When a Wave of Grief Hits

A full Support Hub article about understanding grief with warmth, depth and practical guidance.

What a grief wave can feel like

A grief wave is the sudden experience of loss becoming intensely present. It can happen in the middle of an ordinary day. You may be working, shopping, driving, making tea or talking to somebody when a memory, thought or sensation changes the emotional landscape within seconds. Sometimes there is an obvious trigger. Sometimes the wave seems to arrive without explanation.

The wave may involve crying, longing, anger, disbelief, panic, numbness, nausea, heaviness, shaking or a feeling that you cannot breathe properly. Thoughts can become absolute: 'I cannot do this', 'Nothing will ever be all right', or 'I need them here now'. In that moment, the intensity can make it difficult to remember that feelings change.

Grief coming in waves does not mean you are back at the beginning. Cruse notes that painful feelings can return months or years later and that grief is not linear. A wave is an experience occurring within your ongoing adaptation, not proof that adaptation has failed.

Make the moment smaller

When the nervous system is overwhelmed, thinking about the rest of your life can make the wave larger. Bring the time horizon closer. You do not need to know how you will cope next Christmas, next year or for the rest of your life. You need to get through the next few minutes safely.

If possible, stop what you are doing and move somewhere with less demand. Sit down. Put both feet on the floor or lean against something solid. If you are driving, pull over safely. If you are at work, use a quiet room, bathroom, outside space or agreed wellbeing area.

Simple language can help: 'A grief wave has hit. I do not need to make decisions while it is this intense.' The aim is not to talk yourself out of grief. It is to reduce the number of additional problems your brain is trying to solve while emotion is at its highest.

Grounding that respects the person

Grounding means reconnecting with the present environment when thoughts and emotion have become overwhelming. It does not have to involve a formal exercise. You might notice the pressure of the chair beneath you, hold a cold drink, name objects in the room, stroke a pet, listen to one familiar song or wrap yourself in a blanket.

Some people like structured sensory exercises; others find them irritating when distressed. Neurodivergent people may have strong sensory preferences, so a commonly recommended technique may actually increase overload. Choose what genuinely regulates you.

Breathing exercises are similar. A gentle longer out-breath can help some people, but focusing on breathing can make panic worse for others. There is no requirement to use breathwork. Walking, rocking, humming, pressure, visual focus or contact with a trusted person can all provide anchors.

Let somebody know

A wave can become more frightening when you feel you must hide it. Consider having one or two people who understand what you mean when you send a short message such as 'A wave has hit. Can you stay on the phone for ten minutes?' This removes the need to explain the whole story when language is difficult.

Be specific about what helps. You might want somebody to talk normally while you listen, sit silently with you, remind you to drink water, help you leave a public place or simply confirm that they are there. Support does not always mean discussing the loss.

If you regularly experience waves at work, a simple plan with a manager can reduce fear: where you can go, who you can contact, whether you can take a short break and how you will signal that you need space.

Allow emotion without making it dangerous

A wave often becomes harder when a person is fighting both the grief and the fact that grief is happening. If you are somewhere safe, you can allow crying, silence, anger, prayer, writing or speaking the person's name. Emotion does not have to be elegant.

At the same time, intense emotion is not the best moment for irreversible decisions. Avoid sending messages you may regret, driving if you cannot concentrate, using substances to force the feeling away, or making major decisions about relationships, work or finances while highly overwhelmed.

If the urge is to hurt yourself, or you feel unable to stay safe, the priority changes from riding a wave to obtaining urgent support. Contact an appropriate crisis or emergency service, a trusted person who can stay with you, or Samaritans on 116 123.

After the peak

A grief wave can leave the body exhausted. You may feel embarrassed about crying in public, frustrated that plans were interrupted or worried that the intensity means something is wrong. Try not to add judgement to depletion.

Aftercare can be simple: drink, eat something manageable, wash your face, change clothes, reduce the next demand and rest. If you need to cancel something, you do not owe everybody a detailed explanation. 'I have had a difficult bereavement day and need to rest' is enough.

It can help to notice what supported you. Did going outside help? Was a particular person calming? Did silence work better than talking? Each wave can teach you something about the conditions that make grief more bearable.

Build a personal grief-wave plan

A plan is most useful when written before the next wave. Keep it short enough to read when concentration is poor. Include the places where you feel safest, two or three grounding options, people you can contact, medication or medical information if relevant, and the things you should avoid doing while overwhelmed.

