

THE JOURNEY ON THE ROAD OF GRIEF

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I. Introduction

Grief is a natural part of the human experience and is as natural to every person as breathing. Grief is individualized. **Mourning** is personal and unique, yet required in the whole process of finding new happiness. (Richardson pg. 52).

II. Layers of Grief

Doug Manning, in his booklet “Discovering Comfort” says that “grief is like peeling an onion, it comes off one layer at a time and you cry a lot”. The onion analogy allows for great flexibility because no two onions are exactly alike and the same is true of the grieving experience. (Manning pg. 7)

The first layer is a **dry hull** this describes the whirl of the first days of grief. When the trauma comes, the mind almost shuts down. Things are real, yet unreal. Reality comes later and comes gradually.

The second layer is the **reality layer** When the whirl stops, it all land on us and the real pain begins and the reality begins to slowly take over.

The third layer is **reaction**. This is when we begin to fight back, anger comes, and you may begin to resent people and their efforts to deny your grief. Too often, the first year is seen as the turning point in the grieving process. In days gone by, widows wore “widows weed” for a year and men would wear a black band around their left arm as an outward expression of mourning. At the of the end of that time period, the mourning/grief should have been “done”, and they could move on--many times to remarry. When they did remarry before the end of that first year, they were considered “outcast”. In some parts of our present society, three months is considered “long enough”, we should “be over it”

The fourth layer is **reconstruction** We do not get well, the pain does not go away, we don't forget to stop honoring our loved one. But the day comes when we turn the corner in the way we cope.

This journey of grief is not a sprint, not a marathon, but a **JOURNEY**. The second year is/maybe harder than the first, the pain maybe lessened but permission to grief is harder. What we mean by that is that many people don't understand that we are still peeling our onion and it still hurts. Even those loved ones around us who are at a different part of their journey may not understand. Each family member will mourn the same death in their own unique way. Siblings will deal with the loss of a parent differently. The

spouse will deal with the loss in a very different way than the children. Each spouse will deal with the loss of a child in a unique way (this may also depend on the age of the child who has died). As a result the family members may be unwilling to accept where the other are in their grief and try to bring pressure on the them to “get over it”, or “just move on”.

The wilderness of your grief is **your** wilderness, it is a creation of your unique self, the unique person who died and the unique circumstances of your life. In life, everyone grieves, but their grief journeys are never precisely the same. Despite what you may hear, you will do the “work of mourning” in your own special way. Be careful about comparing your experience with that of other people. **Do not adopt the assumption about how long our grief should last. Just consider taking “one day at a time” approach.** By doing so allows you to mourn at your own pace. (Wolfelt)

*Love lives on beyond goodbye
The truth of us will never Die
Our spirits will shine long after we are gone
And so our love lives on*

Anon (Manning pg. 15)

III. Kinds of Loss

Most of the time when we deal with grief we think of the loss of a person, a spouse, roommate, friend, sibling, parent, child. Subtle or less obvious losses can cause strong feelings or grief, even though those around you many not know the extent of your feelings. These include: 1) loss of health of self or loved one such as Alzheimer's; 2) death of a pet; 3) leaving home for young person or having to leave your home as an older person because of health; 4) loss of financial security or change of job; 5) divorce; 6) Sometimes there is grief at the marriage of a child, especially if we are not comfortable about the chosen spouse; 6)a family “falling out”.

The grief journey of these losses may not be as intense as that of the loss of a family member, but they still must be worked through. **We may be walking several journeys at the same time.**

IV. Myths about Grief

Wolfelt presents five common myths about grief:

1. **grief and mourning are the same experience.** **Grief** is the thoughts and feelings that are experienced within oneself upon the death of a loved one. **Mourning** is the term used to describe what the griever does when he takes the internal expression of grief and expresses it in some fashion. Wolfelt calls mourning “grief gone public”. Many people

in our culture grieve, but do not mourn. Instead of being encouraged to express grief outwardly we are often told to “keep a stiff upper lip”, “keep your chin up”, “keep busy”, thus grieving is done in isolation and never in the presence of loved ones.

2. **there is a predictable and orderly progression to the expression of grief** To have an “orderly” process of grief may for many help them make sense out of an experience that is not “orderly”. Every person’s grief is individualistic/uniquely his or her own. The one concern about thinking of grief in stages is that they think a person ought to be in “Stage 2” , or after several months since the loss be in “Stage 9”. “Just as people die differently, people mourn differently and expecting anything less would be to demonstrate a lack of respect for the uniqueness of the person” (Wolfelt)

3. **it is best to move away from grief and mourning instead of toward it** Do we move people away from food in order to be filled? Grieving is painful and peace is found within grief itself. We call this managing or properly handling pain. (Richardson) Unfortunately, in our western culture, especially in the U.S., mourners do not give themselves permission or do not receive permission to mourn. This is especially true of men and boys. Many view grief as something to overcome, rather than experience. People continue to express grief outwardly “to mourn” are often viewed as “weak, crazy, or self pitying”. Refusing to allow tears, suffering in silence and “being strong” are thought to be admirable behaviors.

