



Losing someone you care about

Personal bereavement & grief

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Introduction

We are very sorry that someone close to you has died.

You might be feeling a lot of different emotions, or be feeling numb and disconnected.

There is no right or wrong way to be thinking or feeling at the moment.

Everyone experiences death and grief in very different ways and this guide provides some information on the range of responses later.

There are some specific challenges to being bereaved and working in healthcare in the current context that we want to support you with and these are addressed first...

Challenges in a time of pandemic

The changes that have taken place in response to the COVID-19 pandemic are having an impact on the way that people experience grief, and the practical processes that take place following a death.

You may not have been able to be with the person who died when they were unwell and/or when they died, due to current visiting restrictions.

You may be having difficulties making funeral arrangements, including needing to delay the funeral proceedings if you are self-isolating, or not attending the service altogether.

You may experience increased feelings of isolation during the grieving process, if you live alone and/or are self-isolating, and cannot easily access your usual sources of support, such as friends or family.



In addition, as a member of staff in the NHS, you may find that this also influences your grieving process. Some of the additional challenges you may be facing as a result of the pandemic *and* as an NHS worker are:

...feeling that you should return to work sooner than you might otherwise, because of the pressures you are aware the NHS is currently under and that you “ought” to be on the “frontline” or supporting those that are.

- It is important to take the leave from work that you need to without guilt. We value your work and will welcome you back when you are ready to return, but no one need feel under pressure to work whilst feeling distressed.

...persistent reminders of COVID-19, death and dying in the news and on social media as well as in your work.

- Try to constrain your engagement with media to specific times in the day, and not look at them after an evening cut-off time.
- Discuss with your line-manager any short-to-medium term modifications to your duties that might lessen your direct exposure to death and dying in your work. It is reasonable to ask for this and does not mean that you are “not coping”.

...intense worry about your safety and that of your colleagues working in high-risk environments.

- It is perfectly normal and understandable to feel anxious about risk during a pandemic, and it is perfectly normal and understandable to have a heightened awareness of physical vulnerability after the death of someone close to us. Experiencing both at the same time may make that anxiety feel less manageable. If you are struggling with this, please view the back of this guide to learn what support is available to help you. This can also be found on the ‘Wellbeing page’ of Connect.



How you might be feeling

The grief you experience in response to the death of someone close to you might involve acute pain when you remember the past with them, wish they were here with you in the present, and imagine the things they will not be with you for in the future. Perhaps, if your relationship to them was not always as you would have wished, you might also be grieving the loss of a chance to have the relationship to them that you had hoped for.

Everyone experiences different emotions whilst grieving; these are some of the most commonly reported:

- **Intense sadness.** This does not always involve crying, and if you feel that you are unable to cry despite feeling intensely sad, this is not unusual. You might also find that you cry at times when you are not expecting to or in response to things that do not seem directly related to your loss. This feeling can extend to not wanting to wake up in the morning, feeling it will be impossible to go on or that life is not worth living anymore. While these thoughts are common during the grieving process, if you are having thoughts about actively wanting to end your life or you are concerned about whether you can keep yourself safe, then there is a list of services that can quickly and effectively support you at the back of this booklet.
- **Numbness.** There may be periods of time when you feel nothing at all, or feel very cut-off from yourself, from others and from day-to-day concerns. People often describe feeling like the death is “not real” or a sense that the person who died may appear at any moment. This may be especially the case if the death was sudden, unexpected or you did not see them when they were dying or after they had died. If you experience numbness or feelings of emptiness, you might then feel worried or guilty that you are not feeling sad; it is a very normal and common experience for people who are grieving as your mind tries to adjust to a new reality without the person who died whilst protecting you from being overwhelmed by the full implications of that.



If you find that you feel detached from the world around you for sustained periods of time and you are concerned that you can get “stuck” in a space that feels disconnected from others, then there is a list of services that can quickly and effectively support you at the back of this booklet.

- **Anxiety.** You might be feeling worried, anxious or fearful for many reasons after the death of someone close to you. Particularly in the current circumstances, you may be feeling worried about how best to organise a funeral or do any of the administrative tasks that need to be completed after a death. Depending on the circumstances around their death, you might be waiting for post-mortem results, which can bring with it high levels of anxiety. People sometimes “see” or “hear” the person that has died when they are going about their everyday lives. While some people find this comforting, others can feel unsettled or frightened by it. This does not mean you are going “mad” as these are not unusual experiences to have following a death and are all part of your mind processing what has happened.
- **Anger.** It is very common and understandable to feel angry about the death of someone close to you. This can be directed towards the person who has died for leaving you behind; for doing, or *not* doing things that might have led to a different outcome for them or you. Depending on the circumstances around their death, you might also feel angry with other people, if you feel that they or you were let down in some way. You may experience intense anger towards strangers who appear to be carrying on as normal in a world that seems completely different: people who don’t seem to be taking the guidance during the pandemic seriously, for example. You may find that you get intensely angry about seemingly insignificant or unrelated things. These feelings are very common but if you are worried about how they might be affecting your behaviour – if you are becoming aggressive to others, for example - there is a list of services that can quickly and effectively support you at the back of this booklet.



