



Grief in the Workplace

Strengthening Through Compassion

Making the Case for Good Grief and Bereavement Care in the Workplace

A position paper for employers, employee representative organisations and policymakers



**Irish
Hospice
Foundation**

To die and grieve well wherever the place

Acknowledgements

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Table of Contents

1.	Introduction	4
2.	The Nature of Grief	7
3.	The Grieving Employee	10
4.	Types of Workplace Grief	13
	4.1 Personal Grief	
	4.2 Professional grief	
	4.3 Traumatic and Sudden Workplace Deaths	
5	Why Support Grief in the Workplace – the Business Case	16
	5.1 It is the right thing to do	
	5.2 It is the legal thing to do	
	5.2.1 Risk to employee health and safety	
	5.2.2 Risk of disenfranchisement	
	5.2.3 Risk of work-related stress and burnout	
	5.2.4 Risk of exclusion or discrimination	
	5.3 It is the cost-effective thing to do	
6.	Using a Health Promotion Approach to Achieve Change	27
	6.1 Building and maintaining healthy and grief supportive environments	
	6.2 Planning around the factors that determine the course of grief and identifying potential vulnerabilities	
	6.2.1 The Workplace within a larger system of influence	
	6.3 Coordinated action	
7.	Conclusion	36
8.	Recommendations	37
	8.1 Recommendations for Employers	
	8.2 Recommendations for Policy Makers	
	8.3 Recommendations for Unions and Employee Representative Organisations	
9.	Appendices	38
	9.1 Appendix Statutory Leave Entitlements	
	9.2 Appendix National and International Workplace Health Promotion Strategies	
	9.3 Appendix The Social Determinants of Health	

We are Irish Hospice Foundation

We are the national charity that addresses dying, death and bereavement in Ireland.

Our Vision

is an Ireland where people experiencing dying, death and bereavement are provided with the care and the support they need.

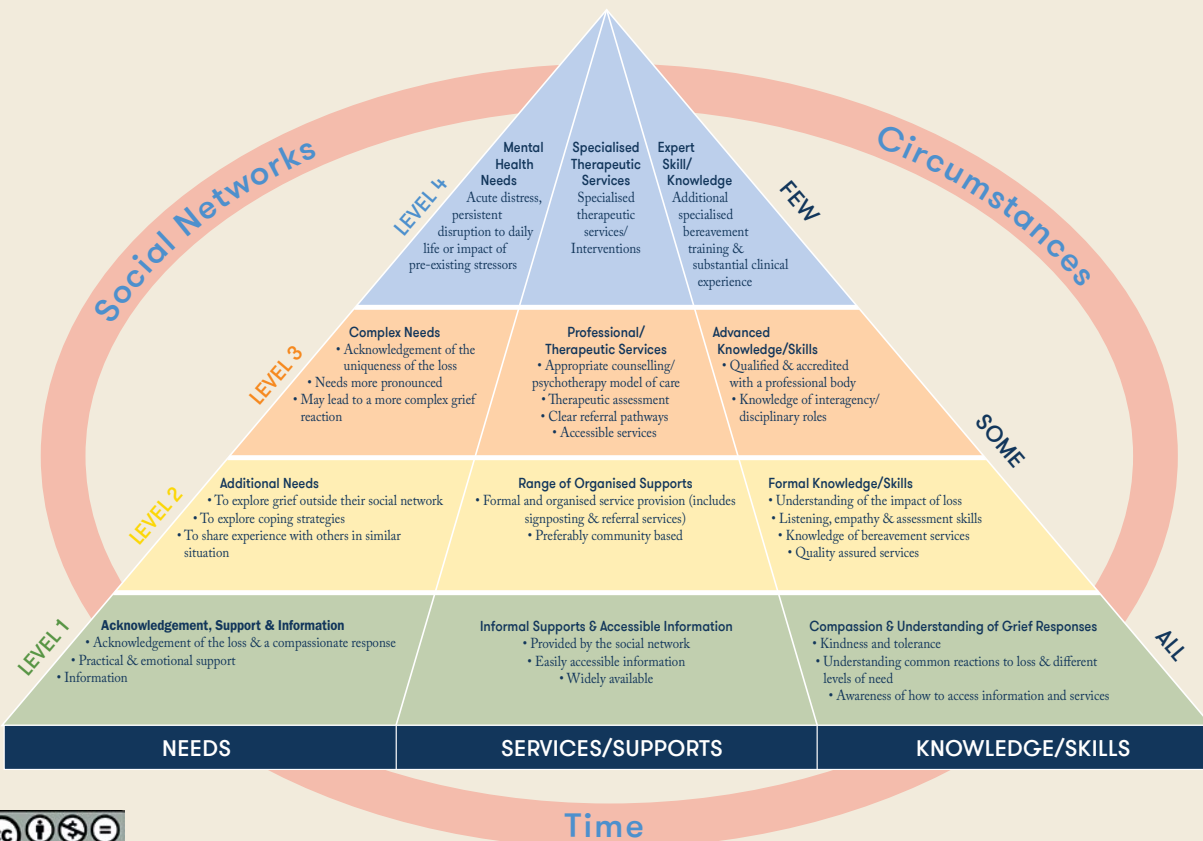
Our Mission

is to work towards the best end-of-life and bereavement care for all.

At Irish Hospice Foundation (IHF), we normalise death and bereavement, as one of life's certainties. It is everyone's business, including our communities, our workplaces and our healthcare systems.

In Ireland, there are approximately 35,000 deaths per year, almost 100 every day¹ and for every person who dies, at least 10 others will be impacted by this.² Many people will be working at the time they experience a bereavement making employers significant stakeholders in supporting those who are bereaved or grieving. We conceptualise how employee health and wellbeing can be protected, promoted and enhanced in the workplace, creating necessary foundations for better grieving. A workplace health promoting approach has benefits for individuals, family, community and the economy, keeping people well and in work for longer. With a population that is ageing³ and living through the aftermath of a global pandemic, there is a growing need for effective bereavement support, and workplaces provide an accessible route to deliver this type of care.

Figure 1: Adult Bereavement Care Pyramid, Irish Hospice Foundation, 2020





In the absence of a national and policy-driven approach to bereavement care, Irish Hospice Foundation developed the Adult Bereavement Care Pyramid (Figure 1 on previous page).⁴ This work was supported by the HSE and developed in partnership with other Non-Government Organisations (NGOs) working in bereavement support. Using a public health approach, the framework identifies 4 levels indicating where people's needs can be met and the type of support they require when bereaved:

- 1. Level 1:** Most people's bereavement needs can be met within Level 1 of the pyramid which includes acknowledgement of the loss, compassionate responses and access to information, from their immediate personal and social networks (i.e. families, friends and colleagues)
- 2. Level 2:** Some people will need additional support outside of their social network such as peer support groups within their community that specialise in supporting their particular situation (e.g. Anam Cara supports parents who are bereaved)
- 3. Level 3:** Some people will need to access appropriate counselling and psychotherapy to help them cope with their loss which needs to be readily accessible within their community
- 4. Level 4:** Few people will need specialised therapeutic intervention to help them cope with what is described as a prolonged or complex reaction to their loss.

Employers have a responsibility within Level 1 of this framework to acknowledge and support employee grief.

Building on grief literacy and compassionate 'level 1' supports, more specific actions are required for those meeting more challenges in their grief – some of this responsibility also lies within the workplace. Using this public health approach, IHF have been running a successful Grief in the Workplace (GITW) programme for a number of years with good engagement from the corporate, civil service, health and voluntary sectors. In 2018, IHF conducted research that showed the vast majority of employees require a compassionate workplace response in the aftermath of a bereavement with almost one in three stating they would consider leaving their job if not treated appropriately.⁵

This highlights the significance of the employer's role in a person's grieving experience and the influence this can have on a person's career and life.

Over the last number of years, IHF have developed a [suite of training, educational resources and interventions](#) (eLearning, online webinars and workshops) for employees experiencing both personal and professional loss. IHF strengthened partnerships with both employer (IBEC, CIPD, ISME) and employee (ICTU, ForSa and the Financial Services Union) representative groups and networks, increasing the reach of the programme and in 2021 releasing the '[Responding to Suicide – A Guide for Employers](#)' to support workforces experiencing suicide bereavement.

Covid-19 was a catalyst for significant developments in IHF's Grief in the Workplace programme as the need for bereavement support in the workplace was highlighted amidst isolation, remote working and the threat of multiple deaths. A mutual experience of compounded loss and interrupted mourning encouraged more conversations about grief and as a result drew attention to the need for appropriate and effective workplace bereavement support. In health and social care, frontline workers experienced significantly high levels of professional loss during a chaotic and traumatic time. Consequently, the conversation about grief in the workplace, the impact on employees, and the responsibilities of employers became more prominent in research and the media. IHF responded by launching the Grief in the Workplace [e-Learning courses](#), self-directed learning tools for managers and employees in health and all work sectors who wished to learn more about grief and coping. The e-Learning platform allowed IHF to extend their reach.

In this position paper, IHF continue the conversation about the importance of grief in the workplace by positioning grief as a key determinant of workplace wellbeing and presenting the case for effective grief in the workplace support.

This paper is a call to action to employers, employee representative organisations and to policy makers to utilise the workplace as a key health promotion setting for good grief and bereavement care and to recognise how this contributes to healthier individuals, families, communities and society.

Further to this, **we call for policy makers to support employers to do this through the enactment of statutory paid bereavement leave and to normalise bereavement, loss and grief in health promotion agendas.**

The paper uses current workplace and health promotion literature to demonstrate that grief is a significant risk to employee health, safety and welfare. As part of the updates to the grief in the workplace programme, consultation with employees working across several settings was undertaken to capture the lived reality and diversity of grief experiences and quotes from interview participants were used to support the literature review in this paper. No identifying information is used and participants gave their consent.

The research was used to demonstrate that supporting grieving employees makes good business sense from a moral, legal and cost perspective while effectively protecting and enhancing employee health and overall wellbeing. Both the health and business case will be explored in detail by presenting the rationale for policymakers and employers. It will explore the common characteristics across health promotion models that can be used to shape a Grief in the Workplace programme or intervention, giving employers the reassurance that these actions are evidence-based and supported by national and international health promotion organisations

such as the World Health Organisation (WHO) and Healthy Ireland (HI), a government-led initiative aiming to enhance the health and wellbeing of the Irish population.⁶

After reading this document, it is our hope that employers will have a rationale for supporting their employees effectively and sufficiently when grieving and that policy makers will be committed to making legislative changes to support bereaved employees and ensure it is recognised within national policy.

