Talking about Grief & Coping

Grief is normal.

What is grief?

Unlike burden, grief is often carried alone, without meaningful social recognition or support.

- OB Dementia grief is different than for other terminal illnesses due to communication disruption; no opportunity to resolve and reflect with the individual.
- More than just "sadness". Grief is the *emotional work* of dealing with loss.

When does grieving start?

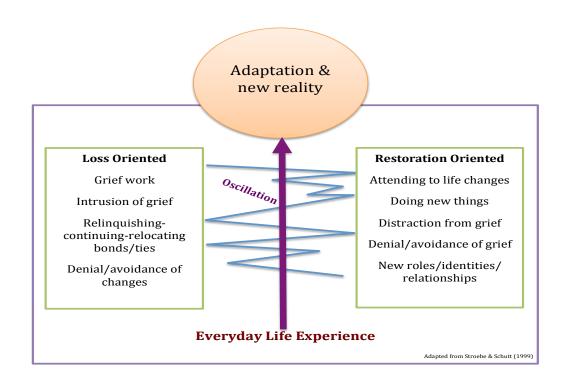
- cs "a series of mini-deaths", "ambiguous loss" of the person disappearing before your eyes while being physically present still,
- cs "the long goodbye"

Dementia care partners experience multiple losses over time:

- © Companionship/intimacy
- **C** Communication
- 12 Plans for life/relationship
- 3 Freedom and loss of control
- Opportunities to resolve the past
- A Losses yet to come (making hard decisions)
- **CS** LTC decisions
- ©3 End of life decisions and dying

Successful grieving requires *both* lossoriented & restoration-oriented work, and people may be in different places at different times.





	cs of "prototypical" caregivers (adapted	
individuals may move	e between these stages in a non-linear, fluid v	vay.
	Adult child CGs	Spousal CGs
Mild/early stages	 Minimization/avoidance of feelings Very task oriented Intellectualized Avoidance of loss-related discussion 	Openly experiencing grief Reality oriented w regard to future Acceptance of changes Recognition and acknowledgment of losses
Moderate/mid- stages	Rapid transition to reality of care Emotions are raw-frustration, anger may be intense, guilt, wishing parent would die, fatalism, sadness for what was Grief focused on self	Smooth transition to reality of care Emotions deeply felt but not raw- mainly sadness, compassion, empathy, mild frustration Grief focused on other
	• Loss focused on other (parent)	• Loss focused on self-aloneness
Severe/later stages	Burden lifted primarily by NH placement Interpersonal regret, lost relationship and opportunities Emotional shift from raw to reflective Focus on loss	 Burden of care eased by NH placement New burden of caring for self Losses are intense- identity as member of a couple, distance from family and friends Emotional shift to rawness- uncertainty about future, anger, bitter, sad Focus on building a new identity
Trajectory overall	Most intense at mid-stage, lessens somewhat at later stage; At death, also lose the identity of CG	Linear increase through stages; At death, also lose the identity of CG and spouse