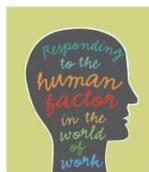


COPING WITH GRIEF AND LOSS

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What Is Grief?

Grief is the normal response of sorrow, emotion, and confusion that comes from losing someone or something important to you. It is a natural part of life. Grief is a typical reaction to death, divorce, job loss, a move away from family and friends, or loss of good health due to illness.

How Does Grief Feel?

Just after a death or loss, you may feel empty and numb, as if you are in shock. You may notice physical changes such as trembling, nausea, trouble breathing, muscle weakness, dry mouth, or trouble sleeping and eating.

You may become angry - at a situation, a particular person, or just angry in general. Almost everyone in grief also experiences guilt. Guilt is often expressed as "I could have, I should have, and I wish I would have" statements.

People in grief may have strange dreams or nightmares, be absent-minded, withdraw socially, or lack the desire to return to work. While these feelings and behaviors are normal during grief, they will pass.

How Long Does Grief Last?

Grief lasts as long as it takes you to accept and learn to live with your loss. For some people, grief lasts a few months. For others, grieving may take years.

The length of time spent grieving is different for each person. There are many reasons for the differences, including personality, health, coping style, culture, family background, and life experiences. The time spent grieving also depends on your relationship with the person lost and how prepared you were for the loss.

How Will I Know When I'm Done Grieving?

Every person who experiences a death or other loss must complete a four-step grieving process:

- (1) Accept the loss;
- (2) Work through and feel the physical and emotional pain of grief;
- (3) Adjust to living in a world without the person or item lost; and
- (4) Move on with life.

The grieving process is over only when a person completes the four steps.

How Does Grief Differ From Depression?

Depression is more than a feeling of grief after losing someone or something you love. Clinical depression is a whole body disorder. It can take over the way you think and feel. Symptoms of depression include:

- A sad, anxious, or "empty" mood that won't go away
- Loss of interest in what you used to enjoy

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- Low energy, fatigue, feeling "slowed down"
- Changes in sleep patterns
- Loss of appetite, weight loss, or weight gain
- Trouble concentrating, remembering, or making decisions
- Feeling hopeless or gloomy
- Feeling guilty, worthless, or helpless
- Thoughts of death or suicide or a suicide attempt and
- Recurring aches and pains that don't respond to treatment

If you recently experienced a death or other loss, these feelings may be part of a normal grief reaction. But if these feelings persist with no lifting mood, ask for help.

Where Can I Find Help?

Remember, many people will experience emotional consequences or symptoms after experiencing the loss or death of someone close. These are normal. Ignoring them, hoping that they will go away or "numbing" them tends to make them worse over time.

The most helpful way to deal with these immediate symptoms is to try to relax, and not put pressure on yourself - give yourself a break and lower expectations of what you are able to accomplish. Allow yourself to do things that feel good and are not destructive. Accept offers of help from others and allow others to provide you with care. When finding it hard to cope, you can do any or all of the following:

- Take advantage of professional assistance by calling your EAP. Research has shown that those who do not use this assistance recover more slowly. **Call Claremont at (800) 834-3773 for a referral for counseling and/or community support services.**
- Create a comfortable routine for yourself and your family. Even on days off from work – get up, get dressed and plan activities and tasks for the day.
- Talk with others about the loss and how you feel.
- Understand that emotional recovery is much like rebuilding. It often takes more time than you expect.
- Don't place expectations on yourself that you will "get over it" in a certain period of time. Each of us will react differently in response to a loss.

For professional help, call Claremont EAP:

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Common Reactions to Grief and Loss

Immediate Symptoms

These symptoms are a **normal** response to the loss of a spouse, family member, friend or colleague and the experience of grief. Grief is a natural healing response. The range of symptoms includes cognitive (mental), emotional, physical and behavioral symptoms.