Section 1: Understanding Grief and Why it Matters

The Nature of Grief

“Grief is a near-universal painful human experience. The days, weeks, and months following the death of a loved one are among the most painful and life altering times most people will ever face.” (Levesque et al. et al. 2023, p. 1).⁷

Grief is the process a person goes through when they experience a death or a significant loss in their lives.

Grief is a painful and an often unpredictable process that is unique to each person and does not happen in specific stages or have a specific timeframe or end date^{8, 9} as is sometimes assumed. It is both a personal (individual) and interpersonal process (interaction with others) that stays with a person throughout their lives, ebbing and flowing depending on many factors.^{10, 11}

The impact of grief is multifaceted affecting all aspects of a person’s health and wellbeing including their physical, mental, emotional and spiritual health^{8, 12}

Grief is more than an emotional response; a grieving person may feel tired and exhausted, have difficulty concentrating, experience physical symptoms, anxiety and self-doubt.

There is a substantial body of research demonstrating the impact of grief on psychological and emotional health describing a decline in wellbeing.^{13, 14, 15, 16} The death of a person can incur further losses, such as loss of household income, loss of childcare, or a career, which are sometimes referred to as the secondary losses of bereavement and can affect a person's core identity.¹⁰

Secondary losses: additional losses that occur as a result of a bereavement (e.g. loss of household income, loss of childcare, loss of support).

Grief can be all-consuming, it shake a person's core, bringing into question their own beliefs as they attempt to make meaning of a death.¹⁷ Grief, by its very nature can be a lonely and isolating experience when a person is missing a significant attachment in their lives but also because they may feel misunderstood, unheard and unsupported in their grief.¹⁸ Often people around them cannot find the words or find it difficult to sit with the uncomfortable feelings leading them to avoid the person or the topic. Grief does not happen in isolation from normal life and a grieving person must process emotion, and the implications of their loss while also continuing to live – and work.¹⁰ The challenge is to process pain of grief, while simultaneously adjusting to a new environment without this person. It is often said that grieving is hard work. People say grief changes them, life carries on and as humans we learn to adapt and respond to this change 'growing around grief' rather than simply moving on or 'getting over it'.¹¹

"Grief can split a person in two and can change the course of your life."

Manager - IHF Focus Group Participant

With the right understanding, support and conditions, people can and do manage and cope with grief. In fact, most people are naturally supported within their immediate family, community and working environments, provided there is a collective understanding of grief, and an acceptance that grieving is difficult. Grief is not an illness, rather a difficult life process that can at times be invisible to others. People supporting those that are grieving need to be adequately knowledgeable, able and willing to help. Good bereavement support comprises practical help, a listening ear, patience and compassion.⁴

As shown in the Bereavement Care Pyramid (Figure 1), for most people, grief will gradually ease, but some people require support in addition to that provided within their immediate social networks. This may include people who are bereaved suddenly, traumatically or in unique circumstances, or who have other life stressors and who may benefit from community and peer support specific to their needs, delivered by those with lived experience and trained volunteers. Further to this, approximately 10% of the population (and this is estimated to have increased since Covid-19) will require specialised therapeutic support to help them through their grief.¹⁹ This is sometimes called Prolonged Grief Disorder or Complex Grief Disorder and is defined as an intense and intrusive grief that does not subside after a considerable length of time.^{20, 21} Prolonged Grief Disorder can occur when a person's grief is unaddressed or unsupported, this

can manifest as more serious mental health difficulties which can have a substantial impact on a person's life.^{19,22} Additionally, complex grief cases associated with trauma, multiple bereavements and stigmatised death can further increase the risk of health implications as a result of the grief.^{13, 23} While grief in general should not be treated as an illness, the link between ignored or unsupported grief and mental health outcomes must be highlighted. With the right community and workplace infrastructure, a person's grief experience and suffering can be ameliorated.

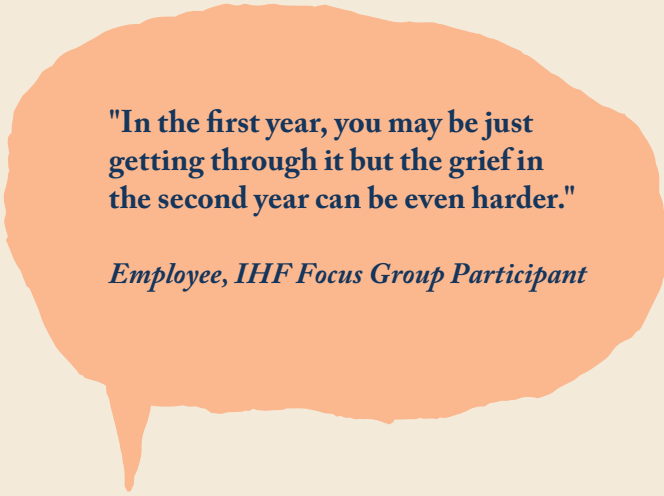
“An ounce of prevention is worth a pound of cure.” (Maslach,2003, p. 216).²⁴

Grieving impacts a person's health and wellbeing but equally a person's state of health will also determine how they grieve but if health is protected and even enhanced, it can actually support a person to cope better with difficult life events such as a bereavement.

The Grieving Employee

In Ireland, we have a long history of traditions in the aftermath of a bereavement such as the Irish lamenting practice called caoineadh (or keening), to the smoking of clay pipes and storytelling, to the practice of the Irish wake, which remains common practice today.²⁵ Funeral rituals provide an opportunity to collectively honour and mourn the deceased while also allowing friends, families and community members to show their support. Generally, the Irish are considered good in the immediate aftermath of a death, particularly around funerals and wakes.²⁶ Nonetheless, the funeral is only the beginning for the bereaved family and it will be in the days, month and years following this that support will be needed and is fundamental to a person's journey through grief, yet this is often the period of time when people experience the most challenges in receiving or giving support. A significant amount of research shows that continued social support is vital throughout the grieving experience and upon return to work, after a bereavement.^{13, 26, 27, 28}


Employees will often describe the period after they return to work as extremely difficult, when they are expected to return to normal productivity quickly or they experience a lack of recognition of their pain.^{14, 29, 30}



"In the first year, you may be just getting through it but the grief in the second year can be even harder."

Employee, IHF Focus Group Participant

Death and grief are still relatively taboo topics both in Ireland and in many Western cultures and is often not spoken about until it actually happens, yet one certainty in life is that we will all die and almost certainly experience bereavement.^{31, 32} Many of the studies used to inform this paper reference the role a 'death denying society' has on how people acknowledge and respond to another person's grief in the workplace.^{7,18} Chomyn (2022) identifies fear and denial of death as the reason behind a lack of support, suggesting that rather than this being intentional, the taboo nature of the topic means people do not know how to approach it with others.



Irish Hospice Foundation research on 1,000 employees, showed three out of four employees identified ‘being treated with compassion’ as the single most important support mechanism.⁵ Almost half of the survey respondents highlighted the importance of an acknowledgement of the loss by their employer and colleagues. Many (61%) employees found that they required additional leave entitlements when bereaved, yet in Ireland, an employee still has no legal right to time off during this time (Appendix 9.1 Statutory Leave Entitlements). This means, by law their employer is not required to give them any time off. Discretionary paid leave, after a bereavement in the UK and Ireland, typically lasts from 1 day up to 2 weeks, with 3 to 5 days being the average for a close relative¹⁶ but this can vary widely depending on the sector and is by no means compulsory.

Many European states have now enacted bereavement leave into law (Appendix 9.1 Table 2) highlighting the importance of state-led investment in issues of this nature. In Ireland, leave entitlements rely entirely on the goodwill of an employer and it cannot be assumed that in all cases the needs of employees will be met. This can depend on the nature of the sector or business an employee works in³³ with some industries already experiencing inequalities in terms of employee treatment and upholding of employee rights e.g. the hospitality sector.³⁴

In relation to parental bereavement through the death of a child, there is a proposal being considered by Dáil Eireann to amend the Parental Leave Acts 1998 and 2006 to include a 10-day leave entitlement to parents who lose a child from 24 weeks of pregnancy up to the age of 18.³⁵ Whilst this would be a positive move for Ireland, it must also be recognised that all types of bereavements impact a person, and statutory leave should be granted in the event of any bereavement and IHF welcome this change.

In the case of neonatal loss, women who lose a child after the 24th week of pregnancy, are legally entitled to Maternity Leave (Appendix 9.1.) However, this is not categorised as bereavement leave and only applies when pregnancy loss occurs from the 24th week of pregnancy onwards.³⁶ This means women who miscarry before this timeframe will only

be provided bereavement/miscarriage leave if their employer has their own discretionary provision in place and also recognises the impact of this type of loss, one that is often stigmatised and the impacts of which are under-recognised.³⁷ It is an extremely difficult time for parents of any gender, who can feel shocked, depressed and frightened.¹⁴ According to the Miscarriage Association of Ireland, “All women have the right to grieve whether they lose their babies through early or late miscarriage.” (p. 1, 2023).³⁸ A parent has a right to grieve in this situation and this should be recognised formally within any future bereavement leave legislative advancements.

Furthermore, in a country that is becoming more multi-cultural, different grieving practices within the workplace must also be recognised. With almost 13% of the population representing non-Irish nationals and 681,016 people identifying as another ethnicity to “White Irish” in the Census 2022, it is essential that working environments are creating inclusive bereavement policies and practices.³⁹

Types of Workplace Grief

There are two ways in which grief in the workplace can manifest, namely personally and professionally.⁴⁰

4.1 Personal Grief

Personal grief, i.e. when an employee is bereaved personally through the death of someone they know - a family member, a friend or other relationship is a type of grief that will be present in all workplaces.

Grief in the workplace can result from all types of losses. A person can grieve any significant loss in their life such as relationship breakdown, infertility, loss of a promotion, relocation. These are sometimes referred to as non-death losses and according to Harris offer a more inclusive perspective on loss, acknowledging that people can often be living with loss in their everyday life and it can be invisible.⁴¹ Sometimes, loss in early pregnancy through miscarriage, or medical termination of pregnancy may not be publicly known. In general workplaces will need to consider the diversity of loss experiences but also the unique response each person will have to losses.

“There are unseen losses like fertility, abortion, miscarriage where there may be no story before, build up, lead up to the loss (that other employees can see) and then the impact of this may not be taken seriously.”

Employee, IHF Focus Group Participant

Many employees may also experience grief that begins when a person is sick, this can be as a result of caring for that person and the compounded losses that occur with caring roles but also a pre-emptive feelings of what it may be like when that person is finally gone.⁴² At IHF, our expertise is in dying, death and bereavement, nonetheless we acknowledge that grief can occur as a result of any significant loss in our lives, which employers and employees need to be aware of.

4.2 Professional grief

“The expectation that we can be immersed in suffering and loss daily and not be touched by it is as unrealistic as expecting to be able to walk through water and not get wet.”

