

Grief and How to Deal with It

A No-nonsense Approach to Grief

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“A person removed from his own room, almost without preparation and transition, and set upon the height of a great mountain range, would feel ... an unparalleled insecurity, and abandonment to something inexpressible would almost annihilate him. He would think himself falling or hurled out into space, or exploded into a thousand pieces: what a monstrous lie his brain would have to invent to catch up with and explain the state of his senses!” Rainer Maria Rilke. *Letters to a Young Poet*.

Rilke was a poet, not a brain researcher. Maybe that’s why he was able to capture so well the magnitude of the shock that our brain goes through, after a major life change... The fact that we live in a time of rapid change is obvious to everyone, but the effects that so much change has on us are not so well understood or accepted. Coping well with change is seen as a sign of resilience, of strength and in the workplace at least, there is quite a lot of bravado attached to this.

I think that in our society ‘coping’ tends to mean ‘getting on with it’, ‘not making a fuss’ and certainly not complaining. People are generally expected—and expect themselves—to continue to function as they always have, regardless of the type or magnitude of the change they have just been through. Even after bereavement I hear clients say things like: “But it’s been six weeks. Shouldn’t I be fine by now? Why am I still feeling so rotten?” This uninformed attitude comes at a great cost to us individually and socially.

Perhaps I am wrong but I imagine that when life was slower, adjusting to a major change was perhaps less of an issue. The need to rest—one of the most important needs during adjustment to change—was not criticised so much. Others tolerated it when people went through periods when they were not quite themselves. People lived shorter lives, and were expected to live the life dictated by their social class. Perhaps they never experienced as much change as we do now. These days it is not socially acceptable to rest or feel ‘down’, even when people suffer from colds, let alone when they are going through an emotional process.

What is grief?

There is nothing mysterious or even profound about grief. Grief is a physiological process that our brain goes through after a significant change. Like all mammals our brain

maintains an internal image of the environment and reality we live in. When an important change happens to us our external reality can change quite dramatically and quickly, but our brain needs time to adjust its internal image. This internal image of our world is embedded in neural networks that need to be updated, and new brain cells, and neural networks take time to build. This is the reason why we don't just adjust to change instantaneously.

Each human brain is unique. How long it takes to adjust varies from one individual to another. It will depend on the particular brain and also on the magnitude and significance of the change. We can't do much about the basic quality of our brain, and we can't always have control over how big the change is. But the length of grief and its quality also depend on how well we accommodate the grief, and we can do a lot about that.

I choose to expand the use of the word 'grief', that is usually associated with loss, to cover this process of adjustment to change. In a seminar I once gave on this topic, some of my colleagues were uncomfortable with the fact that I was using the word 'grief' in this way. I am happy to consider alternatives but I haven't yet had any suggestions. So for the time being, when I talk about *grief* I am talking about a process of *adjustment to change*. I use these terms interchangeably. This also means that I think of grief as much more than a sad response to loss, although loss and sadness can certainly be a part of the process as most of us already know.

*Grief is a brain process
through which our limbic system adjusts its internal image of the world
in order to accommodate a significant life change.*

Animals that do not possess an up-to-date internal image of their environment are vulnerable to danger. If they do not know for sure where the food or water are, where predators might lurk, or what other dangers might be present they could end up being someone lunch, get injured, or die of hunger and thirst. Our mammalian brain or limbic system is primarily concerned with physical survival. It will feel just as vulnerable following a major change, as the brain of any animal. It doesn't matter that we no longer live in jungles among predators. Without adjusting to a change we cannot function properly and our brain would consider us to be in grave danger. This is why our brain considers adjustment to change a top priority survival task, and why most of us feel so vulnerable and exposed during grief.

There is no point fighting, reasoning or attempting to eliminate or 'heal' this process because it is a basic survival task and not an illness or a pathology. Although the adjustment process can feel awful—I will talk about it a bit later—it's actually a natural and very much needed process. To fight the adjustment process or to try to eliminate it is as senseless as trying to fight the fact that we need food, drink or sleep. We will not only fail but also risk doing serious damage to ourselves.

Grief or depression?

