

# Anticipatory Grief: Preparing for the Death of a Loved One

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**LISA CLARK:** I'm Lisa Clark. Welcome, and thank you for joining us for this webcast. It is an inevitable fact of life and an event most of us will have to deal with many times. We're talking about the death of a loved one, a family member or a friend. Despite the fact that we all know death is a universal occurrence, it doesn't make it any easier to deal with when it happens to someone close to us. For the next few minutes we will explore the emotional impact of anticipatory grief, when you have to deal with the certain knowledge that someone you care about is going to die.

Joining our discussion this evening is Benjamin Cirlin. He is a clinical social worker and he is the executive director of the Center for Loss and Renewal in New York City. He is also the coordinator of bereavement services at Jacob Perlow Hospice of the Beth Israel Medical Center. Welcome, Benjamin.

**R. BENYAMIN CIRLIN, CSW:** It's good to be here.

**LISA CLARK:** Also joining us is Patricia Donovan-Duff. She is a registered nurse, and she is the director of the Bereavement Center of Westchester. Patricia, you've also done a lot of hospice care, as well. Thank you for joining us as well.

Although we all understand rationally that death is an inevitable event, you believe that it is still a surprising event for people. Why is that? I'll start with you, Benjamin.

**R. BENYAMIN CIRLIN, CSW:** I think most people tend to live with what some writers have called an "illusion of invulnerability." We like to live with the sense that we're going to go on forever, because the truth of the matter is to come to terms with the fact that we're going to die creates a lot of anxiety. It's more easy to live and to go on expecting that you're just going to go on forever. We all believe that if we behave correctly, that if we walk on the right side of the street, everything's going to be all right, until some time we walk across on that green light and then someone goes through a red light, and then death enters the picture.

**LISA CLARK:** Exactly. If I may oversimplify just a bit, there are two courses death might take: either an accident, as you refer to, a sudden catastrophic event -- a heart attack, say -- or a lengthy process, a terminal illness or the aging process. From the point of view of a family member or friend, is one of those easier to deal with than the other? I'll ask you, Patricia.

**Patricia DONOVAN-DUFF, RN:** I think that you'd get answers in both corners. I think that people who have are dealing with a sudden loss would say maybe that it would have been harder to deal with the saying-goodbye process. The good part about maybe having some anticipation of the loss is to begin to get ready for it. I think what you said before -- that no matter when it happens it's still a surprise -- I think that's where the similarity is even if it's a sudden loss versus an anticipated loss, say in a hospice programs. When the death actually happens it still is somewhat of a surprise and you're not ready for it.

**LISA CLARK:** During the '70s, Elizabeth Kubler-Ross had a very popular theory about the five stages of death, those being denial, anger, bargaining, depression and, finally, acceptance. Are there similar steps in the grieving process?

**Patricia DONOVAN-DUFF, RN:** I think she would call them phases, not stages or steps, because it's not a linear process in grieving. It's definitely a rollercoaster kind of experience. It's not that you finish with one phase and move on to the next one. You can retreat back and forth. She did identify kind of similar phases but, again, they're not linear.

**R. BENYAMIN CIRLIN, CSW:** Patricia makes a good point there that today people really don't tend to think of grief, as she said, in a linear way. People, I think, more often tend to think that grieving presents us with tasks, that there is certain work that we have to engage in in order to work through a loss. The first task really has to do with accepting the reality, that it's really true, a recognition that a life has changed. The second task, for the most part, has to do with coming to terms with all the pain. The third task is learning to adjust to a new environment in which roles change. The fourth task really is about finding a new relationship with the deceased person and finding new sources of meaning in life.

**LISA CLARK:** In your work with people who are suffering loss, does it matter at what point they enter this phase of starting to deal with the issue of someone dying, whether it's a matter of months they have to come to terms with this or whether it's a sudden event? Is there a difference in the period of time that they enter this process that helps them process what's going on, what the loss is going to be like?

**R. BENYAMIN CIRLIN, CSW:** I think that the more that people can begin to deal with it as someone is dying, in the long run, the better off they will be. Anticipatory grief is really about a dance between holding on -- staying with the person, still having a relationship -- and slowly letting go -- beginning to think about what life is going to be like without this person here. It's a difficult dance to do.

**LISA CLARK:** It's ironic that when people talk about their own death, people will often say, "I want it to be quick. I don't want to suffer." Yet, for those who are left behind, it may often be easier to deal with a lengthy illness, when you have the opportunity to understand what's going on and to say what you want to say to that person, tell them what they've meant in your life. Patricia, would you address that?

**Patricia DONOVAN-DUFF, RN:** I think that in hospice that's probably one of the things that we really try to help families to do, to say goodbye to each other. For example, when we have worked with a young parent who may be dying, leaving behind small children, to encourage that parent while he's still alert to maybe write a letter, maybe write somethings that can be passed on to the children later on.

