar feelings of guilt or regret? (e.g., “You did the best you could,” “It’s not your fault,” “Grief can make us blame ourselves for things we couldn’t control”)

10. How can you apply these compassionate thoughts to yourself and your situation? (e.g., “I deserve the same kindness I would offer someone else,” “It’s okay to forgive myself for things that were out of my control”)

11. What are some of the qualities or strengths you demonstrated as a parent, even in difficult circumstances? (e.g., resilience, patience, compassion, dedication)

12. What steps can you take to begin releasing some of the guilt or regret you’re holding onto? (e.g., talking to a therapist, writing down your feelings and then letting them go, practicing forgiveness toward yourself)

Talking to Others About Your Child

1. How do you feel about talking to others about your child since their passing? (e.g., “It brings me comfort,” “I feel hesitant,” “It makes me anxious or emotional”)

2. What emotions surface when you think about sharing memories of your child with others? (e.g., sadness, longing, joy, anxiety, gratitude)

3. Is there a specific reason you want to start sharing or continue talking about your child? (e.g., to keep their memory alive, to process your grief, to feel connected to your child)

4. What fears or concerns do you have about talking to others about your child? (e.g., fear of overwhelming others, fear of being misunderstood, fear of getting emotional in front of others)

5. What specific memories or stories about your child would you like to share with others? (e.g., their sense of humor, a particular moment that shows their personality, a special family tradition)

6. Are there certain aspects of your child's life or passing that feel too personal to share? (e.g., details about their illness, intimate family moments, your deepest feelings of loss)

7. Who in your life feels like a safe person to talk to about your child? (e.g., a family member, close friend, a therapist, a support group)

8. What are some of the less helpful responses you've encountered when talking about your child, and how did they make you feel? (e.g., "They tried to change the subject," "They minimized my feelings," "They didn't seem to know how to respond")

9. How can you prepare yourself emotionally for different types of reactions when sharing your grief? (e.g., reminding yourself that others may not know what to say, setting emotional boundaries, focusing on your need to share)

10. How can you let others know when you're not ready to talk about your child, if that moment arises? (e.g., "I'm not ready to talk about this right now," "Can we revisit this another time?")

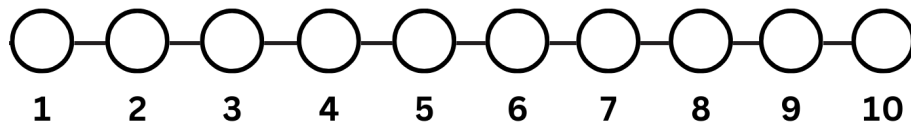
11. What do you wish people understood about your grief and your need to talk about your child? (e.g., that talking helps you heal, that it's okay to revisit the pain, that you need space to honor your child's memory)

12. How can you advocate for yourself and your emotional needs in conversations about your grief? (e.g., by clearly stating what you need, setting boundaries if necessary, being honest about your feelings)

Understanding and Coping with Anger

1. When does your anger surface the most strongly? (e.g., when you're alone, when you see reminders of your child)

2. How would you describe the intensity of your anger on a scale from 1 to 10?



3. How does anger manifest in your body? (e.g., tightness in the chest, tension in your muscles, headaches, clenched fists, shallow breathing)

4. What deeper emotions might be fueling your anger, such as grief, fear, or helplessness? (e.g., feeling powerless to change the situation, fear of moving forward without your child)

5. Are there any unresolved questions or situations surrounding your child's passing that contribute to your anger? (e.g., medical questions, legal issues, unanswered "what if" scenarios)

6. Do you feel guilty for feeling angry about your child's passing? Why or why not?

7. Who or what do you find yourself directing your anger towards? (e.g., yourself, your child, others involved in your child's care, the situation, the world, a higher power)

8. What would you say if you could express your anger directly to those you hold responsible, and how do you think it would make you feel? (e.g., "I feel like you failed my child," "I'm angry that this happened," "I wish things had been different")

9. If your anger is directed at yourself, what are the specific actions or decisions you regret? (e.g., "I should have noticed sooner," "I didn't do enough," "I could have prevented this")

10. How do you usually respond when feelings of anger arise? Do you tend to bottle up your anger, or do you express it openly? How does this affect you?

