

Coping with Grief

“To spare oneself from grief at all cost can be achieved only at the price of total detachment, which excludes the ability to experience happiness.” Erich Fromm (1900-1980)

Since you are reading this handout, it is likely that someone close to you has died or that you have had a different kind of loss. Maybe a death or other loss has happened to someone else, and you want to help. It is good that you are trying to learn more about grief. Information can help you understand some of your (or another person’s) reactions to the loss. It can also provide reassurance that you will be able to adjust to this loss in your life, even if that might not seem possible right now.

What is grief?

Grief is a reaction to loss. It is more than sadness. Grief can affect your

- actions
- emotions
- thoughts
- body
- and spirituality.



What kinds of losses might I grieve?

We often think of grief as something that occurs after the death of someone close to us. That is certainly true. Grief can occur following all kinds of other losses in your life as well. You could grieve the loss of anything that was important to you. Some examples of situations in which people might grieve include: disability, illness, divorce, job loss, loss of home or treasured personal possessions, death of a companion animal, being assaulted, experiencing a disaster (e.g., fire, flood, hurricane, tornado), and not achieving an important goal in your life. Most of this handout focuses on grief following a death loss, but the content applies to other losses as well.

Do all people grieve the same way?

Many people have grief reactions that are similar. Yet, grief is very individual. The way you grieve will be influenced by many things, such as who/what you have lost, how a death occurred, your personality, culture, age, gender, other stressors in your life, and how satisfied you are with the support you receive from others. There is no right or wrong way to grieve (as long as you do not hurt yourself or others).

What are some common grief reactions?

Common grief reactions include those summarized on the next two pages by grief researcher William Worden. Some may seem unusual to you, but all are considered normal unless they continue over a very long period of time or are especially intense. You might have one reaction, several, or many. They might be very strong for a while and then lessen, or they might not be as strong but last for a long time.

*All photos courtesy FreeDigital Photos. Credits: page 8.

PATIENT HANDOUT



Coping with Grief

Actions:

- Trouble falling asleep or waking up too early
- Eating too much or too little
- Being absent-minded
- Withdrawing from others; feeling less interested in the world
- Dreaming of the deceased
- Avoiding reminders of the deceased
- Searching and calling out the name of the deceased person
- Sighing
- Being restlessly overactive
- Crying
- Visiting places or carrying objects that remind you of the deceased person
- Strongly treasuring objects that belonged to the deceased



Emotions:

- Sadness
- Anger
- Guilt or regret
- Anxiety
- Loneliness
- Fatigue
- Helplessness
- Shock
- Yearning (pining for the person [or whatever you lost]; thinking “if only” this had not happened)
- Emancipation (Not all feelings are negative. Sometimes there is a sense of being released when a loss occurs).
- Relief (May especially be felt after someone dies from a lengthy or painful illness or if your relationship with the deceased was a difficult one).
- Numbness—a lack of feeling (Numbness may actually protect you from a flood of feelings all occurring at the same time).



Thoughts

- Disbelief, thinking the loss did not happen
- Confused thinking, difficulty concentrating
- Preoccupation, obsessive thoughts about the deceased or what was lost
- Sensing the presence of the deceased, thinking the deceased is still there
- Hallucinations, seeing and/or hearing the deceased





Coping with Grief

Feelings in the body

- Hollowness in the stomach
- Tightness in the chest
- Tightness in the throat
- Oversensitivity to noise
- Feeling that nothing is real, maybe even feeling that you are not real yourself
- Breathlessness, feeling short of breath
- Muscle weakness
- Lack of energy
- Dry mouth



Spirituality

- Feeling that you have lost direction in life
- Searching for meaning in the loss
- Questioning your religious or spiritual beliefs



How long does grief last?

The length of time it takes to adjust to a loss is different for each person and in each circumstance. Grieving often takes much longer than people think. If someone has died, you will cope with many new experiences the first year without the person. Some people find the second year is also difficult, as the loss becomes more real to them. It is helpful to be gentle with yourself, allowing as much time as you need to adjust.