(Remen as cited in Rabow et al. 2021, p. 649)

Professional grief is the type of grief experienced by employees as part of the work they do. Some workers will experience this often, for example, those working in acute hospital



settings, intensive care units or palliative care. Others will experience the loss of a client or patient more occasionally as part of their jobs, for example, those working in social care services, addiction settings, first responders etc. The exposure to loss may even vary among professionals working for the same organisation due to the nature of their role, for example, hospital physicians, nurses, versus administration staff and the length and nature of their relationship with the person who died.

Although death can be a frequent occurrence for some employees, it is important to recognise that they will also grieve. Historically, workers were expected to compartmentalise or hide their grief in order to remain ‘professional’ meaning their grief was masked and ultimately disenfranchised.^{43, 44} While empathy and compassion is required for effective care, it is also the vehicle through which trauma can be absorbed, leaving employees at greater risk of empathetic strain or stress.⁴⁵

Doka (2006) describes how one nursing manual stated that “a professional nurse never cries when a patient dies” but on the contrary, he argues that to be an effective care worker, grief must be acknowledged and spoken about. In fact, employees who repress their emotions or detach from their feelings of grief can become emotionally exhausted, affecting their ability to do their jobs.⁴⁵ The grief an employee feels for a client or the losses they experience as a result of a patient/client illness and ultimate death can be influenced by a number of factors such as the relationship with the client; identification with the loss; an inability to cure the patient/client; feelings of fear about one’s own mortality; or questioning the meaning of life or one’s beliefs as a result of the death.⁴⁴ Some types of work such as funeral directors or morticians carry a certain type of stigma or mystery but these professions play a crucial role in bereavement experiences of families and the toll this work take people with the negative social views of the work should also be acknowledged.⁴⁶

If unaddressed professional grief can escalate and result in Professional Burnout, the “chronic emotional strain of dealing extensively with other human beings, particularly when they are troubled or having problems” (Maslach, 2003, p.2). It is a unique type of occupational stress that can be attributed to the impact of investing in patient/client relationships (both socially and emotionally), an unavoidable aspect of providing care to other humans.^{45, 47} Papadatou likens it to a process that is incremental and occurs over time. It causes the employee to become detached from their work, no longer gaining the satisfaction or meaning they once did, perhaps the very reason they chose that type of work in the first place ⁴⁷. The use of the

term 'burnout' in the general sense can lead to an over-simplification of the unique emotional and psychological nuances associated with working in end-of-life care.⁴⁴ A large-scale workplace study conducted in the USA, reported that 50% of healthcare staff met the criteria for burnout during and after the Covid-19 pandemic.⁴⁸ It is important that any Grief in the Workplace programme for employees experiencing professional grief acknowledges the particular challenges associated with this type of grief in order to support them appropriately.

"When I try to describe my experience to someone else, I use the analogy of a teapot. Just like a teapot, I was on the fire with water boiling – working hard to handle problems and do good. But after several years, the water had boiled away, and yet I was still on the fire – a burned out teapot in danger of cracking."

*Carol B (Social Worker perspective)
Maslach, C. (2003, P. 1).*

Another type of professional grief can occur in the form of Compassion Fatigue, which is when a professional is emotionally impacted by the trauma of the clients or patients they care for which can particularly occur when caring for people at end of life and those who are bereaved.⁴⁹ Health and social care professionals' risk of this was increased greatly during Covid-19. Some recent developments in Ireland are commendable - the HSE have developed a dedicated education and resources webpage for employees dealing with professional grief called [Coping with Death and Grief as Healthcare Worker](#). This links to [IHF resources including free eLearning courses for staff in nursing homes and acute hospital settings](#). IHF (in collaboration with the HSE, Healthy Ireland) created the [Pause Project](#) to support healthcare workers' wellbeing through the use of creative resources.

A key finding from recent IHF research ([Time to Reflect](#)) was the impact of pandemic on healthcare workers and the need invest more to support healthcare workers around their grief.

A key point to note in terms of professional grief is that the worker will often over-estimate the individual factors contributing to their burnout while simultaneously under-estimating the organisational factors yet according to lead researchers in this field it is the social, environmental and organisational factors that will have a greater impact.^{43, 44, 45}

4.3 Death of a Colleague (Sometimes Traumatic)

Workplace grief can also occur when a colleague dies. This can be difficult and unsettling for employees and for managers. While the workplace maybe a professional environment, the death of any employee must treated as a personal circumstance given how close work colleagues often are and how much time is spent at work.

Employees can begin grieving if they see their colleagues terminally ill. Depending on the nature of the death, for instance, sudden and traumatic deaths or deaths that occur on site, additional workplace support may be required. This can be through suicide, addiction, an accident, homicide or sudden illness. Covid-19 is an example of this, when both health

"In my first job, I lost my close colleague by suicide, it wasn't talked about and I found out how they died through the media....it was so hard."

Employee, IHF Focus Group Participant

workers and families experienced abnormal and traumatic bereavement circumstances, placing them people at risk of more complex grieving responses.¹⁹ Suicide in the workplace is an area that needs particular care and considering 400 – 500 people die by suicide in Ireland each year, there are few workplaces that have not been impacted by suicide either directly or indirectly. To address this type of workplace crisis, IHF in partnership with National Office of Suicide Prevention (NOSP), Irish Business and Employers Confederation (IBEC) and Irish Congress of Trade Unions (ICTU) developed [Responding to Suicide – A Guide for Employees](#) which is informed by the real experiences of bereaved employers and employees by suicide. This content was used to develop an [eLearning course on the topic](#), all of which are significant supports for organisations dealing with suicide in the workplace.

Traumatic workplace death can be extremely distressing for everyone, at all levels in the workplace, making it even more important for workplaces to have a policy and plan in place should this occur. Although this does not happen in every workplace, being prepared gives employers the tools to cope if such circumstances arise.

Why Support Grief in the Workplace – the Business Case

The employer is “one of the most significant stakeholders in terminal care, or bereavement.”

(The Sonnet Report 2020 commissioned by Marie Curie 2021).

A significant amount of people will be working at time of a bereavement⁵⁰ and considering that people spend equal to or more of their waking at hours at work,²¹ it is clear that workplaces are significantly well placed to support bereaved people. Employers are often the first person we call when bereaved, outside of our immediate family and friends. People are living longer, and fertility rates are declining resulting in an ageing work population meaning that most people will experience a bereavement, at least once, in their working lives.^{3, 19}

In order to fully invest and take grief in the workplace seriously, employers need to understand the reasons why it is so important to achieving a healthy and happy workplace.

According to the WHO Healthy Workplace Framework (2010)⁵¹ there are three key reasons for implementing a holistic wellbeing programme and for the purpose of this paper, this rationale has been applied to bereavement and grief support in the workplace:

- 1. It is the right thing to do**
- 2. It is the legal thing to do**
- 3. It is the cost-effective thing to do**

5.1 It is the right thing to do

According to the WHO Healthy Workplace Framework (2010), having a moral code of principles to do right by people is the very least a workplace should be doing. Employers should be guided by the basic ethical principle **to ensure no harm is done** to employees

while at work. Modern attitudes towards healthy workplaces believe that employers should go beyond this and actually enhance employees' lives and health, allowing them to thrive, where the benefits are felt in their personal and family lives and beyond, helping to build a more resilient workforce.⁵² With mental health challenges identified as the most common reason for employees requiring long term leave from work,⁵³ early recognition of grief and intervention is key, ensuring that employees have the tools to keep them as well as possible while working.

Kind and compassionate workplace cultures that demonstrate a genuine interest and care for their employees can get the most from their workers. Across many of the studies reviewed for this paper, kindness has been identified as a vital characteristic for grief support but also for helping to show employees they are valued in general.^{9,27,54} The Chartered Institute of Personnel and Development (CIPD), the professional body for HR and people development in Ireland see compassion as a vital tool for organisations, stating that “*a compassionate approach is vital to remain connected, mentally healthy, and productive while we battle through the challenges we face at work and beyond.*”⁵⁵ Organisations like the [50 Leading Lights campaign](#) in the UK, are quite literally shining a light on the role of kind leadership in transforming a workplace, acknowledging that people do their best and can be at their most productive and creative when they are met with kindness.⁵⁶

Kind leadership is “a willingness to be vulnerable (we are all human, after all); and by the same token it’s a generosity of spirit that enables a leader to be empathetic, to listen and to build the confidence of each individual in their team.”

(Kindness and Leadership 2023).

Sadly, a compassionate response is not always typical with a British survey identifying that nearly one-third of employees had not been treated with compassion by their employers upon their return to work following a bereavement (National Council for Palliative Care, 2014 - Holmgren 2021). Marie Curie’s (2021) study of 21 different UK employers, identified that only 1 in 3 employers had a dedicated bereavement leave policy.¹⁶ Additionally, most of the policies only referenced paid leave requirements but ignored support upon returning to work in the aftermath of a bereavement.

Supporting employees through grief requires a warm and empathetic response and if this is practiced, the benefits will be far reaching, across households, communities and society – a positive ripple effect^{28, 57}. From the perspective of the employer it contributes to their ‘Corporate Social Responsibility’ (CSR) and ‘Environmental Social Governance’ (ESG) agendas which aim to enhance the communities they operate in and reduce any negative impacts their business operations may have on people, their locality but also on society.⁵⁷ CSR is an ethics-based approach that recognises the responsibilities employers have for ensuring their workers’ basic human rights are met, with the promotion of good health and wellbeing forming a significant part of this.⁵⁷ While ESG has a wider remit and looks at an organisation’s environmental impact, it also includes social responsibilities in treating both employees, contactors and service users ethically ensuring practices are fair and inclusive.⁵⁸

“Empathy is so important...to recognise that another employee’s experience may be different to mine but to try and feel it what it might be like for them.”

