



Why do we need to grieve?

The death of someone we love is emotionally devastating. It may be the greatest loss that we will ever have to contend with. Yet death is an unavoidable part of life, however little we like it. One in four adults will have experienced the death of someone close to them within the past five years. For some people, this will be one of many experiences of bereavement; for others it will be their first encounter with death. Its impact can vary from the bearably painful to the emotionally catastrophic. Mourning is the way we come to terms with bereavement. It's about letting go of the person we have lost; gradually changing the nature of the bonds that attached us to them. We have to come to accept that we will never see that person again in this life. If we try to avoid this natural process, we will be unable to live fully for the rest of our lives, and could be storing up trouble for ourselves later on. The funeral, marking the end of the first few days, is an important part of the grieving process. Funerals offer the best chance to remember the life of the person who has died, to say goodbye to them and to share that farewell with other mourners. In acknowledging death we affirm life. In marking the passing of the one we have loved, in the company of friends and family, we also affirm the values of our community and strengthen the bonds between those left alive. These bonds are necessary to life and to the process of mourning.

The funeral is very important, but it is only the first part of the grieving process. Grieving is not much understood or acknowledged in our society. We are often discouraged from 'being morbid', and death and grieving have become a subject that is avoided. Yet acknowledging the emotions surrounding death is important to our emotional wellbeing.



Why do people react differently?

There are no rules about the natural process of grieving, it's a different experience for everyone and reactions will vary. They will usually depend on your previous relationship with the dead person and how you felt about them, as well as on your own personal history. The circumstances of the death will also affect your grief. The death of an older person who has lived a long and full life will feel appropriate, no matter how saddening. But the death of your child, or a miscarriage, can seem unbearable and may never make sense; it may be hard not to feel that this is a 'wasted life'. For a survivor of someone who has committed suicide, it's a question of facing a death that is, more often than not, unexpected, untimely and possibly violent.

How might people respond?

People experience a variety of possible physical and emotional responses to losing someone. You may feel depressed, permanently exhausted or full of aches and pains. You will probably expect to feel sad, but, instead, you may feel numb to begin with, void of any feeling. Your typical response to everything may be slow, automatic and cold. This is to do with being in shock.

Shock

Shock is usually associated with sudden death, but even when a death has long been expected, you may still experience shock when you hear the news. There are many practical arrangements to be made after someone dies. You may find yourself carrying out these tasks in a perfectly competent way, while feeling quite divorced from what is going on around you. You may even find it hard to cry. Because you are not 'breaking down' other people may assume that you are uncaring or stoical. Or they may tell you that you are coping well. Take no notice of such opinions. The shock may be a useful protection, which gets you through the first few days.



Lack of concentration

Some people may find it difficult to concentrate, to sort out priorities or even to order their thoughts. Tasks that are usually relatively simple to perform may become major obstacles or feel too difficult to handle. You may find yourself unable to cope with all the arrangements you need to make. Do allow willing helpers to support you through this.

Disbelief

A feeling of disbelief is a common and, usually, passing reaction to a bereavement. It may be more likely among people who didn't get a chance to say goodbye, because they weren't there or didn't see the body afterwards. If the death was sudden (because of a heart attack or a road traffic accident, for instance), it can, naturally, take longer to accept its reality.

Tiredness

Apart from feeling very weepy, people often become apathetic, withdrawn or very tired. They may have problems sleeping and lose their appetite. Although these physical effects and sensations may be frightening, they are not, in themselves, any cause for concern, provided that they don't go on for too long.

Insecurity

It's perfectly natural to feel relief, too, because someone's suffering is over, or because a long period of uncertainty has come to an end. It's also quite common to feel anxious. You may fear you'll be overwhelmed by grief or that you can't survive without the person you loved. You may become more aware of danger and of death, in general, and develop a much stronger sense of your own mortality. This can leave you feeling very insecure.



Panic

Some people suffer from panic attacks, experiencing a rapid build-up of overpowering sensations, such as a pounding heart, faintness or shaky limbs, which make them fear that they are going mad, will black out or are having a heart attack.

Guilt

You may find that you feel very guilty, accusing yourself of all sorts of things. Sometimes people get stuck with regrets about things left undone – a sense of 'if only'. On the other hand, you may feel guilty because the death, following a long illness, has now relieved you of a burden that was hard to cope with. There is usually no need to feel guilty.

