Coping With the Loss of a Loved One

Losing a loved one to cancer can be a painful and difficult time. In this guide, we discuss the grieving process and offer tips that may help you cope with your loss.

- The grieving process
- Symptoms of major depression and complicated grief

The grieving process

Many people think of grief as a single instance or short time of pain or sadness in response to a loss – like the tears shed at a loved one’s funeral. But grieving includes the entire emotional process of coping with a loss, and it can last a long time. Normal grieving allows us to let a loved one go and keep on living in a healthy way.

Grieving involves many different emotions, actions, and expressions, all of which help the person come to terms with the loss of a loved one. But keep in mind, grief doesn’t look the same for everyone. And, every loss is different.

Grieving is painful, and it’s important that those who have suffered a loss be allowed to express their grief. It’s also important that they be supported throughout the process. Each person grieves differently. The length and intensity of the emotions people go through varies from person to person.

Although grief is described in phases or stages, it may feel more like a roller coaster, with ups and downs that make it hard for the bereaved person to feel any progress in dealing with the loss. A person may feel better for a while, only to become sad again. Sometimes, people wonder how long the grieving process will last, and when they can expect some relief. There’s no answer to this question, but some of the factors that affect the intensity and length of grieving are:
• Your relationship with the person who died
• The circumstances of their death
• Your own life experiences

Grief can take unexpected forms

Difficult relationships with the deceased prior to death can cause unique grieving experiences for loved ones. In addition, prolonged illnesses can also cause grief to take unexpected forms.

Difficult relationships

A person who had a difficult relationship with the deceased (a parent who was abusive, estranged, or abandoned the family, for example) is often surprised by the painful emotions they have after their death. It’s not uncommon to have profound distress as the bereaved mourns the relationship he or she had wished for with the person who died, and lets go of any chance of achieving it.

Others might feel relief, while some may wonder why they feel nothing at all at the death of such a person. Regret and guilt are common, too. This is all a normal part of the process of adjusting and letting go.

Grief after long illness

The grief experience may be different when the loss occurs after a long illness rather than suddenly. When someone is terminally ill, family, friends, and even the patient might start to grieve in response to the expectation of death. This is a normal response called anticipatory grief. It can help people complete unfinished business and prepare loved ones for the actual loss, but it might not lessen the pain they feel when the person dies.

Many people think they are prepared for the loss because death is expected. But when their loved one actually dies, it can still be a shock and bring about unexpected feelings of sadness and loss. For most people, the actual death starts the normal grieving process.

Stages of grief

People may go through many different emotional states while grieving. The first feelings usually include shock or numbness. Then, as the person sees how his or her life is affected by the loss, emotions start to surface. The early sense of disbelief is often replaced by emotional upheaval, which can involve
anger, loneliness, uncertainty, or denial. These feelings can come and go over a long time. The final phase of grief is the one in which people find ways to come to terms with and accept the loss.

Children grieve, too, but the process may look different from adults. To learn more about this, see Helping Children When a Family Member Has Cancer: When a Child Has Lost a Parent.

**Shock, numbness, and disbelief**

Many times, a person’s first response to a loss is shock, disbelief, and numbness. This can last anywhere from a few hours to days or weeks. During this time, the bereaved person may feel emotionally “shut off” from the world. Still, the numbness may be pierced by pangs of distress, often triggered by reminders of the deceased. The person may feel agitated or weak, cry, engage in aimless activities, or be preoccupied with thoughts or images of the person they lost.

The rituals of mourning seeing friends and family and preparing for the funeral and burial or final physical separation often structure this time for people. They are seldom left alone. Sometimes the sense of numbness lasts through these activities, leaving the person feeling as though they are just “going through the motions” of these rituals.

**Facing the loss**

At some point the numbness wears off, and the reality of the loss starts to sink in. This part of the grief process, sometimes called *confrontation*, is when the feelings of loss are most intense and painful. This is the time the person starts to face the loss and cope with the changes the loss causes in their lives.

People have many different ways of dealing with loss, so there may be many different, equally intense emotions. During this time, grief tends to come in waves of distress. The person may seem disorganized. He or she may have trouble remembering, thinking, and doing day-to-day activities. This can last for weeks to months. Some or all of the following may be seen in a person who is grieving:

- Socially withdrawing
- Trouble thinking and concentrating
- Becomes restless and anxious at times
- Loss of appetite
- Looks sad
- Feels depressed
Dreams of the deceased (or even have hallucinations or “visions” in which they briefly hear or see the deceased)
- Loses weight
- Trouble sleeping
- Feels tired or weak
- Becomes preoccupied with death or events surrounding death
- Searches for reasons for the loss (sometimes with results that make no sense to others)
- Dwells on mistakes, real or imagined, that he or she made with the deceased
- Feels guilty for the loss
- Feels all alone and distant from others
- Expresses anger or envy at seeing others with their loved ones

During this time, a grieving person needs a lot of emotional support. Finding support can be the key to a person’s recovery and acceptance of the loss. Family members, friends, support groups, community organizations, or mental health professionals (therapists or counselors) can all help.

