

Bereavement, the loss of a loved one as a result of death, causes a broad range of reactions, and people experience their grief in many and varied ways. Mourning, the adaptation to loss, is an essential process in order to re-establish equilibrium and carry on with living. Mourning can take a long time and there is no fixed time in which you should expect to feel better.

You may experience some of the following reactions when someone close to you dies:

Feelings

Sadness and loneliness

The loss of a loved one leaves you feeling sad and lonely. You may suffer deep sorrow that you are without the love and understanding of that person. When you have lost a partner or close friend you may be especially lonely as you were used to a close day-by-day relationship and shared everyday activities.

Anger

This is a frequent experience after the loss. The anger comes from a sense of frustration that there was nothing yourself, family doctors or God could do to prevent the death. You may also feel angry with the deceased for leaving you.

Guilt and self-reproach

These are common responses to loss. You may feel guilty about things done or left undone, unresolved quarrels, words said or left unsaid. Usually people blame themselves for something that was neglected around the time of the death. Most often guilt is normal, though not justified.

Anxiety and Fears

Feelings of anxiety are common and stem from two sources. You may fear that you will not be able to take care of yourself on your own and your awareness of your own mortality is heightened by the death of a loved one. You may feel very vulnerable and lose confidence in yourself and in the world. Anxiety carried to extremes can develop into a phobia or lead to panic attacks.

Fatigue

Fatigue is frequently experienced and may take the form of apathy or listlessness. To a person who is usually very active this can be both surprising and distressing.

Despair and Helplessness

You may feel you cannot bear the pain any longer. The sense of helplessness engendered by death makes bereavement a stressful experience.

Shock

You may feel numb, bewildered, stunned and unable to think clearly. Shock

occurs most often in the case of a sudden death. In some ways, shock protects you from the overwhelming feelings as it does not allow them all into consciousness.

Longing and Searching

You may have a sense of longing to see, hear, hold and talk to the person who has died.

Relief

It is normal to feel relieved after death of a loved one who suffered a lengthy or particularly painful illness. It is also normal to feel relieved that a person with whom you had a difficult relationship is no longer alive. Guilt often accompanies this sense of relief but it is a normal part of grief.

Physical Sensations

Physical reactions are also associated with acute grief. These sensations play a significant role in the grieving process. Some common symptoms are tightness in the chest and throat, feeling short of breath, hollowness in the stomach, muscular tension, diarrhoea, dry mouth, headaches, and sense of de-personalization. If the symptoms persist or are of concern to you, consult your physician for a check-up.

Thoughts

Certain thoughts are common in the early stages of mourning, and usually fade after a short time. Sometimes they persist and can lead to anxiety and depression.

Disbelief

This is often the initial response after hearing of a death. You feel that what has happened is unreal, you can't believe it happened. It is a common thought, which might persist for some time.

Confusion

You may feel unable to concentrate, can't seem to order your thoughts and to tend to forget things.

Preoccupation

You may be obsessed with thoughts about the deceased, be preoccupied about how to recover the lost person and have intrusive thoughts or images of the deceased suffering or dying.

Sense of presence

The counterpart of the experience of longing and yearning are thoughts that the deceased is somehow still in the current area of time and space.

Hallucinations

Hallucinations, both visual and auditory, are frequent experiences of the bereaved. Usually occurring within a few weeks following the loss, these transient illusory experiences do not pretend a more difficult mourning experience.

Behaviours

There are a number of behaviours commonly reported after a loss and are associated with normal grief reactions. They usually correct themselves over time. Some frequent behaviours include sleep and appetite disturbances, absentmindedness, social withdrawal, dreams or nightmares of the deceased, avoiding reminders of the deceased, sighing, over-activity, crying, visiting places or carrying objects that remind you of the person, and / or treasuring objects that belonged to the deceased.

The Mourning Process

After one sustains a loss, there are certain tasks of mourning to be accomplished for the process of mourning to be completed (Worden, 1991). The tasks do not necessarily occur in a specific order, although a sequence is suggested:

Task I: To accept the reality of the loss.

