

GRIEF AND MOURNING

Grief is the experience of sorrow in response to loss. *Mourning* is the healing process through which we must work our way back to whole and balanced living. This document is a 'roadmap' to the process.

Every loss is different

Each grief is a unique experience; there is no "right" way to react, whatever expectations we or those around us may have. Each loss has its own character, appropriate to the bond which has been broken. One death may seem acceptable, even welcome; another we feel to be a tragedy - an outrage. We may be alarmed by the range and intensity of our emotions, or concerned at our lack of response. Yet the experience of grief over the death of a loved husband, wife, child, parent or friend is known to all human beings, regardless of age, sex, creed and culture. We share the basic feelings of suffering and loss, and to know that we are not alone in our reactions can help us to bear our sorrow, and accept our emotions, whether of guilt, anger, fear, loneliness, depression, relief or hope.

WHEN SOMEONE WE LOVE DIES -

We feel stunned - full of yearning and protest. We have lost part of ourselves - our world lies shattered around us. It seems impossible to believe that special person has gone.

Shock

The first reaction is shock and numbness, whether the death is sudden or long-dreaded. This provides a defence which helps for the first few hours and days. We are not overwhelmed by the tremendous loss of the loved person immediately after the death. There are many things to do, and we do them automatically, though life seems unreal and very strange.

Pangs Of Grief

Next come the pangs of grief - intense feelings of sorrow, of anguish and pining for the dead person. The full meaning of the loss is only beginning to dawn, the realisation comes in waves of grief and yearning. Physical symptoms often accompany such strong emotional distress. The body may ache, the mouth feel dry. Palpitations of anxiety may bring breathlessness; we sigh deeply. We feel very weary, but going to sleep or waking up may become difficult processes. Feelings of panic sometimes prevent the normal functioning we expect of ourselves; we cannot think clearly or make decisions. This is all part of the pattern of grief.

Relief comes when we allow "the natural expression of feelings" - tears, cries, sobbing and wailing are normal and healing. Later illness, physical or psychological, may be avoided by allowing ourselves and others the time and place for expressing keen or violent sorrow in an atmosphere of acceptance. The pangs of grief will recur again and again, though gradually less frequently, as weeks and months go by.

MOURNING WORK - a long process.

The bereaved person has a painful and difficult task to perform which cannot be avoided and cannot be rushed. Fixed periods of mourning, formerly imposed in western cultures, gave recognition to the need for time to grieve in partial withdrawal. Today without that social sanction for beginning and ending grief, many of us feel confused and insecure in our sorrow. By contrast societies following age-old traditions still observe customs which encourage the bereaved to work through their grief.

Needs

In the earlier stages of grieving, we can think of nothing but the lost person. Everything else seems unimportant or meaningless. We may wish we too could die and share this tremendous, unknown experience with those we love. We exist, lonely and bereft, hour by hour, day by day. There is a strong need to talk over and over again of the dead person, and of events leading up to the death. Memory plays an important part in the healing process, and it helps if we can share personal recollections with a good listener. We want to remember, not to forget.

Reactions

It is not unusual to talk aloud to the dead person, or to visit places where we were together in an attempt to feel close. Many people think they see the loved figure in the street or hear the familiar voice in the home. Such experiences are normal in dissolving a close association built up over a period of time. We may find ourselves feeling tense and irritable, venting hostility and resentment against doctors, nurses, friends and contemporaries, even against the deceased. Perhaps there are vivid dreams, or physical symptoms like those suffered by the dead person. A slight sense of unreality may persist. Old assumptions about our world now prove ineffective - we are beginning the inevitable search for new meanings, new roles, a new identity.

DEPRESSION

As time passes, the intensity of frequency of the waves of longing grow gradually less. As we begin to let go of the world we have lost, we experience long periods of apathy and depression. We want to withdraw from demands on us, to rely on those who can protect us. We feel insecure, anxious, inadequate, restless and aimless. The reality of our loss

sinks in, giving a sense of emptiness, of having lost all direction in life. For a while it may feel as though everything worthwhile in living has gone with the one who has died. The quiet company of sensitive friends can comfort a mourner through this time.

Admonitions to "snap out of it", or assurances that "time heals" do not help and may arouse resentment. Step by step, with the gentle encouragement of those who will listen and accept, sorrowing people begin the long journey back to normality.

GUILT AND ANGER

In varying degrees, anger and guilt may be part of grief. Though these strong feelings may not be socially acceptable, they can be very real and destructive unless we come to understand them. We all have a tendency to wish regretfully we had done more for the one who has died, but mostly we realise we did what seemed best at the time and we did it with love.

People can feel very angry at their loss - at the world, at the one who died, at their God. Anger is not always directed towards the object that gave rise to it - family members, old friends, or employers may be the targets. Perhaps we are angry or bitter because we feel we cannot express our deep sorrow or shed healing tears.

