Whole Health is an approach to health care that empowers and enables YOU to take charge of your health and well-being and live your life to the fullest. It starts with YOU. It is fueled by the power of knowing yourself and what will really work for you in your life. Once you have some ideas about this, your team can help you with the skills, support, and follow up you need to reach your goals.

All resources provided in these handouts are reviewed by VHA clinicians and Veterans. No endorsement of any specific products is intended. Best wishes!

https://www.va.gov/wholehealth/
Coping with Grief Following a Death

What is grief?
Grief is a normal reaction to loss. Everyone will experience it at some point in time. Grief is more than sadness. It can affect your actions, emotions, thoughts, body, and spirituality. Grief can occur after all kinds of losses, such as the end of your marriage or a close friendship, or the loss of your home or job. This handout focuses on grief following a death. Much of this information will apply to other types of losses also.

How can learning about grief be helpful?
Learning about grief can help you in the following ways:
- Understand some of your (or another person’s) reactions to a death.
- Be reassured that you can adjust to a loss, even if that might not seem possible now.
- Learn when to seek help. Most people cope well, but you can become “stuck” in your grief. Over time, this grief can affect your health. Studies have linked grief to depression, anxiety, weakened immune system (making it harder to fight off illness or disease), worse physical health, more trips to the doctor, increased use of alcohol and cigarettes, suicide, and conditions such as heart disease.

How do I recognize grief? What are some common grief reactions?
Common grief reactions are listed below. All are normal unless they continue for a very long time or are especially intense. A person might have one grief reaction, several, or many. They might be very strong for a while and then lessen, or they might not be as strong but last for a long time. Which of the following reactions are you having, if any?

Actions
- Trouble falling asleep or waking up too early
- Eating too much or too little
- Being absent-minded
- Withdrawing from others; feeling less interested in the world
- Dreaming of the deceased
- Avoiding reminders of the deceased
- Searching and calling out the name of the deceased person
- Sighing
- Being restlessly overactive
- Crying
- Visiting places or carrying objects that remind you of the deceased person
- Strongly treasuring objects that belonged to the deceased

Emotions
- Sadness
- Anger
- Guilt or regret
- Anxiety
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- Loneliness
- Fatigue
- Helplessness
- Shock
- Yearning (pining for the person; thinking “if only” this had not happened)
- Feeling free (Not all feelings are negative. Sometimes there is a sense of being released when a loss occurs).
- Relief (This especially may be felt after someone dies from a lengthy or painful illness or if your relationship with the deceased was a difficult one).
- Numbness—a lack of feeling

**Thoughts**
- Disbelief, thinking the loss did not happen
- Confused thinking, difficulty concentrating
- Being preoccupied, thinking constantly about the deceased
- Sensing the presence of the deceased, thinking the deceased is still there
- Hallucinations, seeing and/or hearing the deceased

**Feelings in the body**
- Hollowness in the stomach
- Tightness in the chest
- Tightness in the throat
- Being overly sensitive to noise
- Feeling that nothing is real
- Feeling short of breath
- Muscle weakness
- Lack of energy
- Dry mouth

**Spirituality**
- Feeling that you have lost direction in life
- Searching for meaning in the loss
- Questioning your religious or spiritual beliefs

**How long does grief last?**
The length of time it takes to adjust to a death is different for each person and in each circumstance. You will cope with many new experiences the first year without the person. Some people find the second year is also difficult, as the loss becomes more real to them. It is helpful to be gentle with yourself, allowing as much time as you need to adjust.

It can be comforting to know that grief tends to come in waves, so you will not be distressed constantly. At times, you may feel upset and heartbroken. In between these times, you may be content and enjoy many things. Grief reactions often become less strong within six months, but this can vary a lot. As time goes on, you will not feel the grief...
reactions as strongly or as much. In time, you can learn to live your life fully and happily despite the loss.

You may find that grief reactions pop up from time to time, even after many years. This is very common. This grief might be triggered by things such as a meaningful song, a season, birthdays, holidays, anniversaries or special events, which you may wish the deceased could enjoy with you. Usually these grief episodes are short.

If you don’t fully grieve a death when it occurs, you may find that you will grieve that loss again in the future. This especially can happen when you face another loss.

**Does everyone grieve the same way?**
Many people have reactions that are similar. Yet, grief is very individual. The way you grieve will be influenced by many things, such as who died, how a death occurred, your personality, culture, age, gender, other stressors in your life, and how satisfied you are with the support you receive from others. There is no right or wrong way to grieve, as long as you do not hurt yourself or others.

**Does military service affect grief for Servicemembers and Veterans?**
Military service may affect the way one grieves in several ways:

- **Not recognizing emotions.** Soldiers are taught to handle anything that comes their way and to live in survival mode. They learn to disconnect from their emotions. This aids survival and military success. However, being stoic can cause problems after returning home. When faced with loss, grieving may be more difficult if you are not in touch with your emotions. If you don’t recognize your emotions, it is hard to cope with them. Also, holding stress in your body for a long time can lead to future health problems, such as chronic inflammation and a weakened immune system. As you grieve, you may need to learn skills opposite from those that were needed in the military, and possibly seek support and guidance for this. (See the section "Whom can I see for help if I need it?" later in this handout.