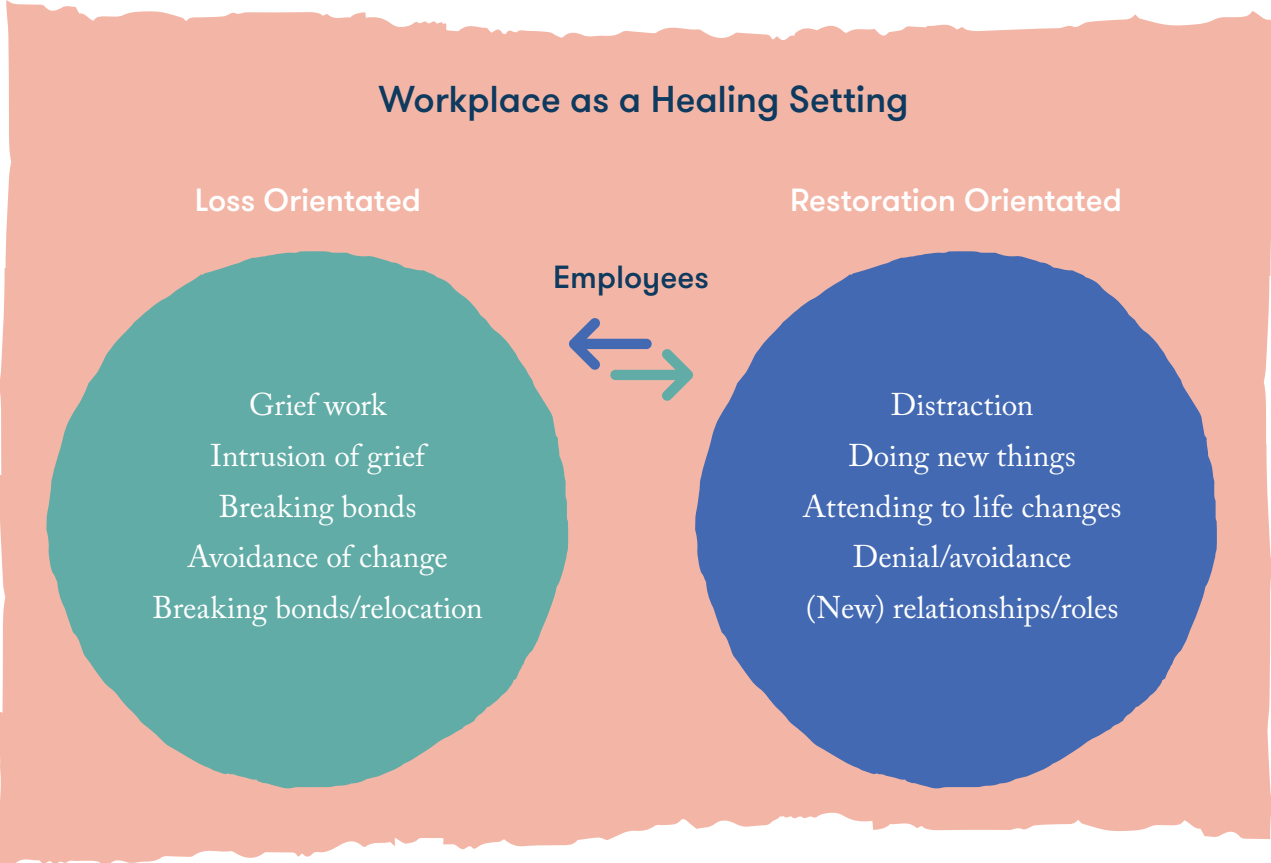
Manager, IHF Focus Group Participant

Creating organisations that are grief literate and grief trained contributes to a more equal, diverse and inclusive workplace by understanding the variance in grief experiences, the role an organisation can play in disenfranchising or failing to appropriately recognise and acknowledge a person’s grief and the needs of bereaved and vulnerable employees. Furthermore, treating employees well results in better treatment of service users and clients.

The workplace itself has been identified as a healing setting for the bereaved or those experiencing a loss.^{22, 59} Workplaces have a capacity for supporting employees through their grief, be it through the practicality of work itself or the social support a workplace can offer. Modern grief theories identify that carrying on with the practicalities of life allows the griever to take a break from their feelings of loss helping to restore a person’s sense of self and sense of purpose.^{10, 11} Stroebe and Schut’s Loss Coping Model (as shown in figure 2) show the two ways in which a griever will operate, moving between a focus on the sadness and pain of the loss to a focus on the necessary tasks for living. Workplaces must allow the employee to move between both states in order to effectively grieve, while distraction is healthy and helps restore the griever, equally they must be able to sit with their sadness and express their grief when they need to – be it at work or at home. This helps them to cope with and to process their grief in a healthier way. This is relevant for all losses.⁴¹

Figure 2: Stroebe and Schut Loss Coping Model

Source: Adapted from Stroebe and Schut (1999)



5.2 It is the legal thing to do

5.2.1 Risk to employee health and safety

Besides being the ethical thing to do, the provision of good bereavement and grief care in the workplace is the legal thing to do. Workplaces in Ireland are governed by a number of workplace laws but in the case of bereavement there is certain legislation that comes into play as shown in Table 1.

Table 1: Employee Legislation

Legislation	What this means?	Implications if not adhered to:
<p>Safety, Health and Welfare at Work Act 2005</p>	<p>“Every employer shall ensure, so far as is reasonably practicable, the safety, health and welfare at work of his or her employees.”⁶⁰ This means that work practices and activities must be conducted in a way that prevents any harm to employees and ensures their health and safety is in no way compromised.</p>	<p>Grief itself impacts an individual’s health & wellbeing and can increase employee stress. Unsupported or disenfranchised grief can present as an even higher psychosocial risk and negatively impact employee welfare.</p>
<p>Employment Equality Act 2015</p>	<p>This legislation protects employees from discrimination and from being treated less favourably than others based on the following 9 grounds: gender, civil status, family status, sexual orientation, religion, age, disability, race, membership of the Traveller community.⁶¹</p>	<p>Employers must not carry out any action that leads to discrimination in any of these 9 grounds. Additionally, in relation to disability (which includes physical and mental health difficulties and illness), an employer must take practical and fair steps to ‘reasonably accommodate’ an employee so that their disability does not present an unfair disadvantage to them being able to carry out their job. The accommodations must not place a cost burden on the employer.⁶²</p>
<p>Duty of Care under Common Law in Ireland</p>	<p>Under common law employers owe a duty of care to employees to protect their health and safety when at work.⁶³ This duty of care is separate to but complements legislation such as the Safety, Health and Welfare at Work Act Page 27 of 42 2005.⁶⁴</p>	<p>Employers must take reasonable care to protect employee health, safety and welfare at work (Irish Legal Guide 2023). This is measured against what a reasonable and prudent employer would do in the circumstances at play and ensures that employers provide safe places to work, safe ways of working and appropriately trained employees.⁶³</p>

The Safety, Health and Welfare at Work Act 2005 means employers are legally bound to ensure no physical and mental harm comes to their employees as a result of the work they do. A significant body of research demonstrates that grief in the workplace presents both a physical and psychosocial risk for employees, if not adequately identified and supported in both the immediate and long-term. Physical risks to employee safety can occur because grief at times may impact a person's decision-making ability or ability to focus, increasing the likelihood of accidents and mistakes.^{8, 31, 65} Fatigue, a common characteristic of grief also adds to this risk.^{8, 9} This has implications for jobs that carry a higher level of risk either to staff or to patients (e.g. construction workers, doctors). This also carries risk for employees who drive regularly as part of their work given that fatigue is a factor in as many as one in five fatal accidents in Ireland each year.⁶⁶ Grief is associated with a deterioration in physical health, meaning that employees are at greater risk of illness and disability while grieving and this should be considered when they return to work.^{26, 67}

Grief puts employees at greater risk of psychosocial hazards. The Health and Safety Authority (HSA) define these as "factors in the design or management of work that have the potential to cause harm to a person's psychological wellbeing."⁶⁸ These risk factors include psychological, social and environmental factors and how these influence employee health and wellbeing and apply to both in person and remote working settings. The HSA refer to this as the 'hidden workplace' i.e. cultures, attitudes, behaviours and practices.⁶⁹ Systematic risk factors such as conflicting demands, lack of role clarity, lack of autonomy, poor communication, change management, job insecurity and remote working all contribute to the psychosocial environment.⁶⁹ Poor working conditions such as these place an employee at an increased risk of stress making them less resilient in general and even more so when dealing with difficult life events (such as bereavement and loss) if and when they do occur, increasing their susceptibility to harm by the organisation.

Challenging behaviours in a workplace that include discrimination, harassment and bullying can impact the grieving process, either directly through an unequal application of bereavement leave policies (i.e. being treated less favourably than other colleagues)^{14, 32} or indirectly through the impact these behaviours have on health, wellbeing and stress.⁷⁰



Employers that show a lack of understanding towards bereaved employees and those who do not provide an effective and caring return to work process puts an employee's health and wellbeing at risk.

5.2.2 Risk of Disenfranchisement

It is important to note that psychosocial factors come in to play when a person is grieving and can impact the process directly (e.g. through a lack of support) but also indirectly through problems or issues that exist within the hidden workplace (as described above) meaning an employee's grief may not even be identified in the first place. Interrupting the normal grieving process or disenfranchising an employee's grief can cause significant harm.^{15, 23} This may occur when the relationship with the person is not recognised by society (e.g. LGBTQ+ experiences) or the circumstances of the death result in stigmatised or discriminating responses (abortion, suicide). The person may feel they do not have the right to grieve, resulting in a non-disclosure of the loss for fear of an uncompassionate response should they disclose their loss.

Disenfranchised grief is grief that occurs as a result of a significant loss in a person's life and their grief is not openly acknowledged or accepted, socially validated, or publicly mourned. (Doka, 2002).

Social norms that dictate what is acceptable in workplace behaviour are often not well aligned with the grieving employee²² and as a result this makes the workplace one of the most likely settings to disenfranchise a person's grief by placing undue pressure on employees to hide their grief.⁷¹ During the grieving process, an employee will find it extremely difficult to leave their personal selves at home and hide their emotions.³²

Suppressing emotions around grief has been widely concluded as having negative outcomes on the grief experience and can lead to more complex responses, such as feelings of shame or embarrassment, a more difficult grief journey and worse health outcomes.^{21, 71} It is worth noting, and as emphasised in Bauer and Murray's study this negative response to emotional displays at work comes from a history of gendered ideas about what is considered acceptable within the workplace, with typical masculine responses or behaviours being favoured.³² Female qualities in the workplace often hold a lower value than male qualities yet according to one of America's largest women in the workplace studies, female leaders are doing significant work in the creation of supportive and inclusive workplaces which is highly important for the overall positive functioning of workplace and employee wellbeing.⁷²

Another risk to employee health is the fact that grief places them at an increased risk of loneliness which can have serious adverse health impacts and has been likened to smoking related harm.²⁷ Recent studies on men's lived experience of perinatal loss highlight the dangers of placing social expectations on a person who is grieving with men's grief often unacknowledged in health, workplace and social settings.^{15, 73}

Fisk (2022) research calls for a broader definition of grief in the workplace by recognizing and supporting the variety of circumstances that give rise to grief and the need to be flexible in responses to employee needs, as not everyone will require the same amount or same type of support and not every grief reaction will be visible or relate to a bereavement.¹³

"When I had a hysterectomy recently, the one person from my workplace who came to visit me in hospital and give me flowers was this woman. I was deeply touched by this act of generosity and kindness [the respondent wept at this point]. The staff member remains at the place where we worked "in tandem" together (UCA)."


