



Bereavement – understanding your reactions

This article is designed to help you understand the normal reactions you might have following a death. It may be that someone close to you has died, that you witnessed or were involved in a traumatic incident involving death or that someone you know or are close to has been bereaved.

Every one of us is unique which means we may experience things differently and have learned different ways of coping. However it is possible to distinguish stages of grieving through which we may pass, in order to emerge, and begin to engage with normal life again.

There may not necessarily be a clear linear progression and each stage can last a different length of time for everyone. The phases can overlap and there are no rules to how we progress and to how we feel. In outlining the stages of grieving we include a range of possible emotions and reactions.

You won't necessarily notice all of these or you may use different words to describe your experience. This article will also explain some of the factors which can complicate grief or which can cause 'blocks' to grieving.

We give an indication of how to decide when you might need extra help to get through a stage – when normal becomes 'stuck'. Finally we include some 'do's and don'ts' both for the bereaved and those supporting bereaved friends or colleagues.

First Phase - Normal Reactions

Shock

Even if the death is expected (eg after an illness) there is invariably surprise and shock at the actual event. The finality of death is very difficult to comprehend both emotionally and philosophically. It is common to 'not understand' what has happened. Everything may seem unreal. Some describe being in a dream, or they feel as if things are happening to someone else.

Denial

Initially, we may deny that our loved one has died, or we refuse to accept the facts that underlie the cause of death. Some examples of this are when we find it difficult to talk about the deceased in the past tense, or we may keep the person's clothes and room ready for them. Some feel that they sense the presence of the lost person, or believe that they have caught sight of them. We can also dream about them, as if they are still alive.

Numbness

Periods of 'not feeling' can be a useful way of coping (eg when dealing with authorities, solicitors, work). However, people may be distressed by a sudden lack of feeling about all aspects of their life (towards their family or social activities which they formerly enjoyed). It can feel like a kind of apathy which often comes and goes for some time. You could view it as a way of 'resting' emotionally.

Thoughts About What Happened

In order to make sense of what has happened, you may find yourself going over it in your mind.

You may find yourself asking questions repeatedly, over and over. This invariably leads you to gain understanding and confirmation of its reality

Helplessness

The sense of helplessness and anguish from knowing that a loved one has died can feel insurmountable. No matter how strong a person's faith is in what happens to the person's soul or spirit, we mourn for their suffering at the time of death.

How the body is affected

Initially because of the shock, you may experience intense anxiety. It can be felt physically in the following ways:

- Restlessness
 - Fatigue
 - Sleep disturbance
 - Appetite and eating difficulties
 - Headaches and muscle aches
 - A churning stomach
 - Vomiting and diarrhoea
 - Distraction and inability to concentrate.
- This may also affect your ability to express yourself verbally.
- Poor memory

The Funeral

The funeral can have great emotional and symbolic importance, whatever your social or cultural background. It can be around this time that the first phase of mourning begins to end. There may be an opportunity to view the body, to weep openly with others, to share memories, to celebrate the life lived and to say goodbye to the physical person.

Second Phase – Normal Reactions

Yearning/Pining

This phase is often seen as being 'in the pit' of grief. You will probably experience attacks of grief when your pain and loss is emotionally intense and feels unbearable. You may feel a yearning for the person to return and for normality, as you once knew it, to resume. This emotional despair can be felt quite physically. It may lead to periods of crying.

Preoccupation with thoughts of your loved one

People also find that they can be quite preoccupied with thoughts of the deceased, their physical image, and memories of times spent with them. These can be very vivid at times, and can cause intense emotional pain.

The need to be preoccupied by memories of our loved one can often stem from a fear that we may forget them. We want to forge their image permanently into our consciousness to prevent this from happening. We may also want to continue with routines, or even plans of the deceased, to keep their presence alive or out of a need to respect and honour them.

Anger

Anger can be directed toward a number of people:

- At ourselves for failing to prevent the death
- At the person who has died for leaving us
- At the hospital staff, rescue services, colleagues for not doing enough
- At others if they seem to be getting over the death and returning to a normal way of life

Guilt

Guilty feelings are common. This can be the guilt of the survivor (why wasn't it me?) or guilt about something not said or not done. We also may feel guilt about any enjoyment we might experience, or when we find ourselves laughing. We may ask ourselves the question, How can we have pleasure when my loved one has died? This may lead to doubts about whether we truly loved them.

Pain/Despair

This can be an exceptionally emotional time. You may despair at ever feeling normal again and a common expression of this is "I'll never get over it". Physical pains and minor illnesses can mirror the emotional pain. Extreme mood swings and energy levels from hyperactivity to lethargy can be experienced. ("What's the point?")

Crying

Clearly all the above feelings, consciously suppressed or not, can lead to periods of crying which are often distressing because they seem to 'come out of nowhere'. They are often triggered unexpectedly by smells, memories, phrases, gestures which are linked to the person who has died. Suppressing the natural need to release tears can lead to further physical symptoms.

Third Phase - Normal Reactions

Depression

"Will this ever end?" "Am I going mad?" are frequent questions at this time. It is the time when the bereaved are beginning to adjust to a world which does not include the person who has died. Realisation dawns that this is now the truth. The time of activity and drama surrounding the death has passed, friends and colleagues are speaking of other things.

