

GRIEF MANAGEMENT: PROGRAMMING FOR CARE  
IN THE LOCAL CHURCH

By

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## ABSTRACT

### GRIEF MANAGEMENT: PROGRAMMING FOR CARE IN THE LOCAL CHURCH

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This project dissertation, entitled "Grief Management: Programming for Care in the Local Church", addresses the issue of grief that is caused by the death of a significant other. This work also includes information on the dynamics of grief; grief management resources from psychological, sociological, and theological perspectives. In addition, it gives an overview of the African American church as a resource for grief support.

The dissertation provides a model for programming for grief management and grief support for the Ben Hill United Methodist Church in Atlanta, Georgia.

## ACKNOWLEDGEMENTS

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In all things, and in everything, to God be the glory for the things that God has done.

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## Chapter 1

### INTRODUCTION

The experience of grief is real and eventually enters everyone's life. Grief is not exclusive but is inclusive in that no age, race, gender, political persuasion, or religion is excluded from the long arm of grief. Grief comes when there is the loss of something that is valued. It may be caused by the death of a significant other. Or, a grief reaction may be the outcome of a change in circumstance. Grief brings pain, discomfort, and a sense of unreality. Yet, to a large degree the journey through grief can lead to hope, healing, and wholeness. The problem, as one writer has said, is that we often try to avoid grief by going around it. We cannot go around grief but we can go through it. We must go through it in order to be the caring, compassionate persons that God desires for each of us.

My interest with the "grief" issue has been long standing. It was triggered not so much by my work in the church but by my employment as a social worker. As a crisis intervention counselor, I counseled with people from various stations of life and conditions of mind and spirit. Often, these people were stranded, displaced, disconnected from family, or in dire straits because of the decisions

they have made regarding their life. It was not uncommon to discover that many of them were in flight because of their struggles with relationships and their inability to cope with loss or losses. Essentially, they were unable to manage their grief and therefore unable to continue with their lives. As I made a transition in my vocation from social worker to ordained clergy, my interest in the impact of grief continued. As a result, when the opportunity presented itself for me to embark upon this journey, grief ministry was the recognized focus. Therefore, I decided to design a project which deals with grief management.

This project addresses the issue of grief and grief management support as it relates to the Ben Hill United Methodist Church of Atlanta, Georgia. The project is based on three presuppositions. They are as follows:

1. Grieving is a necessary part of human existence and survival. It can be postponed but not deterred.
2. The church has the responsibility for providing educational and nurturing support to persons who grieve.
3. As the church provides opportunities for persons to be supported in grief, they too, will be able to support others.

## MINISTRY CONTEXT

For the past six years, I have been serving as an Associate Pastor at the Ben Hill United Methodist Church in Atlanta, Georgia. The Ben Hill Church is located in a residential community. The community itself gives the impression of being lower to middle class in social and economic status. In truth, this community has much more diversity. It encompasses many abandoned houses, businesses which are located within homes, a developing commercial area and a large public housing complex located within a five mile radius of the church.

The Ben Hill community has made many changes over the years. It was once a white community. Now it is predominantly African-American with only a few white residents and businesses. There are some Asian-American entrepreneurs and people from other nationalities who operate businesses in the neighborhood.

The Ben Hill United Methodist Church was once a white congregation. When the neighborhood underwent a transition, so did the church. In 1972, the church received its first African-American pastor, the Reverend Cornelius Henderson. He served 14 years and contributed immensely toward developing and shaping the church's image, its growth, and to a large degree, its ministry.

For many years, Ben Hill United Methodist Church was labeled a "Sunday" church. People came to worship services on Sunday but were not involved in ministry or studies during the week. Ben Hill was and continues to be an exciting place to worship. It is known for dynamic preaching, and soulful, spirit-filled worship. It has been a place that many celebrities, politicians, judges, and international travelers visit. On occasion, some of these people unite with the church. Their membership lends a tremendous boost to Ben Hill's reputation for being a powerful and influential church. The church currently sustains a membership roll of over 8200. Of this number, perhaps half are actual participants in the fellowship and ministries of the church.

In 1986, 1992, and 1993, Ben Hill UMC underwent changes in pastoral leadership and ministry focus. It became even more charismatic and program-oriented. Mission-oriented ministries were established as well as disciplined studies. The church also became multiple staffed. At this writing, the church employs a staff of 60+ people, including: 1 senior pastor; 4 associate pastors; 1 pastoral counselor; and 1 ordained minister of music and worship. There are over 70 different ministries including those that are

related to worship, music, Christian education, community outreach, and a pre-school academy.

In 1989, a mission statement was established by the Ben Hill congregation. This statement proposed that our mission be consistent with that of all Christians, to serve Jesus Christ and extend his ministry throughout the world. The leadership agreed to meet this objective through evangelism, teaching members to become disciplined in their lives, nurturing families as they grow in the faith, listening to members and developing a plan to meet their needs, and, obeying the teachings of Jesus Christ by reaching out to the community and beyond (Mission Statement, Ben Hill UMC, 1989).

