

# The Grieving Process

As a parent, you'll never really "get over" the loss of your baby. But you will learn to live without his or her physical presence and, eventually, integrate your loss into your life's experience. That you've been changed by your baby's death is undeniable. Your "rules" and ways of interacting with the world will be different now. But the changes in you will be a lasting testament to your baby's existence.

What's important to know is you can and will move through your grief. Knowing and understanding that grieving is a process can help defuse feelings of powerlessness and provide some measure of consolation, hope, peace, and healing.

While grieving is a very individual experience, it also is a process that has a number of phases. The phases are not experienced by all the same way. They may overlap. You will move in and out of them and may go back to a phase or skip one entirely. There's no right or wrong way to grieve.

The phases of grief are described in a variety of ways. Basically, they include:

1. **Avoidance and disbelief** - When a loss is so overwhelming, you may find it necessary, at first, to take time out to break it down into manageable pieces. Avoidance allows time to regroup, as it were, until you're ready to accept the loss into your lives.
2. **Pain** - Healing comes through pain. You may experience this pain in the form of depression; physical illnesses, such as colds and flu; problems like forgetfulness and difficulty concentrating; anger at yourself, at your spouse, or God; or guilt. Feelings of guilt over things that occurred during the pregnancy can be a way of trying to find a reason for what's happened. It's important to remind yourself that these feelings are a natural part of the grieving process.
3. **Acceptance and adaptation** - As you come to accept your baby's death and acknowledge that it has irrevocably changed you, your pain will ease. You'll integrate the memory of your baby into a meaningful place in your lives and hearts and be ready to move on with your lives toward a different future and a new dream.

Grief is a painful process. You may be bombarded by conflicting emotions and feel overwhelmed at times. Allowing yourselves to experience the pain is part of the healing process. Ignoring your feelings increases distress



# **Clues Indicating When to Seek Professional Assistance**

## **Feelings about yourself**

1. Do you feel you would benefit from professional counseling?
2. Do you question that you are progressing in your grief as expected?
3. Have you had a history of having difficulty with dealing with crisis in the past?
4. Did you have a low self-esteem prior to the death of your infant? Do you feel your worth has lessened in life since the death of your infant?
5. Do you feel that you are not able to meet the physical needs of yourself, your children or your family?
6. Are you sleeping to escape your thoughts and pain or unable to sleep to meet your body's needs?
7. Have you lost or gained twenty or more pounds?
8. Are you using alcohol and/or drugs more often?
9. Do you have feelings that you want to hurt yourself?
10. Do you have physical and/or emotional problems that are emerging?
11. Are you working all the time and not participating in life?

## **Life in the Social World**

1. Have you lost all desire to communicate with friends and/or family members that you usually talk with openly?
2. Do you just want to be left alone? (You do not have any interest in friends, family or activities)
3. Do you have no desire to talk about the death of your infant?
4. Do you deny that a loss occurred?
5. Are you making major lifestyle changes to escape your pain without the desired results?
6. Are you feeling the pain of grief as if it were yesterday, although it occurred months ago?

## **Dealings with death in the past**

1. Are pains from past losses re-surfacing, causing you to actively grieve again?
2. Is there another time in your life that you faced multiple loss or deaths in your life?
3. Have you ever had bouts of depression and/or required assistance from a mental health professional in the past?

**Any of these aspects of your behavior may be a signal that you need to speak with a professional. If you question if you need to speak with a professional, make the call, if nothing else, it will ease your mind that you are grieving normally.**



# Life Transitions Center, Inc

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## **Experiences of Grief**

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Grief is a normal and natural reaction to the death of a loved one. Most of us are not prepared for the long journey of grief, which is sometimes devastating, frightening and lonely. We may think, do and say things that are very unlike us. There seems to be no respite, no end to the intense feelings that we experience.

Grief has been likened to a raw open wound. With great care it eventually will heal, but there will always be a scar. Life will never be the same but eventually you will get better.

The experiences of grief have been compared to enduring a fierce storm at sea. The waves are peaked and close together. Eventually the sea becomes calmer, but occasionally the storm regroups, strengthening without any warning. For several hours, days, or weeks, you may not feel grief; then suddenly you meet someone, or see something, or hear something, and grief resumes. It seems as if you are taking one step forward and two back.

Grief has its common and its unique sides. Although it is a universal experience, no two people grieve the same, even in the same family. Like a snowflake or a fingerprint, each person's grief has characteristics all its own.

It is important to understand some of the following concepts about grief:

**GRIEF WORK:** The expression "grief work" is very true. It may be the hardest work that you will ever perform. It is draining.

**CONTROL:** We cannot control feelings that arise within us. These feelings come from

deep inside, but we can choose what to do with them. We can accept or reject them. To deny only prolongs our grief. Remember, what we do determines whether we remain in our grief or survive. Feelings are not bad or wrong. They should be recognized and faced honestly.

**CHOICES:** About grief: there are no choices, you **must** go through it. The expression of grief is essential for good emotional and physical health even though it is painful and difficult. There are no easy answers or short cuts, no way under, over or around your grief. Although grief may hurt desperately, you must go through it.