You can also list reminders that are true when the wave tells you otherwise: 'This feeling has changed before.' 'I can miss them and still be safe.' 'I do not have to solve tomorrow tonight.' 'I can ask for company.' Use language that sounds like you rather than generic affirmations you do not believe.

If waves are frequent, severe or connected with traumatic memories, professional support may help you understand what is happening and develop a more individual plan. The goal is not to eliminate every wave. It is to increase safety, choice and confidence when one arrives.

Living between the waves

People sometimes become frightened of feeling better because calm seems to make the next wave unpredictable. They may scan constantly for grief, avoid enjoyable activities or feel guilty when they laugh. This can make life increasingly narrow.

A quieter period is not betrayal. It is part of the nervous system having space to recover. You can miss somebody and become absorbed in a film. You can grieve and enjoy a meal. You can have a good day and cry at night. These experiences do not cancel each other.

Over time, many people find there is more life between waves. The waves may still be powerful, but they are no longer the only weather. Learning that intensity can rise and fall is itself a form of confidence.

Therapy, support and when to ask for more help

Grief does not have to reach crisis point before support is appropriate. Some people want to talk soon after a loss; others prefer to rely on family, friends, faith, community or their own routines and only seek professional support later. Not everyone needs counselling. What matters is having choices.

Person-centred counselling can provide a private, non-judgemental space where you are not expected to perform grief in a particular way. Bereavement counselling may be helpful when you want to explore the relationship, the circumstances of the death, guilt, anger, identity, family changes or the practical reality of living after loss. Where a death was frightening, sudden or traumatic, a suitably qualified trauma-informed practitioner may be appropriate, particularly if intrusive memories, nightmares, avoidance or a persistent sense of threat are dominating everyday life.

Couples or family therapy can be useful when grief is exposing very different coping styles. One person may need to talk repeatedly while another becomes quiet; one may want photographs and rituals around them while another finds reminders unbearable. Therapy can help people understand that difference without automatically interpreting it as rejection or lack of love.

Speak with your GP when grief is having a substantial effect on sleep, appetite, physical symptoms, anxiety, depression or your ability to manage daily life. NHS guidance also describes prolonged grief disorder, where severe grief remains persistently disabling and a person may struggle to accept the death or return to ordinary activities. Suicidal thoughts require prompt support. If you feel unable to keep yourself safe, seek urgent help; Samaritans can be contacted free on 116 123, day or night.

A Message From Me

When a wave hits, you do not have to work out the rest of your life. Make the moment smaller. Find somewhere safe, contact somebody if you need them and let the intensity change at its own pace.

I want you to give yourself permission to be where you are rather than where you think you should be. There is no prize for grieving quickly, quietly or neatly. Some days may contain tears; others may contain ordinary life, laughter or even joy. Both can belong to the same grief.

On difficult days, make life smaller. Drink something. Eat what is manageable. Sit somewhere you feel safe. Let something non-urgent wait. Tell somebody if you need company. You do not have to carry every part of the future today.

And when life begins to feel lighter in places, let it. Living does not mean forgetting. New memories do not erase old ones, and moments of happiness do not reduce the love that came before them.

With warmth,
Maggie
Space to Breathe Therapy

Books that may help

Grief Works - Julia Samuel. A broad, compassionate exploration of bereavement and the many forms grief can take.

The Plain Guide to Grief - John Wilson. Clear, accessible explanations of grief and practical ways of understanding what may be happening.

It's OK That You're Not OK - Megan Devine. Particularly helpful for challenging the pressure to make grief tidy, positive or quickly resolved.

The Grieving Brain - Mary-Frances O'Connor. Explores grief through the lens of learning, attachment, memory and the brain.

A Grief Observed - C. S. Lewis. A personal account of bereavement that captures contradiction, pain, questioning and the changing experience of loss.

Places to find support

Cruse Bereavement Support - bereavement information and support. Helpline: 0808 808 1677. cruse.org.uk

NHS - grief, bereavement and loss information, GP support and NHS Talking Therapies. nhs.uk

Samaritans - free emotional support, day or night. Call 116 123. samaritans.org

The Good Grief Trust - bereavement information and signposting. thegoodgrieftrust.org

Space to Breathe Therapy Support Hub - further mental health and wellbeing resources. spacetobreathetherapy.co.uk