Over the years I have been alarmed by the number of clients who come to my practice with a diagnosis of depression, and who in fact turn out not to be depressed at all. People who do not suffer from depression but are unhappy could be undergoing an adjustment to one or more changes in their life. When people complain about feeling bad, they are rarely asked what changes they have been through in the previous few months. Some of the symptoms of grief can look similar to depression, but the process of grief is quite different from depression. One of my clients once made the astute observation that depression is stagnant and has no energy, whereas grief is a dynamic process. Grief is energetic because it's designed to update our inner reality from its image of what used to be, to what is now. It moves us from the past, from the world as it was before the change, to the present, the reality as it is now, after the change.

I find that anti-depressant medication can be over-prescribed and is often offered to anyone who happens to feel 'bad' or uncomfortable feelings. A doctor even offered one of my clients anti-depressants for back pain once, claiming that antidepressants can act as muscle relaxants. Even if it is true, is it wise to give someone medication that is likely to have a strong effect on their brain, for back pain? Thankfully this woman was assertive enough to refuse. In general I believe that people end up worse rather than better in the long term if they take medication they don't need.

People can be pressured into taking medication. Many people are made to believe by impatient friends or family members, as well as some healthcare professionals that their feelings are somehow sick and need to be healed, when that may not be the case. I believe that a good proportion of people who consider themselves depressed may not be, and that there may be a more useful explanation for what is going on with them. It is our individual responsibility to expand and develop our emotional vocabulary, and educate ourselves as much as possible about our emotional processes so that we don't rely entirely on others to tell us what we feel and whether it is sick or healthy.

Blocking the grief process

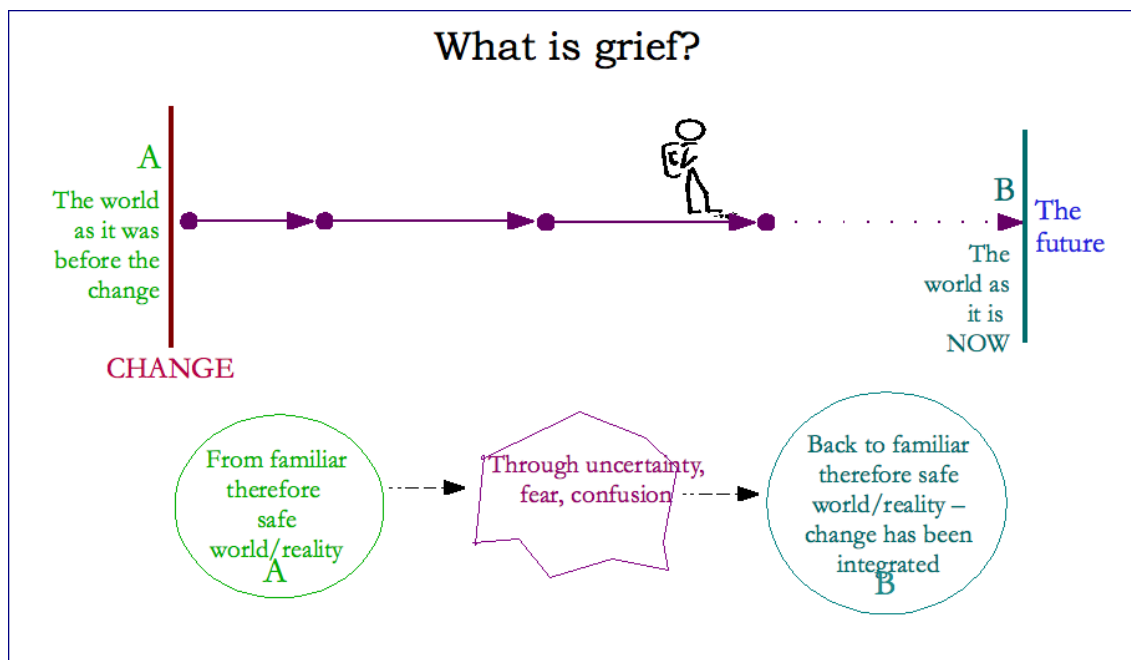
Grief is a process that needs to be experienced fully. Emotions must not be blocked or interrupted. When grieving people are prescribed anti-depressants, the medication (if it works) can interfere and stop them from feeling something that they *must* feel in order for the adjustment process to complete itself successfully. Any drug—prescription medication, alcohol, caffeine, sugar, nicotine—that people take to try and numb their emotions during grief is likely to do them harm in the long term. This is because avoiding the feelings we feel during grief can have the effect of *blocking or slowing down* the grief process. Blocking grief comes at a great cost because it means we do not adjust to our new reality and therefore cannot be in it and function properly and fully.

