

Dealing with sudden death: common grief reactions





SLEEP DISTURBANCE

Sleep

Sleep is essential for our health, memory, concentration, and energy. Without sleep it is hard to work and get things done. Most of us do things around bedtime that make us sleepy and ready for bed. Some people drink warm milk, read a book, or watch late night television to help them settle down; others don't like watching television or reading close to bedtime and won't find these things relaxing. The things we do before bedtime (especially the last hour before bedtime) strongly affect our ability to sleep.



Different people need different amounts of sleep to stay healthy, so there is no definite amount of sleep a person should have.

Just like adults, children's routines before bedtime will affect their sleep. Some things help them to get to sleep quicker, and some things keep them awake. Some children need more or less sleep than average. Some have night time fears that keep them awake.

Dreaming

As well as being necessary for our physical well-being, sleep also allows us to dream. We use dreams to make sense of our emotions, organise our memories, and prepare ourselves for the day to come. Dreams can be senseless, enjoyable, or terrifying; but they all have a use. Normally we forget dreams that don't wake us up.

Nightmares and upsetting dreams are normal following a shock or sudden event. Some dreams might be about what happened or about the person who died. These usually become less frightening and more general as a person come to terms with what has happened.



Sometimes dreams can be so vivid or upsetting that they wake us up; or someone else may waken us when they realise we are having a nightmare. Interrupted dreams, where we wake up before the end, are easier to remember and therefore most upsetting. Even though it may seem uncaring it is better to allow someone to dream and finish nightmares without being wakened.

What are sleep disturbances?

Sleep disturbances are common after the trauma of a sudden death. They can be:

- Difficulty getting to sleep
- Difficulty getting good quality sleep
- Difficulty staying asleep — night waking or waking very early in the morning.

SLEEP DISTURBANCE IN ADULTS AND ADOLESCENTS

Usually people are able to work out their ideal sleeping pattern by themselves, but sometimes sleeping habits change. Everyone experiences sleep disturbance at some time in their life. It is often temporary and most likely to be caused by one or more of the following:

- Stress or difficulty in relaxing
- Background noise
- High or low temperatures
- Sleeping in a different bed/bedroom
- Change of sleeping hours or bedtime
- Side effects of medication, drugs or alcohol.



What makes sleep disturbance worse?

- Drinking alcohol/tea/coffee/caffeine drinks at night
- Smoking before bedtime
- Lack of exercise
- Napping during the day
- Not having a regular bedtime
- Watching TV throughout the night
- Changes to bedtime routine
- Worrying about not sleeping.

Long term or chronic sleep disturbance can be hard to overcome, and will affect emotions, concentration, work, appearance and health.

Sleep disturbance is normal following a sudden death. With time, your sleeping patterns should return to normal without any outside help; however, there are some things you can do which may help overcome your sleeping difficulties.

Improving sleep

You may find that, following a sudden death, you cannot relax or get to sleep like you used to. Relaxation, exercise, diet and planning are ways of improving sleep that do not carry risk in the short and long term. (Although some people find that sleeping pills or alcohol help them get to sleep quicker in the early stages, in the long run these make it more difficult to sleep and feel refreshed).

Awareness and preparation – there are many ways of managing sleep disturbance. Some people need to sleep with music on, others need total silence. Only you can make these individual choices so try out different things and see what works for you.

Your sleeping habits may change over time, for example, it is normal to feel uneasy for a while after a sudden death and you may want to sleep with a light on or in a room with someone else. These are natural feelings, and not being alone or in the dark can help you to relax and get to sleep quicker. However these



solutions may not be practical and you may need to find a suitable long term sleeping arrangement.

Distraction – thoughts and memories of what happened can sometimes stop you getting to sleep (or back to sleep). These thoughts can be brought on by a dream or nightmare, by something that reminded you of what happened, or sometimes at random. Distraction (e.g. playing soft music, counting backwards from 100) is a good way of dealing with these thoughts as they switch attention away from the images or thoughts that are keeping you awake, before they can play out in your head.

Relaxation – most people are good at finding one or two ways of relaxing, that they find calming. However, not all ways of relaxing work for everyone and you may find that what used to relax you doesn't work as well anymore. The following are some popular ways of relaxing:

- Taking a bath
- Reading a book
- Watching TV/Video
- Taking long walks
- Playing sport
- Exercising
- Talking with a friend
- Prayer/Meditation
- Listening to music
- Deep breathing
- Muscular relaxation
- Positive thoughts/images
- Relaxation tape.





Guidelines

Take a flexible approach – your needs and emotions will change as you work through the changes in your life. Be flexible and creative about what you need:

- What works for one person in the family may not work for another
- What works at one time may not work later on
- Men and women are likely to have different coping methods
- Be prepared to try different approaches.

