

## END-OF-LIFE CONVERSATIONS

# Guide for parents to prepare children/young people when someone close is dying

This leaflet is for parents and caregivers who are supporting a child or young person when someone very important to them is very unwell or dying. The term child will refer to both children and young people throughout this guide.

### 1 The basics: talking with children about serious illness

#### Telling children helps them cope

Many parents want to protect children by saying very little. However, children usually sense when something serious is happening. When no one explains, they may:

- Imagine things that are worse than the truth
- Blame themselves for what is happening
- Feel left out or less important

Children who have been told, in simple and honest language, what was happening before someone died often say they are glad they were told.

You do not have to get every word exactly right. What matters most is that your child feels:

- Included, not left out
- Loved and cared for
- Able to ask questions over time

#### Be gentle with yourself

It's natural to hope that, if you find the right words, you can make things feel a little easier. Although no words can change what is happening, your presence and honesty can make a real difference. Instead of aiming to say everything perfectly, try to focus on being warm, truthful, and there for your child.



Try to remind yourself:

- You would do anything to make things better, and what matters most is that you are there for your child.
- You can support your child by being honest, kind, and present.
- Your child does not need perfect words – they need you.

Being compassionate with yourself can help you feel calmer, which in turn can help you communicate more clearly.

#### Timing and setting

There is no single “right” moment, but these pointers may help:

- Try to talk at a time when you are not in the middle of a crisis or very overwhelmed
- Pick a fairly calm, quiet time when you're unlikely to be interrupted
- Some people find it easier to talk while walking, in the car, or side by side rather than face to face
- If you can, avoid starting a big new conversation right at bedtime. If it does come up then, do something comforting afterwards – read a story, sit together quietly, or talk about something soothing before you say goodnight
- Think about whether another trusted adult (friend or relative) should be part of the conversation – someone your child knows well and feels safe with.

*Making conversations easier*

### “Gather before you give”

Before you explain, try to find out what your child already knows and thinks. You might say:

*Can you tell me what you've noticed about how Mum has been lately?*

*What do you think is going on with Dad?*

Listen for misunderstandings. For example, some children may think:

- They could catch the illness
- Their behaviour or thoughts have caused the illness
- The person is staying in hospital because they don't want to be at home

Once you know what they understand, you can fill in the gaps more clearly.

### Listen first, then gently guide

When your child speaks:

- Try not to interrupt, even if they make a mistake.
- Let them finish their thought.
- Then gently clarify or correct any misunderstandings

Show you value what they are saying by using encouraging responses such as:

*Mmm hmm*

*Thank you for telling me that.*

*I know this is really hard to talk about.*

*I get it*

Even when their thoughts are difficult or unexpected, try to show that you are listening and taking them seriously.

### Let them know they can talk freely

Children sometimes worry that talking about scary things will upset you further, or that they might get in trouble.

You can reassure them by saying things like:

*Even though I'm really sad, what you say won't make it worse.*

*I won't be cross with you for anything you say about this.*

This can make it easier for them to be honest.

### Use your child's language – and be clear about dying

Listen to the words your child uses – for example “sick”, “getting worse”, “not here anymore”. Use their words when you respond, and gently add clearer information if needed.

Try to avoid phrases like “gone to sleep” or “passed away”. They can be confusing and may make children afraid of sleep.

You might say something like:

*Your mum is very, very ill, and the doctors don't have any treatments or medicines that can make her better. It's different to when you go to the doctor with a sore throat and you get medicine. When someone is this ill, their body starts to slow down. They might not be able to talk or walk, but they can still hear you.*

And then:

*This means your mum's body will stop working, her heart will stop beating, she won't be able to breathe anymore, that is called dying.*

These are only examples. You can adapt them to fit your own words and beliefs.

### Keep it short – and follow up

Children often manage better with several short conversations rather than one long one.

After you've talked:

- Make time to do something your child enjoys – reading, drawing, a game, a favourite TV show
- Let school and other key adults know (for example, a teacher, coach, or relative), so they can support your child too

You can always come back to the topic again. Think of it as many little talks, rather than just one big one.

## 2 Helping your child talk about what's happening

It can be tempting to talk at children, especially when we are anxious. But asking gentle questions and really listening helps you understand what they are thinking and feeling.

### Helpful ways to start questions

Questions that invite, rather than push, can feel safer.

Useful starters include:

*I wonder if...*

*Is it okay if... /Would it be alright to...*

*I'd really like to hear...*

These phrases show that you are interested, but you are not forcing them.

### Let them raise the topic where possible

You can ask questions that give your child the chance to bring up what is on their mind:

*I wonder, have you been thinking about how Mum is doing?*

*You know you haven't been sleeping so well – what do you think that might be about?*

*What do you think when you see Mum getting more and more tired?*

*Have you thought about why Dad might be getting more and more sleepy?*

If they have mentioned something before, you can gently return to it:

*The other day you said... Can I ask what got you thinking about that?*

You can also ask about their reaction to things other people have said:

*How do you feel when the doctor said... What did you think?*

### When you need to be more direct

Sometimes you may feel it is important to name what is happening more clearly. You could say:

*I know it's really hard, but I need to talk with you about Mum being really ill.*

It can help to follow this with reassurance that you will go at their pace and can pause at any time.

