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**Grief Like Mine: A Literature Review Exploring Culturally Informed Grief Work for
Black Youth Using Dance/Movement Therapy**

Capstone Thesis

Lesley University

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Dance/Movement Therapy

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Abstract

Black American youth are exposed to more death related circumstances than their peers yet are severely underrepresented in literature focused on the broader scope of children's bereavement. More research and analysis are required to develop and implement culturally relevant interventions as they embark on their grief journey. Dance/movement therapy has the capacity for providing support that is culturally specific and able to meet the developmental levels of children, yet its grief focus work is limited. This literature review aims to bridge the gap between Black grief and dance/movement therapy as a culturally informed practice. An analysis of various forms of grief, including disenfranchised and suffocated grief, alongside an understanding of grief considerations in children, lay the foundation for a better understanding of grief work. Attention to the nuances of Black bereavement practices and dance/movement therapy brought forth various approaches which could be useful in supporting this population. This review highlights the lack of specific and empirical research focused on both grieving Black youth and DMT in grief settings. Further explorations of factors connected to the bigger picture of Black grief and DMT implementation are considered for future research.

Keywords: Black children's grief, disenfranchised grief, suffocated grief, dance/movement therapy, bodyfulness, embodied code-switching, culturally informed practice

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Introduction

“Can somebody, anybody tell me why (we die, we die)?” – Bone Thugs-N-Harmony

Humans, in all their complexities, experience a wide range of emotions. Across cultures and communities, the practices and rituals related to these emotional states vary even more. The diversity in how an emotion is expressed and cared for could not be more apparent than when looking at grief in American society. Grief, loss, and bereavement are topics that are not often discussed publicly or even privately. Gendered expectations on how to respond to grief (Pabon & Basile, 2021; Wade, 2021), a lack of understanding and appreciation for cultural experiences of bereavement (Moore et al., 2022), stigmatization of the cause of death (Bordere, 2016; Stout & Fleury-Steiner, 2023), and a host of other factors all contribute to why there tends to be an aversion to the topic. Many adults experiencing grief may have developed tools during their lives that could aid them in working through this experience, sans a culture of communicating around it. The population that often does not have the tools to cope with death and loss and face negative repercussions from such reserved conversations are the children that are having these experiences (Alvis et al., 2023).

Research has shown that adults often limit the number and length of discussions that are had with children around death and loss, which can impact their ability to mourn and delay the grieving process (Schoen et al., 2006). For anyone, but children especially, the loss of someone in their lives can be traumatic and those grief responses play out in different ways, depending on the age of the child. These responses can manifest themselves physically, intellectually, and

emotionally, impacting school functioning, peer relationships, sleep, appetite, cognitive understandings, and more (Dougy Center, 2021). In addition to the more immediate impacts of grief on children, neurological research has documented that adverse childhood experiences (ACEs), like the loss of a family member to suicide, can have long-term developmental and medical implications for children, especially as the number of these experiences increase (Center for Disease Control and Prevention, n.d.; Harris, 2018). Organizations like the National Alliance for Children's Grief (NACG) have spent a lot of time and resources outlining the impact of grief on children and the importance of providing them with the resources needed to deal with such a heavy experience. The need for more nuanced research becomes apparent when starting to look at specific subsets of this population and identifying who is falling through the cracks in terms of access and focus on such issues.

One group that could benefit from resources and interventions that center their unique experiences with grief would be Black American youth. African American children are several times more likely than their White counterparts to have lost either their mother, father, or a sibling before or during adolescence and the mere need to have to engage in the bereavement process has shown to have physical and mental health implications (Umberson et al., 2017). The factors that create and uphold the disparities in life expectancy exist tangentially to the topic of this analysis. The influence of these disparities and the function of that research will be more critically acknowledged within the discussion. In lieu of this, the focus will be directed towards identifying interventions and supports that would be better suited to aid in the bereavement process. Part of this analysis will examine how Black children grieve and engage in the bereavement process. This foundational understanding will offer more clarity in the ways in which the mental health system is and is not meeting that need and what else can be done.

This investigation interrogates the power of a body-based approach to grief and loss in the Black community. We are in a period of awakening when it comes to the body. Researchers are finding more and more evidence of the impact of grief and trauma and how those experiences manifest themselves within the body (Van der Kolk, 2014; Holinger, 2020). The documented stories and histories of Black Americans across different generations have embedded themselves within Black bodies in the form of mannerisms, tension, and other somatic symptoms, and require nuanced and deliberate interventions (Menakem, 2017). Essential to creating awareness on the embodied sensations of trauma and loss through the use of culturally responsible and responsive methods of treatment is an acknowledgement of the pitfalls of treatments that prioritize and center the White embodied experience (Sherrell, 2018). This work must take place to prevent the reinvention of that cycle. The lens of dance/movement therapy (DMT) will be analyzed in terms of how it is currently being utilized for working with grief in this community and what avenues in this work have yet to be explored.

Interest in this unique area was spurred from real world observations of Black children, the type of grief support they were offered in those spaces and their willingness to engage in said practices. This paper is written from the perspective of someone who identifies as a part of that community and has witnessed the cultural practice of mourning through funerals and wakes, only to rarely discuss the impact of that death again. There is a common saying, *when you know better, you do better*. In this scenario, there has not been enough exploration of literature on the embodied experience of grief for Black Americans, let alone Black children and this prevents clinicians from being able to do better by their clients. For similar reasons, families and caregivers are unable to do better by their impacted children by having culturally relevant conversations and connecting them to resources and services that speak their same dialect when

it comes to the language of grief, even though research has shown that adult support throughout the bereavement process can contribute to a healthier bereavement experience (Alvis et al., 2023; Worden & Silverman, 1996). This paper serves to lay the foundation for that bridge. To further integrate the experience of the author in this topic, lyrics from various songs by Black musical artists were chosen to appear throughout the paper. These lyrics reflect the connection to music that exists during the Black bereavement process (Rosenblatt & Wallace, 2013) and speaks to the author's connection to their own embodied sense of grief.

Throughout this work, the terms African American and Black are used interchangeably. While the term Black in America has come to encompass a wide range of individuals whose heritage traces back to the African Diaspora, the research and interventions being addressed speak specifically to individuals who are direct descendants of American chattel slavery, who continue to reside within the United States (DeGruy, 2017). Additionally, there is much to be said about the origins of grief for Black Americans, systematic contributions to that grief state, and the nuanced influences of incidents like community violence, and highly publicized murders at the hands of law enforcement (DeGruy, 2017; Menakem, 2017). Similarly, the bereavement process can be stimulated by not just a death loss, but a separation due to incarceration (Smyke et al., 2017) or divorce (Sacks & Murphy, 2018). As a unifying reference point, definitions of grief will be explored in the literature review and referred to in relation to familial deaths. Though the interventions and practices identified in this work will be tailored to grief responses specific to this form of loss, the intent is that they might serve as more culturally appropriate methods of embodied engagement for those affected by other forms of loss and spark conversation and research that would target those individuals with more nuanced and applicable ways of healing.

Methods

“*Sorry I never told you, all I wanted to say...*” – Boyz II Men & Mariah Carey

A variety of methods were used for locating relevant research and information on the topic. Initial searches were conducted through the Lesley University library database, which includes access to dozens of academic journals. Similarly, searches for content were conducted through various databases that were accessible through the Cambridge (MA) Public Library catalog. It is important to note that while these databases do provide access to a lot of information, they do have their own limitations in the number of journals and information they have access to, creating barriers to potential research that could have been useful for this query. While accessing both of these research hubs, numerous search terms were used, including but not limited to *dance/movement therapy, expressive arts therapy, children’s grief, bereavement, African American grief, Black Americans, mourning, bodyfulness, embodied code-switching, and trauma*. Search term modifications were made by utilizing similar and/or adjacent terms (e.g. somatic psychotherapy in place of dance/movement therapy). This widened the potential research base for analysis. Journals and articles were removed from the data pool if they were not published in an academic journal and if they were not peer reviewed. Any information that did not meet these criteria but offered a unique perspective was vetted for references prior to a decision to be included as a part of the analysis. This felt important to uplift research that may be tapped into the unique perspectives and experiences of those for whom this research aims to serve, regardless of their ability and/or barriers to access academia.

In addition to articles and journals, the online search yielded results which included published books as well as unpublished theses and dissertations. A book’s table of contents and index were searched to identify if the work could be of use towards this literature review. Similarly, many of the theses and dissertations populated were assessed for their relevance by

way of their references. References that were flagged as potentially helpful from their titles were noted and reviewed. Research for this review was also collected from recommendations from working professionals in the fields of bereavement, children’s grief, expressive arts therapies, and social justice. As many of them are tapped into the pulse of this work, it was important to tap them and their resource base to help uncover any holes in perspectives not identified through the currently published literature. These resources materialized as presentations, podcasts, webinars, and more.

