Grief

Grieving someone, or something.
What grief is, what it does to body and mind,
and how to carry it.

Grief is not a problem to be solved.
It is love, learning a new shape.

A PLACE TO START

For anyone who is grieving a person, a pet, a place, a life they had, or one they hoped for. Plain language, based on research, with every source named. The last pages show where to continue. Written by someone who is not a medical professional.

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Start anywhere

There is no right order. Go to the page you need today, and print only that page if you like. Every page stands on its own. On a phone, tap any line or box to type.

People use different words for themselves. I use the ones most people have told researchers they prefer, and yours are welcome here.

> If you only have energy for one page today: **What helps**, page 10.

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Understanding is the first act of care.

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ONE

What grief is

Grief is the natural response to losing someone, or something, you love. Grief itself is not an illness or a disorder. It is what love does when it loses its place to land.

The neuroscientist Mary-Frances O'Connor describes grief as learning. Your brain holds a map of your world, and who or what you lost is still on it: here, close, reachable. Each time you reach and it is not there, your brain learns again.

1 **Your brain still expects it**

You reach for the phone. You set two cups. You turn toward a home, a job, a body, a future that is not there.

2 **The absence lands again**

And it hurts, often in the body.

3 **Slowly, the map changes**

Not forgetting. Learning to live with the love in a new place.

THREE WORDS THAT ARE OFTEN MIXED UP

Word	What it means
Grief	What you feel inside, in body and mind, after any loss
Bereavement	The time after a death
Mourning	How grief is shown outwardly: a funeral, a ritual, sharing memories

You are not doing it wrong. Your brain is learning something it never wanted to learn.

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TWO

Every kind of loss can be grieved

Grief is not only for a person. You can grieve someone, or something. Any loss of what mattered can bring it, and losses can pile up.

Loss	What it can look like
A death	A parent, a partner, a friend, a child
A pet	A companion who was family. This grief is real, even when others do not see it.
Someone still here, but changed	Dementia, illness, addiction. Researchers call this ambiguous loss.
Before a death	Grieving while you care for someone who is dying
A place	A home, a country, a community you left
A role or identity	A job, a career, the person you were
A life you expected	Health, a plan, a late diagnosis that changes your story

THE LOSSES I AM CARRYING

Losses that are not named still weigh. Naming them is a place to begin.

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THREE

The many shapes of grief

Grief takes different shapes, depending on the loss and on your life at the time. Knowing the names can make it easier to see that what you feel is normal.

Shape	What it can look like
Acute grief	The first waves: shock, sadness, and disruption
Integrated grief	Over time, the loss becomes part of your life story. You can live fully again, and sadness still visits.
Anticipatory grief	Grieving before a loss happens: a diagnosis, a decline, a move, a goodbye you can see coming
Delayed grief	Grief held back by practical duties, caring, or shock, that arrives weeks, months, or years later
Disenfranchised grief	Grief that others do not see or acknowledge: a pet, a miscarriage, an estrangement, the end of a relationship, a death surrounded by stigma
Ambiguous grief	Grieving someone still alive, or a loss without clear closure
Prolonged grief	Grief that stays so intense, for so long, that daily life cannot go on

THE SHAPES I RECOGNISE IN MY OWN GRIEF

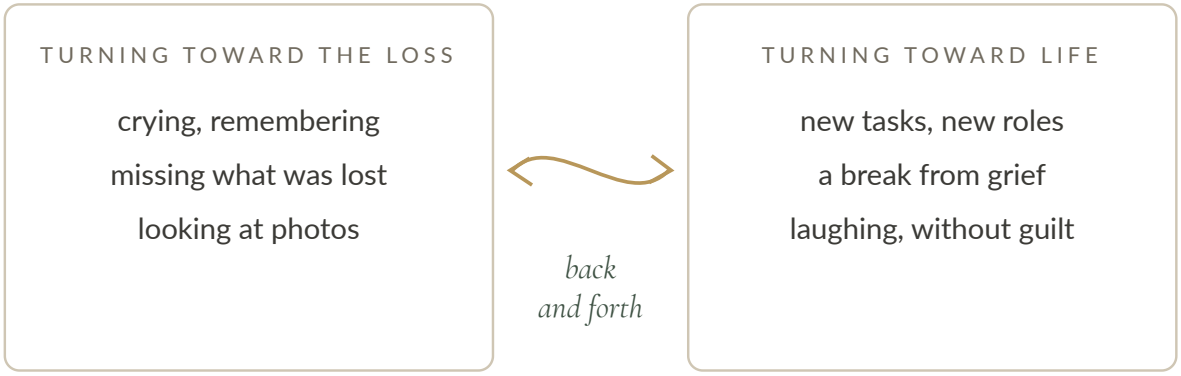
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FOUR

Grief is not five stages

You may have heard of the five stages: denial, anger, bargaining, depression, acceptance. They came from Elisabeth Kübler-Ross's work with people who were dying, not with people who were grieving. Research has not found that grief moves through steps in order.

A more helpful picture comes from the researchers Margaret Stroebe and Henk Schut. Grieving people move **back and forth**, between turning toward the loss and turning toward life.



Both are part of grieving. Taking a break from grief is not forgetting. It is how people keep going.

FIVE

Grief in body, mind, and days

Grief touches every part of you. In research on bereaved people, stress hormones, inflammation, and blood pressure can all rise, especially in the first months. Tick what you recognise. It diagnoses nothing.

