



Five Myths of Grief

by Hope Edelman, author of *Motherless Daughters* and *The AfterGrief*

Widespread ideas about grief float around in popular culture. They're tempting to believe, but some of these conceptions are actually misconceptions.

Allowing our beliefs about grief to change is an important step toward self-compassion and self-care in the aftermath of a loss. These five pervasive cultural messages are ready to be re-examined and revised.

Myth #1: Grief happens in stages.

For 50 years, a common cultural belief was that grief occurs in linear, sequential stages, moving from denial to anger to bargaining, and then through depression on the way to acceptance. Those stages were introduced in Dr. Elisabeth Kubler Ross's groundbreaking 1969 book *On Death and Dying*. But they were meant to describe the stages that terminally ill patients went through as they prepared for the end of their lives. They were never meant to be applied to the mourners left behind.

The Five Stages of Grief, as they came to be known, quickly became a broad cultural assumption about the way we adjust to major loss. Which is too bad, because only two stages of grief really matter to most people: The one in which we feel really bad, and the one in which we feel better. This second part is where life feels bearable again. It's made up of long periods of calm punctuated by occasional "grief spikes" around anniversaries, holidays, milestones, and other significant occasions. Having a grief spike months or years after a loss doesn't mean you've gotten grief wrong. It means you're grieving like the majority of other people do, too.

Myth #2: I need to let go.

Grief theory of the 20th century was all about breaking emotional ties, letting go, and moving on. Unfortunately, that rarely worked for those of us who wanted – and who *needed* – to carry memories and affection for our loved ones forward. Fortunately, 21st century thinking has moved beyond the idea of letting go. Which is good, since trying to "let go" can cause unnecessary suffering when the love we still feel needs a place to go.

Contemporary grief thinking now emphasizes finding meaningful, healthy ways to stay internally connected to deceased loved ones. An inner connection can mean anything from engaging in their favorite hobby to naming a child after them to starting a foundation in their name. Whatever you choose will be highly individual and specific to the relationship you had with that person. Ongoing connections can vary even among family members who lost the same person. What's important to your healing is to keep your loved one's memory alive in ways that feel comforting to you.

Myth #3: I never grieved my (mother/father/child/sister/brother/partner/best friend)

Most of us envision grief as a state of visible emotional distress. But grief comes in many forms. A feminine style, for example, includes emoting and reaching out for comfort. A masculine style of grief typically involves problem solving and action. A man might work through his grief by creating a video montage or working on home repairs. You may have grieved in ways you haven't recognized. Only rarely does someone avoid having any response to a major loss.

Let's reframe this sentence to assert that everyone grieves to the best of his or her ability at a given moment in time, and that sometimes this ability is very limited. Children, for example, need adults who can give them permission and support to grieve. Without it, their grief will often be delayed. Some mourners may not have the emotional or financial resources to seek out support after a loss. Others may need to focus on short-term survival needs or caring for dependents first. Depending on your ethnicity, religion, or race you might feel out of sync with the traditions of your heritage. None of this means that you didn't grieve properly. It means that you may not have been able to grieve in a way that you or others expected of you.

Myth #4: If I allow myself to start crying, I won't ever be able to stop.

Emotional states are temporary by definition. A crying episode for a man usually lasts two to three minutes. For women, six minutes is the average. Only in extreme cases do tears continue nonstop for more than an hour. In fact, it's physiologically impossible to start crying and never stop.

But that's not really what this statement is talking about, is it?

A fear of uncontrollable crying is also a fear of experiencing deep sorrow without the presence of another person to help us contain and process our emotions. Finding someone who can companion you in your grief, who can listen with curiosity and compassion without needing to judge or interrupt or fix you, can go a long way toward decreasing this fear.

Remember: compassionate listening takes practice. You may find that a trusted friend, relative, or partner isn't able to do this for you. This doesn't mean you're talking too much or saying something wrong. It means only that you need to look for someone else to confide in who has already acquired the skill.

Myth #5: Your loved one wouldn't want you to be sad.

I heard this all the time after my mother died. But was it true? My mother, I hope, would have wanted me to have the freedom and permission to feel whatever I felt. Your loved one might have wanted that for you, too. This myth often says more about the speaker's discomfort with emotion than about you or your loved one. A response like, "That's not how I see it" or "Grief doesn't work that way for me" usually helps neutralize the original statement.

Someone you loved died. That's a tragic event, and sadness is an appropriate response. It's an extension of the love you felt and still feel for the person who died. You have every right to feel that love, and to feel the grief that comes with the loss of that person in the physical world – and also to draw comfort from the feelings of connection that remain.