Literature Review

“Thinking of the day, when you went away. What a life to take, what a bond to break, I’ll be missing you” – Puff Daddy, Faith Evans, 112

This review will begin with an overview of stress and trauma and its relationship to grief. Nuanced definitions of grief and how it is experienced will be named as well. Those established understandings will make way for an analysis of current models and theories on grief, traditional methods of working with children, and considerations made when working with Black children. Finally, an introduction to dance/movement therapy, its use in this arena, potential benefits of this modality for working with this population, and body-based interventions that warrant further research will be explored.

Stress, Trauma and Grief

In considering ways to aid a child in their experiencing and understanding of a death related loss, it is important to delineate between the various types of responses to stress that may be occurring and how grief fits into that picture. This includes *positive*, *tolerable* and *toxic stress*. *Positive stress* is identified as “an important aspect of healthy development that is experienced in

the context of stable and supportive relationships that facilitate adaptive responses” (Shonkoff, 2010, p. 359), which can be initiated by everyday experiences like a student starting their first day of school or preparing for a big basketball game. Grief and the loss of someone close is typically placed in the *tolerable stress* category, associated with more severe circumstances, but are supported through the aid of caregivers and professionals (Shonkoff, 2010).

Across these two categories, the body is shifting between milder physiological responses, like increased heart rate, to more heightened levels of alertness in the body, which can be emotionally and/or physiologically damaging if left unchecked (Shonkoff & Garner, 2012). As stress responses begin to inflict demands on the body that are too strong, frequent, and/or prolonged, absent adult support, this becomes *toxic stress* (Shonkoff, 2010). Associated with conditions like “extreme poverty, recurrent physical and/or emotional abuse, chronic neglect, severe maternal depression, parental substance abuse, and family violence” (Shonkoff, 2010, p. 360), this level of stress has the power to disrupt brain architecture, impact biological systems, and impact future capacities for responsiveness to other stressors across the lifespan. Many of these conditions meet the criteria for an adverse childhood experience (Center for Disease Control and Prevention, n.d.). Harris (2018) notes the higher likelihood of children of color to experience these ACEs, increasing their chances of being subjected to toxic stress.

The death of a loved one can affect a child in a multitude of ways. Depending on the nature of the death, relationship with the deceased, and/or level of supports in place, the response can shift from just tolerable or toxic stress and into something resembling trauma. Trauma can be defined as “the result of exposure to an inescapably stressful event that overwhelms a person’s coping mechanisms” (Van der Kolk, 1997, p. 1). Contextualizing this for children, it can be “a frightening, dangerous, or violent event that poses a threat to a child’s life or bodily integrity”

(National Child Traumatic Stress Network, n.d.). In this scenario, the loss of a caregiver can be seen as traumatic, as the loss may pose threats (both realistic or perceived) to a child's physical, emotional, and/or environmental safety. Experiences of trauma can have lasting effects, especially when accounting for the intersection of age and race (Metzger et al., 2021).

Types of Grief

Grief is commonly defined as “the anguish experienced after significant loss, usually the death of a beloved person” (American Psychological Association, n.d.). While each person's experience of grief can look vastly different, *normal* or *common* grief responses manifest as crying, dreams or hallucinations about their person, attachment to personal belongings, or activities of that person and any host of emotions ranging from sadness and anger to guilt and fatigue (Jacobs, 1993). In addition to those emotional states, a grief response can manifest itself as physiological distress or obsessions with the past and/or future, and these symptoms can lead to more long-term effects on the immune system and cognitive processes (American Psychological Association, n.d.). Just as the severity of an event alters the impact on the body, it can affect the severity of grief responses.

Distinguished from *normal grief* and traditionally withheld for adults, *complicated grief* is associated with deaths that “would not objectively be considered as traumatic” (Cohen et al., 2006, p. 17), and are evidenced by “extreme levels of three of the four ‘separation distress’ symptoms...as well as extreme levels of four of the eight ‘traumatic distress symptoms’” (Cohen et al., 2006, p. 17). It is important to note that in terms of diagnosis, the Diagnostic and Statistical Manual of Mental Disorders V Text Revision (DSM V-TR) include *prolonged grief disorder* as a diagnosable mental health disorder (American Psychiatric Association, 2022). Criteria for prolonged grief disorder includes 12 months past the death of the deceased (six months for

children and adolescents), persistent grief responses existing daily to a clinically significant degree, at least three daily symptoms of maladaptive grieving behaviors, a clinically significant disturbance to important areas of functioning, said duration and severity of symptoms clearly exceeding expected social, cultural and/or religious normals for the individual's culture, and is not better explained by another mental health disorder or medical condition (American Psychiatric Association, 2022).

While some factors and criteria of complicated grief do not appear in children, other markers can contribute to its existence. For youth, this could be the result of a sudden or traumatic loss, the social stigma of loss, multiple recurring losses, past relationships with the deceased, and/or the grieving process of their caretakers (Goldman, 2015). In adapting this model of complicated grief for the experience of children, many have come to use the term *childhood traumatic grief*. According to Brown et al. (2008), it is “conceptualized as occurring when children whose loved ones die in circumstances that are subjectively traumatic develop trauma symptoms, which impinge on these children’s abilities to engage in the typical tasks of grieving” (p. 901). As Black Americans experience disproportionate levels of exposure to death, loss, and grieving (Bordere 2019), it is imperative that all forms of grief be taken into consideration to inform more inclusive supports.

Another form of grief that is important to understanding the complexities of grieving Black youth is the concept of *disenfranchised grief*. This is defined as when someone’s grieving response is “socially invalidated, unacknowledged, or discouraged” (Piazza-Bonin et al., 2015, p. 404). Behaviors associated with increased anger, guilt, and confusion have been noted as symptoms of this unique form of grief (Doka, 2009). For Black youth, this disenfranchisement often leads to stigmatization of their grief responses and results in inequitable burdens of being

forced to continue daily tasks like schoolwork or jobs, all while not receiving the necessary acknowledgement or support for their experience (Bordere, 2016). Creating socially just steps towards minimizing the impact of disenfranchised grief include acknowledging the lack of information and resources for support, developing better strategies that account for diverse experiences, and creating accessible avenues of access for marginalized populations (Bordere, 2016).

In addition to the relationship of the deceased person, taboos and stigmas around the causes of death can lead to disenfranchisement. Those that have lost someone to death by suicide, substance use, or motor vehicle accidents may not receive as much attention or support as a peer who lost someone from a medical illness since the former causes are often looked at as controllable or self-inflicted (Balk et al., 2011). Disenfranchised grief is important to the conversation of grieving Black youth because it helps to explain the ways in which they are failed during their experience of mourning. Neimeyer and Jordan (2002) name the greatest danger of disenfranchised grief as *empathic failure*, which is defined as “the failure of one part of the system to understand the meaning and experience of another” (p. 96). Black children are less likely to take part in therapy services than their White and Hispanic peers (Zablotsky & Terlizzi, 2020) and Black mental health workers are underrepresented across pools of psychologists, psychiatrists, social workers, and licensed counselors (Lin et al., 2018). With these numbers in mind, it is easy to believe that Black children may have less access to resources that would be able to understand their unique relationship to grief, highlighting the importance of having culturally relevant interventions when the support is given.

As alluded to previously, the ways in which an individual, society, or systems at large choose to address someone’s response to grief also has a profound impact on their process.

Known as *suffocated grief*, this refers to “the penalty imposed for their grief and mourning expressions” (Bordere, 2016, p. 14). For Black youth, this can look like a lack of academic support in the face of declining grades, incomplete homework following the death of a sibling, or the discouragement or arrest of someone creating a mural or memorial close to where a person was killed. Similarly, shirts and apparel often used to memorialize the deceased might be condemned for its content (Bordere, 2008). The combination of unique forms of loss and the complications that come along with them reinforce the need for approaches that keep these complexities at the forefront of the interventions.

Collective grief is another factor that has unique implications for the Black bereavement experience. This refers to when an entire community experiences a collective blow or loss (Eisenbrush, 1984). This impact could be felt as the result of the death of a beloved celebrity or a notable death from within the community (Wilson & O’Connor, 2022). Children’s increased access to media, and the increased visibility of violence against Black bodies, has created a reoccurring cycle of engagement of collective grief for many, but especially those in the Black community (Wilson & O’Connor, 2022; Proust, 2024). Black Americans have traditionally coped with trauma and loss using communal supports and rituals (Boulware & Bui, 2016; Moore et al., 2022). Addressing collective grief will require factoring in this proclivity for this form of safety through communal healing.

