

HELP FOR THE BEREAVED



The Healing Journey



THE COMPLETE LIFE SERIES

Help for the Bereaved: The Healing Journey is the fifth in a series of five booklets on end-of-life planning and care. The booklets in the Complete Life series are:

Booklet 1 - Advance Care Planning: Making Choices Known. *A workbook to document the kind of care you want if you are unable to make decisions for yourself. Includes web addresses to find your state's forms.*

Booklet 2 - Planning Ahead: Funeral and Memorial Services. *A workbook to document your funeral or memorial service preferences ahead of time. Includes tips for consumers.*

Booklet 3 - Preparing to Say Good-bye: Care for the Dying. *Learn about common symptoms experienced by dying people and what you can do to make the dying person more comfortable.*

Booklet 4 - When Death Occurs: What to Do When a Loved One Dies. *A guide to help you get through the hours, days, and weeks following a loved one's death.*

Booklet 5 - Help for the Bereaved: The Healing Journey. *Learn about the common expressions of grief, the healing process, and when to get help.*

All five booklets can be downloaded from
www.hawaii.edu/aging

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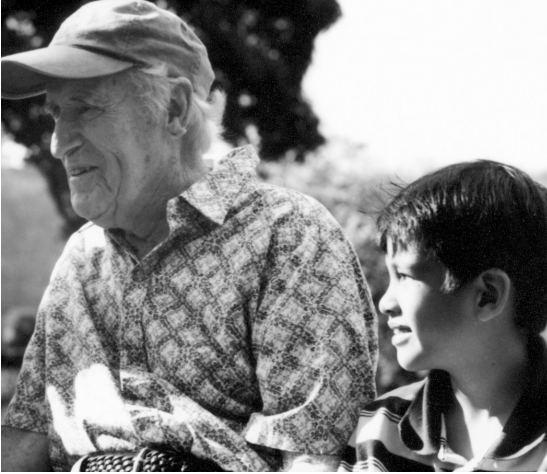
THE HEALING JOURNEY

Grieving the loss of a loved one is a journey toward healing. In the beginning stages, the road may seem rocky and difficult to travel. At first, it may feel impossible to see the path ahead. Over time, however, the journey becomes easier and healing begins.

In this booklet, you will learn how experts describe the grieving process, or the journey of grief. You will learn what experts feel is normal grieving and what is abnormal or complicated grieving. As you learn what is considered normal, you will feel more comfortable with the expressions of grief.

Keep in mind, however, that each person's grief is unique. A bereaved person may or may not experience all of the feelings described. Experiences and expressions of grief are as individual as fingerprints. Gender, culture, personality, earlier losses, beliefs, values, and religion are among the many factors that influence the way in which we grieve. In fact, most people never get over their loss completely. Rather, they can come to grips with the loss and move on.

There is no "right" way to grieve and no specified length of time required for the grieving process. Experts agree that individuals emerge from their grieving when they reach a state of acceptance and feel a re-emergence of hope, however long it takes.



*When we are no longer able
to change a situation, we are challenged
to change ourselves.*

—Viktor Frankl

COMMON EXPRESSIONS OF GRIEF

Grief is expressed in different ways. Some people want to talk about their grief. Others may keep to themselves for a period of time. Some people may be very emotional or cry a lot. Others may not shed any tears. Returning to daily routines as soon as possible may be comforting to certain people. Others may withdraw.

Regardless of expression, remember that grieving is about change and movement. Finding safe and acceptable ways to express grief and move through the grieving process is what is important.

Each person's journey of grieving is unique. But there are some common **emotional** expressions of grief. These include:




Sadness. Waves of sadness are extremely common and sometimes can seem unbearable.

You may feel that you will never be happy again.


Over time, however, the intensity of sadness lessens.




Loneliness. The loss of a loved one causes feelings of loneliness. Returning to an empty house and revisiting places that you and the deceased once frequented may trigger these feelings. Evenings and weekends may be the most difficult, as there is less activity and more quiet time to think about the deceased and to feel his or her absence.




Anger. You may feel anger toward the deceased, the doctors, family members, or friends. You may even be angry with God. Anger may be turned inward and result in depression, withdrawal from activities and work, or physical illness.



Guilt and Blame. You may go through a series of “if onlys.” Thoughts of “I should have done more” or “If only I had...” are common. Blame may be directed at others or yourself. These thoughts are common. If these thoughts last a long time, however, they may result in a lack of self-forgiveness and may complicate grief.



Anxiety. The death of a loved one often involves the death of plans for the future together. You may feel completely lost and off-balance. These feelings may be accompanied by intense anxiety over what the future may hold.



