Understanding Grief

A plain-language guide to what grief does, and what tends to help.

For general education only. Not a substitute for therapy, diagnosis, or medical care.

What grief is

Grief is the response to a loss that mattered. It follows a death, and it also follows a diagnosis, a separation, a pregnancy loss, a friendship that ended, or a future that will not arrive.

It is not an illness to be cured and it does not move in neat stages. It arrives in waves, often out of order, and it usually softens without disappearing entirely. Two people can lose the same person and grieve very differently.

Ways it often shows up

- In the body: Exhaustion that rest does not fix, appetite change, sleep that runs long or short, tightness in the chest, weeping that arrives without warning, feeling unsteady or ill.
- In thinking and memory: Replaying the last conversation, disbelief that returns in bursts, difficulty concentrating, forgetfulness, searching for the person in ordinary places, questions about belief or meaning.
- In relationships and routine: Withdrawing from people who mean well, irritability with family, anniversaries and dates that land hard, a sense that everyone expects you to be finished with it by now.

What tends to help

- Keep a rough rhythm of sleep and meals, especially in the first months when everything else is unsteady.
- Tell one honest person what the day has actually been like, rather than the version you give strangers.
- Mark the dates that matter in advance, and plan what you will do that day instead of discovering it.
- Move your body most days, even for ten minutes. Grief is physical and movement gives it somewhere to go.
- Keep a photo, an object, or a habit that belongs to the person. Continuing the bond is not the same as being stuck.
- Let the grief arrive when it comes. Postponing it usually lengthens it rather than shortening it.

What tends not to help

- Performing competence for everyone, then collapsing alone.
- Big decisions made on a short timer, when you can make them later.
- Alcohol or sedation used to flatten the feeling.

When to reach out for support

- The grief has not eased at all after many months, or has grown sharper.
- You cannot hold work, caregiving, or a household together.
- You have thoughts of not wanting to be here, or of joining the person you lost.
- You are using alcohol or other substances to get through the day.
- The loss was sudden, violent, or traumatic, or you were unable to say goodbye.

If you are in crisis, call or text 988. If you are in immediate danger, call 911.

A few prompts

1. What did I actually lose, in plain words, including the parts no one else sees?

2. What does the grief seem to want me to know or protect?

3. Which date, place, or song makes it hardest, and what could I do differently that day?

4. Who could I tell this week, even in a sentence?

Questions worth asking a therapist

- How do you work with grief, and would we talk about the person I lost?
- What would you expect to change in the first month or two?
- How do you handle a session when the grief arrives in the room?
- What are your fees, and do you provide superbills for out-of-network claims?

For general education only, not a substitute for therapy, diagnosis, or medical care. These prompts are optional. Stop if completing them increases distress and seek appropriate support. This sheet is not monitored; keep completed notes private. If you are in crisis, call or text 988. If you are in immediate danger, call 911.