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Effective Pastoral Care for the Bereaved

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EFFECTIVE PASTORAL CARE FOR THE BEREAVED

A Research Paper Presented to the Faculty
of Concordia Seminary, St. Louis,
in partial fulfillment of the
requirements for elective
P-200

by

Michael Klatt

May 1982


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CHAPTER I

INTRODUCTION

The topic which I have chosen for my research elective is "grief." The name which I have chosen for my study is "Effective Pastoral Care for the Bereaved." Since the grieving process is something which everyone goes through at one time of their life or another, I felt that doing a study of bereavement after the loss of a loved one would be a very appropriate subject. The pastor must know how to give effective pastoral care for the bereaved person, so it is essential that he know about grief with its various causes and stages. The pastor must also be familiar with the conditions and traits of abnormal grief, because there is also likely to be someone in his congregation who will experience this at one time or another. Then, the pastor must know how to effectively care for these bereaved members of his flock so that they may once again lead normal lives. My paper will specifically deal with all of these things, along with detailing various portions of Scripture which speak of grief and how to effectively deal with it.

My original interest in this topic stemmed from two specific things. Last year on vicarage in Dallas, Texas, I attended an all-day seminar entitled "Good Grief." I hadn't really thought much about grief until that time, but my eyes were opened more to it by the seminar. The seminar did basically two things. It defined grief along with listing various effective ways to handle grief, learning from it, and becoming a better person for it. The other thing which made me want

to explore the subject of grief more was the feeling of helplessness which I have often experienced when trying to comfort someone who has recently lost a loved one. I also felt that I was not alone in my feelings of inadequacy and uneasiness when confronted with grief, and felt that my research might prove helpful to others. Therefore, my purpose in writing this paper is to grow in my own knowlege, understanding, and awareness of "Effective Pastoral Care for the Bereaved," as well as providing others with information on a very relevant issue facing pastors today and in years to come.

CHAPTER II

NORMAL GRIEF

Before getting into the paper any further, I would like to make a clear definition of the word grief as it will be used throughout the paper. In this paper the word grief will refer to the condition brought * about by the death of a loved one. The term bereavement will be used synonymously with the term grief. Also, the term "pastoral care" will be used to describe anything that a minister does in fulfilling the obligations of his call, specifically in this paper referring to the personal, face-to-face ministry to the individual.

While having given a short, concise, definition of grief as it will be used in this paper, I would next like to focus on various definitions and descriptions given by many different authors on the subject of normal grief.

Edgar Jackson defines normal grief this way: Grief is a young widow who must seek a means to bring up her three children, alone. Grief is the angry reaction of a man so filled with shocked uncertainty and confusion that he strikes out at the nearest person. Grief is the little old lady who goes to the funeral of a stranger and cries her eyes out there; she is weeping now for herself, for an event she is sure will come, and for which she is trying to prepare herself.¹ Such is a definition of grief as an emotion by its manifestations.

Galen F. Drawbaugh defines normal grief as a "deprivation experience."² A person loses someone that he values highly, someone that is important to him, someone in which he has invested a great deal of feeling, and

he does not want to give this person up. Grief as a deprivation experience, is that pain which results from cutting one of the significant persons out of one's emotional framework.³

Paul Irion says that normal grief can be seen psychologically as an emotion, or as sentiment, that is a complex of emotions. Grief is the emotional reaction to bereavement.⁴ Therefore, after viewing various definitions and descriptions of normal grief from different authors, we see that grief may be viewed both as a normal emotion, and a deprivation experience, following the loss of a loved one.

Now that we have given various, similar, definitions of normal grief, let's find out what some of the causes of normal grief are. Once again, Edgar Jackson has some interesting things to say in this regard. According to Jackson, man grieves for himself, he grieves because there is fear, and he grieves because there is insecurity.⁵ It would be quite beneficial to observe these reasons more closely, from the standpoint of a Christian.

First, man grieves for himself. Since his loved one was a Christian, man knows that his loved one no longer has any pain, suffering, or anguish because his soul is with Christ in heaven. However, man is sad because he is suddenly and painfully deprived of someone he loved and needed. He feels this even when death came as a release. In other words, he is feeling sorry for himself. He has been deeply hurt and he grieves for himself.⁶

Secondly, man grieves because there is fear. The world has suddenly changed, and he doesn't know what is ahead. Yet even more frightening are the fears that are within himself, the fears that are awakened by his loved one's death. This is the fear of his own death. Few people think about death very much. It is an unpleasant subject and something which always happens to someone else, they think. They repress it into the background of their subconsciousness and there it stays until death strikes someone very close. Then it springs upon them with its full force.⁷

The other reason why man often grieves is because of his insecurity, which is closely connected with his fear, after the death of a loved one. His world has been shattered. The future appears threatening because the feeling of security that came from having the deceased nearby is gone.⁸

William F. Rogers states very emphatically the point that the death of a loved one is a painful experience, "not because we fear what has happened or is happening to the loved one, but because of the loneliness that we ourselves are suffering."⁹ The pain is difficult to deal with because of our complete "inability to do anything about the loss which has brought it on."¹⁰

When viewing the stages of normal grief, we shall be looking at the work of three experts in this field. We shall be examining the work of Granger Westberg, Elisabeth Kübler Ross, and in the greatest

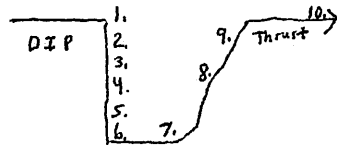
detail, Erich Lindemann.