Relief. If the death has followed a long illness, there may be relief that it is finally over. This is normal, and there is no need to feel guilty.

*Guilt is perhaps the most painful
companion of death.*

—Elisabeth Kübler-Ross



Thankfulness. You may feel that the death was a blessing. This does not mean you do not feel sad. People need permission to feel OK about a death. Gratitude and thankfulness are great healers.



Emotional Ups and Downs. The initial reaction to a death may be shock and denial, followed by intense grieving, pain, working through grief, and readjustment. It is common to have mood swings. One day you may feel back to normal, and the next day feel down in the dumps. Anniversaries of the death, birthdays, holidays, seeing someone who looks like the person, or visiting a familiar place may trigger an “emotional down.”

There are several **physical** responses, too.



Insomnia and Bad Dreams. Sleep is essential for your well-being. However, insomnia and bad dreams are common, particularly in the first stages of grieving. Vivid dreams involving death or about the deceased are frequently reported and may be upsetting. These are a normal part of adjustment.

***Tip:** Relaxation techniques, exercise, meditation, music, or mild sedatives may help you sleep better. Also, having an opportunity to “talk out” your dreams can help you move through the grieving process.*



Physical Complaints and Loss of Appetite.

Physical complaints are common, such as stomach ache and tightness in the chest and throat. You may feel as if your stomach is “tied in knots.” You may not feel hungry.

Tip: Eating several small meals may be easier than eating fewer big meals. Keep nutritious snacks around the house. Accept food that is brought to you by friends and neighbors. Spend mealtimes with family or friends.



Confusion. Confusion, memory loss, and inability to concentrate often are seen in the early stages of grief. You may feel as if you are going crazy. You may experience a lack of concentration or inability to do routine tasks. The initial intense emotions of grief temporarily affect the way your mind and body function. Normally, these are temporary conditions. If they persist, this may signal depression and a need for professional help.

Tip: It is helpful to acknowledge this response to grief and understand that this response is common. Receiving outside help can ease feelings of helplessness and confusion.

*In the end, it's not the years
in your life that count,
it's the life in your years.*

—Abraham Lincoln

SIGNS OF NORMAL GRIEVING

- ❑ I can experience moments of joy, although I miss my loved one and often feel sad.
- ❑ I sometimes feel angry or anxious, but I am able to share how I feel with others.
- ❑ I can ask for help and/or receive support when others offer it.
- ❑ At times I feel guilty and sad, but I am still able to enjoy life.
- ❑ At times I feel alone, but I know I can manage after my sadness lessens.

These are all signs of normal grieving. You are handling your grief well.

MYTHS ABOUT GRIEF

There are a number of commonly held misunderstandings about grief, which can present significant barriers to someone who is grieving. The statements below are not helpful!

MYTH 1: You should be over this by now.

MYTH 2: Time heals all wounds.

MYTH 3: If you're not crying, you're not really grieving.

MYTH 4: Men are not very good at grieving, and real men shouldn't cry.



“You should be over this by now.” WRONG!

Grieving people need a lot of support over a long time. Some cultures have a set period of mourning, after which the person is expected to get on with life.

Although these traditional periods of mourning can help with the grieving process, they may overlook the fact that everyone's grief is unique and is influenced by many factors.

It is generally true that the passage of time lessens the extreme feelings of sadness. But the feelings may never disappear entirely. Experts now believe that we do not get over the loss, but rather adapt and integrate the loss into our lives.



“Time heals all wounds.” WRONG! Time may never fill the emptiness caused by the loss of someone close to us, but it can lessen the harsher feelings that come in the first year of grief.



“If you’re not crying, you’re not really grieving.” WRONG! Although Western culture has become much more supportive of public displays of emotion, there are people who do not cry after the death of someone they love. Although the majority of these appear to be men, some women do not express their emotions through crying either. In addition, older people may be more reserved about public expressions of emotion than younger people.

Although crying readily expresses emotion and releases energy, crying in and of itself does not help to complete the tasks necessary to reinvest in life. Some people can, and do, express a great depth of emotion and never cry. Crying is only one way to express the depth of emotion related to the death of a loved one.

*Each difficult moment has the potential
to open my eyes and open my heart.*

—Myla Kabat-Zinn






**“Men are not very good at grieving” and
“Real men shouldn’t cry.” WRONG!**


Oftentimes, men may feel restricted from sharing because of social, gender, or cultural expectations. Men may tend to hold back their emotions. Women often are seen as more ready to accept help and express emotion, two things that are critical in the process of grieving. Since men are perceived as less willing to accept help and express their emotions, they are often seen as having more difficulties in dealing with their grief. However, this generalization is not always true, and this stereotype is not helpful. Both men and women should be offered help and support during this time.