Develop a bedtime routine – a bedtime routine is useful for letting your body know it should get ready for sleep. Preparing for sleep can start early (e.g. avoiding caffeine, nicotine, or alcohol in the four to six hours before bedtime); or five minutes beforehand (e.g. drinking warm milk just before going to bed). If you have high levels of muscle tension or stress take at least half an hour to unwind (e.g. take a warm shower/bath, listen to music).

Staying in bed when you cannot sleep can make things worse. If you cannot sleep after you've gone to bed it may help to get up and keep yourself occupied. Do something relaxing and once you feel sleepy, go back to bed.

- Identify your favourite ways of relaxing at night
- Avoid doing things that make you more alert (drinking tea or coffee, clock-watching, computer games)
- Do something relaxing if you cannot sleep (drink warm milk, listen to soft music)
- Try not to nap or lie in bed during the day
- Restful relaxation is almost as good as sleep, so try not to worry that you are awake at night.





Use distraction – if you can't sleep because you are thinking about what happened, do something to keep your mind occupied. Focusing on a sensation, image, memory, or action can block out all other thoughts.

- Try different methods of distraction until you find one that works well for you (e.g. counting backwards from 100)
- Practice using your chosen distraction during the day
- Use relaxation at night (e.g. soft music or some other calming activity), or exercise during the day to reduce stress.

Make time to think about what happened – set some time aside regularly to think about what happened. You may want to spend this time alone; or with a friend, a therapist or counsellor. You could use this time to create a diary or scrap book to help you work through your feelings and concerns.

- Make time in your daily or weekly routine to think about what happened
- Plan what you will do in this time (e.g. thinking or writing)
- Allow time afterwards for relaxation.

Practice relaxation – relaxation is the quickest way to prepare for sleep. You can practice it alone or with a partner or friend, preferably in a quiet place that you find peaceful. Spend at least ten to twenty minutes during the day practicing relaxation until you feel comfortable doing it. As you continue to practice your body will learn to relax more easily and quickly.

It is helpful to have a way of calming down quickly, for example, deep breathing. It is also a good idea to learn at least one formal relaxation method such as controlled breathing, positive imagery, or progressive muscular relaxation. These three relaxation methods are given at the back of this booklet and are suitable for most people.



- Choose your favourite method of relaxation
- Make time to practice regularly during the day
- Try using more than one method (e.g. muscular relaxation and controlled breathing)
- Decide whether to guide your own relaxation or to have instructions played from a tape or read out by a friend.
- Involve a friend or family member to help you.

SLEEP DISTURBANCE IN CHILDREN

Sleeping patterns change with time, so your child can have different problems at different ages. You may find your child:

- Doesn't want to go to bed
- Wants to sleep in your bed (or a brother/sister's)
- Goes back to wetting the bed after being dry at night
- Has nightmares
- Wakes during the night (regularly, or from time to time)
- Has night terrors (wakes screaming with no memory of a dream)
- Wakes very early in the morning
- Is sleepy or irritable during the day.

Problems like these usually fade with time. However, some children will need support from you to overcome their sleep disturbance (particularly if they have shocking memories or fears about what happened). You can help your child by checking for and dealing with:

- Signs of stress (irritability, anxiety, clinginess)
- Fears about safety (for themselves or other family members)
- Changes to the bedtime routine – different time, activities (stories, tucking in), adults involved, etc.



- Bedtime fears
- Changes to the bed/bedroom – different temperature, amount of background light or noise, etc.
- Side effects of medication (some decongestants affect sleep)
- Lack of exercise
- Naps during the day (if your child is older than 5 years of age)
- Worries that sleeping problems will get worse.

For some children returning to old bedtime routines is comforting, others need to find new ways to wind down at night.

How you can help

Deal with the causes of poor sleep:

Bedtime routines: brushing teeth, reading stories, tucking a child into bed, cuddling, etc. should be carried out by the same person, at a regular time each night. Getting your child back to a familiar and comforting bedtime routine is very reassuring.

Bedroom: changing where your child sleeps also changes the temperature, light level, background noise, and other things that your child is used to when they go to sleep. Try to make any necessary changes as similar to what your child is used to as possible.

Medication: some children's medicines (such as decongestants) interfere with normal sleep so you may need to check this with your GP.

Lack of exercise: exercise during the day helps use excess energy. If your child is not sleepy at night create opportunities for them to take exercise during the day.

Fears about safety: if your child is worried about something happening to themselves, their family or family home take their fears seriously and reassure them that they are safe (e.g. lock doors and windows together at night).



Scary dreams and memories: bedtime and early morning are the times your child is most likely remember or dream about what happened. This can make going to sleep difficult. Comforters such as favourite blankets, toys, and teddies can help.

Sleeping arrangements: your child's sleeping habits may change over time. For example, most children will have concerns about safety following a sudden death and may want to sleep in a room with someone else. It is important to take a balanced approach to meeting these needs. When your child is ready, they will have to sleep and feel safe in a room on their own.

You can address all of the above issues on your own, or your GP or health visitor will help you if you need them to.