Accepting the loss

By this time, people have begun to recognize what the loss means to them in day-to-day life. They have felt the pain of grief. Usually, the person comes to accept the loss slowly over the months that follow. This acceptance includes adjusting to daily life without the deceased.

Like the earlier parts of the grieving process, acceptance does not happen overnight. It’s common for it to take a year or longer to resolve the emotional and life changes that come with the death of a loved one. The pain may become less intense, but it’s normal to feel emotionally involved with the deceased for many years. In time, the person should be able to reclaim the emotional energy that was invested in the relationship with the deceased, and use it in other relationships.

Still, adjusting to the loss does not mean that all the pain is over. Grieving for someone who was close to you includes losing the future you expected with that person. This must also be mourned. The sense of loss can last for decades. For example, years after a parent dies, the bereaved may be reminded of the parent’s absence at an event he or she would have been expected to attend. This can bring back strong emotions, and require mourning yet another part of the loss.

Symptoms of major depression and
complicated grief

Depression

It's common for people to have sadness, pain, anger, bouts of crying, and a depressed mood after a loved one dies. It’s important to know about normal grief responses so that you can know if the bereaved person might be getting worse—going into a major depression.

About 1 in 5 bereaved people will develop major depression (also called clinical depression). This can often be helped by therapy and medicines. People at highest risk for clinical depression include those who have been depressed before, those with no support system, those who have had problems with alcohol or drug abuse, or those who have other major life stresses.

Symptoms of major depression not explained by normal bereavement may include:

- Constant thoughts of being worthless or hopeless
- Ongoing thoughts of death or suicide (other than thoughts that they would be better off dead or should have died with their loved one)
- Unable to perform day-to-day activities
- Intense guilt over things done or not done at the time of the loved one’s death
- Delusions (beliefs that are not true)
- Hallucinations (hearing voices or seeing things that aren’t there), except for “visions” in which the person briefly hears or sees the deceased
- Slower body responses and reactions
- Extreme weight loss

If symptoms like these last more than 2 months after the loss, the bereaved person is likely to benefit from professional help. If the person tries to hurt him- or herself, or has a plan to do so, they need help right away.

In some people, the grieving process can go on for a long time. This happens more often in those who were very close to the deceased. It’s most often caused by attempts to deny or get away from the pain or trying to avoid letting go.

Complicated grief
If normal mourning does not occur, or if the mourning goes on for a long time without any progress, it’s called “complicated grief” or “unresolved grief.” Symptoms might include:

- Continued disbelief in the death of the loved one, or emotional numbness over the loss
- Unable to accept the death
- Feeling preoccupied with the loved one or how they died
- Intense sorrow and emotional pain, sometimes including bitterness or anger
- Unable to enjoy good memories about the loved one
- Blaming oneself for the death
- Wishing to die to be with the loved one
- Excessively avoiding reminders of their loss
- Continuous yearning and longing for the deceased
- Feeling alone, detached from others, or distrustful of others since the death
- Trouble pursuing interests or planning for the future after the death of the loved one
- Feeling that life is meaningless or empty without the loved one
- Loss of identity or purpose in life, feeling like part of themselves died with the loved one

For some people who are taking care of a loved one with a long-term illness, complicated grief can actually start while their loved one is still alive. Caregivers under severe stress, especially if the outlook is bleak, may be at higher risk of having abnormal grief even before the death.

If you or anyone close to the deceased has any of the above symptoms of major depression or complicated grief, talk with a qualified health or mental health professional. Certain kinds of mental health treatment have been shown to help people with complicated grief. Treatment is important, since people with complicated grief are at risk of their emotional illness getting worse, and are at higher risk of committing suicide.

**Coping with loss**

Ideally, a bereaved person will be able to work through the process of grieving. With time and support, they’ll accept and make sense of the loss, work through the pain, and adjust to a new life and identity.