In an effort to be deliberate in hearing the people, in 1990, the church conducted listening sessions with the congregation. These sessions resulted in the development of a "vision" and vision statement for Ben Hill. The "vision" is comprised of the following components: 1)A Christian Saving Station, 2)A Discipleship and Deliverance Center, 3)An Intensive Care Unit, 4) A Teaching Parish, and, 5)A Mission Outpost. It has been determined by the leadership of the church that all ministry proceeding from Ben Hill must fall under the auspices of some aspect of the "vision".

In January of 1997, the church experienced an administrative restructuring. As a result, the church is now governed by a "Church Council" which is composed of chairpersons of the various vision areas, representatives from trustees, finance, staff-parish relations, pre-school academy, lay leaders and lay delegates to the Annual Conference, age-level ministries, and, the superintendent of Sunday School. The "council" is charged to be in covenant relationship with God as clergy and laity work together in the partnership of ministry.

The 1997 budget for Ben Hill UMC exceeded \$2.9 million. This budget was formulated solely to meet administrative and ministry programming needs. Interestingly, these funds were generated not through fund-raising but rather through the giving of tithes and offerings. This speaks to the intentional commitment of local church members to support the vision, ministry, and finances of the their church.

#### MINISTRY ISSUE

The ministry issue stated succinctly becomes: "What can be done programmatically at the Ben Hill United Methodist Church to support parishioners as they grieve the loss of significant persons in their lives?" Having stated the issue, it is important to provide definitions and to substantiate a recognized need for this ministry. A

conceptual model for a grief management support ministry will be delineated later in the paper.

### Definitions

The concepts to be defined in this study are "grief", "support", "management", and "programming". In arriving at a definition of grief, Walter Wangerin, in his book entitled Mourning Into Dancing, says that grief can only be viewed in relation to death or a sequence of "little deaths". In his estimation, every loss, every separation, no matter how small or seemingly insignificant, represents a "little death". Furthermore, every response to these "little deaths" represents a situation for grief. (Wangerin, 1992)

"Grief", says Liston Mills, "is the perfect word to describe a normal response to the loss of a parent, spouse, child, pet, job, marriage, stage of life, healthy body or mind, familiar environment, self-respect, love affair or any other loss experience you can name. (Mills, 1969) In essence, grief covers the totality of relationships and that to which people relate. Grief is a universal emotion...as each of us loves, so each of us grieves." (Mills, 1969) Grief is always associated with loss. Grief, by definition, is always associated with affliction, anguish, heartbreak, and woe.

Other terms which have been used along with the term "grief" are that of bereavement and mourning. According to

W.J. Worden, mourning is defined as the process that the grieving person experiences. (Hughes, 1995) According to the Department of Health and Human Services, bereavement is defined as the state of having suffered a loss. (Hughes, 1995) It is expected that the use of these terms will continue throughout this paper.

In regards to "support", part of the task and focus of this project is to develop strategies and a model and program for caring which will equip parishioners with tools which will enable them to grieve, to heal, and to grow. In his book, Grief and Growth, R. Scott Sullender says that "Religion has traditionally encouraged people to care to get involved, and to 'love your neighbor'. By doing so, pastors are implicitly asking people to grieve as well...grief is an inevitable part of love." (Sullender, 1985) In other words, people who love, grieve: people who grieve, love. I might add, euphemistically, that a rich and full life is filled with much loving and much grieving. As this relates to "support", I experience this as a formal and informed means whereby persons who grieve are allowed to care for others who grieve because of loss.

In relation to the term "management", in this particular instance, it is to be viewed as a structured or formal plan or proposal for the church to offer relief and

care for those who grieve. As such, it is also to be seen as a spiritual, educational and social endeavor put into place to help mourners to "handle" the demands of grief.

The term "programming" can best be understood in light of the demands and needs of parishioners who are grieving. The most immediate implication is that any ensuing plan which emerges or is stipulated will address the hurts, sorrows, and the needs for comfort of those who grief. Perhaps, it can be suggested that "programming" is very closely linked to management. It supports a particular agenda or plan which is tailored for a designated audience. As it relates to this study, the audience is both care-giver and care-receiver.

#### Significance of the Study

It is important that we emphatically stress the need for a grief management ministry. As such, I would like to present some vital information which is intended to further amplify this situation. Statistically, there have been 9 deaths of members of the congregation during 1997. Although this may not appear to be an outstanding number in light of the total membership roster, what is significant is that there have been 100+ deaths of relatives of members of Ben Hill UMC between January 1997 and November 1997. What this means is that essentially, within the past 11 months, at

least 109 family units have been touched by death and grief. When we consider a much wider network of other relatives, friends, and co-workers, the spectrum of influence and impact is much broader. Admittedly, the ministerial staff has been engaged in ministry with some of these people. However, as a rule, this service and support has begun at the point of announcement about the death of an individual and then concludes with the funeral.

