



## A Case in Point:

Robert Smith, a 37 year old farmer and father of two children, lost his first wife, Sally. She was killed when she fell from a tractor he was driving and received fatal injuries as equipment he was towing ran over her. Robert's relationship with his new spouse, Mary was soon impaired because he failed to grieve fully in his own way before remarrying.

Robert's experience with the death of Sally was complicated by a number of factors. He admitted to difficulties in giving himself permission to openly express feelings of sadness, anger, hurt, pain, and frustration regarding the loss of Sally. His difficulty in expressing his emotions was further complicated by his premature remarriage to Mary nine months after Sally's death. This premature involvement in a new marital relationship unconsciously allowed him to avoid the many natural feelings of loss related to Sally's death. Eventually this led to Robert and Mary being unable to accept the high levels of feelings surrounding his loss.

Robert isolated himself in his grief response and did not share his many thoughts and feelings with anyone around him. Anniversaries, birthdays, etc. became very difficult, however, he continued to attempt to repress his grief on those occasions for fear of hurting Mary. During the four years of their marriage they continually drifted apart as a consequence of both of them feeling very threatened, insecure, and uncertain of how the future would evolve.

With minimal grief support from a psychotherapist focusing on the issues relating to his incomplete mourning of Sally, he and Mary were able to effectively move forward with their marital therapy. Hope was restored between them that they could now successfully work on issues of their relationship.

Case study adapted from:

**"Death & Grief"**  
A Guide for Clergy  
Alan D. Wolfelt, Ph.D.

## *Caring for a Terminally-Ill Loved One:*

### *Bereavement Support - Continuing Your Life After Their Death*



The loss of a loved one can create a deep and painful void in our lives leading to intense emotions as we try to comprehend how life can continue without them. The emotional suffering that results from our reaction to this loss, commonly referred to as ***grief***, can remain in the forefront of our lives for a considerable time after the death occurs. The outward expression of our grief, referred to as ***mourning***, is strongly influenced by our cultural traditions and personal beliefs. During this often difficult period of ***bereavement***, the caregiver, family and friends can benefit from the support of others. This issue explores grief, its progression and how it can be a catalyst to healing.

**Experiencing Grief – Am I Grieving Normally?** There is a general consensus among grief experts that mourning is a very individual process and there is no “normal” way to grieve. There are so many factors that influence the manner in which one grieves. Social and cultural considerations can greatly influence how we choose to “appear” to be grieving. Unfortunately such an influence can cause one to retreat into isolation if their heart tells them to grieve differently from the expected norm. The conventional wisdom is to allow your mourning to follow its own path toward healing without making any judgments as to its validity.

**Physical, Mental & Emotional Manifestations of Grief** – grief manifests itself in a variety of ways, some subtle, some not so subtle, which include a variety of physical, mental and emotional reactions. Some common *physical symptoms* that occur are uncontrolled weeping, hyperactivity, loss of appetite, insomnia, shortness of breath, chills, and tightness of the throat. Common *mental symptoms* are depression, anxiety, confusion, disbelief, and a pervasive sense of disorganization. Paranormal or psychic experiences in which the dead loved one appears or communicates with the mourner are not unusual during the grieving process. The spectrum of typical *emotional symptoms* experienced can be quite broad, and may include anger, sadness, joy, sorrow and guilt. A survivor may feel outrage at the apparent injustice of being left behind and alone. These physical and emotional signs of grief may occur immediately, may be delayed or may not occur at all. Hence the nature of grief – it is unpredictable. Just be aware that it may affect you when you least expect it and in ways that may significantly affect your relationships with others.

**Phases of Bereavement** – while the specifics of the mourning process are unique to each individual, studies have shown that the process follows a generally consistent overall pattern but does not necessarily follow a specific sequence of phases. Frequently the early response to loss is one of shock, numbness and disbelief that may last for hours, days or even weeks. As reality sets in, the mourning can transition to guilt, despair, anxiety, sadness and a deep yearning for your loved one. This state of mourning can last for a year or more. Eventually, as time passes, the turmoil of grief subsides and you find a sense of resolution with the loss, integrating it into your *normal* everyday life.

**The Importance of a Positive Support System** – it is a natural reaction to want to isolate oneself at a time when the grieving process takes a front seat to life itself. However, it is also very important that you allow others to help you through what can be a most difficult time. Your local hospice can help you find bereavement support groups where you can share your feelings with others who are experiencing a similar loss. Expressing your grief with others is healing and helps normalize your experience by offering hope.

Your joy is your sorrow unmasked.  
And the selfsame well from which  
your laughter rises was oftentimes  
filled with your tears.

*Kahlil Gibran, The Prophet*