It can be comforting to know that grief tends to come in waves, so you will not be distressed constantly. At times you may feel upset and heartbroken, but in between these times, you may be content and enjoy many things. Usually grief reactions start to fade within six months. As time goes on, you will not feel the grief reactions as strongly or as much. In time you can learn to live your life fully and happily despite the loss.



As you adjust to your loss, you might find that grief reactions pop up from time to time, even after many years. This is very common. This grief might be triggered by many things such as songs, a season of the year, birthdays, holidays, anniversaries or special events in your life, which you may wish the deceased could enjoy with you. Usually these grief episodes are short-lived.

Can grief start before a loss occurs?

Grieving can start even before a loss occurs, when you know that a loss is about to happen. This is called anticipatory grief. Anticipatory grieving might start, for example, if the health of someone close to you is declining, if you are diagnosed with a medical condition that will limit your activities, or if your job is ending. Anticipatory grieving is usually a healthy reaction. It can trigger you to start preparing for the loss and for how you will cope.



Coping with Grief

What if grief is hidden from others?

Grief that is hidden from others is called disenfranchised grief. It is the grief you experience if you do not publicly acknowledge or mourn your loss or receive support from others. Grief may be disenfranchised if others do not recognize your relationship to the person who died, if the type of loss is not supported by others, or if there is stigma related to the loss. Examples of losses that some people may not share with others include: the death of an ex-spouse or former friend, the death of a companion animal, the loss of ability, or death from suicide, AIDS, or a criminal act. Grief can also be disenfranchised if others try to “protect” the bereaved by not discussing the loss. This happens sometimes for children, people with intellectual disabilities and the elderly.

If your grief is disenfranchised—not known or supported by others—you may have a harder time adjusting to the loss. To help face such a loss, choose someone whom you trust to talk with about the loss. How you feel about the loss is important. Being able to tell this to an understanding person can be helpful.

“Look well into thyself. There is a source of strength which will always spring up if thou will always look there.” Marcus Aurelius (121-180)

How can I learn to live with this loss in my life?

Over time and by doing grief work, you can learn to live well despite your loss. William Worden described four tasks people do when grieving a loss.



TASKS OF MOURNING

Task I: To accept the reality of the loss.

Task II: To process the pain of grief

Task III: To adjust to a world without the deceased.

- **External:** How has the death affected your everyday life?
- **Internal:** How has the death affected your feelings about yourself and your abilities?
- **Spiritual:** How has the death affected your spiritual beliefs and views of the world?

Task IV: To find an enduring connection with the deceased in the midst of embarking on a new life.

What are some ways to do this grief work and cope with my loss?

“Grief is itself a medicine.” William Cowper

People cope with loss in many different ways. Following are a few suggestions to consider:

- **Healthy lifestyle**
First, take good care of yourself. Try to get enough sleep, eat a good balance of healthy foods, and avoid using alcohol and unprescribed drugs for relief.



Coping with Grief

- **Exercise**

Physical activity can help you cope and will help keep you healthy. Do any kind of physical activity that you have enjoyed in the past or try a new one. Doing the activity with others may be even more helpful.

- **Support from family and friends**

People need support from others for their losses. Do not hesitate to accept or even ask for the help or support you need. Most people are glad to help if they know what you need. Some people who are grieving need to tell the story of their loss over and over again as they come to terms with it. This is not bad or unusual. But sometimes family and friends become impatient or uncomfortable with this repeated conversation. They might not understand that all they have to do is listen. If you think this might be happening to you, try to talk with a family member or friend who is a particularly good listener who can take the time to be with you or consider seeing a grief counselor or attending meetings of a grief support group.



Grief support groups

Grief support groups are available in many communities and also on-line. Some groups are open to anyone. Others may be restricted, e.g., a group for young widows. You can find out about a group in your area by contacting hospice staff or chaplains or social workers at local hospitals. For an integrative medicine approach, consider a group that incorporates Mindfulness Based Stress Reduction (MBSR), which is based on Eastern philosophies and uses meditation to calm the mind and body.