11. What are some healthier outlets for expressing your anger that you've found helpful or would like to try? (e.g., writing in a journal, talking to a therapist, physical exercise, creative outlets like painting or music)

12. What physical activities can you use to help you release pent-up anger? (e.g., walking, running, or punching a pillow)

13. Who in your life can provide a safe space for you to talk about your anger without judgment? (e.g., a trusted friend, a family member, a therapist, a support group)

14. Do you feel that anger has helped or hindered your grieving process? In what ways? (e.g., “It helps me feel more in control,” “It’s blocking me from feeling other emotions,” “It’s distancing me from others”)

15. How do you feel about the intensity and frequency of your anger—do you wish to reduce it, or do you feel it’s an important part of your grief? (e.g., “I want to feel less angry,” “I feel like I need to hold onto this anger,” “I’m afraid to let go of the anger”)

16. What are some techniques or strategies that help you calm down when your anger feels overwhelming? (e.g., deep breathing, counting to ten, taking a walk, removing yourself from the situation)

How Your Child Changed You

1. How did your child impact your life from the moment they were born or came into your life? (e.g., “They taught me how to love unconditionally,” “They changed my perspective on what really matters,” “They made me more patient and selfless”)

2. In what ways did becoming a parent change your understanding of yourself? (e.g., “I realized how strong I could be,” “I became more nurturing and protective,” “I learned how to prioritize someone else’s needs over my own”)

3. How did your child change the way you view the world? (e.g., “I see the world through a lens of wonder and curiosity now,” “I’ve become more aware of life’s fragility and preciousness,” “They helped me appreciate the little moments”)

4. How has your child influenced the way you approach relationships with others? (e.g., “I’ve become more patient and understanding with others,” “I learned to appreciate the people in my life more deeply,” “They showed me the importance of kindness and connection”)

5. What are some qualities your child had that you admired and learned from? (e.g., “Their kindness and empathy,” “Their sense of adventure and curiosity,” “Their ability to find joy in small things”)

6. What are some of the challenges you faced while raising your child that taught you new skills or qualities? (e.g., “I learned how to problem-solve creatively,” “I developed patience and perseverance,” “I learned how to balance different priorities”)

Dealing with Special Dates and Anniversaries

1. How do you typically feel in the days leading up to special dates or anniversaries related to your child? (e.g., “I feel anxious,” “I feel overwhelmed,” “I feel deeply sad,” “I try to avoid thinking about it”)

2. What thoughts or memories typically come to mind on these anniversaries? (e.g., “I think about the day they were born,” “I replay the day they passed,” “I remember their smile or the things they loved”)

3. How do you usually spend your child’s birthday or the anniversary of their passing? (e.g., “I spend time alone,” “I visit their grave or a special place,” “I gather with family and friends”)

4. What activities or rituals, if any, help you feel connected to your child on these days? (e.g., lighting a candle, visiting a special location, doing something your child loved, creating art or writing)

5. Are there particular traditions or new rituals you've developed to honor your child on these dates? (e.g., releasing balloons, writing letters to your child, planting a tree or flowers in their memory)

6. Would you like to try something different this year to mark the occasion, such as a new way of celebrating or honoring your child's memory? (e.g., hosting a small gathering, creating a memory box, dedicating a day of service in their honor)

7. How do you want to feel on this special day, and what can you do to support those feelings? (e.g., "I want to feel connected to my child," "I want to allow myself to grieve," "I want to honor their life and legacy")

8. What emotional triggers do you notice on these special dates, and how can you prepare yourself for them? (e.g., seeing reminders of your child, hearing certain songs, family gatherings, social media posts)

9. Who are the people in your life that provide comfort and understanding on these significant dates? (e.g., a spouse or partner, close friends, family members, support group members)

10. How can you communicate your needs to those around you on these special days? (e.g., “I need space to grieve,” “I would like to have someone with me,” “I don’t want to talk about my grief today”)

11. What would help you feel more supported by others during this time? (e.g., someone to listen, someone to share memories of your child with, someone to help plan a meaningful ritual or activity)

12. If you decide to spend the day alone, how can you create a peaceful, comforting environment for yourself? (e.g., lighting candles, playing your child’s favorite music, meditating, journaling)

Dealing with Unhelpful Advice

1. What types of advice or comments from others have felt unhelpful or hurtful during your grieving process? (e.g., “It’s time to move on,” “They’re in a better place,” “At least you have other children,” “Everything happens for a reason”)

2. How do you typically react, both emotionally and physically, when someone gives you unhelpful advice? (e.g., frustration, anger, feeling misunderstood, sadness, shutting down, feeling overwhelmed)

3. Are there specific phrases or types of advice that tend to trigger stronger emotional reactions in you? (e.g., “You should be over it by now,” “Time heals all wounds,” “You need to stay strong for your family”)

4. What makes certain advice feel unhelpful or dismissive to your experience of grief? (e.g., the person doesn’t understand your loss, the advice minimizes your pain, the advice feels like pressure to grieve in a specific way)