Employee (Study Participant) Teban and Robinson, 2009, Pg. 108

5.2.3 Risk of work-related stress and burnout

The HSA identify bereavement and loss of any kind as major cause of stress.⁷⁴ While some amount of stress is manageable in the short term, high levels of unaddressed and unsupported stress increase the likelihood of employees experiencing burnout.⁷⁵ Stress itself can be caused by conditions within the workplace (and the hidden workplace as discussed in section 5.2.1) but also when unsustainable pressure is placed on an employee who is experiencing emotional strain, personal stress can become work-related stress.⁷⁴ When employees reach burnout, they can feel unmotivated and unable to carry out their usual tasks.⁷⁵ Employees will also be more likely to blame themselves than the organisation, but burnout is more likely the result of socio-environmental factors in the workplace and not the personal or constitutional factors of the individual.²⁴ It can occur as a result of dealing with grief itself but also as a result of the secondary stressors associated with bereavement and loss (financial stressors, health stressors, increased caring duties) which can place significant strain on the employee.

The 'Home-Work Interface' is a type of psychosocial work hazard that can lead to stress and manifests when an employee has competing demands in their personal and professional lives,⁷⁴ which could be a result of the primary (the loss itself) and secondary impacts (the additional losses that come with it of grief). This concept is described in Hobfall's Conservation of Resources Theory¹⁴ and suggests that grief can result in a depletion of an individual's personal resources (social, emotional and environmental) or capacity, placing them at risk of further losses – almost like a domino effect – making it harder for them to recover from these losses. This emphasises the need for employers to help employees retain their capacity to cope when grieving, by allowing them time to grieve, providing interpersonal support and maintaining flexibility.¹⁴ An important consideration here and particularly in the case of bereavement is that although work may not be the primary source of the stress it can be further exacerbated by socio-environmental factors in the workplace, at which point it becomes a workplace issue. It is also worth noting that a lack of good social support in the workplace has been identified as a precursor to work related stress⁷⁶ and this is an area that employers should pay great attention to by highlighting the need for grief to be acknowledged and supported effectively by peers.

Continued stress often results in burnout which requires medical intervention and sick leave.⁷⁶ The workplace should be set up in a way that does not create or further add to this stress. Factors such as identifying the signs of grieving earlier, allowing employees to take adequate rest and breaks and provision of support are all mediating factors.



Professional burnout (as described in section 4.2) also falls under this category of risk but the unique nature of this grief must be addressed appropriately.

5.2.4 Risk of exclusion or discrimination

Death and bereavement are not met equally in society; there will be people whose circumstances dictate both the way in which they will die and grieve but will also shape others' responses to their losses and consequently, the support they receive. Bindley et al (2019) identified inequities across gender, class, sexuality, ethnicity and age which can negatively impact the bereavement process leaving those bereaved more likely to experience stigma, psychological strain and economic challenges, all of which can have negative impacts on the grieving process itself and health outcomes.⁷⁷ Therefore, employees will have varied experiences of death and grief. According to the Employment Equality Act 2015 (refer to Table 1), it is against the law to discriminate or treat employees less favorably than others based on the following nine grounds: gender, civil status, family status, sexual orientation, religion, age, disability, race, membership of the traveler community. Socioeconomic status is not included here but has been recognised as another form of discrimination in Ireland by the Irish Human Rights and Equality Commission who recently submitted a review of the equality act calling for its inclusion.⁷⁸ For the purposes of good bereavement care, socioeconomic status should also be considered a ground for discrimination as this may dictate access to services and the quality of support a person receives.

According to Kenneth Doka's research⁷¹ a person's grief can be disenfranchised for the following reasons:

- **The relationship is not recognised by society (e.g. LGBTQ+ bereavement experiences)**
- **The loss is not acknowledged due to societal views or prejudices (e.g. abortion)**
- **The griever is excluded (e.g. a child)**
- **Circumstances of the death (e.g. suicide, addiction)**
- **The person's grieving style is not recognised (e.g. experiences of ethnic minorities)**

These are just some examples above but there are many more circumstances in which an individual's grief may be disenfranchised. It should be noted that people who are older may experience a disenfranchisement of their loss or grief because there is an assumption that as a person ages they get used to loss.⁷¹ These attitudes serve to diminish a person's grieving experience ignoring the unique factors of each person loss.

Hidden assumptions or biases about certain communities can impact the way in which grief is acknowledged, their care or access to supports and it can also influence the way in which an employer responds to an employee. Employees at all levels may have conscious and unconscious bias toward certain minorities or groups of people and employers should take proactive, practical and policy-driven steps to ensure equality, diversity and inclusion is at the core of all organisational activities to reduce the risk of discrimination in the grieving experience.

"Implicit or unconscious bias happens by our brains making incredibly quick judgments and assessments of people and situations without us realising. Our biases are influenced by our **background, cultural environment and personal experiences**. We may not even be aware of these views and opinions or be aware of their full impact and implications."
(*Advance HE, 2020*)

Should an employee have a particular disability or health issue an employer must take reasonable steps so far as practicable to allow a person to a.) take up a position (recruitment) and b.) carry out their job (operations) as highlighted in Table 1. For employers to protect worker health and comply with this mandated legislation, they must first recognise the relationship between employee grief and health (and vice versa). If grief leads to physical or mental health challenges or illness the employer is legally bound to support this employee from a reasonable accommodation perspective.

Below, as indicated in grief literature, are some of the people more likely to experience disparities in bereavement care but it is by no means exhaustive.

- **People who are neurodiverse.**⁷¹
- **People with certain physical health issues such as HIV and Aids or dementia.**⁷¹
- **People with experience of the criminal justice system.**⁸⁰
- **People with preexisting mental health difficulties.**²³
- **People who are bereaved by sudden or traumatic loss.**²³
- **Caregivers.**²³
- **People from migrant backgrounds including refugees.**⁸¹
- **People living in poverty or disadvantage.**⁸²

Employers need to be aware of their employees who may be at a greater risk of discrimination and take proactive steps to ensure the employee is not disadvantaged in their grieving because of this. Employees cannot be penalised for raising issues or formal complaints for a breach of the Health and Safety Act.⁸³ The Workplace Relations Committee provide guidance to employees if they feel their employer is in breach of any of the legislation discussed above.⁸⁴

5.3 It is the cost-effective thing to do

Employee grief costs businesses money, but unsupported grief costs even more.

1. Loss of productivity:

The very nature of grief can disrupt a person's thinking, concentration and effectiveness at work causing a loss in productivity and an increase in absenteeism but also presenteeism.^{9, 85} Presenteeism occurs when the employee is physically present at work but mentally unable to concentrate, perform or engage meaningfully with their work tasks,⁹ leading to a significant loss in productivity and impact on overall business cost.³¹ Hiding grief emotions has been shown to be more distracting for workers than being allowed to express them.^{22, 86} More recent workplace studies have found significant costs associated with presenteeism costing the UK economy an estimated £16 billion per year¹⁶ and in the USA, \$75 billion is lost annually from productivity reduction due to grief.⁸⁶ It is important to note that some amount of presenteeism will be unavoidable but if grief is identified, freely expressed and supported, these costs will reduce.

Presenteeism occurs when the employee is physically present at work but cannot engage effectively with their work and their workplace. This has a negative impact on productivity and business costs.

2. Increased absenteeism:

People grieving need time off. Current leave practices are designed to allow employees to deal with the logistical and practical requirements of a death (i.e. attending a funeral, administration of the deceased estates). Leave provision does not necessarily provide adequate time to process the initial emotional impacts of the loss.^{22, 65} If an employee is not given adequate time off and supported effectively, they are more likely to require time off in the future, often through use of sick leave.⁹ Nearly half of the employees interviewed in an IHF study stated that they would take more sick days if not supported adequately by their employer.⁵ Bereavement leave can often be hidden within sick leave as employees feel that this is the only way in which their workplace will accommodate them⁶⁵ and unfortunately this perpetuates that idea that grief is an illness when actually it is a very normal reaction to a hugely distressing event. Stress as a result of grief and competing life demands is also associated with increased absenteeism.⁹ A USA study identified 30 days are lost annually due to employee grief.⁸⁶

3. Reduced employee morale and wellbeing:

A lack of quality social support can have a negative impact on physical and mental health²⁷ putting a person at greater risk of complications in grieving.²⁶ This also applies to workplace support with numerous studies indicating that good social support is integral to a better grieving experience and can prevent grief from worsening.^{7, 22, 27} Unacknowledged and unsupported grief can damage employees' self-esteem at work and lead them to think they are no longer good at their job.⁹ In addition, grief impacts morale with 45% of employees stating that a lack of support would upset them and they would talk to other employees



about it.⁵ When higher levels of personal professional conflict exist in a workplace there are lower levels of job satisfaction and commitment.³¹ This has an impact on an employer's image and ability to be seen as a socially responsible organisation, something that more and more employees seek out and expect from the people they work for.⁸⁷ A workplace that disenfranchises an employee's grief can put an employee at greater risk of exclusion by forcing them to internalise their grief which can result in more serious health and wellbeing consequences.¹⁵

4. Decreased retention:

Grief can initiate career changes and career interruptions and ultimately, cause people to leave their job.^{29, 65} In a UK study, over 50% of employees would consider leaving their job if not treated with compassion which could cost employers between £20,000 - £40,000 to fill the vacancy.¹⁶ A Scottish study identified that bereaved people were significantly more at risk of being unemployed in the two years following a bereavement.⁸⁸ A large proportion of men will leave paid work after the death of a spouse.⁶⁷ IHF (2018)

identified that almost a third of employees would consider leaving their jobs if not supported and a quarter would actually leave their job.⁵ Further to this, people experiencing traumatic losses are less likely to return to work at all, especially if not supported by their employer.⁶⁷ Unsupportive and inflexible workplaces are the reasons for bereaved employees leaving their jobs in the aftermath of bereavement, when juggling family or home duties becomes too much.²⁹ This loss of staff results in a loss of expertise and experience which is costly to an organisation for many reasons. Seeing people treated poorly in the face of difficulties and ultimately leaving their job affects other employee's morale and the organisation's reputation.³¹

5. Increased risk of workplace claims:

Employees can make a claim under the Health and Safety Legislation through the Personal Injuries Assessment Board (PIAB) which includes accidents or injuries as result of physical but also psychosocial risks in workplace.⁸⁹ This and may require additional workplace accommodations. Ensuring that people are supported throughout this time makes good economic and social sense.

“Support when grieving helps me to feel more connected to my colleagues and benefits the culture.”

Employee, IHF Focus Group Participant

“Committing to grief in the workplace support can show your staff you value them.”