- **Rituals**

A ritual is an activity that is done to remember and honor the person who died. It may be related to your cultural traditions. A visitation or wake and a funeral or memorial service are examples of rituals. You can also do many kinds of informal rituals that will honor the deceased and help yourself. Some examples: lighting candles on special dates to remember the deceased, sewing a memory quilt (which may be created from clothes of the deceased), planting a memory garden, sharing a memory dinner to celebrate the life of the deceased.

- **Writing or journaling**

Writing or journaling about your grief experience can help you express your feelings and the importance of your loss. If there is something you wish you could have told the person before s/he died, consider writing a letter to the deceased person. Afterwards, you can keep the letter, bury it, or destroy it—whatever feels right to you. ([See our handout Using Journaling to Aid Health](#)).

- **Forgiving**

An unexpected death can leave you with “unfinished business” with the deceased. If you have a sense of previously being “wronged” by the deceased, you may want to focus on forgiveness. ([See our handout Healing through Forgiveness](#)).



Coping with Grief

- **Nature**
Spending time in nature can be soothing and healing.
- **Books**
Many books have been written on coping with grief, some by authors who have gone through their own grief journeys. To find one that meets your needs, browse at your local bookstore or review the book lists at the websites of organizations listed on page 7.



- **Non-drug ways to prevent or treat depression**
If you want to learn more about preventing or treating depression, [see our patient handout on this topic.](#)

- **Massage**
If you are feeling tension or pain in your muscles from “holding onto grief”, consider therapeutic massage. Massage therapists can be found in many communities.



- **Healing touch**
Another integrative medicine approach is Healing Touch, which is a form of energy medicine. Practitioners place their hands near or gently on the body to clear, energize, and balance the energy fields. The goal is to restore balance and harmony, so you are placed in an optimal position to self-heal. A directory for certified healing touch practitioners is at <http://www.healingtouchprogram.com/energy/CHTPDirectory.shtml> .

What should I do if I do not feel better over time?

Most people move through their grief, adjust to the loss, and resume a changed but full life. Usually grief reactions start to fade within about six months. Some people, however, do not feel better as time goes on and may even feel worse and have trouble functioning in their daily lives. If this describes you, seek help from a professional who will determine if you might be experiencing complicated grief, depression, or posttraumatic stress disorder. If you are having thoughts of suicide, seek help right away. There are caring professionals available who can help you cope with this difficult time in your life. (See next section).

- **Complicated grief**
In complicated grieving, reactions last a long time, even years, and may become worse over time. You may have trouble accepting the death and resuming life. Complicated grief is different from depression and may not respond to treatments for depression.
- **Depression**
Depression is an illness with some symptoms similar to those of grief. If you are depressed and receive treatment for it, you will be better able to do the grief work necessary to cope with your loss. [\(For more information, see our handout, “Non-drug approaches to help move from depression to feeling happier with more energy.”\)](#)
- **Posttraumatic stress disorder (PTSD)**
You could have posttraumatic stress disorder if the circumstances of your loss were violent or shocking in some way. You might have recurring recollections of the death (or loss) that are very disturbing.



Coping with Grief

Where can I go for help if I need it?

The following are professionals who can help.

- **Primary care practitioner**

Some grief reactions are very similar to the symptoms of different illnesses. It can be a good idea to see your primary care physician first to rule out the possibility of another medical condition. Be sure to tell the clinician about your loss.

- **Grief counselor**

Grief counselors can be very helpful in helping you cope. These compassionate specialists may have a wide variety of credentials (e.g., bereavement counselor, clergy, psychologist, social worker) and are found in many settings, such as clinics, funeral homes, hospices, and private practice. Not all professionals with degrees in these helping fields have focused on grief in their careers. Contact leaders of grief support groups, hospice staff, or funeral directors to learn about counselors available in your area.