- **Hidden sorrow.** Hidden sorrow is grief that occurs when you don’t or can’t openly let others know about a death, mourn, or receive support from them. This can happen for many reasons. Some are listed here. Hidden sorrow can occur if others don’t recognize your connection to someone who died. It can occur if a death involves what some people view as a stigma (for example, suicide or a criminal act), or when the circumstances of the death seem too horrible to face. Hidden sorrow can also occur when someone faces many losses within a short time period. This doesn’t allow enough time to face each of them.

  All of these situations can occur during military service. The grief of men and women who have served in combat has often been hidden. One study asked about the grief of 114 Vietnam combat Veterans who were in the hospital for PTSD. Their grief was compared to the grief of people who recently lost a spouse. 80 of these Veterans (70%) had strong reactions over a comrade who died 30 years before.
These reactions were stronger than the grief of people whose spouse had recently died. The researchers noted that treating symptoms of grief may be as important as treating fear in people with PTSD.

If you have hidden grief, you may not recognize right away that symptoms you may have are grief reactions. If others don’t know about your grief or if they don’t support you, you may have a harder time adjusting to the death.

- **Soul injury.** After returning to civilian life, Veterans may feel pain over the deaths of civilians or enemy soldiers whose deaths they may have caused. Unmourned grief and unforgiven guilt are known as “soul injury.”

- **No time to grieve.** Active duty, especially while in a combat zone, may prevent grieving at the time a loss occurs.

**What should I do if I don’t feel better over time?**

Some people do not feel better as time goes on. They may even feel worse and have trouble going about their daily lives. If this is happening to you, seek help from a mental health professional. He or she will determine if you might be experiencing complicated grief, depression, or posttraumatic stress disorder. **If you are having thoughts of suicide, seek help right away.**

- **Complicated grief.** In complicated grieving, reactions last a long time, even years, and may become worse over time. You may have trouble accepting the death and resuming life. Complicated grief is different from depression and may not respond to treatments for depression.

- **Depression.** Depression is an illness with some symptoms similar to those of grief. If you are depressed and receive treatment for it, you will be better able to adjust to your loss.

- **Posttraumatic stress disorder (PTSD).** You could have PTSD if the circumstances of your loss were violent or shocking in some way. You might have recurring recollections of the death that are very disturbing.

**How will I learn to live with a loss in my life?**

Over time, you can learn to live well despite your loss. You will go through a grief process. Researcher William Worden described this process as tasks people do when grieving.

1. Accept the reality of the loss.
2. Work through the pain of grief
3. Adjust to a world without the deceased.
   - How has the death affected your everyday life?
   - How has the death affected your feelings about yourself and your abilities?
   - How has the death affected your spiritual beliefs and views of the world?
4. Find a connection with the deceased while starting a new life.

The next section provides some specific ideas to help you through this process.
What are some things I can do to cope with a death?
People cope with loss in many ways. Following are several suggestions to consider. Are you already doing some? Are there others you’d like to try? What are some ideas that aren’t on this list?

- **Healthy lifestyle.** First, take good care of yourself. Try to get enough sleep, eat a good balance of healthy foods, and avoid using alcohol and drugs (unless prescribed by your health care provider) for relief.

- **Exercise.** Physical activity can help you cope and will help keep you healthy. Do any kind of physical activity that you have enjoyed in the past or try a new one. Doing the activity with others may be even more helpful.

- **Support from family and friends.** People need support from others when they have a loss. Try to accept or even ask for the help or support you need. Most people are glad to help if they know what you need. Choose someone who is a good listener and whom you trust to talk with about the loss. How you feel about the loss is important. Being able to tell this to an understanding person can help.

- **Grief support groups.** Grief support groups are available in many communities and also online. You can find out about a group in your area by contacting VHA mental health providers, hospice staff, hospital chaplains, and social workers. If your grief is related to military service, you may want to connect with others who have been in the military. Vet Centers or The Tragedy Assistance Program for Survivors (TAPS) are two places to consider.

- **Mindfulness-based stress reduction (MBSR).** MBSR is an eight-week class that uses meditation to calm the mind and body. It can help you to become more aware of how you feel and to live in the moment.

- **Rituals.** A ritual is an activity that you do to remember and honor the person who died. It may be related to your cultural traditions. A visitation or wake and a funeral or memorial service are examples of rituals. You can also create your own ritual to honor the deceased and help yourself. Some examples: lighting candles on special dates to remember the deceased, building something in honor of the deceased, sewing a memory quilt (which may be created from clothes of the deceased), planting a tree or memory garden, visiting a Veterans memorial.

- **Writing or journaling.** Writing or journaling about your grief experience can help you express your feelings and the importance of your loss. If there is something you wish you could say to the deceased, consider writing it in a letter. Afterwards, you can keep the letter, bury it, or destroy it—whatever feels right to you.