Distraction – some children are unable to get to sleep because they cannot stop remembering or thinking about what happened. Distraction is one of the most effective ways of overcoming this. It can involve:

- Switching your child's attention away from memories or thoughts of what happened
- Focusing their attention on something that blocks out other thoughts (e.g. a mental exercise or activity)
- Playing low, soothing background music (loud enough to comfort but quiet enough to allow sleep)
- Providing a favourite toy, or something else that is soothing or relaxing
- Have a method of distraction ready before your child's bedtime.

Relaxation – for a child, relaxation can mean getting good exercise and playtimes during the day; or watching a favourite DVD, listening to music or reading/having a story read to calm them down at night. Having a quiet, safe place to play can be very helpful. Younger children may use favourite toys or blankets as soothers. Following a sudden or shocking event your child may need to find new ways of relaxing.



The following are some popular things children find relaxing:

- Arts and crafts
- Reading/Colouring in
- Watching (suitable) TV
- Sitting on a parents knee
- Being read or sang to
- Repeated play
- Comfort toy/object
- Sports and games
- Exercise
- Board games
- Playing and talking with friends
- Water play
- Structured relaxation (from a tape or parent)
- Music or singing
- Controlled breathing.



Most children are able to find their own ways to relax and play. You can help your child by making sure they get enough time to relax before bed.

Guidelines

Be flexible – try to find your child’s best way of relaxing. Get back to their normal bedtime routine (or a routine as close as possible to normal), and think about the things that may be affecting their sleep. They may have specific fears that you need to deal with.

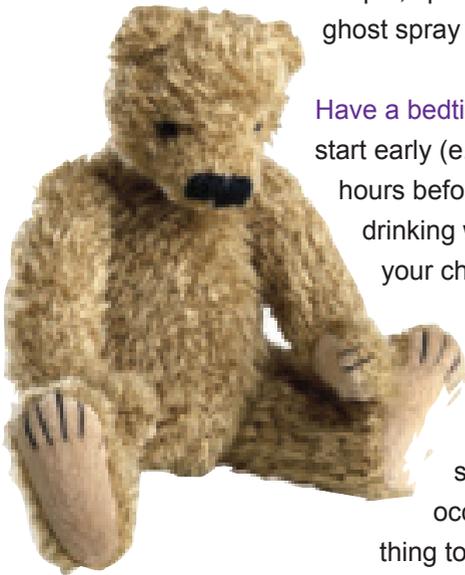
- Be patient – some children will return to normal sleeping quite quickly while others will take longer
- What works for one child may not work for another
- What works at one time may not work later on



- Routines will change as your child gets older
- Be prepared to try different things.

Take your child's fears seriously – your child needs to feel safe before they can sleep. Encourage them to face their fears in creative ways. If you think your child is nervous at night gently encourage them to share any feelings they have and work from there. Do this during the day so that you don't remind your child of their fears near bedtime.

- Take your child's fears seriously and have a safety routine if necessary (e.g. check under bed, lock windows and doors etc.)
- Comfort them going to bed by giving hugs and reassurance
- Talk with them about how to overcome nightmares and other worries. Creative or fun ideas will appeal to some children
- Practice these ideas during the day until your child is comfortable using them. Get your child to imagine what they will do when they have a nightmare, for example, special karate chops to kill monsters, anti-ghost spray cans or becoming invisible to bad people.



Have a bedtime routine – getting ready for bed can start early (e.g. no sugary drinks or foods for two hours before bed); or five minutes beforehand (e.g. drinking warm milk just before going to bed). If your child is not sleepy or is stressed, give them thirty minutes to an hour to wind down using quiet activities like colouring in or reading. If they cannot sleep after they have gone to bed give them something quiet to do to keep them occupied and relaxed. This is the next best thing to sleep.



- Have a routine of soothing things you and your child can do for up to one hour before bedtime
- Avoid activities that make your child more alert, for example, rough play, eating sugary foods and playing computer games
- Avoid drinks in the evening if your child has started bedwetting again, and get them to use the toilet just before getting into bed
- Provide a toy for your child to play with, or a comic for them to read if they cannot sleep.

Aim to build up a consistent and reassuring routine. When children have safety fears and find it difficult to sleep being alone in their own bed can make things worse. Sleeping in a room with someone else often helps them relax and sleep soundly, but not being able to sleep alone is not helpful in the long term. It is important to gradually return them to their normal sleeping routine over time, for example they may initially sleep in your bed and have a staged return to their own bed.

Deal with upsetting thoughts and memories – these can be scary and prevent your child from relaxing enough to sleep. Use distraction or relaxation to prevent or block these thoughts out. Children will not know how to do this for themselves.

- Practice using distraction (or relaxation) with your child until they can do it for themselves
- Make sure your child gets enough relaxation and exercise
- Set time aside during the day to talk with your child about their upsetting thoughts and memories. Think about what triggers these thoughts and how they relate to what happened. Reassure your child that it is normal to have upsetting thoughts.

