

Living and Ambiguous Grief - When There Is No Clear Ending

Understanding the different forms and experiences of grief

Understanding this form of grief

Some losses have no clear ending. A person may still be alive but the relationship has changed through dementia, addiction, estrangement, serious illness, disappearance or another major change.

There is no requirement to experience grief in a particular order or to reach a particular emotional milestone. What matters is understanding your own response, noticing what support is useful and allowing the significance of the loss to be recognised.

How it can feel

This is sometimes described as ambiguous or living grief. It can be particularly difficult because there may be no funeral, ritual or recognised point at which other people understand that grieving has begun.

There is no requirement to experience grief in a particular order or to reach a particular emotional milestone. What matters is understanding your own response, noticing what support is useful and allowing the significance of the loss to be recognised.

Why this grief can be difficult

The person may move repeatedly between hope and loss. They may miss who somebody was, the relationship they once had, or a future that can no longer happen in the expected way.

There is no requirement to experience grief in a particular order or to reach a particular emotional milestone. What matters is understanding your own response, noticing what support is useful and allowing the significance of the loss to be recognised.

What may help

Validation matters. A loss does not have to involve death to have a profound emotional impact.

There is no requirement to experience grief in a particular order or to reach a particular emotional milestone. What matters is understanding your own response, noticing what support is useful and allowing the significance of the loss to be recognised.

Emotional and physical effects

Grief can affect sleep, appetite, energy, concentration, memory, digestion, muscle tension and anxiety as well as mood. New, severe, persistent or worrying physical symptoms should be medically checked rather than automatically attributed to grief.

Supporting yourself

Keep expectations realistic. Simple food, drinks, rest, daylight, manageable movement, written reminders and practical help can reduce pressure. Connection can help, but time alone can also be important. There is no single coping strategy that suits everybody.

Therapy and additional support

Not everyone needs counselling. Person-centred or bereavement counselling can provide a place to talk without being hurried. A GP can help if grief, depression, anxiety, trauma symptoms or physical problems are substantially affecting daily life. Where a death was traumatic, trauma-focused work should be undertaken with an appropriately qualified practitioner when suitable.

A Message From Me

Grief is not a test you have to pass. Different losses create different experiences, and two people can live through the same event and grieve in completely different ways. I hope this guide helps you put words around what you are carrying and reminds you that you do not have to force your grief into somebody else's timetable.

Books and places for support

Grief Works - Julia Samuel
The Grieving Brain - Mary-Frances O'Connor
It's OK That You're Not OK - Megan Devine
The Plain Guide to Grief - John Wilson

Cruse Bereavement Support
NHS grief, bereavement and loss information
Samaritans: 116 123
Space to Breathe Therapy - Support Hub

With warmth,

Maggie

Space to Breathe Therapy