- **Regret, guilt and shame.** It is common to feel that perhaps we could have done more prior to someone's death and to go over whether it might have turned out differently if we had made different decisions. NHS workers may be particularly susceptible to these feelings as they may feel that they should be able to navigate such decisions with more expertise and/or that saving lives and making people better is "what they do". It may also be that you feel that you "should" have invested more in the relationship prior to their death, particularly if the pandemic has meant that you have been work-focused and have had less time to dedicate to friends and family. Try to bring self-compassion to these thoughts and be kind to yourself; you have been doing your best in very challenging circumstances.
- **Conflicted feelings.** Some people feel relief after the death of someone close to them and this can in turn lead to feelings of guilt or shame. This may be because the person who died was very unwell or in a lot of pain before their death or because their quality of life would have been intolerably poor had they continued to live. It can also come up when you have been under sustained stress prior to their death. If you had a difficult relationship to the person that has died- for instance, if they were unkind or even abusive towards you, this might also trigger very conflicted feelings about their death. It is completely understandable to feel this way, as human relationships are complex and will invite a range of emotional responses.



The grieving process

Here are a few myths that you may have heard about the grieving process and how it progresses over time, along with the realities that many people face:

Myth: “Grieving takes place in clear stages, and once you have passed through one stage you do not go back to it.”

Reality: People move back and forth between feeling that they are coping well and not coping at all during the days, weeks, months and years following the death of someone close to them. There is no “one right way” to feel, and no “one shared path” that people take when they are bereaved.

Myth: “There is an acceptable period of time to be grieving for, after which point you should not, or will not, feel upset by the death.”

Reality: Everyone has a very different timeline for grief. It is not unusual for things to take longer than people expect to feel less distressing. Try not to be impatient with yourself to be “back to normal”. Equally there is no rule that says you have to be acutely upset for a long period of time; this does not say anything about you as a person or the depth of your attachment to the person who has died.

Myth: “Grief has an endpoint.”

Reality: Grief changes over time, but it is unlikely that you will get to ‘a point’ where you feel that your grieving has finished. However, as our lives continue on, we often find that a bit of space opens up around the grief and it is not always as all-consuming as it feels at first.



People often find that they are either in a mode where they are focusing on their loss and doing things that bring up the feelings of sadness and pain, or they are distracted from their grief for a period of time (this could be minutes, hours, or days) by activities that are focused on restoring everyday life.

You might find that you spend much more time in one mode of grief than the other.

Immediately after the death, it might be that you spend most of your time in that loss-oriented mode, and very little of your time is spent on everyday activities. This will change over time, but **there is no prescribed timeframe for how this happens** and it might not move in the same direction across time.

Both modes are important in the process of grieving, as we need to have time to process our emotional response and mourn for the person we have lost, but we also need to be able to attend to the lives that continue on for us.

Things to avoid doing

People cope with grief in many different ways, and although all of these coping strategies are all equally valid, some will be less helpful to us in the short and/or long-term. These are some ways of coping that are generally best to avoid:

- Drinking alcohol or using substances to numb difficult or painful thoughts and feelings.
- Making significant decisions or changes to your life, in areas such as work or your living situation, if these can wait. People often find that they need some time to reorient to their circumstances now and can regret decisions that were made in haste.

Continued overleaf



- Consistently “bottling up” or avoiding your emotions in response to the bereavement. It might be that you need to use some distraction strategies to give yourself a break from overwhelming feelings, but doing this all of the time will be exhausting for you and will unfortunately not take away the feelings. In fact they may then “leak out” at times you would rather they didn’t (e.g. at work) or when you are not prepared to experience them.
- Cutting off contact with family and friends. Social contact may feel exhausting and you may feel like you are “in a bubble” where it is very hard to relate to the everyday concerns of the rest of the world and that they in turn, do not “get it”. However, being alone cuts you off from any support that they might be able to offer you, and this can increase feelings of sadness and loneliness. You may feel hurt or angered by the response of those around you who may say insensitive things or avoid you. Family conflict is not uncommon during a time when everyone’s emotions are high. Whilst withdrawing from people temporarily is very normal during grief, be wary of isolating yourself completely or reactively breaking off relationships with people who have been important to you until now.

How to look after yourself

We would encourage you to prioritise self-care during this difficult time. Below are some things you might like to think about in terms of looking after yourself.

- Sleep
- Eating
- Exercise
- Social contact
- Self-compassion; being kind to yourself



The focus of this guide is on helping you understand how you may be feeling during this time, but there are other guides that can help you to prioritise self-care. All of these can be found on the Wellbeing page of Connect; or by contacting wellbeing@uhbw.nhs.uk



Seeking support

If you are having any thoughts of harming yourself, you can free-phone 24/7 either of the services below for support:

- NHS [111](https://111.nhs.uk/): just dial 111.
- Samaritans: phone 116 123 (no area code is required), or you can email jo@samaritans.org (NB: unlike phone, email response may take 24 hrs).