Relaxation – this is the best way to prepare for sleep. Children can become very good at this in a short space of time. They learn to relax more quickly with practice so spend ten to twenty minutes a day practising relaxation until they feel they can



do it alone. There are three formal relaxation methods that are suitable for older children at the back of this booklet. Younger children can be soothed by stroking their back, brushing their hair, cuddles etc.

- Practice a method of relaxation regularly with your child
- Practice during the day as well (not just at bedtime)
- Try using more than one method (e.g. muscular relaxation and then controlled breathing)
- Try to make the experience fun and creative.

DEALING WITH NIGHTMARES

Facts about nightmares

- Nightmares are a normal part of childhood from the ages of about three or four years upwards
- Most people are not awake or aware of their nightmares
- Nightmares, like dreams, are a natural way of dealing with painful or emotional issues
- Although nightmares can be very vivid, even to the point where they wake a person up, they are usually more distressing to the person watching than the one dreaming
- Dreams and nightmares are meant to be forgotten and they will be if time isn't spent thinking about them immediately afterwards.

Guidelines for night time

- Allow people who are having nightmares to continue dreaming (this can be the hardest thing to do). They can be gently soothed by softly-spoken reassurance, singing or holding, that does not wake them up properly but can divert the flow of the nightmare
- Work towards getting them back to sound sleep as soon as possible, this means avoiding the “wake up, wake up – you’re having a nightmare” approach.



People will have trouble getting back to sleep if they wake up scared

- If they wake up hold them, make soothing noises, put on soft lighting and stay with them until they calm down. Give a child what comforts them, for example, their favourite teddy or blanket
- Only allow your child to sleep in your bed as a last resort; instead try leaving a light on in their room, playing low music or sleeping in their bed with them
- Do not share any of the details of what you heard or suspect the nightmares are about, the person will most likely forget it when they wake up. Take your cue for action from them: ask them if they slept well or how they feel when they get up in the morning.

Guidelines for day time

If the person has no anxiety about nightmares:

- Avoid discussing nightmares, but talk about feelings of sadness and grief.

If the person has anxiety about nightmares:

- Discuss nightmares; try to get them to describe what they feel. They may be able to trace the nightmare back to their trauma and need help to deal with specific fears or memories
- Help them feel safe but avoid making them feel that you've saved them or protected them from anything
- Help the person realise dreams and nightmares only exist in their imagination, and that they cannot be hurt or controlled by them
- Get them to imagine happy endings to their nightmares or bad dreams. After some practice, these will be remembered in the nights to come.

The future

Sleep disturbance is one of the first signs of stress, and often the last to disappear. It is a natural response to sudden or dramatic changes in your life. Most people will have some trouble sleeping or dreaming after a sudden death. Unless there is an ongoing medical or physical reason for disturbed sleep, you will return to your normal sleeping pattern with care and support.



Sometimes sleep disturbance continues because poor sleep can become a habit. This may affect work, education, family, friendships or health. Understanding more about sleep and trying out some of the suggestions included in this booklet may help you or your child get back to a normal sleeping pattern. If sleeping patterns do not return to normal you should consult your GP, for further information on sleep disturbance or help with related difficulties such as anxiety or intrusions.

Sleep disturbance can start at the time of the death and then re-appear around the time of anniversaries, birthdays and other occasions; or even a number of years later if something reminds you of what happened.



INTRUSIONS

What are intrusions?

Intrusions are powerful memories, thoughts or feelings about what happened (or about the person who died), that are difficult to ignore. They may be upsetting and make it hard for you to concentrate or forget what happened.

Intrusions occur when your normal flow of thoughts is interrupted and you are reminded powerfully of what happened. They happen following a reminder of the trauma (e.g. the smell of smoke, a loud noise, the sight of blood, or a news story). Sometimes they happen at quiet times (e.g. around bedtime or first thing in the morning); sometimes they seem to appear at random.

They can be repetitive, and sometimes the only thing you can think about. Although they are difficult to control, they are a normal reaction following a sudden death.

For some people intrusions may not be distressing at all, others find them very upsetting. Some can interfere with your ability to work, concentrate and sleep; or make you angry, sad, or afraid. Usually, you will find you get fewer intrusions as time goes by, and that they become less upsetting. However, if intrusions are making it difficult to get on with life there are ways of managing them.

Types of intrusions

Nightmares – these are one of the most common forms of intrusion, and are a natural reaction to a sudden death. It is normal to have some type of night waking, disturbed sleep, disturbing dreams, nightmares or night terrors following a bad fright or scare. Bad dreams and nightmares following sudden death are not always about what actually happened.

Repetitive thoughts – these are everyday fantasies, daydreams, and imaginary situations that run through your head during the course of the day. They can be



triggered at random or by a reminder (e.g. something seen, heard, or smelled). Repetitive thoughts can be:

- “Why did it have to happen?” or “Why me?”
- Memories of what happened
- Impulses such as the urge to check doors and windows.

