

LIVING AND GRIEVING TOGETHER

PART 1 OF 6



Crazy Is Normal

Supporting families through intense grief during the early hours, days and weeks following the death of a loved one.

BY ALAN WOLFELT, PH.D.

It's normal for people to feel and act crazy after the death of someone loved. Most funeral directors know this well. As last responders, you are the ones called to support families in their time of need, and for people who have just come to grief, those first hours, days and weeks are often naturally difficult. You have probably witnessed unusual behavior and heard people say many out-of-the-ordinary things.

This six-part series is a reminder that "crazy" is normal in new grief and that funeral directors and staff are essential in holding space for whatever happens and helping families feel affirmed and witnessed in those early hours and days. Adapted from my new book *You're Not Crazy – You're Grieving*, these articles,

I hope, will help support you during your encounters with grieving people, emphasize the importance of your profession and remind you that you, too, need support as you care for people in crisis.

What I Mean By Crazy

First, let's talk about that word. It is no longer considered acceptable in mental health circles, and rightfully so. It stigmatizes mental health issues and places blame and shame on those who suffer from mental health challenges.

Yet "crazy" is the term I've heard grieving people use most often to describe their own early-grief experiences of shock, disorientation, protest emotions and more. I've found they almost always use the word "crazy" to collec-

tively label all their early-grief symptoms. I imagine that you, too, have heard grieving people question whether they are going crazy.

The word comes to us from the 14th century Germanic word *crasen*, which meant to shatter, crush, break into pieces. Before that existed the Old Norse *krasa*, which also meant to shatter. If you pick up an old piece of fine china, you might see a web of fine lines on its surface. This is called crazing. The glaze, normally transparent and invisible, has shattered into tiny sections.

Early grief is equally shattering. It crushes us and breaks us into a million pieces. This experience tends to make us feel, well, "crazed" for a while – for weeks, months and sometimes even years.

So, despite the admonitions, I decided to feature the term crazy in the book after all. I agree it's not an appropriate term for mental illness because it carries too much baggage and stigma. But grief, which is not an illness, often feels crazy in the truest sense of the word because it can shatter people, crush them and make them feel like they're broken into pieces.

Intense Early Thoughts and Feelings

The intensity and strangeness of early grief tend to make people feel crazy. Let's review some of the most powerful symptoms to affirm that they are common and normal.

SHOCK AND NUMBNESS

Shock is a universal, automatic human reaction to traumatic experiences. It is how our bodies instinctively respond in an effort to protect our minds and hearts from shattering new realities.

Shock is an anesthetic, partially numbing us to the crushing pain. Without the initial protection of shock and numbness, we couldn't survive a major loss. Thank goodness for shock!

In the early days following the loss, people often experience physical shock symptoms such as lightheadedness, nausea, heart palpitations and difficulty functioning in their bodies. Emotional shock symptoms include numbness, confusion and dissociation.

During a period of shock, griever may cry intensely, have angry outbursts, shake uncontrollably or even laugh or faint. They might experience manic behaviors as well,

such as cleaning out closets or pacing while talking nonstop. Rest assured that these are all normal shock responses.

Unfortunately, some people may try to discourage or judge shocky behaviors, believing the person to be hysterical or out of control. They may try to inappropriately quiet and placate griever because they themselves would feel more comfortable if the griever appeared composed.

But the reality is that the early days and weeks after a major loss are often an uncontrollable, crazy time. For griever, trying to control themselves could mean suppressing their instinctive responses to the loss. As long as they are not hurting themselves or someone else, or destroying property, it is okay for griever to feel and act out of control during early grief. This includes in your funeral home and in their interactions with you.

DISSOCIATION AND SURREALNESS

Dissociation is a feeling of separation or distance from what is happening around you. This is what griever experience when they say they feel like they are there but not there, or that they are somehow disconnected from experiences that they're right in the middle of. Dissociation can be an aspect of shock. It can feel strange and even scary sometimes, both to the griever and to those observing them, but it's common and normal.

In early grief, people may also feel a sense of surrealness. Surreal means bizarre, irrational, even make-believe. Their minds can interpret that what

is happening can't actually be happening because it is not possible for it to be real.

"It's like a dream," griever often say. "I feel like I might wake up and none of this will have happened." That dream-like aspect of early grief is surrealness. It often feels overwhelming and can be naturally disconcerting, but it happens to almost everyone right after a major loss.

TROUBLE THINKING

It's almost impossible to think clearly in early grief. Brain fog is common; so are problems with short-term memory. Griever might have conversations with others but not remember what they said. Their mind is blocking. They are hearing but can't listen well. They may also feel like they can't get anything done as it is difficult to concentrate long enough to complete tasks. They may struggle with basic daily activities.

As you have observed, these cognitive challenges can make the funeral arrangement process naturally difficult.