The process has been that once information is received that a church member or someone in a member's family has died, the church begins extending expressions of love and condolence. The ministerial staff makes contact. A clergy person goes to sit with the family to help them make funeral/worship service arrangements. Members of the funeral committee (now defunct) or church staff often make themselves available to answer the telephone, run errands, or be of general assistance. Committees throughout the church send flowers, cards, and food. Flowers, on behalf of the church, are sent to the funeral. The formal ministry of the church ends after the family is provided a fellowship meal at the church or home following the internment service. Grief support that occurs following the funeral takes the form of informal or individual contact. Friends or work area committees may maintain contact with the family of the

deceased. The exception is a grief support group and the compassionate friend's group which were formed to meet specific needs of a few parishioners. These groups are ongoing and appear to provide great support and fellowship for their participants.

During 1997, two ministries were formed to help meet the support needs of both clergy and laity. The first is the lay shepherd's ministry which involves lay people in various aspects of the nurturing ministry. The second ministry falls under the lay counseling ministry. Both of these ministries have been initiated since the inception of this project. These ministries have just begun the work of nurturing parishioners and are still in the formation period.

Perhaps additional motivation for undertaking grief management ministry at Ben Hill UMC is the fact that on the periphery, the church appears to be such a thriving congregation. Over the past few years, the church has increased its membership roll on an average of 300 members per year. This yearly boost in membership is a blessing but also presents a tremendous challenge. The expertise of a pastoral counselor on staff, lay shepherds, lay counselors, and the ministerial staff are all needed in order that there will be a measure of care for so many people. Even now, as

clergy move among the people, the cry continues to go up that people are hurting because of the various losses in their lives and or because of unresolved or incomplete grief "work". Accordingly, I have observed and talked to parishioners who have suffered significant losses. After a year or more, some of these people are still struggling to adjust to their loss and work through their grief.

### The Goal of the Project

Focusing on the project itself, the principal goal has been and continues to be to introduce a model of grief management which can be applied in the local church setting. This model will provide instruction in the area of grief and nurture. It will also invite informed care-givers to care for others in a more formal and intentional way.

### The Project Method

A process of training will take place which utilizes the model of grief management and which will entail specific steps over a specified period of time. The steps will include: 1)Introduction to the congregation of the formation of a ministry to the bereaved which will offer support to parishioners and instruction to care-givers. This will also involve recruitment of care-giving participants; 2)Providing several opportunities for instruction to occur with as many different facets of the congregation as there is interest; 3)Engaging in an

evaluative process, through questionnaires and interviews, to gauge the response to the material and the experience of grief; 4) Assigning persons to begin offering grief support; 5) Developing a roster of those who have completed instruction.

The designated time frame is inclusive of several weeks and aspects of the study. The initial training involves a scheduled four-week time slot. This time is allocated to studying the dynamics of grief as well as instruction related to a grief management model. There is also the scheduling and conducting of less intensive training sessions for other persons related to the membership-nurture work area.

The most significant amount of time for the project is allotted to the actual grief support of parishioners. Lawrence E. Holst, in The Hospital Ministry Role of the Chaplain Today, points out that "the acute pain of grief should subside in weeks to a couple of months, ..." (Holst, 1990) This time frame is also endorsed by Dr. Erich Lindemann who suggests that four to six weeks is adequate time to help the bereaved attain an uncomplicated and undistorted grief reaction. (Lindemann, 1941) For the purposes of this project, care-givers are asked to extend support for a six-week time period.

#### Limitations of the Study

As I have traveled through this study, a particular limitation has become apparent. As associate pastor of

Christian Training, the instructional aspect of this model fits nicely within my portfolio of responsibilities.

However, the assigning of care-givers, management, and support group facets of the project are under the auspices of both the pastoral counselor and the associate pastor of membership nurture. As such, the challenge in completing this endeavor has been to coordinate my efforts with the plans and intentions of these two esteemed ministers and areas of ministry.

## Chapter 2

### LITERATURE REVIEW

The literature search revealed that information on the topic of death, grief, and bereavement support is extensive. Many articles, books, and reviews have been published in an attempt to address so vital an issue. We will begin with a peruse of the normative sources.

#### Normative Literature

As a literary source, The Bible, particularly scripture, is a major and chief resource which Christians, and others, employ to help cope, adjust, and reconcile themselves to events, such as death, which causes grief. The following is just a partial listing of pertinent scriptural passages:

- 1) If a man live many years, let him rejoice in them all; and remember the days of darkness; for they shall be many. (Eccl. 11:8, NRSV)
- 2) He will swallow up death forever, and the Lord God will wipe away tears from off all faces. (Is. 25:8, NRSV)
- 3) Let grief end with the funeral. (Eccl. 38:19, NRSV)
- 4) Do not abandon your heart to grief. (Eccl. 38:20, NRSV)
- 5) Jesus said, I am the resurrection. If anyone believes in me will never die. (John 11:26, NRSV)
- 6) We want you to be quite certain; brothers,

about those who have died, to make sure that you do not grieve about them, like the other people who have no hope. (1 Thess. 4:11, NRSV)

7) Death has been swallowed up in victory. Where, O death, is your victory? Where, O death, is your sting? (1 Cor. 15:55, NRSV)

8) Even though I walk through the valley of the shadow of death, I fear no evil; for thou art with me; thy rod and thy staff, they comfort me. (Psalms 23:4, KJV)

The Bible is replete with words which offer comfort, advice, and hope to those who grieve. Yet, it also appears that in relation to grief, scripture invokes a tension between the journey through life, grieving and the preparation for eternal life and eternal things. For instance, in the verses quoted from the book of Ecclesiastes, there is admonition not to grieve but to move on because life is short and filled with trouble. The implication is that life is precious and should not be wasted in sorrow or grief. Life should be lived to its fullest extent.