The first task of mourning is to come face to face with the reality that the person is dead. It involves intellectual and emotional acceptance of the finality of loss. Many people protect themselves from reality by denying the meaning of the loss (I don't miss her), or denying the irreversibility of death (I won't have you dead). Belief and disbelief coexist while trying to come to grips with the reality of the loss. Traditional rituals such as the funeral help many bereaved people move toward acceptance.

Task II: To work through to the pain of grief.

It is necessary to acknowledge and work through the pain - emotional, behavioural, and often literal physical pain - associated with loss. Avoiding or suppressing this pain can result in its manifestation through symptoms (e.g. depression, heart disease). Not everyone experiences the same intensity of pain or feels it in the same way, but it is impossible to lose someone you deeply loved without experiencing some level of pain. People can negate this task by not feeling. They may cut off their feelings, deny the pain, avoid painful thoughts and reminders of the dead, and even use alcohol or drugs. Society may be uncomfortable with the painful feelings and hence give the indirect message "you don't need to grieve". Adequate completion of this task is needed so that one prevents carrying the pain with them throughout their life.

Task III: To adjust to an environment in which the deceased is missing.

Depending on what the relationship was with the deceased and the various roles

the deceased played, adjustment to a new environment will mean different things to different people. It might mean living alone, raising children alone, managing finances alone; the full recognition of the changed circumstances may take a considerable period of time.

The bereaved may have to develop new skills and take on new roles, and often is confronted with the challenge of adjusting to one's own sense of self. Attempts to fulfil the deceased's roles may be met with initial resentment, but the negative feelings usually give way to more positive ones as the bereaved learns new ways of dealing with the world.

As loss can challenge one's fundamental life values and beliefs, another area of adjustment may be to one's sense of the world. Searching for meaning in the loss, especially when there are sudden and untimely deaths, may mean adoption of new beliefs, or modification of old ones to reflect the fragility of life and the limits of control. The negative course of Task III is not adapting to the loss. Some people may not develop the skills they need to cope, withdraw from the world, and promote a stance of helplessness.

Task IV: To emotionally relocate the deceased and move on with life.

The essence of Task IV is about finding an appropriate place for the dead in one's emotional life. It is about evolving some ongoing relationship with the thoughts and memories associated with the deceased in a way that would allow the bereaved to go on living effectively in the world. For many people it is the most difficult task to accomplish. They hinder it by holding on the past attachment rather than going on and forming new ones, later to realise that their life in some way stopped at the point the loss occurred.

One indication of a completed grief reaction is when the person is able to think of the deceased without pain or intense crying. Mourning is finished when people reinvest their emotions back into life, feel more hopeful, experience gratification again, and adjust to new roles.

How to help yourself through grief:

The loss of a loved one is psychologically traumatic and a period of healing is needed for one to restore full functioning. Mourning may absorb all your energy but gradually the intensity of the pain will lessen.

- Talking about the person who has died - his or her qualities, what you enjoyed doing together, "mixed" memories and how the impact of their death affects you - all this can be very helpful.
- Don't isolate yourself from family and friends. Let them know what your needs are, how you feel and accept their support.
- Don't expect to complete mourning on a definitive date. Give yourself time and don't compare yourself to others and how they have coped. Grieving

does not proceed in a linear fashion, it may come and go, reappear to be reworked.

- Try not to tax yourself with many new responsibilities or major changes in your life during this time. Discuss them with people you trust.
- Take time to do things you enjoy. Rest and eat well.
- You may find it helpful to keep a diary of your thoughts and feelings.
- You can read books on other people's experiences of bereavement. Joining a bereavement group or speaking to a counsellor may also help you work through your grief.

Further reading:

Kubler-Ross, E. (1969). *On death and dying*. London: Routledge.

Lake, T. (1984). *Living with grief*. London: Sheldon Press.

Tatelbaum, J. (1983). *The courage to grieve*. London: Cedar.

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