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Understanding the effects of loss and grief

The effects of a significant loss, and the grief it causes, can manifest in many ways, all of which are real and natural, but some of which may seem unreasonable reactions at the time. It is helpful to recognise these reactions as they arise to be part of the grief process. These ways of responding to grief (some of them named and brought to our attention originally by Elisabeth Kubler-Ross) come and go and do not necessarily occur in a fixed sequence. Grief can also appear as 'anticipatory grief' before an event occurs. These notes mainly refer to the loss being related to a death but can be used to identify symptoms of other significant losses as well.

Denial and bargaining

Initially we often experience disbelief at a death or traumatic event, and it takes time to come to accept its reality. Participation in dealing with its reality (in the case of death in memorials, viewings, funerals and wakes) can help us to accept what has happened and recognise that

nothing we can do (or bargain about) can change what has already happened. With the right preparation and support, even children can participate in some of these events, to help them accept the reality of a death or loss.

Biological shock

Deep grief has the effect of blurring reality in a biological, as well as an emotional way. The hypothalamus and pituitary glands, when triggered by grief, release substances called endorphins, which are morphine-like chemicals which act as pain killers, anaesthetising us so that we function automatically, not fully aware of what is happening around us. This can affect the whole grieving family and close friends for 4 to 6 weeks or even longer. This is an organic reality which people need to know about. It may cause mental blanks and forgetfulness. It can

make people do odd things that can be embarrassing or even get them into trouble (like absent-mindedly walking out of a shop without paying for the goods). It can also mean that a person may seem to be going along fine in the weeks after the funeral but then, when these 'grief chemicals' are no longer released, the grieving person may feel the pain and loneliness much more intensely. This is often at the time when the rest of the world have got back to their lives and think the grieving person is managing okay.

Emotional response

Open and uncontrollable crying often occurs, which men particularly (in our society at least) may find embarrassing. Again it is important to recognise that crying is a natural and healthy effect of grief and that it is <u>necessary</u> to cry, for

it literally releases the endomorphins and other stress chemicals from the body through the tears. For children we can literally say: "Tears let the sadness out. They are okay."

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On the other hand, sometimes early in the grieving process when people are protected by the release of bodily chemicals and sustained by the love of friends around them and perhaps by funny stories about the one who has died, moments of happiness and laughter can come

yet may seem inappropriate. But these moments can be healing and helpful and need to be welcomed, especially around children, who need to know happiness and laughter are allowed even in times of pain.

Play response in children

It is important to recognise the importance of play for children's grief and understanding. Children naturally play out what they do not understand and they may play out a tragic scenario again and again with their toys. They create their own therapy and should be supported in this. Other people may find it

macabre when, for example, a child crashes a toy car again and again, after a fatal car accident in which the child's father died, but it is a good sign that the child is processing the death in an active way. What we watch for is gradual change in the play or repeated bad dreams. Stuck-ness is a sign that help may be needed.

Depression, aloneness and thoughts of suicide

To feel sad and alone in grief is natural, a normal but not permanent state. Suicidal thoughts can also be a common and natural part of this, especially those who are grieving over the suicide of a loved one. Talking out these thoughts helps and generally most people with suicidal thoughts, though they may need extra support, do not need psychiatric help. In terms of supporting others well after the death, it is

good to keep in mind that this intense loneliness occurs most often when the person is alone. This is probably worst in the night hours, perhaps when the social business of the day is over, when one goes home to an empty house, when one eats one's meal 'alone', or retires to bed 'alone'. But it can also occur when one must go to a social event 'alone'.

Physical sickness, of psychosomatic origin can also be a stage of the grief process

Research has shown that the immune responses of the grieving person are particularly diminished about 8 weeks after the death. This is probably aggravated by the loss of sleep which often follows after the shock of a sudden death particularly. Unresolved grief depletes the supply of Vitamins C, Thiamine, Pyridoxine and B6 and provision of these may help.

