GRIEF AND LOSS

When Someone Close Dies

We all face numerous losses throughout our lives. It could be losing a job, losing a home, or ending a relationship. When the loss is the death of someone close to us, someone we care about -- a family member, friend, neighbor, or colleague/coworker -- the loss can trigger a grieving process that can affect our way of living, both at home and at work/school.

This section is here to help you better understand and cope when someone close to you dies. This is also a guide on ways to balance your own personal needs to heal and recover with the potential demands and expectations of being at work or at school.

There may be times when it is appropriate to offer Cause of Death education to campus members following a campus death. This will be helpful to furthering their understanding of the cause of death in cases of suicide or communicable disease.

Education also may be useful when death is due to alcohol or drug use, violence, a motor vehicle accident, natural disaster or in a multiple death situation.

I. The Grieving Process

Grief is a natural, normal response to loss. Although grieving the death of someone is a normal reaction, at times grief can feel enormously painful, overwhelming, and exhausting. Beginning to understand your grieving experience, and taking gradual steps to address your pain and loss, can be important and integral components of recovering from your grief.

II. Stages of Grief

Within the first few weeks to months after a death, you may find yourself riding on a roller coaster of shifting emotions. Most people go through these stages not in linear steps, but in unpredictable waves-- moving through one stage to the next and sometimes shifting back. Some people will also experience certain phases but not others. Here are several common, typical grief reactions:

SHOCK/DISBELIEF

This is the numbing, disorienting sense that the death has not really happened, not really occurred. This reaction can be intensified and complicated if the death is sudden, violent, or unanticipated. Your mind

may be telling you "there must be some mistake," or "this can't be true." These symptoms typically last from several hours to several days.

ANGER

Your anger may be targeted at a number of sources. You may feel waves of anger at the doctors who treated your loved one, anger at your family members for not rallying together, anger at God over what seems senseless or unjust, even anger at yourself or the person who died and "left" you.

GUILT

You may blame yourself for not doing more, not being there enough, or not being there when the death happened. You may feel regret over "unfinished business" -- conflicts you and the deceased never resolved, or feelings between the two of you that were never fully discussed or shared.

SADNESS

You may experience a deep sense of loss. There may be moments when you find yourself at a loss for words, weeping, or bursting uncontrollably into tears.

FEAR

There may be anxiety or panic; fears about carrying on, fears about the future. If the person who died was an adult (partner, sibling, parent), it may bring up fears about your own sense of mortality or sense of being left behind.

DEPRESSION

You may go through periods of melancholy, or "blueness," where you feel inclined to withdraw or isolate yourself. You may lose interest in your usual activities, or feel helpless or hopeless.

In addition to these stages, people who are grieving frequently experience physical symptoms, such as fatigue, sleep disruption, appetite changes, increased tension and numerous aches and pains. Grief can also affect you on a psychological level. Some of these common signs include feeling distracted, forgetful, irritable, disoriented, or confused.

III. Tasks of Mourning

In healthy grieving, the tasks of mourning and completing one's grief come in several stages. The first is to accept and fully experience your loss, including feeling and expressing your pain and sorrow. Second, is to let go of your attachment to your loved one and your accompanying grief. Third, is to start to form new relationships or attachments in your life. This third phase is where you feel you are moving through our healing and recovery, and can start to develop

new commitments and ties to people and activities.

IV. What You Need During Grief

Grieving the death of someone does not have a particular timetable. Mourning your loss may take weeks, months, or even years. From many individuals, the death of their loved one is carried with them throughout their lives. Although there is no "cure" for grief, here are several ways to help you cope with your loss, and begin to ease the pain.

• TIME

Take time alone and time with others whom you trust and who will listen when you need to talk.

CARING

Try to allow yourself to accept the expressions of caring from others even though they may be awkward. Helping a friend or relative suffering the same loss may bring a feeling of closeness with that person.

• REST, RELAXATION, EXERCISE, DIVERSION

You may need to give yourself extra amounts of things that nourish and replenish you. Hot baths, afternoon naps, a short trip, a project helping others -- any of these may give you a lift. Grief can be an emotionally and physically exhausting process.

GOALS

For a while, it will seem that much of life is without meaning. At times like these, small goals are helpful. Something to look forward to -- like lunch with a friend that day, a movie the next week, a trip next month -- helps you get through the time in the immediate future. Sometimes living moment by moment, or one day at a time, is the rule of thumb. As time passes, you may want to work on longer range goals to give yourself some structure and direction to your life.

SECURITY

Try to reduce or find help for financial and other stresses in your life. Allow yourself to be close and open up to those you trust. Developing or getting back into a routine helps. Focus on doing things at your own pace.

