

# Frontline

*This newsletter is dedicated to professional caregivers. It is our hope that this newsletter will help you give comfort and strength to those you serve.*

Winter 2016

## Denying the Reality of a Death: Florence's Lesson



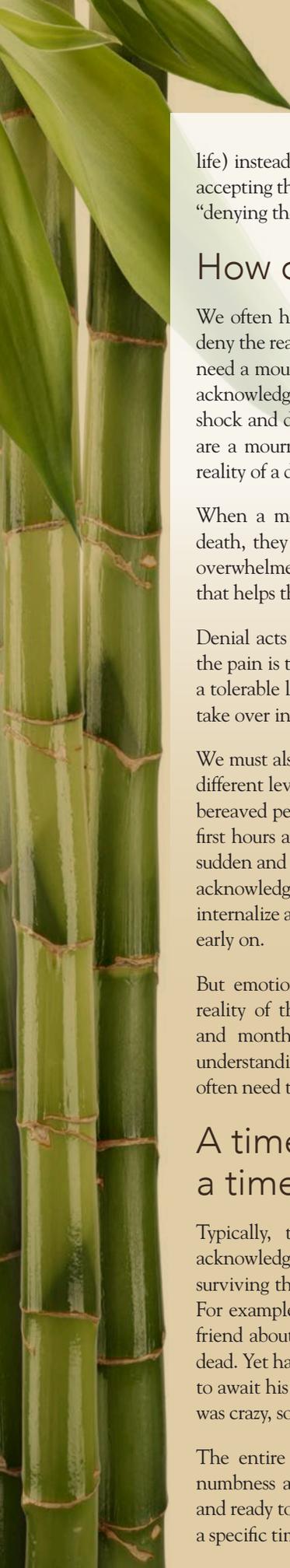
By Alan D. Wolfelt, Ph.D.

Florence Moore was 38 years old when her husband died suddenly and tragically in a mountain climbing accident. Before he died, one could have set a watch by John's arrival home each weekday after work. Without fail John would walk through the kitchen door at 5:15 p.m. and embrace his wife of 17 years.

After his death, Florence found herself continuing to anticipate John's arrival home each afternoon. Several times a week this newly bereaved woman naturally drifted toward the kitchen doorway just after 5 p.m. – even though she understood intellectually that he would not arrive. And several times each week she would allow herself to cry as she embraced with her heart the reality that John would never return home.

Questioning the normalcy of this behaviour, Florence had risked telling several of the people closest to her about watching and waiting at the doorway. She hoped they would be understanding and supportive. Instead, her hopes were greeted with indifference by some, and judgment by most. Florence was told to "admit your husband is dead and gone and get on with life." She was encouraged to "carry on, keep your chin up and keep busy." And her psychological health was called into question: "That's crazy, Florence." One misinformed person even told her, "You definitely have pathological grief."

Sadly, the Florences of this world are too often denied the natural and normal need to confront the painful reality of death in their own way and in their own time. Each day newly bereaved people in this country are encouraged, to their detriment, to move away from (get on with



life) instead of toward their grief. If they seem to struggle in accepting that someone loved has died, they are told they are “denying the reality of death.”

## How denial helps

We often hear about how unhealthy it is for a mourner to deny the reality of a death. Indeed, I too believe that the first need a mourner must meet if they are to go on to heal is to acknowledge the reality of the death. However, temporary shock and denial are essential grief survival mechanisms, as are a mourner’s different levels of acknowledgment of the reality of a death.

When a mourner temporarily blocks out the reality of a death, they typically do so because the capacity to cope is overwhelmed. Denial is a temporary means of self-protection that helps the mourner survive the moment.

Denial acts as an anesthetic to the newly bereaved person; the pain is there, but denial allows it to be numbed down to a tolerable level. In a very real sense the body and the mind take over in an effort to help the mourner survive.

We must also remind ourselves that denial in grief works on different levels. It is not uncommon or abnormal for a newly bereaved person to totally deny the reality of a death in the first hours and days afterwards, particularly if the death was sudden and unexpected. But typically the mourner will soon acknowledge the reality of the death intellectually. They will internalize a “head-level understanding” of the situation very early on.