As we turn to the scripture again, in the book of John is recorded the story of the raising of Lazarus from the dead. In this story, Jesus is confronted with people who are grieving and mourning the death of Lazarus. As Jesus looks upon the crowd and listens to their words and sees them weeping, he is "deeply moved in spirit and troubled." (John 11:33) Jesus weeps. He weeps because of his love for Lazarus and because he realizes that the people have no hope. As the son of the God of hope, Jesus himself

grieves and he weeps. In this simple yet stirring display of weeping, Jesus validates the fact that the human body, mind, soul, and spirit does in fact grieve when there is loss, separation, and death.

As we now address the issue of theology, it is interesting to note that in a book entitled, Surviving Death: A Practical Guide to Caring for the Dying and Bereaved, Charles Meyer includes a chapter on "Theology by Slogan." Herein, Meyer investigates the stock responses that are given to persons in times of loss or death. Some of these comments are: God will cure; if you have enough faith, you'll be healed; it is God's will; there's a reason for everything and/or God took him or her. (Meyer 1991) Meyer suggests that these responses are given to mask our own discomfort with death and grieving. Thus, these responses do not facilitate our understanding of a God who loves us, grieves with us, or helps us when we feel out of control. According to Meyer, these comments are shallow and are meant to deter conversation. (Meyer 1988)

In Pastoral Bereavement Counseling: A Structured Program to Help Mourners, Rabbi Jacob Goldberg sets forth the position that as we assist persons with mourning we do so as "partners with God in doing His work, to heal the broken-hearted, and to bind up their wounds." (Goldberg 1989). Our theological position should be versed in believing that God is with the broken-hearted, to comfort, nurture, befriend, support, and guide them as they journey

toward healing and wholeness. God supports us as we are equipped to offer support and comfort to others.

### Empirical Literature

Approaching the area of grief from a psycho-social perspective, Marguerite Bouvard and Evelyn Gladu present a fascinating and extensive discussion on mourning. In their book entitled, The Path Through Grief, they postulate that the problem with mourning stems from the fact that contemporary society considers mourning to be morbid.

(Bouvard, 1988) As such, we avoid mourning. We make no time for it and no longer have rituals or a common language which signals to others that we are in mourning. It is interesting that people do not take a 'leave of absence' for the purpose of mourning. Nor do they wear black or white to indicate that something significant has occurred in the life of the family.

Bouvard suggests that "we suffer from 'an absence of guidelines for facing the situation.'" (Bouvard, 1988) These guidelines or rituals, such as wearing specific colors and hanging flowers on the front door, help to promote private as well as community mourning. We see instances of this with the wearing of the red ribbon to indicate that someone has died from AIDS. For Bouvard and Gladu, "it is a paradox that if we acknowledge our grief and make room for the sorrow of loss in our lives, we can then put these emotions behind us." (Bouvard, 1988)

We will now turn our attention to the empirical

literature that relates to grief and grief support ministries. To begin, there was much information available on defining grief and its impact on individuals and families as it relates to death.

It should be noted that grief as a normal reaction to loss was written about as early as 1917. In an article entitled, "Mourning and Melancholia", Sigmund Freud said that mourning was not pathological; it would be overcome after a time, and interfering with it was useless and probably harmful. (Hughes, 1995) Freud validated that grieving or mourning is both a healthy and unavoidable consequence of loss. In addition, Freud spoke of the "work of mourning" as being the internal and external adjustments we must make after a loss. (Volkan, 1993)

A most significant study was conducted by Dr. Erich Lindemann. In this study, Lindemann interviewed over 100 bereaved persons who had lost family members as the result of a fire at the Coconut Grove night club in Boston. From this work, Lindemann deduced that "acute grief would not seem to be a medical or psychiatric disorder...but...a normal reaction to a distressing situation." (Lindemann, 1944) He further states that the "duration of a grief reaction seems to depend upon the success with which a person does the grief work." (Lindemann, 1944) According to Lindemann, this "grief work" is only accomplished when the bereaved person is able to "achieve emancipation from bondage to the deceased, to readjust to a world in which the

deceased is missing, and to form new relationships."

