



Caring for Jefferson County Since 1985

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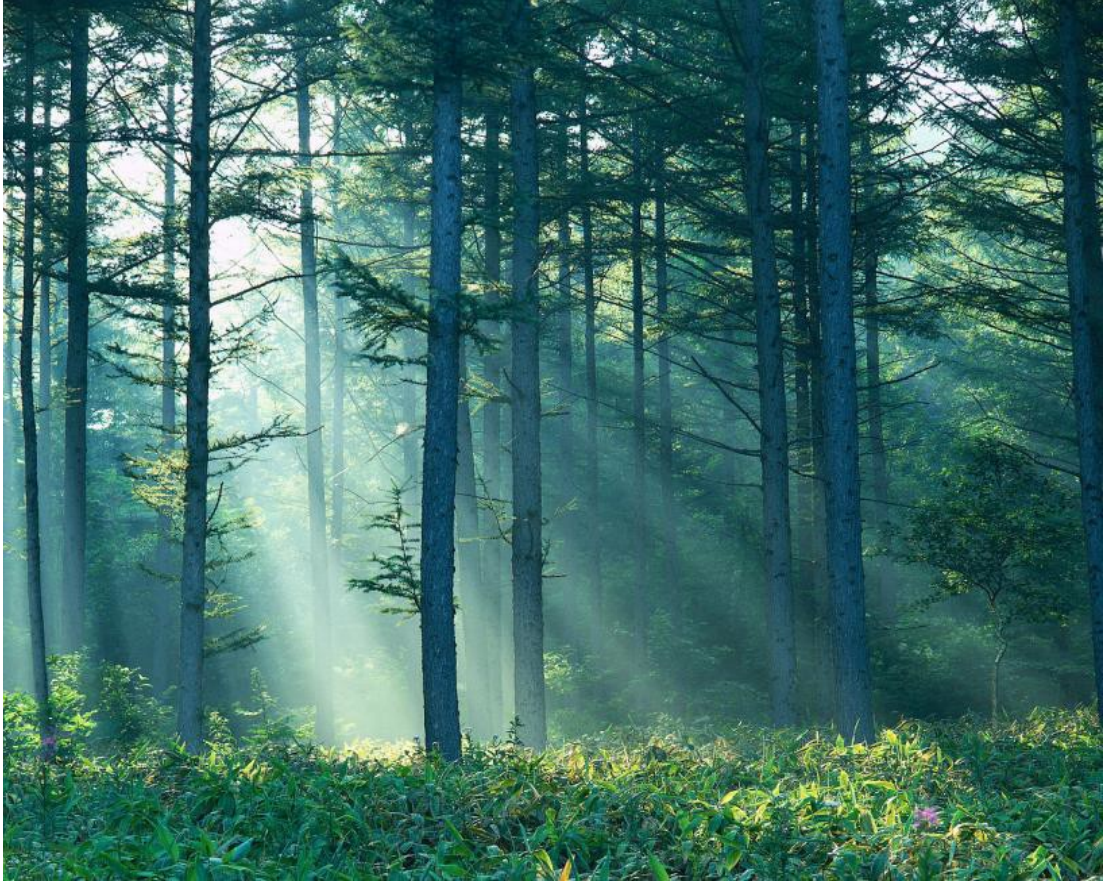
Bereavement

*“Those we love don't go away,
They walk beside us every day,
Unseen, unheard, but always near,
Still loved, still missed and very dear.”*

- Anonymous

We thank you for the privilege of assisting you with the care of your loved one. We commend you for all you have done to surround your loved one with understanding care, to provide your loved one with comfort and calm, and to enable your loved one to leave this world with a special sense of peace and love.

You have given your loved one the most beautiful and sensitive gifts we humans are capable of, and in giving that gift, have given yourself a wonderful gift as well.



THANK YOU!

BEREAVEMENT

Grief is the normal process of reacting to a loss. Grief reactions may be felt in response to physical losses (for example, a death) or in response to symbolic or social losses (for example, divorce or loss of a job). Each type of loss means the person has had something taken away. As a family goes through a serious illness, many losses are experienced, and each triggers its own grief reaction. Grief may be experienced as a mental, physical, social, spiritual, or emotional reaction. Mental reactions can include anger, guilt, anxiety, sadness, and despair. Physical reactions can include sleeping problems, changes in appetite, physical problems, or illness. Social reactions can include feelings about taking care of others in the family, seeing family or friends, or returning to work. Spiritually, a person may question their faith in relation to why certain things happen. For some people, grief makes a person's spirituality stronger as their faith becomes more important as a source of strength and hope. The grief process depends on the relationship with the person who died, the situation surrounding the death, and the person's attachment to the person who died.