Anger

Grief often gives rise to anger. The bereaved person may feel very angry at the person who has died for leaving them and causing them such pain. They may feel unable to admit this to themselves, and instead become bitterly angry with someone else, for instance the health system, a family member, the Government or God. This is why it's so common for family feuds to start at funerals! We are encouraged to idealise the dead; it can be hard to admit how angry we are with them. It's important to recognise that we are justified in feeling angry about neglectful doctors, careless drivers, or with anyone whose actions really contributed to the death. But we also need to acknowledge, sometimes, that the dead person was not perfect. We may have many reasons for being angry with them for things they did or didn't do in life. We also need to recognise that we can be angry with them just for dying, for leaving us to face life without them. It's not a comfortable feeling, and not rational. But it's a normal reaction.



Loneliness

After the funeral, people often realise how lonely they feel. That special person who made life meaningful and pleasurable, who made them feel good, has suddenly gone, and everything can feel hopeless and futile. A lack of family or other social support for the relationship can make the mourning process even more difficult. You may have been a partner in a gay or lesbian relationship, which family and friends may not have known about. You may be feeling even more isolated because your loss can't be openly acknowledged. It's especially important not to remain isolated, but to forge links with friends or networks that will support you and value your relationship with the deceased.

Suicidal feelings

This distressing and difficult period sometimes breeds suicidal thoughts. There are a number of support groups that can provide invaluable help at such times. But it's important to remember that relatively few people actually commit suicide following the loss of someone they loved.

How long does mourning take?

Grieving is a process that can take a long time. A bereaved person needs support from friends and family. It can also help if they have a strong spiritual belief system and regular spiritual practice. Over time, grief will resolve itself, although this can take a year or two. There are some factors that can make grief likely to be more prolonged. This can happen, for example, in the following circumstances: The grieving person is socially isolated, has no community or social support, and no spiritual practice or belief system. The mourner had unfinished business with the dead person, such as old quarrels which were never made up, or love or anger that were never spoken enough. The circumstances of the death were difficult. For example, if the death was part of a controversial disaster, such as a bombing or a plane crash. Or if the people responsible are never brought to justice. The person is missing, and there is no definite news of their fate. This often happens during a war or natural disaster such as an



earthquake. There was no funeral, or the mourner could not go. This may be because they were on the other side of the world at the time, because no one told them about it, or because their relation to the person who died was not socially acknowledged. (For example, they may have been lovers, but one of them was married to someone else.) All these can make the grieving process more difficult, and may mean that it takes longer.

Mourning and depression

Depression is a condition with symptoms very similar to those of grieving, such as appetite loss or overeating, not sleeping properly, suicidal thoughts, not being able to concentrate, feeling tearful or numb, losing interest in sex, and generally being in a low mood. But while grief is a process that people move through, depression goes on and on and does not change. Grief can usually be linked to a particular event involving loss; depression may come on at any time, apparently out of the blue. Or it may set in during the grieving process, if the person gets stuck in grief and can't move on. One cause of depression can be that the person has unresolved grief from a past loss, which they have not mourned fully. This is particularly true of losses in childhood. Such losses could have been obviously traumatic ones, such as the serious illness or death of a parent, which adults would recognise. There may also have been events, such as moving house, emigrating, or the death of a pet, which can be much harder for a child to deal with than for an adult. What is important is not so much the degree of loss, but the way in which it was dealt with by those caring for the child. Children are very resilient and can survive amazing stress and losses with the right kind of support. But if a person had to cope alone, unable to talk about what has happened or to grieve over it, even an apparently trivial loss, such as moving house, can have serious long-term consequences for their mental health. In such a case, an event in adult life, such as the death of someone close, the retirement of a colleague or other events involving loss, can bring on depression. It reminds them, unconsciously, of the unfinished business of mourning. It's very important, if this



happens, that the person finds someone to talk to, so that they can finish their mourning and find a fuller and more joyous life in the present.

What's the best way for me to cope?