Unlike normal daydreams which can be enjoyable or neutral, you may find intrusions of this type unpleasant. They may make you feel sad, agitated, guilty, angry, or less hopeful about the future.

Flashbacks – these are like daydreams only more intense and realistic. People who have flashbacks feel as if they are back at the time of death, being able to see, smell, feel, or hear what happened in great detail. Some people have vivid daydreams about what they imagine happened. During a flashback or vivid daydream:

- The event is re-experienced very vividly
- It feels very frightening or scary
- Your emotions take over
- Your breathing and pulse become faster.

Flashbacks can seem difficult or impossible to control, but they can be managed with specialist help. For most people flashbacks will fade with time.

Repetitive play/actions – this is a form of intrusion that usually only affects children. After a sudden death, they may repeatedly act out what happened through play. This is normal for children and may help them understand what happened. Older children and adults may find that they repeat activities as a way of going over what happened or as a means of coping. These actions usually fade with time.



Ways of managing intrusions

Avoidance of unnecessary reminders – some places, people, or objects will remind you of the person who died or what happened. These may overwhelm you when you need to be in control (e.g. during school or working hours). At night they may affect your sleep or dreams. You can manage the stress of intrusions by:

- Avoiding thinking about what happened during work or school and making time to do so later
- Avoiding painful reminders (e.g. location of the death) until you feel ready to deal with them
- Avoiding being alone late at night or at other times when your powerful memories usually come.

As time goes on the strength of your intrusions will weaken.

Distraction – this is the most effective way of dealing with intrusions when they happen. When an intrusion occurs, if you deliberately think of something else it won't be able to play out in your head. There are simple ways of thought-stopping to help you interrupt an intrusion. They are quick movements or thoughts that demand your attention.

- Shout “STOP” in your head or out loud
- Clap your hands or snap your fingers quickly
- Snap an elastic band that you wear on your wrist.

Once you stop the intrusion you need to prevent it starting up again. Distracting your mind with an enjoyable job or mental exercise is a useful way to do this.

Examples of distraction include:

- A sensation (slowing down breathing)
- An action (counting backwards in threes from a hundred, singing)



- A thought (replacing negative thoughts with good ones or positive memories).

Some methods of distraction will suit you more than others, so find those that work for you and practice them.

Relaxation – being able to relax is important following a sudden death. Learning to relax can take time, especially if you feel unsafe.

People relax in different ways, from taking a bath, reading a book or watching television; to long walks, running or playing sports. Not all ways of relaxing suit everyone, but most people will find at least one that works for them. Relaxing helps you calm down after upsetting thoughts or memories. Following a sudden death you may find that what used to relax you doesn't work as well anymore. The following are some popular ways to relax:

- Yoga
- Walking
- Jogging
- Exercise
- Music
- Fresh air
- Games
- Reading
- Hobbies
- Socialising
- Fitness training
- Controlled breathing
- Massage
- Phoning friends
- Structured relaxation
- Taking a bath
- Prayer/meditation.





Guidelines

Take a flexible approach – your needs and emotions will change over time. Be flexible and creative in helping yourself.

- What works for one person in the family may not work for another
- What works at one time may not work later on
- Men and women are likely to cope in different ways
- Be prepared to try different things.

Make time to think about the things that worry you – you may be tempted to avoid thinking about what happened if it is too distressing. Having a set time (every day or week) to think about this is helpful. You may want to do this alone; or with a trusted friend, a therapist or counsellor. You can use this time to create a diary or scrapbook to help work through their worries and other feelings.

- Make time for thinking in your daily or weekly routine
- Plan what has to be done in this time (e.g. reflection, writing)
- Spend time doing something relaxing or enjoyable afterwards.

Be aware of your reminders – some things will remind you of what happened. Knowing what these are and when to expect them will give you more control and can make life less overwhelming.

- Identify the people, places, memories or other things that remind you of what happened
- Be prepared for reminders due to media involvement or legal processes.

Develop ways to deal with reminders – use distraction and thought stopping to deal with intrusions. For powerful reminders (e.g. inquest or court case) use relaxation, deep-breathing, or having a friend or family member with you to reduce distress. Having a good cry from time to time may help clear your head and deal with reminders. Whatever method you chose, practice it to make sure it works.



- Practice thought stopping or mental distraction to stop your intrusions
- Use relaxation and/or exercise
- Make time to think about your intrusions, when and how they arise, or what they mean to you.

Manage the reminders in your life – avoid too many reminders of what happened until you feel ready. If intrusions affect your concentration, memory, or emotional state then you will need to take time away from things that remind you of what happened. It is a good idea to control or limit your reminders, so that you can get used to them at a manageable pace.

- Be aware of your limits
- Identify reminders which are overwhelming
- Develop a plan for making severe triggers more manageable (e.g. having someone else around to calm you down).

Beware of using coping methods that will become a problem in the long term, such as the use of alcohol and drugs.