But emotionally the mourner may continue to deny the reality of the death for some time. Only over the weeks and months to come will she embrace a “heart-level” understanding of the death. As Florence learned our hearts often need time to catch up to what our heads already know.

## A time to mourn, a time to deny

Typically, the bereaved person will alternate between acknowledging, “this person I love is really dead,” and surviving the loss by denying it, “It can’t be; he’s not dead.” For example, one afternoon at 4:30 Florence talked with a friend about how her life was so different now that John is dead. Yet half an hour later she sat down at the kitchen table to await his arrival. While this vacillation did not mean she was crazy, some people were quick to label her as such.

The entire constellation of experiences of shock, denial, numbness and disbelief wane only at the pace one is able and ready to acknowledge painful feelings of loss. To provide a specific time frame for everyone would be to overgeneralize

and play into the dangerous tendency to rush the process. It is safer to say that denial only impedes healing when it becomes fixed or rigid.

Even after the mourner becomes capable of embracing the full reality of the loss, denial still naturally comes to the surface now and then. Its recurrence is seen most often on the anniversary of the death or other special occasions (birthdays, holidays, etc.). I have also repeatedly witnessed the resurgence of normal, temporary denial when the person in grief visits a place associated with a special memory of the dead person.

Actually, the mourner’s mind approaches and retreats from the reality of the death over and over again as they try to embrace and integrate the meaning of the death into their life. The availability of a consistent support system allows this process to occur.

## Florence’s lesson

Florence reminds us that grief is a process, not an event, and that part of the process is to respect how denial serves as a temporary time out or a psychological shock absorber. An artful balance must be struck between respecting the mourner’s need to temporarily deny reality while at the same time helping them encounter the new reality.

As I listened to and learned from Florence, I encouraged her to continue to instinctively drift toward that doorway as 5:15 approached each workday. Florence, too, came to understand the value of allowing herself to “watch and wait,” and in her own time came to fully embrace the pain of her loss.

My enjoyable experience in working with Florence Moore reminded me that we should not walk in front of the mourner, nor should we walk behind the mourner. Instead, we should walk with the mourner. In walking with Florence, I learned the value of accepting bereaved people where they are instead of trying to force them to be where I would like them to be.

### *About the Author*

Dr. Alan Wolfelt is a respected author and educator on the topic of healing in grief. He serves as director of the Center for Loss and Life Transition and is on the faculty at the University of Colorado Medical School’s Department of Family Medicine. Dr. Wolfelt has written many compassionate, bestselling books designed to help people mourn well so they can continue to love and live well, including *Loving from the Outside In*, *Mourning from the Inside Out*, from which this article is excerpted. Visit [www.centerforloss.com](http://www.centerforloss.com) to learn more about the natural and necessary process of grief and mourning and to order Dr. Wolfelt’s books.

# Children's Reactions to a Death in the Family



By Dr. Earl A. Grollman

In the 1960s, my book *Explaining Death to Children* was published. At that time, death was a taboo subject and children were “forgotten” mourners.

Although we now accept the fact that the traumatic experience of losing a loved one deeply affects both adults and children, too often children are still left alone in their pain. Adults, who may be hurting themselves, must provide support to children through these times of grief, whether it is the death of a parent, sibling or friend. As a family, they hurt and can begin to heal together.

## The Death of a Parent

One of the greatest difficulties for a child is the death of a parent. The world will never again be as secure. “Who will take care of me now?” “Suppose something happens to you too Mommy?”

In her book *How It Feels When A Parent Dies*, Jill Kremetz talked with youngsters ranging in age from seven to 16. One child said: “When Mom told me that Daddy was dead, my knees started shaking. I almost fell down. My sister Peg screamed when she found out. My hands still shake when I think about my father.” One child began having nightmares after the death of her mother: “I had a dream that she was lying at the bottom of a closet and she came back to life. When I have dreams like that, I just pinch myself on the arm to see if I’m awake or dreaming.”

The death of a mother or father affects each child differently. Anna Freud pointed out that a child’s love for a parent becomes a pattern for all later loves: “The ability to love, like all other human facilities, has to be learned and practiced.” If this relationship is interrupted through death the youngster may remain attached to a fantasy of the dead person; invest that love in things (or work); be frightened to love anyone but himself or herself; or slowly accept the loss and find another person to love.