- **Cognitive (Mental) Symptoms:** confusion; memory loss; (especially short-term memory loss or forgetfulness); difficulty making decisions and keeping priorities straight; difficulty concentrating with limited attention span and tendency to be easily distracted.
- **Emotional Symptoms:** fear; anxiety; worry; grief; depression; anger; feelings of hopelessness; being easily irritated; anxiety and/or panic attacks; emotionally “numb”.
- **Physical Symptoms:** marked increase in fatigue; stomach upset; headaches; sweating; backache; tension; decrease or increase in appetite; sleep disturbances; high blood pressure; dizziness.
- **Behavioral Symptoms:** social withdrawal; talking more or less; silence; jumpiness; difficulty relaxing; increase or decrease in food consumption; increase in alcohol and/or drug use; sleep disruption.
- **Prior Experiences:** a current major loss, such as the death of someone close to you, can recreate old feelings of unresolved grief from prior loss(es).

Managing Grief and Loss

Take Care of Yourself While Grieving

- Don't push yourself
- Get sufficient rest
- Eat nourishing foods
- Exercise, as it relieves pent-up feelings and stress
- Don't force yourself to make decisions to do things that feel uncomfortable
- Allow yourself time alone or with others as you need it
- Find good listeners who are supportive
- Find ways to nurture yourself

Seek Professional Help When...

- You are having trouble coping with your daily life
- You don't feel better over time
- You are abusing alcohol, drugs or prescription medication as a means of trying to make yourself feel better, cope, forget or numb your pain
- You have been having thoughts of suicide

The Five Stages of Grief and Loss

Source: Julie Axelrod, www.psychcentral.com

The 5 stages of grief and loss are:

- | | |
|--------------------------------|----------------------|
| 1. Denial and isolation | 4. Depression |
| 2. Anger | 5. Acceptance |
| 3. Bargaining | |

People who are grieving do not necessarily go through the stages in the same order or experience all of them.

The stages of grief and mourning are universal and are experienced by people from all walks of life, across many cultures. Mourning occurs in response to an individual's own terminal illness, the loss of a close relationship, or to the death of a valued being, human or animal. There are five stages of grief that were first proposed by Elisabeth Kübler-Ross in her 1969 book *On Death and Dying*.

In our bereavement, we spend different lengths of time working through each step and express each stage with different levels of intensity. The five stages of loss do not necessarily occur in any specific order. We often move between stages before achieving a more peaceful acceptance of death. Many of us are not afforded the luxury of time required to achieve this final stage of grief.

The death of your loved one might inspire you to evaluate your own feelings of mortality. Throughout each stage, a common thread of hope emerges: **As long as there is life, there is hope. As long as there is hope, there is life.**

Many people do not experience the stages of grief in the order listed below, which is perfectly okay and normal. The key to understanding the stages is **not** to feel like you must go through every one of them, in precise order. Instead, it's more helpful to look at them as guides in the grieving process — it helps you understand and put into context where you are.

All people grieve differently. Some people will wear their emotions on their sleeve and be outwardly emotional. Others will experience their grief more internally, and may not cry. You should try and not judge *how* a person experiences their grief, as each person will experience it differently.

1. Denial & Isolation

The first reaction to learning about the terminal illness, loss, or death of a cherished loved one is to deny the reality of the situation. "This isn't happening, this can't be happening," people often think. It is a normal reaction to rationalize overwhelming emotions. It is a defense mechanism that buffers the immediate shock of the loss. We block out the words and hide from the facts. This is a temporary response that carries us through the first wave of pain.

2. Anger

As the masking effects of denial and isolation begin to wear, reality and its pain re-emerge. We are not ready. The intense emotion is deflected from our vulnerable core, redirected and expressed instead as anger. The anger may be aimed at inanimate objects, complete strangers, friends or family. Anger may be directed at our dying or deceased loved one. Rationally, we know the person is not to be blamed. Emotionally, however, we may resent the

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person for causing us pain or for leaving us. We feel guilty for being angry, and this makes us more angry.