Manager, IHF Focus Group Participant



Section 2: Using a Health Promotion Approach to Support Grief in the Workplace

Using a Health Promotion Approach to Direct Grief in the Workplace Improvements

“Health is created and lived by people within the settings of their everyday life; where they learn, work, play, and love” (WHO 1986).

Health promotion enables people to have greater control over their health through individual education and skills building but also through the creation of environmental, social and economic conditions that allow for better health outcomes. It looks at the wider context in which we live and operate – the home, the family, the workplace, the community, and society – in shaping life experiences.^{77, 90}

The workplace has been identified in both national and international strategies and policies as a key setting for health promotion and research shows that what is good for wellbeing is also good for grief:

- **Social support** – compassion and recognition when experiencing difficult circumstances.^{22, 28, 91}
- **A kind culture** led by kind leaders where employees feel safe to disclose they are struggling and also appreciated in their work.^{54, 56}
- **Protection from bullying, stigma and discrimination.**^{14, 22, 91, 93}
- **Employee-centred approach** where employees have autonomy in their roles and are consulted on matters that concern them.^{31, 91, 92}
- **Reduced workplace stress** and the conditions that cause this.⁷⁴
- **Information and access to support** when going through challenges.^{7, 92, 93}

IHF’s GITW programme advocates that health promotion is an effective vehicle in which to:

- Create a grief aware and grief literate workforce
- Build employee skills at every level of the organisation to support themselves and others in grief
- Shape and influence the social, economic, political and cultural factors that impact bereaved people and the grieving process

A workplace health promotion approach to good grief care should employ strategies that promote health as a tool for good grieving which is facilitated by a healthy and grief literate environment and also strategies that prevent grief from escalating or impacting a person's health. It is useful to view health as both a state that can be impacted by grief but also a tool that can be used to help people to cope when grieving. It is important to recognise that health promotion incorporates health in all forms be it good or bad, positive or negative and that mental health definitions that primarily focus on positive mental health, wellness or wellbeing can isolate people going through difficult life events and health challenges. Thompson and Livingston (2018) acknowledge that the term 'wellbeing' is often given so many meanings that it almost becomes meaningless.⁹⁴ For the purpose of this position paper wellbeing refers to simply 'being well' - the positive outcome when we look after both our mental and physical health and support those going through life's challenges (like grief).

This paper draws on a number of health promotion models that share common threads which can be used to demonstrate the effectiveness of workplace health promotion as a mechanism for good grief care and support. The following established models are used to inform the IHF GITW approach: Salutogenic Model of Health Promotion (Antonovsky, 1970);⁹⁵ Settings Based Approach;⁹⁶ The Ottawa Charter for Health Promotion;⁹⁰ Ecological Systems Theory.⁹⁷

Using these models as a foundation, the following three actions have been identified as core components of workplace health promotion for good grief and bereavement care:

- 1. Building and maintaining healthy and grief supportive environments**
- 2. Planning around the factors that determine the course of grief and identifying potential vulnerabilities**
- 3. Coordinating actions**

6.1 Building and maintaining healthy and grief supportive environments

The workplace has been identified in both national and international strategies (see appendix 9.2 National and International Workplace Health Promotion Strategies) and policies as a key setting for health promotion and also a determinant of health outcomes. These documents determine that employee health can be safeguarded through the reduction or elimination of factors that contribute to poor health and by enabling its employees to work towards greater health. As demonstrated throughout this paper bereavement, loss and health are intertwined meaning that grief support should be a fundamental part of a workplace's health and wellbeing agenda. In order to apply an effective settings-based approach to workplace health promotion and grief, the context in which employees are operating in will play a pivotal role in determining what supports are required.⁹⁸ For example, those working in certain types of employment settings (including healthcare, counsellors, crisis workers) will require additional workplace support that acknowledges the strain this type of work can have on employee health and the role of professional grief in determining health outcomes. This reduces the risk of disenfranchising their employees' suffering which can present risks to both their staff and to their service users. This aligns closely with the guidance around psychosocial work

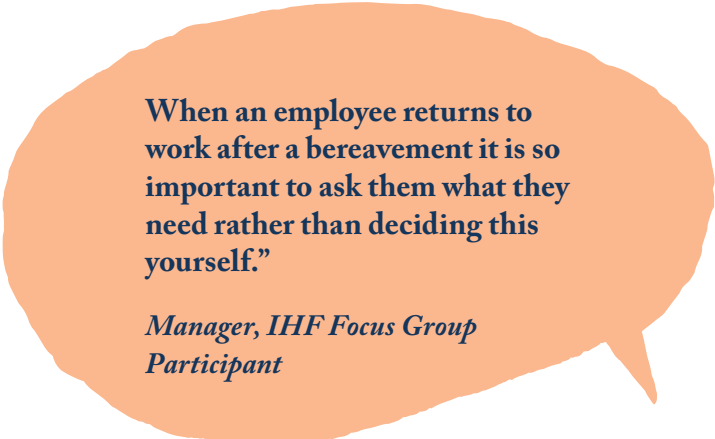
hazards or ‘the hidden workplace’ as proposed by the HSA and discussed in section 5.2.3 Risk of work-related stress and burnout. Notably, the individual’s coping style or ability to handle pressure is rarely the focus of national and international workplace guidance documents.

All workplace interventions aimed at improving grief in the workplace and wellbeing should encompass both personal skills development and social and environmental improvements in the organisation. Education and personal skills-building interventions alone are not enough as this places the majority of the burden on the individual employee to ‘cope better’ with stress when organisational factors play a greater role in determining employee stress and the resulting impact on grief and health outcomes.⁹⁹ Employee resilience is underpinned by the level of control and competence a person has in their job and also their ability to switch off from work.⁵¹ The WHO identify two important triggers for work related stress: **work content** i.e. job content, workload, work pace, flexibility and control in ones work and **work context** i.e. work environment and culture, workplace behaviours, employee support, employee engagement, policies and leadership⁹⁹ and IHF suggest reviewing all of these areas if the workplace is to be a safe and supportive place for grieving employees.



“It is so important to create a compassionate culture that acknowledges all experience and the uniqueness of grief.”

Employee, IHF Focus Group Participant



When an employee returns to work after a bereavement it is so important to ask them what they need rather than deciding this yourself.”


Manager, IHF Focus Group Participant

There is no solution to grief, it cannot be ‘fixed’, but a supportive environment can greatly minimise distress, reduce isolation and support better health outcomes. GITW programme should encompass upstream (i.e. early) interventions that acknowledge employees’ grief and identify appropriate normalised avenues to support them, so as to minimise the impact of it on their wellbeing. These interventions should focus on consulting with an employee, compassionate responses and flexible work practices. This reduces the risk of a person’s grief escalating to the point of ‘drowning’ i.e. their grief is met downstream at which point a more medicalised intervention may be required.⁹⁵

Greater emphasis should be put into health promotion (i.e. prevention, protection and enhancement strategies) to reduce the need for medical intervention or people becoming ill as a result of grief. Adopting an employee-centred approach is vital to the success of any workplace strategy and particularly in the case of bereavement and grief – all relationships are different, and grief exacts different toll on people, requiring different supports.

Using up to date grief in the workplace literature, four key themes are identified as areas of influence in terms of shaping an employee’s grief experience and the organisational approach.

Area of Influence	Description	Elements to Consider
Environment	Both the seen and unseen environment should be conducive to good grieving.	<ul style="list-style-type: none"> • Physical - Workplace design • Psychosocial - Workplace culture, attitudes and values and workplace norms
People	The role of employees at all levels of the organisation (employees, managers, board, contractors). This includes human knowledge, behaviours and skills and capacity within the organisation that may hinder or support the grieving process.	<ul style="list-style-type: none"> • Workplace behaviours • Personal and interpersonal skills • Education and training • Employee control and autonomy • Personal/professional conflict
Practice	Workplace practices that are ethical, supportive and reflect organisational values. This includes bereavement and grief practices (e.g. appropriate time off/return to work) but also how an organisation conducts its business and how this can directly or indirectly impact grieving employee.	<ul style="list-style-type: none"> • Operational and Human Resource processes
Governance	Robust governance structures in place that are continuously reviewed and updated – ensuring that health and safety legislation and reasonable accommodation laws are adhered to and reflected in policies, procedures and practices. Ensuring the organisation acknowledges the risk of bereavement, loss and grief to health.	<ul style="list-style-type: none"> • Policies and procedures • Risk management • Adherence to workplace legislation • Data collection



Humans are social beings influenced by their environment and the people in it (and vice versa) meaning that the environments we operate in are fundamental to the grief experience and grief outcomes. By building a grief literate and grief supportive environments, it will ensure the griever has the best possible chance of getting through their grief.

6.2 Planning around the factors that determine the course of grief and identifying potential vulnerabilities

The workplace is not only a setting in which to promote health but can itself determine aspects of health and therefore, grief outcomes. The impact of bereavement and grief in the workplace needs to be considered within the wider cultural, political, social and economic determinants of health (Appendix 9.3 The Social Determinants of Health).

The WHO Healthy Workplace Framework references the role of broader societal and cultural norms and the way these shape or govern individual behavior and interpersonal interactions which can have implications for the workplace and how grief is recognised and supported within it.⁵¹ For example, in Ireland it is generally accepted that a person will need time off in the immediate aftermath of a death, at the very least to attend the funeral but as times goes on, grief emotions may not be tolerated as well and may even be ignored especially with reports of ‘toxic positivity’ on the rise in Irish workplaces.^{100, 101} Processing more difficult grief emotions is necessary and contributes to healing, helping them to rebuild their lives and grow around their grief.

“As a society, we really like to use language like ‘positive emotions’ and ‘negative emotions. But the truth is, there’s no such thing as good and bad feelings. All emotional states are valuable to our human experience, and anxiety, anger and fear are primitive ways of keeping us safe and well.”

Dr Lynda Shaw, as quoted in the Irish Examiner

The workplace itself will have its own internal ‘culture’ and ‘rules’ which will also impact an employee’s experiences of grief and expectation/rules that set out how employees should behave. As discussed in early sections, some of these professional expectations are not well aligned with the grieving employee and their particular needs.

