

# Grief & Loss

## in the Workplace

*Grief and loss occurs both at work and home. Serious illness and death in the family are very common problems affecting workplace performance. Typically, grief results from a personal crisis (divorce, fire, work-related or auto accident), sudden death (heart attack, stroke, suicide, homicide), chronic or terminal health problems, or job termination (layoff, discharge).*

**SHOCK | DENIAL | BARGAINING & SELF BLAMING | ANGER & ANXIETY | ACCEPTANCE**

The expression of grief often passes through stages or phases. However, not everyone goes through these stages in the same order or with the same intensity. That is, there are individual differences in the way we experience the phases of grief. Also, the expression of grief varies among different cultural groups. These stages of grief include the following:

**SHOCK** experiences of shortness of breath, tightness in the throat, a need to sigh, muscular limpness, and loss of appetite occur in the first hours after a loss is experienced. As the shock abates, the physical symptoms lose their intensity and we begin to absorb reality. If there is a persistent wish during grief, it is that the loss could be reversed.

**DENIAL** allows the slow assimilation of the loss. At first the thought is that the report must be wrong. There is often the feeling that a mistake has been made or that the person will walk through the door any minute. As time passes and preparation for change or for the funeral begins, reality is faced.

**BARGAINING & SELF BLAMING** requires a greater level of acknowledgment that the loss has occurred, but resistance lingers to the extent that we attempt to make deals to reverse fate. There is a litany of "I should have's," such as, "I should have paid more attention, said something positive, been more patient."

**ANGER & ANXIETY** are emotional signals that our psychological equilibrium is out of sync. A loss stirs feelings of rejection and powerlessness that lead to feeling anxious. In the first hours or days, feeling restless and unable to sleep is common. Anger at the loss, the one who is gone, the people who made the decision, are all normal reactions to loss. Anger often causes the most consternation as it is an emotion with which many are uncomfortable. Anger is a healthy indication that we are beginning to accept the facts.

**ACCEPTANCE** occurs with time. The realization sets in that the situation is not going to be the same as before, or that the person is not going to return and there is nothing that could have been done to change the outcome. There will be moments when a return to any or all of the stages occurs, yet accepting the loss allows us to move forward in the grief process.

## *Grief & Loss - Grief reactions*

Grief reactions are as different as the people who experience them; there are many healthy ways to grieve.

Grief may be responsible for physical symptoms such as insomnia, appetite changes, malaise, or actual illness. Grief affects perception - the way we see ourselves and others, the way we make decisions. We may find it difficult to think clearly and may feel a sense of confusion. If possible, major decisions should be postponed. Small victories, such as deciding on the day's meals, will help to instill a sense of control.

Grief may prompt some to withdraw from life and push others to stay too busy to feel. It is important that contact with friends and family is maintained. Contact with others who are experiencing the loss can help one to move through the grief process. Almost every emotion can be part of the grief reaction: fear; anger; peace, despair; guilt, agitation, and a seemingly bottomless sorrow may all be a part of grief. There is no time limit for the emotions we experience. If it feels that there is no relief, seeking assistance from a counselor is helpful in putting the grief reaction into perspective.

Religious faith may be a source of comfort or a source of struggle in the face of loss. Being angry at God, religion, the church or a similar faith-based program is not uncommon. Grief is not a weakness, it is a necessity. A loss and its meaning can become part of a happy and healthy life. Immediate reactions to grief (shock, sadness) are known and expected, but we may be unprepared for its long-term manifestations.

## *Symptoms of Bereavement*

The symptoms of grief or bereavement look and feel similar to depression. The symptoms include insomnia, poor appetite, and weight loss for some people. Others may sleep excessively and overeat as a means of coping with the loss. If the symptoms persist for two months or more, professional assistance is recommended.

## *Grief & Loss - Special Circumstances:*

### **Loss of a Significant Relationship**

Loss of a meaningful and intimate relationship through divorce or separation is a common occurrence in today's world. Despite its high prevalence, however, relationship loss constitutes a period of significant emotional hardship, resulting in depression, anxiety and grief.

Committing oneself to a relationship entails creating and accepting a shared vision of the future, a new set of roles and relationships, a new economic unit, and a new social identity. Dissolution of the relationship, therefore, entails multiple losses for both parties. Dreams are shattered, personal and social roles are transformed, economic security is threatened or even destroyed, life styles are radically altered, mutual friends and even family are lost, and self-image is damaged. Generally speaking, the longer the duration of the relationship, the more complex its dissolution and the more significant the losses.

