**Understanding Grief**

Grief is a normal human reaction after experiencing a loss. Although it is often associated with mostly with sadness, it is an expression of several emotions. These multiple emotions can be experienced in different orders and often co-exist. Some of the emotions experienced with grief are explained below. We also discuss ways of approaching them.

• Denial/Shock– The initial reaction of a loss is usually shock, numbness, and disbelief. Here, one avoids facing the reality of a situation. It is used as a way to protect ourselves from the painful reality of having lost a dear person. The reality can be faced at your own pace.

• Guilt– As we accept the reality of a loss, self-blame occurs. One starts thinking of how he/she could have avoided the loss. Similarly, this also serves as a protective technique. This feeling of having the possibility of changing the oucome makes one feel more in control. However, guilt can be very heavy on us. It complicates the grieving process. Taking a step away and think of whether you are distorting reality by blaming yourself.

• Anger– Another coping mechanism is to feeling angry. Anger is an uncomfortable emotion reflected on others. We need to be aware of this feeling of anger, and try to understand its origin and process it. Talking about what caused the anger is helpful. Others should not confront a person in a moment of anger. Think about what upset you. With time (sometimes even in a few days), the anger might no longer exist.

• Sadness– Profound sadness sets in as you feel empty, heavy, slow, and foggy. This feeling might affect your appetite, sleep, and excitement to do anything. Give yourself the time and space to feel sad. Remember to cry if you feel like crying. It could be an emotional release.

• Fear– Losing someone can make us think deeper and closer about mortality. Talk to someone who will listen and help you with identifying it as a fear, and providing you with a reality-check.

**While grieving, remember that:**

 • Grief is normal after a loss. While this phase, one might feel like the agony is permanent. These feelings will eventually lessen over time.

 • Grief is not a stable state. It can be processed like other emotions.

 • While grieving, we may feel opposite emotions at once, such as instances of joyful moments and sadness. Two conflicting feelings can co-occur.

 • While grieving, physical expressions of mourning can be experienced (e.g increased stomach aches and headaches). Pay attention to your physical health.

• There is no right way or correct order to grieve. People grieve differently. Remember your grieving process is unique and personal.

**Coping with Anxiety**

Try the following to cope with anxiety:

1. Do not try to avoid the anxious feeling. As we avoid anxiety, it becomes scarier. Reflect about what triggered the anxious feeling.

2. Identify what you are feeling. Ask yourself, “What was it that made me nervous?” Be curious about the trigger behind your discomfort. This is an opportunity to learn about yourself.

Some common emotions that can make us anxious are:

**a. Disappointment.** When experiencing disappointments (e.g. cancelled vacations or family events), you may personalize the loss and think “Why is this happening to me?” Instead, allow yourself to feel sad about the loss. Connect to a friend who will empathize and will not judge your sadness**.**

**b. Anticipation anxiety.** Anticipation anxiety is the anxiety that we feel prior to

whatever it is that we fear. For instance, a person afraid of flying may feel

more anxious prior to the flight. While on the flight, he/she might be surprised that flying is not as bad as they anticipated. Anxiety is a feeling related to anticipating future events.

**c. Change fatigue.** Anxiety might occur when one is experiencing many changes at once. Humans thrive in our routines, thus change can make us feel uncomfortable. Keep your routines (e.g. reading a bedtime story to your child before they sleep). Maintaining those small routines ground us.

3. Check your thinking. Ask yourself, “What am I worried will happen?” During stress, we cannot think clearly and our brains jump to assumptions. Check if you are thinking in all-or-none manner - “everyone,” “no one, “always,” “never.” Are you thinking of worst-case scenarios. Try to find a more helpful and factual middle ground. Use terms such as “sometimes,” “possibly,” “some people” are helpful and usually more accurate.

4. Learn from your anxiety. Track who and/or what you are worrying about.

5. Develop a phrase or a mantra for comfort. This phrase should resonate with you and soothe you. For example, repeat “I am not alone”, “This too shall pass”, “I have overcome worse” or “This will only make me stronger”. You can write them and to carry them with you.

6. Connect with others; directly or virtually.

7. Remember emotions are not permanent. Anxiety is like a wave in the ocean- it shall pass.

**If you are feeling increased stress or anxiety, here is some helpful advice:**

1. Try not to judge your emotional response. Remember some anxiety is protective and helpful.

2. Connect to individuals who make you feel better and distance yourself from ones that are critical of you. Speak to ones that are helpful and limit time with unsupportive friends/family/peers.

3. Limit your exposure to social media and/or news. They can leave you feeling worse. Choose reliable sources of information. Take care of yourself and apply self-care techniques (e.g exercise, meditation, watching a television show).

Keep in mind you may benefit from speaking to a professional, when you are faced with the following:

1. Inability to stop thinking about the subject matter and focus on other matters

2. Anxiety interrupting your ability to function at home or at work

3. Difficulty sleeping at night

4. Change in appetite or weight

5. Anxiety causing a feeling of panic or feeling of being overwhelmed

6. Misusing substances in order to avoid strong emotions

**Misconceptions on Seeking Mental Health Care:**

Individuals seek mental health care to learning to develop new coping skills, tolerate difficult emotions, (e.g guilt, sadness or anxiety), or help with the mourning of a loss. Sometimes, seeking help can be difficult due to some common misconceptions. These include:

• Getting mental health care will give the impression that “I am crazy”. Remember, we get help to learn about yourself and cope with difficult emotions. It shows that you are being responsible and healthy. Getting help is a positive coping skill.

• I am not ill enough to get mental health care: You do not need to be experiencing a mental illness in order to seek mental health care. It is very common for individuals benefitting from mental health care not to meet criteria for a mental health illness. Do not wait until you are suffering a clinical mental illness to seek help.

 I am taking the space of someone who really needs it: Remember, your mental health

is important. At your initial consultation, the clinician will recommend the frequency and the length of treatment. Sometimes, mental health treatment can be brief. Self-care will improve your care for others.

I do not have the time to get care: Prioritize our mental health care.

Improved emotional well-being will save you time as you become more efficient in dealing with difficult situations.

Will I be in mental health care forever? Most treatments are time-limited. When seeking mental health care, you might build a stronger connection with family and friends. Thus, they may offer you with adequate needed support.

I do not like depending on others, I can take care of myself: When seeking support, you do not become “needy.” Instead, you are looking after yourself with some support and guidance.

As a health care worker, I take care of others:

Getting care for yourself allows you to better care for others.

I am concerned that my employer will find out that I am getting mental health care:

Your employer or supervisor does not have access to your medical record. Usually, mental health notes at KFSHRC are kept very private and limited. Mental health patient notes at KFSHRC are

treated with even more protection than other non-mental health patient notes. In addition, mental

health professionals are aware that they are not allowed to disclose any information

about the care they provide without consent.

What if I am forced to take medications?: Mental health providers should be your

Partners. Treatment decisions will be made in conjunction with you.

I am afraid that I will learn something about myself that frightens me:

Mental health providers are trained to explain why such emotions appear frightening. Those thoughts or feelings you fear the most make you human.

I once did not have a good experience with a therapist/psychiatrist: Not every patient-therapist relationship is a good fit. Do not allow a past experience discourage you. You can find an expert who you may be very trusting and helpful.

We encourage you to think about those reasons or any misconceptions that stop you from seeking mental health care. Try taking the first step towards getting the support you need.