

# Frontline

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

Fall 2019

## WHY DO WE CONTINUE



By Dr. Earl A. Grollman

## to Talk About Death?

At this moment you are perusing an issue of Frontline. You may be reading of the various approaches to confront that one inevitability of life: D-E-A-T-H. Perhaps some of your acquaintances are bewildered by your continual interest in this “morbid” subject. That’s why I am devoting my space as an author to address why this subject is not only topical, but essential to glean insights into the meanings of life and loss. (I’m sure my esteemed colleague, Dr. Alan Wolfelt, would concur.)

### WHY ARE PEOPLE AFRAID TO TALK ABOUT DEATH?

Death is the only event concerning the entire organism which, once birth takes place, is predictable beyond dispute. Life has but a limited span.

And yet, the subject of death can still be a most significant taboo. That’s why some have labelled death as the most forbidden topic, replacing sex. The four-letter word D-E-A-D has been disguised through euphemistic language. People do not die. They “pass on” and “pass away.” They expire. They become deceased.

Death has not only been camouflaged; the topic is simply avoided. How many still refuse to talk about end-of-life decisions even when critically ill? There is a superstitious belief that if not talked about, it may simply disappear. Thus, death, itself, will “pass away.” It is what social scientists call “the dying of death.”

### THE CHANGING ASPECTS OF DEATH

For many of our great-grandparents, death was part of their lives. With their high mortality rate, death was a frequent visitor. When Social Security and old-age pensions were introduced over 80 years ago in North America for citizens at age 65, a large percentage were not expected to ever live that long.

In the past, multitudes of children and adults would die in the home from bacterial pneumonia, diphtheria and poliomyelitis. With the emergence of antibiotics and vaccines, and with improved sanitation, many of these diseases have been virtually eliminated. Because our ancestors were in constant contact with death, they were compelled to view terminality as a real and natural phenomenon.

Today, when a loved one dies, the event usually does not take place in the home but out-of-sight in the hospital. (Sometimes in a distant state or province or even in another country.) Since there is infrequent exposure, death may not be viewed as a constant factor of life. It becomes a rare, virtually “abnormal” event.

Many of the aged, those most susceptible to death, often become invisible. Some may be relegated to a retirement home, a community of the elderly or a nursing facility. As they voluntarily or involuntarily remove themselves from the immediate daily circle, the younger members have less and less opportunity to experience death and dying in an immediate, visceral, physical





sense. Thus, loved ones may not witness the natural process of growing old and entering the last phases of life.

While many in the past found comfort in a theological belief of the hereafter, the present generation's dissolving beliefs and traditions have eroded the consolation of a spiritual and physical immortality.

In laboratories around the world, scientists have begun to unlock the secrets of the aging process. If the major killers of adults – cancer and diseases of the heart, kidney and blood vessels were eliminated completely – perhaps another decade would be added to adult life expectancy. By denying or mitigating death, we more easily cling to the belief that death may become extinct.

## CHANGING ATTITUDES

Much has changed since I wrote my book, *Explaining Death to Children*, in the 1960s. Back then, death was not a subject to be discussed except in theological and medical terms. Jokingly, I was referred as Hamalach Hamavet (in Hebrew, the “Angel of Death”). Teasingly, my friends would inquire whether my next volume would be on leprosy. Few professionals were concerned with death, dying and bereavement – what is now called thanatology. If then we were to have a conference on death, we could fit in a telephone booth (which existed at that time). Time is a changing....

Fortunately, the topic of death is becoming a more respected concern for the health professional, the social scientist and the general population. Heretofore, the topic was limited to theological speculations, philosophical interpretation and literary expression. Instead of pretending mortality is not a basic condition of human life, the theme of death is now part of the curriculum of universities, colleges, high schools and even elementary grades. The disguising of death is just too difficult to sustain in a world of war, violence and potential nuclear devastation.

The Association for Death Education and Counseling convened a three-day conference where hundreds participated. Book stores

now have sections devoted to death and dying. The International Work Group offers symposiums on death and dying throughout the world. Time magazine has a cover insert.

