

What is Grief?

Grief is a full range of emotions, thoughts and experiences one may endure when someone they love dies. It is important to recognize that this may entail a wide variety of emotions and experiences. Many of these emotions may be experienced as “negative”, such as sadness, loneliness, anger or regret. Some of these may be experienced as “positive”, such as relief from the end of their loved one’s suffering of a prolonged illness or moments of happiness recalling certain events. Some may be more complicated and interrelated such as feeling guilty for experiencing relief. Grief may trigger responses that are physical, cognitive, behavioral, emotional or spiritual in nature.

What are some of the emotions, thoughts and experiences you have noticed in your grief? (Remember to try to notice both “positive” and “negative” emotions)

Are there specific times of the day, events or other experiences which regularly trigger these emotions and experiences?

What is Mourning?

Mourning is the expression of the emotions and thoughts related to grief. Most individuals who suffer the loss of a loved one will grieve, but not all will externalize their grief. To mourn is to release those emotions in order to allow for healing. This release can be through emoting (crying, etc.), talking, writing, physical activities (running, exercise) or any other healthy method of release.

What are some of the ways you express all your emotions and thoughts in grief?

Have you had any other losses throughout your life? If so, how might they be related to or influence the way you are currently feeling?

What has helped you to get through emotionally difficult times in the past?

Do you have ways to express your thoughts and feelings through creating (art, music, knitting etc.) or writing (journaling, short stories, poetry, etc.)?

Do you use any other healthy ways of releasing your emotions? (exercise, etc.)

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A Bereavement Awareness and Support Community (BAASC) Initiative Component

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Grief can be described as being a rational and natural response to the loss of a loved one. There is no universal, predetermined set of expectations, needs or time constraints which will occur or be “appropriate” during grief. Every individual’s grieving process will be as unique as their relationship with their loved one and will be influenced by a wide variety of factors including previous losses, family styles of verbal and emotional communication, personal perspectives surrounding life and death, other life circumstances and stressors, mental health and wellness factors, etc.

Mental Health and Bereavement

Grief produces a wide variety of physical effects within the body which can both mimic and/or exacerbate other mental health and wellness challenges. Difficulties with sleeping, restlessness, sorrow and sadness, difficulty with concentration, flash backs, ruminating thoughts, irritability etc. are all hallmark responses in grief, as they are of a multitude of other disorders and diagnoses. It becomes important to separate these effects of a rational response to loss, (i.e. grief) from symptoms of formal disorders and diagnoses because the fundamental aspects of support during grief is validation and normalization. Generalized stigma and misinformation in our society surrounding mental health challenges and, specifically, formal diagnoses may have the potential to elicit feelings of discomfort or even disempowerment, or invalidation, within an individual who is already in a potentially vulnerable state due to their bereavement. One of the primary differences between bereavement support and support provided to individuals experiencing other mental health and wellness challenges is that in grief, support does not aim to encourage the individual to “overcome” the experiences and challenges. Bereavement support does not necessarily entail managing symptoms and learning to adopt and adapt different patterns of thinking and problem solving in order to promote self-actualization. Because grief is a rational and physiological response to the loss of a loved one, bereavement support focuses on supporting the individual while they experience their grief and promotes the ability to practice self-compassion, self-awareness and helps to externalize and vocalize their experiences and needs throughout the grief process. This distinction is also integral when considering pharmacological interventions. Introducing psychotropic medication during grief can be counterproductive due to the situational and, in most cases, temporary context of the cause of the challenges and can undermine the body’s healing process.

What is needed during Bereavement?

One’s family, friends and neighbors will all grieve differently and may not necessarily recognize the importance of being able to grieve in one’s own way. The amount of time needed for grieving varies with each individual and the nature of their loss. Sometimes, even with the best of intentions, attempts at offering comfort and/or advice can actually hurt more than help. This individuality should be explicitly discussed and encouraged. Support during bereavement should provide an opportunity to put words to what is being experienced and to explore and reflect on these emotions and experiences. Appropriate goals could include skill acquisition surrounding being able to tell others how they are struggling and/or how they can be supported during these difficult times. Other skills to minimize the extent of experienced heightened emotional states

What is Bereavement?

Bereavement is the state of grief and a time of mourning after a loss, generally referring to the loss of a loved one through death. Bereavement work involves the truthful and honest experiencing of the full range of emotions which occur during one’s grieving process. The terms “positive” and “negative” used as adjectives to describe emotions appear in quotations because emotions are not actually “good” or “bad”; “right” or “wrong”. We can sometimes experience emotions in that manner based upon whether they are perceived as being “pleasurable” or “painful”, “appropriate” and “ideal” or “inappropriate” and “imperfect”. Explicitly, emotions should not be viewed as being or labeled in terms of “good” or “bad” as they are physically based experiences based upon our own perspectives and are, therefore, valid. Our method of expression or coping, however may be discussed as being problematic if expressed in a manner which is actively or potentially harmful to yourself or to others, such as self-medicating through substance use or verbal/physical threats against others.

Who do you tend to express the above emotions to and how do they react?

Have you had any experiences where you felt you were misunderstood or were not receiving the support you need?

What do you feel you would need in order to feel supported during this time?

Who in your personal life do you feel may be able to offer you that support?

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and the effect of these current challenges on their daily lives to whatever extent possible can also be focused on. Most importantly support is meant to allow grievers an opportunity to physically process, release and replace emotionally significant memories, traumas and losses. This explicitly should not be confused with releasing the emotional attachment of their loved one and the substance of those memories and relationships.

Memories, emotions and grief are physiologically based mechanisms. Love remains long after grief. This should be thoroughly explored and discussed. This is the purpose of memorialization, to allow the bereaved to maintain an ongoing connection with, and to honor, their loved one in a meaningful way. Processing grief allows one to retain the substance of the memories while reducing the acute emotional response produced by them.