Looking after yourself when you are grieving may not be easy, or foremost in your mind. Acknowledging your feelings and expressing them is a vital part of the natural, healing process, however. Grieving is hard work; exhausting and stressful. You need to look after yourself; body, mind and spirit. Physically, your immune system is likely to be depleted. You need good food (especially fresh fruit and vegetables, or failing that, a Vitamin C supplement) plenty of rest, and the right amount of exercise. Emotionally, you need to express your grief. Do whatever feels right for you. If you want to spend time poring over old photos and crying over a favourite jumper that reminds you of a special time together, then do so! The arts, especially music (either listening to it, singing or playing it yourself) can be very helpful at this time. Talking with others who share your grief is very important. You might also want to make pilgrimages to places you associate with the lost person, to paint pictures of your grief or write stories or poems. The important thing is to keep it flowing. This can be very difficult in a culture that does not support the grieving process. You may well come under pressure from colleagues or family to be brave or snap out of it. This is not helpful advice. What you need is time and space to express your grief, so avoid those who want to deny it to you, if you can.

Spiritual support

Spiritually, this can be a time of growth. If you have a spiritual or religious practice, it can be a very important source of support. If you don't have one, you may feel you now want to explore possibilities. On the other hand, a bereavement can shake your faith in God or other existing belief. If this is true for you, then you should take it seriously. Find spiritual teachers to talk it over with, whether



from your own tradition or path or from another. Or talk about it with a counsellor. As with emotional problems, if you deny or bottle up distress in this area you are going to make problems for yourself later on.

Practical support

Finally, it is most important that you ask for help, whether in cooking a meal, helping you sort out possessions or going to the coroner's office. You will need practical, emotional and spiritual help, and will damage your recovery if you stop yourself from asking for it. All the feelings and reactions mentioned in this booklet may come and go during bereavement, but in time their intensity is likely to diminish. If you continue to feel this way in the long-term, however, it may be a good idea to talk to your GP or other health professional.

What can relatives or friends do to help?

Bereavement affects families in many different ways. Each family member may well have their own methods of handling this. Some people may be open about their feelings; others withdraw. There may well be issues that need resolving, including a desire to deny what has happened or to blame someone for it. All this is part of coming to terms with the death and accepting that it has happened. From the start, everyone should recognise that there is no single set pattern to grief. So there is little value in making statements about how someone should grieve, whether their grief is abnormal or normal, how long grief should last, or what should be said to help someone get over it. The way to understand grief is to understand the person who is experiencing it, and the relationship he or she had with the person they are mourning.

Some of us may find it difficult to give this kind of support. We may not know how to react to such strong emotions. Bereavement can temporarily set people apart from friends, relatives and neighbours. It's not uncommon for those who have suffered a death to describe how people who would normally stop to chat now avoid them. This behaviour is usually the result of embarrassment, as the person thinks, 'I don't know what to say...' If only more people could realise how



hurtful this rejection is, and how much the bereaved person needs the presence of the other. In loss, we don't need the other's words so much as their willingness to be with us and to listen to us, when we want to talk about what we're going through. No one should do something they are uncomfortable with. You may be someone who finds it easier to offer practical support in the way of preparing a meal or helping with household tasks. This can be a great help to people, particularly if they feel unable to do much in the way of looking after themselves.

What other help is available?

General practitioner (GP)

Because family doctors are likely to have cared for the person during their last illness, even preparing the family for bereavement, they are in a unique position to give help after the event. Through their profession, they are acquainted with the reality of death, and this makes them good people to talk to.

Counselling

Counselling involves talking to someone who is trained in the art of listening, so that you can express how you feel and begin to find your own solutions to your problems. Talking and being heard by someone who shows empathy and acceptance can help you to explore the issues that are troubling you. The counsellor may be able to help you to develop a greater understanding of your feelings, thoughts and behaviour. Your GP practice may have a counselling service attached to it, or your doctor may refer you to another counselling service within the NHS. Bereavement counselling can also be obtained from a variety of voluntary and private organisations.



Support groups

Support groups offer an opportunity to meet up with other people who are in a similar situation. They can break down feelings of isolation and, at the same time, show you how other people have coped. Finding that you can support others may help you, too. People who have experienced bereavement often lead these groups.

Medication

Your doctor may offer you minor tranquillisers or sleeping pills. They can be helpful, for a short period, but may make you sluggish, unable to concentrate and give you the sense that you don't care about anything. It's possible to become addicted to them, so coming off them may cause withdrawal symptoms. Increasingly, doctors are reluctant to prescribe tranquillisers for more than a few weeks. Sometimes, GPs prescribe antidepressants. These may also offer some relief, but can include anxiety and insomnia amongst their possible side effects. You may have problems coming off them. You may find yourself smoking or drinking more. These may help in the short term, but the disruptive effect on your body may cause other problems, especially if used for a long time. It is your decision if you want to use something to help numb your feelings for a short while.