Theories of Grief

No one model of grief can encapsulate the diversity in human experiences and expressions. Many involved in grief work advocate for a more eclectic approach, incorporating aspects from different theories in order to supplement and reinforce gaps in their approaches, while expanding their capacity for being able to acknowledge and support the layered

experiences of grief as seen through the intersections of race, gender, age, and more. There is a plethora of theories that exist. With that in mind, a handful of theories will be represented to paint a broad picture of grief work and how they can be used to understand and support the bereavement experience of Black children.

The long-standing convention when it comes to bereavement has been the notion of the five stages of grief. Originally centered around the experience of someone dying from a terminal illness, Elisabeth Kübler-Ross' ordered stages included denial, anger, bargaining, depression, and acceptance (Kübler-Ross, 1969). Years later, these stages were taken and adapted to describe how an individual person grieves. These stages and the order in which people have been expected to experience them have in recent years been criticized for their linear assumptions of the bereavement process and oversimplification of each person's unique connection to grief and grieving (McCoyd, 2022; Corr, 2021). Culture is specifically mentioned by Saxon et al. (2015) as it relates to Kübler-Ross' model as said in the following statement: "It is quite clear the dying process cannot be described by only five defense mechanisms but must be seen in its complexity as it relates to the uniqueness and totality of each person and the culture and world around" (p. 421). Kübler-Ross herself would later clarify some of her earlier claims, articulating that the stages, when applied to a bereavement context, can exist more fluidly, occurring in whichever order makes sense for their experience, with potential for overlap instead of as a universal truth (Corr, 2021; Rottweiler & Ross, 2019).

Though Kübler-Ross' model has forever changed the landscape of Western conceptualizations of grief and grieving, many other theories have emerged to explain the process in ways that add additional contextual considerations, one of which is Worden's Four Tasks of Mourning. In this model, William J. Worden (2018) advocates for an approach that

offers tasks related to the experience of mourning, while allowing the movement in and out of these tasks to be more fluid through an understanding of the dynamic qualities of an individual's life that may affect the amount of time spent on each task. The tasks are as follows: Task I: To accept the reality of the loss; Task II: To process the pain of the grief; Task III: To adjust to a world without the deceased; Task IV: To find a way to remember the deceased while embarking on the rest of one's journey through life (Worden, 2018).

Despite the fluidity of these tasks, the theory is not without its own limitations. It suffers from similar critiques of perceived rigidity and frustration that might arise around an inability to make those shifts into the next task (Yousuf-Abramson, 2021). Similarly, Worden's model could benefit from more explicit considerations of gender and culture and the intersection of these tasks as they relate to the impact of those experiences on the bereavement process. Proposed is a model where the four tasks overlap with one another, which allows for not only more fluidity among the tasks, but also facilitates more conversation around the intersections of identity and grief, specifically utilizing a social work lens (Yousuf-Abramson, 2021).

Rather than focus on stages or tasks, others have sought to describe one's ability to adapt to their circumstances and ways that they cope with their grief. The Dual Process Model of Coping with Bereavement (DPM) identifies "two categories of stressors associated with bereavement namely those that are loss- versus restoration-oriented" (Stroebe & Schut, 2010, p. 277). Under this theory there is an oscillation of focus that occurs between each set of stressors, while highlighting potential proclivities for or a need to prioritize handling a specific set (Stroebe & Schut, 1999).

The loss-oriented stressors represent a greater focus on tasks related to the overall experience of the loss itself, including engaging in psychoeducation around grief work and

processing of emotions (Stroebe & Schut, 2010). The restoration-oriented stressors refer to the need to focus on secondary effects of the loss that have to be tended to, which could relate to adaptations being made to a world without that person. It is easy to imagine this type of oscillation for a grieving Black child and the complexities that this model highlights. They may want to engage in diving into some of the loss-related emotional throes of grief; however, they could be forced into dealing with restoration-oriented distractions due to a new need to relocate after the loss of a caregiver or the unrelenting academic workload experience from unresponsive educational supports.

In research by Stroebe & Schut (2010), DPM is compared to Worden's model in its distinction of "stressors from coping processes" (p. 281), highlighting "the necessity for attention to the different categories of stressors" (p. 281), through the explicit usage of oscillation language, and better recognition of differences among different groups of people due to a lack of adherence to "fixed patterns" (p. 281). The authors assert that DPM can help guide treatment through an understanding of proclivities for certain sides of the spectrum due to gender and gender norms and from an understanding of cultural practices that would encourage the individual to explore their grief in one way or the other.

The final theory explored here is Neimeyer's Narrative and Constructivist Approach. From Robert A. Neimeyer, this model focuses on the narratives that bereaved individuals create around their experience of loss, as it is perpetually being altered and updated to match their developing sense of identity, purpose, and belonging (Bruce, 2007). He developed *six key realities influenced by death*, which revolve around the following notions: Loss can both validate or invalidate a person's understanding of their beliefs; grief is both universal and unique; active grief encompasses instances of decision making, which occur both practically and existentially;

emotions can be useful guides in reconstructing balance and stability, disrupted by the loss; identity reconstruction of the bereaved is a social process, influenced by family and societal norms; and integration of the loss into the newfound sense of identity aids in creating meaning for the loss and new life changes (Bruce, 2007; Neimeyer, 2001).

Rosenblatt and Wallace (2013) highlight the process of meaning-making when grieving in the Black community, pointing out aspects of the culture that are typically talked about in relation to this form of healing, including understanding the cause of death, racism and the magnitude of the loss, connection to religion, and a focus on memories of the deceased. Leaning into this approach with Black children aligns with cultural norms around grief, but also practices in healing. Links can be drawn between the social process of identity reconstruction and the proclivities for engaging in communal healing practices (Rosenblatt & Wallace, 2013). Further explorations of this model have included permutations of other perspectives like attachment theory and have found potential success in using interventions centered around continuing bonds and meaning-making as a method for decreasing symptoms of complicated grief and increasing short term grief outcomes (Neimeyer et al., 2006). From a clinical standpoint, developments have the ability to provide “a scaffold that facilitates the construction of meanings whose ultimate forms are unique to their makers (Gillies & Neimeyer, 2006, p. 59), illuminating another break away from constrictive models of grief from years past.

Grief Work Considerations for Children

Developmentally, there are many factors that come into play when helping children through their bereavement journey. Acknowledging and normalizing the diversity in grief responses is essential. Children in different age ranges will have varied grief responses (Dougy Center, 2021). According to McNiel and Gabbay (2018), additional responses can appear

physically (both in behavior and as somatic symptoms), mentally (e.g. as an aversion to schoolwork or preoccupation with the cause of death), or spiritually (e.g. when questioning the religion for allowing the death to occur). A greater awareness of the multicultural implications of grieving allows for greater acceptance of more culturally specific behaviors associated with grieving (St. Thomas & Johnson, 2007). Another factor in working with children is creating age-appropriate interventions. When providing interventions for children around grief, factors like their understanding of death, the language used in the home, attention span, and the accessibility of the activity should be taken into account to ensure the child will best be able to access the content and goal of the activity (McNiel & Gabbay, 2018).

Strategies for working with bereaved children can vary greatly depending on the circumstances of the death, family dynamics, the ways in which the child is responding to the grief, and more. As introduced earlier, many conventions and practices leaning onto Kübler-Ross' 5 Stages of Grief model have been criticized due to the ill-fitting narrow definitions of the different stages and the pressure and/or stigma placed on individuals whose grieving experience does not mirror those outlined sequence of events (McCoyd, 2022). As an alternative to this theory, some clinicians have adopted an approach that utilizes open-ended questions as a way to allow someone to better narrate their own experiences and feelings. McCoyd (2022) offers the following five questions to invite a client to reflect on their experience:

How can you promote your physical and mental well-being while dealing with the emotions of your grief? Who are the people you can trust with the story of your grief? Why do you believe this loss happened in this way at this time? What will your life be like now that this person/entity is not physically in your life? Who are you now that you have experience this loss? (p. 87)

While this is a great step towards demystifying the notion of the need for specific guidelines for grief, it feels limited in its scope. It is predicated on a level of trust and rapport which may not easily be established for children, and more specifically, Black children. Additionally, the author does acknowledge the potential need for reordering, restructuring or reworking the questions in order to meet the client where they are at. To adapt this for children, this reworking would have to be appropriate for the child's developmental level. This form of questioning combined with the dance/movement therapy lens might speak more broadly to children and/or the Black experience, allowing for better trust and engagement.

Black Grief and Therapeutic Considerations

Research has shown a myriad of important factors that are in direct relation to African American grief. Some themes of note include the influence of racism in death exposure, the rituals of bereavement and how individuals talk about grief (Rosenblatt & Wallace, 2013). In the context of race and racism, the impact of higher rates of exposure to death cannot be understated. Even with death rates leveling off, Black American mortality rates are still higher compared to those of their White and Hispanic counterparts (Curtin & Arias, 2019). More contemporary research also highlights disproportionate death rates of Black Americans during the COVID-19 pandemic (Hill & Holland, 2021) and in developing other life-limiting ailments like heart disease, strokes, diabetes, cancer and HIV/AIDS (Carratala & Maxwell, 2020). Black youth have the highest mortality rates compared to other groups, with the highest contributing factors being firearm-related injuries and medical causes (Cunningham et al., 2018; Mariño-Ramírez et al., 2022). These all point to institutional and systemic flaws in American society which create conditions that lead to the abundance in the experiences of death within the Black community.