It can be a very difficult time because the bereaved person has not yet become involved in a new life and has certainly not 'got over' the death. It can feel like a kind of limbo.

While they may feel down and suffer low mood, this would not be described as a 'clinical depression'.

Apathy

There may be a lack of interest in old pursuits and no new interests have developed. People complain of difficulties of concentration, feeling unsociable or disorganised. The bereaved can feel apathetic about their own continued existence so there may be a tendency to drive dangerously, over or under eat or drink too much.

Complicated Reactions Which May Get In The Way Of Grieving

Delayed

The process may become stuck at any stage or even not have begun for a variety of reasons eg there is no body, there's a lack of certainty or there are legal processes to go through.

Overload

There may be multiple deaths or losses in a short time so it becomes impossible to deal with each death individually.

Chronic

The grieving is lasting an excessive length of time with no satisfactory conclusion.

Masked

The bereaved may not be able to grieve normally so their grief is masked by a physical or emotional illness.

Fourth Phase - Normal Reactions

Letting go

"There will be fewer periods of uncontrolled crying. You will begin to be able to look more realistically at the role of the dead person in your own life. There is an acceptance of the death and an ability to talk about the person and remember them without extreme or uncontrollable emotion.

Moving on

The bereaved person is actively investing in new relationships, interests and goals. "Who am I?" and "What do I like doing?" are questions likely to be asked. The person who died can be remembered and talked of without extreme or uncontrollable emotion.

Children And Grief

Children tend to be more resilient than adults and usually 'recover' quicker - however adults often feel they have to shield or protect children thereby delaying or denying a child's natural needs.

- Do tell children the truth and answer questions honestly
- Do involve them in the funeral if they want
- Children often play out their grief in games rather than talking and this is normal.

Some Do's and Don'ts

DON'T expect to be over it in a certain time scale. Trust your instincts and take your time. Allow yourself to go through the process. Symptoms of grief may take some years to resolve, but it is generally thought that the more intense reactions subside within 6 to 12 months.

DON'T blame yourself for the way you feel.

DON'T expect everyone involved to react in the same way.

DO allow yourself to grieve differently, if it feels appropriate to you.

DON'T pretend that nothing serious has happened. This is a kind of denial and will delay the process.

DO look after yourself. Try to eat regularly and healthily. Strong emotions can be exhausting so you may need lots of sleep.

DO ask for help if you need extra support.

DON'T bottle feelings up or avoid talking about it. You may need to make sense of the event, and understand it fully, before you can start to grieve for the loss of another through death. Healing comes from allowing the feelings to come out.

DO cry and express yourself emotionally, if that feels appropriate for you. Crying does not mean that you're not coping, or that you're losing control. Crying often gives relief.

DO be more careful around the house and when you are driving. Accidents are more common after severe stress.

DO keep a diary and make lists if you feel easily distracted and suffer from poor concentration.

People usually recover. We may never return to how we were but most people are able to find a place for their new understanding of themselves and the world that the tragedy has forced onto us.

We usually re-invest in life, and in new relationships. Usually, we are able to move on.



Summary - First Phase

Feelings	Physical	Behaviour	Thoughts
Numb	Upset stomach	Hyperactive	It's not true
Panic	Shaky	Inactive	Why me?
Shock	Churned Up	"Automatic mode"	I can't believe it!

Summary - Second Phase

Feelings	Physical	Behaviour	Thoughts
Lonely	Sleep Problems	Crying Alot	Will I ever get better?
Pining	Deep Aching	Talking Alot	How much longer?
Angry		Lethargy	
Guilty			

Summary - Third Phase

Feelings	Physical	Behaviour	Thoughts
Depressed	Aches and pains	Can't concentrate	What's the point?
Apathetic		Unsociable	
Anxious			
Moody			

Summary - Fourth Phase

Feelings	Physical	Behaviour	Thoughts
Sad	Sleeping better	Making new friends	Planning
More optimistic	Appetite more normal	Pursuing new interests	Looking forward

When to seek more help

- If your reactions are complicated for the reasons given earlier
- If you feel isolated in your grief and you have no-one to share your feelings with
- If your grieving interferes excessively with your day-to-day activities
- If you are feeling overwhelmed and not coping as you would expect.

Helplines

Child Bereavement UK

Child Bereavement UK supports families and educates professionals when a baby or child of any age dies or is dying, or when a child is facing bereavement.

Helpline 0800 02 888 40
childbereavementuk.org

Cruse Bereavement Care

Advice to anyone who has been affected by a death, including bereaved military families.

Helpline 0808 808 1677
(for England, Wales and N. Ireland)
Helpline 0845 600 2227
(Cruse Scotland)
Email helpline@cruse.org.uk
cruse.org.uk

Compassionate Friends

Helpline for bereaved parents, siblings and grandparents

Helpline 0845 123 2304
(for N. Ireland: 0288 77 88 016)

Email helpline@tcf.org.uk
tcf.org.uk

Survivor of Bereavement by Suicide

A volunteer-run helpline to meet the needs and overcome the isolation experienced by people over 18 who have been bereaved by suicide.

Helpline 0300 111 5065
Email sobs.support@hotmail.com
uksobs.org

Useful websites

<http://www.nhs.uk/Livewell/bereavement/Pages/coping-with-bereavement.aspx>

<https://www.gov.uk/after-a-death/overview>