(Lindemann, 1944)

Through his work, Lindemann contributed greatly to our understanding of grief by describing and listing the symptoms of normal grief. The following represents a partial listing of grief related symptoms:

1. "waves" of physical distress which last twenty minutes to an hour
2. tightness in the throat, choking
3. shortness of breath
4. sighing
5. an empty feeling in the stomach or digestive complaints
6. weakness
7. tension
8. poor appetite
9. feeling of unreality
10. withdrawal from others
11. preoccupation with the image of the deceased
12. inability to initiate and maintain organized patterns of activity
13. hostile reactions or irritability (Lindemann, 1944)

Dr. Elisabeth Kubler-Ross, a Swiss-American physician and psychiatrist, did extensive work in hospitals with patients who were terminally ill. She and her students interviewed patients who were very close to death in an effort to gain valuable information about their last thoughts and feelings. As a result of her work, she was able to delineate 5 stages of dying: denial, anger, bargaining, depression and acceptance. (Kubler-Ross, 1969)

Because of her work with the families of dying patients, she and others have attributed these same stages to the area of grief.

In his book, Grief and Growth: Pastoral Resources for Emotional and Spiritual Growth, R. Scott Sullender lists the contributions of various therapists and pastoral counselors regarding the stages of grief. They are listed as the following:

Granger Westberg in Good Grief lists ten stages: shock, expression of emotion, depression, physical symptoms of distress, panic, guilt, anger, immobilization, hope and affirmation of reality. (Sullender, 1985)

Wayne Oates lists six stages: the shocking blow of grief; the numbing effect of the shock; the struggle between fantasy and reality; the break through of a flood of grief; selective memory and stabbing pain, acceptance of loss and the affirmation of life. (Sullender, 1985)

As there are stages of grief, writers also indicate that there are different kinds of grief. Bereavement grief, or mourning before a person's death is called anticipatory bereavement or anticipatory grief (Lindemann, 1944).

All of these disciplines and writers help us to know that grief work can be all consuming, distressing, taxing and just plain hard work.

#### Operational Literature

As I turn now to the operational literature, I think it is fair to say that all of the material which is related to the topic of grief attempted to offer some pastoral guidance or tools as methods and practical approaches for dealing with this most painful and unpredictable aspect of life. At this time, I will address a few of the sources. In his book Getting Through Grief: Caregiving by Congregations, Ron Sunderland provides a foundation for congregational caregiving and nurture to parishioners who grieve. His model suggests the following:

1. Establishing a training program for caregivers which would include training in:
  - a. listening skills.
  - b. understanding of both normal and abnormal grief.
  - c. familiarity for planning a funeral and visiting a funeral home.
  - d. planning and scheduling continuing pastoral care.
2. Trained care-givers are assigned to persons who experience death as soon as the information is received.
3. These care-givers are designated to keep "a grief ministry calendar" for their grieving family which will include: family birthdays, wedding anniversary, and other special days.
4. A grief inventory is developed by care-givers and the bereaved so that griever can reflect on their progress, losses, and gains. (Sunderland, 1993)

Sunderland's model is comprehensive and is based on his thesis that congregations have the responsibility of

providing membership-nurture and care to grieving families.

Marylou Hughes, a private practice social worker and therapist, makes a great contribution through her book entitled Bereavement and Support: Healing in a Group Environment. In this book, she tells "how-to" initiate, organize, and conduct bereavement support groups. Her position is that although bereavement support groups are not for every one, most people who participate, receive relief. Here is a list of some of what bereavement support groups offer:

1. Emotional and physical relief
2. Finding mentors
3. Assurance that persons are not isolated in grief
4. A safe place
5. Opportunities for persons to tell their stories
6. Helping persons work on identity
7. Promote bonding
8. Helping persons see that bereavement is not all sorrow and tears. (Hughes, 1995)

Another book that was helpful is entitled Blessed Are They That Mourn by J. Alfred Smith. This very small and concise book gives great insight on one pastor's experience of giving pastoral care in grief situations. One of the very strong statements that Smith makes is that people

cannot heal unless they are able to talk through and work through their memories and feelings about the loss:

Each memory of the loved persons in a different context of daily life must be brought up and relived in the mourners imagination before the work of mourning is completed and the full reality of the loss can be accepted. Only then can the person become free from his preoccupation with the loss and take an interest in his daily activities, with other persons. (Smith, 1988)

Thus, mourners must be allowed time and opportunity to tell and retell their stories until it becomes less painful to remember or recall their loss.

In the search for resources and other material related to grief support, it is important that some attention be focused on literature regarding the role of the African American church during bereavement.

#### The African American Church and Bereavement

In an effort to facilitate an understanding of the role of the African American church in nurture, it seems helpful and prudent to make reference to Dr. Edward Wimberly's book, Pastoral Care in the Black Church. In chapter one, which is titled, "Pastoral Care in the Black Church," Wimberly states that pastoral care is care that "exists whenever persons minister to one another in the name of God." (Wimberly, 1983)

This nurturing attention is provided by both pastor and the faith community. The pastor's presence is symbolic of the hope of the people and their aspirations for freedom. As a result of his or her leadership, the community rallies

to provide persons and families in crisis with the total caring resources of the church. (Wimberly, 1983) Through prayer, preaching, teaching, administration, and other fellowship activities, the church promotes healing, wholeness, sustenance, reconciliation, and liberation to those who would otherwise be left to the ravishes of life. At this point, we will focus more intensively on the development of the African American church.