Granger Westberg defines normal grief as the normal and natural process by which a person makes a healthy adjustment to any significant loss in his/her life. In this process, which Westberg likens to the ebb and flow of the tides, rather than the smooth passage of a straight line, there are ten stages. We must remember however, that every person does not necessarily go through all of these stages, nor does a person necessarily go through them in this order.¹¹

1. Shock - "Bottom falls out of the world." Numbness. Disbelief. Denial.
2. Emotional Release - Expression of whatever feeling. Tears. Cursing.
3. Physical/body manifestations - Alteration of normal patterns. Sleep.
4. Depression/panic-detachment - Long black tunnel. (suicide potential).
Will I ever recover? Loss of enthusiasm, ideals, and hopes.
5. Guilt - How was I involved in the cause of loss?
6. Anger - Irrational hostility. Toward whom? How to express it?
7. Idealization - The past was perfect. The future offers little.
8. Realization - The past had its faults, the future may not be so bad either. With this comes a rapid thrust to recovery.
9. New patterns - With the detachment of the image of the past, new life patterns develop.
10. Living with the loss - Health adjustment recognizes the loss, but is no longer disturbed by it.

These ten stages of normal grief may be illustrated in the following

way:



The person who successfully completes his/her "grief work" emerges stronger for the experience. Once the DIP has been worked through, with the feelings and issues faced, expressed, and dealt with, then the thrust to recovery takes place. The grief therapist monitors the process (you can not make it happen) to see that the person does not block or arrest at any one particular stage.

For Dr. Elisabeth Kübler Ross, the grieving process involves five different stages.

1. Denial - Shock. Refuse to believe.
2. Anger - Emotional involvement.
3. Bargaining - Trade-offs. Trying to buy time. Gradual realization of the real consequences.
4. Depression - Low spirits, gloominess, dejection, sadness.
5. Acceptance - Increased self-reliance and more contact with others.

Almost everything that has been said about grief and bereavement in recent years is based in part on the work of Erich Lindemann. According to Lindemann, the picture shown by persons in normal, acute grief is remarkably uniform. Common to all is the following syndrome:

sensations of somatic distress, a feeling of tightness in the throat, choking with shortness of breath, a need for sighing, an empty feeling in the abdomen, lack of muscular power, and an intense subjective distress often described as tension or mental pain. The person soon learns that these waves of discomfort can be precipitated by such things as visits, mentioning the deceased, and receiving sympathy. The person makes all necessary attempts to avoid the syndrome.¹²

In acute grief, there is also a preoccupation with the image of the deceased, according to Lindemann. There is commonly a slight sense of unreality and a feeling of increased emotional distance from other people.¹³

Another strong preoccupation of the bereaved is with feelings of guilt. The bereaved searches the time before the death for evidence of failure to do right by the lost one. He accuses himself of negligence and exaggerates minor omissions.¹⁴ In connection with this, Edgar Jackson states that the bereaved person may "spend much time idealizing the deceased" because this is probably the simplest and best form for resolving the quiet feeling that exists.¹⁵ William Rogers states that the feelings of guilt may be based on fact or imagination, both of which are equally potent. The feelings of guilt arise in part from the normal and universal ambivalence in every interpersonal relationship.¹⁶ In addition to this, Paul Irion says that a further possible cause of guilt feelings might be the cultural demands made upon the bereaved.

Irion says: "A person may feel very guilty because his actual feelings in the grief situation do not correspond to the way in which people of the community think he feels. He feels guilty because he considers himself a hypocrite."¹⁷

In addition, according to Lindemann, there is often disconcerting loss of warmth in relationship to other people, a tendency to respond with irritability and anger, and wishes not to be bothered by others at a time when friends and relatives make a special effort to keep up friendly relationships.¹⁸

The activity throughout the day of the bereaved person shows remarkable changes, according to Lindemann. There is restlessness, inability to sit still, a moving about in aimless fashion, and a continuous searching for something to do. However, at the same time, there is lack of energy to initiate and maintain organized patterns of activity. The bereaved clings to the daily routine of prescribed activities but is surprised to find how large a part of his customary activity was done in some meaningful relationship to the deceased and has now lost its significance. Especially the habits of social interaction seems to have been lost. This loss leads to a strong dependency on anyone who will stimulate the bereaved to activity and serve as the initiating agent.¹⁹

The duration of a grief reaction seems to depend upon the success with which a person does the "grief work," according to Lindemann.

This includes the following: emancipation from the bondage to the deceased, readjustment to the environment in which the deceased is missing, and the formation of new relationships.²⁰

Now, that we have defined grief, along with detailing its causes and stages, we must view some constructive ways of handling grief. To do this, we will consult an expert on this, Charles Bachmann. In his book, Ministering to the Grief Sufferer, Bachmann lists ten important things which should happen if a person is constructively handling his grief.

1. Feelings need to be expressed. It is of great importance to be able to say it hurts, to feel the hurt keenly to the very depth of one's being, and to be able to express this openly and unashamedly before someone who understands. If this open expression is not allowed and the hurt is glossed over, the person is heading for trouble. Therefore, it is of great importance for the bereaved person to express his feelings openly.