Associated with such losses are many complex emotions typical of grief reactions anger, sadness, guilt, remorse, inadequacy, depression. Complicating such emotions are the peculiarities of the divorce or separation process itself. If the couple has minor children or has acquired property, an extended or adversarial legal process may intensify and prolong painful emotions. Additionally, unlike most other losses, in divorce and separation, most frequently the lost loved one does not disappear. Rather, former partners must struggle to form new relationships that ensure ongoing contact with and responsibility for children as well as provide financial support for children and former partners. Forging and maintaining such relationships with

former loved ones who have been the cause of anger, disappointment, and pain can prolong and heighten the grief process.

In relationship losses which involve children, a parent may experience grief not only for his or her own losses, but also for the emotional and practical losses experienced by others. Believing that they could or should have behaved differently, and thereby preserved the relationship, partners may blame themselves for the sadness and losses experienced by children and close extended family. Such feelings and beliefs may be exacerbated and become even more difficult to manage when children and family, experiencing their own grief, direct their anger and denial at one or both of the separating partners.

Because the family relationship has such extensive meaning in an individual's life, disruption of that relationship is almost certain to have ramifications for the workplace. Typically, when individuals are involved in relationship dissolution, supervisors and colleagues are faced with having to deal with symptoms of anxiety, depression, displaced anger, and loss of focus - in short, their grief.

### **Suicide**

Suicide is the eighth-ranking cause of death in the United States. Although this suggests that death by suicide is not an infrequent occurrence, the particular circumstances and dynamics of suicide pose special challenges to understanding loss and experiencing grief.

Typically people experience immense shock and disbelief when learning of a suicide. This may lead them to ask over long periods of time "why" this happened, if it could have been prevented, and what they might have done to make things different (more attention, more caring, less life stress). Such questions are often accompanied by feelings of guilt as family and friends tell themselves they should have recognized the signs, taken warnings more seriously, or otherwise altered their behavior. Feelings of inadequacy may also trouble those close to a suicide victim. Believing that they somehow let down the individual, or interpreting the suicide as a deliberate rejection, friends and family often feel that had they been more aware, caring and capable, the suicide would not have occurred.

Feelings of guilt and inadequacy will be heightened in some circumstances. Frequently, relationships between the deceased and others have been troubled for a considerable time before the suicide occurs. The more troubled the relationship, the greater may be the feelings of guilt and inadequacy. Additionally, it is not uncommon for individuals not close to the victim to seek to explain the death by "blaming" someone close to the victim, usually the family. Accepting or even anticipating such beliefs further exacerbates feelings of guilt and inadequacy.

Often, because the death frequently occurs at home, family members find the body. In such cases, they might repeatedly relive that experience in their thoughts during the day, or through nightmares. Such experiences may result in increased distraction, anxiety, fears of one's sanity, and physical and emotional exhaustion.

Anger is another common reaction for those close to the suicide victim. Feeling themselves to have been emotionally rejected, made the objects of blame or speculation, or left to handle the emotional and practical difficulties of a sudden and difficult-to-explain death, those close to the victim might experience more anger than would be expected with any other sort of death.

Social beliefs about suicide also increase the difficulties in resolving grief. Because suicide, for the most part, is considered a societal taboo, family and friends frequently wonder who and what they should tell about the cause of death. Feeling shamed or wanting to keep things private, they might be untruthful or vague in describing the cause of death. Feeling that the experience is not acceptable to talk about, they suffer alone, and grief is prolonged.

## Downsizing and Reorganizations

Death and illness are not the only circumstances that can result in feelings of loss. Many times, significant life or work changes contain elements of loss that can be very powerful as well. Specific to the workplace, events such as downsizing, reduction-in-force, mergers and even promotions can result in some grief-like symptoms.

Those who survive and those who fall victim to such organizational events will enter into a process wherein certain aspects of their lives will be altered. There are obvious interpersonal, social, and financial adjustments for individuals who will be removed from the organization. For those who remain, changes in supervision and reporting lines, loss of co-workers, additional or redesigned work, and uncertainty of their role and value are not uncommon and can all accentuate the sense of loss. Individuals in either group have experienced changes that will push them into transitions. In most cases, at least at the outset, individuals will feel that the change “happened to them,” that it was in no way their choosing or under their control. Reactions will be subjective and particular to each individual. They may respond based on previous work or personal experiences and their own history of other losses. One common ground is that most people’s reactions to the workplace event will be more about the losses associated with it than about the change itself.

