

Free healthy grief: an insight into the process of grieving research paper sample...

[Literature](#), [Russian Literature](#)



Other Details

Introduction

Grief is the response of an individual to the loss of something or someone with whom the individual has a bond. (Smith, 2012). Every individual has a different reaction to grief. Grief therefore may be considered a personal phenomenon. However, the loss may not always be personal. Grief may be experienced for a loss of opportunity at work or loss of a friendship. One may therefore state that there are different types of grief. The process of grieving however may remain the same irrespective of the type of loss. Kübler-Ross describes grief in five stages. This is the most commonly accepted model of grief. (Maclejewski, 2007). In this paper, we examine the phenomenon of grief in the health care industry. We discuss the Kübler-Ross model of grief and compare it with different forms of grief. Five different studies have been identified for the purpose of comparison.

Kübler-Ross model of grief

The Kübler-Ross model of grief describes the five stages of dealing with grief. According to this model, the five stages of grief are denial, anger, bargaining, depression, and acceptance. The theory contends that the five stages help people deal with the loss and adapt to life without the person or thing that they lost. Kübler-Ross contends that the five stages are not clearly demarcated and not everyone will experience all the stages. Practitioners use the theory as a framework with which to monitor the grief on patients. The theory was empirically proven by research conducted by Maclejewski, (2007).

Literature Review

Brosche, Theresa; A Grief Team Within a Healthcare System; Source: Dimensions of Critical Care Nursing.

This paper deals with the grief experienced by health care providers when a patient dies. Brosche contends the nature of work of the nursing staff allows no time to experience the grieving process. As a result the nursing staff experience high levels of stress, and anxiety resulting in early burnout and shorter working lives. She describes the forming of a grief team in a hospital to help nursing staff cope with the grief experienced due to the loss of a patient. Brosche discusses the compassion fatigue or exhaustion experienced by the nursing staff and its impact on the working and personal life of nursing staff. She also discusses the concept of moral distress – the stress, apathy, anxiety, and resulting burnout because of repeated loss.

Shorter Melanie Critical care nurses' experiences of grief in an adult intensive care unit.

This is a study of the experience of grief by critical care nursing staff upon the loss of a patient. These nurses experience loss more frequently as compared to other nursing staff. They are therefore exposed to greater emotional trauma. After interviewing eight nurses Shorter found that the nurses grieved for the patients they lost. However if the death is an expected outcome, the grieving was less as compared to when the patient hoped to live. The nurses were involved not only with the patients but also with the relatives. No formal support was sought for the grieving. The nurses practiced disassociation and normalized the deaths. Shorter concludes that

frequent exposure to death causes occupational stress and early burnout.

Disassociation affects the quality of care.

Waldrop, Deborah; Caregiver Grief in Terminal Illness and Bereavement: A Mixed-Methods Study.

This study examines the experiences of grief among nursing staff caring for terminally ill patients. Waldrop studies the grief in two stages – while providing care to a dying patient and after the death of the patient. He found that the grief was heightened at the time of providing care. After death, the grief became a sustained reaction to stress. The nurses experienced anxiety and depression while providing care. They displayed hostility and lack of concentration as a reaction to the stress. These symptoms decreased after the death of the patient but sorrow and crying increased. The caregivers also experienced disturbance in sleep during the care stage. Waldrop suggests that social workers can help these nurses cope with grief.

Creating a Curtain of Protection: Nurses' Experiences of Grief Following Patient Death Gerow, Lisa, Conejo, Patricia, Alonzo, Amanda, Davis Nancy, Rodgers Susan, and Williams Elaine

In this paper, Gerow et. al., describe the experiences of eleven registered nurses with respect to patient death. The authors identified four phenomena – which personal relations with patients overshadowed professional relations, that the first few experiences of patient death were a learning experience, that coping mechanisms involved religious beliefs and rituals, and that nurses learn to compartmentalize their experiences in an effort to remain professional. Gerow et. al. concluded that nurses build an emotional wall or curtain to protect them from grief. A better understanding

of the experiences and coping mechanisms will help in creating supportive environments for practice.