The future

Most intrusive memories will weaken and fade over time, with the most intense intrusions occurring in the first two years. If your intrusions do not fade with time or if they interfere with work, education, or family life you may wish to consult your GP for help with related difficulties (such as sleep disturbance) or further information on specialist services which manage traumatic bereavement. Intrusions can start at the time of the death and then re-appear around the time of anniversaries, birthdays and other occasions; or even a number of years later if something, perhaps in the media, reminds you of what happened.



ANGER

What is anger?

Anger is a normal emotion that can vary from annoyance to rage. It is natural for us to have different levels of anger at different times in our lives.

Anger is caused by what other people do to us and by what we do ourselves. Stress, upsetting memories, poor sleep, drugs, alcohol, illness, worry and poor communication all play a role in making us angry. It is okay to feel angry, but it is important to remember that acting on this feeling usually makes things worse.

Anger is a natural response when we feel threatened. The brain releases hormones and other chemicals to give a rush of energy. The way we think changes, so that we focus on feeling threatened or wronged instead of what other people think. In highly threatening situations this can be the way we protect ourselves as a last resort.

Sudden death can make people very angry. Dealing with unfairness, blame, abandonment and, at the same time, having to carry on with life is difficult. Anger will resolve itself with time, but sometimes you need help to control your anger or express it safely.

Usually you know if you have a problem with anger. You may act in ways that feel frightening or out of control, or sometimes other people (especially family members) will notice a change. Things that were not a problem in the past may now make you very angry.

Managing anger

The goal of anger management is to reduce the physical and emotional pressure to act out aggression. This is done by identifying your anger triggers (e.g. not being listened to) and developing a plan for dealing with these as they arise. You can learn techniques such as relaxation (deep breathing) or distraction (counting)



to control anger; or use safe methods of expressing anger (exercise or keeping an anger diary).

Awareness and preparation – this is the most effective way to manage anger. Finding out what causes your anger and planning what to do when things go wrong can give you back a sense of control.

It is important to recognise the changes that occur when you begin to get angry:

- Heart beat speeding up
- Breathing speeding up
- Frowning
- Feeling flushed
- Tension in the shoulders
- Headache
- Racing thoughts
- Shaking/sweating.

Once you feel these changes you know you are getting angry and need to do something to stop it. You may choose to ignore the feeling, to avoid other people until you are feeling calmer; or to use relaxation or distraction to calm down immediately. You could also release your anger in a safe way (shouting into a pillow, taking exercise).

Talking to a friend or keeping an anger diary of when and how anger builds up can help you see patterns in your reactions. See if there are triggers for your anger:

- Places, people, times, or occasions
- Memories of what happened
- Stress and lack of sleep
- Caffeine, alcohol, drugs
- Family members, co-workers, finances.



Avoidance – avoidance is a good way of managing the sources of your stress. Sudden death can leave you with overwhelming feelings of sadness, anger, and injustice. Memories and reminders of what happened will be difficult to deal with early on. Avoid unnecessary reminders and responsibilities until you are ready for them. For example, you may avoid thinking about what happened during working hours, but make time to think about it later.

Distraction – distraction is a good way of dealing with anger when you can't avoid the situation. Switch your attention away from your anger when it is destructive and think about what causes it when you feel calmer.

Try to focus on:

- A sensation (slowing down breathing)
- An action (counting backwards in threes from a hundred)
- A thought (repeating “I am calm” to yourself).

Some methods of distraction will suit you more than others, so choose one that works for you. Sometimes the distraction can be something that relaxes you, such as taking long deep breaths to calm down or listening to music. Using distraction will give you back more control over your emotions and thinking.

Relaxation – being able to relax is important following a sudden death. Learning to relax can take time, especially if you feel unsafe.

People relax in different ways, from taking a bath, reading a book or watching television; to long walks, running or playing sports. Not all ways of relaxing suit everyone, but most people will find at least one that works for them.

Relaxing is an important way of





calming down after a bout of anger or a hard day. Following a sudden death you may find that what used to relax you doesn't work as well anymore. The following are some popular ways to relax:

- Yoga
- Walking
- Jogging
- Exercise
- Music
- Fresh air
- Games
- Reading
- Hobbies
- Socialising
- Fitness training
- Controlled breathing
- Massage
- Phoning friends
- Structured relaxation.

Guidelines

Be flexible – your needs and emotions will change as you work through the changes in your grief and anger. Be flexible and creative in helping yourself:

- What works for one person in the family may not work for another
- What works at one time may not work later on
- Men and women are likely to cope in different ways
- Be prepared to try different things.

Make time to think about what happened – you may be tempted to avoid thinking about what happened if it is too distressing. Having a set time (every day or week) to think about it will allow you to prepare for being upset and angry. You may want



to do this alone: or with a trusted friend, therapist or counsellor. You could use this time to create a scrapbook or diary to help work through your feelings and concerns.

- Make time for thinking in your daily or weekly routine
- Plan what you will do during this time (e.g. reflection, writing)
- Allow time afterwards for relaxation.