The determinants of health model allows for early identification of employees who are vulnerable and are more likely to experience stigmatised and disenfranchised grief. A workplace that meets its obligation under the Equality legislation helps protect vulnerable employees from discrimination (as shown in section 5.2.4 Risk of exclusion or discrimination), but it must also be recognised that grief places employees in a vulnerable situation meaning those already at risk of discrimination are ‘doubly disadvantaged’ when bereaved.⁷⁷ For example, widowed pensioners, family carers and people from migrant communities may face additional challenges.⁵⁰

If at-risk workers are identified early, it means that:

- The workplace itself does not serve to disenfranchise a person's grief through assumptions that all grievers are the same and treated equally within the workplace and society
- Appropriate accommodations can be put in place to support the grieving employee who has additional needs (e.g. people with disabilities, physical or mental health challenges) or is susceptible to discrimination by belonging to a marginalised group (e.g. people from other cultures or ethnicities) or due the nature of the death itself (e.g. death by addiction)
- The secondary impacts of grief are not further exacerbated by the fact a lack of understanding or flexibility from the workplace (e.g. single parents with financial difficulties may require more flexibility when bereaved)

Employers that implement equality strategies right through the system, from recruitment to operations to governance, can help to contribute to their Environmental Social Governance (ESG) obligations particularly in the area of Diversity, Equity and Inclusion (DEI). It helps to ensure its people, meaning staff, clients, service users and anyone they do business with, are treated ethically and fairly and reduces the risk of discrimination.⁵⁸

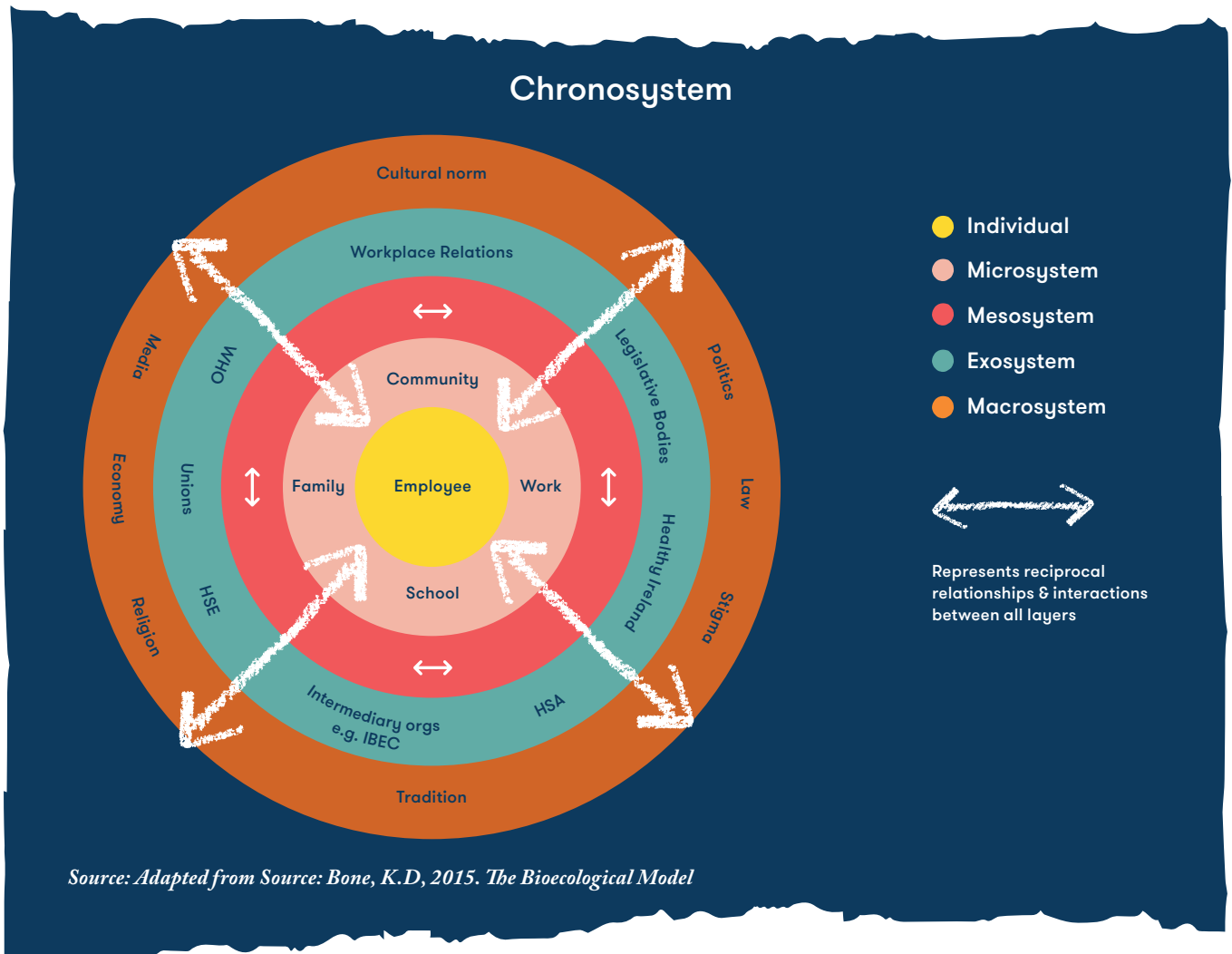
6.2.1 The Workplace within a larger system of influence

As part of a healthy workplace framework the WHO note the following;

".....workplaces exist in a much larger context. Governments, national and regional laws and standards, civil society, market conditions and primary health care systems all have a tremendous impact on workplaces, for better or for worse, and on what can be achieved by workplace parties" (pp.28, WHO, 2010)

Models such as Bronfenbrenner's Ecological Systems Theory model (figure 3) takes into account the cultural and societal norms and political structures that influence the griever and the grieving process all of which must be considered as potential factors of influence to the employee. It recognises the interplay of factors that impact the employees grieving either directly or indirectly. For example, the grieving experiences of employees may be improved if legislative bereavement leave is enacted. Through partnerships with health promotion organisations, IHF can embed grief education and information into their agendas resulting in a greater awareness of grief and the normalisation of grief support as a part of wellbeing.

Figure 3: Bronfenbrenner's Bioecological Model



If we consider the grieving employee within Ecological Systems Theory, the following considerations could apply:

- Employee's personal factors such as their health, age, coping skills, experience of loss
- Grieving within the family dynamic, home life influences, caring duties, isolating grief – demands outside of work
- Current societal attitudes to grief, the reluctance to speak about death and the stigma associated with certain types of grief (miscarriage, suicide, pet loss)
- Current legislation and policy surrounding workplaces (e.g. statutory bereavement leave, workplace health and safety, unions)
- The inclusion of all types of cultural traditions around grief (not just Irish) in workplace policy
- The impact of life events (getting older) but also significant life events (global pandemic) on the bereavement experience

The two-way interaction between an employee and their environment is also important here, for example, a grieving employee will be able to advocate for themselves if they have great awareness and understanding of their needs and rights.

If the employee's grieving experience is recognised within this larger context or system and the interplay of various factors is acknowledged stronger programmes can be developed to support those who are grieving. Organisational change that is further supported by government and health policy and recognises bereavement and grief as a major cause of workplace distress will have the best outcomes on employee health.

Coordinated action

Coordinated action and collaboration is essential for good grief support and care within workplaces and communities. In order to achieve IHF's mission for 'the best end of life and bereavement care for all'¹⁰² coordinated action from people, communities, institutions and the government is required to build foundations that are conducive to good health and good grieving. We identify the following coordinated action required to further the grief in the workplace agenda in a health promotion framework:

Between the employer and the employee

“A healthy workplace is one in which workers and managers collaborate to use a continual improvement process to protect and promote the health, safety and well-being of all workers and the sustainability of the workplace by considering the following, based on identified needs.”

(WHO 2010, Healthy Workplace Model for Action, pp.11)¹⁰³

For any Grief in the Workplace programme to be effective, employees from a variety of backgrounds need to be involved and have meaningful input into it. The inclusion of employees early on in the process, helps ensure that materials are inclusive, accessible and relevant to the people they are aimed at and also establishes buy-in from employees from the beginning. This also acknowledges the uniqueness of the grief experience and helps to reduce the risk of discrimination by ensuring all relevant cultural experiences and backgrounds are accommodated with policy and practice.

Between the employees, unions and worker representative organisations

Whilst it is important for any workplace to ensure employees are aware of their rights, it is also important that union organisations and employer/employee representative organisations (such as IBEC, CIPD, The Wheel) understand the significance of bereavement and grief on employee wellbeing and they themselves are equipped with the knowledge and skills to support employees around this. Despite the fact that there is no statutory bereavement leave in Ireland, there is health and safety legislation which protects employees within this context (as described in section 5.2.1) and equipping employees with this knowledge will help to empower them when grieving. Information about employee rights and organisational responsibility should be made clearly accessible in workplace policy and through the work of union representatives.

Between state-led organisations, NGOs and workplaces

Partnerships between organisations like IHF and government led organisations will continue to have a positive impact on bereaved employees. As part of any advocacy agenda, strengthening relationships with government stakeholders and policy makers is integral to creating change in the system in which the employee is part of. Working with employers and employees to strengthen their



voice around workplace issues is key to this and bringing the voice of the lived experience will help to influence the advocacy agenda. Storytelling is a powerful tool in influencing a government agenda and workplaces provide avenues to do this.¹⁰⁴ This joined-up approach helps to strengthen the advocacy case and helps policymakers identify what is happening on the ground.

Coordinated action across health promotion, NGOs and relevant government departments can help Ireland can help work towards healthier communities in Ireland where employee health and wellbeing is prioritised – this helps to meet obligations under Goal 8 in the UN Sustainable Development Goals (SDG) terms of providing sustained, inclusive and sustainable employment for all with a particular focus on Target 8.8:

‘Protect labour rights and promote safe and secure working environments for all workers, including migrant workers, in particular women migrants, and those in precarious employment.’

*United Nations (n.d.)*¹⁰⁵

The community and voluntary sector must be supported to make communities more conducive to good grieving and ensure that employees can access appropriate supports within their localities. This ensures that the needs of that particular community are met, and that bereaved people can stay connected to their community and are not isolated in their grief. NGOs can also strengthen the case for good grief support through coordinated action on particular areas of grief or bereavement e.g. IHF working with mental health charities to place grief within the wellbeing agenda. Creating cultures that acknowledge and support grieving employees will help to achieve Healthy Ireland’s Healthy Workplace principles.⁹² Working Well is a core action within the **Stronger Together: Health Promotion Plan 2022 – 2027**.

Utilising expertise from other voluntary and community groups, IHF can develop bespoke content for communities that are most vulnerable which could be used to support particular cohorts in workplaces e.g. family carers, migrant workers. The UN SDGs also highlight the need for reducing inequalities within countries (Goal 10) and this work can contribute towards that goal (UN, n.d.).¹⁰⁶




Conclusion

The aim of this position paper was to demonstrate that grief greatly influences an employees' health, wellbeing and their social and economic circumstances and without the support of workplaces and policymakers, employees will continue to feel the impact of this in their own lives, their family and beyond, sometimes with significant impacts on their future. The paper highlights that there are simple and low-cost solutions for employers to take which can result in a happier, healthier workforce and a more productive and cost-effective workplace. A key takeaway is to understand the role of compassion to ensure that employees are not isolated in their grief. This also demonstrates their value as a person and not just an employee and contributes to organisation wide morale and motivation for all employees, not just those who are bereaved.