A TIMETABLE FOR GRIEF?


The following timetable describes a general process through the first two years of grieving. Many people begin to grieve long before the death actually occurs. Remember, however, this timeline is meant to be a general guide. Grief truly has no “time limit,” or clear-cut stages to pass through. Each person and situation is different, so allow yourself and others to grieve in their own way.


 **Month 1.** In the first month following a death, you may be so overwhelmed with visitors, phone calls, funeral arrangements, and other tasks that you may not have time to experience your loss. The shock caused by the death of a loved one can last well beyond the first month, particularly if the death was sudden, violent, or especially untimely.

 **Month 3.** Many people feel that the three-month mark is an especially challenging point in the grieving process. At this point, the numbness and shock may have worn off, and the telephone calls and visitors may have stopped completely. There may be a lot of pressure from family and friends to resume normal activities and to “get over” your loss. However, you may still be coping with the death of your loved one and may need more time to come to terms with your loss.




 **Months 4 Through 12.** By this point, hopefully you will begin to have more good days than bad. However, you will still be learning how to incorporate your loss and continue to live your own life. It is normal to still feel intense emotion and sadness from time to time. Remember, this is normal and is not a setback.


 **First Anniversary of the Death.** Reactions to the one-year anniversary of the death may begin days or weeks before the actual date. You may mentally relive those last difficult days. Even if you have been doing very well toward the end of the first year, you may be surprised at how intensely the one-year anniversary affects you. It is OK to talk about your feelings and to seek additional support during anniversaries.



The Second Year. Most grieving people agree that it takes at least two years to start feeling like they have established workable new routines and a revised identity without the deceased person. Many of the tasks of the second year have to do with re-assessing goals, discovering or developing new abilities, and creating a meaningful lifestyle for yourself.



Significant Anniversaries. Significant days that may be difficult include holidays, birthdays, wedding anniversaries, and family and school reunions. Also, significant dates in the course of the illness, such as the date of diagnosis and the date of death, can be especially challenging. Try to rely on the support of family and friends during this time.



Future Years. Don't be surprised if you feel periods of sadness years after the death of your loved one. Memories can be rekindled without warning. Don't try to suppress them. You are alive. Enjoy the gift of life, and celebrate the memories.

*The journey of a thousand miles
must begin with a single step.*

—Lao Tzu

ABNORMAL OR COMPLICATED GRIEF

In the process of healthy grieving, most people ultimately reach a state of acceptance. This may take a year or two, but you will notice observable progress.

Grief becomes complicated when you become stuck in the process of resolving and accepting the loss. Grief can become abnormal when you do not want to talk about your feelings and let go of your loved one.

The following is a list of signs and symptoms that **MAY** signal complicated grieving. Many of these symptoms will occur in the early months following a death. But if they persist, you should seek additional support.

Physical Problems

- Persistent weight loss or weight gain
- Alcohol or drug abuse
- Significant memory problems
- Prolonged sleep disturbances
- Prolonged neglect of personal hygiene and health

Functional Problems

- Continued inability to care for oneself
- Continued inability to care for one's family
- Continued inability to function in society

Emotional Problems

- Persistent disbelief about the death
- Preoccupation with thoughts about the deceased
- Prolonged feelings of numbness or hopelessness
- Searching and longing
- Behavioral problems (at work or at home)
- Talk of suicide
- Persistent hostility or anger toward loved ones
- Persistent disinterest in everyone and everything

WHEN AND WHERE TO SEEK HELP

Read through the list on the next page. If you check any of the boxes or experience any other sign of complicated grieving, you should seek help. Examples of places to find help include:

- Your faith community
- Your physician
- A bereavement support group, which may be found through a health care provider, hospice, or church in our neighborhood
- On the web, at

www.griefnet.org

www.centerforloss.com

www.growthhouse.org/death.html

SIGNS OF ABNORMAL GRIEVING

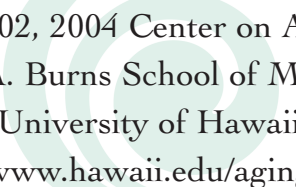
- I am unable to express my feelings.
- My health seems to be getting worse over time.
- I have no appetite and have been losing weight.
- I have been overeating and am gaining weight.
- I have thoughts of ending my own life.
- I feel responsible for my loved one's death.
- I feel sad and alone most of the time.

Checking any of the boxes above may indicate a need for professional help. Talk to your doctor, clergy person, or health care worker.

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*Tears are the prayer beads of us all,
men and women, because they arise
from a fullness of the heart.*

— Edward Hays



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