



mental health
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Grief and Loss

Grief is painful and at times seems bottomless. Intense emotions and mood changes are a normal part of grieving. The purpose of this information is to help identify some of the commonly experienced elements of grieving and provide some ideas on different ways of coping.

Grief is a natural reaction to death and other major losses and grieving is a very personal experience. There isn't a right or a wrong way. How we grieve is determined by our culture, our relationship to the person and the way they died, as well as our individual personality. Some stages of grief are commonly experienced although not everyone will go through all these stages. Grieving is a fluid process and people may experience many different emotions in one day.

Stages of Grief

The following 'stages' have been identified as experiences that many people go through. It is important to note that these stages vary widely between individuals and do not always occur in any particular order.

1. Numbness and denial

Feeling emotionally numb can be the first reaction to a death. In the denial stage you may refuse to believe what has happened. This could mean laying clothes out for the dead child or expecting the person to walk through the door. More commonly, people deny the impact the death has had on them and try to continue as normal.

2. Anger and guilt

Anger with ourselves or blaming others for the death is not uncommon, particularly when the death was sudden or unexpected. It seems we need to try to make sense of death and the accompanying pain in some way. We may look for someone to take responsibility. Other strong emotions and a longing for the person who has died can accompany anger. People may also feel agitated and find it difficult to concentrate, relax or sleep.

3. Bargaining

Many imagine the 'what ifs'. They may dwell on arguments they had with the dead person or things that they 'should' have done differently. Intellectually you understand that the person has died but it takes much longer to really accept this emotionally.

4. Sadness

Extreme sadness is a likely outcome for all those whose loved one has died. During this time many withdraw from family and friends, feel listless and tired, and are prone to sudden bouts of tears. Many feel like their life has lost its purpose and meaning.

5. Acceptance

Pain, sadness and depression start to lessen and things are seen in a more positive light, although you may never fully overcome the feeling of loss. There is a greater acceptance that life has to go on. After a while the sadness will clear and your energy levels and sleeping patterns return to normal. You will be able to remember the dead person without the accompanying feelings of deep sadness. It will be possible to focus on positive memories and re-invest energy and emotion into other relationships.

How Can You Cope During The Grieving Process?

- ask for help, understanding and support from family, friends or a support group
- tell people what helps and what doesn't help
- accept that some things are beyond your control and focus on the things you can influence
- avoid making major decisions
- if you're religious talk to the appointed person in your religion
- take care of your health - try to eat and get some rest
- be patient with yourself
- do some gentle exercise if possible
- express your emotions

Unhealthy Signs of Grief

Bereaved people often show symptoms similar to those of depression. However, only a minority become clinically depressed and unable to function. Intense and prolonged feelings of hopelessness and helplessness are signs of depression. If you think you may be depressed it is important to seek help from your doctor or a professional counsellor. If you are having thoughts of suicide, it is essential to get help from your doctor, community mental health team or a counsellor.

How Can You Help a Family Member or Friend who is Grieving?

At some time in our lives we will all have a friend or family member who is dealing with the death of someone dear to them. Like most people you may find yourself wondering what to say, or what not to say. This information sheet provides some suggestions that may help you feel more confident about the comfort and support you offer.

How Does Grief Affect A Person?

People deal with grief in extremely diverse ways and often this can make the person offering support uncomfortable. Despite individual uniqueness an overall pattern of grieving does usually occur. Understanding this may help you show compassion throughout the process.

Grief often begins with shock, numbness and possibly denial. This is usually followed by a time when the pain sets in and strong emotions may overwhelm the person. Commonly during the sadness following bereavement, the person may have no energy and feel listless. They may withdraw or have mood fluctuations, and this can be the hardest and longest period of the process. Finally, there is acceptance as the loss is

accepted – although this is not necessarily a happy acceptance. Energy and hope begin to return.

The entire process is different for everyone and is never orderly. Grief may return and be particularly painful around anniversaries, birthdays, family get-togethers and Christmas – times when the person's absence is all the more obvious. It is impossible to say how long the grieving process lasts. It will vary greatly depending on the relationship and nature of the death.

Helpful approaches:

Allow Grief

Don't allow your discomfort with the person's grief stop them from expressing it. While it can be difficult to watch somebody go through the grieving process it isn't helpful to give the person the message that says 'chin up'. It is important that the person does grieve.

According to research unresolved grief can lead to outbursts of anger and rage, restlessness, depression, addiction, compulsion, anxiety and panic disorders. Physical symptoms can include worsening or developing diabetes, heart disease, hypertension, cancer, asthma, allergies, constipation, diarrhoea and ulcers. Remember that it's unresolved grief that leads to problems.

Be Supportive

Many people hold back as they are afraid of saying or doing the wrong thing. Rest assured that the person grieving doesn't expect you to know what to say. It is generally felt that the important first step is to acknowledge the person's loss.