If you or someone you know has lost a loved one, the following tips may help you cope with the loss:
• Let yourself feel the pain and all the other emotions, too. Don’t tell yourself how to feel or let others tell you how you should feel.
• Be patient with the process. Don’t pressure yourself with expectations. Accept that you need to experience your pain, your emotions, and your own way of healing all in your own time. Don’t judge your emotions or compare yourself to others. Remember that no one else can tell you how you should mourn or when to stop.
• Acknowledge your feelings, even the ones you don’t like. Let yourself cry. You need to do both for healing.
• Get support. Talk about your loss, your memories, and your experience of the life and death of your loved one. Don’t think you are protecting your family and friends by not expressing your sadness. Ask others for what you need. Find and talk to others who have lost a loved one.
• Try to maintain your normal lifestyle. Don’t make any major life changes (for example, moving, changing jobs, changing important relationships) during the first year of bereavement. This will let you keep your roots and some sense of security.
• Take care of yourself. Eat well and exercise. Physical activity is a good way to release tension. Allow yourself physical pleasures that help you renew yourself, like hot baths, naps, and favorite foods.
• Avoid drinking too much alcohol or using other drugs. This can harm your body as well as dull your emotions. It’s also likely to slow your recovery and may cause new problems.
• Forgive yourself for all the things you did or didn’t say or do. Compassion and forgiveness for yourself and others is important in healing.
• Give yourself a break from grief. You must work through it, but you don’t need to focus on grief all the time. Find distractions like going to a movie, dinner, or a ball game; reading a good book; listening to music; or getting a massage or manicure.
• Prepare for holidays, birthdays, and anniversaries knowing that strong feelings may come back. Decide if you want to keep certain traditions or create new ones. Plan in advance how you want to spend your time and with whom. Do something to honor the memory of your loved one.
• Join a bereavement support group. Other people can encourage, guide, and comfort you. They can also offer practical advice and information, and help you feel less alone. If you can’t find a group near you, online groups may be helpful.
• When you feel ready, do something creative. Some options include: Write a letter to the person who died to say everything you wish you could say to them. Start keeping a journal. Make a scrapbook. Paint pictures. Plant flowers or trees. Involve yourself in a cause or activity that the deceased
loved.

**Family changes after a loss**

When a loved one dies, it affects all their family members and loved ones. Each family finds its own ways of coping with death. A family’s attitudes and reactions are shaped by cultural and spiritual values as well as by the relationships among family members. It takes time for a bereaved family to regain its balance.

It’s important that each family member be able to grieve with one another to help the family cope. Each person will experience the loss differently and have different needs. As hard as it may be, it’s important for family members to be open and honest when talking with each other. This is not the time for family members to hide their emotions to try and protect one another.

The loss of one person in a family means that roles in the family will change. Family members will need to talk about the effects of this change and work out the shift in responsibilities. This time of change is stressful for everyone. This is a time to be even more gentle and patient with each other.

**Losing a child**

Facing the death of a child may be the hardest thing a parent ever has to do. People who have lost a child have stronger grief reactions. They often have more anger, guilt, physical symptoms, greater depression, and a loss of meaning and purpose in life. A loss is tragic at any age, but the sense of unfairness of a life unfulfilled magnifies the anger and rage parents feel.

A longer and slower bereavement and recovery should be expected when someone loses a child. The grief may get worse with time as the parents see others going through the milestones they expected to pass with their child.

Bereaved parents especially may be helped by a grief support group. These groups may be available in the local community. You can ask your child’s cancer care team for referral to counseling or local groups.

**Getting professional help**

Bereavement counseling is a special type of professional help. You may be able to find it through hospice services or a referral from a health care provider. This type of counseling has been shown to reduce the level of distress that mourners go through after the death of their loved one. It can
help them move through the phases of grief. Bereavement counseling can also help them adjust to their new lives without the deceased.

**Helping someone who is grieving**

It's common to feel awkward when trying to comfort someone who is grieving. Many people don't know what to say or do. Use the following tips as a guide.

**What to say**

- Acknowledge the situation. Example: “I heard that your _____ died.” Use the word “died.” This shows that you are more open to talk about how the person really feels.
- Express your concern. Example: “I’m sorry to hear that this happened to you.”
- Be genuine and don’t hide your feelings. Example: “I’m not sure what to say, but I want you to know I care.”
- Offer your support. Example: “Tell me what I can do for you.”
- Ask how the bereaved person feels and listen to the answer. Don’t assume you know how they will feel on any given day.

**What to do**

- Be there. Even if you don’t know what to say, just having someone near can be very comforting.
- Listen and give support. But don’t try to force someone if they’re not ready to talk.
- Be a good listener. Accept whatever feelings the person expresses. Even if you can’t imagine feeling like they do, never tell them how they should or shouldn’t feel.
- Give reassurance without minimizing the loss. Try to have empathy with the person without assuming you know how they feel.
- Offer to help with errands, shopping, housework, cooking, driving, or yard work. Sometimes people want help and sometimes they don’t. They may not take you up on your offer, so remember they’re not rejecting you or your friendship.
- Avoid telling the person “You’re so strong.” This puts pressure on the person to hold in feelings and keep acting “strong.”
- Continue to offer support even after the first shock wears off. Recovery takes a long time.
• It may help to check in with the bereaved on anniversaries of the death, marriage, and birthday of the deceased, since those can be especially difficult.
If the grieving person begins to abuse alcohol or drugs, neglects personal hygiene, develops physical problems, or talks about suicide, it may be a sign of complicated grief or depression. Talk to them about getting professional help.
If you believe someone is thinking about suicide, don’t leave them alone. Try to get the person to get help from their doctor or the nearest hospital emergency room right away. If that’s not possible, call 911. If you can safely do so, remove firearms and other tools for suicide.

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