Though each person brings his or her own personal history and each will focus on their subjective sense of the personal impact of the event, individuals are likely to find themselves having similar feelings about their losses, including: sadness, betrayal, anxiety, fear, mistrust, guilt, anger, depression, and loss of confidence. Some may develop physical symptoms such as headaches, sleep loss, fatigue, appetite changes, restlessness, or poor concentration. Interests and activities previously enjoyed may wane. Significant others, spouses, partners, family, or colleagues may find the individual withdrawn, irritable, and seemingly “not him/herself.” Any one of these might be manageable for most people, but a cluster of loss symptoms can be more difficult to address. An added dilemma is that at the very time the individual is compelled to be sharp, focused and self-motivated in order to reassess and direct their work life, they may be the least capable.

## *Grief & Loss - Guidelines for Co-Workers*

### **When Co-workers Experience a Serious Personal Loss**

- Expect tears and sadness.
- Be open, personal and timely in your expression of sympathy.
- Expect to listen to the story of the grieving staff member more than once.
- Respect privacy - honor closed doors and quiet moments.
- Offer to provide specific and appropriate assistance (e.g., baby-sitting, meals).
- Include co-worker in social plans.
- Accept less than best performance for a while, but expect a return to the best they need to know that you recognize the impact of their loss, but that you have confidence in them.

### **When a Co-worker Is Seriously Ill**

- Keep in contact - let them know she or he is still part of the team.
- Learn what can be shared and what is confidential.
- Organize a system of calls, notes and other gestures of support.

### **When a Co-worker Dies**

- Seek an opportunity to share your feelings with other workers and for them to share theirs with you.
- Be prepared to offer more support to those who were particularly close with the deceased.

- If appropriate, choose a fellow worker to serve as liaison with the family and organize the expression of sympathy flowers, card, donation, etc.

### **What To Do if You Suffer a Significant Loss**

- Accept that grief is normal and healing takes time.
- Anticipate that feelings of overwhelming sadness will recur after the period of intense grief is over. Special times might include holidays, anniversaries, and birthdays.
- Realize that others are uncomfortable and inexperienced at dealing with grief, and be prepared to ask for what you need.
- Share your feelings with friends and family.
- If necessary, talk with your supervisor about a temporary adjustment in work hours or work load.
- Ask about the policy on bereavement leave and ask for additional leave if needed.
- If you require emotional support and assistance contact the FASAP office.

## *Grief & Loss - University Resources*

### **Faculty and Staff Assistance Program**

2076 Administrative Services Building | 1009 Greene St. | Ann Arbor, MI 48109-1432  
734-936-8660 | fasap@umich.edu  
fasap.umich.edu

- Individual, group, and worksite crisis intervention
- Individual and family counseling
- Assessment and regional referral information for support services
- No cost to University staff, family members and operation units

### **Counseling & Psychological Services**

3100 Michigan Union | Ann Arbor, MI 48109  
734-764-8312

- No cost to enrolled students and partners
- Individual counseling
- Grief and loss support groups
- Outreach to University departments and housing units

### **Benefits Office**

Wolverine Tower - Low Rise G405 | Ann Arbor, MI 48109-1278  
734-615-2000 or toll free 1-800-649-3777  
benefits.umich.edu

- Counseling on benefits for survivors (life insurance, health, dental, and retirement) and/or beneficiary of University faculty, staff members and retirees
- Appointments are available to discuss dependent's continuation of medical, life and pension benefits

[www.umich.edu/~fasap](http://www.umich.edu/~fasap)

## *Related University Policies*

In the case of death in the immediate family, the University provides up to three days paid time off work to attend the funeral or interment and make necessary arrangements (SPG 201.3).

**FOR A CURRENT LIST OF AVAILABLE COMMUNITY RESOURCES  
CONTACT FASAP AT 734-936-8660 OR FASAP@UMICH.EDU**

## *Specialty Grief Support Groups and Services*

Contact FASAP for the latest referral contact person for each group

- Bereaved children, adolescent or young adults support
- Caregiver's support
- Compassionate Friends (parents whose children have died)
- Hospice information
- Major illness and physical loss support
- Widows and widowers support
- Support for separated and divorced men and women

[www.umich.edu/~fasap](http://www.umich.edu/~fasap)