2. Facts need to be faced. There should be no dodging the issues of life and death, not only the fact of another's death but also the fact of one's own death. These realities are faced each time someone closely related dies. It is the stiff, unbending truth of the matter that is hard to accept.²²

3. Pain and loss need to be accepted. One does not have to do the accepting immediately. Observers have maintained that from three

to six months is a normal period for the acceptance of the idea of the loss. The bereaved person must come to terms with his grief by accepting things as they are now, or never fully and finally resolve for himself the loss.²³

4. The need for assimilation of the fact of loss in daily living. It is important to be oneself again, to rejoin groups, to resume old duties, or to assume new ones, but not too quickly.²⁴

5. The need for protective layers. No one can predict in advance how long the process of assimilation of loss will take. This is purely an individual matter. Some people, especially those from closely knit families, are able to make a more rapid recovery. If there is a strong solidarity within the ethnic, social, or cultural group, it provides the necessary support for lessening the blow while not making light of it. This can be thought of in terms of a circle with a central core, the individual cell of civilization being in the center and additional bands such as immediate family, relatives and friends, helping specialists, and the community at large surrounding the nucleus. As long as there are adequate substitutes the loss is more manageable.²⁵

As in any suffering, one can accommodate the loss when others are standing by to help. But, what about the time when the others are gone? This is the time when the pastor can begin to fill the role of therapist, not in the medical, technical sense, but as his title implies, as a healer, according to Bachmann. The pastor needs to follow through,

making periodic visits to be of maximal help.²⁶

6. The need to verbalize feelings. In this area of constructively handling grief, the pastor needs to be an effective listener. The following are necessary steps in the process of verbalization by the grief sufferer. a. For the pastor to hear the recital of events; b. to rehearse the last moments; c. to review the past accomplishments; d. to discover those facts that have meaning for the person; and e. to provide the atmosphere for this release.²⁷

7. The need to explore alternative courses of action. The pastor is in the best position to follow each course of action to a possible logical outcome, still allowing the grief sufferer to choose. The interest and concern manifested will be appreciated because the pastor merely stood by. Ultimately, there is realization of need for readjustment of one's mode of living, of the necessity to find avenues for expression of one's own creativity. The pastor may also suggest that the grief sufferer talk to others within the congregation whom have also recently suffered grief through the death of a loved one.²⁸

8. The need for community: Grief Anonymous. It would be very beneficial if the pastor has in his congregation a group of people who, having already worked through their own grief after the death of a loved one might, with help from the pastor, provide a kind of buffer relationship that would help fellow grief sufferers build bridges of new relationship. These people would contact the family or individual

within a week after the loss has occurred. The person who has actually managed his own grief situation may act as a cushion to help the grief sufferer by providing someone to whom he can relate.²⁹

9. The need for relatedness. Grief sufferers are in need of relatedness not only to fellow grief sufferers but also to the community at large. There is need to live out life's role with a certain degree of satisfaction. There is a need to find new meaning in one's existence which begins with realizing that there are tasks to be done, new goals to reach, new patterns to be established, and new roles to be played. One cannot run away from life forever. He comes to the point at which he must take individual responsibility for self-direction.³⁰

10. The need to be needed. An example of this which Bachmann listed was of a nurse whose husband had just died and she found her old supervisor needed someone to work the "graveyard shift." She saw the need for her to be needed. All it took was a slight push in the direction of the hospital. Soon she became important in the scheme of things in hospital care and assumed the role of a respected and responsible nurse.³¹

In time, the greater majority of people usually make these adjustments. However, it does take time and effort. No one is really ever spared going through the process of grief work, according to Bachmann.³²

In conclusion, of this chapter on normal grief, it might be said that a person's reaction to grief is quite often unpredictable. Each

person is unique and there is no set pattern according to which a person will react to grief. Yet it can be said that a person's reaction to grief is partially determined by certain factors. The value that a person attaches to life and death will determine to some extent his grief response when he is in a position of bereavement. This covers a broad area which includes his childhood, his education, and the social forces that affect him. Edgar Jackson believes that the grief reaction may be conditioned in at least four ways: by the personality structure of the individual, by the social factors that are at work around the individual, by the importance of the deceased in the life system of the individual, and by the value structure of the individual.³³

Grief is a universal experience. Few escape it, some are trapped by it, and those who come through it find that they have been through a painful refining process. I view grief as a gift, not something to be grasped eagerly, but a permanent, reluctantly received growth experience from God. To profit from its influence we must accept it honestly and move through it both with the help of our friends and the support of our Lord who uses the pain to mature us holy and fit for His use.

ENDNOTES

¹Edgar Jackson, For the Living (Des Moines, Iowa: Channel Press, 1963), p. 21.

²Galen F. Drawbaugh, "Grief and the Pastor" (unpublished research paper, Concordia Seminary, 1965), p. 2.

³William F. Rogers, "The Pastor's Work with Grief," *Pastoral Psychology*, XIV (September 1963), 20.

⁴Paul E. Irion, "Towards an Ethical Understanding of Grief Situations," *Pastoral Psychology*, IV (December, 1953), 20.

⁵Edgar Jackson, You and Your Grief (Great Neck, New York: Channel Press, 1961), pp. 17-18.

⁶*Ibid.*, p. 17.

⁷*Ibid.*, pp. 17-18.