These figures, in combination with the increased knowledge of the negative long-term effects of ACEs (Worden & Silverman, 1996), and the higher exposure to ACEs for children of color (Harris, 2018), have spurred interest in the development of models catered towards addressing this impact. Bernard et al. (2021) proposed the culturally informed ACEs model (C-ACE), aimed at “understanding the pervasive mental health impact of racism on Black youth” (p. 236). Utilizing historical trauma as the foundational framework, this lens is used to understand racism-informed social conditions and biopsychological vulnerability, both as ACE exposure risks factors and as post-ACE mental health risk factors (Bernard et al., 2021). This process aids in understanding the experience of the adverse childhood event (like exposure to a death related loss), how that contributes to any current or future mental health outcomes, and how this knowledge could lead to more culturally appropriate interventions for symptoms.

Religion plays a large role in the bereavement process. While some literature highlights discrepancies in how positive religious coping activities can be for healing during bereavement (Boulware & Bui, 2016), others have found data that supports the meaning-making process of a death through spirituality (Hamilton et al., 2017). Rituals around bereavement can take the form of funerals, wakes, and visitations, which serve as opportunities for families to come together to honor, mourn, and uplift the memory of the deceased (Rosenblatt & Wallace, 2013). Ingrained in this process is music. Though traditionally gospel, various types of music is played at these gatherings to foster further connections and revel in the lyrics as they relate to the deceased (Rosenblatt & Wallace, 2013). Most of this literature indirectly speaks to the relationship of children and spirituality during this process, but it is still an important aspect to be mindful of.

The way in which grief is discussed is also shaped by the African American experience. For young Black males, there can be stigmas around showing emotional vulnerability and

engaging in traditional mourning rituals (Pabon & Basile, 2021; Hunter et al., 2006). Studies have found success in fostering digital communities geared towards support and emotional freedom for teenage boys following a gun death (Gross, 2023). Bordere (2008) has found positive benefits for teenage males witnessing and engaging in funeral practices like second-lines. For young Black girls, the mounting influences of various types of grief can play a role in their willingness to discuss it and its lasting effects into their college years (Varga et al., 2022). Clinicians must be cognizant of gender norms, roles, and expectations on emotional expression while providing bereavement support.

Every person is uniquely impacted by their experiences of grief and loss. This leads to a host of varied ways of engaging in bereavement practices and rituals. Despite the individuality that exists in one's grief responses, there are shared commonalities amongst the Black community in terms of resources sought out for grief support, reoccurring practices during the bereavement process, and coping skills that are utilized after a loss (Laurie & Neimeyer, 2008). It is important to acknowledge the lack of clinical literature specifically documenting some of the nuances of bereavement in the Black community (Wilson & O'Connor, 2022). Contributing factors to this relatively bare literature base may stem from historically rooted disinterest in the affairs of African American practices, an assumption of sameness of grief processing and experiencing across cultures, or even resistance towards uncovering the pain and oppression intertwined with Black grief as a result of continued reinforcement of White supremacist structures and ideals (Rosenblatt & Wallace, 2013). Thacker and Duran (2022) echo this sentiment and advocate for embedding intersectionality in each of the operational steps of research development as a way of accessing nuanced and targeted research, especially as it relates to grief.

Dance/Movement Therapy and Cultural Awareness

Dance/movement therapy (DMT) seeks to integrate the experiences of the mind and body. It is defined as “the psychotherapeutic use of movement to promote emotional, social, cognitive, and physical integration of the individual, for the purpose of improving health and well-being” (American Dance Therapy Association, n.d.). The origins of DMT, as it has come to be known in the Western world, stems from the work of Marian Chace. Shaped by her modern dance training, which emphasized nonverbal expression and communication through the body, she began molding new theories and concepts as she took her dance training into hospitals working with individuals with intellectual impairments and experiencing psychosis (Levy, 2005). Leading with the understanding that “dance is communication and thus fulfills a basic human need” (Chaiklin & Schmais, 1993, p. 77), Chace would go on to develop four core concepts to be used in therapy including body action, symbolism, therapeutic movement relationship and rhythmic group activity. These concepts would continue to shape and influence the practice of DMT for generations to come.

The work of Chace and many of the other founders of DMT has been integral in the development of the profession and its application in a variety of fields. Like most things, however, this work does not come without critique. Considering grieving Black youth, DMT has been challenged for its need to speak to clients from culturally diverse backgrounds. These challenges have come in the form of addressing the structure and educational foundations for dance/movement therapist training (Chang, 2016; Carmichael, 2012), the need for more culturally attuned methods of observing and analyzing movements and behaviors (Caldwell, 2013; Nichols, 2019), addressing the norms in the practice that are Eurocentric, and othering of the experiences of clients of color (Kowano & Chang, 2019), and many more. An analysis of

literature on various interventions for youth of color found that there was a higher success of treatment outcomes when culturally sensitive interventions were used for those clients (Jackson, 2009). Also highlighted is the need for more research where the participants are of more diverse experiences. In the spirit of the aforementioned articles, the following section will address current literature speaking to DMT used in grief work, while highlighting whether or not the generalized finding of these studies can be transferred over to this specific population.

Body-Based Grief Work

The literature around death, grief, and DMT is varied. Some research leans more into the embodied experiences of someone who is actively dying (Dillenbeck & Hammond-Meiers, 2009). Considering adults, there is research that focuses on using DMT to develop resilience in caregivers of aging individuals (Champagne, 2024), as well as exploring the loss of a child from the perspective of a parent (Callahan, 2011). All of this research provides helpful insights into ways in which DMT encourages individuals to nonverbally process their experiences and explore them in safe and engaged ways; however, most are theoretical in nature and none of them center the experiences of Black children. The following research provides more nuanced information on how DMT could benefit this group.

Simpkins and Myers-Coffman (2017) looked at body memory as an avenue for processing the loss of a caregiver. In between collecting demographic information and a closing verbal interview, participants were guided through a brief physical warmup and then invited to bring their “body memory into consciousness” (Simpkins & Myers-Coffman, 2017, p. 196). Using prompts related to remembering their caregiver near the time of death and remembering losing their caregiver, participants engaged each prompt by writing a few words about those memories, created a movement phrase based on those words, and were asked to notice any

bodily sensations felt when repeating the phrase and later discuss the experience (Simpkins & Myers-Coffman, 2017, pp. 196-197). The resulting analysis of the sessions produced important themes surrounding time and relation to the past, specific body sensations, and emotional charge related to the experience (Simpkins & Myer-Coffman, 2017, p. 200). The authors acknowledge how much of their foundational literature centered the experience of White, Western culture and that alongside their own cultural positionality limiting the nature of the study (Simpkins & Meyer-Coffman, 2017, p. 203). Similarly, the study was impacted by the limited number of participants, though the pool of participants did represent different ethnic groups (Asian, Black, & White). Additionally, it is important to recognize that the participants, though having experienced the death as children, were not children at the time of the intervention, with one participant in the 19-28 age range and the other two falling between 29-38 years old (Simpkins & Meyer-Coffman, 2017, p 196). While this was done to ensure the safety of the participants, this leaves space open for exploring if a similar body-based intervention could be helpful for children or adolescents who are grieving.

Akunna (2015) analyzed the connection between Igbo ceremonial burial traditions and tenets of DMT. The author reveals that “a dirge in Igbo culture is not just a mourning song but also an act of homage, a mournful tribute to the dead” (Akunna, 2015, p. 41). Traditions include dancing and singing from members of the community ranging from children to elders. Akunna (2015) makes this link to the concept of being witness or being in silent participatory contemplation, as referenced by dance/movement therapist, Janet Adler. This form of relational witnessing described by Adler (1999) in the practice of *authentic movement*, is not the only connection made between DMT and these Igbo traditions. The author speaks on rhythm’s inherent connection to dance, dance as a creative social exploration, communal embodiment of

bodily sensations of feelings like grief for healing, and the catharsis that comes from a group experience as elements that are shared between these grieving rituals and DMT (Akunna, 2015).

While the Igbo people are most populous in Eastern Nigeria, it is no mere coincidence that aspects of their mourning rituals are found within African American communities. Adkins (2009) [as quoted by Akunna, 2015] says this: “Burial practices [among African Americans] include traditions and practices...for honoring the dead through retained and adapted cultural forms between Africa and the Americas... The most salient characteristic of this influence involves the ancestors... or the living dead” (p. 666).

