When Grief is New

A guide for families and friends
Dear family and friends,

You most likely have received this Bereavement Guide soon after your loved one died. Even though they may have been ill for some time, it is impossible to predict how you will feel in the days and months ahead. You may experience a range of emotions that come and go – and even change – over time. You may feel sad, relieved, or overwhelmed. Some people experience guilt, anger, or regret, while others may feel numb.

One thing we do know is that there is no “right” way to grieve. Grief is a very individual process because it is influenced by many factors, including your personality, the relationship you shared with your loved one, the course of their illness, and the way you tend to meet other challenges in your life.

Understanding what you are experiencing is an important first step in coming to terms with the death of a loved one. This guide provides some general information about grief and explains what you might experience in the first few weeks and months. It also gives you practical advice about handling your loved one’s personal affairs.

You may find it helpful to keep this guide handy and use the blank pages at the back to write any notes or reminders to yourself. Finally, be patient with yourself. Dealing with grief can be overwhelming, especially when it is new.

Sincerely,

Sue Morris, PsyD
Director of Bereavement Services
Dana-Farber/Brigham and Women’s Cancer Center

Part 1: What to expect in the first few months

Most of us will lose a loved one and experience grief at some point in our lives. While grief can at times feel intensely painful and isolating, it is important to understand that grief is a normal response to loss – and it eases over time. Even though right now this might sound impossible, most people who have experienced the death of a loved one will tell you that they eventually learned to live without their loved one and adjusted to them not being physically present any more.

Understanding what you are experiencing can help you get through the next few months more easily. Often, people don’t realize that grief is far more complex than they think, because it is made up of many losses that result in change. Adapting to change takes time, and the effort to try new things can be both physically and emotionally exhausting.
Physical and emotional reactions

In the beginning, it is likely that you will experience some of the physical and emotional reactions listed on the next page. How long these feelings last will vary from person to person. Even though some reactions will ease in the first few weeks, it is not uncommon for others to linger for several months. It can be helpful to think of grief as something that follows a wave-like pattern with ups and downs. Over time, the strength of the waves decreases. Occasionally, there will be large waves that appear to come out of nowhere. These “trigger waves” are often stimulated by an event, such as seeing someone who reminds you of your loved one, or hearing a special song on the radio. Or, someone may ask a question that catches you off guard. Other “trigger waves” you can anticipate include an anniversary, your loved one’s birthday, or special family events. While you may not always be able to identify the trigger, it’s important to remember that trigger waves are a normal part of grief.

Knowing that your grief follows a wave-like pattern may help you understand why you have good and bad days. If you expect your grief to follow this pattern, you won’t be shocked or think that you are getting worse when you have a bad day.

Physical reactions

• crying or sobbing
• difficulty sleeping
• nausea
• loss of appetite
• restlessness
• agitation
• panic
• fear
• numbness
• headache
• muscle tension
• heart palpitations
• upset stomach

Emotional reactions

• anger
• confusion
• disbelief
• emptiness
• guilt
• intense sadness
• regret
• relief
• shock
• worry
• yearning or pining

Automatic pilot

In the first few weeks, you most likely will be busy with family and friends calling or visiting to express their condolences. Organizing a funeral or memorial service and making arrangements can be overwhelming, and you may find that the days tend to blur into one. During this time, people often describe feeling as though they are on automatic pilot, where they are just going through the motions. You might feel nervous or on edge and be aware that your thoughts are racing, especially at night, when you are trying to sleep. You might have difficulty remembering who telephoned or stopped by to visit you.

Grief is defined as
“anguish experienced after significant loss, usually the death of a beloved person.”

These are all normal responses when you are grieving, as your mind and body attempt to take in the reality of your loved one’s death.

“The overwhelming feeling I had soon after he died was that I was in a thick fog that seemed as though it would never lift.”

Gayle, age 32

After the funeral

The weeks following the funeral (or other events to honor your loved one) are often difficult as your family and friends visit or call less often. Four to six weeks after the death can be particularly challenging, because the realization that your life has changed begins to set in. Your sense of being on automatic pilot will fade and it’s not uncommon to feel as though you are getting worse.

You may be more tearful or find yourself going over and over the events leading up to your loved one’s death. You might find yourself saying “This time last month we were . . .” or “This time last year we did . . .” These thoughts and feelings are normal. They are part of how we process the death of someone we love.

