

Psychology of death ,dying &bereavement

Definitions

Death is **the absolute** cessation of vital functions.

Dying is **the process** of losing vital functions.

Minideaths include the end of growth & its potential, health compromising illness, multiple losses, decreasing vitality, growing dependency with aging & finally dying.

Psychogenic death in which **emotional factors** alone may suffice to trigger sudden death in certain persons not otherwise at risk.

Voodoo death occurs when person believed to have the **psychic power** to cause death puts **a curse** on some one who believes in that persons power.

Stages of dying and death

Elisabeth Kubler-Ross a Psychiatrist & Thanatologist stated that process of dying involve **5 stages** that usually occur in the following order.

1-Shock & denial

They may appear dazed at 1st & then may **refuse to believe** the diagnosis & refuse to believe that he or she is dying e.g. laboratory made an error. The degree to which denial is **adaptive** or **maladaptive** depend on whether a patient continues to obtain treatment even while denying the prognosis.

2-Anger

Person become frustrated, irritable & angry at being ill & they commonly **ask why me?**. The patient anger may directed toward physician & hospital staff (it is your fault that I am dying). physician must learn not to take such comment personally.

3- Bargaining

The patient may try to **strike a bargain with god or some higher being** (I will give half of my money to charity if I can get rid of this disease). They may negotiate with physicians & friends in return for cure.

4- Depression

The patient becomes **preoccupied with death** & may become **emotionally detached** (he feels distant from others) & so hopeless. Patient shows **signs of depression** that include psychomotor retardation, sleep disturbances & possibly suicidal ideation. It may be a reaction to the effects on their lives like **loss of job, isolation** or economic or it may be in **anticipation** of the loss of life that will eventually occur.

5- Acceptance

Patient realize that death is inevitable & they accept the universality of the experience (I am ready to go now). Their feelings may range from a neutral to euphoric mood.

Grief (Bereavement)

Grief (Bereavement) is the **subjective feeling** precipitated by the death of a loved one.

Mourning is **the process** by which grief is resolved.

Grief work is a complex psychological process of withdrawing attachment & working through the pain of bereavement.

Anticipatory grief is expressed in advance of a loss perceived as inevitable ends with the occurrence of the anticipated loss.

Normal grief is characterized initially by **shock & denial**. The bereaved may experience an **illusion** that the deceased person is physically present, **minor weight loss**, **minor sleep disturbances**, **guilt**, express **sadness** & **attempt to return to work** & social activities.

It generally subside within **2 months** but may stay as long as **1-2 years** although some features may continue longer & symptoms may return on holidays or special occasions such as **anniversary reaction**.

Bowlby hypothesized **4 stages** of bereavement

1-**Stage 1** (moments-days)

is a stage of **despair** characterized by numbness , protest , denial , anger & distress.

2-**Stage 2** (months-years)

A phase of intense **yearning** & **searching** for the person who has died characterized by restlessness & preoccupation with the deceased

3-**Stage 3**

is a stage of **disorganization** & **despair** characterized by withdrawal , apathy , insomnia , weight loss & feeling that life has lost its meaning.

4-**Stage 4**

A phase of **reorganization** during which grief begins to recede & grieving persons begin to feel like returning to life. The deceased person is now remembered with a sense of joy as well as sadness.