- **Forgiving.** An unexpected death can leave you with “unfinished business” with the deceased. If you feel you were “wronged” by the deceased, you may want to focus on forgiveness. The reverse can happen also. You may want forgiveness yourself.
When some combat Veterans return to civilian life, they may feel guilt or pain over some things they had to do during military service. Forgiving oneself can then be an important task in adjusting to a new life. See the Whole Health handout “Forgiveness” if you would like to learn more.

- **Nature.** Spending time in nature can be soothing and healing.

- **Books.** Many books have been written on coping with grief, some by authors who have gone through their own grief journeys. To find one that suits you, browse at your local bookstore or online.

- **Leisure activities.** Try to do some fun activities that you have enjoyed in the past. As you start feeling better, you may want to try some new ones.

- **Massage.** If you are feeling tension or pain in your muscles from “holding onto grief,” consider massage. Massage therapists are in many communities. You may want to see if one is available at a VA near you.

- **Healing touch.** Healing Touch, is a form of energy medicine. Practitioners place their hands near or gently on the body to clear, energize, and balance the energy fields. The goal is to restore balance and harmony. A directory for certified healing touch practitioners is at http://www.healingtouchprogram.com/energy/CHTPDirectory.shtml.

**Whom can I see for help if I need it?**
The following are professionals who can help. If your loss is related to military service or your grieving is affected by military service, you may find that professionals who have experience with treating military service issues might be especially helpful.

- **Primary care provider.** Some grief reactions are very similar to symptoms of various illnesses. It can be a good idea to see your primary care provider to make certain you did not develop a medical condition. Be sure to tell the clinician about your loss.

- **Grief counselor.** Grief counselors can be very helpful as you adjust to your loss. They may be bereavement counselors, clergy, psychologists, or social workers and work in many settings, such as clinics, funeral homes, hospices, and private practice. Not all professionals in these helping fields have focused on grief in their careers. Contact leaders of grief support groups, hospice staff, funeral directors, or the VA to learn about counselors available in your area.

- **Mental health professional.** Clinical social workers, psychologists, and psychiatrists can diagnose complicated grief, depression, and posttraumatic stress disorder and direct your treatment.

- **Spiritual leader.** Some losses can cause you to question your spiritual beliefs. If this happens, you might feel ungrounded without your former beliefs for support.
This can also become a time when you strengthen your beliefs or grow in new directions. Meeting with a chaplain, clergy, or other spiritual leader may be helpful.

- **12-Step program.** Consider participating in a 12-Step program if you have a problem with substance abuse. You will be better able to do the grief work needed to cope with your loss if you are not abusing alcohol or other drugs.

**For you to consider:**
- Are you having grief reactions? How long ago did your loss occur? Whom do you talk to about this loss? What are you doing to help yourself cope with this loss?
- Do you think you may be “stuck” in your grief? If so, whom will you contact for help?
- Do you have “soul injury”—unmourned grief and unforgiven guilt? If so, what will be your first step towards getting help? When will you take this step?

The information in this handout is general. **Please work with your health care team to use the information in the best way possible to promote your health and happiness.**

**For more information:**

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<tr>
<th>ORGANIZATION</th>
<th>RESOURCES</th>
<th>WEBSITE</th>
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<tbody>
<tr>
<td>U.S. Dept. of Veterans Affairs</td>
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<tr>
<td>Tragedy Assistance Program for Survivors (TAPS)</td>
<td>Provides peer-based emotional support, grief and trauma resources, casework assistance, and connections to community-based care for anyone who is grieving the death of a loved one in military service to America.</td>
<td><a href="http://www.taps.org/">http://www.taps.org/</a></td>
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<td>Opus Peace</td>
<td>• Information on Veterans’ unique needs at the end of life</td>
<td><a href="http://www.opuspeace.org/topics/veterans">http://www.opuspeace.org/topics/veterans</a></td>
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<td></td>
<td>• Information on the book “Peace at Last: Stories of Hope and Healing for Veterans and Their Families” by Deborah Grassman, a former VA hospice nurse practitioner</td>
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<tr>
<td>Survivors of Suicide</td>
<td>Website created by a survivor of suicide.</td>
<td><a href="http://www.survivorsofsuicide.com">www.survivorsofsuicide.com</a></td>
</tr>
<tr>
<td>The Compassionate Friends</td>
<td>Assists families following the death of a child of any age.</td>
<td><a href="http://www.compassionatefriends.org">www.compassionatefriends.org</a></td>
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<tr>
<td>AARP</td>
<td>Grief and loss resources</td>
<td><a href="http://www.aarp.org/families/grief_loss">www.aarp.org/families/grief_loss</a></td>
</tr>
<tr>
<td>Website GriefNet.org</td>
<td>An internet community of persons dealing with grief, death, and major loss.</td>
<td><a href="http://www.griefnet.org">www.griefnet.org</a></td>
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This handout was written for the Veterans Health Administration (VHA) by Charlene Luchterhand MSSW, Education and Research Coordinator, Integrative Health Program, University of Wisconsin Department of Family Medicine and Community Health. The handout was reviewed and edited by Veterans and VHA subject matter experts.

References


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