⁸*Ibid.*, p. 18.

⁹William F. Rogers, Ye Shall Be Comforted (Philadelphia: Westminster Press, 1950), p. 15.

¹⁰*Ibid.*, p. 20.

¹¹Granger Westberg, Good Grief (Philadelphia: Fortress Press, 1962), p. 11.

¹²Erich Lindemann, "Symptomatology and Management of Acute Grief," *Journal of Pastoral Care*, V(Fall, 1951), 20.

¹³*Ibid.*

¹⁴*Ibid.*, p. 21.

¹⁵Edgar Jackson, Understanding Grief (Nashville : Abingdon, 1957), p. 89.

¹⁶Rogers, Ye Shall Be Comforted, p. 22.

¹⁷Irion, "Towards an Ethical Understanding of Grief Situations," p. 21.

¹⁸Lindemann, p. 21.

¹⁹Ibid.

²⁰Ibid., p. 22.

²¹Charles C. Bachmann, Ministering to the Grief Sufferer (Englewood Cliffs, N. J. : Prentice-Hall Inc., 1964), p. 46.

²²Ibid.

²³Ibid., pp. 46-47.

²⁴Ibid., p. 47.

²⁵Ibid.

²⁶Ibid., pp. 47-48.

²⁷Ibid., p. 48.

²⁸Ibid., pp. 48-49.

²⁹Ibid., p. 49.

³⁰Ibid., p. 50.

³¹Ibid., pp. 50-51.

³²Ibid., p. 51.

³³Jackson, Understanding Grief, p. 27.

CHAPTER III

ABNORMAL GRIEF

It is quite difficult to give a precise definition of what abnormal grief is. We could just say that it is the opposite of what normal grief is. However, this might be oversimplifying the issue too much because there are some things which take place in normal grief which also take place in abnormal grief, but to a much greater degree. Erich Lindemann calls abnormal grief a distortion of normal grief and says that abnormal grief reactions fall into two broad categories: the delayed reaction and the distorted reaction. It is to these two reactions that we will now address ourselves.

Lindemann states that the delayed reaction is the most striking and the most frequent of the abnormal reactions. If the bereavement occurs at a time when the patient is confronted with important tasks and when there is necessity for maintaining the morale of others, he may show little or no reaction for weeks or even much longer. That this delay may involve years became obvious first in the fact that people in acute bereavement about a recent death may soon upon exploration be found preoccupied with grief about a person who died many years ago.¹

Abnormal grief also involves distorted reactions. Distorted reactions do not differ in type from normal reactions to grief. They differ rather in intensity and/or duration. Lindemann states that these distorted reactions which may take place include the following nine items.

1. Overactivity without a sense of loss with the activities bearing

resemblance to the activities formally carried out by the deceased.² The bereaved person's activity can be understood as an attempt to avoid the painful process of grief. He avoids the reality of the death by busying his hands and mind with other things.

2. The acquisition of symptoms belonging to the last illness of the deceased. For example, if the deceased died of a coronary, the bereaved will notice severe pains in his chest, for which there is no physical explanation. While this sort of symptom formation "by identification" may still be considered as conversion symptoms such as we know from hysteria, there is another type of disorder doubtlessly presenting a recognized medical disease.³

3. Lindemann describes this recognized medical disease such as ulcerative colitis, rheumatoid arthritis, and asthma as a "psychosomatic condition." The seriousness of abnormal grief is quite evident in view of the serious diseases that can result.⁴

4. At the level of social adjustment there often occurs a conspicuous alteration in one's relationship to friends and relatives.⁵ The person feels irritable, does not want to be bothered, avoids former social activities, and is afraid he might antagonize his friends by his lack of interest and critical attitudes. This is also frequently noted in a normal grief reaction but is of a shorter duration. When the different relationship remains and becomes more or less permanent, it is a sign of unresolved grief.

5. There may be furious hostility against specific persons.⁶

Some general temporary hostility can be expected. However, in the abnormal reaction, the person gives way to his feelings of hostility. Lindemann adds that "while it is characteristic that in abnormal grief people talk a good deal about their suspicions and bitter feelings, they are not likely to take any action against the accused, as a truly paranoid person might do."⁷

6. Many bereaved people struggled with a great deal of effort against these feelings of hostility, which to them seem absurd, representing a vicious change in their characters and to be hidden as much as possible. This reaction resembles schizophrenia.⁸

7. Closely related to this picture is a lasting loss of patterns of social interaction. The person cannot initiate any activity, is full of eagerness to be active but throughout the day he will not start any activity unless "primed" by somebody else.⁹

8. In addition, there is a picture in which the person is active, but in which most of his activities have a look which is detrimental to his own social and economic existence. Such people give away their belongings, are easily lured into foolish economic dealings, and lose their friends and professional standing by a series of "stupid acts."¹⁰

9. This leads finally to the picture in which the grief reaction takes the form of a straight agitated depression with tension, agitation, insomnia, feelings of worthlessness, bitter self-accusation, and obvious

need for punishment. Such people may be dangerously suicidal.¹¹

Lindemann's nine distorted reactions cannot be thought of as nine separate and distinct individual reactions. They are rather a series of steps or stages in a distorted reaction, from the first manifestations of distortion to the final personality disintegration. However, it must be remembered that because of the many variables involved, the presence of one set of symptoms does not preclude the future presence of the entire series. For example, the needs of the bereaved may be met by one phase of the distortion, and no further distortion may ever appear. Also, the early stages of distortion may be sufficiently suppressed as to go generally unnoticed, when suddenly something of a serious nature is discovered.

