**Death and Dying Handout:**

**Grief:** grief is a natural response to a loss. The emotional suffering that one feels when someone or

something you love is taken away. Examples:

1. A relationship breakup
2. Loss of health
3. Lose of a job
4. Loss of financial stability
5. A miscarriage
6. Death of a pet
7. Loss of a cherished dream
8. A loved one’s serious illness
9. Loss of a friendship
10. Loss of safety after a trauma

**Types Of Grief:**

1. **Uncomplicated Grief: “NORMAL GRIEF”**

A grief reaction that normally follows a significant loss

**Physical reactions:**

Loss of appetite, insomnia, fatigue, decreased libido, restlessness

**Psychological reactions:**

Helplessness, hopelessness, denial, anger

1. **Dysfunctional Grief:**

* These individuals **DO NOT** progress through the stages of overwhelming emotions and fail to demonstrate any behaviors commonly associated with grief.
* They remain isolated and **DO NOT** return to their normal life.
* They continue to focus on the deceased and they usually need professional counseling.

There are different **forms of dysfunctional grief**:

**Chronic Grief:** Inability to conclude grieving

**Delayed grief:** When grief does not take place at the time of the loss.

**Exaggerated grief:** When grief is expressed as overwhelming

**Masked grief:** When grief is covered up by maladaptive behaviors (i.e.

Apathy, irritability, unstable moods etc.

1. **Anticipatory Grief:**

Is the occurrence of grief **BEFORE** an expected loss usually occurs.

1. **Disenfranchised Grief:**

Grief that is not openly acknowledged, socially sanctioned or publicly shared.

(ie loss of a pet)

**Five stages of Grief: Elizabeth Kubler-Ross Model ( Claimed these steps do not necessarily come**

**in the following order, nor are all steps experienced by all patients )**

**Denial:** “This can’t be happening to me”, “I feel fine”

**Anger:** “Why is this happening? Who is to Blame?”, Why me?

**Bargaining:** “Make this not happen and in return I will \_\_\_\_””, Just let me live to see my

child graduate”

**Depression:** “I’m too sad to do anything”, “I’m going to die …What’s the point?”

**Acceptance:** “I’m at peace with what happened.”, “It’s going to be Ok”, “I can’t fight it”

**Common Symptoms of grief:**

1. **Shock and Disbelief:** Right after a loss, it can be hard to accept what happened. You may

feel numb have trouble believing that the loss really happened or even

deny the truth.

1. **Sadness :** Profound sadness is probably the most universally experienced symptom of

grief.

1. **Guilt:** A person may regret or feel guilty about things they did or did not say or do.
2. **Anger:** Even if the loss was nobody’s fault, a person may feel angry and resentful.
3. **Fear:** A significant loss can trigger a host of worries and fears.
4. **Physical symptoms:** Such as fatigue, nausea, lowered immunity, weight loss/gain, aches

and pains, insomnia

**How to cope with grief:**

1. **Get support:**
2. Turn to friends and family members
3. Draw comfort from your faith
4. Join a support group
5. Talk to a therapist or grief counselor
6. **Take care of yourself:**

A. Face your feelings

B Express your feeling in a tangible or creative way (ie write about your loss in a

Journal)

1. Look after your physical health
2. Don’t let anyone tell you how to feel, and don’t tell yourself how to feel either.
3. Plan ahead for grief “triggers” (ie: Anniversaries, Holidays. Milestones etc.)

**How to support a grieving person:**

1. Ask them about their feelings (allow them to express their feelings and fears)
2. spend time with them,
3. listen when they want to talk

**Contact grief counselor if:**

1. Patient feels like life isn’t worth living
2. When patient wishes they had died with their loved one.
3. When a person blames themselves for the loss or for failing to prevent it.
4. When a person feels numb and disconnected from others for more than a few weeks.
5. Person is having difficulty trusting others since their loss.
6. Person is unable to perform their normal daily activities.

**Loss:** Is any situation either actual, potential, or perceived wherein a valued object or person is

changed or is no longer accessible to the individual.

**Types of Loss:** A Loss can be **1. Tangible or Intangible**

1. **Actual or Anticipated**

**(ie. If a person is not selected for a job : INCOME**

**is the Tangible loss/ Intangible loss is: SELF ESTEEM)**

**“ An Intangible loss is a loss that is NOT evident to others “**

1. **Perceived Loss:** Sense of loss felt by an individual but not tangible to others. (ie Loss of self -

esteem)

1. **Actual Loss:** Loss of someone or something (ie Death of a loved one Theft of property)
2. **Anticipated Loss:** (i.e. Diabetic patient has a foot amputation)
3. **Physical Loss:** Loss of a part or aspect of a body (ie. Loss of an extremity)
4. **Psychological loss:** Emotional loss (women feeling inadequate after menopause)

**6. Maturational Loss:** A loss that occurs as a person moves from 1 developmental stage to

another (IE. Toddler who loses a bottle and begins to drink from a cup/

a person who accepts the responsibility of their first full time job)

**7. Situational Loss:** A Loss that takes place in response to external events that the person has no

control over (i.e. Loss of a job when the company goes bankrupt or the

company downsizing)

**Factors that affect Loss and grief:**

1. **Development stages :**

**Childhood:** Infant and toddler: Not aware of what death is

**Preschool:** view death as a temporary separation

**School Age:** Fantasizes about death and tends to personify death.

**Preadolescence and adolescence:** Understands death and recognizes that death is final.

**Early Adulthood:** Grief is usually precipitated by loss of role or statue.

**Middle Adulthood:** Death of a peer may threaten their own mortality.

**Late Adulthood:** Individuals realize that death is inevitable.

1. **Religious cultural beliefs**
2. **Relationship with the lost object.**
3. **Cause of death (expected or unexpected suicide etc.)**

**How to Talk to children about death:**

1. **Avoid the use of euphemisms: (i.e. Substituting death for “sleeping” )**
2. **Do Not overexplain: (i.e. using medical terms such as “Congestive Heart Failure”)**
3. **Use simple concrete terms: (i.e. “grandma is in a better place now”)**
4. **Show them : ((take them to the funeral service and cemetery)**

**Legal considerations about Death:**

1. **Advance directives:** Includes “Living Will”/ “Durable Power of Attorney”
2. **Health care Surrogate Law:** Legal Means for specific individuals to make decisions for patients

**FIRST: Spouse** followed by Children

1. **Autopsy:** May be mandated when there is an unusual death
2. **Organ Donation**
3. **Physician’s pronounce patients death/ Hospice Nurse**