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SHATTERED BY DEATH;
STRENGTHENED BY HOPE:
A CHRISTIAN PERSPECTIVE ON GRIEF

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Introduction

My interest in this topic has grown out of working with grieving people for the last decade. During that time, I have been involved in the leadership of dozens of bereavement support groups which have included hundreds of people. As a part of this journey, I have been privileged to interact with many grieving Christians. It seems that a general understanding of the grieving process, coupled with how a person of faith might be affected, would be most useful.

The death of a loved one is a terrible, traumatic experience. It is one that changes life forever, making clear why the Bible writer called death the last enemy (cf 1 Cor 15:26). Recovery and adjustment, while possible, are far from easy. The path from death to adjustment could certainly be called, in the words of the psalmist, “the valley of the shadow of death” (Ps 23:4).

The Grief Process

“There is general agreement in the field that healthy resolution of loss requires the person to grieve and mourn” (Crenshaw, p 21). The need for such mourning cannot be overlooked. Crises such as the death of a loved one “must be worked through and resolved, or physical, psychological and social impairment may result from the bereavement with an intensity that is far beyond what should be expected” (Ramsay and Noorbergen, p 41).

Grief is actually “the work of undoing the bonds that built the relationship....This work, the psychological mourning process, may be seen as a reversing or undoing of the various processes that have gone into building
the relationship” (Raphael, p 44). Such a process requires time, work, and the
facing of much pain.

Colin Murray Parkes (1970), building on the work of John Bowlby,
suggests that grief unfolds in a four phase process. Healthy resolution of grief
takes place as persons resolve the issues contained within each phase.

Upon receiving the news of a loved one’s death, most people have an
emotional outburst—an outcry—of pain. The more sudden and unexpected
the death, the more extreme might be the response. Fighting the reality of
this news is a natural reaction. “There must be some kind of mistake. This is
a bad dream. This isn’t actually happening” (Raphael, p 34). This is a time
“during which the fact of loss is partially disregarded” (Parkes, 1970).

While some have called this period the stage of denial, Parkes refers to it
as the numbness phase. The initial outburst is followed by a reality which is
shrouded in a fog, a haze. Life seems surreal. It focuses on things that have
to be done to get ready for the funeral service. Survivors make it through
these first few days of grief because there are people around them and because
they have to focus on funeral preparations.

Bereaved persons are often still in this phase when the funeral service
takes place. Due to that, they may attend the service and not cry—not because
they are fighting back the tears, but because the experience does not yet seem
real. They may later have a hard time even remembering what happened
that day. The more sudden the death, the more acute this phase may be.

Before very long, the second phase of grief begins. Parkes refers to this
phase as the phase of yearning. This is a period of time “during which the
urge to recover the lost object predominates and searching takes place. In this phase it is the permanence rather than the fact of loss which is disregarded” (Parkes, 1970). This is the time when a survivor strongly protests against what has happened. Feelings during this period may be quite intense, and anger is prominent.

This is sometimes called the searching phase since it is a time when a survivor is emotionally preoccupied with the person who died. There may be a sense, a hope, or even an expectation that the person will return. This is generally more of an emotionally felt expectation than an intellectually believed one. This is understandable, since the most universal response to loss of any kind is to search for what was lost. Regardless of one's age, gender, or culture, if something is lost, one searches for it. A similar occurrence takes place in facing a loved one's death.

A husband may think he sees his deceased wife in a crowd, or hope it is her calling when the phone rings. A wife may think that her deceased husband may walk in the door at 5:30. They catch themselves with these thoughts and say, “What am I doing? Why am I thinking this way? I know he died. I know she’s not coming back.”

Survivors may feel like they are going crazy, or that the devil is playing with their minds. Thankfully, in the vast majority of situations, neither of these is true; they are simply moving through a natural phase of the grieving process.

Some time later, a third phase of the grieving process ensues. When yearning and searching fail to recover the person, an increasing emotional
realization of the permanence of the loss sets in. Even though survivors have known intellectually for some time that their loved one will not be coming back, it has taken much longer for that fact to become emotionally real. As it does, the third phase begins.