4. **tears expressing grief are only signs of weakness** we often hear some “comforter” say things like “she wouldn’t want you to cry”, “tears won’t bring him/her back”, one may have any been told by the dying “don’t cry for me”. In reality, the one who has died cannot care what we do and has no control over our grieving. The dead are no longer suffering, we who live is the sufferer. Don’t try to control the tears of another, but give them the freedom to cry and be with them in the process. Crying makes one feel better emotionally and physically, managing their grief resulting from the loss. (Richardson pg. 15)

5. **the goal is to “get over your grief”** we may have heard people say, “aren’t you over this yet?”. To think that we as human beings “get over” grief is ridiculous!! We never “get over” our grief, but instead become **reconciled** to it. This not to say we will never be happy or productive again, life just takes on a new meaning when you are able to work through the loss slowly and patiently. (Wolfelt)

It is really a matter of working with it and not getting over it. When grieving a loss, becoming comfortable with the loss takes place somewhere along the way. You are faced with the reality of living without the one who has died. Your love for that person continues and your memories live on--there is “no getting over it”. It is often heard “it takes time: got get over it. Time itself is not the healer. It depends on how that time is used after emerging from the forest having learned to live a new life in managing the pain

of loss. Grief is painful worked and not only by working with it are able to move along with our own lives. (Richardson pg. 38-39)

V. Grief in a Pandemic

This past year has been a very difficult one for everyone, but most especially for those who have had loved ones in care facilities and those whose loved ones have passed away—due to COVID or other causes. We could not be with the loved one no matter what was going on. Dr Alan Wolfelt was quoted in an article in a *Rolling Stone* issue on line, April 10, 2020, ‘Holding the hand of the sick and/or dying loved one and spending time with the body after death are ways that we as human beings acknowledge the reality of death, and begin to embrace the pain of the loss’. Many people opted to cremate their loved one and have a memorial service “later” when they could have family and friends with them. For those that did choose traditional “funeral/burial”, it was most often a graveside service with a limit of ten in attendance. All of this meant that again, most of the family and almost all friends were excluded.

“Funerals are essential because they help us begin to meet all our mourning needs. Funerals help us acknowledge and accept the reality of death, share memories and convert our relationship with the person who died from one of presence to one of memory, and help us start to think about how to live life going forward with meaning and purpose. (Wolfelt). A funeral or memorial is for the living not the dead.

For the reason stated by Dr. Wolfelt, I personally feel that when one requests “no funeral” they are doing a disservice to their loved ones and friends.

VI. Types of Grief

1. **distorted grief** distorted grief results from feelings of extreme anger and often a sense of guilt. When the emotional energy needed to grieve a loss is spent in anger and feelings of guilt it leaves little time for grief. This often happens when the death is the result of murder, rape, or other physical abuse. The entire bereavement experience is consumed by a furious rage. When anger and guilt are tenaciously retained, there is little place for healthy grief. Often, guilt is self manufactured--“what if”, “if I had only”. It is important to know if the guilt is real or self imposed, this will help a grief worker help a griever to move along on this journey.

2. **chronic grief** chronic grief in part is the result of over valuing objects that belonged to the deceased. The chronic griever keeps the deceased alive by continually crying or building a shrine from the belongings of the deceased. Going to the grave site

everyday, not touching the room of the deceased are examples of chronic grief. Many times we misjudge chronic grievers and give up too early. A mother, whose daughter had committed suicide at age 12, would not touch the bedroom, even to the point of not making the bed for a year and half. She was not a chronic griever, she just simply took her time coming to face the full facts of the how and why of her daughter's death. There is help for the chronic griever, but it may well be professional help.

3. **integrated grief** integrated grief is like adding a dark or black color to an otherwise brightly colored picture, a quilt, or strips of clay. The dark actually causes the brights to stand out more. As significant loss in our lives is like the black, it causes a void or emptiness in one's emotional state and becomes a part of you. The grief will always be there, because the loss will always be there, neither can be removed. In learning to live with loss, one is learning to live with the associated grief. The grief will always be there, but the intensity will abate. Grief can come unexpectedly, even after long periods of time. Years down the road, surges of grief may come when you least expect it, a sight, smell, song, seeing someone that reminds you of that loved one may trigger this grief. Do not misconstrue this for "unresolved grief" or "chronic grief", it is simply to be noted that loss and grief will integrate into your life.