Surviving parents may inadvertently create additional difficulties, by attempting to fill their own empty space with a total devotion to the children. Parents must avoid the temptation of trying to make the child a surrogate partner. And no child should ever be told, “You are now the man (or woman) of the house.” Children must be cared for and protected by the surviving family members as they were before the parent’s death.

The manner in which children cope with their loss depends a great deal on how the surviving parent behaves. If the parent acts as though life is completely unchanged, confused children will try to mimic that attitude, even though the result for the child will be greater insecurity. If the adult’s response is hostility, intense anxiety or erratic behaviour, youngsters may react similarly. If the response is a grief mingled with consistent loving reassurance, children will be more able to gain the confidence to handle the conflicts and changes they are experiencing.

Admittedly, it is difficult for the surviving parent to sustain family stability. How does one cope with the personal loss, much less the children? There are support groups and professional counsellors to help both parents and youngsters. No matter how consumed parents are in their personal hell, it is crucial to give attention to the bereaved child.

If both parents die, special intervention is needed to help the children cope with their multiple losses. Someone the children trust should clearly explain where they will be living and with whom, and whenever possible, allow them to participate in important decisions. The new caregiver must assist in helping the youngsters through the difficult grieving process.

## The Loss of a Brother or Sister

“Now that the older child has died, the younger one just doesn’t seem the same anymore.”

Children are not supposed to die. They are expected to live long productive lives. Parents may have difficulty maintaining a healthy relationship with each other because they feel so helpless and alone.

The surviving siblings too are thrown into crisis. It is difficult for children to witness their parents’ anguish and pain. The child had his or her own relationship to the sibling who died. Support for young people may be minimal; family and friends are often focused on the pain of the adults. Youngsters are frightened – life will never again be the same.

A child’s reaction to the death of a sibling may include realization that it could happen to him or her. “Is something wrong with me, too?” they may wonder. “Will I die when I reach my brother’s age?” Youngsters may regress, assuming babyish behaviour to magically prevent themselves from growing old and dying. (Parents will need to say again and again: “You do not have the disease that caused your brother’s death.”)

In an attempt to make everything all right again, a child may try to “replace” the brother or sister. Adults can unconsciously promote this behaviour by saying things like: “You know, you are so much like her in so many ways.” As difficult as it is to accept, parents must understand that one of their children is dead – he or she cannot be resurrected in another child, who has enough difficulties without trying to assume a new identity.

Surviving children are often beset with guilt. They recall past arguments, anger and jealousy. “Is this death a punishment for my being bad?” they may wonder. Parents should be encouraged to listen to their child’s fears and feelings.

Young people who have lost a sibling may:

- Be angry at everybody and everything.
- Believe that they didn’t just lose a sibling, but their whole family.
- Feel cheated and envious that they lost a brother or sister when their friends still have their siblings.
- Be afraid that someone else they love will soon die.
- Think that they will die soon too.

At first, it may be difficult for children to share their feelings with parents. In an effort to protect their parents, children may resist talking about their feelings. As one teenager said, “My parents shouldn’t have to be worry about me right now. They are hurting enough already.”

Parents must be attuned to children’s body language and the ambiguity of their feelings – sadness over loss, possible relief that a competitor is gone, anger over being left out, fear of their vulnerability to death. They have suffered the loss of a playmate and companion, someone who was both dearly loved and resented as a rival. If the death followed a long illness, the remaining sibling may have endured months of neglect.

The parents have lost a child; the children a brother or sister. But remember, even though a terrible tragedy has occurred, they are still a family. Their love for one another is never lost.

### About the Author

Dr. Earl A. Grollman, a pioneer in crisis management, is an acclaimed writer and lecturer. In 2013, the Association for Death Education and Counseling presented him with its Lifetime Achievement Award, only the fourth time in three decades. This award honours “his national and international impact on the improvement of death education, caring for the dying person, and grief counseling.” His books on coping with bereavement have sold more than a million copies. For further information, visit [www.beacon.org/grollman](http://www.beacon.org/grollman).



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