

Anticipatory Grief

Sooner or later, we will all have to accept the death of a loved one. The diagnosis of terminal illness touches all family members and acts as a catalyst for anticipatory grief. The ability to anticipate the death of a loved one allows time to ponder its circumstances and to prepare emotionally for the inevitable. When our loved one dies, we are, to some extent, prepared for it.

In contrast to what is normally understood by the term "anticipatory", which suggests that it is a future loss that is being grieved, anticipatory is also directed towards the past and the present. Losses in the past and those that are happening now, as well as those that are yet to come stimulate the grief that is experienced by both the dying person and the family members.

In the present, the person mourns what is currently slipping away with an awareness of how life is being changed moment by moment: the ongoing losses of progressive physical decline, increasing dependence, continual uncertainty, etc. All that has been taken away by the illness are considered to be secondary losses and must be mourned: identity, security, activities shared, relationships, life-style, and family life.

We also grieve for what will be lost in the future. Hopes, dreams, and expectations for a shared future with the dying person must be given up. Family gatherings, birthdays, anniversaries in the future will no longer be the same.

A major component of anticipatory grief is mourning the absence of the loved one in the future. Although the absence cannot be completely realized until the death has occurred, it is possible to see glimpses of what that will be like through extrapolation of experiences in the present. There are precursors of the ultimate loss that are drawing closer. However, despite how well people may think they have prepared themselves for the impending death of a loved one there is still so much that cannot be anticipated. A rehearsal does not come close to the actual event.

One of the goals of anticipatory grief work is to help family members remain close as they prepare to separate. It mandates a delicate balance between "holding on" and "letting go" while drawing closer to the dying loved one. Grieving someone's loss in the future does not imply that one is starting to separate from a loved one in the present. Or that the dying person is being abandoned. Some researchers have voiced concern that too long a period of anticipatory grief will predispose the mourner to prematurely detach from the dying person. While there is a danger of this happening, it is not a necessary consequence of anticipatory grief.

Anticipation of a loss may intensify the attachment. In fact, a stronger attachment may preclude the mourning that can help the family prepare for death. If premature detachment from the dying person occurs, anticipatory grief has gone wrong since the interaction with the dying, still living, person is not being realized.

Support groups for terminally ill patients and their family members can help families remain connected on their terminal journey. Participants say that they value the opportunity to share their feelings and concerns with other individuals in similar situation. Seeing how other families cope gives them hope. Communicating with others in the group about their emotional and

spiritual pain also makes it easier for family members to talk with one another outside the group. However, open discussion of death should not be forced on the patient and family members against their wishes or emotional needs at the time.

Although we may be able to acknowledge the fact that a loved one is dying when we first are informed of it, it normally takes us longer to internalize its reality. The death of a loved one is something that we can only accept a little at a time, not because we are in denial, but because we cannot conceive of life without our loved one. It is not that we are able to grasp the reality of our loved one's dying and then on some other level deny it. Rather, we simply are unable to grasp it on an emotional level. However, while denial may play a part in accepting the loss, disbelief can be equally as strong.

In my experience as a grief counsellor, I have seen how family members can work together toward an acceptance of the approaching death of a loved one. Despite the sadness, in this way seem to arrive at a place of acceptance and calm which persists to the end. When the death occurs it is then seen as the next natural step in a process of psychosocial and spiritual transformation, which all are prepared for. After the death has occurred, the survivors look back on this time with a satisfaction that contrasts with the dissatisfaction expressed by those who remained detached and withdrawn from their loved one's dying process. One woman who journeyed with her sister said: "I have been deeply blessed by Mary's illness. Her death was a loss and a gift. It seems unfair that she would lose her life and I would gain from it."

Encouraging families to perform the rites and rituals of their religious tradition is a way of facilitating closure for the dying person and for providing memories for those who will be left behind. For one family, rituals were lights of passage. They were used to gracefully navigate through the transitions. After his mother's death, one man stated: "rituals helped us and Mom to get 'here' to 'there'. In the rituals, we recognized the power of the invisible forces that brought healing, connection and transcendence. Rituals brought us comfort and provided a connection with the life to come. Rituals were our conduits to God. Being drawn together into the presence of God then enabled all of us to say our good-byes. Our presence was recognition of Mom's leaving. There is no other way that my mother would have wanted to go – her children around her bed praying and a priest in our midst."

The affection and harmony within a family and its proximity near death seems, in my view, to be related to the individuals' ability to accept death. The closer the family members and the greater the expressions of love, the easier the separation at the time of death will be. It has been shown that if one has been involved in the dying process of a loved one and has been present in the last hours, that one is more able to adjust to bereavement and more readily accepts one's own mortality.

How we cope with death has to do not only with our current situation but also with our past. How we, as a family, responded to death in the past has an enormous effect on what happens to us as we live with dying and how we go on to grieve the loss of a loved one. Whether we have experienced death directly or not we all have death experience from which to draw. Beliefs, rituals, and responses to death have been observed in our family over time. Although this is mostly unarticulated, this affects how we respond to the death of a loved one. We need to remember that faith plays an extremely important role in grief and interfering with these practices may complicate or interfere with a person's grief.

It seems contradictory to conclude by saying that there is no right way to grieve. Far more is gained from embracing the mystery of death than attempting to regulate the process, or one's response to it. Ultimately, grief is an intimate and personal journey. We all grieve in our own way in our own time.

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