#### The African American Church

The role of the African American church is both historical and prescribed. In The Negro Church in America, E. Franklin Frazier postulates the idea that the African American church has origin and definition because of the destructiveness and devastation of slavery. Slaves were forced to appropriate the religion of their slave masters. As a result, Christianity was imposed upon the slave. However, at conversion and baptism, "the Negro slave found in Christianity a theology and a new orientation toward the world at large and in doing so he adapted the Christian religion to his psychological and social needs". (Frazier, 1974)

It is interesting to note that in The Spirituality of African Peoples: The Search for A Common Moral Discourse, Peter J. Paris indicates that the African slave syncretized African cosmologies with Christianity:

In American, Jehovah replaced the Creator, and

Jesus, the Holy Spirit, and the Saints replaced the lesser gods. The Africans preserved many of their sacred ceremonies, songs, dances, feasts, festivals, funeral dirges, amulets, prayers, images, and priests. (Paris, 1995)

Therefore, captivity in America did not totally eradicate religious and cultural traditions of the African. In reality, the African slave discovered a means of maintaining a link, however fragile, with traditional African beliefs, worship, and community.

A particularly significant viewpoint of Africans of the diaspora, those transported from Africa, centers around the parenthood of God and the kinship of all peoples under the authority of God. (Paris, 1995) It is thought, by Paris, that this theology and the ensuing belief that God opposes those who pose a threat to the freedom of God's people, laid the ground work for the "invisible" church. The "invisible" church evolved as a result of the need for hope and communal gatherings. Melva Costen, in African American Christian Worship, describes some of the benefits that were inherent within this "invisible institution":

1. Divine space where freedom could be sought and experienced.
2. Ownership of a Christian belief system and code of religion which was unique to the people.
3. Freedom of the Spirit to enable the preaching, singing, praying, shouting, and responsive listening of the Spirit-filled congregations.

4. Mutual community affinity where "everybody's heart was in tune, so when they called on God, they made heaven ring".
5. Supportive community where slaves could experience and be sustained with new life and move with hope into the future. (Costen, 1993)

Through oral transmission, diaries, letters, and writings of observers, it has been determined that the "invisible institution" or church provided opportunities for fellowship, spiritual, physical, and emotional release, supportive sharing and community building, prayer, planning, and the singing and dancing to spirit-filled songs. In essence, the "invisible" church was the precursor to the visible institution which we know as the African American or Black church.

Scholars, theologians, and historians pose arguments as to whether or not the original African American church, i.e., Negro church, or Black church, still exists. Most agree that the focus and needs of the African American community have shifted. For this reason, it is thought that the African American church has also changed. Whereas the church was once a refuge and central to the social and political existence of the community, government and social agencies have assumed these functions.

The African American church continues to offer supportive structures which nurture the faith and distill encouragement to the people. It is still recognized as a resource for the care of wounded souls. This can be realized in an exploration of the natural and cultural traditions of grief support that are noted in the African American community and church.

#### Evidences of African American Grief Support

In order to facilitate an understanding of natural and cultural traditions in the African American community and church, it is helpful to make reference to William H. Willimon's book, Worship As Pastoral Care . In chapter five, "Liturgy and Life's Crisis: The Funeral", Willimon speaks of both formal and informal rituals as they relate to death and grieving. These rituals are essentially rites of passage which are defined as "ritualized journeys across life's most difficult boundaries." (Willimon, 1979). The following quotation represents a succinct statement on the importance of rituals for the creation of both natural and cultural traditions:

They give meaning to the changes in the status or role of persons, they reestablish equilibrium in persons and communities after the crisis of change, and they serve the educational function of transmitting to future generations what the community believes to be the meaning of that change. (Willimon, 1979)

Death can be experienced as a difficult journey that confronts individuals, families, communities, and churches. It creates both a personal and communal crisis. It requires personal and communal grief traditions for resolution or to help bring closure. An example of the formal traditions or rituals for both the African American community and church are activities which are related to the funeral.

### The Funeral

Many resources elevate the fact that traditions regarding African American funerals and grieving practices have their roots in Africa and the slave experience of blacks in America. I will refer to just a few of these sources.

In his dissertation entitled, "The Involvement of the Laity in the Ministry of Bereavement in a Black Urban Church," Dr. Earl Nathan Woodard includes a chapter which is titled "Death, Bereavement and the Black Experience." This chapter attempts to answer questions regarding death from both a Christian and an African American point of view. Herein, Woodard gives an explanation of the African's sense of time; the importance of remembering the departed by name even up to the fourth and fifth generation following death; the relationship between the living, and the living-dead (spirits of the dead who eventually pass into the

"collective immortality"); and, the transmission of some of these influences across the Atlantic. One particular carry-over which is noted is the practice in Mississippi of leaving out prepared food for spirits that might roam on Halloween night. (Woodard, 1990) He also mentions the practice of preaching the funeral sermon several days before the actual interment of the remains.