Loss and change

Throughout the next few months, be patient with your progress. With the death of your loved one come many changes, small and large, which will require you to do new things. Working out what tasks need to be done and how to do them can be daunting. The next section of this guide provides some tips on where to start.

“After she died, I made the funeral arrangements and finalized her affairs. My friends thought I was coping very well. Now, I feel heartbroken. In the beginning, I didn't feel anything – I just did what I needed to do. Now, I feel everything. I am angry – angry with God for taking her from me, and angry with the doctors because they could not cure her. I can't stop crying and wonder how I will manage without her.”

Bob, age 74

Tip: Remember, grief follows a wave-like pattern that eases over time.

Part 2: What strategies can help

Even though no one can take away your pain, there are things you can do to feel a little more in control of your grief. These include: establishing a routine, creating a to-do list, and giving yourself permission to grieve.

1. Establish a routine.

Try to create a simple daily routine. Start by trying to get out of bed at the same time each day, take a shower, and have breakfast. These three steps will help you get on track for the day. You can add things to your routine as you go. Eating regularly throughout the day is important, even if you have little appetite. Try to include some simple exercise, especially outdoors. As the weeks go on, attempt to do one or two things from your to-do list each day.

The advantage of a routine is that it provides structure to your day. It’s important, however, to understand that when grief is new, you probably won’t feel like doing much at all. The challenge is to
3. Give yourself permission to grieve.

It's important to give yourself permission to grieve— which means being patient with yourself and understanding that grief is far more complex than most people think, because it is made up of many different losses. When someone you love dies, not only do you lose that person, but you lose the many other roles they played in your life. For example, you may also lose your best friend, your mentor, or the person who did the odd jobs around the house. Similarly, if you were involved in the care of your loved one, you may also miss the contact you had with their health care team.

Unfortunately, we live in a fast-paced world and often expect things to happen immediately. It's easy to think that grief will be quick, whereas, on the contrary, grief cannot be hurried. When someone you love dies, healthy grieving involves giving yourself the time and space you need to get used to them not being here anymore.

"After my husband died, my friends and family were wonderful. They visited me often and my son helped me make the arrangements and sort our affairs. About two months later, I remember waking up feeling tremendously sad as it hit me that my husband was never coming back and I was going to have to do things differently now."

Alice, age 68
Tips for getting through the first few months

• Create a simple routine.
• Try to get out of bed at the same time each day.
• Always eat breakfast.
• Try to eat regularly throughout the day, even if you don’t feel like it.
• Plan to do something each day.
• Walk wherever you can.
• Exercise regularly.
• Avoid excessive alcohol use.
• If you are working, inform your supervisor and/or the Human Resources department, and inquire about the options for taking time off.
• Check in with your doctor.
• Arrange to meet with someone from your spiritual or religious group.
• Accept invitations from friends and family whose company you usually enjoy.
• Make an appointment to see a counselor if you feel overwhelmed or have little support.
• Remind yourself that grief will not be over in an instant – there is no magic cure.
• Write a daily to-do list and check off each item as you complete it.
• Use different colored folders to help organize your loved one’s affairs.

Part 3: Frequently asked questions

Here are some questions often asked by family members soon after the death of a loved one. The answers might help guide you.

1. What should I do with all the medications?

There are different guidelines for disposing of medications, depending on what type they are. If you have been involved with a hospice, your nurse will advise you. You can also check in with your local police station. Otherwise, the Food and Drug Administration has a list of recommendations on its website. Visit www.fda.gov and enter “dispose of medicines” in the search box. You can also call 1-888-INFO-FDA (1-888-463-6332) to learn more.

2. How do I obtain a death certificate?

You can get a copy of the death certificate from the funeral home. It’s a good idea to request several certified copies so you have them when finalizing affairs. Later, you can also obtain copies from your city or town hall.

3. My family wants to sort through my loved one’s property immediately, but I’m not ready. What should I do?

Deciding when to sort through a loved one’s belongings is a very personal decision – there is no correct approach. Often, family members want to do this quickly, because they fear that the sight of these things will be a constant reminder and make everyone feel worse. Contrary to this belief, most bereaved people are comforted by having their loved one’s belongings nearby and, in time, will sort through them. Being able to do this also gives you the opportunity to reminisce, to say goodbye and decide what things you would like to keep. Let your family know that you want to sort through things at your own pace.
4. I can’t stop crying. Is this normal?

