



## *Stage One*

*We are in a state of shock*

*G*od has so made us that we can somehow bear pain and sorrow and even tragedy. However, when the sorrow is overwhelming, we are sometimes temporarily anesthetized in response to a tragic experience. We are grateful for this temporary anesthesia, for it keeps us from having to face grim reality all at once. This shock stage—or perhaps it should be called a counter shock—may last anywhere from a few minutes to a few hours to a few days. If it

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goes on for some weeks, it probably is unhealthy grief and professional help ought to be sought.

But do not be afraid of the shock that often comes in the early stages of grief. Sometimes at the funeral home we see the sorrowing wife and find that she is almost radiant as she greets those who have come to offer their sympathy. People say, "What serene faith she has!" We tend to equate faith with a stoical attitude, not with tears. Yet the truth of the matter may well be that this woman is experiencing a temporary anesthesia that is helping her along until she is ready to move on to the next stage of grief.

The minister, upon seeing this woman in what at least appears to be shock, will arrange to visit her after the funeral, knowing that one day soon this strong exterior may break down, and he will have to help her face her true self. In fact, in some cases he may even encourage her to break down and express openly the strong emotions she was not able to admit earlier.

A man who was unexpectedly fired from a job he had held for twenty years put it this way: "I was so stunned by what they told me, I walked around as if I was in a trance. What they said just did not register. I heard the words, but they had not 'reached' me yet."

Shock is a temporary escape from reality. As long as it is temporary, it is good. But if a person should prefer to remain in this dreamworld rather than face the reality of his loss, obviously it would be very unhealthy.

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This is one of the reasons it is good for us to keep fairly busy and continue to carry on as much of our usual activities as possible during the period of crisis. It is certainly not good to have someone take over completely for us at such a time and make all our decisions for us.

Well-meaning relatives and friends might hinder the grief process by forcing us to sit inactively by. This would be much like the surgery patients in the past who were coddled and told not to do anything, not even turn over in bed for several days after surgery. All of this had the effect of making the patient sicker, and it required a much longer period for him to make his comeback.

The same thing is true with grief. The sooner the person has to deal with the immediate problems and make decisions again, the better.

The housemother of a large sorority house at a Midwestern university says of her many experiences with girls who “receive bad news from home”: “I always make it a point to be right there near the girl the whole time she is making telephone calls and preparing to leave. But I always keep her as busy as I can, letting her do her own packing and making her own minute-to-minute decisions. The other girls in the house always want to wait on her hand and foot, but I’ve learned that this is the worst thing you can do for a person at such a time.”



To sum up: Be near the person and available to help if everything breaks down, but normally do not take away from him the therapeutic value of doing everything he can for himself. This is what will help a person most to come out of his trance and “get on with his grief work,” as Erich Lindemann might say.

Even though a person does come out of the initial shock, he will undoubtedly experience times in the succeeding days and months when the unreality of the loss comes over him again. Every now and then he will say, “I just can’t believe it has happened. Intellectually I know it did happen, but I guess I just have not really accepted it emotionally.”

For all of us the biggest hurdle is “accepting it emotionally.” We just do not want to believe it, and so unconsciously we set as many barriers in the way as possible, making complete acceptance a very slow process.