PERMISSION TO BACKSLIDE

Sometimes after a period of feeling better, you find yourself back in the old feelings of extreme sadness, despair, or anger. This is the nature of grief -- one moment you're up, and next, you're down. Sometimes when you backslide, you are simply remembering, re-experiencing the trauma or enormity of your loss which starts to flood back and overwhelm you.

HOPE

You may find hope and comfort from those who have experienced a similar loss. Knowing what helped them, and realizing that over time they have recovered, may give you the hope and strength to envision that you, too, will eventually heal from your grief.

SMALL PLEASURES

Do not underestimate the healing power of small pleasures. Sunsets, massage, a walk near the ocean, a favorite food -- all are small steps toward giving to yourself and regaining your pleasure in life itself.

BE AWARE OF DRUG AND ALCOHOL USE

The use of drugs, alcohol, and even prescription medications may prolong and delay the necessary process of grieving. You cannot prevent or cure grief. The only way out is through the grief process.

PERMISSION TO CHANGE YOUR MIND

Grieving can shake you up inside. You may have difficulty concentrating; or find yourself constantly reevaluating your priorities. You may be unsure or uncertain what you want in numerous aspects of your life. When you make commitments or plans, be sure to let people know you may need room to cancel or change your mind.

• BE PREPARED AROUND HOLIDAYS AND ANNIVERSARIES For many people, holidays, birthdays, or the anniversary of their loved one's death can bring up painful memories or revive feelings of longing and sadness over their loss -- even for those who believe they have "finished" their grieving and moved on. This "anniversary" reaction is a common part of the grieving process, but you may be still be surprised by the flood of emotions that may be reactivated during this period. You might want to be especially aware and gentle with yourself around this time. You may also want to allow more private time for yourself, or arrange to spend more time around family and others close to you.

In many instances, people can move through their grief on their own, or with their existing supports and resources. However, sometimes you need outside help or assistance to keep yourself from "going under," or getting "perpetually stuck" in your grief. These conditions can happen especially if you are experiencing multiple stressors, or coping with cumulative grief. These warning signs include continuing bouts of depression, social withdrawal and isolation, suicidal thoughts, or continuing feelings of helplessness, hopelessness, and despair.

V. Grief and Work

Work is a place where you spend a considerable amount time in your life. When someone close to you dies, not only do you have to cope with this loss, but you must also adjust to working or returning to work after the death. The early weeks

or months may be especially difficult. Here are some suggestions to help you through this emotional transition.

• BE EASY ON YOURSELF

Expect that you may feel more distracted or less productive than before your loss. Realize your mind or reflexes may not respond as quickly in the beginning.

TAKE TIME OUT TO GRIEVE

Try to set time aside during the day or create ways to remember your loved one. Let people know if you need moments of more privacy or need a place to cry or compose yourself while at work.

CONSIDER HOW MUCH YOU WANT TO SHARE WITH OTHERS

For some people, sharing some of their grief and sorrow with their coworkers helps them cope; while for others, seeking other avenues for solace and comfort works best for them. If you choose to share some of your grief with coworkers, select those with whom you feel the most comfortable, and who appear to be open to listening to you.

When you are grieving, it can also be difficult to gauge when or how much to share with people. Don't hesitate to ask your coworkers about their readiness or availability to listen ("Is it okay that I'm sharing this with you right now?" or "Please tell me if this is too much."). Be aware that if your feelings are particularly intense or emotional, or you seem to require a lot of attention, some coworkers my appear uncomfortable with your sharing. This may mean you need to find sources outside of work to express your sadness.

BE UNDERSTANDING WITH COWORKERS

You may find coworkers awkward or unsure how to interact with you shortly after the death. Many coworkers are well-meaning and want to be supportive, but may feel uncertain how to approach you or may feel afraid of what to say (so they either say the "wrong thing" or say nothing all). Let people know what level of interaction you'd like ("It's okay for you to ask how I'm doing. . ." or "I'd rather not discuss this right now; I'll let you know when I can. . ."). Respect people's limits of being able to attend to your loss while continuing to carry on with their work.

KEEP YOUR MANAGER/SUPERVISOR/DEPARTMENT HEAD INFORMED

If you have difficulty adjusting to being back at work (feel fatigued, overwhelmed, unfocused, etc.), let your Principal, supervisor, or department head know. Perhaps he or she can help you with your work transition: e.g., temporarily adjust your work hours or schedule, shift

project priorities, reduce your workload. Consider ways your Principal, manager, supervisor, or department head can be an additional source of support at work.

UTILIZE DISTRICT RESOURCES

Remember, Denton ISD has the benefit of the Employee Assistance Program. This allows for 3 free counseling session for each immediate family member. Please ask for information from your school counselor or the Department of Counseling Services, Larry Mankoff at (940) 369-0595.