The time element in the whole grieving process whether normal or abnormal is important. Most observers will agree that it usually takes a person from six months to a year to go through the process of normal grief work. The critical period of the mourning process in which it will be noted that the bereaved either begins to show healthy signs of adequately handling his grief or signs of abnormal grief, if they have not been manifested earlier, is, according to Charles Bachmann, between the third and sixth months.¹² It is during this time in particular that the pastor will want to watch for signs and symptoms of inappropriate behavior such as aggressive hostile attitudes, inactivity or overactivity, and lack of responsiveness to new relationships.

ENDNOTES

- ¹Lindemann, pp. 24-25.
- ²Ibid., p. 25.
- ³Ibid.
- ⁴Ibid., pp. 25-26.
- ⁵Ibid., p. 26.
- ⁶Ibid.
- ⁷Ibid.
- ⁸Ibid.
- ⁹Ibid.
- ¹⁰Ibid., p. 27.
- ¹¹Ibid.
- ¹²Bachmann, p. 93.

CHAPTER IV

WHAT SCRIPTURE SAYS ABOUT GRIEF

Scripture speaks much to us about grief, how people of Biblical times handled their grief, and how we can effectively handle our grief as Christians. Shevis Horne, in his book, You Can Find Comfort, speaks of four Scriptural resources which Christians have in helping bereaved people.

First, Christians know a comforting person who is the Father of our Lord and Savior Jesus Christ.¹ The apostle Paul found his ultimate comfort in God. In II Cor. 1:3 he wrote, "Blessed be the God and Father of our Lord Jesus Christ, the Father of mercies and God of all comfort." God is no impersonal force. He is always with us, loving and caring for us, and sharing our pain and grief. Bereaved people grieve because of the loss of a loved one. They may find ultimate comfort in a person from whom they can never be separated, and that is God. Nothing "shall be able to separate us from the love of God which is in Jesus Christ." As Christians, we find everlasting comfort in knowing that if we believe in Jesus Christ as our Savior, we will only be temporarily separated from our loved ones at their death, but will be joined together with them when we die and share eternal life with them in heaven.

From the comfort we receive from God comes the ability to comfort others. The apostle Paul spoke of this in II Cor. 1:4 when he wrote, "We are able to comfort those who are in affliction with the comfort

with which we ourselves are comforted by God." We can become comforters because we have been comforted.²

Second, we may experience a comforting presence which is the Holy Spirit.³ The Holy Spirit is often viewed as the Comforter in the Bible. The term comforter as used in the New Testament is a very strong word. It means more than soothing sympathy. It suggests courage, bravery, and fortitude. The Holy Spirit will console in sorrow, give strength to bear pain and loneliness and give the power to master life's crises.⁴

Third, we are a part of a comforting fellowship which is the church.⁵ The apostle Paul speaks of the church as the body of Christ. By this he means that the church is a living organism and the individual believers are members of that body the way the eye, ear, nose, hand or foot are members of the physical body. There is diversity within unity, individual performance within interdependence, according to Horne.⁶ In I Cor. 12:26 Paul says, "If one member suffers, all suffer together; if one member is honored, all rejoice together." When the church is really the body of Christ, there are those who love us, accept us, affirm us, and identify with us. The church will help the grieving person who has lost a loved one accept the reality of death, share the pain and loss, and keep that person in touch with the Christian faith that gives the assurance of eternal life.⁷

Fourth, we have a comforting book which is the Bible. It tells about the previously mentioned three resources of comfort which Christians

have in helping bereaved people.⁸ We try to say comforting things but the Bible says them so much better and with far greater authority. You can feel, for example, the healing that takes place in a funeral service when words such as those from Psalm 23:4 are read from the Bible. "Yea though I walk through the valley of the shadow of death, I will fear no evil: for Thou art with me; Thy rod and Thy staff they comfort me." Also very appropriate to this situation are these words of I Cor. 15:54-55. "Then shall be brought to pass the saying that is written, Death is swallowed up in victory. O death, where is thy sting? O grave, where is thy victory?"

There are also many other key passages mentioned in Scripture which give people comfort in grief. In Psalm 46 God is represented as a refuge and strength, a very present help in time of trouble. In Psalm 121 the psalmist lifts up his eyes unto the hills because his help comes from the Lord who made heaven and earth. The Lord is thought of in this Psalm as man's keeper, his shade, and his protection.¹⁰

In the New Testament there are also many comforting passages for the bereaved person. John 14:1-3 is often helpful. These verses give hope to Christians. They are encouraged to look for Christ's return, when He will receive them to Himself, and they will live with Him in complete happiness throughout eternity. In II Corinthians 4, beginning in verse 16, Paul discusses the inner person and the outer person. The outer person may be deteriorating, but the inner person is renewed

daily. The inner person is becoming more and more like Jesus at the same time that the outer person is losing ground.¹¹

Philippians 4:4-9, 13, and 19 are among my favorite verses in Scripture. On my vicarage I read verses 4-8 as a closing devotion to congregational members when I was visiting them in their homes. We would then discuss these verses together and I would explain to them what great comfort that we, as Christians, can have in knowing that God is always there to help us. He is there for the asking. Especially in bereavement when we lose a loved one, we know that our loved one is now enjoying eternal life with Him in heaven, if he was a Christian. There can be no greater comfort than in knowing and believing in Jesus Christ as our Savior.