Parkes refers to this phase as the phase of disorganization and despair. This is a time when “both the permanence and the fact of loss are accepted and attempts to recover the lost object are given up” (Parkes, 1970). Since the numbness has worn off and the search is over, reality hits full force. As its name suggests, the force of this blow leads to a time when life is disorganized. While emotions during the searching phase tended to be the more volatile ones like anger, during this phase they tend to be the more lethargic ones like depression. Because of that, there is little energy to do the things the person would normally do. In fact, often the only things that get done are those that have to be done in order to survive. Other things simply go undone. Dishes pile up in the sink. Personal grooming suffers. The desk—at home and at work—is cluttered with unfinished work. The lawn is not mowed. Furthermore, a normally fastidious person may not care that these things are undone.

Other things, such as the family, can also be disorganized. The person who died filled certain key roles in the family. After he or she died, those roles were left unfilled. It may take the family an extended period of time to come to terms with the loss, and to reorganize itself.

Possibly the most crucial item that suffers disorganization at this point is a person’s belief system. What a person has always believed about God, life,
and the world has just received the greatest possible challenge in the face of the death of this loved one. Suddenly life no longer seems safe, secure, or understandable. Where was God? Why did He not prevent this? Doesn’t He care? The person may say, “I always believed He would protect my family and me from such things. What happened?”

As a result of such questions, a person’s belief system may suffer chaos and disorganization. Since the belief system is undergoing such an assault, it is easy to understand why the word despair is also used to describe this period. There may be a frightening feeling that there is no reason to go on, no reason to live. This phase is further complicated by the fact that it usually occurs long enough after the death that other people assume the bereaved should be “over it” by now, and are not available to offer support. This only increases the despair.

As time and mourning do their work, a fourth and final phase of the process begins. Parkes calls it the phase of reorganization. This is a slowly developing phase of beginning to turn toward the future. It is a time in which life slowly comes back into focus; in which a purpose for living is slowly reborn; in which a person may begin to make some kind of sense out of what occurred.

If a bereaved person fails to move through this process, the relationship with the deceased will not be fully and adequately relinquished. Thus the bereaved person will remain stuck in a past that can no longer be.
Christians and Grief

Do Christians grieve differently from others? Does faith in Christ and a belief in "the blessed hope" (Tit 2:13) of his return mean that a person of faith would not have to go through this kind of process? Particularly, does this faith mean that the raw edges of despair and sorrow will be cut away? Valid or not, such assumptions do exist.

Kathy Olsen, herself a Christian, writes of her experience of loss:

Whether intended or not, the message I kept hearing in my mind was that sorrow and strong faith are incompatible. God may be patient with my sorrow, but He is waiting for my faith to bring me back to joy and to Him. In the face of grief, "Rejoice always," "All things work together for good," "In everything give thanks," were verses that echoed through my mind to "exhort" me to abandon my sorrow, even in its early stages. "Affirm these truths in your mind," I heard the message say, "and sorrow will flee" (p 6).

What Olsen experienced has often been confirmed by the Christians I have seen in my own bereavement support groups. In addition to the trauma of the loss, there is the additional hardship of fearing God's rejection for feeling the resultant sorrow. As Olsen says, "I did not believe that the Lord would accept me fully until faith had driven my deep sorrow away" (Olsen, p 8).

In observing Christians in grief, I have been repeatedly impressed by how two sides of the same theme—"the blessed hope" (Tit 2:13) of eternal life in Christ—can help or hinder in the process of moving from pain to healing.

The first side is a wonderful strength. Believing that Christ provides the victory over death allows the Christian to approach the grave confidently, in hope, knowing that death is not a period but a comma. "Spiritual and
religious beliefs can be of great comfort to the person who is grieving," write Alicia Skinner Cook and Daniel Dworkin. “Spiritual and religious beliefs can help the mourner make some sense of the loss and provide the basis for meaningful rituals that assist in adapting to a new reality” (Cook and Dworkin, p 41).

The second side of this theme, however, is one that has often been used to deny the reality of pain when a loved one dies. “If I really believe in the resurrection, then to grieve over this death would be a denial of its reality.” It seems that a denial of the pain associated with death can result in a rather shallow hope which cannot support the person over the long haul.

