



## **Bereavement**

Bereavement is a very distressing, yet very common experience. Sooner or later most of us will suffer the death of someone we love. Yet in our everyday life we think and talk about death very little, perhaps because we encounter it less often than our grandparents did.

For our grandparents, the death of a brother or sister, friend or relative, was a common experience in their childhood or teenage years.

However, these losses now usually happen later in life. As a result, we don't have much chance either to learn about grieving - how it feels, what the right things to do are, what is 'normal' - or to come to terms with our grief.

In spite of this, we have to cope when we're finally faced with the death of someone we love. In this fact sheet you will find information about some of the ways in which people grieve after such a loss, and about the ways in which bereaved people can get 'stuck' in the grieving process.

### **Grieving**

Grieving takes place after any sort of loss, but most powerfully after the death of someone we love. It's not just one feeling, but a whole series of feelings, which take a while to get through and which can't be hurried.

Although we're all individuals, the order in which we experience these feelings is very similar for most of us. Grief is most commonly experienced after the death of someone we've known for some time, however, it's clear that people



who have had stillbirths or miscarriages, or who have lost very young babies suffer a similar experience of grieving and need the same sort of care and consideration.

In the first few hours or days following the death of a close friend or relative, most people feel simply stunned, as though they can't believe it's actually happened. They may feel like this even if the death has been expected. This sense of emotional numbness can be a help in getting through all the important practical arrangements that have to be made, such as getting in touch with relatives and organising the funeral. However, this feeling of unreality may become a problem if it goes on for too long a time.

Seeing the body of the dead person may be, for some people, an important way of beginning to overcome this unreality. Similarly, for many people, the funeral or memorial service is when the reality of what has happened really starts to sink in.

It may be distressing to see the body or attend the funeral, but these are ways of saying goodbye to those we love. At the time, these things may seem too painful to go through, and so may not be done. However, for some of us, this can lead to a sense of regret in future years. Soon though, our numbness disappears and may be replaced by a dreadful sense of agitation, of pining or yearning for the dead person.

There is a feeling of wanting somehow to find them, even though this is clearly impossible. This makes it difficult to relax, or to concentrate, and it may be difficult to sleep properly. Dreams may be extremely disturbing. Some people feel that they see their loved one everywhere they go - in the street, the park, around the house, anywhere they had spent



time together. People often feel very angry at this time - towards doctors and nurses who couldn't prevent the death, towards friends and relatives who they think didn't do enough, or even towards the person who has left them.

Another common feeling is guilt. People find themselves going over in their minds all the things they would have liked to have said or done. They may even consider what they could have done differently that might have prevented death. Of course, death is usually beyond anyone's control and a bereaved person may need to be reminded of this. Guilt may also arise if a sense of relief is felt when someone has died after a particularly painful or distressing illness. This feeling of relief is natural, extremely understandable and very common. This state of agitation is usually strongest about two weeks after the death, but is soon followed by times of quiet sadness or depression, withdrawal and silence.

These sudden changes of emotion can be confusing to friends or relatives, but are just part of the normal way of passing through the different stages of grief. Although the agitation lessens, the periods of depression become more frequent and reach their peak between four and six weeks later.

Spasms of grief can occur at any time, sparked off by people, places or things that bring back memories of the dead person. Other people may find it difficult to understand or feel embarrassed when the bereaved person suddenly bursts into tears for no obvious reason. At this stage it may be tempting to keep away from other people who don't fully understand or share the grief. However, avoiding others can store up trouble for the future and it's usually best to try to start to return to one's normal activities after a couple of



weeks or so. During this time, it may appear to others as though the bereaved person is spending a lot of time just sitting, doing nothing. In fact, they're usually thinking about the person they've lost, going over again and again both the good times and the bad times they had together. This is a quiet but essential part of coming to terms with loss.

### **As time passes...**

As time passes, the fierce pain of early bereavement begins to fade. The depression lessens and it's possible to think about other things and even to look again to the future. However, the sense of having lost a part of oneself never goes away entirely.

For bereaved partners there are constant reminders of their new singleness - in seeing other couples together and from the deluge of media images of happy families. After some time it's possible to feel whole again, even though a part is missing. Even so, years later you may sometimes find yourself talking as though he or she were still with you. These various stages of mourning often overlap and show themselves in different ways in different people.

Most recover from a major bereavement within one or two years. The final phase of grieving is a letting-go of the person who has died and the start of a new life. The depression clears completely, sleep improves and energy returns to normal. Sexual feelings may have vanished for some time, but now return - this is quite normal and nothing to be ashamed of. Having said all this, there is no 'standard' way of grieving. We're all individuals and have our own particular ways of grieving.