Faith can give meaning to us in times of difficulty. This does not mean that we will not hurt, but it does mean that we can find satisfactory answers to our grief. Where answers stop short, trust in God can enable us to continue to live for Him and to look to the future with faith that all things will work together for good because we love Him (Rom. 8:28). Since God is for us, who can be against us (Rom. 8:31-39)? We should always remember that those for whom we grieve would not want us to stop living, and God does not want us to stop living. He wants our lives to be meaningful and happy, and He will help us to lead productive lives in service to Him.¹²

Other Important Scripture Passages for Times of Loss

Psalms 27, 32, 42, 51, 91, 130, 131, 142

Proverbs 3:5-6

Jonah 2:2-9

Matthew 5:1-12, 6:7-15, 6:25-34, 11:25-30

John 11:17-27

I Thessalonians 4:13-18

I Peter 1:3-5

I John 3:1-3

Verses Declaring God's Forgiveness and Absolution

Isaiah 1:18, 43:25

Luke 5:20

John 8:10-11

I John 1:9¹³

ENDNOTES

¹Chevis Horne, You Can Find Comfort (Grand Rapids, Michigan : Baker Book House, 1981), p. 10.

²Ibid., p. 11.

³Ibid.

⁴Ibid., p. 13.

⁵Ibid.

⁶Ibid., pp. 13-14.

⁷Ibid., p. 14.

⁸Ibid., p. 15.

⁹Ibid., pp. 15-16.

¹⁰Bill Flatt, You Can Overcome Grief (Grand Rapids, Michigan : Baker Book House, 1981), pp. 17-18.

¹¹Ibid., pp. 19-20.

¹²Ibid., p. 23.

¹³Mildred Tengboom, Help for Bereaved Parents (St. Louis: Concordia Publishing House, 1981), p. 54.

CHAPTER V

EFFECTIVE PASTORAL CARE FOR NORMAL GRIEF

It is very important that the pastor know how to provide effective pastoral care for those in his parish in bereavement over the loss of a loved one. If the pastor does not know what he is doing in this area of his ministry, the bereaved people to whom he is ministering might never completely rid themselves of their grief and be miserable for the rest of their lives. The information which I found to be very helpful in researching this part of my paper comes from Pastoral Care Team Ministries (The Stephen Series). Even though this information is geared more to the layman in effectively Ministering to Those Experiencing Grief, it is also very helpful for the pastor to be familiar with in his providing effective pastoral care for normal grief. In this chapter of my paper I shall first list the particular stage of grief and then what the pastor can do to provide effective pastoral care to the bereaved person in that particular stage, according to Pastoral Care Team Ministries.

I. Stage I : Impact -- The Helpee Experiences A Sense Of Shock And Disbelief Over The Loss¹

There are seven different things which the pastor can do to provide pastoral care to the bereaved during the Impact stage.

1. Be There.

This is the most important thing which the pastor can do in this first stage of grief. Many times bereaved persons will not remember

anything which was said by helping persons during this first stage, but they will remember the people who were with them and cared for them. You can try to relate to the bereaved with your words and actions that you are fully present with him or her. You might even say these words: "I'm with you." "I care and I'm here." It means much to the bereaved when someone cares enough to just "be around," and is around.²

2. Accept Their Feelings

It is very important for you to accept that the initial reaction of shock is healthy and normal. Unfortunately, there is a frequent tendency on the part of the pastor or other helpers to discourage expressions of shock. However, the pastor and others who are trying to comfort the bereaved need to allow and even encourage such expressions of sorrow. The sooner that the feelings of shock and denial are worked through, the sooner healthy coping with the reality of the loss can begin.³

3. Don't Challenge the Denial

Having recognized and supported the natural feelings of shock in the bereaved, the pastor should not attempt to get the griever to "accept the death" at this early stage, to try to force the bereaved's disbelief into belief. Let the denial take place.⁴

4. Listen

In this initial stage of grief, you should concentrate on listening. If talk is necessary, it is good to reflect back to the

bereaved his feelings in a sincere and honest fashion. Don't worry about silences when they occur. Many times, there just isn't much to say.⁵

5. Expressing Your Own Grief?

In sharing the grief of the bereaved, the pastor needs to be somewhat cautious in his own expressions of grief. If you, as the pastor, feel the inclination to weep along with the griever, at times it is perfectly all right to do so; for example, if you have worked with the individual for a long time and know them quite well and you are in a private setting. However, there are certain times when you will have to keep your feelings inside you; for example, when everyone else is disoriented and overwhelmed by the loss and they need someone to be strong and supportive.⁶

6. Let the Helpee Make As Many Decisions As Possible

It is important for the pastor to let the bereaved person make as many of his own decisions as possible. Don't take over and make decisions which he can make. By doing this, you, as the pastor, will be helping the bereaved person as he passes into the second stage of the grieving process, which begins when the bereaved begins to cope with the reality of the situation of loss.⁷

7. Help Them to Avoid Rash Decisions

The pastor should see to it that the bereaved person is not hurt economically or socially because of fool-hardy actions or

commitments made during the initial stage of bereavement. For example, the grieving individual might want to change place of residence or sell the house they had lived in for years. Major decisions such as these should be thought out, rather than being decided on impulsively. These decisions should be postponed until the bereaved individual has moved past the shock stage.⁸

II. Stage II : Recoil -- Shock And Denial Gives Way To Awareness Of The Reality Of The Loss As The Helpee Experiences Painful Feelings And Begins To Struggle With Making Emotional Adjustments⁹

While in this particular stage of grief, there are seven important things which the pastor can do to provide effective pastoral care for the individual experiencing bereavement.