TYPES OF GRIEF

Anticipatory Grief

Anticipatory grief is the normal mourning that occurs when a patient or family is expecting a loss or death. It can include extreme concern for the dying person, preparing for the expected loss or death, and adjusting to changes caused by that loss or death. Anticipatory grief has many of the same symptoms as those experienced after a death has occurred such as sadness, anger, anxiety, lack of concentration, or depression.

Anticipatory grief may not always occur. When it does the family has more time to slowly get used to the reality of the loss. People are able to complete unfinished business with the dying person (for example, saying "good-bye," "I love you," or "I forgive you"). But it does not mean that before the death, a person feels the same kind of grief as the grief felt after a death. There is not a set amount of grief that a person will feel.

Complicated Grief

Complicated grief is identified by the extended length of time of the symptoms, the disruption to your daily life caused by the symptoms, or by the intensity of the symptoms (for example, intense suicidal thoughts or acts). Complicated or unresolved grief may appear as a complete absence of grief and mourning, an ongoing inability to experience normal grief reactions, delayed grief, conflicted grief, or chronic grief.

Unplanned Loss

Grief that follows an unplanned loss may overwhelm the coping abilities of a person, making normal functioning impossible. Mourners may not be able to realize the total impact of their loss. Even though the person recognizes that the loss occurred, he or she may not be able to accept the loss mentally and emotionally. Following an unexpected death, the mourner may feel that the world no longer has order and does not make sense. Spiritual or religious beliefs that were a comfort may be questioned at this point. "Why would God let this happen?" Questioning "why" is a normal part of this grief process.

PHASES OF GRIEF

Initial Phase

The initial phase of grief occurs during the first few hours or days following a new diagnosis, change in prognosis, major decline in functioning, or death. You may feel confused, disoriented and disorganized. You may feel overwhelmed and helpless. There may be decisions to make and often family and friends around you to provide support.

Middle Phase

Often times one cannot accept the reality of the loss or change. You may spend time thinking about life prior to the loss and become frustrated or disappointed when it is not possible to return to that life. You may also second-guess decisions you have made. Often family and friends will go back to their routine lives, which may cause feelings of anxiety, despair, and the deep pain of separation. This phase is painful and often lasts the longest. Feelings of deep sadness and loneliness are often present. You may find yourself thinking about “what-if” and “if-only”. As time passes, friends who were attentive at the initial loss may back away causing more pain.

Resolution Phase

You may feel that everyone around you has forgotten your loved one (they may have stopped talking about your loved one or they may have forgotten significant dates such as birthdays or anniversaries). This may cause feelings of frustration or anger on your part. Eventually, you will arrive at a place where you will recognize your life has been profoundly and permanently changed, and you are able to look positively at the future.

Grief is challenging, difficult at times, and can be exhausting. You will grieve in an individual and personal way. Some days you may feel that you are doing well, only to wake up the next morning and feel that you are starting the process from the start again. The goal of grief is not to get over it, but to learn to live with it and to find a way to include the loss in your living while keeping your loved one alive in memory.

TREATMENT OF GRIEF

Most of the support that people receive after a loss comes from friends and family. For people who experience difficulty in coping with their loss, grief counseling may be necessary and is available to you through Hospice of Jefferson County Bereavement Services in individual or group setting. Grief counseling helps mourners with normal grief reactions work through the tasks of grieving.

The goals of grief counseling include helping the bereaved to:

1. Accept the loss by helping him or her talk about the loss.
2. Identify and express feelings related to the loss (for example, anger, guilt, anxiety, helplessness, and sadness).
3. Live without the person who died and to make decisions alone.
4. Separate emotionally from the person who died and begin new relationships.
5. Access support and time to focus on grieving at important times such as birthdays, anniversaries and holidays.
6. Describe normal grieving and the differences in grieving among individuals.
7. Access continuous support.
8. Help understand his or her methods of coping.
9. Identify coping problems the bereaved may have and making recommendations for professional grief therapy.

Grief Counselors focus on the following tasks, to help mourners work through their grief:

1. Develop the ability to experience, express, and adjust to painful grief-related changes.
2. Find effective ways to cope with painful changes.
3. Establish a continuing relationship with the person who died.
4. Stay healthy and keep functioning.
5. Re-establish relationships and understand that others may have difficulty identifying with the grief they experience.
6. Develop a healthy image of oneself and the world.

Hospice understands that grief is a reaction to any type of loss. Grief can heal best when there is a good support system in place. We offer a variety of services, including individual and group counseling. We also work with the community to place referrals for long term counseling as needed.