- **Mental health professional**

Clinical social workers, psychologists, and psychiatrists can diagnose complicated grief, depression, and posttraumatic stress disorder and direct your treatment.

- **Spiritual leader**

Some losses can cause you to question your spiritual beliefs. This is not an unusual reaction. If this happens, you might feel ungrounded without your former beliefs for support. This can also become a time when you strengthen your beliefs or grow in new directions. Meeting with a chaplain, clergy, or other spiritual leader may be helpful.

Where can I find more information?

The following websites provide information and resources on grief and loss.

| ORGANIZATION | RESOURCES | WEBSITE |
|-------------------------------|-----------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|
| Hospice Foundation of America | Brief articles on grief topics. | http://www.hospicefoundation.org/pages/page.asp?page_id=171387 |
| AARP | Grief and loss resources. | www.aarp.org/families/grief_loss |
| GriefNet.org | An internet community of persons dealing with grief, death, and major loss. | www.griefnet.org |
| The Compassionate Friends | Assists families following the death of a child of any age. | www.compassionatefriends.org |
| Survivors of Suicide | Website created by a survivor of suicide. | www.survivorsofsuicide.com |



Coping with Grief

References

The following literature was used in the creation of this handout:

1. Doka KJ. Grief: The constant companion of illness. *Anesthesiology Clin N Am.* 2006; 24:205-212.
2. Doka KJ. Challenging the paradigm: New understandings of grief. In: Doka K, editor. *Living with grief: Before and after the death.* Washington (DC): Hospice Foundation of America; 2007;87-102.
3. Rando TA. *Treatment of Complicated Mourning.* Champaign, IL: Research Press; 1993.
4. Worden, JW. *Grief Counseling and Grief Therapy: A Handbook for the Mental Health Practitioner (4th Edition).* New York: Springer Publishing Company, 2009.
5. Mayo Clinic Staff. Complicated grief. Accessed on 8/5/2008 at <http://mayoclinic.com/health/complicatedgrief/DS01023/DSECTION=coping%2Dand%2Dsupport>.
6. Prigerson HG, Jacobs SC. Caring for bereaved patients: "All the doctors just suddenly go." *JAMA*:2001; 286:1369-1376.
7. Ringold S. Grief. *JAMA Patient Page.* 2005; 293(21) accessed at www.jama.com on 12/10/07.
8. Corr CA. Anticipatory grief and mourning: An overview. In Doka KJ (Ed.) *Living with Grief: Before and after the Death.* Washington, DC: Hospice Foundation of America, 2007;5-20.
9. Rando TA. *Clinical dimensions of anticipatory mourning: theory and practice in working with the dying, their loved ones and their caregivers.* Champaign, IL: Research press, 2000.
10. Doka K (Ed.). *Disenfranchised grief: Recognizing Hidden Sorrow.* Lexington, MA: Lexington, 1989.
11. Anonymous. Introduction to healing touch. Accessed at www.healingtouchprogram.com on 8/20/08.

You can find additional references in our [clinician version](#) of this handout.

Photo credits

All photos are courtesy of FreeDigitalPhotos.net. In order of appearance:

- | | |
|------------------------|-----------------------------|
| 1. Ambro | 8. Graur Razvan Ionut |
| 2. Imagery Majestic | 9. Adamr |
| 3. Imagery Majestic | 10. Ambro |
| 4. Stock Images | 11. Satit Srihin |
| 5. Ohmega 1982 | 12. David Castillo Dominici |
| 6. Graur Razvan Ionut | 13. Ambro |
| 7. Michelle Meiklejohn | |



The information in this handout is for general education. Please work with your health care practitioner to use this information in the best way possible to promote your health and happiness.

This handout was created by Charlene Luchterhand, MSSW, Education/Research Coordinator, Integrative Medicine Program, Department of Family Medicine, University of Wisconsin-Madison.

Date created: January 2009; Revised: April 2013

Notes: