

**SURVIVING THE SORROW STORMS:  
The Role of the Pastor in Facilitating Grief Care**

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**OBJECTIVES:**

- 1. UNDERSTAND MYTHS AND DYNAMICS ABOUT GRIEF**
- 2. IDENTIFY TYPES OF INTERVENTIONS FOR SUPPORT**
- 3. APPROPRIATE A SYSTEMIC APPROACH TO RESOLVING GRIEF ISSUES**
- 4. PROVIDE A PLAN TO MANAGE INTENSE GRIEF REACTIONS**
- 5. SUGGEST A PLAN FOR FOLLOW UP WITH THOSE WHO GRIEVE A LOSS**
- 6. IDENTIFY RESOURCES AND SUPPORT SYSTEMS AVAILABLE**

## INTRODUCTJON

Grieving is not an illness.

Grieving is not a weakness.

Grieving is not a self-indulgence.

Grieving is not a reprehensible habit.

Grieving IS an essential psychological and spiritual process.

Grieving must be recognized.

Grieving must be facilitated.

Grieving must be encouraged.

Grief is a neglected and misunderstood process.

John James and Russell Friedman, *The Grief Recovery handbook*, p<sup>3</sup>

Grief — “is the normal and natural reaction to loss of any kind. It is the conflicting feelings caused by the end of or change in a familiar pattern of behavior.” John James and Russell Friedman, *The Grief Recovery Handbook*, p.3

“My tears are my words,” Samuel Beckett, until we can collect our thoughts, identify our emotions, and regroup for an active life that is forever altered by loss.

Mourning — is the social, cultural, public response to loss to acknowledge and remember the relationship as well as to support and comfort each other. When words fail, we need rituals to assist us in the rite of passage for separation, transition and incorporation. Alan Wollelt, [www.centeitrloss.com](http://www.centeitrloss.com)

Bereavement — encompasses grief and mourning which denotes the thoughts, emotions and behaviors of a person who has suffered a loss and is specific to survivors.

Kathleen A. Egan, Robert L. Arnold, *AJN*, September 2003, vo t03 no9p42

We are ill prepared to deal with loss — we are taught to acquire, get, keep, accumulate, profit, benefit, reward, inherit, receive, life to satisfy personal desires. Loss: don't think about it, don't express feelings about it, don't act like you can't adjust and go on, it is not appropriate to ask for help, tendency toward isolation, trying to make sense of the loss, not in control, anxiety due to lack of security.

Others are ill prepared to deal with those who experience loss — don't know what to say, say the wrong thing, fear expression of feelings, change the subject, intellectualize, don't listen, don't want anyone to talk about it, get a professional diagnosis, keep the with, let me know if you need anything.

## BIBLICAL Insights for UNDERSTANDING GRIEF

The Bible dignifies grief by presenting it as a God-given<sup>4</sup> therapeutic response to loss.

### God grieves

The Father grieves over evil in Noah's day (Gen. 6:6)

The Son grieves over the death of Lazarus (John 11:35-38)

The Spirit grieves over believers' s (Eph. 4:30)

### God responds to our grief

Recording our tears (Ps, 56:8)

Sympathizing with our weakness Heb. 4:15-16)

Eventually ending our grief (Isa, 65:19; Rev. 21:4)

### Grief measures the meaning of our attachments

Our attachment to friends (John 11:36)

Our attachment to family (Gen. 50:1)

### Grief potentially interrupts life's routines

Leaving mourners with little appetite (2 Sam. 12:17)

Causing mourners to wish for death (2 Sam. 18:33)

Multiplying mourner's illness and death (1 Sam. 4:18-22)

Grief potentially persists over an extended period of time  
For seven days (Gen 50:10)  
For thirty days (Num. 20:29)  
For seventy days (Gen 50:3)

Grief is potentially expressed in a variety of ways  
Before a loss (Matt. 26:37-38)  
By shock, numbness, or denial (Mark 8:31-32)  
In anger (Job 10:9)  
Through bargaining (Isa. 38:1-22)  
With depression (2 Sam. 12:16-18)  
With *acceptance* (Phil. 1:12, 2 1-24; 4:11-13)

Grief is potentially facilitated by various expressions  
Through songs (2 Samuel 1:17-27)  
Through poetry (Lam. 1-5)

## SOME MYTHS ABOUT GRIEF AND LOSS

(Adapted from The Grief Recovery Handbook, John James and Russell Friedman)

Don't feel bad.  
All losses are the same.  
If resolved, grief never resurfaces.  
Put painful things out of your head.  
Expressing feelings resolves grief.  
Intensity and length of grief indicate love for what was lost.  
Grief progresses in orderly stages.

Replace the loss.  
Don't think about your loss especially at holidays.  
There is no reason to be angry at others for the loss.  
Be happy that other Mends and family are part of life.  
Quickly find a replacement for the loss.

Grieve alone.  
Everyone grieves in the same way.

Family members and friends are always helpful.  
A griever doesn't have a right to grieve.  
Well meaning comments do not add stress.  
Grief and mourning are the same.

Just give it time.  
Grief declines certain period of time.  
Ritual is unimportant at a time of loss.  
It is not important to have social support.  
Put the loss in the past and go on.  
*Completing* work with grief tasks is painless.

Be strong for others.  
One who grieves cannot lose control.  
Confusion means one is "going crazy."  
Protect children from loss and grief.  
Hollow words of "I'm fine."  
God has abandoned me.

Keep busy.  
Grief does not affect health.  
Grieving means one's faith is not in tact.  
It is not normal to want to do things the same as before.  
The goal is to get over it (preoccupation with enshrinement,  
bedevilment).  
Take care of others.

## THE Dynamics OF GRIEF

Grief— a tangled ball of emotions

Grief— a tangled ball of thoughts

Grief— a tangled ball of behaviors

## Responses to grief

Shock — numbness, not comprehending full extent of loss

Emotional release— realization of how dreadful the loss is, intensity of feelings

Despair depression, loneliness, isolation, helpless, no initiative

Physical symptoms — ill, sleep/sleepless, nausea, headache, eating/not eating

Panic — fear of breakdown, something wrong with me, lack concentration

Guilt— recall of neglect, maltreatment, confession, forgiveness, grace

Dealing with grief of others — responses/lack of response

Lack of confidence — functioning in unaccustomed way

Short-term energy relieving behaviors — detrimental approaches of behavior

Hostility — toward other family members, boss, company, “cause” of loss

Confused -- detached, vulnerable

Isolation, need external encouragement for motivation

Sad — *preoccupied*, overwhelmed, yearning, lonely, scattered, fixated Readjustment to new realities different self in a new situation

Dreams, nightmares, presence — expecting to see, hear

Relief— let down, now it is over

## UNIQUENESS OF GRIEF RESPONSE

Nature of the relationship

Social support system

Associated characteristics of the deceased, event, or thing lost

Attachment characteristics of the bereaved

Nature of loss

Cultural background

Spiritual issues

Social expectations

Stressors

Previous loss experiences

Funeral/memorial experience

Unfinished business

Lack of information or misinformation

Organizing MODEL: STAGES OF GRIEF WITH TASKS

*Adapted from Grief Consenting Homework Planner, Phil p. 2-4*

## ACCLIMATION

- Adjusting — loved on is gone, new set of circumstances
- Functioning — taking care of everyday responsibilities
- Keeping in check — management of thoughts, feelings, behaviors
- Accepting support — accept kindness, help, encouragement, and support

## EMOTIONAL IMMERSION

- Focusing internally — unresolved issues, what-ifs, woundedness
- Dealing with feelings — variety of emotions

## DECONSTRUCTION

- Dealing with life changes — living patterns, decision-making
- Developing insight - soul searching
- Letting go — accepting inevitable changes

## RECONSTRUCTION

- Finding meaning in a different world
- Establishing what is important

## RECLAMATION

- Creating a new life
- Reengaging with the world

## RECONCILIATION

- Living in present — not past, making decisions for future
- Reestablishing *self*— self awareness in world

## THE TASKS OF THOSE WHO GRIEVE

Acknowledge the reality of the loss.

Identify and express the emotions resulting from the loss.

Maintain some familiar patterns/change some patterns.

Exercise and eat nutritious food.

Use old skills that brought comfort.

Plan some new projects, doing things that have been “on hold.”

Name related losses.