Yes, times have changed and so is the need for *Frontline*.

One need not wait for death before confronting the inevitable losses of life. It is the goal of *Frontline* to encourage readers to share thoughts, perceptions and knowledge with the living. Each one of us is a helper – the family, the counsellor, the medical community, the funeral director, the clergy person, the social worker, the attorney, the insurance agent, the teacher, the neighbour, the friend – you. Dr. Wolfelt and I hope that you – the readers – will share thoughts, perceptions and knowledge and to plan rationally and meaningfully for that unavoidable moment of separation. And when the crisis does occur, that you will be better prepared for the forthcoming emotionally-laden death-related situations. The adequacy of your counsel may be the monumental factor in your well-being and for the loved ones who remain. *Frontline* is dedicated to understanding the inevitability of death and the preparation for life.

As an active member of the Association for Death Education and Counseling, as well as the International Work Group, and as an active grief therapist, there is much for me still to learn. Let us share together the caring quest for continuing understanding of this once “beyond the pale” topic.

## About the Author

Rabbi 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).



# Seek RECONCILIATION, NOT RESOLUTION



By Alan D. Wolfelt, Ph.D.

**H**ow do you ever find your way out of the wilderness of grief? You don't have to dwell there forever, do you?

The good news is no, you don't have to dwell there forever. If you follow the trail markers on your journey through the wilderness, you will find your way out. But just as with any significant experience in your life, the wilderness will always live inside you and be a part of you.

A number of psychological models describing grief refer to resolution, recovery, re-establishment or reorganization as being the destination of your grief journey.

You may have heard – and believe – your grief journey's end will come when you resolve, or recover from, your grief.

But you may also be coming to understand one fundamental truth: your journey will never truly end. People do not “get over” grief. A total return to normalcy is not possible; we are all forever changed by the experience of grief.

Reconciliation is a term I find more appropriate for what occurs as you work to integrate the new reality of moving forward in life without the physical presence of the person who died. With reconciliation comes a renewed sense of energy and confidence, an ability to fully acknowledge the reality of the death and a capacity to become re-involved in the activities of living. There is also an acknowledgment that pain and grief are difficult, yet necessary, parts of life.

As the experience of reconciliation unfolds, you will recognize that life is and will continue to be different. Changing the relationship with the person who died from one of presence to one of memory and redirecting one's energy and initiative toward the future often takes longer – and involves more hard work – than most people are aware. We, as human beings, never resolve our grief, but instead become reconciled to it.

We come to reconciliation in our grief journey when the full reality of the death becomes a part of us. Beyond an intellectual working through of the death, there is also an emotional and spiritual reckoning. What had been understood at the “head” level is now understood in the “heart.”

Keep in mind reconciliation doesn't just happen. To experience reconciliation requires that you descend, not transcend. You don't get to go around or above your grief; you must go through it.

As you achieve reconciliation, the sharp, ever-present pain of grief will give rise to a renewed sense of meaning and purpose. Your feeling of loss will not completely disappear, yet they will soften, and the intense pangs of grief will become less frequent. Hope for a continued life will emerge as you are able to make commitments to the future, realizing that the person you have given love to and received love from will never be forgotten. The unfolding of this journey is not intended to create a return to an “old normal” but the discovery of a “new normal.”