## 3 Reassuring your child

### Showing empathy

Empathy means showing that you recognise and care about how your child may be feeling. It does not mean saying you know exactly how they feel. You might say:

*I can see you're really upset.*

*It makes sense that you feel angry/sad/worried.*

*Lots of children feel like that when someone they love is very ill.*

### Using body language and closeness

Children often take comfort from your tone of voice and body language:

- Use a soft, serious tone – you don't need to smile all the time
- Sit or stand close by, at their level
- Offer a hug, or a hand to hold, if that usually feels okay between you

If your child does not like a lot of physical contact, just being nearby and attentive can still be very reassuring.

### Naming and normalising feelings

Help your child put words to what they might be feeling:

*Some children feel really worried about what's going to happen.*

*You might feel sad one minute and okay the next – that's okay.*

Let them know that all feelings are allowed:

*Whatever feelings you have, that's okay, you can tell me.*

You don't have to fix their feelings – listening and staying with them is often the most powerful thing you can do.

## 4 Things children may think and say

Children may think, feel, and react differently from adults. Being aware of this can help their questions and behaviour feel more understandable.

### “Did I cause this?”

Some children secretly worry that they have caused the illness or made it worse, for example because they:

- Were cross with the person
- Said something unkind
- Misbehaved

Even if your child does not say this out loud, it can help to bring it up gently:

*Sometimes children think they've caused the other person's illness, or made it worse by something they did or said. If you've ever thought that, I want you to know it's not your fault. Nothing you did or didn't do has made this happen.*

You can repeat this reassurance more than once.

### Different emotional reactions

Children may:

- Show no obvious emotion at first
- Be very upset, tearful, or clingy
- Become angry or irritable
- Seem fine for a while, then upset later

All of these can be normal. Try to:

- Notice and accept their reaction without judging it
- Offer comfort and routine
- Keep the door open for more conversations later

### Practical and blunt questions

Children often ask very direct, practical questions, for example:

*Will we still be able to live in our house?*

*Will they leave me money in their will?*

*Who will look after me?*

*When will they die?*

These can sound shocking, but usually they are your child trying to make sense of what this will mean for their life. Try to:

- Answer as clearly and honestly as you can
- Say when you don't know, and offer to ask someone who might know
- Explain that some things (like exactly when someone will die) cannot be predicted

### Questions about time – “When will they die?” / “Will they be here for my birthday?”

Younger children, you might say:

*That's such an important question. I really wish I could answer it properly, but we can't know for certain when Mum will die. We really hope she will still be here for your birthday, but I can't promise that. What we can do is think about something special you might like to do with her now, even if it's something small like cake, a film, or just being together.*

## 5 Looking after yourself

Supporting a child while someone they love is dying is very hard. You may feel there is no space for your own needs, but looking after yourself – even in small ways – can help you support your child.

- Try to eat and drink regularly, even if only small amounts
- Rest when you can; short breaks still count
- Accept offers of help from friends, family, or professionals
- Let key people (school, GP, close relatives) know what is happening so they can support you and your child

You do not have to do this alone. It is okay to ask for help, and to tell professionals what you and your child need.

Older children and teenagers, you might say:

*I'm really glad you asked that question. Some people in your mum's situation live for a few days, some for a few weeks, and sometimes longer. It depends on how their body responds, and that can change quickly.*

*I really wish I could say for sure whether Mum will be here for your birthday, but I can't promise that. What we can do is think about something special you and Mum might like to do together now, whether that's having some cake, watching a film, or just spending some nice time together.*

### When the person seems a bit better for a while

Sometimes, after you have spoken to your child about someone dying, the person may seem a bit better for a while – more awake, more talkative, or more comfortable. This can be confusing.

For a younger child, you might say:

*Your mum is still very sick and you know we can't make the illness go away. Today she seems a little better than she did yesterday. When someone is very sick, they can have days when they feel a bit stronger and days when they seem weaker. We don't always know when those changes will happen.*

*What we do know is that the time you have with your mum is very special, so what might you like to do with her today?*

For an older child or young adult, you might say:

*Today she seems a bit better than she did yesterday. When someone is this unwell, it's common for them to change from day to day or even hour to hour. They can have times when they seem more alert and able to talk, and other times when they are really weak, tired and sleepy. We can't always predict when and how those changes will happen.*

*What this means is that, while we know she is going to die from this illness, we don't know exactly when. Because of that, let's do everything we can to spend time with her now.*



National Healthcare  
Communication  
Programme

[www.hse.ie/nhcprogramme](http://www.hse.ie/nhcprogramme)   @NHCPprogramme

This leaflet offers general guidance. If you are unsure about how to talk with your child in your particular situation, please speak with a member of your care team – they can help you think through the words and timing that feel right for your family.