Customs and traditions made their way in America by way of the transatlantic slave trade and the impact is seen in African American culture (Boston, 2022). On a larger scale, connections can be made to traditions of the second-line parades in New Orleans. These processions, incorporating music, dance, rituals, and community have developed as a practice for coping with various forms of trauma and grief, including that of death (Hunter, 2022; Bordere, 2008). Many of these practices can be traced back to West African roots (Sakakenny, 2011). Even on a smaller scale, traditions at funerals and wakes around memorializing the deceased exists in Black American culture (Rosenblatt & Wallace, 2013) and that was also a key feature in the mourning practices of the Igbo (Akunna, 2015).

Philpott (2013), while not offering specific interventions, interviewed three different dance/movement therapists in an effort to better understand their experience with working with grieving children and how that informed their clinical work. For the clinicians, themes pertaining to their own awareness of personal, emotional, and/or somatic responses, as well as instances of countertransference were noted (Philpott, 2013). Relating to the grieving child, themes of expression, relating to the person who died, the power of the therapeutic relationship, and

strategies towards creating containment through space, safety, and support were mentioned (Philpott, 2013). Interventions mentioned included “the use of props, specialized movement practices, and additional creative arts therapies” (Philpott, 2013, p. 161), alongside a focus on aiding in “regulating their own bodies as a teaching tool to encourage children’s integration of the techniques” (Philpott, 2013, p. 161). The participants also advocate for the use of DMT for grieving children due to their development of observational skills, knowledge of developmental movement needs, understanding of bodily impact and expressions of grief, and their creative exploration of self regulation, all of which come from the development of DMT practice (Philpott, 2013). Again, we see the influence of observation and the detriment it can cause if not enough work is done to ensure that this lens is built for noticing and not pathologizing behaviors that are outside of the dominant culture.

Similarly, Dominguez (2018) conducted a study investigating the relationship between the experience of four licensed dance/movement therapists and working with individuals that were experiencing disenfranchised grief. Across the participants, the largest factor contributing to a client’s experience of disenfranchised grief was social and cultural factors, with specific emphasis on the lack of social support, restrictive social perceptions, and social grieving parameters (Dominguez, 2018). One participant was quoted as saying, “If you express your grief in an angry way and you’re Black, then you’re written off as the angry Black woman. Your grief is not even acknowledged, especially if the way that you deal with it is through anger” (Dominguez, 2018, p. 263). This sentiment mirrors that of a Black child being punished or forced to isolate following an outburst in class over an unsupported grieving response. Using both structured movement interventions (like attunement) and structured improvisation approaches, participants claimed to have been able to curate trauma-informed spaces that

allowed the clients to safely navigate their symptoms in relation to the disenfranchised grief and use DMT as an outlet for that exploration (Dominguez, 2018). Though not explicit on the demographics of their clients, the participants had worked with children, adolescents, and adults, adding more conceptual validation for DMT and grief work with this group.

Other theoretical models have identified the need for addressing historical and race-related trauma. Combining elements of social justice, trauma-informed care, and DMT, Jorden (2022) proposes a model that brings together elements of historical acknowledgement, witnessing, nonverbal communication, tracking of clinician assumptions, facilitation of discussions around sociocultural locations and power dynamics within the therapeutic space, and a critical understanding of the positionality and value system of the clinician.

Campbell (2019) explored the inclusion of DMT to address the healing domains as outlined in Dr. Joy DeGruy's post traumatic slave syndrome (PTSS) theory. Using a collaborative development process including community organizations, educational programs, and local dance/movement therapists, they envisioned a program that would increase self-awareness and self-esteem, leadership opportunities, interest in higher education, sharing of knowledge with the community, and exploration of personal healing for African American youth in the Chicago area (Campbell, 2019). According to Campbell (2019), DMT was selected as an integral component to this program as it allows for "teens to express themselves and share experiences through creativity and body-based awareness" (p. 229). Unique to this program being effective for addressing culturally specific trauma, "DMT-informed approach helped to enrich the experience and create unity and group cohesion, which is an important aspect of DeGruy's Healing Domains" (Campbell, 2019, p. 229).

Potential Intervention Exploration

In lieu of evidence-based research that uniquely speaks to the needs of grieving Black children, the following interventions will be vetted for their capacity for further exploration in developing such an intervention framework. One approach that could serve as a foundation for an intervention curated for aiding Black youth as they experience grief and the bereavement process is *bodyfulness*. Caldwell (2018) is quoted as saying this about the method:

The body isn't a thing we have but an experience we are. Bodyfulness is about working towards our potential as a whole human animal that breathes as well as thinks, moves as well as sits still, takes action as well as considers, and exists not just because it thinks but because it dances, stretches, bounces, gazes, focuses, and attunes to others. (p. x)

Bodyfulness, a permutation of the words body and mindfulness, is steeped in an understanding of the organization of the body's biological building blocks.

Understanding of the function of cells as they combine to make tissue, which continue to form organs and so on, illustrate lessons that can be learned from the body and "help us bring bodyfulness to life" (Caldwell, 2018, p. 27). Exercises are developed from utilizing the principles of oscillation, balance, feedback loops, energy conservation, discipline, change and challenge, contrast through novelty and associations, and emotions (Caldwell, 2018). In this work, growth, healing, and understanding all come from an embodied engagement of these principles. This embodied engagement guides the individual as they begin to recognize not just the plethora of continuums that exist within our everyday experiences, but the knowledge of where on that continuum it feels important to be on at that moment in time.

There are different aspects of this theory that point to its potential applicability towards grief work with Black children. Caldwell (2018) highlights both the “historical use of physical difference as a weapon in the oppression and persecution of individuals and whole populations” (p. xxvii), and “the devaluing of the body itself as a source of identity and authoritative knowledge about our direct, lived experience of ourselves and the world” (p. xxvii), as forms of marginalization that warrant a reconnection to embodiment and bodyfulness. This form of difference that is oppressed and maligned is reflective of the experience of many Black Americans whose response to grief is policed due to how visceral it may be or how uncomfortable it might make others feel (DeCristafaro, 2024). This is a direct link back to the conversation of suffocated grief and its impact on the Black bereavement experience (Bordere, 2014).

Caldwell (2018) makes additional references to a phenomenon similar to suffocated grief. Established as *somaticism*, it involves an othering of a specific group of people. This unique form of oppression identifies “specific body parts, postures, gestures, movements, use of space, eye contact, voice tone, body size, body shape, and other markers of the body...and is used to lower status and physical safety, diminish rights, and exclude the *othered* from resources” (Caldwell, 2018, p. 171). In this example, those Black youth that are drawing the face of a deceased loved one on a desk or tagging a wall with the name of a fallen friend would be the ones subjected to this exclusion of support and erasure of their grief. Bodyfulness is touted as a form of activism that can allow an individual to better listen and attune to their embodied experiences, and as such, will equip them with tools to more effectively combat this type of othering that has become far too common (Caldwell, 2018).

To date, bodyfulness has only been documented in research literature as a tool for reducing work-related stress for teachers in higher education through improved mind-body integrations and exercises that improve self-knowledge (Rodriquez-Jimenez et al., 2022). The participants were adults who were on the teaching staff at the Universidad Europea de Madrid. There was no mention of their ethnic or cultural backgrounds, which opens one to question the efficacy of a similar model for Black Americans. Similarly, there is no explicit reference of the ages of the participants, outside of calling them adults. There may need to be adjustments to this usage of bodyfulness if it is to be applied for children. The most notable limitation of this approach is that there is no explicit mention or connection to grief work, requiring specific and intentional modifications if it is to be effective for working in bereavement.

Another theoretical approach that could benefit from more research and application in grief work is embodied code-switching. This theory pulls from the bodily experiences of sensation and nonverbal communication “to illuminate and strengthen the experience of having a multicultural identity and code-switching” (Edelman, 2018, p. 183). By naming, honoring, and validating the experience of code-switching, the individual would gain the agency to switch, not as an unconscious reaction to a situation, but instead, as “an embodied skill” (Edelman, 2018, p. 184), that recognizes the diversity within the individual and their embodied portfolio of responses. Code-switching typically refers to linguistic shifts in language and dialects; however embodied code-switching looks more closely at gestures and behaviors displayed by someone as a result of their environment.

This culture-centered approach inspires self-reflection and identity fortification through the use of the *embodied code-switching feedback loop* and the *identity expression infinity loop*. The *embodied code-switching feedback loop* is accessed through the entry points of sensation, interpretation, and action, each guided through exercises that provide information from an “inner awareness of sensation” (Edelman, 2018, pp. 193-194), a reflection on your histories and influences into meaning-making, and a reflection on which environments elicit certain behaviors. The *identity expression infinity loop* magnifies the former loop and provides a visual for the process of someone’s identity as it shifts and adjusts through various social and cultural environments (Edelman, 2018). These loops, combined with conversations around cultural embodiment and somatic awareness, come together to “take what has felt like a challenge in their lives and build it into a powerful skill that values all parts of their experience” (Edelman, 2018, p. 200).

