Managing grief and loss
As CATS/peer supporters working in your community with families affected by HIV, it is likely you have witnessed and even experienced grief and loss.

CATS/peer supporters meet families affected by HIV every day who may have lost family members, neighbours and friends. Working with children in these families, you have a really important role in supporting children and young people around grief and loss. However, you also need to consider your own emotional wellbeing, and be prepared for how grief and loss can affect you.

Grief and loss can have impacts on psycho-social wellbeing and it is important that you are able to recognise these and have strategies to support young people during difficult times.
Experiencing grief is a natural and healthy process after losing a loved one but people will experience grief in different ways. Coping with grief and loss is linked to context and culture, how we explain death, how we grieve and how we remember people. There are different ways people have tried to explain the stages that human beings go through linked to grief and loss. One example describes 5 stages of grief\(^1\). People can go through and return to any one of these stages at any time.

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\(^1\) Dr. Elisabeth Kübler-Ross(1969) On Death and Dying. Routledge
The 5 stages of grief

1. **DENIAL**: This is linked to emotional shock, loss and emptiness. People initially feel it is not something that can have happened. This is a way to block out the initial shock and pain.

2. **ANGER**: This can be in the form of explosive emotions and behaviours such as aggression, violence and self-harm. This is often in reaction to feelings of unfairness or the lack of control.

3. **BARGAINING**: This is when people begin to ask lots of questions to understand if they could have done something to change the situation. It can also be linked to people thinking that if they stop doing something or change something, things will get better.

4. **DEPRESSION**: This can be when grief deepens, and the reality of the loss creates feelings of hopelessness. This is the stage when people may withdraw, suffer from lack of sleep, emotional dependency and stop doing simple tasks. This deep sadness is part of the healing and is natural. However, if it goes on for a long time and worsens, people may need some additional support.

5. **ACCEPTANCE**: This comes with an understanding or realisation about the permanence of loss, and people begin to think about what life will become. It doesn’t mean everything is OK, but it is about seeing things more clearly. Some people can feel guilty as they start to enjoy life again or start new relationships. Sometimes they worry this means they have forgotten or don’t care about the person they have lost, but it is a sign of their ability to adjust to life without their loved one.
For some, these stages do not describe their experience of grief and loss and another model was developed that recognised that people may not want to accept the loss of a loved one and say ‘goodbye’, but they might want to ‘Say hello again’. This model is about keeping the connection. This might be through talking privately to the deceased person or performing rituals that help them remember and keep in touch with the dead person.

- Talking about the deceased person in a natural way whenever you feel like it.
- Keeping some of the things that will remind you about the deceased person (which will help to build a bridge between you and the person who died).
- Visiting the grave.
- Talking to the dead person, or including them in your prayers.
- Making a memory book or memory box, in which photos, objects and other things that remind you of the dead person are stored.

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Many cultures have rituals and ceremonies around death and loss such as a family or community gathering, several weeks or months after the death happened. It is important for families to have these opportunities to grieve together. These are times for families to reaffirm their support for one another.

For some people sharing their feelings about loss may be difficult. As CATS/peer supporters you can provide a safe space for young people to talk and to share their feelings without creating more sadness. This is especially important for children who perhaps have never seen such feelings expressed or are worried about the impact of their feelings on others such as family members.
What you can do;

- Let them know **you want to understand**
- Remember they are likely to **need multiple types of support**, and you may need to ask others to help
- **Be honest** in answering their questions. **Don’t make things up**, otherwise they might create stories that are inaccurate and do not support the healing process.
- **Be careful of saying things** like ‘**He was too good for this world**’, ‘**God chose him**’ or ‘**She is sleeping with the angels**’ as these can cause confusion and guilt.
- Reassure them that their **feelings are normal**
- Help them **remember the person** in a positive way
- **A person should never be rushed into accepting a loss.** Usually, the individual knows what is best and will grieve when they are ready. For some, grieving may be so painful that they try to avoid going through the process until they are ready.
- **Do not judge or label** a person’s grieving process.
- Provide **space for grieving to continue**; - ask how they are doing on a regular basis, specifically around their loss as they may not have another space to talk about it.
- **Remember that children of different ages** will process grief and loss in different ways
  - Young children often don’t understand the finality of death; they often see it as reversible and that the person can one day come back.
Young children can be deeply affected by the emotions of others; seeing adults grieving can be distressing for them.

School-age children make associations with ‘the reasons’ for something, which can lead to fears and anxieties or worry about consequences. They can feel guilty that they could have done things to prevent it, or feel it is their fault.

Teenagers often struggle with emotional extremes; they can feel anger, despair and reject family support, and in those cases CATS/ peer supporters can be critical. Extreme emotions can trigger previous mental health issues or dependencies.

Try to provide normality and stability for these children; be a regular and consistent person who supports them. Use their existing support network by asking them who they feel close to and can reach out to for support when they need it.

Be there to listen and remember that even sharing silence and just being with someone, can be an important comfort.

Look after yourself, talk to people about how things are impacting on you and ask for support if there are things that you are unsure about or are worrying you.

READY+ aims to advance sexual and reproductive health and rights (SRHR), psychological wellbeing, care and treatment with, by and for 30,000 adolescents and young people living with HIV in Mozambique, eSwatini, Tanzania and Zimbabwe. The programme is being implemented by an innovative and multi-disciplinary consortium of youth, SRHR, HIV and communication partners. READY+ is one of a portfolio of projects being implemented under the READY programme.

For more information, visit https://frontlineaids.org/our-work-includes/ready/