Use silence to regroup.

Review and retell the story of the events.

Establish the importance of the event in life.

Adjust to a different environment.

Journal your journey by writing, music, art, crafts, hobbies, gardening.

Relocate the relationship of the person, event, thing lost from presence to memory.

Develop a new self-identity.

Complete unfinished business.

Affirm progress.

Reorganize life pattern.

Postpone making major decisions.

Discover meaning.

Receive support from other&

Reaffirm faith.

Reinvest in Life with creative energy.

## ROLE OF SUPPORT PERSON

Recognize different types of grief:

Anomie Grief— grief without traditional support (S1DS)

Abbreviated grief— unusually short accompanied with abnormal behaviors

Anticipatory Grief— expected or foreseen

Ambiguous Grief— obscure, inexact, vague

Chronic Grief— persistent, habitual, lingering

Complicated Grief— multi faceted, complex, entangled

Delayed Grief— postponement, or inability to deal with grief immediately

Destructive Grief— potential or real harm to self or others

Disenfranchised Grief— deprived due to social or personal stigma

Exaggerated Grief- magnified, overwrought

Fixated Grief— abnormal attachment, obsessive preoccupation ~ .

Overflowing Grief— beyond acceptable limits

Inhibited Grief— restrained, impeded, obstructed, repressed, suppressed

Redemptive Grief— recovered, restorative, release

Stacking Grief— accumulated, piled up

Survivor Grief— one who survived an event, catastrophe

Unrecognized Grief— unidentified, indefinite

High Risk: when one or more of these factors are evident:

- Perception of inadequate social support
- Conflict or ambivalence in relationship
- Mental health issues
- Evidence of inability to cope
- Multiple stressors
- Dependence on a person or thing
- Inability to acknowledge death

Moderate Risk: when two or more of these factors are evident:

- Limited support system
- Unexpected or traumatic death
- Children in the home
- Coping difficulty
- Continuing health issues or sleeplessness
- Unresolved prior losses
- Guilt about decisions concerning patient care

Low Risk is when these factors are evident:

- Adequate social support
- Coping skills to deal with stress
- Resolution of past losses
- Positive relationship with patient
- Older age acceptance
- Patient received adequate care
- Sufficient financial resources

High Risk: when one or more of these factors are evident:

- Spiritual belief system is meaningless
- Relentless feeling of guilt, shame
- Inability to experience grace and forgiveness
- Troubled spirit about unfinished business
- Alienation after acute unresolved failure
- Refusal to participate in spiritual dialogue or ritual
- Cynical negative comments about spirituality
- Demanding rights
- Paralyzing fear of death
- Perception of inadequate spiritual support

Moderate Risk: when two or more of these factors are evident:

- Inadequate spiritual support is perceived
- Difficulty using spiritual exercise for coping
- Ambivalence about spirituality and life's meaning
- Restless spirit due to unresolved issues
- Fear at prospect of imminent death
- Doubt about belief system and eternal destiny
- Perception of illness as punishment
- Changes in feelings about God, suffering, death

Low Risk: when these factors are evident:

- Effective use of spirituality to cope with crisis and loss
- Adequate spiritual support
- Positive relationships

- Sense of grace, forgiveness, peace
- Readiness, acceptance to leave
- Completion of unfinished business
- Feeling comfort in present circumstance
- Shared wishes with family about ritual, funeral

High Risk: when one or more of these are evident:

Low Risk when these are evident:

- Continued sleeplessness
- Sleeping to escape
- Prolonged lethargy
- Serious illness
- Lengthy physical isolation
- Dependency on substances
- Potential harm or violence to self or *others*
- Extreme physical neglect
- Not eating / overeating
- Incessant activity

Moderate Risk when two or more of these are evident:

- Neglect of personal care
- Difficulty in meal preparation
- Behaving out of character
- Wandering aimlessly
- Careless driving
- Limited contact with others
- Irregular eating
- Erratic exercise
- Accident prone

Low Risk when two or more of these are evident:

- Regular eating habits
- Personal self care
- Attentive to medical care
- Moderate exercise

- Socialization in different environments
- Projects requiring physical activity
- Adequate relaxation, rest, and sleep
- Avoidance of physically extreme activity or temperatures