This is seldom stated in such a simple and direct way. It often comes in a more subtle form. Comments intended to be helpful, but which in reality are hurtful, are one way this is done. These often contain a hidden message subtly telling bereaved persons to contain their sorrow. Olsen again writes: “During that long first year of sorrow and discouragement, my habit of suppressing emotions was still a strong coping mechanism for me. Some mistook my composure for deep faith and told me how strong I was. That was very flattering, but it merely reinforced a bad habit rather than encouraging faith” (Olsen, p 6, italics supplied).

Olsen’s experience is not unusual. Many Christian participants in our groups have not only been recipients of these kinds of comments, but have told the group: “I resent the statements—‘You’re doing so well. You have such a strong faith.’ I resent them because I’m not doing well, and I’m tired of crying alone. I would rather have someone to cry with.”
William Worden asserts that one of the complicating factors in expressing grief "happens when the loss is socially negated; in other words, when the person and those around him act as if the loss did not happen" (1991, p 69). While such comments do not necessarily fit into the category of acting "as if the loss did not happen," they nevertheless do negate the reality and intensity of the loss, and are therefore quite harmful.

Another subtle expression of this reality is when bereaved persons themselves hold such beliefs. A Christian family whose middle son had recently been killed attended the group. He had died in a tragic accident with his brother driving the car. While they appeared to be struggling with their loss, they did not weep or manifest other common mourning behaviors. Whenever their emotions brimmed near the surface their immediate comment was, "Oh, but it's OK. He's better off where he is now because of the resurrection."

While their focus on hope was valid, it did not appear to be as helpful to them as they might have wished. Furthermore, there was a marked incongruence between the profundity of their loss and the lightness of their affect. This was troublesome. Upon further probing it became evident that in their minds mourning was evidence of a lack of faith in God's provision and the resurrection.

It would be mistaken, however, to believe that all or even most Christians resist the need to grieve. In fact,

There are vast differences within Protestantism in regard to the rituals and theology of death. Even within the same denomination there may be a wide spectrum of beliefs and practices. Pluralism best expresses the Protestant orientation, though it is fair to say that some groups within Protestantism
would attest that their theology and rituals are the only authentic Protestant Christian witness. Some Protestant theologies and rituals have helped people to come to grips with the realities and meanings of death as it is experienced in the context of life and life after death; other Protestant traditions are death-denying and may focus so strongly on the “if you are really a Christian, then you will not be sad” approach that the celebration of the gift of eternal life to the deceased is used as a repressive tool to block the authentic grief which needs to be expressed (Grollman, p 82).

In addition to such pressure and beliefs, it must be recognized that the culture in which we live exerts a profound influence on the way we grieve. Much within American culture seems to reinforce the ideas which cause people in general, not just Christians, to resist the need to mourn.

Rando (1984) points out that there are three different ways in which cultures approach the issue of death. The first is a “death-accepting” approach. This is often the approach of primitive, nontechnological societies. Death is seen to be a natural and unavoidable part of the life cycle. “Dying and attendant behaviors are integrated into the everyday patterns of living” (p 5).

Secondly, there is what is called a “death-defying” approach. In this culture, there is a refusal to believe that death will ultimately win. Ancient Egypt, with pyramids and mummies which purported to contain all that would be needed in the afterlife, is an example of this approach.

Thirdly, there is the approach which is called “death-denying.” This one pretends that death does not exist.

The United States today is an example of a death-denying culture. There is widespread refusal to confront death. There are fewer rituals for recognizing it, replaced by contrivances for coping with it. The attitude is that death is antithetical to living and that it is not a natural part of human existence (p 5).
Richard Doss (1974) agrees that the United States fits into this category. "Death is not faced openly in our culture. The American attitude toward death is one of denial and repression" (pp xii, xiii).