Everyone reacts to the death of a loved one in their own way. How much you cry probably has a lot to do with the type of person you are – some people cry more easily than others. It is, however, very typical to weep a lot in the first few weeks. You may feel as though you have little control over your emotions and become embarrassed when you shed tears. Try to remind yourself that, in time, you will cry less and there is no reason to be embarrassed. Weeping is actually good for you, because your body releases stress-induced chemicals. So, the next time you feel like crying, tell yourself it’s okay, and try not to fight it.

5. What if I’m not able to cope with this loss?

This is a normal fear that many people have after the death of a loved one. Often, people find it helps to express this thought to a trusted friend or counselor.

For others, beginning to organize what needs to be done helps build their sense of control. It’s a good idea to see a doctor and explain what’s happened and how you are feeling. Check in every few weeks, as people who are grieving are more prone to medical problems.

6. I have questions about the events of the last few days before my loved one died. Whom can I ask?

Many people have questions about their loved one’s death and the decisions that were made just prior to their death. Sometimes people are unsure as to whether or not they did the right thing and whether their loved one was comfortable at the end. It’s important to try to have your questions answered by the professionals involved. Otherwise, not knowing can negatively affect how you grieve. The following suggestions may help you make a plan to have your questions answered:

- Write down the questions you have about the death of your loved one.
- Whom can you contact to answer these questions?
- Make an appointment to see them and explain why you are coming so that they have time to prepare.
- Is there any literature you can read that might help you answer your questions?

7. I am really struggling with what this all means. Whom can I speak with?

It is not uncommon to question the meaning of life and our purpose in the world when someone we love dies. Seeking spiritual and emotional support can help you make sense of the issues that trouble you. You might talk with your local minister, priest, rabbi, hospital chaplain, spiritual counselor, psychologist, psychiatrist, or social worker. For information about counseling, contact your local hospice or call us at 617-632-2490.

8. I feel as though I want to die too. Is this normal?

Having thoughts about dying can be a normal reaction after the death of a loved one. Some people say they think about dying themselves as an expression of how sad and grief-stricken they feel, but clearly state they would never take such action. If, however, you find yourself actually making a plan or seriously thinking about suicide, seek help immediately. These thoughts are very serious and require immediate medical assistance. Don’t sit alone with such thoughts and feelings. Call your doctor or go straight to the emergency room, so that recommendations can be made about your care during this difficult period.
9. Am I going crazy?
Many people wonder if they are going crazy in the early weeks and months of grief, because life can feel very overwhelming and out of control. Not only are routines disrupted and emotions raw, but there are many tasks to be completed. Tell yourself that these feelings are normal and expected. Take things slowly. Make a list of what needs to be done. The feeling of “going crazy” will gradually lessen as your sense of control increases.
If, however, you feel that things aren’t getting easier, ask your doctor for a referral to a grief counselor or psychologist.

10. Our relationship was difficult. I feel tremendous guilt that we did not resolve our problems before she died. What should I do?
No relationship is without conflict. Grieving the loss of a difficult relationship is just as important as grieving the loss of a happy one – especially when guilt is involved, as it can easily become a barrier to healthy grieving. Speak to someone you trust or ask your doctor for a referral to a grief counselor who can help you find a way to accept your relationship with your loved one.

11. What should I tell the children in my family?
You can tell children the truth in simple language that they will understand, depending on their ages. Encourage them to ask questions and, if you don’t know the answers, say so. When talking about death, explain the physical facts in accurate terms, and avoid euphemisms such as “they passed away” because these can be confusing to children.
Reassure kids it is okay to be sad and to cry, and tell them adults are sad, too. Give them an opportunity to say goodbye to their loved one and include them in the funeral or other memorial events, if they want to attend. If your child is a teenager, be prepared that they may not want to appear different to their friends and may not openly discuss the death of their loved one because they feel embarrassed or uncomfortable.

“After their mother died, the kids and I decided that every Thursday we would go out to a favorite restaurant and check in with one another to see how we were doing. We don’t do it as often now, but it certainly helped in the first few months.”
David, age 44

Tips for talking with children and teenagers about grief

- Tell children the truth about the death in terms that they can understand.
- Avoid euphemisms that can cause confusion, such as “passed away” or “gone to sleep.”
- Explain the physical facts of death, using accurate terms.
- Encourage children and teens to ask questions.
- Answer their questions honestly.
- Tell them it’s okay to be sad and to cry.
- Include children and teenagers in the funeral or memorial arrangements.
- Keep children and teenagers informed about what is happening.
- Encourage them to say goodbye to their loved one.
- Encourage them to write a letter or card to their loved one and place in the coffin, if possible.
- Teenagers may only want to participate in the family discussions or preparations from afar.
- Find a bereavement support group or grief camp for children and teenagers with peers who have experienced similar losses.
12. Some of my friends seem uncomfortable around me and don’t even mention my husband’s name. What should I do?