The implications of un-grieved or blocked grief can be serious. I see a lot of that in my practice. People who do not grieve properly after one or several life changes, are blocking a vital process of adjustment and therefore do not acclimatise properly to their new reality. In other words, their mental 'landscape' does not keep up with their real life circumstances and their mind is out of step with the actual reality they live in. Such individuals can end up

suffering from ongoing crippling anxiety, and they can subsequently develop real depression. The quality of their life can be greatly diminished and quite often they will suffer from physical symptoms, disturbances in their close relationships and in other areas of their life.

Change and the brain

Grief acts like a bridge that our brain builds to help us move from the world as we knew it before the change to the world as it is now.



Grief helps us move from reality A before the change—where everything was familiar and we felt safe—to reality B—which is what the world is like now after the change, new, unfamiliar, and strange. The road from reality A to reality B is uncomfortable and it is what we feel and experience as the process of grief. We can feel uncertain, out of step with life, vulnerable, confused and afraid. I cover the many symptoms of grief later in this article.

The process of grief is physical. Building new brain connections and neural networks is tiring. It uses up a lot of energy and while the brain does that, we don't have much mental energy left for anything else. It is similar to when a computer is being used for a massive computational task but we still try to use it for some word processing on the side. It's going to be clunky and slow, and things are not going to work as well as when we have the entire computer power available to us. It is simply very busy.

One of the biggest problems in grief is that we have no choice and must continue to use the same brain *while* it is going through the adjustment. It would have been so much easier if we could put it in a box while it's adjusting, and borrow another brain to use during that time. It's a bit like when your car is being fixed at the garage and they lend you a courtesy car to use in the mean time. This is done in order to minimise the discomfort of

not having a car at all. Unfortunately we can't do this with our brain, and this is what makes life during grief so difficult.

Because our brain considers adjustment to change crucial to survival, it will make it a top priority task and will allocate as much energy and resources as possible to the adjustment process. This is because from our brain's point of view we are in danger as long as our mental image of reality doesn't match our actual reality. Everything else that we have to do just has to take a back seat. Our brain doesn't care that we have to go to work, raise children, pay bills, drive cars, run businesses, care for others, cook and do the shopping.

In today's reality most of us have a lot to do and to accomplish. Life is filled with responsibilities and commitments and during the adjustment process, our brain will not leave us enough energy to function as we usually do. This can leave many people feeling terribly inadequate and dysfunctional.

I recently heard on the radio excerpts from Joan Didion's *The Year of Magical Thinking* where she describes her life after the sudden death of her husband of many years. Didion describes the grief process so clearly and beautifully, and it's worth reading.

When do we grieve?

Many assume that a change has to be 'bad' or 'negative' in order to trigger grief. But the truth is that we need to adjust in response to *any* significant change, good or bad, desirable or undesirable, planned or unplanned. Incidentally, we adjust to change all the time, but we don't feel the process so much, and it tends to not interrupt our daily functioning. Because these changes are relatively small, our brain doesn't use as much energy and the process doesn't take long.

*Any significant change will require the brain to adjust:
positive or negative, desirable or undesirable, planned or unplanned.*

Our very sense of sanity and reality depends on having an inside image that matches the outside. If you see someone on the street (who isn't a mime) chasing butterflies that aren't there, you'd probably think of this person as insane. This person sees butterflies in his head, but we can all see that they aren't really there in the real world. While we are still adjusting, we are all a little bit insane, chasing butterflies that aren't there, because our internal image is still out of step with our actual reality.

The grief process will try to begin almost immediately after a change that is significant enough to require the brain to make an adjustment to its mental 'picture' of the world.