#### BEREAVEMENT ASSESSMENT/INTERVENTION

Name \_\_\_\_\_ DoB \_\_\_\_\_ — Age \_\_\_\_\_ Gender \_\_\_\_\_

Address \_\_\_\_\_ — Phone \_\_\_\_\_

Relational Status \_\_\_\_\_

Date of Primary Loss \_\_\_\_\_ Related  
Losses \_\_\_\_\_

Loss Summary

Present risk status of bereaved: low (1), medium (2), high (3):  
adaptation to stress: satiety, confusion, panic, adaptation, failure,  
head/neck pain; depression, guilt, indecisiveness, appetite difference,  
irritable, guilt...

Helpful coping skills: strengths, past coping successes, making requests

Support system: family, friends, faith community, professional

Immediate goal: difficult area, support, assistance with tasks, personal decision-making, medication, spiritual care, establishing new life patterns, personal care, other

Steps to reach goal: who, why, what, when, where, how, who will know, specific reading, activity, journaling, hobby, support group, travel, special project

Response:

### *Significant Grief Statements*

*This worksheet is something you can use privately to deal with grief from any kind of loss you have experienced.*

*Date: \_\_\_\_\_*

*In my loss, this is the issue I felt offended about -- how the other person failed my expectations, what do I wish would have been done better, more or less?*

*The other person's part in the loss — what was said, felt, done or failed: I forgive*

*You for....”*

*I can appreciate:*

*Significant Statements that I need to say to you about my loss:*

*I love you and now I must let go of the pain. Goodbye,*

## SIGNIFICANT RITUAL

Definition: the symbolic affirmation of values by means of culturally standardized utterance and actions.” quotation by Robert Taylor, *Cultural Ways*, in *Understanding Death, Dying and Bereavement*, Lining and Dickinson

### Functions of ritual

- Anxiety producing — emotional stress due to disturbance
- Anxiety reducing — release, relief for emotional distress
- Validation — of belief system
- Reinforcement— of values
- Reassurance — part of life cycle, everyone experiences loss
- Security — safe space

- Solidarity — group ties
- Status change — introduce survivors to new role
- Reestablishment — interaction with others

“Religious system provides a means to reestablish the social order challenged by ducat our society has institutionalized the continued importance of religion by creating funeral rituals that have a religious quality about them.” Lemming and Dickinson p. 159

Function of burial ritual — contribution to social system

- Manifest functions ‘- intentional objective consequences for individual and group adjustment (pay respects, support the *living*), reaffirms group structure, meaning and sanction to separation of the dead from the living, transition of soul
- Latent functions — unintentional contribution to adjustment (family reunion)
- Symbols (ISAS) “*Individual* —*level* behavior is in response to *Symbols* relative to the *Audience*, and relative to the *Situation*.”

## BEREAVEMENT FOLLOW UP

Name

Calendar the most difficult day(s)

Support group dates:

Personal contacts, counseling, support, activities

One month follow up   mail   e-mail   phone call   personal   date

Three month follow up   mail   e-mail   phone call   personal   date

Six month follow up   mail   e-mail   phone call   personal   date

Nine month follow up   mail   e-mail phone call personal   date  
Twelve month follow up   mail e-mail phone call personal   date

REMEMBERING

REASSESSING

RECONCILING

RITUALIZING

STRATEGY FOR SPIRITUAL CARE

Religion

REAFFIRMING

RESOURCING

READJUSTING

RESOLVING

REORGAMZING

RECONSTRUCTING

REENTERING

RECOVERING

Culture

ATTENDING

Asserting

ACTING

*THOSE WHO HAVE  
EXPERIENCED LOSS  
DESIRE THREE BASIC THINGS:*

1. LISTEN TO MY THOUGHTS.

2. VALIDATE MY FEELINGS.

3. ENCOURAGE MY PLAN OF *ACTION*.

## RESOURCES FOR BEREAVEMENT CARE

Bibliography

Books

Church

Counselor

Family

Friends

Funeral Home

Hospice

Internet

Journals

Library

Nursing Home Facility -

Physician

Mental Health Professionals

The Trustless Healing Hearts Grief Center, 1709 S. Baltimore, Tulsa  
OK 74119, 918-587-1200

Videos

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