



UNDERSTANDING AND NAVIGATING GRIEF

This Emory Flourishing at Grady Tip Sheet provides Background Information about Grief and offers a series of Strategies for Navigating Grief. Understanding and addressing grief is essential to promoting wellbeing, fostering professional effectiveness, and healing from and making meaning of the loss.

Background Information about Grief

What is Grief?

Grief is a natural amalgam of emotions (e.g., profound sadness, anger, numbness, fear) that people experience:

- when they anticipate or experience a significant or permanent loss of
 - someone (e.g., death of a loved one, friend, colleague, pet)
 - something important to us (e.g., end of a significant relationship or friendship, decline in health, loss of financial security, end of a career)
- in response to the loss of something intangible (e.g., sense of safety or normalcy, certainty and predictability, and loss of connection)
- in response to losses that occur because of actions we or others take or do not take
- when all members of a community encounter a sudden and major change (e.g., COVID-19 pandemic) (i.e., communal grief)

Grief is a dynamic process, the intensity and presentation of which varies over time. This process cannot be controlled, as the ebbs and flows of grief are normal. There is no particular timing to grief, as it may occur in anticipation of a loss, at the time of a loss, or may be delayed. There is no right or wrong way to grieve and express one's grief. Grief is a complex and emotional experience that can affect people's emotions, physical health, behavior, and social interactions.

- Emotional reactions - Often in response to grief people feel a range of intense emotions including sadness and sorrow, hopelessness and helplessness, guilt and regret, anger and irritability, fear and anxiety, numbness and detachment. Frequently these emotions are confusing and conflicting. For example, people may feel sad a loved one is gone, yet guilty they no longer have care for them, and relieved they are no longer in pain.
- Physical responses - Commonly experienced physical symptoms include a weakened immune system and thus increased vulnerability to getting sick, fatigue, changes in sleep patterns, changes in appetite, aches and pains (e.g., headaches), GI distress, heart palpitations, tightness in chest or throat, restlessness, etc.

- Behavioral changes - Common behavioral changes related to grief include apathy and lack of motivation, problems with attention and concentration (e.g., hard to focus on work or keep track of responsibilities), difficulties completing tasks, problems making decisions, sense of confusion, and feeling directionless. People often turn to substances or engage in risky behaviors to ease their pain.
- Social functioning changes - Changes in social functioning include feeling detached from other people, being mistrustful, having difficulties communicating, withdrawing from social interactions and activities, and having difficulty seeking or accepting support, etc. In addition, people can have problems carrying out their social roles, such as parenting their children or caring for their patients.

Grief, which is normal as it reflects the pain people experience in the face of loss, is directly related to the grieving person. As such, it is valuable and worth protecting. Emotions and responses to grief often are unpredictable, uncontrollable, cyclical in nature, and specific to each person in duration and intensity. Experiencing and expressing grief is a sign of strength yet often is contrary to commonly held expectations about healthcare professionals' behavior and interactions in the workplace.

Grief Among Healthcare Professionals

Grief among healthcare professionals also may be experienced following the death of a patient or a colleague or in response to constant exposure to the effects of illness, disability, and trauma. Healthcare professionals' losses may be augmented by deep bonds formed with patients, connections to patients' loved ones, and a sense of "family" with one's colleagues. It also may be compounded by conflicts in one's values related to maintaining a career in the context of trauma and death versus caring for one's own wellbeing. Exposure to death and other events that elicit grief can lead to emotional and psychological exhaustion, which lowers healthcare professionals' morale and increases their risk of errors, compassion fatigue, and burnout.

Grief Process

The grief process has been characterized by stages that do not necessarily occur in a particular order and may occur concurrently. Not all affected parties go through the same phases at the same time. The following are the key stages in the grief process (Kubler-Ross, 1969; Kessler, 2019):

- **Denial** – People may deny that the loss is real even though they know the facts (e.g., initially refusing to acknowledge the emotional impact of a patient's or a colleague's death, convincing themselves that such events are just part of the job). This can include inhibited grief (when emotions are suppressed or unexpressed, possibly due to professional expectations in healthcare settings).
- **Anger** – People may be angry that the event or death occurred, or angry at the deceased for their departure. Anger may be self-directed, particularly when the healthcare professional feels they did not do enough to save someone's life; directed at the deceased person (e.g., for not taking good enough care of themselves or being adherent enough to treatment recommendations); or aimed at members of the interprofessional team. When healthcare professionals experience moral distress related to caring for a patient who is dying/may die,

anger is one the emotions they may experience. Some people may just be angry in general or with the system for its real or perceived failures. Cumulative grief (grief experienced from multiple losses over time) may intensify anger, especially if the healthcare professional has faced repeated patient or colleague deaths.