An embodied interrogation of one’s narrative identity could allow for the development of a verbal and nonverbal language which can foster a better understanding of the human experience (Caldwell, 2021). In this way, embodied code-switching could be useful in allowing Black youth the opportunity to both protect themselves against the psychological stress that comes as a result of not having adequate grief supports due to suffocated grief (Bordere, 2014), and offer them the ability to engage in grieving and/or self expressive patterns that feel safe, validating, and culturally affirming.

Current literature on this theory is predominantly theoretical and focuses its attention on creating safe therapeutic spaces for clients coming from diverse ethnic and/or cultural identities or using this and other somatic approaches as a way to combat various forms of oppression and trauma that reside within the body. Galdos and Warren (2022)

use movement experientials to aid clients in embodying their identities in multiple contexts and using that information as a resource for navigating various social and societal demands. While the article's focus is on race and ethnicity dynamics, the authors mention the potential for "applying this approach to other identities" (Galdos & Warren, 2022, p. 92). An adapted version of this embodied exploration could allow a Black child the ability to recognize and uplift their own cultural practices around mourning and use that information to inform their newfound identity as a grieving child/cousin/peer/etc, alongside their more established identities as a student/peer/employee/etc.

Though not speaking specifically to the experience of grief, Holohan (2022) advocate for the efficacy of somatic interventions in addressing four common themes of internalized oppression, including "invisibility, self-blame, loss of self, and the way that internalized oppression narrows our window of tolerance and affects our ability to navigate other forms of oppression we may encounter" (p. 25). The first three symptoms are reflected in the various ways children developmentally experience grief (Dougy Center, 2021) and these experiences are compounded for children of color, especially when accounting for additional factors like an increased likelihood of ACEs (Harris, 2018) and an uneven distribution of grief-related experiences (Wilson & O'Connor, 2022). This connection highlights potential in using a body-based approach like embodied-code switching for facilitating a safer and culturally held bereavement process for Black children.

Discussion

"Ooh child, things are gonna get easier. Ooh child things 'll get brighter" – Five Stairsteps

Assisting someone as they navigate grief can be extremely complicated. This task becomes even more complex when the intersections of race and age are properly considered. Creating interventions that center these identities can no longer be an afterthought. Instead, it must be at the forefront of literature. Black youth deserve and are in need of culturally informed interventions that can aid them during bereavement. Such was the aim of this work. Through this literature review, factors connected to the experiences of grief for Black youth were analyzed and theories attached to grief work were vetted for how culturally responsive they are for this population. Additionally, dance/movement therapy was evaluated for its current usage as a culturally informed intervention for grief work for Black children, alongside propositions for potential body-based frameworks worth exploring.

The literature points to different nuances among the topics of grief in its many forms, ranging from traditional (American Psychological Association, n.d.) to disenfranchised (Piazza-Bonin et al., 2015; Doka, 2009) to suffocated (Bordere, 2016). Other findings show that grief responses can vary for different children depending on their age and support around the bereavement process must pay attention to the circumstances around the loss and the child's developmental age (Doughy Center, 2021). The experience of Black children and their bereavement process requires even greater attention. Their overexposure to death (Bordere, 2019) and the religious, stigmatized, and communal approach to bereavement (Rosenblatt & Wallace, 2013) require unique interventions that center their experiences of death and honors cultural traditions. While literature is limited, dance/movement therapy shows promise as a modality that can support cultural movements and traditions (Akunna, 2015), while tackling some of the historical, institutional, and systematic forces that influence their relationship to grief (Campbell, 2019).

Academic literature around the bereavement experience of Black children has not been thoroughly explored. This leaves those interested in supporting this population to rely on generalized assumptions around grieving children and the Black community to inform their work. Future research should aim to explore not just their unique experience, but the factors that influence it. While this paper mainly focuses on grief as a function of a familial death, this is not the only reason that Black children grieve. In an effort to limit the scope of this paper by narrowing down the contributing grief factor, the other interconnecting factors that amplify, accompany, or even preclude the grief that was referenced were left out. These other factors might include portrayals of Black deaths in the media, police brutality on Black bodies, family separation due to incarceration/divorce/separation/displacement, and so much more. Focusing on these and other contributing circumstances would allow for research that centers what many of these children have gone through and provide a more nuanced foundation for the development of interventions.

Similarly, this review is limited by the lack of published research around dance/movement therapy being implemented in bereavement settings. More research needs to be done in documenting actual interventions that have been implemented and can be vetted for impact and validity with different groups. This will open the space for others to take said interventions and tailor them towards the individuals they serve, while centering the intersections of their identities in the work. Bodyfulness and embodied code-switching do not currently have any published literature citing their application in grief work. As such, the suggestions provided are limited to the theoretical connections and implications found by this author. This however is the next step that needs to be made, particularly within the dance/movement therapy sphere. More connections of frameworks and approaches that prioritize nontraditional ways of healing

need to be uplifted so that more people can see the work and develop interventions that can be assessed, analyzed, and improved upon. This is the only way that the field will continue to develop towards addressing the needs of those who have historically been left out of the conversation.

Everyone will experience some form of loss within their lives and as a result will experience some degree of grief. While each grief reaction may be different, everyone deserves the appropriate amount of support for their bereavement process. This literature review has identified the need for increased support for grieving Black children and the biggest component of that is providing culturally informed supports. As suggested in this paper, dance/movement therapy has the capacity to fill that role. This thesis merely scratches the surface when it comes to the nuances of grief for children, Black children specifically, and the power that DMT can have in this process. However, highlighting the lack of research and continuing to keep the needs of these children at the forefront of the discussion will ensure that no child has to grieve alone.

“I grieve different. I grieve different.” – Kendrick Lamar

References

- Adkins, L. E. (2009). Burial in the African Diaspora-burial: African practices in the Americas. Appendix: Related topics. In A. B. Penn, S. C. Finley, & T. Alexander (Eds.), *African American religious ethics*, 2 (pp. 666–669). Greenwood Books.
- Adler, J. (1999). Who is the witness? A description of authentic movement. In P. Pallaro (Ed.), *Authentic movement: Essays by Mary Starks Whitehouse, Janet Adler and Joan Chodorow* (pp. 121–131). Jessica Kingsley.
- Akunna, G. I. (2015). An African Igbo perspective on mourning dances and their application to dance/movement therapy. *American Journal of Dance Therapy*, 37, 39-59.
<https://doi.org/10.1007/s10465-015-9190-0>
- Alvis, L., Zhang, N., Sandler, I. N., & Kaplow, J. B. (2023). Developmental manifestations of grief in children and adolescents: Caregivers as key grief facilitators. *Journal of Child & Adolescent Trauma*, 16(2), 447-457.
- American Dance Therapy Association (n.d.). *What is dance/movement therapy?*
<https://adta.memberclicks.net/what-is-dancemovement-therapy>
- American Psychological Association. (n.d.). *Grief*. <https://www.apa.org/topics/grief>
- American Psychiatric Association. (2022). *Diagnostic and statistical manual of mental disorders* (5th ed., text rev.). <https://doi.org/10.1176/appi.books.9780890425787>
- Balk, D. E., Zaengle, D., & Corr, C. A. (2011). Strengthening grief support for adolescents coping with a peer's death. *School Psychology International*, 32(2), 144–162.

Bernard, D. L., Calhoun, C. D., Banks, D. E., Halliday, C. A., Hughes-Halbert, C., & Danielson, C. K. (2021). Making the “C-ACE” for a culturally-informed adverse childhood experiences framework to understand the pervasive mental health impact of racism on Black youth. *Journal of Child & Adolescent Trauma*, 14, 233-247.

<https://doi.org/10.1007/s40653-020-00319-9>

Bordere, T. C. (2008). “To look at death another way”: Black teenage males’ perspectives on second-lines and regular funerals in New Orleans. *OMEGA – Journal of Death & Dying*, 58(3), 213-232. <http://doi.org/0.2190/OM.58.3.d>

Bordere, T. C. (2014). Adolescents and homicide. In K. Doka & A. Gucci (Eds.), *Helping adolescents cope with loss* (pp. 161-181). Hospice Foundation of America.

Bordere, T. C. (2016). Social justice conceptualizations in grief and loss. In D. L. Harris & T. C. Bordere (Eds.), *Handbook of social justice in loss and grief* (pp. 9-20). Routledge.

Bordere, T. C. (2019). Suffocated grief, resilience and survival among African American families. In M. H. Jacobsen & A. Petersen (Eds.), *Exploring grief: Towards a sociology of sorrow* (pp. 188-204). Routledge.

Boston, N. (2022). *How the trans-Atlantic slave trade created the African diaspora*. History.

