

## RECOVERING OUR LOST SAINTS:

### A CURRENT THEORY OF LOSS AND ITS CHRISTIAN EXPRESSION

**Tom Gordon**

*Abstract: While faith and a spiritual perspective offer hope and reassurance in bereavement, not all Christians find that their faith gives them the framework they need in their loss and for some it may serve to slow down or disrupt the grief process. However, taking current grief theories, and applying them to a realistic theology, and in particular the concept of the communion of saints, has the potential to allow the Christian to grieve in a healthy way while continuing to hold to principles and beliefs informed by their faith.*

*Key words: Bereavement, grief, loss, faith, Christian, spiritual*

#### Problems with faith

*Jessie missed her husband more than she could say, and cried openly when she talked about her loss. But, in the midst of her tears, she said: "I shouldn't be crying like this. My faith is strong. I know John's safe with God. I know we'll meet again some day. So why am I sad? I shouldn't be like this. I shouldn't be upset if my Christian faith means so much to me."*

It would be too extreme to say that Christians cope less well with loss than those who have no faith, but in my experience of hospice chaplaincy and bereavement support, there are elements of the Christian perspective which contrive to slow down or disrupt the grieving process. There is evidence, anecdotal, experiential and based on research which indicates that spiritual belief has a positive effect on the resolution of bereavement, and, in particular, people who profess stronger spiritual beliefs seem to resolve their grief more rapidly and completely after a death than do people with no spiritual beliefs (Walsh et al, 2002). More specifically, a belief in the concept of an "after life", combined with other elements of faith, gives people with a Christian perspective a framework of hope and purpose which assists them with end-of-life issues and the dying process, and, in bereavement, helps alleviate their sense of loss and separation from a loved one (Perry & Frankel, 1998). Indeed, faith and hope, while

fundamental and universal concepts, are generally associated with religious discourse and language, and are clearly, for the Christian, associated with positive attitudes towards life and death (Clarke, 2003).

However, ten years experience as a hospice chaplain and, throughout that period also as a member of the hospice bereavement support team – added to a previous twenty years of parish ministry – indicates that this is not universally the case. For some the faith which they expect to be of help and support, and which they lean on for meaning and purpose when they need it most, actually works in a counter-productive fashion. In addition, there is evidence – such as that in Dombeck's (2002) study of the effect of 9/11 on the faith of those affected by the trauma – that people whose cherished beliefs are challenged in the context of traumatic life events are likely to experience "severe spiritual disequilibrium". As a consequence, work with Christians who are bereaved asks of professionals and carers not only an understanding of and support in their grief, but also an engagement with those elements of faith, or loss of faith, which add to the confusion and the pain of the bereavement journey.

These concerns are eloquently expressed in Geoff Walters' book, "Why do Christians find it hard to grieve?" (Walters, 1997). In it he explores the way Christian theology has contrived to make things more problematic for Christians in loss, and, as a consequence, serves to deny them their real feelings and the rightness of grieving. The developing theology of the early Church, he suggests, readily absorbed the Greek philosophical concept of the immortality of the soul. This made paramount the idea of a continuum of life in eternity under the grace of God, thus encouraging Christians to be sustained by their beliefs that there would be a "going on" and a place where souls would be reunited in eternal life. As a consequence, therefore, Christians in loss were expected to be so sustained by the belief – indeed, the certainty – of the person who had died resting in the nearer presence of God, and therefore so uplifted by the prospect of being reunited with their loved one when it came their time to die, that they need not grieve for the loss. There is, therefore, for Christians who believe themselves also to be safe in God's hands, and, indeed, feel assured of their own place in heaven, no need to grieve, if they hold fast to their faith, or at least this facet of it. In addition, such an approach to theology can and does create pressure on the non-believer, patient and carer alike in the dying process, and a dogmatism that is potentially a tyranny rather than a healing environment for dying and bereaved people (Gordon, 2000).

This, Walters argues, is a denial of true feelings, and a dismissal of the brokenness and devastation which is a natural part of the grieving process. So, while for some Christians the concept of the immortality of the soul and eternal rest sustains them in their grief, for others, equally committed to their faith, it serves to create a tension between what a Christian feels is expected of them – witnessing to their faith, being an example to others, being strong because of the sustaining presence of God, and the like – and the true, human feelings – hopelessness, emptiness, deep sorrow, confusion, doubt, despair, tears, etc – which are the natural responses to loss. Such was Jessie's tension in her grieving for John. Indeed, within that tension there may even have been an element of the suppressed anger which is so commonly found among those who will not allow themselves to be openly rebellious against the God in whom they believe.