- **Bargaining** – People may cope with feelings of helplessness and powerlessness by attempting to regain what has been lost or is slipping away. To gain control, they may dwell on “what if” scenarios (e.g., “If only they received different medical attention”, or “If I had done this, then there would be a different outcome”). In anticipation of a grief-eliciting event, some may try making deals (e.g., “If we can save them, then I will work harder with the next patient or be more attentive to my colleagues”). Anticipatory grief (grieving before an expected loss, such as a terminal diagnosis of a patient, colleague, or loved one) often underpins this phase, especially when healthcare professionals foresee outcomes but feel powerless to change them. In this phase, people may take up conversations that have no tangible outcome.
- **Depression** – People feel sadness because of the pain of the loss they are experiencing. As a reflection of this profound sadness, they may cry, have noticeable changes in their appetite or sleep patterns, or have physical pain without cause. They may feel particularly isolated after the loss of a close colleague or team member, as the workplace dynamic and daily routines change. Delayed grief (grief postponed or not fully experienced at the time of the loss) can occur, possibly triggered by another event or reminder of the loss. As the person moves toward acceptance, the sadness subsides. It may resurface on death anniversaries, or at other times when the person is reminded of the lost person or times shared.
- **Acceptance** – People reach a state where they can acknowledge what they have lost and what significance the person or thing had to them. They are no longer sad and angry and can move forward by rebuilding and continuing their work responsibilities and lives with a sense of peace. For healthcare professionals, this may include adjusting to changes in the team dynamic or workplace roles after a colleague’s death. Abbreviated grief (a brief but intense period of mourning) may occur here, especially when professional obligations necessitate moving forward quickly.
- **Meaning-making** – Often in this phase, healing begins as individuals move beyond acceptance and start finding meaning in their experiences. For healthcare professionals, this meaning-making process can take many forms, such as reflecting on the impact of their work or honoring the lives of those they’ve cared for. In cases of a colleague’s death, this may involve celebrating their contributions to the team, preserving their memory in workplace traditions, or striving to embody the values they upheld. Collective grief (grieving experienced by a group or community, such as a hospital team) may involve shared rituals or commemorations that preserve the memory of an individual or multiple lives lost. While it doesn’t eliminate grief, the process of making meaning from the loss can ease people’s emotional burden and help them move forward.

Cultural Considerations

The experience and navigation of grief are deeply influenced by cultural, religious, and spiritual beliefs, traditions, and social norms.

Cultural, religious, and spiritual factors shape how individuals:

- View death (e.g., beliefs about the presence and nature of an afterlife)
- Express grief and sorrow (e.g., public displays of emotion, private mourning or silent reflection, structured rites or rituals)
- Mourn (e.g., specific burial customs, designated mourning periods and practices, family-centered versus communal practices)
- Process the grief experience
- Seek support (e.g., religious guidance, spiritual mentorship, counseling/therapy, grief support groups)
- Maintain a continued bond with the deceased (e.g., annual remembrance ceremonies, ancestor veneration, prayer rituals, candle lighting, symbolic offerings)
- Find meaning in loss

Many people turn to their faith, spiritual beliefs, and religious or cultural rituals as sources of comfort, healing, and guidance during times of grief. These practices can serve as a source of comfort and connection for grieving individuals. For some individuals, such rituals can provide comfort through community, honor, and meaning.

Strategies for Navigating Grief

The strategies detailed below can help people navigate, but not eliminate, the grief process. Different people will find different strategies to be most helpful to them, and strategies vary in their usefulness over the course of a grief process.

Prioritize your Emotional Well-Being

- Remember that grief is a normal response to loss, even when it feels overwhelming or disruptive
 - Appreciate that you must go through the grief process to metabolize, accommodate, and integrate the loss into your life
- Ride grief's emotional waves to the extent possible given your professional and personal responsibilities — this is vital for processing and coping with loss, even though it can be overwhelming and disruptive
 - Identify your feelings and how they relate to your current loss and the stage in the grief process
 - Stay present and allow yourself to process emotions as they arise, rather than resisting or avoiding them
 - Journal about your feelings and reflections
- Show compassion toward yourself
 - Acknowledge the emotional toll of the loss and be accepting of your stage in the grief process and that you may revisit one or more stages
 - Practice self-kindness
 - Avoid being overly critical of your reactions
 - Avoid blaming yourself or others for outcomes or losses beyond your control

