



The Effects of Grief

1 It is unique. Losing a loved one is a unique experience because:

- The effects of grief are so complex
- The bond of an individual to his or her child is unique
- The circumstances of the loss are so complexly varied
- The individual's pre-existing psychological makeup is unique
- Each bereaved person has their own unique grieving profile

2 Bereaved reactions vary with:

- Who died and how was the relationship: it's nature and complexity
- How did the loved one die
- History of the bereaved person. How did they cope with life events before and where are they now?

3 The Boat Allegory

After a little boat is caught in a storm, it may be just keeping afloat, but it is battered by waves of emotion, winds of circumstance and a fog of thoughts. Then there are patches of calm and the storm is over but the waves continue and the little boat is changed forever...

4 First contacts

First contacts may include ambos, police, doctor, media, family member or anyone. The communication is sometimes handled badly.

5 Impact

The impact can be severe (and it often is). It varies very much according to the circumstances of the death and learning of the death.

6 Shock reaction

This happens initially and it comprises:

- A sense of unreality, disbelief, numbness
- Defensive shutdown of feelings (and there can be an opening up of thinking)
- Physiological release of endorphins and adrenalin prevents individuals from being early overwhelmed by the loss
- A duration of 2 – 4 weeks or longer. Then, for most, the intensity of emotional pain slowly builds up and stays
- Costs include altered physiology that increases tiredness and emotional instability
- Benefits include protection from being early overwhelmed, time for adjusting to the harsh reality (and associated emotional pain), time to build up some resources and it helps for dealing with early practical difficulties

7 Early practical difficulties

Early practical difficulties may include funeral arrangement, financial, legal, work, managing the family, etc.

8 Trauma reaction

This can occur with the shock reaction (above).

It comprises:

- Massive emotional and intellectual perceptual reaction to an event
- Overwhelming feelings of fear, dread, terror, horror
- Associated horrific thoughts and images
- Nightmares, flashbacks, hallucinations
- Distress with reminders of the trauma

However, there is also:

- An instinctive drive which acts to protect the bereaved person
- A huge defensive barrier which helps to block out the associated feelings, thoughts and images

Then:

- A desensitising process occurs for most people, which helps with facing and unblocking the event-related images, thoughts and feelings. Sometimes there is a need for professional help

9 Grief reaction is complex and varied

6 main areas of personal affect:

- Feelings
- Physical affect
- Thoughts
- Behaviour
- Social effect
- Spiritual effects

10 Feelings

There can be many, varied feelings associated with grief: sadness, anger, guilt, self-reproach, anxiety, loneliness, fatigue, helplessness, shock, yearning, emancipation, relief, numbness, depression, a sense of depersonalization (nothing seems real, not even self), etc.

11 Physical

There can be many, varied effects attributable to grief: hollowness in stomach, stomach pain, tightness in chest, tightness in throat, breathlessness, weakness in muscles, lack of energy, oversensitivity to noise, headaches, constipation, body pain, menstruation changes, laboured or difficult breathing, hypertension, asthma, arthritis, blurred vision, weight gain/loss, urinary frequency, heart palpitations, dry mouth, fatigue, shortness of breath, tingling, numbness, previous conditions flare up, sweating, shaking, empty/aching arms (child loss).

12 Thoughts

There can be many, varied thoughts associated with grief: disbelief, confusion, preoccupation, hallucinations, sense of presence, memory, sense of injury, focus, attention span, sense of clarity, ruminations, intrusive images, post-traumatic stress reactions, poor judgement and decision making, difficulty following complicated instructions, hallucinations, thoughts of suicide.

There may be thoughts such as:

- “Why me?”
- “I’ll never get over this”
- “I feel so scared and lonely”
- “I can’t concentrate”
- “I think I’m going crazy”
- “It’s not real”
- “I feel numb”
- “I wish it had been me”

13 Behaviour

There can be many, varied behavioural effects associated with grief: crying, social withdrawal, absent-mindedness, dreams of the deceased, calling out & searching, sighing, avoiding reminders of the deceased, sleep or appetite disturbances, restless overactivity, carrying object of deceased, visiting places that remind the survivor of the deceased, treasuring objects that belonged to the deceased, chemical use, acting out feelings, change in desire for sex, difficulty concentrating, loss of interest in usual things (such as world events, work or social activities). There was a man who visited the cemetery every day for 3 years and there is every reason to believe that this was a normal behavioural expression of grief.

