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It's Complicated: Death, Grief, and COVID-19

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It's Complicated: Death, Grief, and COVID-19

Abstract

"Grief does not follow a straight line, doesn't always make sense, and doesn't usually follow a prescribed set of steps."

Posting about the experience of grief and loss from *In All Things* - an online journal for critical reflection on faith, culture, art, and every ordinary-yet-graced square inch of God's creation.

<https://inallthings.org/its-complicated-death-grief-and-covid-19/>

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It's Complicated: Death, Grief, and COVID-19

Erin Olson

Billy Joel once sang that “only the good die young.” The lyrics don’t seem to be so much about comforting the living with reassurances about their loved one’s moral goodness, but more about encouraging us to be “bad” in attempt to live longer. The message seems to be a 70’s version of today’s “YOLO” (You Only Live Once). We live as if we will never die. Perhaps we can spin these lyrics and other platitudes whichever way we would like, but no matter how you do—coming to terms with our own death or the death of a loved one can be one of the hardest human experiences. A person’s absence in your life is usually keenly felt, and even if you had a strained relationship, the permanent loss of that person can bring up thoughts of “what if” and “if only” as we contemplate lost opportunities to reconcile.

I think almost all of us have felt grief during the current pandemic, even if we haven’t experienced the death of someone close to us. At first, it was likely the loss of our normal way of life. While we sheltered-in-place, we likely grieved the loss of our normal routines, connections, and relationships. Young people grieved some of the rites of passage they had been anticipating. They grieved the missed prom or the canceled graduation ceremony. At any given time, we are all likely to be grieving something. A changed or lost relationship; missed expectations; a change in plans; a death. You can think you are “over” something, and then out of the blue, the feelings of sadness and loss can come back, and the grief feels as fresh as if it just happened. Memories of my own losses occasionally return and still bring me to tears from time to time. Do I grieve these losses every day? Not typically. Anniversaries, songs, and photos can bring me back to those places, but typically just as quickly as they come, they now fade. Is continued grieving unhealthy? Is it pathological? Not always—but how is one to know when grief has become problematic enough to warrant intervention?

Since the beginning of the COVID-19 pandemic, we have collectively lost over 500,000 Americans to the coronavirus. With social distancing and isolation practices in place, many of these people died alone in hospitals, nursing homes, or at home, trying to spare their loved ones the likelihood of being exposed themselves. For some, this isolation was not their own preference but healthcare institutional policy put in place to stop the spread. For months, nursing homes and hospitals were closed to visitors as the number of active cases of COVID-19 both within and outside the facilities continued to grow, and administrators tried to protect their residents and patients in response. This left many to die alone without the comfort of their loved ones surrounding them. This also meant that their loved ones did not have the opportunity to say goodbye in the traditional ways expected.

COVID-19 has inherently made grief more complicated. Many public mourning rituals have been postponed or canceled altogether—or if a funeral or memorial service was permitted, the number of people in attendance were significantly limited. We all know funerals and memorials are for the living, so what does it mean to the survivor when they are unable to attend those rituals? Many people are dying alone for fear of increased exposure to the healthy. The survivors are not only unable to hold normal public grieving rituals, but also miss out on the opportunity to sit with the dying person in their final days and hours. For the sick and sometimes dying, this means long periods of disconnection and loneliness as they try to recover and recuperate. Death is always a unique experience.

I think all grief can be complicated. Grief does not follow a straight line, doesn't always make sense, and doesn't usually follow a prescribed set of steps. Elisabeth Kubler-Ross, famous for her research on grief, developed the "stages of grief" theory that includes denial, anger, depression/despair, bargaining, and acceptance. Kubler-Ross's theory has been misused to try to establish a healthy pathway through grief, yet most people describe their grief experience as being anything but sequential and logical. Someone might experience these stages at some point or another, or they may not. If they do, they likely won't experience them sequentially, and might even find themselves wavering back and forth between them or spending more time in some stages than others. In this way, all grief is unique, complex, and complicated.

From a diagnostic perspective, complicated grief is characterized by a variety of symptoms including "intense sorrow, pain, and rumination over the loss; focus on little else but the loss; extreme focus on reminders of the loved one or excessive avoidance; intense and persistent longing or pining for the deceased; problems accepting the death; numbness or detachment; bitterness," and the list goes on. Complicated grief is also called "Persistent Complex Bereavement Disorder" in the most recent iteration of the Diagnostic and Statistical Manual (DSM-5). With the loss of the public grieving rituals

for many, and the likely inability to spend final days and hours with a dying loved one, it makes sense that COVID-19 deaths led to an increase in complicated grief symptoms.

Grief and grieving rituals are very culturally specific. The way a culture views death, dying, and grief has a significant impact on how people of that culture are impacted by loss. In the past 40 to 50 years, our culture has shifted our perspective on death. Up until the 1940's and 50's, most people died at home, and people were not sheltered from its reality; it is hard to protect a child from death when there is a dying or dead person in the living room (or the parlor, as it used to be called). Today, we have institutionalized the dying, and most people today die in a hospital, nursing home, or hospice house rather than at home. In his book *The End of the Christian Life: How Embracing Our Mortality Frees us to Truly Live*, J. Todd Billings argues that Christians often live as if death is not the ultimate reality. While we know that death will not have the final say and we have the promise of eternal life, this doesn't mean we can or should live as if death is not a reality in this current life. Billings argues that we have marginalized death and try to hide ourselves from it. Most young people today have never even seen a dead body or been to a funeral, and therefore they are inherently uncomfortable with death and grieving rituals in general.

Our culture's marginalization of death means we are often unsure what to do with the grieving. We have all known someone who has died, but after the grieving rituals have ended, we expect those closest to the loss to almost immediately "get over it." We will grieve with them for a while, but then it is time to move on. Billings himself has a diagnosis of an incurable cancer which brought him close to death himself, but his diagnosis also introduced him to many other people who also toed the line between life and death. His observation is that many people live as if the person who gets the most breath or the highest number of heartbeats wins. It seems as though our denial of the reality of death has made us incapable, in many instances, of providing empathy and understanding to the grieving. Grief is not logical, and yet grievers are often expected to be logical in their navigation of loss. Our symptomology also seems somewhat reflective of our cultural avoidance—expecting someone else to "recover" quickly from their grief means that all of us must be able to do the same. It is easier to make assumptions about someone else's grief journey, but when it is our own, we often find that those assumptions cannot and should not fit.

To help the grieving, it is essential that we become comfortable with our own mortality and help shift the cultural narrative around death and dying. Living as if we will never die and sheltering our young from the experience of death only perpetuates the struggle. Normalizing the discomfort of sitting with the grieving and being okay with struggling to find the "right" words to say can help us all recognize the value of letting someone else find their way through grief and loss. One of my favorite authors,

speakers, and social media influencers recently said this in talking about her own grief journey: “grief requires our attention, and we should give it with great care.” Can we allow ourselves and others this care and attention, both now, when death is all around us, and in the future, when (hopefully) the pandemic is a distant memory? Now seems like an opportune time to work toward shifting the cultural narrative around death and dying, to normalize the experience of grief and loss, and to work toward a community of care where Christians can walk alongside the grieving with empathy and understanding.