If there was real hostility between the dead person and survivor, there will be anger at hurts received and guilt about hurts given in the relationship. We need opportunities not only to recall happy memories, but also to express sadness, despair and regret for what has gone, anger at what we cannot change, guilt about our human failings and destructiveness. Given this chance by friends who are willing to listen and accept us as we are, we can come to a new sense of worth as a person, through forgiving and asking forgiveness, even of the dead. Courage to come to terms with the reality of our relationship with the dead person will lead to healing.

LEARNING TO LIVE AGAIN

Imperceptibly the raw hurt heals. We find strength and motivation to build up our world again. Little by little, new directions emerge. Gradually we find we are living a daily pattern that is not emotionally tied with the past and the dead person. We have emotional energy now to invest in new activities and new relationships - not distractions to keep us from facing grief, but interests that come from having faced sorrow and grown through it. We feel we can never be our "old self" again, but we may well be a "new self" with deeper understandings of life and more compassion to give to others.

GRIEVING AT THE PROSPECT OF LOSS

Grief begins from the moment we learn that someone we love will not recover from a serious illness. Both patient and family, as they try to come to terms with the fact, start the long process of mourning for the coming loss. This difficult time can complicate the normal reactions and stages of grief, but some knowledge of the feelings involved can help us to avoid misunderstandings, and to use the precious time that is left in the most rewarding and comforting way. It has been found that people who have worried realistically about what was going to happen, who have asked questions, have been told the truth, and prepared themselves for an unpleasant experience they are about to undergo, tend to cope better when the stress actually arrives. "Worry work" is a job we need to do. It is a painful process by which we begin to alter our expectations in advance, to plan for possible danger, and to experience part of the emotion appropriate to a disaster before it occurs.

Experience shows that it is sometimes possible for two people to work together towards acceptance of the death of one of them. From an early stage, they can share some of the anticipatory grief which both need to feel, and talk openly about the coming parting. Despite the inevitable sadness, people who choose to face the future in this way often seem to win through to a final period of calm and contentment. After the bereavement, the survivor looks back on this time with a deep thankfulness that contrasts with the keen regret expressed by many who, for one reason or another, were not able to face the truth.

HOW TO HELP OTHERS

BE THERE. Close relatives or friends can best help in the first few days, with practical matters like death certificates, notification of relatives, funeral arrangements. The bereaved person needs a quiet time to face the loss. A little later, other friends can help by making contact: in sharing the inevitable pain, you pay a tribute to the dead, and show the living they are not alone. Be around too as time goes on.

WRITE. Thoughtful and sincere appreciation of the person who has died is welcome. Think of the feelings of the bereaved rather than your own inadequacy. Share your experience if you have been through a loss yourself, but avoid pushing your own solution; we all differ. Notes with flowers or donations will also reach and comfort the bereaved.

GIVE practical help. Notice their needs; bake some biscuits, walk the baby, arrange the flowers, do the shopping, talk to family members who may be feeling left out.

LISTEN, with all your attention, rather than talk. Specially don't offer easy comfort: there are no ready answers to the experience of loss. Allow silence. Don't be afraid of naked emotions - tears heal.

ACCEPT what you hear. Allow for the many manifestations of shock and sorrow. Do not judge or criticise. Bear with any rage or resentment that may come your way: the bereaved can be angry with the world.

SHARE their memories, their repeated accounts of what happened, what went wrong, what they wish they had done. Re-assure, but don't make light of difficulties.

REMEMBER anniversaries. Call, phone or write. The bereaved remember the date of death, weekly or monthly at first. Then every year, not just the first year, come anniversaries of the death, or birthdays, of weddings or special occasions.

ALLOW time. Gently help them back to normality at their own pace in their own way.

HOW TO HELP YOURSELF

BE KIND to yourself, not in self-pity - a negative emotion - but understanding your own needs. Mental and physical needs cannot be separated. Grief is exhausting, so rest more often. Eat as well as you can to avoid fatigue and depression. Realise you have suffered emotional surgery: allow time for recovery, to acclimatise to your new situation. Occupy the mind: relaxation techniques as well as prayer can help to reduce stress. Look forward to the day of healing.

Sedatives are widely offered to the bereaved. Sometimes they only postpone the grief process. Use your judgment to refuse drugs if you so wish; talk it over with your doctor.

EXPRESS YOUR FEELINGS

Recognise your sorrow, depression, guilt, anger or hope. Shed your tears - alone if you must, with others if you can. Talk things over to regain a normal perspective and to lessen loneliness.

SHARE YOUR TROUBLE

Admit and share your problems: others have walked the same road before you. Accept help - you can give it later in your turn. Acknowledge we all need each other: funeral customs, flowers and letters are society's way of sharing the reality of death, of showing a community's sense of loss, of giving support when it is needed. Children especially need to be included in family mourning, because "adult tears may be frightening, but adult silence is worse".

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