The doctor who diagnosed the illness and was unable to cure the disease might become a convenient target. Health professionals deal with death and dying every day. That does not make them immune to the suffering of their patients or to those who grieve for them. Do not hesitate to ask your doctor to give you extra time or to explain just once more the details of your loved one's illness. Arrange a special appointment or ask that he telephone you at the end of his day. Ask for clear answers to your questions regarding medical diagnosis and treatment. Understand the options available to you. Take your time.

3. Bargaining

The normal reaction to feelings of helplessness and vulnerability is often a need to regain control—

- If only we had sought medical attention sooner...
- If only we got a second opinion from another doctor...
- If only we had tried to be a better person toward them...

Secretly, we may make a deal with God or our higher power in an attempt to postpone the inevitable. This is a weaker line of defense to protect us from the painful reality.

4. Depression

Two types of depression are associated with mourning. The first one is a reaction to practical implications relating to the loss. Sadness and regret predominate this type of depression. We worry about the costs and burial. We worry that, in our grief, we have spent less time with others that depend on us. This phase may be eased by simple clarification and reassurance. We may need a bit of helpful cooperation and a few kind words.

The second type of depression is more subtle and, in a sense, perhaps more private. It is our quiet preparation to separate and to bid our loved one farewell. Sometimes all we really need is a hug.

5. Acceptance

Reaching this stage of mourning is a gift not afforded to everyone. Death may be sudden and unexpected or we may never see beyond our anger or denial. It is not necessarily a mark of bravery to resist the inevitable and to deny ourselves the opportunity to make our peace. This phase is marked by withdrawal and calm. This is not a period of happiness and must be distinguished from depression.

Loved ones that are terminally ill or aging appear to go through a final period of withdrawal. This is by no means a suggestion that they are aware of their own impending death or such, only that physical decline may be sufficient to produce a similar response. Their behavior implies that it is natural to reach a stage at which social interaction is limited. The dignity and grace shown by our dying loved ones may well be their last gift to us.

Coping with loss is ultimately a deeply personal and singular experience — nobody can help you go through it more easily or understand all the emotions that you're going through. But others can be there for you and help comfort you through this process. The best thing you can do is to allow yourself to feel the grief as it comes over you. Resisting it only will prolong the natural process of healing.

Coping with the Death of a Co-Worker

Source: American Psychological Association

Our co-workers are very much like an extended family. We spend most of our waking hours with them, forging special bonds of trust and friendship that are unlike our other relationships.

So it's not surprising that a co-worker's death can sometimes be particularly difficult to deal with, particularly if you were close to that person, or if the death was sudden and tragic. You may also experience feelings of anxiety and guilt if the death occurred in the workplace, or your last interaction with the person was not pleasant. And even if the co-worker's death is the result of a prolonged illness, you may still experience shock and depression when the news arrives.

The Emotional Impact

How we cope with a loss depends on many factors, from our personal beliefs to the presence of other stressors in our lives. For some of us, thoughts of the deceased may make it hard to focus on our work for a short while. Others may find it difficult to get back on track, resulting in mistakes that, in turn, disrupt the organization's functioning.

In a production or manufacturing environment, preoccupation with a co-worker's death may present safety hazards for those operating equipment, performing intricate operations, or monitoring product quality. Similarly, a loss of concentration during your daily drive to and from work could easily lead to a crash.

In more extreme cases of stress, a co-worker's death may cause you to become tense and irritated, adding to what may already be a stressful work environment and creating new problems elsewhere in your life.

The Physical Impact

A strong emotional response to a co-worker's death can have a direct and often negative influence on your physical health. Long-term feelings of deep sadness can disrupt your eating and sleeping patterns, robbing you of the energy necessary to move on with your life. For those with arthritis, high-blood pressure, or other chronic health problems, even a brief deviation from prescribed diet, medication or exercise regimens can have serious consequences.

Prolonged grief frequently leads to depression, which has been linked to many other health concerns such as heart disease and stroke, obesity and eating disorders, diabetes, and some forms of cancer. Grief-related stress has also been shown to disrupt the immune system. Bacteria-fighting t-lymphocytes, or "t-cells," react more sluggishly, making the body more vulnerable to colds and infections.