**MAJOR DECISIONS:** It is strongly suggested not to make major decisions (such as moving, money matters, etc.), unless absolutely necessary, during the early stages of grief when judgment is cloudy. The conventional wisdom, "Never act in haste" was never more applicable.

**LISTENERS:** Find someone who will listen. Talking is therapy.

**GRIEF HAS NO TIMETABLE:** Grief often takes much longer than the bereaved or the people in their lives expect. It helps to take one hour, one day at a time.

**REMEMBER:** People have a natural inclination to recover. Eventually you'll look back and realize you weren't going crazy... you were grieving.

Be patient with yourself.  
Recovering from grief takes time.



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## **Responses to Loss**

When we lose someone or something we cherish, we will respond emotionally, psychologically, physically and spiritually. Any or all of these responses may be considered normal and healthy under the circumstances of grief in which we find ourselves.

### **Emotional Responses**

- \*Shock
- \*Denial
- \*Disbelief/Numbness
- \*Guilt and Self-blame
- \*Fear
- \*Feelings of Loss/Loneliness
- \*Eemptiness
- \*Sadness/Depression
- \*Disorganization
- \*Panic
- \*Relief
- \*Powerlessness
- \*Anger/Rage
- \*Hopelessness
- \*Shame

### **Psychological Responses**

- \*Inability to Concentrate
- \*Explosive Emotions
- \*Low Self-Esteem
- \*Lack of Interest
- \*Prolonged Withdrawal
- \*Inability to Experience Pleasure

### **Physical Responses**

- \*Tiredness/Lack of Energy
- \*Difficulty Sleeping or Prolonged Periods of Sleep
- \*Excessive Appetite or Lack of Appetite
- \*Tightness in Chest
- \*Shortness of Breath
- \*Ulcers
- \*Heart Problems
- \*Stomach Pain
- \*General Nervousness and Trembling
- \*Lump in the Throat
- \*Headaches
- \*Loss of Muscular Strength

### **Spiritual Responses**

- \*Anger with God
- \*Doubts about Belief System
- \*Questions Regarding Meaning of life
- \*Interest in Afterlife
- \*Changed Priorities
- \*Search for Meaning in the Event
- \*Gratitude for Time Spent Together
- \*Belief that Person is Happier, No Longer Suffering, in a Better Place, etc.



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## Grief Relief

### Sound Sleep Advice

By Victor Parachin

Stress and grief are factors often contributing to an inability to sleep. While an occasional sleepless night is common, many people experience chronic insomnia, which may last from three months to one year. Surveys have found that one out of three Americans suffers from some type of sleep disorder, with women affected three times as often as men.

Sleep disorders are becoming so prevalent that doctors have called them Americans worst and largest unseen medical problem.

Sleep, like nutrition and exercise, is fundamental to health, says Dr. Danyang Chen of the National Institute of Neurological Disorders, Bethesda, MD. Lack of it leaves us prone to accidents and stress.

For those grieving a death, sleep disorders are painfully common and can last months. Specialists studying insomnia offer these suggestions:

**\* Maintain a regular sleeping and waking pattern.** Going to bed and getting up at the same time each day provides a consistent rhythm. If you're having trouble sleeping, avoid the weekend temptation to stay up late or sleep in.

**\* Eliminate caffeine and nicotine.** Tobacco and caffeine are stimulants, and if they cannot be eliminated, they should be avoided at least six hours before bedtime. Remember that caffeine is not just found in coffee, but soft drinks, chocolate, and cold medicines.

**\* Avoid Liquor.** Alcohol's sedative effects may help you relax and nod off more easily, but sleep will be fitful and shallow, says James Perl, author of *Sleep Right in Five Nights*. He suggests avoiding alcohol at least two hours

before bedtime. For those who enjoy a drink with dinner, he recommends one glass of wine or its alcohol equivalent.

**\*Exercise.** Working out for at least 30 minutes three times a week improves sleep, says Peter Hauri, sleep expert at Mayo clinic, Rochester, MN. According to Hauri, fluctuation in body temperature created by exercise helps the body and impedes proper sleep. Check with a physician before starting an exercise program.

**\*Stay up one hour later.** By forcing yourself to stay up an extra hour, you create a sleep debt, which will improve rest, the next time says Charles Reynolds, sleep specialist at the University of Pittsburgh School of Medicine. **By going to bed later, you will be drowsier and may fall asleep faster.**

**\*Reserve the bedroom for sleeping.** If you can't sleep, get out of bed and leave the room; don't stay to read or watch TV. This can result in psychological insomnia. The bed and bedtime become associated with the anxiety of not falling asleep, Dyonzak says.

**\*Establish relaxing pre-sleep rituals.** Do something, which relaxes your mind and body such as walking your dog, taking a bath, or listening to soothing music.

**\*Don't nap.** An afternoon nap may feel good, but it can interfere with regular sleep. Four out of five insomnia sufferers sleep better without daytime naps.

**\*Discard bedtime worries.** Perl suggests scheduling a daily period of five to 30 minutes for worrying, and set it up before you go to bed. Jot down worries and possible solutions. Then, if worry surfaces while in bed, put it out of your mind because you have already planned a solution.

*Victor Parachin is a member of NFDA's Seminar Resource Program and a grief facilitator in Virginia Beach, VA.*