24/7 therapeutic support is available to every member of staff.

If you are based at Bristol, call **0800 174319** for counselling, support, advice and guidance from Care first.

If you are based at Weston, call **0800 1116387** for counselling, support, advice and guidance from Workplace Wellness.

Occupational Health

If based at Bristol, Avon Partnership Occupational Health Service offer a free confidential onsite counselling service. To talk to an advisor or make an appointment, telephone Occupational Health on **0117 342 3400**.

Spiritual, pastoral and bereavement care

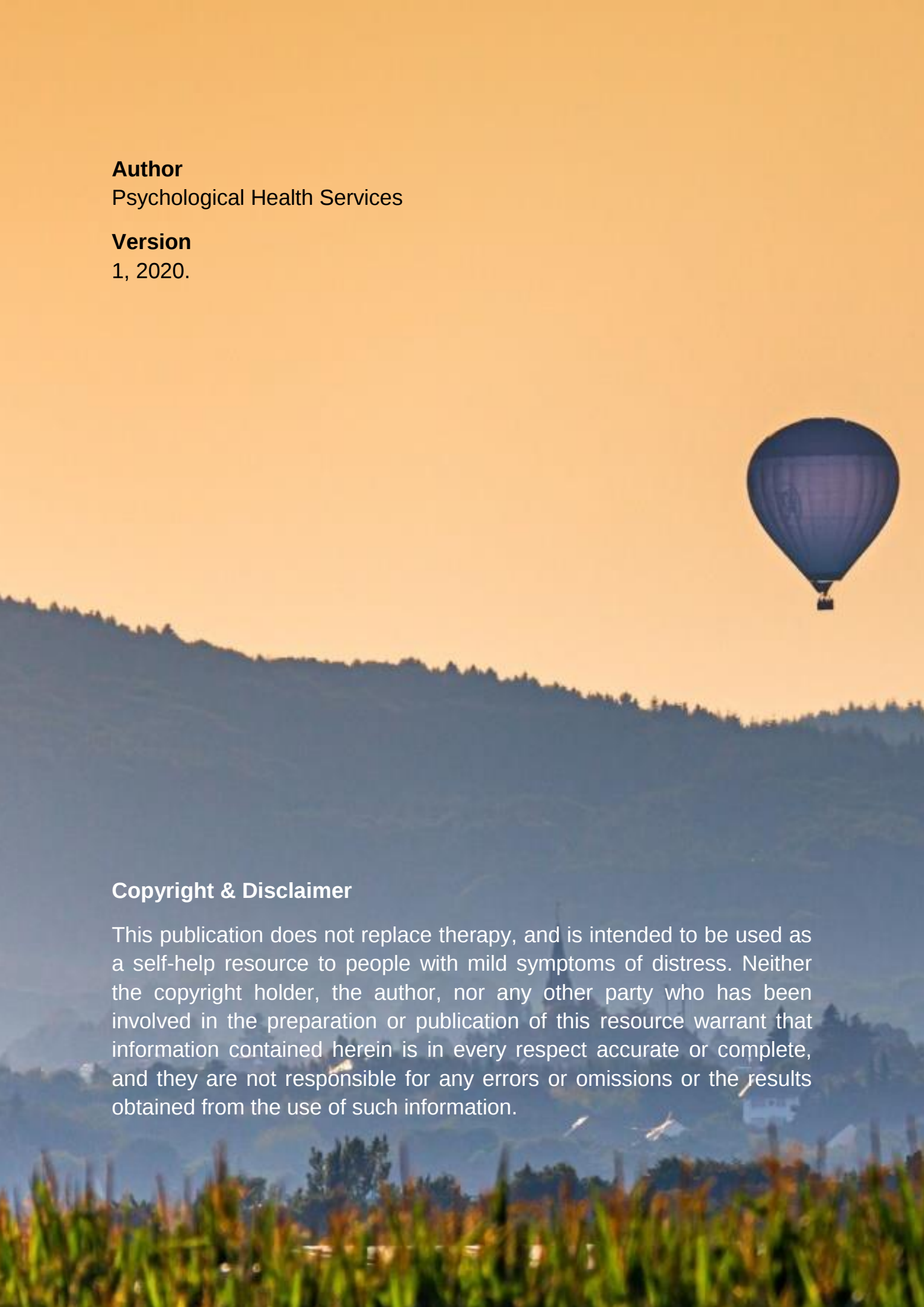
The Healthcare Chaplaincy team provide spiritual care that is equal, just, humane and respectful to staff, patients and their visitors; irrespective of their faith or spiritual tradition.

For further information about the services they provide contact Chaplaincy@UHBristol.nhs.uk

NHS bereavement and loss support line (07:00-23:00)

0300 3034434.



A blue hot air balloon is floating in the sky against a warm, orange-hued sunset background. Below the balloon, a range of mountains is visible, with a small town or village nestled in the valley. The foreground shows some green foliage, possibly corn plants.

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