What You Can Do

1. Take it one moment at a time, one hour at a time, and one day at a time.
2. Get enough sleep or at least enough rest.
3. If possible, postpone making major decisions, like selling your home or changing jobs.
4. Write a letter to your loved one telling him or her how you feel.
5. Write down your feelings or journal to mark your journey.
6. Start a new family tradition in your loved one's memory.
7. Honor the memory of your loved one by engaging in an activity or project he or she held dear.
8. Be patient with your grief. Don't let others hurry you through your grief or tell you how you should feel.
9. Seek out your most trusted friends or family for support when you need it.
Choose to spend time with those who comfort, sustain, and recharge you.
10. Take a break from your grief and do something fun. Try to keep your sense of humor.

CHILD/TEEN GRIEF

All members of the family are affected by death and loss, including children, who also need time and support to mourn. The age of the child and stage of development will affect how a child understands the loss and how they may express their grief. We have broken down the different age appropriate guidelines for you.

Children Ages 0-3

- Have no real understanding of death until 2 or 3
- Will certainly miss a parent or have a sense that things have emotionally changed in the home
- May show signs of irritability, changes in eating, crying, or bowel and bladder habits

Children Ages 3-5

- Begin to have a limited concept of death
- Don't understand death as being permanent
- Might conceive death as reversible and wonder when the person is coming back
- Are typically capable of showing sadness for only short periods of time
- May show regression, such as thumb sucking or incontinence
- May become more clingy and fearful and will have the need for security and assurance. It is important to keep a familiar structure or routine

Children Ages 6-8

- Can better understand that death is not temporary or reversible
- May have fears of death and associate it with mutilation or violence
- May have questions about specifics, like the biological process of death
- Need truthful information from the adults in their lives
- Will need reassurance that the death is not their fault
- May be concerned about who will take care of them if a parent or guardian dies
- May experience nightmares

Children Ages 9-12 (Pre-adolescents)

- Understand very well that death is final
- Need more reassurance that the death was not their fault
- May experience nightmares
- Can understand other consequences of death, like change in income or the need to move

- Have more concern for the death of a parent/guardian than their own death and are concerned about who will care for them
- May develop an attitude that jokes about death and makes fun of it to cover up his/her feelings
- May begin to have school related problems or have a decline in grades
- May have outbursts of anger or act out in socially inappropriate ways

Teenagers

- May show signs of anger or depression
- May find it difficult to express hurt and sadness because it may show they are weak
- May want to be in control and believe they can control their emotions
- May continue to make fun about death
- Often hide their feelings and may be less likely to talk with adults about their feelings
- Do not believe death will happen to them
- May think of life in terms of “before or after loss” when a death happened in their family or to a friend
- May grieve for what might have been
- May become involved with substance abuse or risky/dangerous behaviors
- May experience nightmares
- May have decline in grades

As children and teens experience their grief, they may wonder if what they are experiencing is “normal” . It is important for adults to listen to them, support them and let them know what they are feeling is “normal”. Children need clear, simple and honest answers to help them cope with loss and grief. Children can thrive when given information and support that is appropriate for their age and development. Encourage them to talk openly and ask questions. Ask children questions in order to figure out what they already know or believe.

Suggestions

- Be aware of the development level of the child and how this affects his/her reasoning and understanding. Too much information could confuse them and create anxiety.
- Tell the truth; honesty fosters trust and security. Involving children in the situation and letting them know what is happening can be very supportive and will lead them to cope better with bad news.
- You may believe that a small child has little understanding of the situation and is better off without information, but it is important to give simple and honest

explanations. By age 4, children can indicate whether they would like to attend the funeral or memorial service if they are prepared by adults with some idea of what to expect.

- Develop a plan to make sure the child's needs are met.
- Keep the child's daily routine as normal as possible. Children need reassurance, love, care, honesty, consistency and structure.
- Set aside time when you will not be interrupted.
- Let the child know what you have plenty of time to listen.
- Acknowledge the child's loss and grief. The worst thing you can say is nothing.
- Be honest about your own tears and sadness. You are modeling for them appropriate grief. By displaying your emotions, you are validating theirs.
- Books and storytelling help children understand the different way a story may end. Books specific to death and dying are helpful.
- Art helps children express themselves. Children can draw a picture of the funeral or the family and how it has changed or how they are feeling now. Making a collage, or scrapbook with pictures of their loved one along with other things that remind them of their loved one.
- Music and using puppets can help with telling the story, and are particularly useful with younger children.
- Expression of their feelings will come and go depending on many things, including age and attention span.
- Normalize and validate a child's grief response. Normalize how hard grief is.

Pay particular attention to:

- Apathy and withdrawal from family or friends
- Indications of alcohol or drug abuse
- Significant drop in school performance
- Preoccupation with or idealizing violence of death
- Unusually good behavior and a relentless need to please
- Any verbalization of suicidal thought