Discussion

Different people cope with grief in different ways. So also different researchers explain grief in different ways. Kubler-Ross's theory describes five stages of grieving while Siverberg (2007) proposes the 3-A Caregiver grief intervention model as a method of coping with grief. One may therefore say that there is no accepted definition of grief nor is there a uniform "treatment" or method of coping with grief. The story of Job is the first story of grief. Job is depicted as a family man who encounters disasters that deprive him of his near and dear ones. An examination of Job's grief process – sitting in silence for seven days and nights – exhibit classic symptoms of depression. When he finally speaks he asks God "Why is light given to one who cannot see the way, whom God has fenced in?" M. Christopher Boyer (2009) states that Job is feeling "fenced in by adversity." Job experienced anger at himself, depression, and finally acceptance. (Boyer, 2009). When Imam Hussain died in the battle of Karbala, he entrusted his sister with the responsibility of spreading his message among the masses. This was a big responsibility and Lady Zainab was left with little time to grieve over the death of her brother. She did not therefore go through Kubler-Ross's stages of grief. She simply threw herself into the work entrusted to her by her brother. (Rizvi-Bokhari, 2010). Kubler-Ross has stated in her book *Death and Dying* that not all people go through all five stages of grief. One may

therefore conclude that grief is personal and coping mechanisms vary from individual to individual.

Reflection

Conclusion

References

Melinda Smith, J. S. (2012, January). Coping with Grief and Loss. Retrieved March 15, 2012, from helpguide. org: http://helpguide.org/mental/grief_loss.htm

Maclejewski, P. K.; Zhang, B.; Block, S. D.; Prigerson, H. G. (2007). " An Empirical Examination of the Stage Theory of Grief". JAMA: the Journal of the American Medical Association 297 (7): 716–23. doi: 10. 1001/jama. 297. 7. 716. PMID 17312291.

Brosche, Theresa; A Grief Team Within a Healthcare System; Source: Dimensions of Critical Care Nursing. Jan/Feb2007, Vol. 26 Issue 1, p21-28. 8p.

Shorter M; Stayt LC; Melanie Shorter MNursSci RN Staff Nurse St. George's Healthcare NHS Trust, London, UK; Journal of Advanced Nursing (J ADV NURS), 2010 Jan; 66 (1): 159-67. Critical care nurses' experiences of grief in an adult intensive care unit.

Waldrop, Deborah; Health & Social Work. Aug2007, Vol. 32 Issue 3, p197-206. 10p.; Caregiver Grief in Terminal Illness and Bereavement: A Mixed-Methods Study.

Creating a Curtain of Protection: Nurses' Experiences of Grief Following Patient Death Gerow, Lisa, RN, MSN; Conejo, Patricia, RN, PhD; Alonzo,

<https://assignbuster.com/free-healthy-grief-an-insight-into-the-process-of-grieving-research-paper-sample/>

Amanda, RN, PhD; Davis, Nancy, RN, MSN; Rodg Journal of Nursing Scholarship; Second Quarter 2010; 42, 2; ProQuest Central pg. 122

Silverberg E Affiliation: Clinical Social Worker, Alzheimer Society of York Region, Central Ontario The 3-A Caregiver Grief Intervention Model Canadian Nursing Home (CAN NURS HOME), 2007 Sep-Oct; 18 (3): 20-2. (4 ref)

M. Christopher Boyer 10/18/2009 Job's Grief: Bargaining & Despair
http://www.google.co.in/url?sa=t&rct=j&q=&esrc=s&source=web&cd=9&ved=0CFcQFjAI&url=http%3A%2F%2Fwww.gsbchurch.com%2FSermons%2F2009_10_18_JobsGriefBargainingDespair.pdf&ei=S0IfVNnsOJKluATBn4HICA&usg=AFQjCNGqhxMKsYw_ZnoLaZtOZtR3gjNd0Q&sig2=vwg0292co8oORqCaUO42Yw&bvm=bv.79189006,d.c2E&cad=rja

The Women of Karbala: Keeping Imam Hussain's Message Alive Tuesday, 05 January 2010 20: 25 Aliyyah Rizvi-Bokhari Retrieved From <http://www.islamicinsights.com/religion/history/the-women-of-karbala-keeping-imam-hussain-s-message-alive.html>