Speak about your feelings – talking things through can remove the need for anger. This is because it allows you to release emotional stress and make yourself understood without the need for aggression. When you are angry, a lot of what you say and do will affect other people and make the situation worse. Bottling up your anger and saying nothing will also make things worse. If you avoid talking about the underlying causes of your anger or hide it, it will surface again later.

Try to think about why you are angry, and talk to a friend about it when you are calm. Ask them to help you identify the early warning signs.

- Think about how you act when angry (and how you would like to act instead)
- Think through what you want to say before speaking to someone (this may feel slow at first but you will get faster)
- Speak in a clear voice, and go slowly
- Listen to other people and their concerns
- Check that people understand you
- Make your complaints as specific as possible (try not to use words like always, never, and every time)
- Keep talking.

Be prepared for triggers – find out exactly where, when, and what makes you angry (e.g. not being listened to), and use this to understand why you react the way you do. Knowing your personal warning signs that anger is on the rise (e.g. flushed face, faster heart beat and breathing) can help you stop it before it takes



hold. If you have to face a situation that will definitely make you angry take a friend with you to help you stay calm, or practice relaxation before and after you go there.

- Find out what triggers your anger – do certain things, people, or situations make you angry more than others? Why?
- Be aware of day-to-day triggers (e.g. finance, work, other people)
- Be aware of your warning signs (e.g. faster heart rate).

Find ways of dealing with your anger – practice how to deal with anger. Some people use distraction to take a step back from their anger, others use relaxation, humour, or the support of a friend or family member. Think about what works best for you. The method you choose should be something you are comfortable with and you can use at any time.

- Identify and practice a method of distraction (e.g. a happy memory, a breathing exercise) to interrupt angry thoughts
- Remind yourself that you are in control of your anger and can overcome it
- Use relaxation or exercise to reduce stress
- Make time to think about what triggers your anger, and why that is important to you
- Express anger in a controlled way (e.g. in an anger diary, shouting into a pillow)
- Get help and advice from others.

The future

Many people, following a sudden death, will experience only moderate amounts of excessive anger, or none at all. Anger is likely to be directed at particular people or groups, and should fade and or be resolved naturally without having to complete any of the steps outlined here.

For some people, anger can take longer to fade, and will affect work, education,



family, sleep, etc. It can be helpful to understand more about anger, how to recognise it before it takes control, and how to develop your own ways of managing it.

If your anger does not fade with time or causes you a lot of distress you may wish to consult your GP, health visitor, social worker and the websites listed at the end of this leaflet for further information on anger management or help with related difficulties (such as anxiety or sleep disturbance). Your GP will also have information on specialist services which manage anger and traumatic bereavement.

Anger can start at the time of the death and then re-appear around the time of anniversaries, birthdays and other occasions; or even a number of years later if something, perhaps in the media, reminds you of what happened.



RELAXATION TECHNIQUES

Deep breathing

One of the main reasons many of us are tense is our breathing. Most people breathe very shallowly, using only the top part of their lungs. Deep breathing allows you to use your entire lungs, providing more oxygen to your body. It is probably the most effective and beneficial method of relaxation.

1. Lie on your back or sit in a relaxed position
2. Slowly relax your body, starting with your feet and moving through every part of your body until you have reached – and relaxed – your face and head
3. Check over your body to see if there are any remaining areas of tension. If so, relax them
4. Slowly breathe in:
 - (a) First fill the very bottom of your stomach
 - (b) Then your entire stomach area
 - (c) Then your chest
 - (d) Finally the top of your lungs almost up to your shoulders
5. Hold for a second or two, and then begin to exhale. Empty the very bottom of your lungs first, then the middle, then finally the top.

Continue this breathing for 4 or 5 minutes. Don't force your breathing; it's not a contest to see how much air you can take in. Just do it in a relaxed, peaceful manner. Deep breathing is the basis of a lot of relaxation techniques, and once mastered, can be used with either progressive muscular relaxation or guided imagery to help further relaxation.

Progressive muscular relaxation

One of the most common reactions to stress is muscle tension. Deep muscle relaxation helps to relax your entire body from head to toe by first tensing, about 15 minutes and can be done almost anywhere.



1. Sit or lie down and close your eyes
2. Tense the muscles in your hands by making a tight fist
3. Hold for 5 seconds
4. Relax your fist and feel the difference between tension and relaxation in these muscles
5. Move on to the forearms and upper arms (both sides separately), then feet, calves, thighs, buttocks, belly, lower back, chest, shoulders, neck, and face (e.g. jaw and forehead).

By the time you have focused on all the areas of your body, your muscle tension will have drained away and you'll feel relaxed. Use deep breathing or other relaxation technique to maintain this state.

Guided imagery

Lie in bed with your eyes closed and imagine you are in your favourite, most peaceful place. It may be on a beach, a hilltop, a garden, or somewhere you feel peaceful. It does not have to be a real place, as long as you can picture it in your mind.