5. How do you think others view their advice when they offer it to you? (e.g., they're trying to be supportive, they want to fix the situation, they're uncomfortable with your pain and want to make it better)

6. What would you like your response to be when faced with unhelpful advice, and why?

7. How can you protect your emotional energy when unhelpful advice starts to affect you? (e.g., walking away from the conversation, setting a mental boundary, giving yourself permission not to engage)

8. What would you like others to know about how you prefer to receive support during this time? (e.g., "Listening means more to me than offering advice," "I just need people to sit with me in my grief," "It helps when people ask how I'm feeling rather than telling me how I should feel")

Practicing Self-Compassion

Self-compassion is treating yourself with the same kindness, understanding, and care that you would offer to a close friend during times of difficulty or failure.

1. How do you typically treat yourself when you're feeling deep grief or sadness? (e.g., "I tend to be hard on myself," "I feel like I should be stronger," "I usually withdraw and avoid self-care")

2. What self-critical thoughts have surfaced during your grieving process?

(e.g., "I should be handling this better," "I could have done more for my child," "I'm not strong enough")

3. What would self-compassion look like if you applied it to those critical thoughts? (e.g., "I did the best I could with what I knew," "It's okay to be sad and take my time," "Grief is not a measure of weakness")

4. What would you say to a close friend or loved one if they were having these same self-critical thoughts? (e.g., “You are grieving deeply because you loved deeply,” “It’s okay to be gentle with yourself,” “You don’t need to be strong all the time”)

5. Think of a recent self-critical thought you had. How can you reframe it with self-compassion? (e.g., Original thought: “I should be stronger for my family.” Reframed thought: “It’s okay to be vulnerable, and it’s okay to ask for help”)

6. What are some compassionate affirmations you can repeat to yourself when self-critical thoughts arise? (e.g., “I’m allowed to grieve at my own pace,” “It’s okay to feel this pain,” “I am doing the best I can in this moment”)

7. What small, kind gestures can you offer yourself to counteract harsh self-judgment? (e.g., taking a quiet walk, doing something that brings me joy, talking kindly to myself as I would to a friend)

Dealing with Triggers

1. What are some specific triggers that bring up intense emotions or memories of your child? (e.g., seeing children of the same age, hearing a particular song, passing by places you used to visit with your child)

2. How do these triggers affect you emotionally? (e.g., sudden waves of sadness, anxiety, anger, feeling overwhelmed, feeling disconnected)

3. What self-compassionate thoughts can you remind yourself of when unexpected triggers surface? (e.g., “It’s okay to feel this way,” “Grief is unpredictable,” “I can take my time to process these emotions”)

4. How can you prepare for the possibility of unexpected triggers in the future? (e.g., creating an emotional safety plan, bringing a trusted person with you to events, knowing it’s okay to leave or step away)

Exploring Forgiveness

Forgiveness doesn't mean excusing or forgetting, but rather releasing the emotional burden of blame.

1. Is there anything you feel the need to forgive yourself for in relation to your child's life or passing? (e.g., "I didn't do enough," "I wasn't there when they needed me," "I feel like I should have seen the signs")

2. Are there specific moments or decisions that you replay in your mind with regret or guilt? (e.g., "I wish I had acted differently in that moment," "I regret not spending more time with them," "I feel guilty about the choices I made")

3. How can you remind yourself that you did the best you could, given the circumstances? (e.g., "I made decisions with love," "I couldn't have predicted what happened," "I acted with the information I had at the time")

4. What steps can you take toward forgiving yourself, even if it feels difficult right now? (e.g., talking to a therapist, writing a letter to yourself, practicing self-compassion daily, acknowledging that healing takes time)

5. Are there specific people or situations you feel you need to forgive in order to find peace? (e.g., doctors, family members, friends who weren't there for me, people who have said hurtful things)

6. What do you feel holds you back from forgiving others in these situations? (e.g., "I'm afraid forgiving them means excusing what happened," "I don't know how to let go of the anger," "I still feel too hurt to forgive")

7. What small steps can you take to start the process of forgiveness, even if you're not ready to fully forgive yet? (e.g., acknowledging that forgiveness is possible, writing down what I feel I need to forgive, talking to a counselor about my feelings)

Navigating Changes in Your Identity

1. How did becoming a parent change your sense of identity before your child's passing? (e.g., "I became more selfless," "I felt a new sense of purpose," "My life revolved around my child")

2. How has the loss of your child affected your identity as a parent? (e.g., "I feel like I'm no longer a parent," "I still consider myself a parent, but it feels different now," "I'm struggling with who I am without my child")