<https://www.history.com/news/african-diaspora-trans-atlantic-slave-trade>

Boulware, D. L. & Bui, N. H. (2016). Bereaved African American adults: The role of social support, religious coping, and continuing bonds. *Journal of Loss and Trauma*, 21(3), 192-202. <http://dx.doi.org/10.1080/15325024.2015.1057455>

- Bruce, C. A. (2007). Helping patients, families, caregivers, and physicians, in the grieving process. *Journal of the American Osteopathic Association*, 107(12), 33-40.
- Callahan, A. B. (2011). The parent should go first: A dance/movement therapy exploration in child loss. *American Journal of Dance Therapy*, 33(2), 182-195.
<https://doi.org/10.1007/s10465-011-9117-3>
- Caldwell, C. (2018). *Bodyfulness: Somatic practices for presence, empowerment, and waking up in this life*. Shambala.
- Caldwell, C. (2021). Body, language and identity: Biology and phenomenology's role in experiential therapies. *GMS Journal of Art Therapies*, 3, 1-8.
- Carmichael, N. G. (2012). Turning towards multicultural diversity competence in dance/movement therapy. *American Journal of Dance Therapy*, 34(2), 99-113.
<https://doi.org/10.1007/s10465-012-9140-z>
- Campbell, B. (2019). Past, present, future: A program development project exploring post traumatic slave syndrome (PTSS) using experimental education and dance/movement therapy informed approaches. *American Journal of Dance Therapy*, 41, 214-233.
<https://doi.org/10.1007/s10465-019-09320-8>
- Carratala, S., & Maxwell, C. (2020). *Health disparities by race and ethnicity*. Center for American Progress.
<https://www.americanprogress.org/issues/race/reports/2020/05/07/484742/health-disparities-race-ethnicity/>

Centers for Disease Control and Prevention (n.d.). *Adverse childhood experiences*.

<https://www.cdc.gov/violenceprevention/aces/index.html>

Chaiklin, S. & Schmais, C. (1993). The Chace approach to dance therapy. In S. Sandel, S.

Chaiklin, & A. Lohn (Eds.), *Foundations of dance/movement therapy: The life and work of Marian Chace* (pp. 75-97). American Dance Therapy Association.

Champagne, E. R. (2024). Caregiver resilience and dance/movement therapy: A theoretical review and conceptual model. *Journal of Applied Gerontology*, 43(3), 319-327.

<https://doi.org/10.1177/07334648231210679>

Chang, M. H. (2016). Dance/movement therapists of color in the ADTA: The first 50 years.

American Journal of Dance Therapy, 38(2), 268-278. <https://doi.org/10.1007/s10465-016-9238-9>

Cohen, J. A., Mannarino, A. P., & Deblinger, E. (2006). *Treating trauma and traumatic grief in children and adolescents: A clinician's guide*. Guilford Publications.

Corr, C. A. (2021). Should we incorporate the work of Elisabeth Kubler-Ross in our current teaching and practice and, if so, how? *OMEGA – Journal of Death & Dying*, 83(4), 706-728. <https://doi.org/10.1177/0030222819865397>

Cunningham, R. M., Walton, M. A., & Carter, P. M. (2018). The major causes of death in children and adolescents in the United States. *New England Journal of Medicine*, 379(25). <https://doi.org/10.1056/NEJMs1804754>

Curtin, S. C & Arias, E. (2019). *Mortality trends by race and ethnicity among adults aged 25 and over: United States, 2000-2017*. National Center for Health Statistics.

<https://www.cdc.gov/nchs/data/databriefs/db342-h.pdf>

DeCristofaro, J. (Host). (2024, January 5). The realities of Black grief - Doneila McIntosh, M.Div., M.A. (No. 276) [Audio podcast episode]. In *Grief Out Loud*. The Dougy Center.

<https://www.dougy.org/news-media/podcasts/the-realities-of-black-grief-doneila-mcintosh-m-div-m-a>

DeGruy, J. (2017). *Post traumatic slave syndrome: America's legacy of enduring injury and healing*. Joy DeGruy Publications Inc.

Dillenbeck, M. & Hammond-Meiers, J. (2009). Death and dying: Implications for dance/movement therapy. *American Journal of Dance Therapy*, 31, 95-121.

<https://doi.org/10.1007/s10465-009-9074-2>

Doka, K. J. (2009). Disenfranchised grief. In C. D. Bryant & D. L. Peck (Eds.), *Encyclopedia of death and the human experience* (pp. 378–381). Sage.

Dominguez, K. M. (2018). Encountering disenfranchised grief: An investigation of the clinical lived experiences in dance/movement therapy. *American Journal of Dance Therapy*, 40,

254-276. <https://doi.org/10.1007/s10465-018-9281-9>

Dougy Center. (2021). *Developmental responses to grief* [Pamphlet]. Dougy Center: The National Grief Center for Children and Families.

- Edelman, M. W. (2018). Moving between identities: Embodied code-switching. In C. Caldwell (Eds.) & L. B. Leighton (Eds.), *Oppression and the body: Roots, resistance, and resolutions* (pp. 181-204). North Atlantic Books.
- Eisenbruch, M. (1984). Cross-cultural aspects of bereavement. I: A conceptual framework for comparative analysis. *Culture, Medicine & Psychiatry*, 8(3), 283-309.
<https://doi.org/10.1007/BF00055172>
- Galdos, L. J. & Warren, M. (2022). The body as cultural home: Exploring, embodying, and navigating the complexities of multiple identities. *Body, Movement, and Dance in Psychotherapy*, 17(1), 81-97. <https://doi.org/10.1080/17432979.2021.1996460>
- Gillies, J. & Neimeyer, R. A. (2006). Loss, grief, and the search for significance. Toward a model of meaning reconstruction in bereavement. *Journal of Constructivist Psychology*, 19, 31-65. <https://doi.org/10.1080/10720530500311182>
- Goldman, L. (2017). What complicates grief, loss, and trauma for students. In L. Goldman (Ed.). *Creating inclusion and well-being for marginalized students* (pp. 42-55). Jessica Kingsley Publishers.
- Gross, N. (2023). #LongLiveDaGuys: Online grief, solidarity and emotional freedom for Black teenage boys after the gun deaths of friends. *Journal of Contemporary Ethnography*, 52(2), 261-289. <https://doi.org/10.1177/08912416221105869>
- Hamilton, J. B., Best, N. C., Wells's, J. S., & Worthy, V. C. (2017). Making sense of loss through spirituality: Perspectives of African American family members who have experienced the death of a close family member to cancer. *Palliative and Supportive Care*, 16, 662-668.
<https://doi.org/10.1017/S1478951517000955>

Harris, N. B. (2018). *Toxic childhood stress: The legacy of early trauma and how to heal*. Bluebird.

Hill, L. H. & Holland, R. (2021). Health disparities, race, and the global pandemic of COVID-19: The demise of Black Americans. *New Directions for Adult and Continuing Education*, 2021, 55-65.

Holinger, D. P. (2020). *The anatomy of grief*. Yale University Press.

Holohan, R. (2022). Working with internalized oppression through body psychotherapy. *Body, Movement, and Dance in Psychotherapy*, 17(1), 19-33.
<https://doi.org/10.1080/17432979.2021.2019118>

Hunter, L. D. (2022). Second-line parades: A trauma-informed response to grief. *OMEGA – Journal of Death and Dying*, 0(0), 1-17. <https://doi.org/10.1177/00302228221085471>

Hunter, A. G., Friend, C. A., Murphy, S. Y., Rollins, A., Williams-Wheeler, M., & Laughinghouse, J. (2006). Loss, survival and redemption: African American male youths' reflections on life without fathers, manhood, and coming of age. *Youth & Society*, 37(4), 423-452. <https://doi.org/10.1177/0044118X05282280>

Kawano, T. & Chang, M. (2019). Applying critical consciousness to dance/movement therapy pedagogy and the politics of the body. *American Journal of Dance Therapy*, 41, 234-255.
<https://doi.org/10.1007/s10465-019-09315-5>

Kübler-Ross, E. (1969). *On death and dying*. Macmillan.