4. **disenfranchised grief** disenfranchised grief may come when a community will not allow mourners to grieve openly. We have seen this recently in our state, Sand Springs Baptist church; Santa Fe school, El Paso Wal Mart, Odessa drive by shooting. Other parts of the country, Boulder CO, Colorado Springs CO this year. The disenfranchised mourners—**the loved ones of the perpetrator**—do not receive the recognition, support, sympathy or care by or from the community, because of the anger and shock. These families have losses just like the other families, and maybe doubly so since their family member was the perpetrator. Most of the time almost no one from the local to the national media showed them much sympathy—only intense dislike. Many in the community were not able to recognize those families losses.

Disenfranchised grief can also occur with loss from a miscarriage, an abortion, ex spouse, friend or even the loss of a job, the loss of a pet. There are those who deem the griever "incapable of grieving" This especially true of children, not only after the loss of a parent, sibling or grandparent, even that pet. The same reasoning often happens to the elderly when they must move from their home to another place of living. They have lost their independence, probably their health, their home environment, yet little recognition of this loss is shown by the family. One in disenfranchised grief may also feel frustrated and misunderstood.

5. **anticipatory grief** anticipatory grief comes when one is diagnosed with a terminal or long term illness or Alzheimer's or Parkinson's. When one deals with Alzheimer's we grieve the mind long before the loss of the body. It may even come when

one is needing to downsize and move from the home they have lived in for years. Even needing to “getting rid” of things may result in anticipatory grief.

6. **normal grief** what is “normal grief”? There is no good definition of normality because mourning is, as we have already stated, individualized, personal, unique, and yet required in the whole process of finding new happiness. When experiencing grief, it is common to experience many emotions:

- a. state of shock--especially if the death is sudden
- b. like you are “going crazy”
- c. unable to focus or concentrate
- d. very emotional--tears; sometimes without warning there wells within us an uncontrollable urge to express our grief. In our western culture we tend to discourage “public displays of emotion”.
- e. depressed and very lonely--eventually there comes a feeling of utter depression and isolation. It is ok to be depressed while grieving. Grief is a depression, pure and simple. It is a depression where drugs are NOT commonly used. This depression is neither manic or clinical. It is a depression that comes by aloneness as the result of a significant loss. As grief work is done the depression will subside. (Richardson pg. 63) What we must never forget about the depression experience is that one day it will pass. Dark days do not last forever. For some people the clouds may roll away seemingly all at once, for others it takes longer. Depression and a feeling of loneliness may especially true of a widow/widower or some older person or even a young adult who has move from home to a new location to attend school or for a job. One may feel anxious, nervous or fearful and feel like they “want to escape”

VII. Children and Grief

When a family member dies, children react in different ways than an adult will. In years past, when people were born and died at home, death was a natural part of everyday life and children took part in that event with everybody else. Today, in most families parents don’t think about , or want to explain death to their children until a relative dies. Some deem children “incapable or grieving” whether that loss is a human or a pet.

Adding to a child’s shock and confusion at the death of a sibling, parent, grandparent is the unavailability of other family members, who may be so shaken by grief that they are not able to cope with the normal responsibility of child care.

Parents and other adults, especially teachers, should be aware of normal childhood responses to a death in the family, as well as danger signals. Children ask questions in a very direct way. They may not talk about feelings as much as about more

concrete things: what the coffin looks like inside, is lying in the ground scary, cold, dark and even what the grave looks like.

How we talk to a child will depend on the age and their ability to understand the concept.

- 1) when talking to a child always use the words, **DEAD or DIED**. Children don't understand euphemisms. When you tell the child that "grandmother is sleeping", they think that she is going to wake up soon. When you say "granddad passed away", they may think that he has just gone away for a while.
- 2) when you are mourning, let the child know it. The parent/adult should let the child see they are truly sad. If grief is hidden, the child will think grief is an unacceptable feeling.
- 3) should a child go to the funeral. Read the child's feelings and consider the age and maturity of the child. If he/she is frightened about attending the funeral, they **should not** be forced to go. At the same time they **should not** be forced to go to the funeral home to "see" the loved one. On the other hand **IF** the child wants to go, wants to see and touch the loved one, then by all means let that happen. **DO NOT** make a decision for the child in this circumstance.
- 4) **be honest** with the child, answer questions age appropriate. **LISTEN** carefully when a child asked a question. "Am I going to die", or is the other parent/grandparent going to die. If they ask a question you don't know the answer to, say "I don't know". Help them to hold on to memories of the loved on, later on--maybe years--ask if they "remember", or this was his/her "favorite_____"

Once children accept the death, they are likely to display their feelings of sadness off and on for a long period of time and often in unexpected moments just we adults do. The surviving relatives should spend as much time as possible with the child, making it clear that the child has permission to show feelings openly or freely. In many communities, there are locations where children and teens can meet with other grieving children in a counseling situation. Some are operated by hospice companies, churches, other organizations. The children are counseled in an age appropriate setting, check in you community.