The workplace is a perfect environment to promote good health practices and good grieving practices, both of which will positively influence each other. It keeps the employee safe from harm but equally minimises risks to employers by ensuring they are meeting their obligations under the Health and Safety Legislation and are providing employees with a duty of care they are both entitled to and deserve. It helps employees and employers be more prepared for death by understanding the significant role it plays in our lives and contributes to a more death literate society. It reduces the likelihood of employee burnout, exclusion and escalation of grief. It makes employers more attractive for new recruits and helps them keep their existing talent. It recognises the role of professional grief for people working in health and social care sectors and shows that the importance of the work they do. The list goes on.

Health promotion is a reliable and tested vehicle to help us build a grief literate and grief supportive society but also to help us reduce inequities and inequalities in the grieving experience and create settings that are inclusive, and respectful of all experiences. It helps us to recognise that coordinated action through partnership and collaboration, strengthens the message that grief is fundamental to wellbeing and by working together we can build supportive communities and workplaces and advocate for a statewide approach to grief and bereavement care in Ireland that is reflected in national policy.



It means that people will be encouraged to take individual and collective action with supportive foundations and infrastructure that allows for good bereavement and grief care. Finally, for Employers that acknowledges the seriousness of grief, it shows that you value your most important asset - your employee, by viewing them as a human first and foremost, and that in itself is factor that will help them to thrive in their working lives and personal lives and beyond.

Recommendations

Below is a summary of high-level recommendations for employers, unions & employee representative organisations and policymakers.

8.1 Recommendations for Employers

- Create a positive and health promoting working **environment** that challenges stigma and recognises grief in the workplace and the fundamental role it can play in workplace wellbeing
- Build the capacity of your **people** through the development of grief literacy and grief skills in partnership with organisations such as IHF
- Adopt workplaces **practices** and conditions that supports employees' health, helps build their resilience to allow them cope better with major life stressors and is free from bullying, harassment and discrimination
- Reduce risks to employee welfare and health and to the organisation itself through **governance** structures that recognise grief as a health a safety hazard and reflect this in robust and accessible policy and monitoring processes

8.2 Recommendations for Policy Makers

- Legislate for statutory bereavement leave to help employees take the time they need when experiencing one of most difficult times in their lives
- Legislate for leave entitlements for parents who miscarry or loose a child before the 24th week of pregnancy
- Accelerate the Dail Eireann proposal amend the 'Parental Leave Acts 1998 and 2006' to include a ten-day leave entitlement to parents who lose a child from 24 weeks of pregnancy up to the age of 18 (Government of Ireland 2021)
- Include and address bereavement and loss specifically in the next iteration of [Healthy Ireland \(2021\) at Work a National Framework for Healthy Workplaces in Ireland 2021–2025](#)
- Extend the [National Mental Health Promotion: Stronger Together](#) to include a more specific reference within the Working Well Actions on grief in the workplace for all employees (not just healthcare workers)

8.3 Recommendations for Unions and Employee Representative Organisations

- In partnership with IHF advocate for the implementation of national bereavement leave in Ireland.
- In partnership with IHF support employers and employees to have a greater understanding of grief and how it impacts them from a health and safety perspective.

Appendices

Appendix 9.1 Statutory Leave Entitlements

Table 2: Statutory Bereavement Leave Entitlements

Country	National Bereavement Leave
Ireland	<p>No statutory bereavement leave provision in Ireland i.e. no legal obligation for employers to provide employees with bereavement leave.¹⁰⁷ (Citizens Information Board, 2022)</p> <p>If a person has a miscarriage or still birth anytime after the 24th week of pregnancy or their baby has a birth weight of at least 500 grammes they are entitled to full maternity leave - 26 weeks and the state payment.¹⁰⁸</p>
UK and Northern Ireland	<p>From April 2020, Jack’s Law places a legal obligation on employers to provide parents with two weeks state paid bereavement leave if their child under the age of 18 dies or if they are still born from 24 weeks of pregnancy.¹⁰⁹</p> <p>For non-dependants there is no statutory bereavement leave provision in the UK or Northern Ireland.¹¹⁰</p>
Spain	<p>Statutory bereavement leave provision of two days (four days if travel is required) paid leave when an immediate family member dies (this does not include unmarried partners).¹¹¹</p>
Belgium	<p>Statutory bereavement leave provision of one to three paid days depending on degree of proximity.¹¹² (Leyson and Wens 2020)</p> <p>Since 2021, ten days paid bereavement leave in the event of the death of a spouse or child. Flexibility around when the leave can be taken.¹³</p>
Sweden	<p>Statutory bereavement leave provision of ten days paid leave.¹³</p>
Denmark	<p>Statutory bereavement leave provision of 26 weeks unpaid leave when a child under 18 dies.¹³ No statutory bereavement provision for any other relatives.</p>
Portugal	<p>Statutory bereavement leave provision of two to five days depending on degree of proximity.¹¹²</p> <p>Fourteen to thirty days for women for special cases of miscarriage.¹¹²</p>

Table 2: Statutory Bereavement Leave Entitlements (continued)

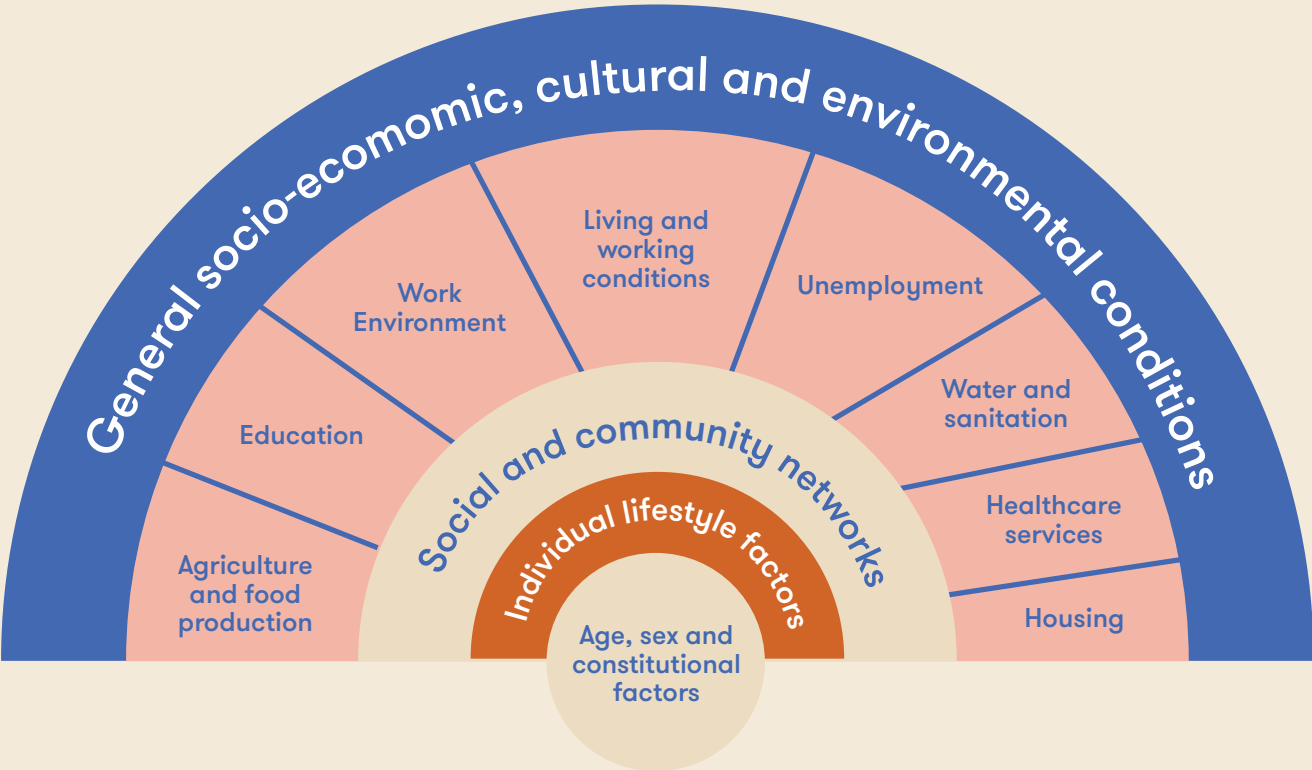
Country	National Bereavement Leave
Finland	No statutory bereavement leave provision. ¹¹²
Slovenia	No statutory bereavement leave provision. ¹¹²
Lithuanian	Statutory provision of five unpaid days of bereavement leave. ¹¹²
Switzerland	No statutory bereavement leave provision. ¹¹²
Netherlands	No statutory bereavement leave provision. ¹¹²
Australia	Statutory provision of two days paid bereavement leave. ¹¹³
India	No statutory bereavement leave provision. ¹¹⁴
Canada	Statutory provision of three days paid bereavement leave. ¹¹⁵
USA	No statutory bereavement leave provision. ¹¹⁶

Appendix 9.2 National and International Workplace Health Promotion Strategies

Please Note: The documents below were used to inform this position paper particularly in terms of workplace health promotion.

- **World Health Organisation 2010 Healthy Workplaces: A Model for Action**
<https://www.who.int/publications/i/item/9789241599313>
- **World Health Organisation (2010) Healthy Workplace Framework and Model**
<https://healthyworkplace.ie/wp-content/uploads/2022/12/1-WHO.pdf>
- **World Health Organisation (2022) Guidelines on Mental Health at Work**
<https://www.who.int/publications/i/item/9789240053052>
- **Department of Health (2020) Sharing the Vision a Mental Health Policy for Everyone**
<https://www.gov.ie/en/publication/2e46f-sharing-the-vision-a-mental-health-policy-for-everyone/>
- **Healthy Ireland (2021) at Work a National Framework for Healthy Workplaces in Ireland 2021–2025**
<https://www.gov.ie/en/publication/445a4a-healthy-workplace-framework/>
- **Stronger Together: the HSE Mental Health Promotion Plan 2022 - 2027**
<https://www.hse.ie/eng/about/who/healthwellbeing/our-priority-programmes/mental-health-and-wellbeing/hse-mental-health-promotion-plan.pdf>
- **Mental Health Ireland (2023): Wellness Works, A Framework for Progressing Mental Health in your Workplace**
<https://www.mentalhealthireland.ie/wp-content/uploads/2023/06/Workplace-Mental-Health-Policy-final-single-pages-2.pdf?external=1#:~:text=This%20Framework%20is%20for%20employers,the%20area%20of%20mental%20health>

Appendix 9.3 The Social Determinants of Health



Source: Social Determinants Model 1991 as cited in Dahlgren and Whitehead (2021)

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