VI. Grief and School

For college students living with grief following the loss of a parent, family member, or friend can be challenging. The college environment is particularly unsuited to be responsive to the bereaved student because of the demand for a student to continue to focus on his or her academic achievement.

Often for students the sense of unreality that is a common form of acute grief is heightened by returning to college life. It becomes easier for students to avoid the painful feelings that grief invokes, while they try not to break down or show sadness. Most often student peers are unprepared to deal with death themselves and cannot support the bereaved student.

The grieving student can suffer from loss of concentration and motivation. Academic work is a college student's job in life. The inability to do that job can be painful and confusing to students who do not recognize that grief is affecting them. They fear they are "going crazy". Here are some suggestions for students:

BE EASY ON YOURSELF

Grieving affects people physically, emotionally, spiritually, and psychologically. Learn about how grief affects you. Know your own limits and take time for your grief during your studies. Find ways to allow yourself time to be with your loss and seek support from those who will understand

CONSIDER HOW MUCH YOU WANT TO SHARE WITH OTHERS

For college student, sharing with peers about their loss can be alienating. Some friends can offer more support than others, especially if they have lost someone themselves. Others may be good friends to "hang out with" and just relax. Each kind of friend is important. You may need to share with friends some of what you are going through so they can understand how you are acting. If you have intense feelings, it could be helpful to find support through counseling or support group as a way to express

yourself more freely.

ALCOHOL AND DRUGS

If you find yourself turning to recreational drugs to numb your feelings, look for help (see resources below).

VII. Coping with the Death of a Colleague or Co Worker

When a co-worker or colleague dies, it can have a significant impact on those in the workplace. There is an element of "family" in many work groups. People get to know one another as they work side by side and share work and personal experiences. Sometimes co-workers and academic colleagues become close friends and spend time together outside of work. Others keep their relationship at work but develop a deep connection from working together. Some people do not develop close ties at work and reserve their intimate relationships to outside family and friends.

The effects of the loss of will be determined by many factors including but not limited to: the length of time working together, the nature of the relationship, the age of the deceased, the suddenness of the death, and other challenges that may be facing the work group and its staff and/or faculty at the time of the loss.

• The Grieving Process

Depending on the nature of your relationship with the deceased, you may or may not go through a grieving process following his or her death. Grief is a universal, natural and normal response to significant loss of any kind. It is how we process and heal from an important loss. It can be a painful and tiring experience. Understanding the grieving experience and how best to cope with it can help you recover from grief of any kind.

Stages of Grief

Within the first few weeks to months after a death, you may find yourself riding on a roller coaster of shifting emotions. Most people go through these stages not in linear steps, but in unpredictable waves-moving through one stage to the next and sometimes shifting back. Some people will experience certain stages but not others. Here are some common, typical grief reactions:

Shock and Disbelief - the numbing and disorienting sense that the death has not really happened which can last from several hours to several days.

Anger - at the deceased, yourself, others and/or your God for what has happened.

Guilt - you may blame yourself for not doing or knowing more, or for not

dealing with any "unfinished business" that you had with the deceased.

Sadness - you may experience a deep sense of loss and find yourself crying. There may be a tendency to withdraw or isolate yourself. You may lose interest in your usual activities, or feel helpless or hopeless. Other recent or past losses may come back to you.

Fear - there may be anxiety or panic; fears about the future. It may bring up your fears about your own sense of mortality and that of loved ones.

Acceptance - finally, a stage where you adjust to the loss and move on from it, while continuing to honor the deceased's memory.

People in grief may experience physical reactions, such as fatigue, sleep disruption, appetite changes, tenseness, and aches and pains. Common psychological symptoms include feeling distracted, forgetful, irritable, disoriented, or confused.

Ways to Cope with the Loss

Acknowledge the Loss - It is better to give yourself and others permission to talk about what has happened and its impact than to go on as if nothing had happened. It may be helpful to allow time at academic or staff meetings for people who want to to check in on how they are doing.

Acknowledge Individual Reactions - When a co-worker or colleague dies it affects each person in the work unit or department in a very different way. Some are deeply affected by the loss while others are not. Some people want to talk about their feelings while others want to deal with them in private. It may take some much longer than others to adjust to the loss. While many people find comfort from strong religious or spiritual beliefs, others will not share those belief systems. Be aware of the different ways that people understand and react to the loss and respect those differences.

Be Kind to Each Other - This is not an easy time for any work group and many adjustments have to be made. People may not be at their best. Be accommodating, gentle and understanding with one another during this time. Find ways to cooperate to share any additional workload.