Imagine you are there now. You can see your surroundings, hear the peaceful sounds, smell the fragrance of the flowers, and feel the warmth of the sun or whatever sensations are there. Just relax and enjoy it - and drift off to sleep.

Once you've found a place that's especially peaceful and effective, you'll find that the more you use it, the more you can count on it to help you relax and get to sleep. Its comfort and familiarity will make it more and more effective.

The worry stone

A worry stone is a small smoothed stone (small enough to fit in the palm of a small child) which is rubbed, rolled, squeezed, or squashed whenever a child feels worried. Children's worries are sucked into the stone, where they become trapped and unable to bother anyone. The more a child uses a stone the more powerful it



becomes and the quicker it absorbs worries. Children have used worry stones through history – they are a free, easy, and private way to control anxiety. Nowadays people use them to help control worries, quit smoking, reduce panic-attacks, and control bad memories or thoughts.

- Either buy a worry stone or select a small, smooth stone from a beach/garden
- It is best to pick a few worry stones and then let your child decide which one they want to use
- The stones can be painted or carved afterwards, but they work just as well if left blank.
- It is best to pick a small, smooth stone because it will allow your child to carry it round in their pockets without damaging clothes, or to use the stone in a public place without being noticed
- Make sure you wash the stone clean of germs before use.



Sit down with your child and explain to them how to use a worry stone:

- Worry stones suck up worries like sponges suck up water
- Once a worry is in a worry stone, it can never get out
- When you want to get rid of a worry, close your eyes, and squeeze the stone gently until it is tight in your hand (you may want to demonstrate or practice this with your child)
- Concentrate on the stone in your hand and imagine the worry getting trapped in the strong hard stone as you squeeze
- When you open your eyes, the worry will be gone and you can relax
- The more you use worry stones the better they become at taking your worries away.



Some children will want to bring their worry stone to school or bed with them. There are different rules for using worry stones in these places.

- When in school, leave the stone in your pocket or someplace near where it is out of view. You don't have to close your eyes when you use a worry stone in school, just squeezing and imagining the worry getting trapped will be enough. As time goes by you will get better at using your worry stone like this, and will be able to use it in class or on the street without anyone noticing. (It is important to inform teachers about worry stones – otherwise teachers may take them away)
- When in bed, don't keep the stone in your hand or in a pocket. Leave the stone in a safe place near the bed (e.g. a locker top) where you can reach for it if you need it. This means you will be able to get the stone without having to turn on the light or move very much.

If your child feels that the worry stone is full or not working as well:

- Washing worry stones in clear water washes all the worries out of them
- Washed worry stones are brand new and completely empty; they will suck up worries extra fast.



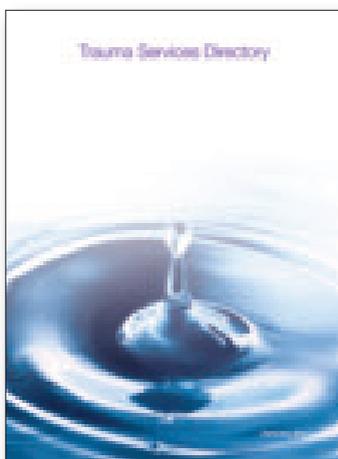
Availability of booklets and bibliography

The booklets in this series:

- Dealing with sudden death: helping children and adolescents
- Dealing with sudden death: information for young people
- Dealing with sudden death in adulthood
- Dealing with sudden death: common grief reactions

are available electronically to download from the bereavement page on Belfast Health and Social Care website - www.belfasttrust.hscni.net and Cope with Life website www.copewithlife.org.uk

The Eastern Trauma Advisory Panel Services Directory provides information on a range of support services that are available through the health service, voluntary and community-based organisations, which offer specialist provision for individuals and families affected by the trauma of the 'Troubles'. Psychotherapy and counselling, training, befriending and social support are available. The directory is also available electronically to download from the bereavement page on Belfast Health and Social Care website - www.belfasttrust.hscni.net





Books for children

“Mum, will dad ever come back?” by Paula Hogan
Publisher: Blackwell Raintree ISBN 086256-002-0

“Remembering Mum” by G. Perkins & L. Morris
Publisher: A&C Black ISBN 0-7136-4541-5

“The goodbye boat” by M. Joslin
Publisher: Lion ISBN 07459-3693-8

Books for teenagers

“Straight talk about death for teenagers” by Earl Grollman
Publisher: Beacon Press ISBN 0-8070-2501-1

“Facing change: falling apart and coming together again in the teen years” by D. O’Toole
Publisher: Compassion Press ISBN 1-878321-11-0

“Tiger eyes” by Judy Blume
Publisher: MacMillan ISBN 0-330-26954-2

“The Charlie Barber treatment” by C. Lloyd
Publisher: Walker ISBN 0-7445-5457-8

 South Eastern Health
and Social Care Trust

 Belfast Health and
Social Care Trust

BT10-551

