



Australian Government
Department of Defence

Grief

Defence Mental Health & Wellbeing





*'Mental health and wellbeing is the state in which the individual realises his or her own abilities, can cope with normal stress of life, can work productively and is able to make a contribution to his or her community'**

Defence's vision is that our people – military and public servants – experience positive mental health and wellbeing. *They are Fit to Fight – Fit to Work – Fit for Life.*

*World Health Organization

Everyone at some point in their life will experience grief in some form. Grief is a simple word to describe a complex and often bewildering reaction following a loss.

Feelings of grief are not only evoked by death or injury. Other loss events such as divorce or separation, miscarriage, loss of job, possessions, home, health or status can also cause grief. The grief process involves a range of reactions that can leave you feeling helpless, upset, sad, confused and/or angry. There is no right or wrong way to cope with grief and the information provided here is designed to help you recognise many of the common responses to loss. This information can help you cope better with your feelings, as intense and unfamiliar as they may be.

Why do I feel so bad?

Grief is a complex process. Initially you may feel numbness, disbelief and shock. During this period you may continue doing things for a person who has left or died. This state helps to protect you from the intense hurt of the loss. You may be surprised that the world around you continues unchanged even when you feel that your world has been shattered. As days, weeks and months go by, some of these initial reactions will pass as other stages of grief follow, including anger, sadness and finally acceptance. Along the way, you may notice some of the following reactions:

Physical reactions

Physically your body may ache with tension. You may experience stomach pains, headaches, changes in appetite, low energy and motivation, or poor sleep.

Other reactions may include:

- crying
- breathlessness
- nausea
- agitation and restlessness
- being particularly susceptible to illness.

Emotional/Behavioural reactions

Some people have experiences, such as seeing their loved one's face in a crowd, dreams involving the loved one, or crying when they experience a particular smell. These experiences are common and normal for someone grieving the loss of a loved one. It is very common for people, after a sudden loss, to imagine all the 'what ifs'. Some may even feel guilty or blame themselves for the loss.

Some may feel their lives have lost purpose and some bereaved people describe wanting to die themselves. Other common emotional, psychological and spiritual reactions experienced during grief include:

- poor concentration
- fear
- panic
- loss of meaning
- depression
- guilt
- anger
- disconnection from religion or beliefs
- sadness
- withdrawal from friends and family.

How to best cope during the grieving process

- be slow to make any life-changing decisions in the early stages of grief
- recognise your grief as a natural part of the healing process
- use writing, art and music to let out your feelings
- try to connect with your great sense of meaning
- maintain a healthy diet, routine exercise and sleep routines
- be patient and give yourself time. There is no set time-frame for the grief process
- expect that although you will continue to get better, along the way there will be good and bad days
- ask for help and support from family members, friends or support groups
- talk with others who have experienced loss and grief
- practice your religious and/or spiritual activities such as meditation, prayer
- tell people what helps and what doesn't
- schedule some time to speak with the Chaplain or your own spiritual advisor
- attend any memorials or ceremonies that may be held in remembrance of the loved one, as these provide an opportunity to talk to others who may be feeling the same way you are
- be cautious. Grief cannot be sidestepped or cured by medication, alcohol or drugs. However, it may be appropriate to talk to your treating medical practitioner or grief counsellor or psychologist if you feel your symptoms are prolonged or unbearably intense.

What to avoid during the grieving process

Strategies such as making significant changes in your life—moving house or changing job, may feel good at the time, but are unlikely to help you cope with your grief. Whilst it is sometimes helpful to engage in activities which take your mind off your loss for short periods (to allow yourself some emotional relief), continual avoidance of thinking or talking about your loss may prolong the grieving process. Feel free to give yourself, and others, permission to speak about your lost loved one. It is much better to allow yourself some times each day to think about your loss and remember your loved one in ways that are meaningful to you. Remember too, that talking to someone you trust about your loss may help you progress in your grief.

How best to support a grieving person

- be patient and non-judgemental and offer support at times and in ways that the grieving person indicates will be helpful
- avoid unhelpful statements like ‘there is always someone worse off than you’, or ‘they (the person who has died) wouldn’t want you to be sad’, etc.
- keep in touch and don’t avoid them
- be prepared to spend time listening carefully and attentively
- share memories and stories and don’t be afraid to talk about the loss
- encourage them to accept help and support and assist them to find information
- take care of yourself — be fair to yourself as well as the person who needs support.

Where to seek help

If you or someone in your workplace is in crisis and you think immediate action is needed, call **Emergency Services 000**, contact your doctor or local mental health crisis service, or go to your local hospital emergency department.

Emergency contact information – 24 hours

If you or someone you know needs help, call:

- Emergency on **000**
- Lifeline on **13 11 14**
- Suicide Call Back Service on **1300 659 467**.

ADF

Contact your local on base Health Centre, Mental Health Professional or the Duty Officer/Officer of the Day for immediate assistance and referrals.

The ADF Health and Wellbeing Portal is an online health information resource tool for ADF members and their families www.defence.gov.au/health/healthportal/

Your chain of command is a primary resource that can provide advice, referral and support.

Military Chaplains are connected to all ships/units/bases around Australia and on Operations. They can provide all-hours support and appropriate referral. To access Defence Chaplaincy support, call **1300 333 362** and ask to speak to the Duty Chaplain from your area and service.

The ADF Mental Health All-hours Support Line (ASL) is a confidential telephone service for ADF members and their families available 24/7 on **1800 628 036** or if calling from overseas **+61 2 9425 3878**.

If you are away from base, or for out-of-hours assistance, you can call **1800 IMSICK (1800 467 425)** to locate the nearest support.

Defence Family Helpline (1800 624 608) The Defence Family Helpline is available 24/7 for ADF Members and their families, and is staffed by qualified human services professionals including social workers and psychologists. Defence Community Organisation website is: **www.defence.gov.au/dco**

The National Welfare Coordination Centre (NWCC)

Serving Families of Deployed Australian Defence Personnel.

As part of the Headquarters Joint Operations Command, the National Welfare Coordination Centre (NWCC) provides a 24 hour support, referral and information service for families of Defence personnel deployed on operations and exercises. **1800 801 026** or **+ 61 2 6127 1812**.

Sexual Misconduct Prevention and Response Office (SeMPRO)

SeMPRO offers advice, guidance and support to current and former Defence personnel who have been affected by sexual misconduct, whether the incident is current or historical.

This includes support to ADF cadets, officers and instructors of cadets, APS personnel, commanders, managers, supervisors, support people and families affected by sexual misconduct. **1800 736 776 (1800SeMPRO)**.

Open Arms – Veterans and Families Counselling (formerly WVC): is a national mental health service that provides 24-hour free and confidential counselling, group programs and suicide prevention training for current and ex-serving ADF members, and their family. To get support or to find out more, call **1800 011 046** or visit **www.OpenArms.gov.au**

APS (and Reservists)

Defence Employee Assistance Program (EAP) (including the Reserve Assistance Program – RAP). The EAP provides short term confidential counselling and support for employees and immediate family members (if eligible). It is easily accessible, voluntary and can provide support on a range of personal and work related issues. The Defence EAP can be accessed by calling **1300 687 327**.