3. What aspects of your identity do you feel have been most impacted by your grief? (e.g., "I've lost a sense of purpose," "I no longer feel connected to the things that used to matter to me," "I'm not sure who I am anymore")

4. What roles or responsibilities did you have as a parent that you no longer have? (e.g., "I no longer need to care for my child's daily needs," "I'm no longer involved in their activities," "I no longer have the role of protector")

5. How does the loss of these roles and responsibilities make you feel? (e.g., “I feel empty without them,” “I miss having purpose,” “I feel a sense of relief but also guilt”)

6. How do you feel about the person you were before your child’s passing compared to who you are now? (e.g., “I don’t recognize myself anymore,” “I feel like I’ve lost my sense of direction,” “I feel like I’m in transition, but I’m not sure who I’m becoming”)

7. What do you find most challenging about this disconnect between your past and current identity? (e.g., “I don’t know how to move forward,” “I feel like I’ve lost a sense of who I am,” “It’s hard to relate to others who haven’t experienced this loss”)

8. What activities or causes might help you reconnect with a sense of purpose in your life, even as you grieve? (e.g., “Volunteering in my child’s name,” “Finding small ways to make a difference in the lives of others”)

Navigating Grief in the Workplace

1. How do you feel about the idea of returning to work after your child's passing? (e.g., "I'm overwhelmed at the thought," "I'm not sure if I'm ready," "I feel pressure to return even though I'm still grieving")

2. What concerns do you have about returning to work? (e.g., "I'm afraid I'll be too emotional," "I don't know how to answer questions from coworkers," "I'm worried I won't be able to concentrate")

3. What do you feel comfortable sharing with your employer about your grief? (e.g., "I'm comfortable sharing that I've lost my child," "I'd rather not go into personal details," "I want them to know that I may need extra support")

4. How can you communicate your emotional and physical needs to your employer as you return to work? (e.g., “I may need flexible hours,” “I might need to take breaks during the day to manage my emotions,” “I could benefit from a phased return to work”)

5. What support would you like from your employer as you transition back into the workplace? (e.g., flexibility with deadlines, understanding if I need to take time off.)

6. How can you set boundaries with coworkers about what you’re comfortable discussing? (e.g., “I’m not ready to talk about it yet,” “I’d appreciate it if we could avoid that topic at work.”)

7. How can you handle situations where coworkers may unintentionally say something hurtful or insensitive? (e.g., taking a deep breath before responding, politely redirecting the conversation, letting them know how their comment affected you)

Grieving as a Couple

1. How would you describe your grief compared to your partner's grief? (e.g., "I tend to cry more often, while my partner seems quieter," "I want to talk about our child frequently, but my partner prefers to grieve in silence," "I feel like we are grieving in different ways, and that's hard to navigate")

2. How do you feel about the way your partner is grieving? (e.g., "I feel disconnected from them," "I'm worried that they aren't expressing their emotions," "It's hard to see them in pain," "I understand that we're grieving differently, but I wish we could connect more")

3. What are some of the ways your grief has affected your relationship? (e.g., "We're not as close as we used to be," "We're struggling to communicate," "It feels like there's a distance between us," "We argue more often," "We've become more supportive of each other")

4. How can you acknowledge and honor your partner's grief while also recognizing and validating your own? (e.g., "I will make space for them to express their grief in their own way," "I'll try to communicate more openly about how we're both feeling")

5. What are some barriers that prevent you from discussing your grief with your partner? (e.g., fear of upsetting them, feeling misunderstood, not wanting to burden them, thinking they don't want to talk about it)

6. How can you create space for open, non-judgmental conversations about your grief? (e.g., setting aside time each week to check in with each other, agreeing to listen without offering solutions)

7. What are some open-ended questions you can ask your partner to start a conversation about their grief? (e.g., "How have you been feeling about [our child's name] recently?" "Is there anything you've been struggling with that you want to talk about?")

8. What kind of support do you feel you need from your partner during this time? (e.g., “I need them to be more emotionally available,” “I wish they would talk to me more about how they’re feeling,” “I’d like them to be more patient when I’m upset,” “I need more physical affection or comfort”)

9. What are some small gestures or actions that can help your partner feel supported during difficult moments? (e.g., holding their hand during emotional times, listening without offering advice, suggesting a calming activity like a walk together, sending them an encouraging text)

Dealing with Secondary Losses

Losing a child is an incredibly profound and devastating experience, and with that loss often comes a series of secondary losses—additional emotional, social, and psychological consequences that follow the initial loss.