In addition, people from different cultures deal with death in their own different ways. Over the centuries, people in different parts of the world have worked out their own ceremonies for coping with death. In some communities death is seen as just one step in the continuous cycle of life, rather than as a 'full stop'. The rituals and ceremonies of mourning may be very public and demonstrative, or private and quiet. In some cultures the period of mourning is fixed, in others not.

The feelings experienced by bereaved people in different cultures may be similar; but their ways of expressing them may be very different.

### **Children and adolescents**

Even though children may not understand the meaning of death until they are three or four years old, they feel the loss of close relatives in much the same way as adults. It's clear that, even from infancy, children can grieve and can feel great distress.

However, they have a different experience of time from that of adults and may go through the stages of mourning quite rapidly. In their early school years children may feel responsible for the death of a close relative and so may need to be reassured. Young people may not speak of their grief for fear of adding extra burdens to the grown-ups around them. The grief of children and adolescents, and their need for mourning, should not be overlooked when a member of the family has died. They should usually, for instance, be included in the funeral arrangements if possible.

### **Can friends and relatives help?**



Family and friends can help by spending time with the person who has been bereaved. It's not so much words of comfort that are needed, but more the willingness to be with them during the time of their pain and distress. A sympathetic arm around the shoulders will express care and support when words are not enough. It's important that, if they wish it, bereaved people are able to cry with somebody and talk about their feelings of pain and distress without being told to 'pull themselves together'. In time, they will get over it, but first they need to talk and to cry.

Others may find it hard to understand why the bereaved have to keep going over the same ground again and again, but this is part of the process of resolving grief and should be encouraged.

If you don't know what to say, or don't even know whether to talk about it or not, just be honest and say so. This gives the bereaved person a chance to tell you what he or she wants. People often avoid mentioning the name of the person who has died for fear that it will be upsetting.

However, to the bereaved person, it may seem as though others have forgotten their loss, adding a sense of isolation to their painful feelings of grief. It's good to remember that festive occasions and anniversaries (not only of the death, but also birthdays and weddings) are particularly painful times when friends and relatives can make a special effort to be around. Practical help with cleaning, shopping or looking after children can ease the burden of being alone.



Elderly bereaved partners may need help with the chores that the deceased partner used to handle - coping with bills, cooking, housework, getting the car serviced and so on.

It's important to allow people enough time to grieve. Some can seem to get over the loss quickly, but others take longer. So don't expect too much too soon from a bereaved relative or friend - they need the time to grieve properly, and this will help to avoid problems in the future.

### **Grief that's unresolved**

There are people who seem hardly to grieve at all. They don't cry at the funeral, avoid any mention of their loss and return to their normal life remarkably quickly. This is their normal way of dealing with loss and no harm results, while others may suffer from strange physical symptoms or repeated spells of depression over the following years.

Some may not have had the opportunity to grieve properly. The heavy demands of looking after a family or business may mean that there simply isn't the time.

Sometimes the problem is that the loss isn't seen as a 'proper' bereavement. This happens often, but by no means always, to those who have had a miscarriage, stillbirth, or abortion.

Again, frequent periods of depression may follow. Some may start to grieve, but get stuck. The early sense of shock and disbelief just goes on and on. Years may pass and still the sufferer finds it hard to believe that the person they loved is dead. Others may carry on being unable to think of anything



else, often making the room of the dead person into a kind of shrine to their memory.

Occasionally the depression that occurs with every bereavement may deepen to the extent that food and drink are refused and thoughts of suicide arise.

### **Help from your doctor**

Occasionally sleepless nights may go on for so long as to become a serious problem. Your doctor may then prescribe a few days' supply of sleeping tablets. If the depression continues to deepen, affecting appetite, energy and sleep, anti-depressant tablets may be necessary; these are not habit-forming.

If the depression still does not improve, your family doctor may well arrange an appointment with a counsellor. If someone is unable to resolve their grief, help can be arranged through a family doctor or one of the valuable voluntary or religious organisations.

For some, it will be enough to meet people and talk with others who have been through the same experience. Others may need to see a bereavement counsellor or psychotherapist, either in a special group or on their own for a while.

Bereavement turns our world upside-down and is one of the most painful experiences we endure. It can be strange, terrible and overwhelming. In spite of this, it is a part of life that we all go through and usually does not require medical attention.



For those who do run into trouble, help is at hand, not only from doctors, but from many other organisations such as CRUSE and the Samaritans. Please don't hesitate to call them if you're feeling low, or simply if you feel the need to speak with someone. The Samaritans can be reached (in the UK) by dialling 085457 90 90 90 at any time of day or night.

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