Words like those of St Paul, 'We do not want you to grieve like the rest of men who have no hope' (1 Thessalonians 4:13), give us signals that our faith should make us strong, when at the same time we feel the brokenness of our loss. So Walters points to important questions, such as 'Is grief consistent with our faith or are we letting the side down?', 'Should the funeral service be a celebration, or is it alright to be honest?' and 'Is it true that "*Death is nothing at all... I am just around the corner. All is well.*" (In the often-quoted words of Canon Henry Scott Holland) (Whitaker 1984)

What is needed, Walters suggests, is a return to the Gospel theology of death and resurrection, so over-ridden by the idea of the immortality of the soul. What is needed, in effect, is the grave and all that death brings to us in all its hellish reality, before the glory of the resurrection and the hope that comes with it can be experienced. (Does the Apostles Creed not affirm: "He was crucified, dead and buried. He descended into hell. The third day he rose again from the dead, and ascended into heaven...")? What is needed is the necessity of feeling the pain of the loss and working through the grief before there can be any wholehearted embracing of the hope of new beginnings. In short, we need the acceptance that we descend into the hell of loss before we can find the heaven of recovery.

In this context, therefore, and with this theological approach, the Christian can retain and work with their faith, not seeing the feelings grief brings as the antithesis of faith, or as some kind of theological failure, or as an indication of a lack of commitment or belief, but as integral to faith, allowing real human feelings to be embraced and not suppressed by theological concepts. Might that not be why there are more "whys?" and cries of despair in the Psalms than there are "alleluias" and "amens"? Indeed, our hell may be that place in which we feel abandoned to our fate, cut off from the very grace of God. As such we can relate to the psalmist who in Psalm 88 declares uncompromisingly that death is the ultimate cut-off point from God, who in placing before God several unanswerable questions (vv10-12) indicates his beliefs that not only "*what lies beyond this life is unknown to people, [but] the moment of death [also] marks the end of all human contact with God*" (Davidson, 2004).

Such was the release Jessie needed in her despair, not a release from the deep feelings of loss, for they had to be normalised and seen for what they were, appropriate grief reactions, but released from the tensions, the unhelpful tensions, which her Christian faith was creating for her. In short, to paraphrase the title of Walters' book, Jessie needed to be accepted as "*A Christian who found it right to grieve.*"

By contrast to the tensions faith creates for people like Jessie, when one looks at current theories of grief and loss, one finds an affirmation of the realities and rightness of feelings, emotions, and the turmoil of bereavement. Grief reactions, regardless of one's life or faith perspective, are seen not only as normal and acceptable, but also as vitally important if the journey of loss is to be worked through in a healthy and honest way. Grief brings with it many emotions, fears and anxieties, all of which are associated with the facing of mortality. Such feelings are natural and healthy, and have to be recognised as such by bereaved people and the professionals whose support they seek. (Read, 2002).

### Updating our grief theories

*Andy's reactions to the loss of his wife were extreme, and hard to handle for him, his family, and our bereavement support team. His GP referred him for psychiatric support. Andy had three sessions with a psychiatrist. When I met him some months later, he looked and sounded as bad as ever. He told me, "The psychiatrist tells me I'm stuck at the first stage of grief. That means I'll never get better."*

Theories of grief have moved on since from the somewhat static understanding of grief as a series of distinct stages which was current in my own training in the 1960s and 70s. Such theories in their rigidity and tidiness, failed to allow for the individuality of the grief journey.

However, because of this, in the intervening years three problems have arisen for the caring professions.

Firstly, there remains the desire to define where a bereaved person is on their journey of loss, to see them in a "stage" of a process. Two things have followed from this approach. The first is that people are all too neatly "labelled", causing the professional carer to feel they can readily conceptualise and re-

spond to what is happening to the bereaved person because their behaviour and feelings are definable – indeed, measurable – at a given moment in time. And the second is to put further pressure on the bereaved person themselves, such that if they feel they haven't moved on to the "next stage" within a given time-frame then they have somehow failed or are stuck or that there is something wrong with them. Such was the labelling used for Andy, and such was the increased hopelessness he suffered as a result.

Secondly, this approach has caused the caring professions to view grief and loss as something from which to recover or move on rather than a process or journey to be worked through. In addition, in a society which itself is impatient and rushes from one thing to another, bereaved people are too often given too limited a time to express the public aspects of their grief – does society give us much more than 6 weeks to grieve? – thus increasing the isolation people feel over time in their loss and the lack of opportunities to have their feelings normalised and the time-frame and behaviour patterns individualised.

Thirdly, it has discouraged many in the caring professions from working with current and developing grief theories, believing that the "stages of grief" model can be a "one size fits all" approach. This creates a climate where abnormalities are focussed on and extremes are seen as unhealthy. While this might be a tidy way for the medical profession, for example – and, indeed, for Andy's psychiatrist – to label responses in bereavement as exhibiting abnormal grief reactions and to seek to respond accordingly, it further isolates the bereaved person in the nature of their grief and pathologises or "medicalises" rather than normalises their reactions.