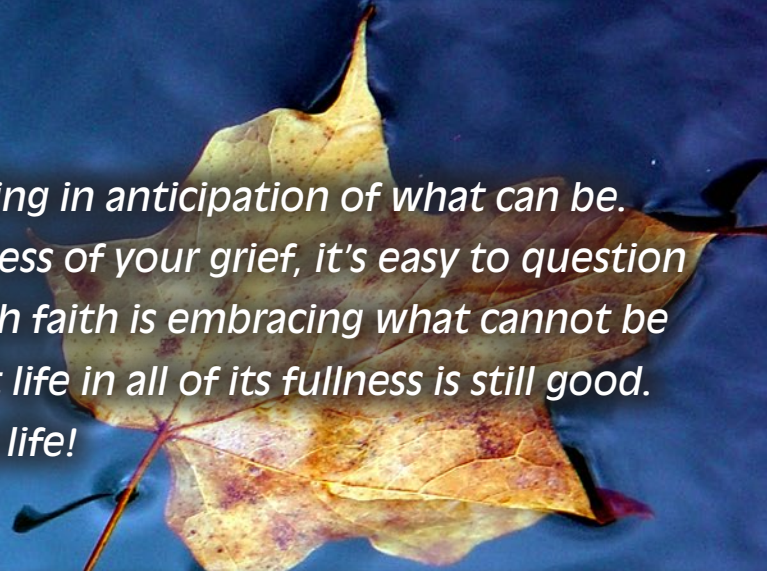
## HOPE FOR YOUR HEALING

The hope that comes from the journey through grief is life. The most important word in the previous sentence is “through.” As you do the work of mourning, you do not remain where you are.

I was honoured to companion a man following the tragic death of his seven-year-old son, Adam, in a car accident. He was heartbroken. His soul was darkened. He had come to know the deepest despair. Yet, he discovered that if he were to ever live again, he would have to work through his grief. So, he adopted the mantra, “Work on!”

In his process of conscious intention-setting, he decided to





*Reflect on this: living with hope is living in anticipation of what can be. Sometimes when you are in the wilderness of your grief, it's easy to question your hope for the future. But living with faith is embracing what cannot be changed by our will, and knowing that life in all of its fullness is still good.*

**Choose life!**

believe that even the most heart-wrenching loss can be survived. Perhaps refusing to give in to despair is the greatest act of hope and faith.

Yes, you go to the wilderness, you cry out in the depths of your despair. Darkness may seem to surround you. But rising up within you is the profound awareness that the pain of grief is a sign of having given and received love. And where the capacity to love and be loved has been before, it can be again. Choose life!

Living in the present moment of your grief while having hope for a good that is yet to come are not mutually exclusive. Actually, hoping and even anticipating can deepen your experience of the moment, and motivate you to “work on!”

### **HOPE AND FAITH AS TRUST**

Hope is “an expectation of a good that is yet to be.” So, living with hope in the midst of your grief is living with anticipation that you can and will go on to discover a continued life that has meaning and purpose. If you are in any way like me, maybe sometimes you lose hope and need to fall back on your faith.

Sometimes in my own grief journey, when hope seems absent, I open my heart – my well of reception – and find that it is faith that sustains me. Faith that is inspired by the moments when I’m able to find what is good, what is sweet, what is tender in life, despite the deep, overwhelming wounds of my grief. It is the courage of the human spirit that chooses to live until we die that gives me faith. Life will continue and it will bring me back

to hope. If you lose hope along your journey, I invite you to join me in falling back on faith.

Reflect on this: living with hope is living in anticipation of what can be. Sometimes when you are in the wilderness of your grief, it’s easy to question your hope for the future. But living with faith is embracing what cannot be changed by our will, and knowing that life in all of its fullness is still good. Choose life!

### **HOPE AND FAITH IN GOD**

In the religious traditions of Christianity and Judaism, hope is much more than “an expectation of a good that is yet to be.” Hope is confidence that God will be with you in your grief and, most important, that life continues after death. Hope is trust in God even when everything seems hopeless. Hope is the assurance that God has the last word, and that word is LIFE – even as you confront the realities of the death of someone you have loved. Choose life!

### *About the Author*

This article is an excerpt from Dr. Wolfelt’s book *Understanding Your Grief: Ten Essential Touchstones for Finding Hope and Healing Your Heart*. It is available for US\$14.95 at book stores or directly from Companion Press at the Center for Loss, (970) 226-6050 or [www.centerforloss.com](http://www.centerforloss.com).



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*It is our hope that the information provided within this newsletter will assist you in working with families at a time of death. Your professionalism and understanding are so important to a family that has just experienced a loss.*