

VNA/HOSPICE  
*of Monroe County*



**Spring Issue 2012**

## **BEREAVEMENT NEWSLETTER**

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**Dear Friends and Families,**

The following commentary is offered as a new paradigm of the grief process in response to the ever changing panorama of end of life interventions, options and technologies. Hospice care always has been and will continue to remain, comfort care of the highest quality, at the end of a disease process. However, the journey from diagnosis to hospice admission has changed significantly in the 38 years of hospice services in the U.S. We welcome your response and reaction to the material presented here. You may email us at [TCusack@vnahospiceofmc.org](mailto:TCusack@vnahospiceofmc.org) or write to Chaplain Thomas Cusack at VNA Hospice, 502 VNA Road, East Stroudsburg PA 18301. You may also choose to discontinue receiving our bereavement newsletter by contacting Chaplain Tom.

As always, our bereavement team stands ready to assist you in your grief process.

**Teri Gaglione**

**Supervisor, Support Services**

# The Stages of Grief – New Research

By [Paula Spencer Scott](#), Caring.com senior editor

For 40 years the stages of grief have been calibrated from death onward.

First published in 1970, Elisabeth Kubler-Ross's groundbreaking book *On Death and Dying* identified the now famous process we all more-or-less experience when we are confronted with the death of a loved one — from denial through to acceptance and everything in between.

Now two American psychologists have written a book, published this month, theorizing that the way we grieve has changed dramatically since 1970, mostly because we are dying differently.

Because of advances in medical science even someone leveled with a terminal diagnosis may not actually succumb for months or even years. As well, many patients experience multiple periods of remission, which can throw family members into emotional peaks and troughs of hope and despair.

Even incurable diseases, such as Stage 4 cancer, do not mean death is imminent. Depending on the type of tumor, patients may live for years, valuable time for families to begin coping with the coming loss. Though Elizabeth Edwards, wife of former U.S. senator and presidential candidate John Edwards, announced her cancer had become incurable in 2007 she lived for years afterwards.

In their book *Saying Goodbye: How Families Can Find Renewal Through Loss*, (Harvard Health Publications) psychologists Barbara Okun and Joseph Nowinski argue the grieving process actually begins long before the funeral — that the agonizing process of grieving begins with the first shocking and heartbreaking diagnosis. In essence, by the time a loved one dies, many family members will have already worked through much of the emotional turmoil. It is a vaguely drawn road map of the emotional territory they are about to discover.

The process of dying “may be extended by increasingly sophisticated pharmacological, medical and surgical technologies,” they write. “Death now refers to process more than it refers to an event.”

Okun and Nowinski call it, “new grief.”

They propose five stages that actually begin with the initial diagnosis of a terminal illness. As Kubler-Ross used a construct of stages, so did Okun and Nowinski, though they caution even their model of grieving is not cut-and-dried. Everything is different about the way we die now, explains Okun. While people used to

die in hospital now, like child birth, there are more options — to die at home, in the hospital, in a hospice, for example.

Mostly they are aware as families cope with death, they are, “vulnerable to serious psychological consequences, including depression, guilt and debilitating anxiety.”

Says Okun, we have grown to have so much faith in the medical system to produce miracles that when we see a family member slipping away, the emotional fallout is tremendous

The phases, write Okun and Nowinski follow from crisis to renewal.

Stage One — Crisis — Anxiety is the most common reaction. But if the bond with the terminally ill person has not been strong those feelings could expand to guilt or even anger.

Stage Two — Unity — People around the dying person pull together. Again, if the relationship has been fractious, this stage may require survivors to set aside past differences, to work together with other members of the family.

Stage Three — Upheaval — If the process of dying goes on for some time the unity of stage two begins to wear thin. Resentment can seep in as family members become aware of the sometimes tremendous burden involved in caring for a terminally ill patient. Caregivers experience burnout.

Stage Four — Resolution — This stage provides an opportunity for grieving family members to confront long-standing issues, heal wounds “redefine one’s role in the family — indeed, to alter a family member’s very identity.”

Stage Five — Renewal — This phase starts at the funeral and can involve a combination of sadness and, in some cases relief. It can provide an opportunity for family members to forge new relationships with each other.

Both Okun and Nowinski drew upon their own experiences for the book. Okun’s husband suffered from lymphoma and ultimately died of a stroke. His illness lasted for a long time. “This is the book she wished she’d had,” says Nowinski.

Nowinski’s wife suffered with Stage 2 breast cancer involving long bouts of chemotherapy.

“Just the pragmatics of coping with the death of someone close is helpful, something I didn’t have,” says Okun. “My husband and I had lots of emotional conversations. But I also needed to know what his passwords were so I could access things. There’s something called chemo-brain that involves slower processing of information and a loss of memory.” Because the illness progressed so slowly and over a

long time it was imperceptible, explains Okun. “The doctors don’t tell you this stuff. The oncologist is only concerned with the tumor.”

As well, the book draws on the varied experiences of others who’d found themselves coping with the protracted death of a loved one. “Sometimes these people live checkup to checkup,” says Nowinski.

Okun and Nowinski highlight the fact that in death for the most part people do not grieve individuals but rather as a family. They also make it clear they are using the word family in its broadest sense.

By initiating the grieving process at the point of diagnosis, families can solve these pragmatic problems, and start healing past emotional wounds before the funeral. No regrets.

### Community Bereavement Support Groups

<p><b>New Grief Support Group</b>          1<sup>st</sup> and 3<sup>rd</sup> Wednesday from 12:00 – 1:00@VNA/Hospice of Monroe County Office, 502 VNA Rd, East Stroudsburg 570-421-5390 (please call to confirm)</p>	<p><b>Good Grief Support Group</b>          2<sup>nd</sup> and 4<sup>th</sup> Thursdays at 7:00pm @St. Paul Lutheran Church with Pastor Tom Richards, Fish Hill Rd Tannersville call 570-629-1992</p>
<p><b>Compassionate Friends</b>          Parent/Sibling Grief Support Group          2<sup>nd</sup> Thursday at 7:00pm          @Our Lady of Victory Church Tannersville. For more info call Kim@570-460-4454</p>	<p><b>Announcements:</b>          MEMORIAL BRICKS are available for purchase and placement at Hospice House for a cost of \$100 per brick. Contact Teri Gaglione at 570-421-5390 for more information</p>