Another resource which has been mentioned earlier in this paper, is The Spirituality of African Peoples: The Search For A Common Moral Discourse. This informative book speaks to the importance of the funeral and the African connection:

As in Africa, no other family event is more significant among African peoples in the diaspora ...Then and now, the entire community rallied around the bereft family throughout the dying process, provided food, shelter, assistance with household chores, and any other helpful expressions of sympathy and good will. Sitting with the dying round the clock has always been practiced, due to the widespread belief that none should die alone as well as a strong belief that the dying are very close to the spiritual realm and, hence, a special blessing might be received from them just before they cross over. (Paris, 1995)

Thus, there is the thread of intentional communal support that exists not only for the bereaved but also for the dying. The community rallied in both tangible and spiritual ways to provide a sense of presence and support to whoever

had the need. Death, the all night wake, the funeral, and grief continue as both a formal and informal affair.

Before concluding this discussion, reference will be made to two previously mentioned sources. Dr. Melva Costen, in a chapter entitled "Rituals, Sacraments, and Ordinances," traces the importance of the funeral and the burial practices for both the African and the African American slave. She incorporates into her work the communal rituals regarding processions, and recessions to and from the grave, music and preaching, as significant points of passage for both the deceased and survivors. She summarily states, "funerals and burials were social events and a kind of sacralized therapy necessary for the family, friends, and the community to 'live on.'" (Costen, 1993) Funerals were a demonstration of respect for the living and the dead.

In regards to the significance of the preaching experience at the funeral, Dr. Edward Wimberly indicates that the role of the preacher is to facilitate and guide the grieving process. (Wimberly, 1979) The preacher, through sermons, worship, liturgy, reflections on the deceased, and music guides the communal or corporate experience of "how to" grieve. The funeral becomes an arena where the congregation is free to grieve corporately. They are free

to express "feelings" regarding the loss of a significant other.

### Implications of Literature Review for A Conceptual Model

The literature review provides the necessary foundational structure for a model for grief ministry. The literature also substantiates the necessity of working through grief. It not only supports the position that formal plans and structures are viable means of helping persons to manage their grief but also invariably states the importance of availability. Persons must make themselves available as care-givers. Persons must avail themselves of nurturing resources.

The literature search has also expanded my knowledge and understanding of grief. How grief is managed makes a statement concerning how life is experienced and survived. Grief and grieving cannot be ignored. This is a state that every person will confront, perhaps many times, throughout their given lifetime. This in itself speaks to the necessity and the validity of taking the time to equip parishioners with tools which will allow them to become vehicles or channels of hope and wellness for not only themselves but also for others.

The literature also supplies clinical and emotional symptomatology of grief reactions and indicates further concerns and issues for caregivers.

As it relates to the caregiver, the literature

suggests that congregations, i.e., laypeople, have the responsibility of providing support for grieving individuals and families. Laypeople who have experienced grief and managed grief themselves become better caregivers to the bereaved. The literature further suggests that people who grieve need partners, helpers, guides, and caregivers who are willing to enter into relationships that embrace hope and healing.

Three sources in particular assists in giving guidelines and structure to my thinking about this project. The doctoral study of Frank Neville is entitled "Training Selected Lay Persons for Effective Grief Ministry" (Michigan, 1982). In this study, Neville emphasizes that lay ministers or laity can be vital instruments in the outreach and extension of the church's grief ministry. To prove this point, Neville conducted training sessions, interviews and groups in order to prepare lay people to be prepared and trained in the area of caring for those who grieve. His resources and ground work are invaluable to me in this study.

The next source which gives structure to my thinking has been mentioned earlier. Marylou Hughes, in her book entitled, Bereavement and Support: Healing in a Group Environment, contributes greatly by providing ideas and suggested outlines for support groups sessions.

The final resource that I will mention is the Doctoral study of Ira Stanley Campbell. It is entitled,

**"Enhancing Church Members' Understanding of the Grief  
Process and Equipping Them To Minister To the Bereaved.**

**(Campbell, 1991) In this study, Campbell makes a valuable  
contribution to my project through his outline of the "do's  
and don'ts " of grief support ministry.**

## Chapter 3

### A CONCEPTUAL MODEL FOR GRIEF MANAGEMENT MINISTRY

The term model recurs throughout the pages of this project. By definition "model" is a representation or "ideal type". It involves both form and concepts. In this instance, it relates to a formal and structure plan and program for offering care and hope to those who grieve.

#### Biblical Basis

The model I am proposing is entitled doorkeeper/nurturer. The impetus behind this model is derived from Ps. 84:10b which reads "I would rather be a doorkeeper in the house of my God then to dwell in the tents of the wicked." (NIV) I became fascinated with the concept of service to the Lord on what would seem to be the fringes of temple existence. It is my contention that the doorkeeper has a strategic role in service to God and God's people. The idea behind this model is that the "doorkeeper/ nurturer" is one who maintains a presence on the fringes to function and serve as welcomer/ promoter, encourager/guide, partner/helper and, informer.