Self Care - You may need to give yourself extra amounts of things that nourish and replenish you - rest, relaxation, exercise, diversions. Grief can be emotionally and physically exhausting. Express your thoughts and feelings to trusted people as that can be most helpful. For some it helps to write things down as a means of expression.

Give Yourself and Others Time - In our culture there is a tendency to deny the effects of loss and expect ourselves and others to quickly "get over" a loss. We also fail to acknowledge that the anniversary of losses can trigger a re-cycling of loss reactions. Allow yourself and others the time it takes for each individual to process the loss. This loss may also bring up deaths of loved ones in the past that you will revisit.

Funeral and Memorial Events - For many attending such events can significantly help the healing process. Managers and faculty representatives can give information to everyone on arrangements that have been made and when feasible, provide time to attend for those who are interested. If the events are out of town, people may want to find ways to memorialize the loss locally. If you are uncomfortable attending such events, you may find your own individual way of "saying goodbye".

Honor the Deceased - Consider honoring the person(s) who died in an appropriate way, e.g. collecting money for a charity, creating a memorial book or bulletin board, sending a letter to the deceased's loved ones. Constructive actions, such as, donating blood or getting involved in volunteer organizations are helpful to some.

Be Resourceful - You may need some professional assistance if you find yourself not able to function as you would like as a result of the loss. Perhaps you have suffered other recent losses as well. Loss can trigger clinical depression which should be treated professionally. In addition to the onsite grief groups that are provided, faculty, staff, post docs and visiting scholars can call CARE Services for an individual appointment for a free and confidential consultation with a licensed staff mental health professional. If you are concerned about a coworker or colleague, remind them about CARE.

VIII. Coping with the Suicide of a Friend, Colleague, or Loved One

Facts about Suicide

Most of us know very little about suicide and therefore can make false assumptions when someone we know kills themselves. For this reason it is helpful to know the following facts:

- Suicide claims approximately 30,000 lives a year in the United States
- Every suicide is a unique story. Suicide is a multi determined act that results from a complex interaction among many factors including but not limited to: family history of suicide, psychiatric illness such as

depression, substance use, physical illness and chronic pain, hopelessness, high anxiety and agitation, life crises, access to means, and willingness to secure professional treatment.

- Suicide is a rare, unpredictable event. Mental health professionals do the best they can to recognize and deal with suicide indicators given the complexity of a suicide event. There is no predictable "profile" of a person who will commit suicide.
- Suicide risk factors and thinking are present in many individuals with depression who do not commit suicide.
- Studies show that patients frequently deny to their mental health providers any suicidal ideation, intent or plan before attempting or committing suicide. In some cases, those who commit suicide appear especially functional and engaged with life before they kill themselves.
- Suicide rates for all college-age individuals have been climbing since 1950. Suicide is the third leading cause of death among those age 15 to 24 years of age. The highest rate of suicide is among white males.
- Though there are some warning signs for suicide and intervention usually works, people with a high intent to commit suicide usually do not tell others they are thinking about suicide. They hide the information from treatment providers and family, friends and colleagues.
- Most successful suicides are accomplished with a firearm. Men are four times more likely to die by suicide. Women make more suicide attempts than men.
- A history of previous attempts at suicide heightens the risk of a successful suicide.
- Suicide rates increase with age, especially for those age 65 and older with serious physical problems and who are divorced or lacking in social support.

Common Reactions to Suicide by Someone We Know:

Unique to Each Person: Each person will have their own unique and individual response to the death by suicide of someone they know. It is important to respect these differences and understand them. Some people want to talk about it and some do not. Some people will show their reactions openly and others will not.

Shock and Disbelief: Typically people experience immense shock and disbelief when learning of a suicide. It may take quite a long time to

struggle with questions about why this happened.

Irrational Guilt: Family, friends and colleagues frequently feel irrational guilt after a suicide believing that somehow they should have recognized the threat and that they could have done something to prevent the suicide. This guilt is a common reaction but it is unwarranted. Even expert and responsible mental health professionals may have trouble recognizing periods of risk.

Feelings of Inadequacy: Survivors may experience the suicide as a personal rejection. They may also feel that if they had been more knowledgeable and capable they could have prevented the suicide.

Blaming: A common reaction could include blaming those close to the victim who one thinks should have recognized any warning signs or prevented the act. This is an understandable grief reaction, but is inaccurate, unwarranted and may compound the grief of those who are left behind.

Anger: A common reaction for those close to suicides. One can feel emotionally rejected, made the object of blame or speculations, or left to handle the emotional and practical difficulties of a death by suicide. Suicide usually produces more anger than any other type of death.

Sadness: As with any loss, feelings of sadness and depression are typical aspects of the response to the death by suicide of someone we know.