James Montgomery Boice ("A Time to Weep"), argues that the Judeo-Christian tradition's approach falls into the death-defying category. Inherent in its belief system is the premise that Jesus Christ not only faced death, but overcame and conquered it. Therefore, though the reality of death is accepted, as in the first approach, there is nevertheless an attitude that defies death, and denies it ultimate power. While experience confirms the truth of Solomon's words, "the living know that they shall die" (Ecc 9:5), nevertheless death is viewed as the last enemy (cf 1 Cor 15:26), which has been conquered and will be ultimately vanquished. This verity is, in fact, what leads Doss (1974) to say, "Because of the Resurrection of Jesus Christ our attitude toward death is not one of acceptance or denial, but one of defiance" (p 88).

Along these lines, Branson (1975) takes issue with Elisabeth Kübler-Ross's very popular concept of death as being just another phase of life, (a strong pull in the direction of a "death accepting" approach). "It is one thing to discuss death as a mark of finitude," he says. "It is another to discuss death calmly, if not cheerfully, as a biological counterpart to birth" (p 467). Quite the contrary. For the Christian death is an enemy, albeit a conquered one.

Does an approach which defies death and hopes for its speedy banishment allow for grief when death occurs?
The Bible and Grief

Grief and belief are not mutually exclusive. Grief is an appropriate response to death, even for the believer. There is “a time to weep, and a time to laugh; a time to mourn, and a time to dance” (Ecc 3:4, NRSV). While the Christian gospel gives us great hope in the face of loss, it does not rescue us from the pain of loss. “Crying does not brand a griever as being weak and without faith,” writes William Miller. “Experiencing and expressing feelings of anger in grief may be very appropriate and does not necessarily make one a ‘bad’ person” (p 33).

The fact that God’s people mourned at the time of death can be noted in a variety of biblical passages and stories. Consider, for example, the actions of Abraham at the time of the death of Sarah, his wife. He “went to mourn for Sarah and to weep over her” (Gen 23:2, NIV), notes the biblical writer. Or ponder the actions of Joseph when his father Jacob died: “Joseph threw himself upon his father and wept over him and kissed him” (Gen 50:1, NIV). And what of the actions of the entire people of Israel at the death of Moses, their leader? “The Israelites grieved for Moses in the plains of Moab thirty days, until the time of weeping and mourning was over” (Dt 34:8, NIV). And our Lord himself, standing at the graveside of his friend Lazarus, and in the full knowledge of the resurrection set to occur, wept (See Jn 11:35).

Writing to the believers at Thessalonica, Paul urges them to consider the promise of the Lord’s return and the resurrection which will then take place: “But we do not want you to be uninformed, brothers and sisters, about those who have died, so that you may not grieve as others do who have no hope”
(1 Thess 4:13, NRSV, italics supplied). Notice that Paul does not use the hope of the coming of the Lord as a reason to avoid grief. Rather, he points out that a believer need not grieve as though there is no hope. In other words, Christian grief has a definite end. Its end is in the hope of the appearing of Christ.

It seems clear from this brief perusal of selected passages that people in Scripture sorrowed, mourned, and grieved at times of loss. Should less be expected of contemporary believers in their times of bereavement?

Might grieving Christians experience despair? The very meaning of the word despair implies that one has lost all hope. The weekend of Christ’s crucifixion and death was one of inexpressible agony and pain for His disciples. Their despair was great. “With the death of Christ the hopes of His disciples perished” (White, 1940, p 772). Such feelings of despair were aptly described by two disciples on their way to Emmaus at the end of that weekend: “But we had hoped that he was the one to redeem Israel” (Lk 24:21, NRSV, italics supplied). The past tense of the verse implies that their hope was a thing of the past, leaving them in despair. Their words likely describe the feelings of all of Christ’s followers at that time. “All our hopes were focused on Him. Now that he has died, we are in despair.”

Peter, who had greater reason to feel despair than any other follower of Christ, later wrote: “Blessed be the God and Father of our Lord Jesus Christ! By his great mercy he has given us a new birth into a living hope through the resurrection of Jesus Christ from the dead” (1 Pet 1:3, NRSV). Clearly, the end of his grief was founded upon the reality of Christ’s resurrection and the
wonderful hope it provides for believers. However, it required the mercy of
God to move him from despair to hope. The reality of Christ’s resurrection
made hope possible against the backdrop of profound disillusionment and
despair.