It is increasingly important, therefore, for practitioners in all aspects of health care and the caring professions to be aware of and apply current grief theories, to the greater value of their caring approach and, ultimately, to benefit those who are bereaved.

### A current theory of loss

*Cathy had been inseparable from her widowed mother, having lived with her all her life. The house was empty without her. Life had little purpose or meaning. "The only thing that gives me comfort," she confessed, "is feeling my mother around me. I wear her favourite cardigan when I sit by the fire."*

*And sometimes I even hear her voice. My friend tells me I'm loopy, but I don't think so. Do You?"*

One of the most helpful current theories is that outlined in a modern approach to bereavement called "continuing bonds" (Klass, Silverman & Nickman, 1996). This approach makes sense of people like Cathy, people who may indeed have been considered "loopy" in other and outmoded theories.

The theory of continuing bonds moves us on from the "old thinking" of psychotherapist researchers that to continue a relationship with the person who has died is considered "abnormal" and exhibits signs of complicated or unresolved grief. The questioning of the previously accepted assumption that the grief process needs to be completed, either in stages or at a definable end point, and that bereaved people need to show clear signs of "moving on", is a healthy development. Continuing bonds is a theoretical approach which works because it fits with the reality of people's experiences. *"The continuing bond has been overlooked or undervalued in most scholarly and clinical work... [And] the implication of our new understanding of grief goes further than the fact that people maintain a relationship to the deceased person... It requires that we look at the way we see relationships in general in our society. We need to bring into our professional dialogue the reality of how people experience and live their lives, rather than finding ways of verifying preconceived theories of how people should live."*

Effectively what this means is that bereavement is not a series of distinct stages but an unfolding of a new and different relationship with the person who has died. The validity of this insight has been reflected in the recent work of William Worden, who formerly described his 'final task' of grieving as 'to withdraw emotional energy and reinvest it in another relationship', but who now defines it rather as 'to emotionally relocate the deceased and move on with life' (Worden, 2002). The new approach bids us work out what this continuing bond will mean for each person who is bereaved, what shape it will take, and how the future of that relationship will manifest itself and develop. Far from this being a "hanging on" to a loved one, and "not letting go" of the dead person, it is, in effect, doing what comes naturally, accepting the devastation of the death as well as working out how one can live with the memories that make up the on-going relationship.

That's what was being symbolised by Cathy and her mother's cardigan.

## **The communion of saints**

*"My father was no saint," Tony told me, "not in the way he lived, anyway, and not in any measurement of the Saints you hear about in churches or see in stained-glass windows. But, though he's been dead a long time, he's still as important to me as he ever was. If fact, I can feel his influence more than ever. I suppose that kind of makes him a saint for me, don't you think?"*

The theory of "continuing bonds" in loss, while in no sense setting out to be a Christian theory or be designed to make sense only of the Christian journey of loss, sits well with the Christian concept of "The Communion of Saints." Such a concept, enshrined in the Westminster Confession of Faith (1647) as the "Church invisible" and "all saints united to Jesus Christ their head", indicates that we remain inextricably linked with those who have died and who have passed on to their eternal resting place with God. A belief in the Communion of Saints has been integral to our understanding of the oneness of the "friends on earth and friends above" (Hymn 367 CH3) or the "cloud of witnesses" and the "great crowd which no man could number" so beloved of preachers on the Letter to the Hebrews and the Book of Revelation. It is, in effect, the Christian expression of the bereavement theory of continuing bonds. For it holds in one concept the reality of death, the pain of loss and separation, and the continuing union with and influence of those who have "gone before" as our personal communion of saints, with whom, in both human relationships and in the theological concept of the oneness of the Faithful, we remain inextricably bound.

I have unfolded the importance of this in the bereavement journey – for Christian and non-Christian alike – in the chapter of my book "A need for living" (Gordon, 2001) devoted to this issue. The image used there, of our saints being those who sit with us around our table, with whom we continue to "commune", and who continue to influence us in their living as well as in their dying, is the concept of sainthood which Tony had grasped so readily and rightly in the continuing bond with his long deceased father.

In human terms, we are greatly influenced by a limited number of people, close family, good friends, and the like, with whom we interact throughout our lives, but also people of whom we've read, people whose writings, poetry, music have influenced us, for example, or who, in their exploits and influence in their day, continue to affect our lives many generations later. These are the ones who sit around our table, with whom we talk, to whom we listen, from whom we gain wisdom, as we make decisions and formulate attitudes in our daily living. They are, in effect, our saints, the people who matter most to us. And such is their influence, and such is their continued importance to us, that when they die, their seat at the table is not vacated to be filled by someone else, but remains occupied as they remain with us, integral to our lives, even though we are separated from them by the veil of death.

