

# Loss and Grief during the pandemic

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The Coronavirus episode in our lives has led to a psycho-social effect I am calling “the pandemic of grief”. That is to say, we have all lost to some degree the valued familial and social support helpful to deal with loss. I have had contact with a friend who recently lost his dad to the virus. The extended family were mostly local here, but not able to visit the dad in the intensive care unit because of contagion precautions. My friend felt the acute pain of not being able to “settle” with his dad and offer comfort and love in this sad time. Another friend recently had the diagnosis of recurrent cancer, and under usual circumstances, I would have flown to be with her during her surgical and recovery period. However, now I would worry about introducing a health risk at this time. But it feels like I am setting my friend adrift. I am sure everyone has some semblance of this sense of loss and grief.

Of course, there are many losses during this period: deaths; illness; enforced separation from friends, family, community; cancellation of celebrations and rituals including weddings, anniversaries, birthdays, funerals; very little public activities; workplace disruption and job loss; separation or divorce; sporting event cancellations—the list is endless, isn’t it? I am going to focus here on grief after death of a loved and how to assist those we can connect with in the grief process.

Individuals, of course, each have unique responses to traumatic events such as these. Grief is a physiological response to loss which can be disabling emotionally and physically. We have had models of grief presented to us which attempt to define and “stage” grief as a process. Elisabeth Kubler-Ross outline five distinctive stages to the grief process: Denial, Anger, Bargaining, Depression, and Acceptance. We all know that these “stages” may happen in a very fluid fashion, in that there is no definitive beginning and end to any of them.

I like the more recent work of Psychologist Dr. J.W. Worden. He has done much study and clinical work with bereavement and is the author of several books on the topic: “*Personal Death Awareness*”, “*Children & Grief: When a Parent Dies*”, “*Grief Counseling & Grief Therapy: A Handbook for the Mental Health Practitioner*”, and is co-author of “*Helping Cancer Patients Cope*”.

In his book, “*Grief Counseling & Grief Therapy*”, 4th ed., 2008, Dr. Worden suggests **Four Tasks** of Grieving. These tasks, he says, must be accomplished in order to resolve the process of mourning the death of a loved one. He divided the bereavement process into four tasks, which I have encapsulated here.

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. Task one: **accept the reality of the loss**

This goes beyond planning and attending a funeral and other accepted ritual proceedings. The person must accept the full impact of the loss of their loved one's relationship and its impact. A death that is, for instance, somehow stigmatized such as suicide or murder will present challenges to accomplishing this task.

. Task two: **work through the pain of grief**

For each individual and each loss this will mean working through a range of different emotions: sadness, fear, loneliness, despair, hopelessness, anger, guilt, blame, shame, relief, and countless others. Inherent in this task is acknowledging, *talking about*, and understanding these complex emotions in order to work through them. The danger, of course, is denying one's feelings and avoiding them. This tendency can be exacerbated by our society's discomfort with the feelings that accompany grief, so the griever may feel like they shouldn't feel or acknowledge these difficult emotions.

. Task three: **adjust to life without the deceased**

This task will mean very different things to people depending on the relationship of the person who has died, as well as the roles that are impacted by the loss. This readjustment happens over an extended period of time and requires internal adjustments, external adjustments, and spiritual adjustments.

It may take a significant period of time just to realize the different roles their loved one performed or internal and spiritual adjustments that are required. For instance, a surviving spouse, may need to learn a wide array of new skills and tasks such as bill paying, parenting, and taking care of the home, and environmental changes such as living alone, doing things alone, and redefining the self without the other person.

This task requires developing the necessary skills to move confidently forward in the altered environment – internal, external, and spiritual.

. Task four: **maintain a connection to the deceased while moving on with life**

The main idea here is to find an appropriate, ongoing connection in our emotional lives with the person who has died while allowing us to continue living. Like the other tasks, this will mean varying things to grievers. But it often means allowing for thoughts and memories, while beginning to meaningfully engage in things that bring pleasure, new things, and new relationships.

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All of us have suffered losses and grief. My personal experience is that support of friends and family and caring people in the community are the “saving grace” through these losses. I still keep the notes and letters I received after the death of my son 25 years ago, and just knowing of their presence reminds me of the peace and comfort from them I

felt at that time. We all know that these “tasks” come in no particular order, that grief is not a finite process with a definite timeline.

As individuals we can support the spiritual and emotional well-being of our community members, family, friends. I have outlined some theoretical stages above to help identify where others are in their grief process when we become aware of the loss. Here are some suggestions for you to use.

- You can be very important as an acquaintance by phoning. The person affected will appreciate the chance to share their memories, their concerns, their sadness. Listen without judgement. Again, LISTENING is a wonderful healing tool. You can connect with Facetime, Duo, or Zoom or who know what else we have(!). Repeated contacts are appreciated, because this can be a long process.
- Instead of “Let me know if I can do anything”, just show up and help with practical needs: meals, child or adult care, transportation, other chores. Of course, you will be observing the contagion precaution recommendations in place at that time.
- Write a note of care and concern. Especially if the person is confined, you might send repeated notes. Small remembrances such as a birthday card, holiday greetings, or seasonal flowers or fruit will help. These are tangible reminders that you care.
- Inquire about the person’s health: what are they doing to address spiritual needs; how are they doing with being physically active; how are they eating, sleeping. Encourage good physical and mental health practices, and spiritual connection.

You will notice that these actions will not only help in their bereavement, but give you a sense of sensitivity and rewarding connection to that individual. If there seems to be no resolution of the grief after time, I suggest counseling. We have limitations in our private backgrounds to provide professional intervention. I have listed some contact information below in accessing a professional.

**· St. Luke’s has clergy who can step in and offer assistance. There is a Stephens Ministry which may be able to provide valuable care. The contact for this service is Reverend Chris Christy. Reach her at (928) 533-5012. Email: [cchristy1231@gmail.com](mailto:cchristy1231@gmail.com).**

· West Yavapai Guidance Clinic (WYGC) provides mental health intervention by professionals. Phone: (928) 583-6411. Services there are free for persons who qualify for AHCCCS (Arizona’s Medicaid). This clinic will help in the process of getting enrolled in AHCCS. WYGC will also see clients on a sliding fee basis if they can’t qualify for AHCCS.

- In you enter “Grief Counseling in Prescott, AZ in your search engine, you will see many counselors, social workers, therapists. You can inform the griever, or many times enlist a family member to proceed with a call to a professional.
- There are several clinics and providers listed under “psychiatry” when searching DEX, the online “yellow pages”.