If you don't have the words a hug can speak volumes. Accept the person's grief and offer your supportive presence even if this makes you uncomfortable. Don't be afraid to talk about the dead person and share your memories of them, if you knew them.

Make allowances

Some grieving people may exhibit behaviours that their relationships and everyday activities, such as:

- isolating themselves on the other hand or not wanting to be alone
- resentment that others aren't grieving
- being critical or irritable in ways that are out of character

It is important to understand and make allowances for these behaviours.

Sensing the presence of a loved one

A number of people also sense the presence of a loved one. If the person concerned is worried, it may reassure them to know that it is common to 'hear' the voice of the deceased person or to 'see' or 'feel' their presence.

If you are concerned about how the person is grieving, it is a good idea to speak to a GP or grief counsellor.

Things that are usually not helpful:

- avoiding the person
- saying things like 'it's God's will', 'it's all for the best', or if a baby has died, 'you have other children' or 'you can always have another baby'. Comments like this discourage the grieving person from expressing their feelings.
- forgetting them after the funeral. This is often the time when many supports start to drift away and the real sadness begins to set in.
- expecting them 'to get over it.' Some losses we learn to live with but we don't 'get over.'

Further Reading

The Centre for Grief Education in Melbourne has a wide variety of books on all aspects of grief and bereavement and can sell books by mail.

Tel 1800 642 066 or www.grief.org.au

Coping with Grief by Mal McKissock and Dianne McKissock, ABC Books & Audio. 2001

35 Ways to Help a Grieving Child, The Dougy Centre for Grieving Children, 1999, ISBN 189053403X

Where to Go For Help

Mental Health Information Service

Tel 1300 974 991 for information about services in your area.

Make an appointment with your GP

National Association of Grief and Loss (NALAG)

Tel (02) 9976 2803 or www.nalag.org.au

SIDS and KIDS NSW

Support for anyone affected by the death of a baby during pregnancy or birth, or a child 0-6 years of age. Face to face counselling and a drop in centre.

Tel 1800 651 186 for 24 hour support line.

Tel (02) 9818 8400 for other information or www.sidsandkids.org/nsw

Grief Support Inc

Tel (02) 9489 6644 for referral and support service

www.griefsupport.com.au

Club Speranza

Tel (02) 9908 1233 or www.clubesperanza.org

Education, training, counselling, resources and support groups for people affected by suicide or self-harm.

Solace Association Inc

Tel (02) 9519 2892 or www.solace.org.au

A support group and counselling service staffed by trained volunteers for people who have lost a partner.

Lifeline

Tel 13 11 14 or www.lifeline.org.au
24 hour counselling, support and information.

The Compassionate Friends

Tel (02) 9290 2355. or www.thecompassionatefriends.org.au
Self-help for bereaved parents, grandparents and siblings.

Bereavement Service

Provides bereavement counselling for families and next of kin. Covers Ashfield, Liverpool, Canterbury, Marrickville and Canada Bay. See adults though children may also be seen.

Tel (02) 9767 5656.

Resource Centre

The Mental Health Resource Centre contains material that promotes a better understanding of mental health issues. New books and DVDs are purchased on a regular basis and visitors are welcome to come in and browse.

Much of the material can be borrowed and books can be mailed to those who are unable to come in. You can find the Resource Centre Booklist at our website: www.mentalhealth.asn.au

For further information contact 1300 794 991.

Medicare Rebate for Psychologists

A Medicare rebate is now available for up to 12 sessions per calendar year with a registered psychologist who has a Medicare Provider Number. To obtain the rebate you must be referred by an appropriate medical practitioner, i.e. a GP, psychiatrist or paediatrician. The practitioner will ensure that you meet the eligibility requirements and develop a management plan for your condition.

The cost and rebate from Medicare can vary depending on the consultation length and fee charged. If the psychologist bulk bills there will be no extra cost.

For further information about the rebate or to locate a psychologist in your area contact the Australian Psychological Society:

www.psychology.org.au

Tel: 1800 333 497

What is the difference between psychiatrists and psychologists?

Psychiatrists are medically trained doctors who have gone on to train further and specialise in the treatment of mental illness. They can prescribe medication. You need to be referred to a psychiatrist by your GP.

Psychologists are trained in human behaviour and have studied the brain, memory, learning and human development. They provide various services including assessment and psychological testing and various types of psychotherapy and/or counselling.

Disclaimer

This information is for educational purposes. As neither brochures nor websites can diagnose people it is always important to obtain professional advice and/or help when needed. The listed websites provide additional information, but should not be taken as an endorsement or recommendation.

This information may be reproduced with an acknowledgement to the Mental Health Association NSW. This and other fact sheets are available for download from www.mentalhealth.asn.au. The Association encourages feedback and welcomes comments about the information provided.

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Mental Health Information Service
Mental Health Association NSW Inc
Level 5
80 William Street
East Sydney NSW 2011

Phone: 1300 794 991
Fax: (02) 9339 6066
Email: info@mentalhealth.asn.au
Web: www.mentalhealth.asn.au