



# GriefConnections

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## **Anger in Grief** by William Hoy

Elizabeth Kubler-Ross likely broke entirely new ground in her 1969 book, *On Death and Dying* by suggesting that *anger* was the second stage of the dying process. Following on the heels of *denial* in her schema, Kubler-Ross suggested that virtually all people, after an initial protest of, "This can't be real," go on to conclude, "Why should this be me (or my loved one?)"

Of course, decades of clinical research and experience has dismissed Kubler-Ross' simplistic five-stage process as a reliable picture of what the dying, much less the grieving, experience. But without question, her assertion that most people experience anger could hardly be debated. Anyone who has cared for a hospice patient or very many people in bereavement knows the widespread nature of this often-misunderstood emotion.

Anger may be directed (or misdirected) at a variety of objects and persons. Some people direct their anger at the illness or accident that is claiming or has claimed their loved one's life. In the case of a car crash or industrial accident, survivors legitimately blame people who are legally, or at least morally, culpable because of a failure to prevent the incident. And of course just because survivors blame a party does not mean the blamed individual could possibly have prevented the outcome; just because physicians are powerless to stop the spread of a disease does not mean they are not blamed for the failure.

Anger is often directed at God. Even people of devout faith are prone to wonder where God is and why He seems to remain so silent. Many people live with a fantasy of how "the divine" works in the world, seeing God as almost a "Magic Genie" on call to do one's bidding. When God doesn't respond as expected, the patient or family member is left feeling let down and abandoned. However the "spiritual battering" some people receive from well-meaning friends and even religious leaders does nothing to dispel the anger.

Sometimes, it is the person who most wants to help who becomes the object of anger. A bereaved individual or seriously ill person might be in great physical and/or emotional pain and in his outburst, simply explodes on whoever is close by. Hospice nurses and family caregivers are the ones most often caught in the shrapnel of such an explosion.

Regardless of the person or force to which the anger is directed, anger lies somewhere on a continuum between two poles I call *circumstantial* and *dispositional*. *Circumstantial* anger comes about purely because of the nature of the event; in its purest form, the expression of circumstantial anger is most "out of character" for the person feeling this emotion. People close to the individual experiencing circumstantial anger might even say to themselves, "Where is this coming from?" because the reaction seems so unusual. One patient's wife expressed her surprise this way: "He is always so calm and cool; this outburst really scares me."

*Dispositional* anger is most often referred to in psychological research literature as "trait anger." The classic Type-A personality who frequently demands his way and lashes out at everyone who blocks his goal is clearly "dispositionally angry." Unlike the person who is angry about the present circumstances, this individual seems to go through life as an angry person; it is a clear marking on his or her personality.

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### **Anger in Grief con't**

In caring for a dying or bereaved individual, we rarely have the luxury of unpacking all the factors that might have led to the development of this personality trait. Certainly early developmental experiences had a role since frequently a pattern dates back into adolescence or childhood. Others seem to have developed the trait of anger later in adulthood, perhaps even as a response to several disappointing circumstances piled one on the other.

In psychotherapy, the root causes are important; in crisis intervention or short-term caregiving, our best hope is likely to protect ourselves and to intervene as effectively as possible. Here are some important guidelines.

First, make sure safety is guaranteed. No healthcare provider, school counselor, or family member should be repeatedly subjected to verbal abuse because this can lead to physical abuse. And though it goes without saying, never try to intervene with a patient or client who is physically aggressive. If there are people who need to be protected, work with local law enforcement agencies to assure the safety of minors, the elderly, and others who need advocacy.

Second, listen fully to what is being said. People *get* angry for many different reasons. Unless there is deep-seated clinical pathology, however, they most often *stay* angry because they feel they are not heard. Increased volume, swear words, and abusive tone might be how they have learned to get attention for their message. When the angry person "takes a breath," try saying something like, "John. I know this really angers you; let me see if I'm hearing what you are saying. . ." and then paraphrase what you think you've heard. At the end of your brief re-statement, ask, "Did I get it right?" If you respond with quiet, slower and more deliberate speech, you may find the angry person's pitch drops to match yours. Perhaps even the bulging veins on the neck return to normal size, too!

Third, remember that anger that is addressed *toward* you is not necessarily *about* you. Caregivers get caught in the explosions from angry patients and clients. Remembering that the anger is likely a response to something beyond your control helps you respond calmly. Nevertheless, remember that "taking verbal abuse" is not in your job description. You can calmly inform the patient or client that you will discuss the matter when he or she chooses to quit screaming.

Fourth, remember where the patient or client is and has been. The healthcare system delivery and payment systems can often be a maze to the patient and his or her family, making it difficult to make reasonable sense of the process. The old expression to not judge until you have walked a mile in the other fellow's shoes serves us well here.

Fifth, keep in mind that your goal is resolution of the client's problem (or perceived problem) rather than the proving of your point. Many conflicts are diffused when the caregiver, acting as the "bigger person," chooses to lay aside his need to "be right." You don't have to agree on every point in order to resolve the conflict in a way both parties can be satisfied.

**The Author:** William G. (Bill) Hoy is an educator and counselor specializing in death, bereavement, and end-of-life issues. In addition to walking through significant losses of his own, Dr. Hoy has counseled grieving individuals and families for more than 25 years. He is the author of *Guiding People through Grief* and *Road to Emmaus: Pastoral Care with the Dying and Bereaved*. His newest book, *Called to Care: Navigating a Life of Care for Others* will be published this summer. He teaches in the graduate program in bereavement and leadership at Marian University and oversees the counseling program at Pathways Volunteer Hospice.

