

SYMPTOMS OF GRIEF

There are a number of symptoms, physical, behavioural and psychological, that accompany the emotional reaction to loss. A normal grief reaction may include a few or many of the following:

Physical Symptoms:

- Shortness of breath.
- Tightness in throat, chest.
- Stomach discomfort.
- Numbness
- Intense fatigue and lack of energy.
- Headaches.
- Sighing.
- Loss of Weight
- Dizziness.
- Loud heart beat.
- Sense of emptiness and heaviness.
- Loss of sexual desire or hyper-sexuality.
- Sleep, appetite disturbances.
- Increase in common illnesses i.e. colds, flu.
- Physical symptoms that are the same as those of the deceased.

Behavioural Changes:

- Restlessness, inability to sit still.
- Inability to intake and maintain organization.
- Withdrawal from friends, social situations and activities.
- Withdrawal from work.
- Absentmindedness, forgetfulness.
- Inability to concentrate.
- Excessive activity to keep from thinking.

Psychological Symptoms:

- Preoccupation with thoughts of the deceased.
- Dreaming of the deceased.
- Auditory or visual hallucinations.
- Having a sense of deceased's presence.

Any of these may accompany the feelings of shock, anger, disbelief, confusion, depression

and loneliness. The intensity, number and duration of symptoms will vary with the individual.

EXPERIENCES OF GRIEF

People often assume that grief should be over in only a fraction of the time it actually takes. In fact, bereavement does not follow a decreasing linear pattern but has many ups and downs, twists and turns. It is not uncommon for the intensity of the grief to fluctuate over a period of time, lasting from several months to several years. It is important to note that even the person who is actually grieving may not show it twenty-four hours a day. Yet time is a therapeutic factor in the grief process, in that it enables the mourner to put things into perspective, to adapt to the necessary changes and to understand his/her own feelings. Are there experiences people go through in order to accomplish this? Yes, but as we know each person's grief will be individual and personal to him/her. The normal experiences of grief can be described as follows:

Experience of Shock and Disbelief

The mourner is stunned, and often to protect himself against the stress uses denial and/or numbness. "This couldn't have happened", "I don't believe it", "It's only a bad dream" are the words one often hears. They often describe it as 'surreal' or 'unreal' or 'this doesn't feel real'. This can be experienced off and on for many months.

Experience of Yearning and Searching

The mourner shows signs of wanting to find, recover and unite with the deceased person. As this is futile, one may often see anger, anxiety, tearfulness and a strong desire to keep the visual memory of the deceased alive.

Experience of Disorganization and Despair

The mourner gives up the search for the deceased and feels depressed and has little inclination to look at the future to see any purpose in life. This is the beginning of redefining themselves and their situation.

Experience of Reorganization

The mourner gives up his/her attachment to the deceased loved one and begins to establish new ties. There is a gradual return of interests and desires. He/she adapts to a new role, learns new skills, makes new attachments and learns to live with his/her loss.

SENSITIZING THE WORK ENVIRONMENT

No two people grieve in the same manner. Some employees may wish to work as soon as possible after the death. They want life to return to “normal”, but life will never be the same for that person again. Others may experience great difficulty in returning to work. Their home may become their refuge.

SHOCK

“John came back four days after his son died. He is carrying on as if nothing happened.”

Nature has a mechanism of protecting us from pain we are not yet equipped to handle. This numbness leaves in time, exposing the person to a great deal of pain.

DENIAL

“Richard continues to talk about the holiday plans he made with Rita as though she was still alive.”

A husband may know his wife has died, but psychologically it doesn't feel like she has died. In time, spouses will feel and believe the reality and accept it emotionally. When this happens they may want to share memories of the deceased person. It is essential to the healing process to be able to express your feelings openly.

WITHDRAWAL FROM OTHERS

“She used to join in company baseball games, but since her brother died, she doesn't seem to want to be with us.”

For some individuals, time to be by themselves and reflect is a necessary part of the grieving process.

ANGER

“He flew off the handle when I asked how the report was coming along. What's wrong with him?”

Anger is a normal part of the grieving process. If the anger is not expressed in an appropriate environment, it may be directed at anyone who happens to be around.

TEARS

“As the manager at work and as the father at home, I felt I was expected to make decisions and to be strong. The only time I felt I could cry for my daughter was when I was in the car on the way to work in the morning.”

Tears are an integral part of the grieving process for both males and females. Women may feel able to cry more openly while many men suppress their tears until they are alone. There is no time limit on tears. Just when friends and co-workers may feel the grieving process is ending, tears may again flow. Some workers set aside “grieving time” at the office in an effort to be more productive. This may entail ten or fifteen minutes in the morning and afternoon in which they “permit” themselves to grieve. In this way they are able to push aside their grief for a short time and function “normally”, secure in the knowledge that they have ten minutes later that afternoon to grieve.

HOW CAN I HELP?

Don’t avoid the newly bereaved person. If you don’t know what to say, say so. Avoiding the person can add pain.

If you work with the person, be prepared to pick up some work that may not normally be yours. It is important that the newly bereaved person accomplish a task each day and these tasks may be less than normal. You must remember that their ability to concentrate and remember may be less than it used to be.

If you work for the newly bereaved person, and if the person is unusually short-tempered, it is not directed at you and will subside in time. Patience and understanding are required on your behalf.

If the bereaved person works for you, assign tasks that optimize their skills and will lead to an accomplishment each day. Their concentration will be reduced so do not assign projects that require a great deal of concentration.

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