FEELINGS

- [ ] Sadness, yearning
- [ ] Shock, numbness
- [ ] Anger, guilt, anxiety
- [ ] Relief, and guilt about the relief

BODY

- [ ] Exhausted, and still cannot sleep
- [ ] Appetite gone, or changed
- [ ] Nausea, aches, a tight chest
- [ ] Getting ill more often

THINKING

- [ ] Foggy, forgetful
- [ ] Cannot concentrate or decide
- [ ] Disbelief, it does not feel real

DAYS

- [ ] Pulling away from people
- [ ] Crying, or restless
- [ ] Routines falling apart

Relief is common, especially after a long illness or a long time caring. It does not mean you loved less.

A check-up is a kindness

Because grief strains the body, a check-up in the months after a loss is worth booking. Chest pain or sudden symptoms need care straight away.

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SIX

Staying connected

For a long time, people were told to let go and move on. Research since the 1990s has shown that many people keep a bond with the person they lost, and that this is normal and often comforting. The same can be true of a place, a role, or a life you had. Researchers call these **continuing bonds**.

Words

Writing to them, or talking to them out loud.

Rituals

A candle, a walk, a meal on their birthday.

Objects

Something of theirs, or something from that place or time.

Living what mattered

Carrying forward what that person, place, or life gave you.

HOW I STAY CONNECTED, OR WOULD LIKE TO

Love does not end. It changes shape.

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SEVEN

When grief stays very heavy

For most people, grief stays but slowly softens and becomes easier to carry. For some, it stays so intense that daily life cannot go on. After a death, doctors now recognise this as **prolonged grief disorder**. Long, heavy grief for any loss deserves care too.

WHAT IT CAN LOOK LIKE	Intense longing or preoccupation, most days, with emotional pain that makes it very hard to take part in life
HOW LONG	Usually only considered six to twelve months or more after a death, depending on the guidelines used
WHAT HELPS	There are therapies made for it. A doctor or a bereavement service can help you find one.

Needing help with grief is not a failure of love, or of strength.

Please reach out now

if you have thoughts of not wanting to be here, or of joining the person you lost. You can use the crisis lines on the Where to continue page, at any hour.

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EIGHT

What helps

There is no right way to grieve. These are conditions that help many people.

People

Someone who will let you talk about what you lost.

Rhythm

Simple routines to hold you when nothing else does.

The body

Sleep, food, water, and a short walk. Small and often.

Breaks

Time off from grief, without guilt.

Time outside

Nature does not ask anything of you.

Making

Writing, painting, building. Grief needs somewhere to go.

Hard dates, planned

Birthdays and anniversaries, with a plan for the day.

Support

A bereavement service, a group, a counsellor.

Let feelings come without judging them, and without a timetable. Alcohol, overworking, or staying endlessly busy can push grief away for a while, but it usually waits, and it can wear on body and mind.

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NINE

My plan for the hard days

Hard days are easier with a plan made on a calmer day.

DATES THAT MAY BE HARD

Date	Why	What I will do, and who will be with me

WHAT HELPS ME WHEN A WAVE COMES

WHO I CAN CALL, ANY TIME

> FOR EXAMPLE
>
> 12 March, her birthday. I will take the day off, walk the beach she loved, and have dinner with my sister.

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TEN

Asking for what you need

People often want to help but do not know how. Specific asks are easier to say yes to.

At work

Bereavement leave. A gentle return, with flexible hours. One person who knows, so you do not have to explain again and again.

With a doctor

How you are sleeping and eating, and how long it has been. Ask about bereavement support.

With friends

"Could you bring dinner on Thursday?" "Will you say her name with me?"

With yourself

Grief takes energy. Expect less of yourself, for longer than you think.

> THREE SENTENCES
>
> "My mother died three weeks ago. I want to come back, and I am not yet able to concentrate for a full day. Could I work mornings for the next month, and could you let the team know so I do not have to?"

WHAT I AM ASKING FOR, AND FROM WHOM

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ELEVEN

Where to continue

This guide is a place to start. Here is where to go next.

TO READ MORE

Your national health service's website, and a bereavement charity in your country. *The Grieving Brain* by Mary-Frances O'Connor. From me, free: *Caring and grief at work*, *Advocating for yourself*, and *Your nervous system*.

TO FIND SUPPORT WHERE YOU LIVE · WORDS TO SEARCH, ADDING WHERE YOU LIVE

What you are looking for	Words to search
Someone to talk to	*bereavement support [your area] · grief counsellor near me*
Others who understand	*bereavement group [your area] · grief café [your town]*
A specific loss	*support after the death of a parent · child · partner · by suicide*
Losing a pet	*pet bereavement support · pet loss support line [your country]*
Before a death	*hospice family support [your area] · anticipatory grief support*
At work	*bereavement leave [your country] · compassionate leave*

WHAT I FOUND, AND WHO I WILL CONTACT FIRST

If you are struggling tonight and cannot wait, please do not sit with it alone. In Scotland, 111 reaches the NHS 24 Mental Health Hub at any hour, and Samaritans are on 116 123, free, day or night. In the United States and Canada, call or text 988. Anywhere else, findahelpline.com lists the lines that operate in your country. In an emergency, call your local emergency number.

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Where this comes from

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Why it is free

Most of us meet grief without ever being told how it works. This guide is yours to keep, print, and hand to someone.

I am not a medical professional. This guide diagnoses nothing and is not medical advice. If something in your body or mind worries you, please see a doctor.

Valerie McIntyre-Baird