

What is Grief?

The first article in a series looking at “Aspects of the Human Heart”

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The grief associated with bereavement is not a feeling that is easy to describe. There may be a good deal of ambivalence at the time, for example, sorrow and disappointment may be mixed with anger, guilt and anxiety. Bereavement is a stress that can precipitate psychiatric disorder and psychosomatic illness. Many widows, for example, experience feelings of guilt about their role in the events leading up to the death of their husbands. The reorganisation called for following the death of a spouse introduces an added source of stress with regard to emotional deprivation and living arrangements.

Grief is not just a passive force, of letting out pent up emotion

Bereavement is the loss of someone very precious; grief is the resultant emotional experience of being bereaved. Most people think of grief as a natural response to someone being bereaved, and would be suspicious if someone denied or hid his or her feelings of bereavement. Many people see grief as therapeutic, a healing and necessary process before people can move on with their lives. We are often told “Get it off your chest and have a good cry!” However, grief is more complicated than that. It is a dynamic and we live through it. We go through several steps along the way each of which is hard work. It is not just a passive force of letting out pent up feelings. It is an active process of adjustment. It is a positive 'letting go' of something or someone that has been very precious to you for a long time.

Grief is important in that it is a half way stage between the experience of losing someone and coming to terms with the loss. When we are grief stricken we have strong feelings which we have to deal with so that the wound can heal.

There is no right way to grieve. Grieving varies from person to person and from culture to culture. The point about grief is not how it is done but that it should be done somehow. Things may go wrong. Grief may be denied totally, or it can begin and then be inhibited. It may be turned towards the body instead of outwards to relationships with other people. We quite often see a person who appears not to be affected by grief but know that such good spirits are superficial and brittle. If grief is delayed or inhibited, superficial relief is only gained for a short time. When grieving does start it is often more severe because it has been delayed.

If grief is denied altogether, the person may slip from grief, which is normal and healing, into a depressive illness which is distressing and debilitating. When grief is turned inwards into the body, the person may complain of physical illness. Research has shown that during the first six months after

In the first 12 months after bereavement, widowers often have heart problems, widows complain of gastric attacks and rheumatism.

bereavement, widowers often complain of heart trouble and widows tend to consult their doctors with gastric upsets and rheumatic conditions.

It is very often easy to confuse grief with depression. The bereaved person feels sad and lost. Appetite goes and sleep is interrupted. There may be reproach for not having cared more for the lost one. Kind friends may tell the person not to cry, not to be upset and try to forget it all. That is exactly what the person should not do if they are to go through the natural process of grieving. They must be allowed and encouraged to grieve.

It is not easy to grieve in our society. We can however, grow and mature as human beings if we are allowed to grieve successfully. Grief is a process, not a state. It takes time to work through. Grief is normal, natural, painful and takes time to resolve.

- We are in a state of shock.
- We experience emotion
- We feel depressed and very lonely
- We may experience physical symptoms of distress
- We may become panicky
- We feel a sense of guilt about the loss
- We may be filled with resentment and hostility
- We are unable to return to our usual activities
- Gradually hope comes through
- We struggle to adjust to reality



Death is the universal experience of all human kind, but each individual death is unique not only to the person who has died, but also the surviving relatives and friends. When death occurs in a family, the anguish and grief we feel can be personally shattering and socially disruptive. Sorrow and helplessness, denial and anger, guilt and relief, hopelessness and confusion, are all common reactions to the loss of someone we loved.

Despite its inevitability, death is rarely discussed.

The personal dimension of grief must be resolved by each of us in our own way. But the burden of grief, although personal, should not be borne alone. It is important during this period that supportive and loving friends and family allow this grieving to take place.

It is possibly the last taboo subject in our society. As a result, death and its consequences are not well understood. This, in turn makes it more difficult for us to cope with when death does occur. Even the professionals, the doctors, nurse, social workers, psychologists and clergy share our reticence, our mental discomfort. There is a reluctance to invest too much of ourselves in another's death. Through fear of our own death, we fear to confront it in others. Whilst we can't prevent the profound emotional turmoil and grief that accompanies death, greater understanding can help alleviate our fears and hesitations. Knowing what to expect can help us to cope with our feelings, and hopefully bring some comfort and tranquillity to both the dying and the bereaved. This is increasingly important in today's world, where changes in society have tended to remove death from our everyday experience and discussion. SGW