1. What secondary losses have you experienced as a result of losing your child? The following are some common examples. Check off the ones that apply or add more to the list:

- ☐ Loss of Identity as a Parent
- ☐ Loss of Future Dreams and Plans
- ☐ Loss of Purpose
- ☐ Loss of Joy in Everyday Life
- ☐ Loss of a Role in Society
- ☐ Loss of Connection to Friends or Community
- ☐ Loss of Normalcy
- ☐ Loss of Routine
- ☐ Loss of Faith or Spirituality
- ☐ Loss of Trust in the World
- ☐ Loss of Relationship with Partner
- ☐ Loss of Meaning in Holidays or Special Occasions
- ☐ Loss of Trust in the Medical System
- ☐ Loss of Future Grandchildren
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

2. Which of these secondary losses feels the most difficult to cope with right now?

3. What emotions come up for you when you think about these additional losses? (e.g., sadness, anger, fear, guilt, confusion, isolation)

4. What secondary losses do you feel are misunderstood or overlooked by those around you? (e.g., “People don’t understand how much I’ve lost my sense of self,” “I don’t think others realize how isolated I feel now,” “My relationships have changed, and it feels like no one notices”)

5. How can you validate these secondary losses for yourself, even if others don’t fully understand them? (e.g., “I will remind myself that these losses are real and valid,” “I’ll give myself permission to grieve these additional losses, too,” “I’ll recognize that my grief is layered and complex”)

2026 Clinical Alignment

DSM-5-TR (including Sept. 2025 update) · ICD-11 CDDR / 2026 MMS

Classification status

- DSM-5-TR: Prolonged grief disorder · Bereavement is not itself a disorder; PGD applies only when full requirements are met after a human death.
- ICD-11 CDDR: 6B42 Prolonged grief disorder · Formal diagnosis with system-specific requirements.
- This workbook is non-diagnostic. A title, checklist, or completed activity never establishes a diagnosis.

Pages requiring the updated interpretation

- The audit identified source pages 1, 2, 5, 6, 10, 19, 20, 22, 27, 29, 30, 32, 33, 35, 40. The statements below supersede incompatible diagnostic, scoring, safety, or resource wording on those pages.

Diagnostic and differential limits

- Assess elapsed time, persistent severe grief response, impairment, cultural/religious norms, depression, PTSD, separation anxiety, and suicide risk; do not infer PGD from relationship to the deceased alone.

Document-specific corrections

- Pages [2] · Frame ·Grieving Your Child· using the DSM/ICD status below; add duration, impairment, exclusions, and differentials without reproducing criteria. The title alone must never be treated as a diagnosis.
- Pages [1, 2, 20, 27] · Treat the Grieving Your Child ratings/checklists as author-created reflection tools only. Remove unsupported severity bands, cutoffs, totals, or language suggesting diagnostic validity; label response anchors and recall period explicitly.
- Pages [33] · Avoid pathologizing expected grief or imposing forgiveness, closure, exposure, or relationship contact. Escalate for suicide risk, severe functional decline, trauma symptoms, coercion, or persistent disabling grief requiring diagnostic assessment. Apply this specifically to the workbook's Expressing Your Emotions, Writing a Letter to Your Child, List of Cherished Memories, Dealing with Guilt and Regret sections.
- Pages [1, 5, 6, 10, 19, 22, 29, 30, 32, 35, 40] · Review all medical assertions in Grieving Your Child with a qualified medical professional; distinguish psychoeducation from individualized advice and add referral thresholds, contraindications, and medication/procedure cautions appropriate to this population.

Measures, scoring, and permissions

- Treat the Grieving Your Child ratings/checklists as author-created reflection tools only. Remove unsupported severity bands, cutoffs, totals, or language suggesting diagnostic validity; label response anchors and recall period explicitly. custom/unvalidated unless evidence is supplied confirm no third-party item wording was adapted

Intervention scope and contraindications

- Avoid pathologizing expected grief or imposing forgiveness, closure, exposure, or relationship contact. Escalate for suicide risk, severe functional decline, trauma symptoms, coercion, or persistent disabling grief requiring diagnostic assessment.

Crisis and current resources

- U.S.: call or text 988; chat at <https://988lifeline.org/>. Immediate danger: local emergency services. International resources must be separately verified for the intended country and dated.

Authoritative references

- <https://www.psychiatry.org/psychiatrists/practice/dsm/updates-to-dsm/updates-to-dsm-5-tr-criteria-text>
- <https://icd.who.int/browse/2026-01/mms/en>
- <https://www.psychiatry.org/patients-families/prolonged-grief-disorder>
- <https://988lifeline.org/>
- <https://www.who.int/publications/i/item/9789240077263>