- Strive to express your feelings constructively to prevent them from impacting your behavior or social interactions negatively
 - Give grace to yourself when such constructive expression is not possible
 - Apologize and as appropriate explain to others when constructive expression does not occur
- Make meaning
 - Remember and honor who/what you lost
 - Continue sharing the loss story
 - Write a letter of gratitude
 - Create a memory book, scrapbook, and/or grief memorial
 - Create personal or collective ways to honor and process your feelings and reactions
 - Donate to a charity that was meaningful that is relevant to your loss
 - Plant a garden or tree
 - Engage in creative outlets
 - Embrace new rituals around the holidays
 - Connect with people experiencing similar types of grief
 - Engage in acts of kindness toward others (e.g., volunteer)
- Be mindful of signs of complicated grief or depression (e.g., persistent sadness, loss of interest, overwhelming guilt, reliance on substances to cope) and seek help from a mental health provider to address these concerns effectively

Take Care of Your Physical Wellbeing

- Prioritize rest and sleep
- Stay hydrated
- Focus on healthy nutrition
- Engage in physical activity (e.g., walking, yoga, running, sports)
- Spend time in nature
- Practice mindfulness and meditate

Keep Your Behavior on Track

- Maintain a routine, where possible for stability and a sense of normalcy
- Set small, achievable goals
- Limit overstimulation (i.e., reduce social media, news intake, or overwhelming environments)

Stay Connected

- Keep up with social activities as much as you can
- Accept social outreach and support
 - Fight, to the extent possible, your impulses to isolate or to be strong and do it on your own
- Reach out to trusted friends, family, or colleagues
 - Communicate about your emotional needs
 - Let them know what support or comfort you need
- Build a culture of support during periods of individual or collective grief at work
 - Participate in one-on-one or small group conversations

- Host/engage in debriefing sessions
- Hold a memorial service
- Attend the funeral/celebration of life
- Name rooms/meetings/lectures/awards after the deceased
- Make memory books for families
- Coordinate meal trains
- Organize fundraisers for families
- Seek professional support to prevent prolonged suffering and facilitate recovery
 - Know the warning signs when additional help and support are needed – persistent intense emotions, suicidal or self-harm thoughts or actions, substance misuse, significant physical symptoms, difficulty performing daily activities, significant social withdrawal, prolonged or complicated grief

Helpful Resources

Support at Emory University

- Emory Staff Wellness Resources: <https://www.emoryhealthcare.org/>
- Emory Faculty Staff Assistance Program: <https://hr.emory.edu/eu/fsap/index.html>
- Emory University Spiritual Health: <https://spiritualhealth.emory.edu/>

Support at Grady Health System

- Grady Resiliency Program: (404)616-7222; employeeesiliency@gmh.edu
- Nurse Coaching Sessions: cheer@gmh.edu
- Grady Chaplaincy Office: Day Time: (404) 616-4270; After Hours: (470) 834-7354
- Employee Assistance Program: (888)293-6948

Books

- "Finding Meaning: The Sixth Stage of Grief" by David Kessler
- *Book* <https://www.amazon.com/Finding-Meaning-Sixth-Stage-Grief/dp/1501192736>
- *Workbook* <https://www.amazon.com/Finding-Meaning-Workbook-Releasing-Remembering/dp/1962305295>
- "Understanding Your Grief: Ten Essential Touchstones for Finding Hope and Healing Your Heart" by Alan D. Wolfelt
- *Book*: <https://www.amazon.com/Understanding-Your-Grief-Essential-Touchstones/dp/1879651351>
- *Journal*: <https://www.amazon.com/Understanding-Your-Grief-Journal-Exploring/dp/187965136X>
- "The Grief Recovery Handbook: The Action Program for Moving Beyond Death, Divorce, and Other Losses" by John W. James and Russell Friedman
- *Book*: <https://www.amazon.com/Grief-Recovery-Handbook-Anniversary-Expanded/dp/0061686077>
- *Workbook*: <https://www.amazon.com/Grief-Recovery-Workbook-Overcoming-Program/dp/0061686182>
- "The Grief Workbook: A Personal Guide to Processing Loss, Healing, and Hope" by Gracelyn Bateman and Cathy Chung

- *Book & Workbook*: <https://www.amazon.com/Grief-Workbook-Personal-Processing-Healing/dp/1735595845>
- "Navigating Grief: A Guided Journal" by Courtney Joseph
- *Book & Workbook*: <https://www.amazon.com/Navigating-Grief-Guided-Journal-Exercises/dp/1685398073>

Applications and Web Sources

- Five Wishes: <https://fivewishes.org/>
- Good Grief App: <https://goodgriefapp.com/>
- Griefshare: <https://www.griefshare.org/>
- National Hospice and Palliative Care Organization:
<https://www.nhpco.org/patients-and-caregivers/grief-and-loss/>

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