Many bereaved people are upset or angered by things their friends or families do or don’t do following the death of a loved one. Such feelings can lead to an increased sense of isolation which, in turn, can make grieving more difficult. The best advice is to speak up because often other people don’t know what to say or do. Plan what you’d like to say to your friends – let them know that it helps you to be able to speak openly about your husband and to refer to him by name.

13. Whom should I notify about the death?

Here is a general checklist of people or organizations to notify about your loved one’s death.

- Funeral home
- Place of employment
- Social Security Administration
- Banks and other financial institutions
- Insurance agencies
- Community or volunteer groups your loved one participated in
- Registry of motor vehicles, regarding driver’s license and automobile registration

Part 4: Getting through the first year

In the months after the death, your grief will most likely continue to follow a wave-like, up-and-down pattern, while you adjust to a new life. Hopefully, as the year goes on, you will find that your pain eases, even though there will always be triggers that re-ignite it. As strange as it sounds, the process of grieving is actually good for you, because it provides you with the time and space you need to get used to your loved one being gone.

Healthy grieving requires that you have realistic expectations about grief. It is unrealistic to expect that you will “get over” the death of your loved one in a matter of weeks or months.

Tips: Realistic beliefs about grief and bereaved people

- Grief cannot be hurried.
- Grief is unique.
- Grief is a normal response to loss – it is not a sign of weakness.
- Grief follows a wave-like, up-and-down pattern.
- Grief is not an illness with a prescribed cure.
- There is no quick fix.
- It is normal to feel very sad when someone you love dies.
- It is normal to yearn or long to see them again.
- If you loved someone deeply, you cannot expect that grieving will be over in an instant.
- Until you’ve passed the first anniversary of the death, many triggers of your grief will probably remain unknown.
- Children can benefit from learning that grief is a normal reaction to loss.
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The following strategies may help you feel more in control as the months pass.

1. Set aside time to grieve.

In the months following your loved one’s death, it’s important to carve time out in your schedule to allow yourself to grieve. Otherwise, your busy life can push grief into the background. Even though you may balk at this suggestion, scheduling grief time can help you feel more in control and less overwhelmed. A good idea is to start with 20-30 minutes every day or every other day, when you can stop what you are doing and think about your loved one. Use a journal or notebook to make notes. Plan a time of day when you are unlikely to be interrupted.

“For nearly a year after my mother died, I still went to pick up the phone to call her – which unsettled me for some time.”

Kathryn, age 35

Some suggestions you may find helpful include:

• Sit quietly and think about your loved one.
• Write them a letter.
• Talk to them as though they were sitting next to you.
• Write about the events surrounding their death.
• Write about the things you didn’t have a chance to say.
• List the things you miss about them.
• Play music that reminds you of them.
• Look through photos of them.
• Add to your to-do list.
• Make a memory book.
• Spend time outdoors.
• Do something creative in their memory.
• Seek professional help, such as counseling or spiritual support.

2. Overcome barriers that may prevent you from grieving.

Common barriers to healthy grieving include:

• Distressing feelings
• Unanswered questions
• Unresolved differences or conflict
• Avoiding certain places or people
• Having difficulty making decisions

If you are unable to face a certain situation, the first step is to make a plan. Work out what you need to do and who can best help you achieve your goal. Often, people need the support of a grief counselor or psychologist to tackle the common barriers of healthy grieving. Talk with your doctor or call your local hospice or hospital for information about counseling or support groups.

“After she died, I felt really guilty that I had not done enough to save her. The “what-ifs” and “if only’s” haunted me. My doctor referred me to a psychologist who was able to help me work through these questions and eventually come to terms with her death.”

Charlie, age 70
3. Maintain a connection with your loved one.

When grief is new, there is often a struggle between wanting your life to be the way it used to be, and wondering how you will begin to build a new life. This struggle is a normal part of grief, and finding a new path takes time and lots of trial and error.