- Jackson, J. F. (2009). Building cultural competence: A systematic evaluation of the effectiveness of culturally sensitive interventions with ethnic minority youth. *Children and Youth Services Review, 31*, 1192-1198. <https://doi.org/10.1016/j.chidyouth.2009.08.001>
- Jacobs, S. (1993). *Pathologic grief: Maladaptation to loss*. American Psychiatric Association.
- Jorden, T. L. (2022). Acknowledging the past: Trauma informed social justice & dance movement therapy. *Body, Movement, and Dance in Psychotherapy, 17*(1), 54-70. <https://doi.org/10.1080/17432979.2021.1896579>
- Laurie, A. & Neimeyer, R. A. (2008). African Americans in bereavement: Grief as a function of ethnicity. *OMEGA – Journal of Death & Dying, 57*(2), 173-193.
- Levy, F. R. (2005). *Dance movement therapy: A healing art*. National Dance Association.
- Lin, L., Stamm, K., & Christidis, P. (2018). *How diverse in the psychology workforce?* American Psychological Association. <https://www.apa.org/monitor/2018/02/datapoint>
- Mariño-Ramírez, L, Jordan, I. K., Nápoles, A. M., & Pérez-Stable, E. J. (2022). Comparison of US gun-related deaths among children and adolescents by race and ethnicity, 1999-2020. *Journal of the American Medical Association, 328*(23), 2359-2360. <https://doi.org/10.1001/jama.2022>
- McCoyd, J. L. M. (2023). Forget the “five stages”: Ask the five questions of grief. *Social Work, 68*(1), 86-88. <https://doi.org/10.1093/sw/swac047>
- Metzger, I. W., Anderson, R. E., Are, F., & Ritchwood, T. (2021). Healing interpersonal and racial trauma: Integrating racial socialization into trauma-focused cognitive behavioral

therapy for African American youth. *Child Maltreatment*, 26(1), 17-27.

<https://doi.org/10.1177/1077559520921457>

Moore, S. E., Jones-Eversley, S. D., Tolliver, W. F., Wilson, B., & Harmon, D. K. (2022).

Cultural responses to loss and grief among Black Americans: Theory and practice implications for clinicians. *Death Studies*, 46(1), 189-199.

<https://doi.org/10.1080/07481187.2020.1725930>

National Child Traumatic Stress Network. (n.d.). *What is a traumatic event?*

<https://www.nctsn.org/what-is-child-trauma/about-child-trauma>

Neimeyer, R. A. (2001). The language of loss: Grief therapy as a process of meaning

reconstruction. In R. A. Neimeyer (Ed.), *Meaning reconstruction & the experience of loss* (pp. 261-292). American Psychological Association.

Neimeyer, R. A., Baldwin, S. A., & Gillies, J. (2006). Continuing bonds and reconstructing meaning: Mitigating complications in bereavement. *Death Studies*, 30, 715-738.

<https://doi.org/10.1080/07481180600848322>

Pabon, A. J-M. & Basile, V. (2021). It don't affect them like it affects us: Disenfranchised grief of black boys in the wake of peer homicide. *The Urban Review*, 54, 67-82.

<https://doi.org/10.1007/s11256-021-00605-2>

Piazza-Bonin, E., Neimeyer, R. A., Burke, L. A., McDevitt-Murphy, M. E., & Young, A. (2015).

Disenfranchised grief following African American homicide loss: An inductive case study. *OMEGA – Journal of Death & Dying*, 70, 404–427.

- Philpott, E. (2013). Moving grief: Exploring dance/movement therapists' experiences and applications with grieving children. *American Journal of Dance Therapy*, 35, 142-168. <https://doi.org/10.1007/s10465-013-9158-x>
- Proust, V. (2024). By sharing our loss, we fight: Collective expressions of grief in the digital age. *Media, Culture & Society*, 46(2), 393-403. <https://doi.org/10.1177/01634437231207760>
- Rosenblatt, P. C. & Wallace, B. R. (2013). *African American grief*. Taylor & Francis Group.
- Rothweiler, B. R. & Ross, K. (2019). Fifty years later: Reflections on the work of Elisabeth Kübler-Ross M.D. *American Journal of Bioethics*, 19(12), 3-4. <https://doi.org/10.1080/15265161.2019.1674551>
- Sacks, V., & Murphey, D. (2018, February). The prevalence of adverse childhood experiences, nationally, by state, and by race/ethnicity. Retrieved from <https://www.childtrends.org/publications/prevalence-adverse-childhood-experiences-nationally-state-race-ethnicity>
- Saxon, S. V., Etten, M. J., & Perkins, E. A. (2015). *Physical change & aging: A guide for the helping professions* (6th ed.). Springer.
- Schoen, A. A., Burgoyne, M., & Schoen, S. F. (2006). Are the developmental needs of children in America adequately addressed during the grief process? *Journal of Instructional Psychology*, 31(2), 143-148.
- Sherrill, C. (2018). The oppression of Black bodies: The demand to simulate White bodies and White embodiment. In C. Caldwell & L. B. Leighton (Eds.), *Oppression and the body: Roots, resistance, and resolutions* (pp. 141-156). North Atlantic Books.

- Shonkoff, J. P. (2010). Building a new biodevelopmental framework to guide the future of early childhood policy. *Child Development, 81*(1), 357-367.
- Shonkoff, J. P. & Garner, A. S. (2012). The lifelong effects of early childhood adversity and toxic stress. *Pediatrics, 129*(1), 232-246. <https://doi.org/10.1542/peds.2011-2663>
- Simpkins, S. A. & Myers-Coffman, K. (2017). Continuing bonds in the body: Body memory and experiencing the loss of a caregiver during adolescence. *American Journal of Dance Therapy, 39*, 189-208. <https://doi.org/10.1007/s10465-017-9260-6>
- St. Thomas, B. & Johnson, P. (2007). *Empowering children through art and expression: Culturally sensitive ways of healing trauma and grief*. Jessica Kingsley Publishers.
- Stout, J. H. & Fleury-Steiner, B. (2023). Stigmatized bereavement: A qualitative study on the impacts of stigma for those bereaved by a drug-related death. *OMEGA – Journal of Death & Dying, 0*(0), 1-20. <https://doi.org/10.1177/00302228231203355>
- Stroebe, M & Schut, H. (1999). The dual process model of coping with bereavement: Rationale and description. *Death Studies, 23*, 197-224. <https://doi.org/10.1080/074811899201046>
- Stroebe, M. & Schut, H. (2010). The dual process model of coping with bereavement: A decade on. *OMEGA – Journal of Death & Dying, 61*(4), 273-289. <https://doi.org/10.2190/OM.61.4.b>
- Smyke, A. T., Bailey, L. O., & Zeanah, C. H. (2017). Mental health implications for children of incarcerated parents. *Loyola Law Review, 63*, 405–433.

- Thacker, N. E. & Duran, A. (2022). Operationalizing intersectionality as a framework in qualitative grief research. *Death Studies, 46*(5), 1128-1138.
<https://doi.org/10.1080/07481187.2020.1795749>
- Umberson, D., Olson, J. S., Crosnoe, R., Lui, H., Pudrovska, T., & Donnelly, R. (2017). Death of family members as an overlooked source of racial disadvantage in the United States. *Proceedings of the National Academy of Sciences, 114*(5), 915-920.
<https://www.pnas.org/doi/epdf/10.1073/pnas.1605599114>
- Van der Kolk, B. (1997). Post traumatic stress disorder and memory. *Psychiatric Times, 14*(3).
<https://www.psychiatristimes.com/view/posttraumatic-stress-disorder-and-memory>
- Van der Kolk, B. (2014). *The body keeps the score: Brain, mind, and body in the healing of trauma*. Penguin Books.
- Varga, M. A., Bordere, T. C., & Varga, M. D. (2022). The holistic grief effects of bereaved black female college students. *OMEGA – Journal of Death & Dying, 86*(2), 488-502.
<https://doi.org/10.1177/0030222820976298>
- Wade, B. (2021). *Grieving while black: An anti racist take on oppression and sorrow*. North Atlantic Books.
- Wilson, D. T. & O'Connor, M. (2022). From grief to grievance: Combined axes of personal and collective grief among Black Americans. *Frontiers in Psychiatry, 13*, 1-8.
<https://doi.org/10.3389/fpsy.2022.850994>
- Worden, J. W. (2018). *Grief counseling and grief therapy. A handbook for the mental health practitioner (5th ed.)*. Springer Publishing.

Worden, J. W. & Silverman, P. R. (1996). Parental death and the adjustment of school-age children. *OMEGA – Journal of Death & Dying*, 33(2), 91-102.

<https://doi.org/10.2190/P77L-F6F6-5W06-NHBX>

Yousuf-Abramson, S. (2021). Worden's tasks of mourning through a social work lens. *Journal of Social Work Practice*, 35(4), 367-379. <https://doi.org/10.1080/02650533.2020.1843146>

Zablotsky, B. & Terlizzi, E. P. (2020). *Mental health treatment among children aged 5-17 years: United States, 2019*. National Center for Health Statistics.

[https://www.cdc.gov/nchs/products/databriefs/db381.htm#:~:text=Non%2DHispanic%20white%20children%20\(12.4,in%20the%20past%2012%20months.](https://www.cdc.gov/nchs/products/databriefs/db381.htm#:~:text=Non%2DHispanic%20white%20children%20(12.4,in%20the%20past%2012%20months.)

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In the judgment of the following signatory this thesis meets the academic standards that have been established for the above degree.

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