Here are a few examples of life changes that are followed by grief:

- Losing someone significant to death or another transition
- Losing a pet
- Loss of a friendship

- Infidelity or any relationship betrayal
- Moving house, city, country
- Losing a house e.g. due to natural disaster or financial misfortune
- A house break-in and burglary
- Starting, ending, or changing jobs or careers, retirement
- Workplace restructuring or changes in management and leadership
- Changes in rules or values in the workplace
- Office refitting or relocation
- Having an operation (including cosmetic surgery or other voluntary procedures)
- Being diagnosed with an illness
- Losing a part of the body, a sense or a function due to injury, illness, medical procedure or old age
- Falling in love
- Getting married
- Divorcing or ending a relationship
- Giving birth, becoming a parent
- Not becoming a parent, e.g. discovering infertility, or not having had the opportunity to become a parent
- Miscarriage or pregnancy termination—grief after a termination affects men as well as women
- Being or having been a victim of any form of abuse, attack, political persecution or crime
- Leaving a cult or any other type of close knit religious, social or political group
- Being or having been a victim of a natural disaster
- Starting and finishing kindergarten, school, apprenticeship, university
- Going through early childhood—childhood involves non-stop change and adjustment
- Moving from childhood to adolescence—adolescence also involves ongoing change
- Moving from adolescence to adulthood—early adulthood can involve many important life changes in rapid succession until we settle down more a bit later
- Leaving home
- Learning something new like a new profession, a language, or a set of skills
- Menopause and other signs of ageing
- Going on holidays or going overseas.
- Healing from trauma, e.g. in therapy
- Changes to self/identity and to how one and perceives about oneself
- Giving up on an addiction— e.g. smoking, alcoholism, an eating disorder
- Loss of a dream or expectation. We have to adjust even when our imagined dreams, expectations or plans do not happen or do not happen as we expected them to

Because people tend to associate grief with a ‘negative’ life experience, it can be strange and disturbing when something positive or desirable happens and they still find themselves feeling awful. This can lead people to conclude that they have made a mistake in their decision to marry, move house, renovate, give up on an addiction or have a child; or that they are inadequate in dealing with their new reality. Many new mothers and fathers for example tend to feel like failures simply because no one had explained to them the exact nature of the adjustment they would be going to go through after the birth of their child.

The birth of a child is a significant life change that affects our reality on many levels. If new parents do not understand that they are adjusting, they can panic and try and block the process. They would often worry that they are not good enough parents because they feel so awful. They fear that they don't love their child enough, and that they can't function the way they think they should. This can make life much more difficult than it otherwise needs to be, not to mention prolong the grief process unnecessarily.

I believe that a lot of unnecessary suffering can be prevented if people understand their process of adjustment, and are taught to be patient with it. While my clients still have to go through the discomfort and pain of grief, many of them feel enormous relief when they realise that they are 'normal'. Grief on its own is difficult enough without having to suffer fear of going crazy, worrying that there is something going wrong with your mind, or feeling shame or guilt for not adjusting to a new reality straight away.

The symptoms of grief

The list below is based on data I collected in my private practice over the years and on observations of myself. It is a generalised list that I divided into categories. The division isn't perfect and some symptoms appear in more than one category. Not all the symptoms apply to everyone and not all of them will appear together. There are no well-defined chronologically ordered stages to grief. Grief can feel like it moves in waves, or up and down like a mental roller coaster. Until the adjustment is complete we can feel like we are going backwards and forwards a lot, and have 'good days' and 'bad days'. You know that the grief is nearing its completion, when you wake up one morning and feel well rested for the first time in while.

In terms of brain functioning grief is similar to any process of learning. When we first learn something new, we are unreliable. Sometimes we do really well, and sometimes we slip right back to ignorance. We become reliable and master our new skill or knowledge, only when the brain has finished creating the necessary neural pathways and neural networks needed for the new skill. At that stage we feel confident again, and feel skilled or knowledgeable. In grief we only feel back to 'normal' when the brain has finished the adjustment. Only then we will feel comfortable and safe again in our reality.

Emotional symptoms of grief

- Numbness
- Shock
- Feeling unsettled
- Confusion
- Sadness
- Pain
- Regret
- Stress
- Restlessness and agitation
- Impatience
- Feelings of isolation and loneliness — it can come from feeling that no-one can understand what you are going through

- Feeling out of control
- Feeling like you can't cope even with things that at other times are simple or easy for you to do
- Anger, irritability and unusually short temper
- Fear
- A sense of dissatisfaction with life
- Anxiety and fear about the process itself and the physical symptoms that can accompany it
- Fear of appearing weak to others
- Guilt or shame — e.g. about not performing as well as usual or about being a burden on others or not being able to be there for others as you normally would
- Low levels of emotions and a diminished ability to experience pleasure or joy
- Diminished interest in sex and sometimes in physical contact in general
- People with pre-existing trauma often have their trauma symptoms triggered during grief