1. Be Available

It is once again very important for the pastor to be very available to the bereaved person. Because the recoil stage is a stage of ups and downs, the bereaved may need your help and support even in between scheduled visits. In addition to personal contact, you, as the pastor, may wish to make frequent use of the telephone also. It will be helpful for you to be aware of special dates during this time. Such things as anniversaries, birthdays, holidays and other special days are likely to be difficult times for the bereaved individual. You should mark down these special dates, and try to make yourself available during these times. Your helpee will particularly need and

appreciate your help during these "crisis points."¹⁰

2. Encourage Emotional Expression

You should give support and encouragement to the bereaved's open expressions of grief. It cannot be emphasized enough that keeping grief inside can only lead to many more problems later on; the feelings simply have to come out sometime. As the pastor you should encourage the grief process, creating an atmosphere of acceptance.¹¹

3. Encourage Expression of Specific Feelings

Once the bereaved begins to open up, the pastor should facilitate the work of mourning by encouraging the bereaved to express feelings of a) Missing the Deceased; b) Anger or Hostility, and c) Guilt.¹²

a. Missing the Deceased.

One way to facilitate the griever's open expression of sorrow is to encourage the griever to talk about the loved one who recently died. The loss of the loved one should be openly discussed because if the loss is not properly admitted by the griever and dealt with, adjustment to the new situation cannot fully take place. The pastor should be honest with the griever and tactfully reinforce the reality of the loss. The pastor should not be afraid to ask questions that open things up. That is what makes his caring effective.¹³

b. Anger or Hostility.

If the bereaved person is feeling angry or hostile (whether toward God, a physician, the pastor, or toward him or herself), physical

signs of agitation will usually be present. The pastor needs to take the initiative and say things which will make the helpee's task of expressing hostile feelings easier. The pastor should reflect the bereaved's hostile statements in an empathic way, not in a judgmental fashion. Extreme patience and tolerance must be practiced by the pastor toward the bereaved. Any defensive reactions to the bereaved's aggression would be a mistake. Therefore, the pastor should always remember to keep his remarks accepting, empathic, and open-ended in order to facilitate further expression of feelings.¹⁴

6. Guilt.

Frequently, in a situation where a loved one has recently died, the bereaved will think of many things which he believes he should have done or said or he regrets things which he did say or do while he remembers the time before the loss. As the pastor discusses these matters with the bereaved he should remember to aid him in distinguishing between irrational guilt and real guilt. Irrational guilt is guilt which is not appropriate to the situation or which is magnified out of all proportion. Rational guilt involves more of a sticky situation if the bereaved really was responsible in some way for the death of the loved one or if the bereaved's behavior really was unkind in some way. In response to irrational guilt on the part of the bereaved, the pastor should refrain from telling the bereaved that his guilt is irrational until the bereaved has had a chance to thoroughly express and work

through his feelings. In response to rational guilt on the part of the bereaved, the pastor should respond to the bereaved's confessions of true guilt sincerely and honestly. The pastor should also always be ready to use the distinctively Christian resource of forgiveness.¹⁵

4. Avoid Saying Platitudes

The pastor should avoid saying such trite remarks as : "God willed it." "God only takes the good." "Every cloud has a silver lining." "Everything will be all right."¹⁶

5. When Platitudes Are Said By the Bereaved

Remember that when these trite remarks are said to you by the bereaved, they may serve the purpose of providing the griever with a temporary explanation for the loss. In this case, it is best for the pastor to be tactfully silent. Later on in the grieving process, the pastor may wish to ask the bereaved person to expand on such rationalizations if he feels that the bereaved is using them to avoid coping with the reality of the situation of the loss.¹⁷

6. When Platitudes Are Said By Others

Most of the time these trite remarks said by others are well-intended and should not be corrected by the pastor. If the pastor believes that such statements are disturbing the bereaved person he may wish to talk about it with him later on in private.¹⁸

7. Mobilize Support

So often, just having caring people around can be a great help

for the mourning person in the grieving process. The Christian community needs to be a caring community, with everyone helping each other in times of need.¹⁹

III. Stage III : Recovery -- The Bereaved Person "Completes" The Grief Process By Adopting To His Or Her New Environment Or Situation In Life²⁰

While in this particular stage of grief, there are three important things for the pastor to remember in providing effective pastoral care for the individual experiencing bereavement.