**LISA CLARK:** In many cases, I would presume -- and you can correct me if I'm wrong -- people tend to resist saying yes, someone is going to die. It's almost as if by saying that that they're giving up or that they're saying it's okay for the person that they care about to give up. Is that a common issue for people that you deal with?

**R. BENYAMIN CIRLIN, CSW:** Sure. There are a lot of people who have a hard time saying that. One point that I'd like to really get across is that in grief there is a whole rainbow of possibilities. There's no one correct way. So it's not necessarily a given that someone has to come to terms with that and has to say, "My parent is dying," "My child is dying," "My spouse is dying." When someone is able to say that, that can begin, again, that process of slowly trying on what life is going to be like.

**LISA CLARK:** Or rehearsing.

**R. BENYAMIN CIRLIN, CSW:** Rehearsing, exactly.

**LISA CLARK:** Even, perhaps, rehearsing the details of the death itself, or the funeral. We mentioned in some of the literature that people start thinking about, "What will I wear to the funeral." They stop themselves. They think, "Oh, I shouldn't be doing that." But that is a very natural reaction for someone to have, isn't it?

**Patricia DONOVAN-DUFF, RN:** Absolutely. It's really preparation for what's going to happen and beginning to enter that world. Even people who are dying, sometimes, help plan their funerals with their loved ones -- which is a wonderful thing when that can happen -- anticipating what that's going to be like. It is like a rehearsal for it. You want it, sometimes, to be right. I think a lot of people feel very embarrassed that they have jumped to that next conclusion, that next step of rehearsing that in their minds, and they think there's something wrong with them.

**LISA CLARK:** One of the most important things, you feel, is finding the balance between holding on and letting go.

**R. BENYAMIN CIRLIN, CSW:** Right. The danger is that if someone holds on too much then they can't let the person go. They're going to have problems, on the other hand, if they detach so much that they end up abandoning the dying person. So it's got to be a balance between those two processes, which is very difficult.

**LISA CLARK:** And individual in every situation. As grief counselors you surely deal with a range of emotional openness -- people's ability to be with their feelings and express their feelings. Some are very able to do that. Others have a harder time expressing their grief. How far do you go in encouraging someone, especially if it's not in their essential nature to be open about those things, Patricia ?

**Patricia DONOVAN-DUFF, RN:** I think that that safe environment is probably the most important thing for a grieving person, to be able to have the permission to do it in his or her own way. There are no rules in grieving. There's not right way and there's no wrong way. It's only your way. I think if you allow a person to do it in character, so to speak -- and I think people do grieve in character -- sometimes you see changes, but usually you don't. If someone wasn't able to show emotion before, it wasn't comfortable for them, it probably won't be when they're grieving. People don't change that abruptly.

**R. BENYAMIN CIRLIN, CSW:** Can I add something that I think is really important here? That is, some of the most exciting work today in thinking about grief is recognizing that men and women have different ways of grieving. Most of the books that have been written and most of the thinking has typified a feminine way of grieving, namely, verbalizing, ventilating. There's more of a recognition today that there is a masculine way of grieving which has to do with engaging in action. So that quiet man who really doesn't express too much but goes out and builds a monument to his loved one -- that's his way of grieving.

**LISA CLARK:** I was going to ask you, in a situation where you have a family that's grieving, do you prefer to deal with the members of that family individually so they have an opportunity to perhaps express their differing levels of emotional need rather than, say, deferring to someone who may be more or less comfortable with the expression of their grief?

**R. BENYAMIN CIRLIN, CSW:** I like to mix and match. I like to see a family together and to have them begin to explore and have a conversation about where they're at, but there's also a real need to give people individual time, because a lot of people are afraid of offending someone in their family.

**LISA CLARK:** I think you're absolutely right. It's hard when you have the context of a strong family structure, say, to be able to express your own individual process. I would like for both of you to address how important you think the need for grief counseling is for people who are in the process of experiencing a loss or if they have suffered a loss.

**R. BENYAMIN CIRLIN, CSW:** As a grief counselor, I certainly believe in the process. However, I am very aware that people have been grieving for millennia without grief counselors. So for those who need it, for those who don't have supports, for those who are finding their family members reluctant to hear their pain, it's very important. But I'm also aware that there are many, many people who look to their religion, many people who look to their work, to a variety of things, so it's not an absolute necessity.

**LISA CLARK:** We may not be able to alter the reality of death and dying, but there are very good things we can do to help ourselves cope with loss. Thank you both, Benjamin Cirlin and Patricia Donovan-Duff. Thank you for joining us. I'm Lisa Clark.