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TIME DISTORTION

Human beings are creatures of habit, so when their routines are thrown into disarray by a death, they tend to get disoriented to the passage of time. In early grief, time often seems to race by. On other days, it

crawls. Grievors may not be able to keep track of what day it is and may even find themselves uncertain of the month or season.

Gentle reminders of meetings and required tasks may be necessary to help families in the early days.

SEARCHING AND YEARNING

After someone dies, it's normal for grievors to look for the person or expect them to reappear. In fact, it's one of the most common things people tell me about early grief. Every time they hear their front door or the garage door open,

might catch their breath and think, "There they are!"

This searching behavior is a sign that the griever's mind is trying to process the reality of the death. It can also make them feel crazy because while they *know* that their loved one has died, they don't *fully know* yet.

Intense yearning in early grief is similar. They want the person who died back. They miss them intensely and yearn for them to be present again. The yearning can make them feel crazy because, once again, they know it's impossible for the loved one to return, but they desperately want it any-

way. Yearning is painful and normal.

FATIGUE

In general, grievors typically find themselves tiring more quickly – sometimes even at the start of the day. They may wake up feeling fatigued. This is called the lethargy of grief. It can seem crazy to feel so tired, especially when grievors have not done anything strenuous. However, it's a natural mechanism intended to slow them down and encourage them to get extra rest to care for their body, mind and soul.

I always encourage grievors to lay their body down for 20 minutes a few times a day whenever possible. I tell them to sleep if they can sleep and simply to rest if they can't. This is appropriate counsel for you to offer as well.

Acknowledging the Reality

The intense and surreal thoughts, feelings and behaviors in the very early days after a major loss mostly have to do with one super-challenging need of mourning: acknowledging the reality of the death.

When grievors are confronted with thoughts and reminders of the death, their minds say, "What? This can't be!" And that's often when the crazy-intense grief symptoms come up. They experience shock, dissociation and time distortion. They may feel like they're being hysterical and may not be able to think or sleep. They may experience a level of fatigue beyond anything they've ever felt before.

You might think of these symptoms like aches and pains

caused by the cognitive grief work griever's minds are doing. Yes, work. Acknowledging the death of someone close to you is difficult work for your brain.

I don't think we're born be-

ing able to easily grasp death. It is instinctive to love and it is instinctive to grieve when we're separated from the people we love. But it is not instinctive or innate to think, "Oh, it's just death. One min-

ute alive, the next dead. It's just forever. It's natural. It's fine."

In my experience, with griever's who are able to see and spend time with the body after the death, acknowledging the reality often happens a little more readily. Seeing and touching the body that gave form to the precious person who lived often help the mourner understand the fact of the death. Talking openly about the death and providing answers to any questions they may have can also help satisfy their minds.

Acknowledging The Pain

There is acknowledging the reality of what happened, and then there is dealing with the pain that naturally arises from that reality.

In the early days, shock protects griever's from some of the pain. For their minds and bodies, numbness and dissociation are forms of pain management. Thank goodness for these natural anesthetics.

But still, some of the pain naturally hits them right away and it keeps seeping in each time they think about the death. Even with the protection of shock, they may have experienced moments in the very early days when the pain took their breath away and

dropped them to their knees. Without doubt, you have seen some griever collapse in your presence.

The pain of new grief can feel unbearable. Plus, it can contribute to their feelings of going crazy. How on earth are they supposed to live and function while this pain is going on?

After all, when we experience physical pain, we are accustomed to going to the doctor or pharmacy to get pain relief. There are entire industries and professions devoted

to relieving bodily pain. We're not *expected* to suffer.

Yet grief comes along and we're supposed to just take the pain day after day after day?

First, you can affirm for griever that they are right – the pain can seem unbearable. It is, I believe, among the worst experiences of our lives. You can offer your support, be present to their pain and help them create a meaningful funeral experience.

Second, you can assure them, with appropriate timing and pacing, that their pain

will ease over the course of the coming months.

And third, you can help them understand that the pain of their grief is anchored in their love for the person who died.

Befriending one's pain can seem like a challenging – even antagonistic – notion in early grief. Obviously, it may not be appropriate for you to offer griever this wisdom in the initial days. But it is a truth. Their pain is there for a reason.

Simply affirming that their intense grief and pain are normal can be a helpful first step. ≡

Alan Wolfelt, Ph.D., is recognized as one of North America's leading death educators and grief counselors. His books on grief for both caregivers and grieving people – including You're Not Crazy – You're Grieving, from which this article series is adapted – have sold more than a million copies worldwide and are translated into many languages. Wolfelt is founder and director of Center for Loss and Life Transition and a longtime consultant to funeral service. 970-217-7069; drwolfelt@centerforloss.com; centerforloss.com