Mental symptoms of grief

- Impairment of the short-term memory
- Diminished concentration and attention span
- Absent-mindedness, forgetfulness, feeling distracted
- A tendency to focus on the negative aspects of life, and often a sense that everything is going wrong
- Loss of interest in what was previously of great interest
- Difficulty in dealing with responsibilities
- Fear of going 'crazy'
- Difficulty making decisions
- Feeling stupid
- Inability to think about the future and make plans
- Worrying about not achieving or not living up to usual standards
- Worrying that you will never feel good again and will always feel the way you do now
- Just worrying about everything

Physical symptoms of grief

- Constant exhaustion regardless of the amount of sleep you get
- Changes in appetite — loss of appetite, erratic appetite or overeating for comfort
- Sleep disturbances—interrupted sleep, not being able to fall asleep or sleeping too much
- Changes in dream patterns
- Anxiety symptoms and increase in the likelihood of anxiety and panic attacks
- Increased tendency towards allergies
- A variety of often non-life-threatening medical symptoms where physical there are no physical causes or they are inconclusive
- Loss of sensitivity in some of the senses, flavours, colours or sounds can seem dull compared with the usual

Relational symptoms of grief

- Reduced enjoyment from social contacts and activities
- Tendency toward introversion — needing more time in solitude than at other times
- Very low tolerance for the company of others. After five minutes of being even with your best friend you just want to go and be alone
- Need to talk a lot about what happened
- Impatience with people who are needy or dependent
- Needing the company of non-anxious and non-needy people who can be supportive
- Impaired ability to feel empathy and to listen to others
- Not caring so much about what is happening in the life of others even if normally you tend to be a very caring and generous person
- Tendency to feel like a burden on others
- Diminished interest in sex
- Annoyance with partner that isn't justified by anything in particular that he or she does
- Feelings of disappointment in the relationship because of the perception that your partner cannot understand what you are going through or that he or she isn't feeling the same way as you
- Worrying that your partner will be impatient with what you are going through
- Tendency towards marital or relationship tensions, fighting or distance as a result of all the above

Behavioural symptoms of grief

- Crying
- Increase in tendency to withdraw
- Increase in likelihood of substance abuse such as alcohol, drugs and even prescription medication or other addictive or compulsive behaviour—these can be ways by which the person is trying to numb or soothe their internal chaos and discomfort
- Increase in likelihood of violent behaviour or abuse of others if the person already has these tendencies. People who are abusive already do not cope with stress or anxiety well. Their behaviour can be their way of expressing what they feel. This is unacceptable and others must not put up with. If the person is grieving he or she should be given the right guidance and support but not be allowed to victimise others
- Tendency to take emotional distress out on others who are close to the grieving person such as children, partners or work colleagues. This is also unacceptable.
- Increase in the likelihood of risk-taking behaviours—can be more common in adolescents and young people
- It can be difficult to meditate or do any activity that would normally be relaxing

Spiritual and existential symptoms of grief

- Increase in tendency to worry about the meaning of one's life and place in the world
- A sense of being lost or life having no direction or meaning

- A tendency to focus on what is wrong with the world and with humanity
- More thoughts than usual about illness and death
- Thoughts and worries about the state of the world
- A sense of facing a void or an abyss
- Loss of touch with, or confusion about, one's spirituality
- Anger with God or with life
- Difficulty in feeling a sense of spirituality and well-being