1. Encourage New Social Relationships

The pastor can do much to combat feelings of isolation and loneliness in the bereaved if he can suggest some social activity in which the bereaved can participate without too much discomfort. Because there may be considerable feelings of reluctance or awkwardness on the part of the bereaved, a "go-slow," "small step" approach is advised here.²¹

2. Keep in Touch

The pastor should continue to visit the bereaved and provide emotional support, even long after the death has taken place. Often such support is welcomed by the bereaved, since by this time other sources of support frequently end. Your visits don't have to be as frequent as they were during the second stage, but you need to make yourself available enough to show that you still do care and that you

are available if any problems arise.²²

3. Keep Your "Third Ear" Tuned

In talking with the bereaved, the pastor needs to use his "third ear" to make sure that no pent up feelings of guilt, hostility, and the like still linger on. Even at this late stage, the pastor may need to facilitate the open expression of grief.²³

One of the most important things which the pastor must remember in providing pastoral care for the bereaved is to help them get their feelings out in the open. The more the feelings come out and are worked through, the more real helping will be accomplished. Next, we shall look at the pastoral care which the pastor should apply to be effective in helping an abnormally bereaved person.

ENDNOTES

¹ Pastoral Care Team Ministries, Ministering to Those Experiencing Grief (St. Louis: Pastoral Care Team Ministries, 1978), p. 8.

² Ibid.

³ Ibid., p. 9.

⁴ Ibid.

⁵ Ibid., pp. 9-10.

⁶ Ibid., p. 10.

⁷ Ibid., pp. 10-11.

⁸ Ibid., pp. 11-12.

⁹ Ibid., p. 12.

¹⁰ Ibid., pp. 13-14.

¹¹ Ibid., p. 14.

¹² Ibid., pp. 14-15.

¹³ Ibid., p. 15.

¹⁴ Ibid., pp. 15-16.

¹⁵ Ibid., pp. 16-17.

¹⁶ Ibid., pp. 17-18.

¹⁷ Ibid., p. 18.

¹⁸ Ibid.

¹⁹ Ibid., p. 19.

²⁰ Ibid.

²¹ Ibid., p. 20.

²² Ibid., p. 21.

²³ Ibid.

CHAPTER VI

EFFECTIVE PASTORAL CARE FOR ABNORMAL GRIEF

Besides knowing how to provide effective pastoral care for normal grief, the pastor must also know how to provide effective pastoral care for persons experiencing abnormal grief within his congregation.

Charles Bachmann, in his book, Ministering to the Grief Sufferer, believes that one out of four persons will have pronounced (abnormal) grief reactions following the death of a loved one, often in a very distorted form.¹ If this is true, then it means that the pastor will have contact with grief in a distorted form at least once a year, on the average. Therefore, the pastor holds a very important position in respect to abnormal grief. He is probably the one person within the community who is closest to the bereaved. The pastor has contact with the bereaved from the initial point of bereavement until the end point of the "grief-work." He is the one who is in a position to spot a case of abnormal grief. Therefore, the pastor must watch carefully each one of his parishoners who are going through bereavement after the death of a loved one, to see if they are proceeding normally through their grief-work, or need special care because of certain abnormalities in their grieving process.

There are many clues which will give abnormal grief away, many of which were mentioned earlier in this paper, but will be reviewed and stressed again because of their importance. Often trying to get away is a danger signal. Other danger signals include the excessive use of alcohol when the bereaved does not normally drink along with

any drastic change in behavior that is not characteristic of the individual. The pastor should be especially alert if there have been any previous evidences of inability to endure emotional stress on the part of the bereaved.

Therefore, in summary, what does the pastor do when he believes that a bereaved person is showing symptoms of abnormal grief? There are two main things which the pastor can do in a situation like this. First of all, he should watch closely the actions of the bereaved, and be able to tell if these actions have become abnormal. If they have, he should deal with them as he previously has been, but should immediately talk to relatives or close friends of the bereaved and recommend professional counseling help. The reason why the pastor should do this is because few pastors are trained to handle such cases and if they attempted to do so, they might do more harm than good. Most of the writers whom I read in this area of effective pastoral care for cases of abnormal grief all came up with the same conclusion: that of referral.

¹Bachmann, Ministering to the Grief Sufferer, p. 53.

CHAPTER VII

CONCLUSIONS

In this paper, there has been a great deal covered in connection with grief. While this paper has not been exhaustive by any means, it has covered a wide gamut of material dealing with bereavement. We have explored what we thought important in gaining a better understanding of normal grief, abnormal grief, what Scripture says about grief, and different ways of effective pastoral care for normal and abnormal grief. Through this, we have come to a variety of conclusions. We have found that bereavement after the loss of a loved one, is a very normal process in which every bereaved person must engage if he is to free himself from the bondage of the deceased. In other words, mourning or bereavement is therapeutic. We have also found that the grief process is more complex than had generally been assumed, and that there are distorted reactions which sometimes arise and have to be dealt with by professional personnel.

Today's pastor is in a much better position to understand grief and his role with it. The pastor occupies a very unique and important position and role as he ministers to the bereaved. No one else in the community can as effectively fill either his position or his role. His position and role give him an opportunity to draw the bereaved into a closer relationship with their Savior during the long process of "grief work." In connection with this, we might also draw the conclusion that the work of the pastor with the bereaved is therapeutic. He is

engaged in a task of healing and of making the person whole again.

This aspect should be strongly emphasized!

Through my research in doing this paper I have learned much about bereavement and effective pastoral care for the bereaved. It is now my hope and prayer that I will be able to effectively apply what I have learned, to the people whom I will minister to in the parish, when they are confronted with bereavement after the loss of a loved one.

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