Grief

Summary

- Losing a loved one to death can be a shattering event that affects you emotionally, physically and spiritually.
- There is no single, correct way to grieve. Misunderstandings about the grieving experience can cause difficulties for the bereaved person and others in their life.
- Grief is a process and not an event – most people will continue to grieve in subtle ways for the rest of their lives but will still be able to return to some sense of normality.
- Children and adolescents typically have different ways of coping from those used by adults.
- Grief can weaken your immune system. Try to take care of yourself, to avoid becoming ill.

Grief is your response to loss, particularly in relation to the death of a loved one. Grief can affect your thoughts, feelings, behaviours, beliefs, physical health and relationships with others. Many people experience feelings of sadness, anger, anxiety, fear and numbness.

The experience of grief can sometimes feel like a storm. A person may feel that the storm has passed, but then be surprised when the next storm strikes. These sudden temporary upsurges in the grief storm can be particularly strong when there is an anniversary or significant event (such as the date of the death or funeral, Christmas or the birthday of the person who has died) or when memories are triggered (such as by a piece of music or a particular smell).

It is important to recognise that grief is a normal experience and that the process of grieving does require experiencing the pain that accompanies the loss of a loved one. Grief is a process, not an event. It is a journey, not a destination.

Different experiences of grief

Grief is something that everyone experiences differently.

There are many factors that can influence a person’s experience of grief, including:

- the age of the person who is grieving (child, adolescent or adult)
- the type of relationship with the deceased person (for example, spouse, parent, sibling or friend)
- the nature of the relationship with the deceased person (for example, close, loving, remote, difficult or troubled)
- the way the person died (for example, after long illness, sudden death or suicide)
- religious or spiritual beliefs
- cultural practices
- availability of support from family, friends and community
- associated stresses (for example, financial difficulties, job loss, relationship breakdown).

Different grieving styles

Everyone grieves in their own way and, provided you are not causing harm to yourself, or those around you, there are no ‘right’ or ‘wrong’ ways to grieve.

Generally, there are two broad styles of grieving, but most people experience a combination of both. They are:

- the intuitive approach – people seek out social support and tend to focus on the emotional aspects of their loss and managing their feelings
- the instrumental approach – people tend to focus on the cognitive (thinking) aspects of their loss. They may...
grieve through activities and problem solving. This style tends to be more solitary and private, focusing on managing the thoughts that arise.

Misunderstandings about the grieving process can make the bereaved person question their feelings and sanity. Understanding what grief can be like, finding ways to safely express strong emotions, and coming up with coping strategies can help you endure the pain that accompanies grief.

**Grief is not predictable**

There used to be a widely held belief that a person progresses through various stages of grief such as denial, anger, bargaining and acceptance.

We now know that grief includes a wide range of emotions, thoughts and behaviours and that it doesn’t help to think that grief will always happen in a predictable and orderly way. Everyone moves through grief in their own unique way and each individual may experience it very differently.

Believing that grief follows predictable stages can lead to the expectation that a bereaved person will put the experience behind them within a certain time. The reality however, is that grief doesn’t have a timeline, and most of us will continue to grieve in subtle ways for the rest of our lives – even when we seem to be getting on with life.

**Range of reactions to grief**

Grief includes a wide range of emotions, thoughts and behaviours. You may experience some or all of the following reactions, as well as many that aren't included in the list.

Some of the many reactions associated with grief are:

- anger
- anxiety
- panic
- change in world view
- change of values and beliefs
- confusion
- sadness
- numbness
- depression
- sleeping difficulties
- physical symptoms
- changes in appetite
- low self-esteem
- difficulty concentrating
- inability to cope
- guilt and remorse
- helplessness
- hopelessness
- loneliness
- relief
- shock and disbelief.

**Children, adolescents and grief**

Children and adolescents typically use different ways of coping with loss to those used by adults.

Children may look to the adults around them to learn how to respond to the experience. A child needs timely, clear and direct information. They should also be allowed to ask questions. Attending the funeral and having an
opportunity to view the body are important rituals. You should encourage and support, but not force, a child to participate in these.

Ways of coping for young people sometimes create tension with adults. For example, they might play music and spend more time with their friends. The typical adolescent is dealing with the normal issues of independence and separation from parents. These developmental tasks can make it harder for them to accept support from the adults around them.

**Grief and illness**

Research shows there are clear links between the experience of grief and ill health.

Grief can disturb your immune system. Health effects can range from headaches, nausea, aches and pains, colds, influenza, anxiety, depression, and sleeping and eating difficulties, through to thoughts of suicide and an increased risk of acquiring various forms of disease.

If you are concerned, or physical symptoms persist, seek help from your doctor or a health professional.