What we need the most during grief

- **Time and lots of it** — As I mentioned earlier, the length and even intensity of grief will vary from one individual to another. We can't put a time limit on grief because the brain takes its own time to develop the neural connections and networks it needs. I usually tell my clients that grief takes as long as it takes but usually not as long as they think it will
- **A lot of rest and sleep** — One of the most obvious signs of grief for me is total exhaustion. The brain is working hard and we feel it. People feel exhausted regardless of how long they sleep. During sleep the brain is free to focus on its processing without being bothered by extra sensory input. Therefore I believe that a lot of daytime naps can help us move quicker through the adjustment process. One of the signs that you are coming out of your grief is when you wake up one morning and actually feel well-rested.
- **The company of non-anxious and non-needy people**—During grief we have very little 'brain space' or energy for anything other than our own adjustment process. People who are anxious and needy can be very draining at any time. During grief they can be unbearable. They don't know how to be with others without having their needs and emotions 'spilling out everywhere. Spending too much time around such people during grief can be a block to your grief.
- **Acknowledgment and validation**—We need to hear and be reminded that what we are feeling is OK. This is because most of us have been brought up without validation and tend to worry that what we feel is unacceptable to others.
- **Time in solitude and permission to take it**—Even otherwise extraverted people can feel quite introverted during grief. Introverted people usually need more time in solitude than extraverted people in order to replenish their energy. During grief it's important that you give yourself the quiet time that your brain might need in order to process the adjustment. Remember you also do not have the 'brain space' for much any way. Let others know that this is what you need.
- **As little responsibility as possible**— Because during grief we are not functioning to our normal standards or capacity it's hard to cope with responsibilities. Even things that are otherwise easy to do are hard during grief. You really don't need too much responsibility if possible.
- **Practical help** (not advice)— During grief people need practical help to manage and cope with their responsibilities to children or other commitments. It's OK to ask for help and it's a really important thing to have while you are grieving.
- **Strategies to cope with daily routine**—Forgetfulness and distraction are common during grief and it is easy to misplace or lose things. People also need to pay extra attention during driving or if operating complicated or dangerous equipment. Making lists and reducing workload can help.

What we *do not* need during grief

- ‘Strategies’ to make us ‘feel better’, advice or any other attempts to change how we feel or what we think
- Antidepressants or any other mind altering drugs
- Strenuous exercise
- Demanding timetables, schedules and deadlines
- The company of people who are anxious, needy or emotionally unskilled and who might be impatient with our grief
- Any unnecessary input that might distract the brain from its main task and take away essential energy

Good quality grief counselling

Seeing a counsellor during grief can be a good idea. Grief can feel lonely and it is very common for people to feel that they are becoming a burden on their friends and family members because they need to talk a lot. When you see a counsellor you don’t have to feel guilty, or worry about bothering the counsellor.

There is another advantage to seeing a counsellor. A recent grief can often trigger older grieves that you haven’t dealt with or finished. It can also trigger other unfinished business you might carry. Having a counsellor there to support you can help you deal with other issues that might come up as you experience your present grief.

A good grief counsellor should provide:

- Reassurance—that what you are going through is normal and will pass
- Validation and recognition—of your feelings, thoughts and body sensations. Do not allow your therapist to try and change how you feel.
- Some information and education about the grief process
- An opportunity to identify, explore and remove blocks to grief
- Strategies or suggestions to accommodate the grief process in case you have to work or care for others while grieving
- Strategies or suggestions to care for your body, for example: an emphasis on a healthy diet and vitamin supplements to strengthen/boost the immune system, gentle exercise such as gentle forms of yoga and relaxation or Tai Chi or gentle outdoor walks, reduction or elimination of caffeine and alcohol in your diet, organic meat to reduce hormonal interference, massage
- Encouragement to write in a journal—journaling can be really helpful during grief. It’s not for everyone but if it works for you, try it.
- Gentle spiritual support—not hard-line or rigid religious views or practices. Your counsellor should be able to talk with you about your spiritual beliefs, your concerns and your feelings about life, god and what had happened to you
- Referral to a GP for a general check-up if needed—A good counsellor should encourage you to seek medical advice if you are concerned about something physical
- Grief therapy should offer you a combination of talking therapy, art work, play therapy, sandplay and other forms of experiential therapy. During grief it can be hard to verbalise your experiences and your feelings. Experiential therapies can

- offer you an opportunity to express yourself in other ways.
- Suggestions, opportunities and space for ceremonies—ceremonies can be important during a time of adjustment to a big change. They can provide a symbolic framework for dealing with the change you have been through. They can provide an opportunity for closure and for expressing yourself in ways you might find difficult on your own. Your therapist should be able to make suggestions for ceremonies and be open to your own ideas and wishes about appropriate ceremonies that could be helpful to you and help your grief process along.

I wish we didn't have to go through this hard process each time we experience a change. But this is how our brain is made and we don't really have a choice... Remember that the grief will pass. If you grieve well, you will come out of the process sooner than you imagine, well adjusted to your new reality and probably wiser and better integrated than before.