14 Social

- Social difficulties: dealing with the people around us:
 - i. The bereaved don’t feel so much like socialising
 - ii. Others often tend to avoid the bereaved, “Don’t bother them, they’ve got enough to worry about”
 - iii. Others tend not talk about the lost loved one which, to the bereaved, seems like avoiding “the elephant in the room”
- Family dynamics change:
 - iv. Nuclear family (“*Beyond the Death of a Child*” p 29)
 - v. Extended family (“*Beyond the Death of a Child*” p 32)
 - vi. Friendships change (“*Beyond the Death of a Child*” p 33)

- Difficulties with language, especially with explicit words such as “Die”, “Dead”, “Death”. So people tend to use euphemisms such as:

Passed away

Lost

Passed on

At rest

Gone to heaven

With God

In a better place

At peace

Slipped away

Perished

Expired

Gone

15 Spiritual

- Questioning previous spiritual and/or religious beliefs. In bereavement, people’s beliefs may be polarised, either drawing closer to God for solace or feeling alienated from a God who could allow such a loss
- Other questions such as: “What is life really about?” or “How do I make sense of this?”
- Reworking of philosophical beliefs
- Finding meaning through the lost loved one
- Many experiences: visitations, dreams, coincidences, sense of presence, visual appearances of the lost loved one, auditory, olfactory, tactile experiences, experiences with birds/animals/butterflies/etc, signs and symbols (rainbows, movements of objects, flickering lights), mental messages from the deceased

16 Legal

- Coroner’s involvement
- Suicide
- Homicide

17 Occupational

- Reduced ability to work (“*Beyond the Death of a Child*” p 24-26)
- Domestically (“*Beyond the Death of a Child*” p 26-27)

18 Financial costs

(“*Beyond the Death of a Child*” p 21-24)

- Hospital & medical
- Funeral
- Legal
- Income loss

19 Financial difficulties

- Insufficient money
- Reduced ability to manage personal affairs (can’t concentrate, don’t care, etc)

20 Pre-existing accumulative stressors

(such as job, house, family, etc) will affect the grief.

21 Invalidation of “taken-for-granted beliefs”

Particularly:

- When the death is a result of neglect (eg MVA) or malevolent intent (homicide), there is likely to be a need for retribution or retaliatory justice. (Ford et al). “He should have been safe but you killed him”. Accountability and blame
- Belief in God can be undermined. “You should have kept him safe but You allowed this tragedy to occur”

22 Disenfranchisement

- The relationship may not be recognised (co-worker, room mate, former partner, ex-spouse, counsellor, non-kin relationships, gay/lesbian relationships, worker/helper/client relationships)
- The griever may be excluded (very young, people with disabilities, very old, ex-partners)
- The loss may not be recognised as significant (perinatal deaths, abortion, miscarriage, adoption)
- The loss may not be recognised as acceptable (suicide, AIDS, drug overdose)
- The mode of grieving may not be recognised (withdrawing, working long hours, not coping with work, illness)

23 Differences between parents

(who may be grieving differently)

- Each parent had a different relationship with the child
- Don't grieve in the same way at the same time
- Different belief systems
- Different styles: Intuitive vs instrumental (stereotypically gender specific). "15% of respondent-parents saw the impact on their relationship in terms of these different grieving styles." (*Beyond the Death of a Child* p 30)
- Day to day variation
- Loss of mutual support and closeness, especially in the first 3 years.
- 21% of parents grow closer (*Beyond the Death of a Child* p 29)

24 Sense of failure

"I couldn't protect him/her"

25 Sense of helplessness

"I can't do anything about it"

26 Guilt

"I should have ..."

27 Relief

- For the loved one who has died after suffering for a period of time
- For the carers of the loved one when the loved one has been difficult to manage/help/live with

28 Mental health issues:

- Pre-existing (e.g. anxiety or depression) that worsens with the bereavement
- New (e.g. PTSD or depression) that develops because of the bereavement

29 Day to day functioning:

- Good days – bad days
- Sudden reminders
- Painful anniversaries

30 Impact on families

(*Beyond the Death of a Child* p 10)

Family dynamics can be very affected

31 Other Individual differences

e.g. Some people feel they must move house straight away whilst others feel they must make a shrine to their lost loved one and never move house

32 The parent's psyche

There are several components of the child represented within the parent's psyche and these are all affected by the loss of a child:

- The best image of the parent's self
- The worst image of the parent's self
- The ideal as per society
- The social value of the child for the parent

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