

## The Human Experience of Grief

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First in a Series of Three Articles

Grief is a natural part of life. Most people associate grief with the death of a loved one. However grief can be experienced following other types of losses that have great meaning to the person. Miscarriages, abortion, loss of a job, diagnosis of a serious illness, loss of self-esteem, loss of one's home, loss of freedom, are only a few examples of major losses.

Although grief is universal, it is also very personal. There is no one right way to grieve. Some authors have described the grieving process occurring in stages, phases or cycles. Typically the initial response to a major loss is one of shock or disbelief, even if the loss is expected. With unexpected losses such as a fire destroying one's home, or the diagnosis of a serious illness, shock may last longer. Shock has a greater intensity when the loss is due to suicide or homicide, or an accident that seriously injures or kills a loved one. These types of losses are harder to grieve. When a relationship has been strained or there are a lot of issues that have not been resolved, grief can also be more difficult and more complicated. Grief is not only related to the loss of that person but also the loss of hope that the relationship could become better over time.

As the shock wears off, grief is intensely experienced, frequently occurring in what is often described as periodic waves. For example, someone may be in the grocery store, and suddenly begins to cry when he/she sees a loved ones favorite cereal or is riding in the car and hears the person's favorite music. The distress that often accompanies

grief can be physical, emotional, cognitive, or behavioral. Some of the physical complaints that people have shared include tightness in the chest and throat, hollowness in the stomach, feeling short of breath, dry mouth, fatigue or lack of energy, and problems with appetite or sleep. The feelings that are commonly experienced include sadness, anger, guilt, anxiety, loneliness, helplessness, yearning for what is lost and/or relief. Cognitive changes may include difficulty concentrating, easily distracted, having a hard time focusing, and a preoccupation with the loss. People have even reported feeling the presence of the person.

Usually grief is experienced as a back and forth process. At times the individual feels the pain of the loss and at other times needs to seek relief by concentrating on other things. Otherwise one could not cope with the day to day demands of living.

Grief is not something that one gets over - rather it becomes part of one's life history. Under normal circumstances, there is a gradual decline of grief, and the loss is put in a special place. One is now able to reinvest energy in new persons, ideas or things. It is not uncommon that a person will revisit the loss on anniversaries or other major life events such as holidays, graduations, weddings, and the birth of a child. However, in time, grief no longer has the sharpness, sting and intensity that was experienced initially. It is felt more like a wound that now has a scar. There is no one time frame that is considered "normal." Many factors influence how long grieving lasts.

There are a number of things

that people can do to help cope with grief. It is a time when one needs to take special care of their physical and emotional well being. Special attention needs to be paid to getting enough rest, eating a well balanced diet and getting exercise. Some people find it helpful to talk with a friend or counselor, or a support group. Keeping a journal, listening to soft music, and praying may be helpful. Others are more private and keep their feelings to themselves. They need to know who to turn to if their cope strategies interfere with their ability to function or if they use alcohol or other substances to mask their feelings.

Some people experience what is referred to as disenfranchised grief. This type of grief occurs when someone is not able to have their loss recognized, validated, or when one's life circumstances or societal views makes it difficult for someone to openly share their grief or receive the necessary support in their grieving process. Examples may include abortion, death of a secret lover, AIDS, placing a child for adoption, infertility, divorce, rape, incest, mental illness, and torture. In instances of disenfranchised grief, grieving may be more complicated and difficult to address.

It is very important to know when to seek help. When sleep is disturbed for long periods of time, one's ability to cope with the loss, life and the stressors of everyday life can become very difficult. This may be a time to see your doctor, nurse practitioner, or a mental health professional to discuss options to help you to sleep better. Sometimes the

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anxiety that accompanies grief can interfere with one's level of functioning and ability to concentrate. This is another time when seeking the help of a professional is very important. Grief and depression have some similarities. Sometimes grief can lead to

depression. The major things to look for include difficulty concentrating, inability to have any pleasure in life, prolonged problems with sleep, intense anxiety, hopelessness, and suicidal thoughts. It is critical to address these difficulties as early as possible. The longer someone waits

to be treated, the harder it may be.

The goal for all of us is to acknowledge our loss and our grief, have our grief validated, and in time reinvest in life with all its joys and sorrows.

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**TIME**

Time carries all of her sons and daughters away; some soon, some swift, some slow. In a sense each of us is similar to a leaf on a tree – the tree of life. While we yet live, we should add to the beauty, texture, and substance of that tree. But when we, as others before us, have fallen to the earth, may it be our testimony that the world was made more beautiful, more peaceful, more loving, because of what we added to the Tree called Life.

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