Physical coldness—the need for warmth

Grieving people often feel very cold, through to their core, and feel that they can't get warm. An external source of warmth, like a hot water bottle, warmed blankets or towels or slippers give physical warmth and with it feelings of

comfort. Appetite, which can also be affected, may also improve when warmth is provided. Warm colours, like golden yellow, can also bring comfort.

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Panicky states

In times of grieving people can feel panicky, fearful, find concentration difficult and can even try to run away.

Guilt feelings

Feelings of guilt can be very real at this time, as one questions the things one might have done or said. "If only..." Again frequent talking out of these things can help.

Hostility

Hostility can manifest as resentment, anger, being critical or blaming others. It is important to understand that these things can be part of the grief process and should not be taken personally. This is especially important in dealing with children's behaviour. It can be helpful to try to channel this energy into something creative or physical, like gardening or physical activity (especially walking up a good long hill, weeding and pruning).

Apathy

Feeling that nothing is worth doing any more can also be part of the grieving process. This is much harder to move than the hostility where there is an active energy that can be channelled into something else. One can try to do just small

tasks that are usually enjoyable and hope that the discipline of this and the involvement in something can spark some feeling of interest, eventually.

Hope and readjustment

These are the final two stages of bereavement that can come with time, even though this may be hard to believe in the beginning. Even positive moods come sporadically at first, alternating with gloomier moments. But they are glimpses into a different future, when we

can forgets our sadness just for a little while and feel happy again. These moments should be welcomed whenever they come and again any guilt at feeling happy should be put firmly aside.

Time

Grieving takes time. It can't be hurried and it is different for everyone. Generally though, one could say it takes much longer than most people think and expect. Other people often <u>want</u> a grieving person to recover sooner for their own sakes! Some people find grief responses in others uncomfortable and energy sapping. However the reality is it often takes years to

come to a place of real adjustment. It is said that the 'etheric wound' (a broken heart) of losing someone close to you who has been very much part of your intimate circle (like a child or partner) takes the healing cycle of seven years. Of course one gets on with life in the meantime, but people often experience a new 'freedom'

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seven years after the loss. Helpers of the grieving person need patience.

In terms of big life decisions following a death (selling the house, moving, separation etc) it is advised that people wait for at least 12 months if

possible. Children of course also need as much predictability and 'normality' as they can be given in the period after a death of someone close especially a parent or sibling.

Men, women and children all grieve differently

Many men marry again within a year of losing a spouse. Women do not usually do this. One could say that perhaps men are able to move into a new physical space and relationship more freely than women. This does not mean men loved their wives more or less than women loved their husbands, just differently. Children, on the other hand, will grieve differently according to their developmental age, what they understand about death and their closeness to the person who has died. If allowed to, they can move with more freedom between the moods of

sadness about the loss and joy in living; between tears and neediness for therapeutic play. They do not yet have the societal taboos and expectations around grief and loss so strongly in them as adults do. But they will also be affected strongly by the coping and attitudes in the adults who care for them; whether the routines and feeling of safety are held firm; whether the adults are able to process their own grief in healthy ways and find a new relationship to the dead person.

Reframing the relationship with the dead person or with the new situation

The dead do not have to disappear from our lives, though they have now physically gone. We can make a new place to remember them, with a photo, a candle and flowers. We can still talk to them, share with them, include them in the conversation with the children. "Daddy would like this, or would be pleased too." When we re-frame, we can make a new way of relating and this makes it easier ultimately to let go of the old ways of relating, to let go of the old place they held, the old place they slept or sat,

and give them a new place in our hearts. A large percentage of people believe in a spiritual aspect to ourselves, and in the ongoing nature of the spirit – however vague that notion might be. Here we are acknowledging this possibility to help in our own healing. With other significant losses it may also be possible to reframe the situation in some way, so that what has gone is an ending, but we also stand at a new beginning.

Other articles of interest on the website

For helping young children with a significant loss see: How we can help young children after a death.