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### **Out of the Darkness Suicide Prevention Walk**

Sandi Follette of The Grief Center of the Southern Tier is organizing a Suicide Prevention Walk called "Out of the Darkness". The walk is sponsored by the American Foundation for Suicide Prevention. The date of the walk is September 11th at 9 am at Craig Park in Painted Post. For more information or to volunteer to help with the walk contact Sandi at 607-936-9077 or email her at [griefcenter@gmail.com](mailto:griefcenter@gmail.com). To sign up for the walk go to [www.outofthedarkness.org](http://www.outofthedarkness.org).

### ***Good Grief Day***

Southern Tier Hospice and Palliative Care is offering its 8th Annual "Good Grief" Day event for children ages 6 to 12. This program is open to any child in the community who have been touched by the death of someone who has been important to them. The "Good Grief" day will be held on Saturday July 17, 2010 from 8 a.m. until 2 p.m. on the grounds of Southern Tier Hospice at 11751 East Corning Road, Corning, NY. This event is not a therapy group, but a time for healing and fun. It is not necessary for the child's family member to have been involved in Hospice at all. If the death was significant to the child, and the family is interested, this event is appropriate for the child.



The purpose of this day is to give children an opportunity to share their grief experience, or just listen to others who have also experienced the death of someone important to them. There will be an opportunity to join in a healing ceremony and just have fun! There will be plenty of activities including face painting, visits from the East Corning Fire Department, music by Mary Lu Walker and games, arts and crafts, therapy dogs, horses and more!

Parents should expect to bring their child and leave them, returning near the end of the event for an optional parent meeting and time to make your own sundae. There will be information available regarding children's bereavement as well as general bereavement issues.

If you know of a child that may be interested in attending this program, please give the information to their family and/or call Margie Rodgers at Southern Tier Hospice for more information or to make a referral. (607) 962-3100 ext. 132.

Children must be registered by Monday, July 12th in order to attend.

Registration forms and fliers can be found on the Southern Tier Hospice website at [www.sthospice.org](http://www.sthospice.org).

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### ***Inservice Programs for Your Organization***

Did you know that we can provide an inservice speaker for your organization? Whether you are looking for a group presentation on some aspect of grief counseling or a program on today's funeral options, we have an excellent group of speakers ready to respond. To talk about options for a workshop in your organization, please call Phillips Funeral Home at 607-936-9212 or email [info@phillipsfuneralhome.com](mailto:info@phillipsfuneralhome.com).

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### ***Memorial Quote***

**If you live to be a hundred, I want to live a hundred minus one day,  
so I never have to live without you.**

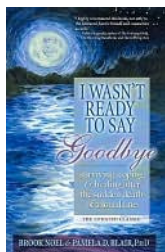
**Winnie the Pooh**

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### ***Do you know someone who would benefit from receiving this newsletter?***

Want to receive *GriefConnections* in your email box every month—absolutely free! Simply send an email to; [griefconnections@phillipsfuneralhome.com](mailto:griefconnections@phillipsfuneralhome.com) and write SUBSCRIBE TO GRIEF CONNECTIONS in the subject line.

### Library Notes



*I Wasn't Ready to Say Goodbye* was written by Brook Noel and Pamela D. Blair, Ph.D.

From the book's back cover... "Now there is a hand to hold..."

Each year about eight million Americans suffer from the death of a close family member. The list of high visibility disasters, human suffering and sudden loss will continue to grow. ... Outside the publicized tragedies there are many families and individuals that are suffering behind closed doors in our neighborhoods, in our homes, in hospital waiting rooms. Now for those who face the challenges of sudden death, there is a hand to hold written by two women who experienced sudden loss. In a book that will touch, comfort, uplift and console, authors Brook Noel and Pamela D. Blair, Ph.D. explore sudden death and its role in the cycle of life."

To purchase *I Wasn't Ready to Say Goodbye*, stop by the Special Memories Card and Gift Shop located at Phillips Funeral Home, 17 West Pulteney Street in Corning.

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### Upcoming Events

#### **Loss of a Spouse Support Group**

Wednesdays at 6:30 pm at Victory Highway Wesleyan Church, 150 Victory Highway, Painted Post. For more information, contact Sandi Follette at the Grief Center of The Southern Tier at 607-936-9077.

#### **Loss of a Loved One to Suicide**

First and third Thursdays of each month at 7 pm at the Hand in Hand Methodist Church on Wardell Street, Elmira. For more information, contact Sandi Follette at The Grief Center of the Southern Tier at 607-936-9077.

#### **Compassionate Friends Support Group**

Last Wednesday of each month at 7 pm at Our Saviour Lutheran Church, 2872 Westinghouse Road, Horseheads. If you are interested in joining the group, contact Joann at 562-8090 or by email at [jmorgan55@stny.rr.com](mailto:jmorgan55@stny.rr.com).

#### **Infant Loss**

*Empty Arms, Healing Hearts* is a support group centered around infant loss through miscarriage. For more information, contact Victory Highway Wesleyan Church at 607-962-7000.

#### **Abortion**

*Forgiven and Set Free*—a post-abortion class. For more information contact Victory Highway Wesleyan Church at 607-962-7000.

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