People often fear that they will forget their loved one, so it is important from very early on to think about developing and maintaining a new relationship or connection with them – a connection that is now based on memory and legacy. Answering the following questions may help you do this:

• What did you learn from your loved one?
• Who were they to you?
• What values did they teach you?
• What did they love about life?
• What history did you share?
• What was their story?
• How would they like to be remembered?
• If they were here now, what would they say to you?

“Just before my daughter Kate died of breast cancer at age 31, I promised I would keep her memory alive for her daughter’s sake, who was only a baby at the time. I contacted Kate’s friends – from elementary school through college – and asked them to write something about Kate and what she had meant to them. I wrote my own memories too and then compiled the stories with photos into a lovely book for her daughter.”

Joan, age 62

Tips: Ways to maintain a connection

• Make a DVD compilation of home movies.
• Make a playlist of their favorite music.
• Celebrate your loved one’s birthday each year.
• Make a special coffee-table picture book of your favorite photos using an online application.
• Invite others via email to contribute stories and compile them in a book.
• Walk or run in their memory as part of a fundraiser.
• Plant a tree in memory of your loved one.
• Support a cause that holds meaning.

4. Plan to deal with the “firsts.”

There will be many “firsts” to mark as the year passes, including birthdays, anniversaries, and other significant dates. You may have already experienced a few. Some you can anticipate or predict, because you’ll know when they are approaching. Others, such as hearing a special song on the radio or seeing someone who reminds you of the person you lost, can come out of the blue. These firsts are often harder to deal with, because you can’t predict when they will occur. But acknowledging that they are a normal part of grief can help you understand why you feel the way you do. It may help to tell yourself the following: “It is perfectly normal to feel this way, because this ‘first’ has reminded me again of how much I miss my loved one. It’s a normal part of the wave-like pattern of grief.”

The best strategy for dealing with predictable firsts is to make a plan. Identify which firsts are approaching, and when, and develop a plan.
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6. Seek support.

Even though grief is a solitary experience, you don't need to go without support. Support can come in many different forms, including:

- help from family and friends
- religious or spiritual support
- self-help books
- online information
- support groups
- consultations with your primary care physician
- grief counseling
- community groups

It's important to seek professional help if you find yourself:

- feeling increasingly depressed
- feeling hopeless about your future
- thinking about suicide
- withdrawing from family and friends
- losing weight
- experiencing marked sleep disturbance
- feeling panicky, anxious, or agitated
- having great difficulty carrying out your everyday tasks
- experiencing little or no enjoyment in activities
- feeling as though you have been “stuck” for some time

If you experience any of these symptoms consistently for more than a week or two, or if you feel as though you are getting worse, seek help from a doctor, grief counselor, social worker, or psychologist immediately.

Over the next few months, it's important to remind yourself that moving forward doesn't mean forgetting your loved one, as Ellen writes:

“After my father died from colon cancer, it really felt as though my heart had broken. Now, several years later, those feelings have gone – I just really miss him.”

Ellen, age 27
Part 5: The Bereavement Program at Dana-Farber/Brigham and Women’s Cancer Center

The Bereavement Program at Dana-Farber/Brigham and Women’s Cancer Center (DF/BWCC) provides support to bereaved family members and friends after the death of an adult patient. Bereavement support comes in a variety of forms, including this bereavement guide, support groups, seminars, individual visits, and memorial services.

We also offer information about grief and resources on our website at www.dana-farber.org/bereavement. For support following the death of a pediatric patient, contact Boston Children’s Hospital bereavement program at www.childrenshospital.org/patient-resources/family-resources/bereavement-program.

In general, we will send any additional bereavement mailings or invitations to the person who is listed as the primary contact for the deceased patient. However, if this person is not the best contact or they would prefer to not be on the list, please e-mail us at bereavement_program@dfc.harvard.edu or call us at 617-632-2490. We will update our records accordingly.

The DF/BWCC Bereavement Program provides the following services:

- A bereavement packet, including this guide, mailed to the primary contact person
- Drop-in seminars about what to expect when grief is new
- Individual visits to provide an opportunity to say ‘goodbye’ to DF/BWCC, review coping with a patient’s death, and to learn about available services
- Online resources to help ease your loss
- Support groups to help you deal with loss and grief
- Memorial services

Contact Information

For more information about the Bereavement Program at DF/BWCC, contact:
617-632-2490
bereavement_program@dfc.harvard.edu

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Produced by Dana-Farber Cancer Institute’s Communications Department
Updated January 2019
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