**Coping strategies for grief**

You may need to experiment to find out which strategies are most helpful for you. Suggestions include:

- **crying** – some people feel that crying isn’t appropriate. They are afraid that once they start crying, the tears won’t stop. If you feel the need to cry, go ahead and do it. Crying is a normal human response to intense feelings. However, if there are no tears, it does not mean there is no grief. If possible, cry with someone, but many people prefer to cry alone, which is okay too

- **time alone** – if you feel the need, schedule some time alone each day to focus on your feelings and express them in whichever way feels natural to you. For example, you may choose to cry, look through photographs of your loved one, engage in a religious or spiritual activity, or write a diary

- **physical activity** – sometimes, people engage in physical activity as a way of releasing tension and distracting themselves from the intensity of grief

- **time with your family** – schedule time to grieve as a family. This could include talking about the deceased person, crying together and sharing your feelings

- **pampering** – include activities in your daily or weekly schedule that you enjoy. Choose the activity, if you can, that brings the greatest comfort

- **support team** – actively seek out support if you need it. This could include friends, workmates, doctors, community health centres, bereavement support groups or professional counsellors

- **memorial** – you may want to write letters to the deceased person, plant a memorial tree, put together a special photo album or commemorate their life in whichever ways feel meaningful to you and those close to you

- **professional help** – see your doctor for help and referral if you feel unsafe: for example, if you are distressed enough to want to hurt yourself or someone else.

**Philosophical and spiritual questions and grief**

Grief can raise important philosophical and spiritual questions, and may prompt us to ponder our faith and the meaning of life. Our experience of loss may shatter many of the assumptions that we have held about the world, such as ‘the world is a safe place’, ‘the old die before the young’ or ‘bad things don’t happen to good people’.

Many grieving people describe the experience of grief as ‘re-learning the world’. Some people also discover a deepening of their spiritual beliefs and can identify how they have grown as a result of their grief experience.

**Remembering your loved one**

There is an expectation that accepting the death of a loved one means letting go of them and their memory. The reality is, though, that many bereaved people continue to have a relationship with their loved one for the rest of their lives, through remembering them. Death ends a life, but it does not necessarily end a relationship.

You may like to talk about your loved one in general conversation or commemorate special events like their birthday. Keeping your relationship with the deceased person ‘alive’ is a healthy, normal response. On the other
Looking after yourself when you are grieving

Losing a loved one is a shattering event that can affect you emotionally, physically and spiritually. Try to look after yourself. You may consider:

- **diet and exercise** – grief affects the body and can cause symptoms such as sleeplessness, anxiety and a range of physical symptoms. Take care of yourself by paying attention to diet and getting regular exercise. Make sure that you receive good medical care if needed and try to develop a good relationship with your doctor.

- **relaxation and sleep** – schedule time every day to wind down, using whichever method works for you. Meditation, tai chi, taking a bath, playing sport, reading, doing hobbies, listening to music or watching your favourite television program may all help. Try to get enough sleep too, as grief can be exhausting.

- **care with addictive substances** – try to avoid using addictive substances such as cigarettes, alcohol and drugs to help you manage your grief. They may temporarily dull your pain, but can cause other health and behavioural difficulties. If you feel that you need medication, consult your doctor.

- **be realistic** – be kind and gentle to yourself. Accept that you need to grieve in ways that feel natural to you. Don’t judge or criticise yourself for not coping as well as you or others think you should.

Seeking further help for grief

Although grief can be very painful, most people (85 to 90 per cent) find that with the support of their family and friends and their own resources, they gradually find ways to learn to live with their loss and do not need to seek professional help.

Sometimes however, the circumstances of the death may have been particularly distressing, such as a traumatic or sudden death, or there may be circumstances in your life which make your grief particularly acute or complicated.

If you are finding it difficult to manage on a day-to-day basis, it may be helpful to see a counsellor or other health professional. It’s okay to admit you are struggling with your grief. No-one will think any less of you if you ask for help along the way.

Where to get help

- Your **GP (doctor)**
- Your local community health centre, hospital or palliative care service
- A trained bereavement counsellor
- **NURSE-ON-CALL** Tel. 1300 60 60 24 – for expert health information and advice (24 hours, 7 days)
- **Australian Centre for Grief and Bereavement** – bereavement counselling and support services Tel. (03) 9265 2100 or 1800 642 066
- **The Compassionate Friends Victoria** – grief support after the death of a son, daughter, brother or sister Tel. (03) 9888 4944 or 1300 064 068
- **Mercy Grief Services** – for people living in the western region of Melbourne Tel. (03) 9313 5700
- **Hope Bereavement Care** – for people living in the Barwon region Tel. (03) 4215 3358
- **Kids Helpline** – telephone counselling Tel. 1800 551 800 (24 hours, 7 days)
- **Lifeline** – crisis support and suicide prevention services Tel. 13 11 14 (24 hours, 7 days)
- **MensLine Australia** – 24 hours, 7 days Tel. 1300 789 978
- **Parentline Victoria** – 8 am to 12 midnight, 7 days a week, Tel. 13 22 89
- **SuicideLine Victoria** Tel. 1300 651 251 – for counselling, crisis intervention, information and referral (24 hours, 7 days)
- **GriefLine Community and Family Services Inc.** – loss and grief telephone counselling service, 12 noon to 3 am, 7 days a week Tel. (03) 9935 7400 or 1300 845 745

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