VIII. Teens and grief

Each year thousands of teenagers experience the death of someone they love and/or a close friend, or one they "just went to school" with. Sadly, we see all too often tragedies at the school that affects the entire student body, even though

not all would have known those involved. Being a teenager is hard enough, not a child, not an adult, but to face the death of a friend or “just someone you know” makes it very difficult. Caring adults, parents, teachers, counselors or friends can help teens during this time. Many adults who lack understanding of their own grieving experience discourage teens from sharing their grief. The teen may give out signs that they are struggling with complex feelings, yet are often pressured to act as they are doing better than they really are. When a parent dies, they are told to “be strong” and “carry on” for the surviving parent (especially if the teen is a boy and the surviving parent is his mother). They really don’t know if they will survive, let alone be able to help someone else. Obviously these kinds of conflicts hinder the “work of mourning”

As we are fully aware, teens often experience sudden death; a car or other type of accident, or a suicide. The very nature of these deaths often result in a prolonged and heightened sense of unreality. Support to these young people maybe lacking in many cases. Many people may assume that the adolescents have supportive friends and family who will continually be there for them. In reality this is not always the case. Sometimes, we may assume they will find comfort from their peers. Again, this may not be true. If a friend has not experienced a death, they won’t know how the one experiencing grief feels. Even when the grief is a “school” grief, those closest to the deceased will have a different perspective than one on the fringe.

Signs that a teen may need extra help

- 1) symptoms of chronic depression, sleeping difficulties, restlessness and low self esteem
- 2) academic failure or indifference to school-related activities
- 3) deterioration of relationships with family and friends
- 4) risk-taking behaviors such as drugs and alcohol abuse, fighting, and sexual experimentation
- 5) denying pain while at the same time acting overly strong and mature.

Here, school counselors, church groups, private therapists are appropriate resources for some young people, while others may need a little more time and attention from caring adults like you and me. The important thing is to help the teen find a safe and nurturing emotional outlets at this difficult time. (Wolfelt)

IX. How can we support others who are grieving:

1. be a good listener and supporter
2. show kindness
- 3) just sit there

4. ask about their loss--especially that disenfranchised griever
5. make phone calls
6. let them feel sad
7. don't minimize their grief--especially with children
8. remember their loss, acknowledge their pain
9. talk about your own losses--this would be helpful if you have had like losses—but don't make only about you!
10. be available when you can

People who are grieving often feel isolated or lonely in their grief. This happens when there is the death of a spouse. This can also happen when a single person loses some loved one. Try to be there for them as you can.

X. Conclusion

Many authors that have written about the grieving process have described “stages of grief” as we have noted. It is important to remember that the grief process is not linear, but rather is often experienced in “cycles” Someone has likened grief to climbing a spiral staircase where things look and feel like you are going in circles, yet making progress. We may experience several parts of the cycle in the same day. Since grief maybe more of a cycle or stages, if you will, it cannot be rushed.

Another thing we need to remember about the death of a loved one is that there is **never closure** in one sense. The word closure is a real estate term, or a business term; when a contract has been agreed on then we “close the deal”. When one suffers the loss of a loved one **we don't “close the deal”**. Closure in terms of death was originally used to verify deaths. There are times when a MIA, POW, drowning victim, or even a kidnapping victim has been positively identified, the **case** is closed, but not the grieving on the part of the loved ones.

Today closure is used a broader sense, “let get this over with so we can get on with our live attitude” Richardson recalls a time as a chaplain with a family in the hospital room of their Mother who had just passed away. The comments of the family were “Mom did not want a funeral, she wanted to be cremated. We want a scripture reading and prayer now, so we can **have closure here.** (emph by clh) (Richardson pg. 40) People assume that by seeking closure, their grief will end.

We will seek reconciliation, resolution, or recovery but not closure as we move on our grief journey. We find that **memories** are a good way to aide the recovery and reconciliation. Some of those memories may not as pleasant as others, but they all help on this journey. We will never forget the loved one--we can still see the face, see the smile, the walk of one gone for years. When someone says “I'll never forget him/her”, no they won't. Someone has said the only ones who will forget short of death for themselves, are those with Alzheimer's.

This journey will never end, we don't get over our grief. But with reconciliation comes a renewed sense of energy and confidence, an ability to fully acknowledge the reality of death and a capacity to become reinvented in the activities of the living. (Wolfelt)

Grief never ends.....But it changes. It's a passage, not a place to stay. Grief is not a sign of weakness, nor a lack of faith....It is the price of love. Donna VanLiere

Grief is a journey whose map unfolds one day at a time, one moment at a time.

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