Those who have experienced despair—the absence of confidence in the
future—at its most bitter can often be those for whom hope—faith in the
future—can be the most sweet. In fact, hope need not be a denial of despair;
rather, it can be the answer to despair. It thus becomes possible to support
grieving persons through the profundity of pain with a view toward
ultimately securing them in hope.

This takes the Christian beyond the psychological perspective of death as
simply “another stage of life” which must be accepted, to recognizing death as
“the last enemy” which will ultimately be destroyed (cf 1 Cor 15:26). It is in
Christ’s ultimate overthrow of this enemy that we can find hope, and it is in
the One who has conquered this enemy that our faith in the future—our
hope—rests.

Educational Implications

What, then, are the educational implications for Christian health care
professionals? George Dickinson writes:

Although death and dying have by now become topics of
intellectual concern, we have undertaken little formal effort to
socialize individuals to deal with death on the personal and
emotional levels....

With society providing limited informal education on death
and dying, and with more than 70% of deaths in the United
States occurring in hospitals and nursing homes, those who
choose to enter the professions of medicine and nursing need
some formal instruction on how to deal with their own feelings
about death and dying and how to relate to dying patients (George E. Dickinson, in DeBellis, p 15).

The necessity for education is clear, though the reality of such education has been limited. Curriculums which include education not only in the care of the dying, but also in the care of the bereaved need further development. One such interdisciplinary curriculum is described by Penney. This curriculum includes coursework taught by a variety of medical specialties, even including one component offered by law professors (see June C. Penney in DeBellis, p 54). However, none of these courses has a religious or spiritual base, which should be of concern to persons of faith.

It is of particular concern to Christians that curriculums which address issues of death, dying and bereavement include the unique perspectives the Christian gospel offers. Such perspectives can, at times, be markedly different from non-Christian approaches. Educational approaches which are not informed by Christian faith tend to make death an inevitable friend, whose visit might be welcomed and spoken of as tenderly as one would of any other cherished—though at times inconvenient—friend. Christian faith, on the other hand, teaches that while health care providers who work with the dying and bereaved must be fully cognizant of their own mortality, they must at the same time recognize death for the foe it is. Only in this way can they offer the full hope that resurrection and new life in Christ brings. After all, if death is nothing more than an inconvenient though inevitable friend, why would the news of the resurrection be good news at all?

One place where such curriculum is needed is in the education of physicians. Those developing curriculum on the subject of death for medical
school education should bear in mind five major objectives, according to Alice Kitchen (in DeBellis, pp 5, 6). The first objective is to facilitate students' dealing with their own feelings regarding death. Providing students with information about the common responses of patients, family members, and caregivers to life-threatening illness, the effects of treatment, and of death, is the second objective.

Third, enabling students to think through and practice the physician's role in the care of the dying and bereaved is important. This objective brings them into contact with issues such as truth-telling, the shift from curative goals to providing comfort, ethical and legal aspects of terminal care, explaining and obtaining permission for autopsies, filling out of death certificates, and giving knowledgeable immediate and long-term care to the bereaved.

The fourth objective deals with the physician's role as a team member in caring for the dying. Recognizing that such care is provided by a team is important for future physicians to understand.

Finally, information regarding self-help groups for life-threatened patients and/or their families, as well as support groups for the bereaved, is vital for students. This exposes them to the many resources which can facilitate the process of caring for the dying and bereaved.

Continuing research, conversation, and development is needed in this most important area, especially from the uniquely Christian perspective.
Summary

Death is a reality all must face. Society as a whole, and Christians in particular, will at different times and in diverse ways exert subtle or even explicit pressure on the bereaved to avoid the grief which naturally follows. Yet grief is necessary for mental well-being.

The Christian hope of the resurrection provides an ending point for grief, as it focuses the believer on the One who has the keys of death and the grave (cf Rev 1:18). Even so, it also recognizes that grief and despair will come.

Christian health care workers need to understand the components of the grieving process and be equipped to address the concerns of dying patients and the bereaved. Additionally, while allowing for the pain of loss, they must also be prepared to offer the hope of eternal life which Christ brings to us.

Thanks be to him who rescues us from the power of the grave.

Bibliography