To counter the theological reasons why Christians find it hard to grieve, and to up-date our thinking and response to bereavement issues by being familiar with current grief theories such as "continuing bonds", this concept the Communion of Saints, properly understood and effectively used, can give Christians that which they most need: an acceptance of both sides of the bereavement coin, the pain of the loss, and the continued connectedness with the departed, that on-going bond with and influence of those who have died. It is, if you like, the importance of the continuing bond which now begins to allow us sit well with a theological concept with which we had previously struggled.

## Conclusion

If we are to understand and help those people with a spiritual or specific Christian perspective to regain their equilibrium after a loss and during their bereavement journey, a number of concurrent approaches have to be utilised. We have to begin by helping people see that grief and expressions of sorrow and devastation in their loss are real and healthy and should not and need not be suppressed by faith or expectations of behaviour of those who live by such a faith. We have then – for our own benefit as professionals and in our support of those who are traumatised by loss – to familiarise ourselves with current and workable grief theories and apply them to issues with which we are engaged in our professional practice. In addition, those of us who engage with bereaved people who approach their loss within

the framework of their faith and seek an understanding from professionals within a shared Christian framework, have the task of reinterpreting our theology of death, so that the pain and "hellishness" of loss is seen as integral to faith and not the antithesis of it. And, within this shared context and with such people, if we hold to and understand a workable concept of the Communion of Saints, there can be a healthy combining of personal experiences of loss, current theories in which these experiences make sense, and a theology that continues to offer hope, thus creating the potential to allow the Christian to grieve in a healthy and honest way.

*Tom Gordon is chaplain and co-facilitator of the bereavement service in the Marie Curie Hospice Edinburgh.*

The Title 'Recovering our Lost Saints' was suggested by a line in a poem by Elizabeth Barrett Browning, which runs; 'I love thee with a love I seemed to lose with my lost saints'

## References

- BROWNING, E B 'How do I love thee?' in LOOKER, S J 1948 *Poems by Elizabeth Barrett Browning*. The Grey Walls Press, London
- CLARKE, D., 2004 'Religion and Spirituality: Faith and Hope', *Australasian Psychiatry*, Vol 11(2), pp164-168
- DAVIDSON, R, 'Towards a theology of suffering', *unpublished lecture, Marie Curie Cancer Care, March 2004*
- DOMBECK, M., 2002, 'Chaos and self-organisation as a consequence of spiritual disequilibrium' *Clinical Nurse Specialist*, Vol 16(1), January 2002, pp42-47
- GORDON, T. 2000 'Reflections on religious dogmatism in the care of dying and bereaved people' *Scottish Journal of Healthcare Chaplaincy*, Vol 3 No 2. pp19-22
- GORDON, T. 2001 *'A need for living'* Wild Goose Publications, Glasgow
- HYMN 367 *For the Beauty of the earth* Church Hymnary Third Edition (1973), Oxford University Press
- KLASS, D., SILVERMAN, P.R., NICKMAN, S. (Eds) 1996 *'Continuing Bonds: New understandings of grief'* Taylor & Francis Inc,

PERRY, B., FRANKEL, G. 1998 'The relationship between faith and well-being' *Journal of Religion & Health*, 37(2), pp125-136

PREAD, S. May 2003 'Loss and bereavement: a nursing response' *Nursing Standard*, 16(37), pp47-55

SCOTT-HOLLAND, H 'Death is nothing at all....' In WHITAKER, A 1984 '*All in the End is Harvest*' DLT, London.

WALSH K., KING M., JONES, L., TOOKMAN A. & BLIZARD, R. June 2002 'Spiritual beliefs may affect outcome of bereavement: prospective study' *British Medical Journal*, 324(7353), pp1551ff

WALTERS, G. 1997 '*Why do Christians find it hard to grieve?*' Paternoster Press, Carlisle

WESTMINSTER CONFSSION OF FAITH, Approved by the General Assembly of the Church of Scotland in 1647, '*The catholick (sic) or universal church, which is invisible, consists of the whole number of the elect that have been, are, or shall be gathered into one, under Christ the head thereof.*' Chap. XXV 'Of the Church'; '*All saints that are united to Jesus Christ their head by his Spirit, and by faith, have fellowship with him in his graces, sufferings, death, resurrection and glory.*' Chap. XXVI 'Of Communion of Saints'.

WORDEN, W 2002 '*Grief Counselling and Grief Therapy. A handbook for the Mental Health Practitioner*' Third Edition. Springer Publishing Company, New York.