Trying too hard not to think about a co-worker's death has its own consequences. Those who attempt to "lose themselves" in their work risk burnout, a state of intense mental and physical exhaustion that can cause cardio-vascular and neurological problems. Others may become dependent on alcohol and prescription drugs to cope with their sadness.

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What You Can Do

Grief is a natural process that requires time. If you are having difficulty accepting a co-worker's death, a qualified mental health professional such as a psychologist can help you adjust to the loss. You may also find these suggestions helpful:

- Share your feelings. Your other co-workers may be experiencing the same feelings you are. Mutual support can help everyone get through the grieving process.
- Take advantage of your Employee Assistance Program with Claremont. Experienced counselors can offer the support and structure necessary to help individuals and groups come to terms with a loss and make appropriate plans for memorials, gestures of condolences to family members.
- Plan ahead. If you are a manager, work with your Human Resources specialists to establish protocols for responding to a worker's death. Issues to consider include sharing information, handling personal effects, allowing time off for funerals, and reassigning space or equipment.

Helping a Grieving Colleague

Source: Odette Pollar

When you receive the news that a colleague has just experienced a death in his or her family, what should you do or say? What is the correct etiquette in the workplace, and what can you do to ease the pain and transition for your fellow worker?

You might send a card or say something to express sympathy. Try to avoid platitudes. It will be better received if you sincerely express your concern or, better yet, if you share a memory about the person. That is more meaningful than an easily dropped cliché.

Remember to look at the person that you are talking to, rather than at your hands or away. It is her child or spouse that died, not her. Survivors often feel as though they are invisible to others.

Be aware of your tone. In later conversations, you do not have to be continually solemn. Some humor, particularly in difficult times, is welcome. However, telling jokes, laughing raucously, and being excessively chipper are grating on the nerves.

Talking About the Grief

It is common for people to feel uncomfortable in this situation and therefore tempted to avoid any awkwardness. This can mean that the lost one is never mentioned, when all the survivor wants is to talk about that person. It is helpful to let people talk. This is not to say that you suddenly become a grief counselor or that work ceases. For many people, continuing to work helps them get through the most trying times.

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Try not to bow to the temptation to switch the subject quickly when the survivor talks about how badly she feels. No matter how uncomfortable you may be with pain or sadness, it is not nearly as difficult as it is for the person going through the loss. He or she will feel sorrow and likely have extreme emotional swings for a number of months as her or she goes through the grief cycle. Although there are often situations in life from which you learn great lessons, avoid asking the survivor what lessons they are learning from this, what messages the universe is giving them, or what positive things they are getting from going through the grieving process.

Nothing you can say will eliminate the other person's grief. All you can do is help soften it for a little while. Whether the loved one was ill for a long time or died unexpectedly, there is no ideal way for anyone to prepare for this event. In the case of a sudden death, a well-meaning comment such as, "Well at least he didn't suffer like my mother who had cancer," can trivialize the death. Just tell your co-worker that you are sorry.

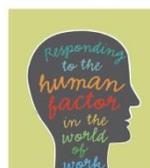
Touching Base Later

Immediately after a death, the survivor receives a great deal of attention and support. But after a time, maybe a couple of weeks or months, other people move on with their lives. One of the worst things that colleagues do is seem to forget that the person has experienced such a significant loss. It is really important to be supportive for a number of months after a death. The loss is still fresh for the survivor. Continue to take the person to lunch, ask how they are doing, and offer support. This is also a good time to share a memory or to write a note. Notes and kind words even months later are still highly appreciated. Saying something about the lost one is painful to hear, but going through the pain is part of the process.

Don't be surprised at changes in behavior and sometimes in work performance. The culture in the United States does not support mourning as do some other cultures. People are expected to take three days off for bereavement and then come back to work and perform at maximum potential right away. But grief comes and goes in waves. There are better days and worse days for the person. This is the time to be understanding and lenient.

Ultimately, only time will make the difference. Meanwhile, supportive, understanding colleagues and managers will help the process.

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