As to the identity of this person, the doorkeeper can be anyone who decides to get involved. This person makes a decision and a commitment to use his or her experience,

wisdom, and knowledge of life to engage others who come to an arena, crisis, or "passage" in life. Perhaps a good analogy for the doorkeeper would be that of the "wounded healer". This phrase is readily associated with the writing of Henri Nouwen. In his book titled The Wounded Healer, Nouwen states that "...no one can help anyone without becoming involved, without entering with his whole person in to the painful situation, without taking the risk of becoming hurt, wounded or even destroyed in the process." (Nouwen, 1972). The doorkeeper is one who is willing to take the risk of involvement in order to be in service to God and with and on behalf of others.

Another "glimpse" of the doorkeeper can be found in John 10:1-18. In this passage. Jesus refers to himself as both the "Good Shepherd" and the "gate". The good shepherd cares for the sheep and is willing to lay down his life for them. The shepherd does not run when trouble comes but stands firm offering life, healing, encouragement, and hope. In like manner, the gate allows safe passage to all who will enter. Jesus says that all who enter through the gate will be saved. Jesus is the gate and gatekeeper of hope and new possibilities for life. As it relates to grief management ministry, the doorkeeper's commitment is to stand

firm, offering hope of safe passage through the grieving experience and new possibilities for life beyond the death of a loved one.

The doorkeeper has both role and function. I will now address these functions and their biblical models. The functions include the doorkeeper as welcomer/promoter, partner/helper, encourager/guide, and informer/instructor.

### Aspects of the Model

#### Welcomer/Promoter

As it relates to grief support ministry, the promoter's function is to know and espouse the mission of the church. Necessarily, as it relates to grief support ministry, this would include being able to invite, communicate and advocate for a message of hope to any one in despair.

In Acts 3:1-11, there is recorded the story of Peter and John encountering a man crippled from birth. Each day, this man was carried to the temple gate called Beautiful so that he might beg from those who passed by. On a given day, Peter and John pass by, they look upon the man and say "silver and gold I do not have, but what I have I give to you. In the name of Jesus Christ of Nazareth, walk." (NIV) This is a stirring example of the function of the welcomer/promoter. The task of this individual is to witness to the mandate of the Gospel and the mission of the

church. The welcomer/promoter can not make promises that cannot be kept or supply that which is not attainable. The deceased cannot be brought back to life, nor can the situation be changed. However, this person can be instrumental in inviting and directing others to available resources such as support groups, prayer warriors, partners and other encouragers. This person's gift may not be to sit with someone. Rather, this person's task is to proclaim that there is hope.

#### Partner/Helper

The partner's function is to bond in such a way as to embrace in fellowship another person. The partner's focus is to be a helper and foster a cooperative effort toward healing and wholeness. The bereaved and the partner covenant, mutually agree, to work through the various stages of grief.

A great story that partially reveals this type of connection is found in Job 2:11-13. This is the story of Job's suffering and Job's friends. When Job's friends encounter him, Job has lost his children, his livestock, his wealth, and his health. His decline is so great that his friends do not immediately recognize him. They begin to mourn for him and with him. The scripture relates the story in this manner:

They raised their voices and wept aloud; they tore their robes and threw dust in the air upon their heads. They sat with him on the ground seven days and seven nights, and no one spoke a word to him,

for they saw that his suffering was very great.  
(Job, NIV)

The quiet visitation of Job's friends showed a tremendous level of commitment and partnership in supporting Job in his time of grief. His friends watched and prayed. They grieved right along with Job. The partner/helper serves this same function; to make a difference through presence, and co-presence, listening, patience, and support. They are able to sit in the midst of suffering and pain. They stand firm even when the winds of grief are forcefully blowing.

#### Encourager/Guide

The guide's function is to lead the way, model, direct, advise, one who is struggling with grief. The guide brings to this venture personal experience. The guide offers a purview of the journey through grief. The guide also is an encourager, by example, whose witness is that grief and bereavement can be survived.

One of the most poignant stories found in the book of Luke concerns a paralytic man. His friends desire for him to be healed by Jesus. Carrying him on a mat, they try to take him into the house where Jesus is teaching and healing. Finding the doorway too crowded, they take their friend onto the roof, lift the tiles, and lower him on his mat right in front of Jesus. The man is healed because of his friends' faith. (Luke 5, NIV) This passage of scripture generates excitement, enthusiasm, and energy. These men are

encouraging their friend and telling him that it is going to be all right. They tell him through their actions, "We know how to get you to Jesus. The teacher is going to heal you." This is the function of the encourager and guide. This person shares witness and experience. This person has experienced personal grief and says, "I lived! I worked my way through grief and so can you!" This person is equipped to guide others through the grief experience.

#### Informer/Instructor

The informer/instructors function is to share and communicate information that will be meaningful and productive to supportive healing encounters. This caregiver is seen in the role of support group facilitator, the grief instructor, the pastor. This person is responsible for providing the proper training, supervision, and even support for the caregiver.

In Acts 8:26-39, there is the story of the Ethiopian eunuch and Philip. Philip is led by the Holy Spirit to journey on the road that goes from Jerusalem to Gaza. On this road is traveling an important official who is in charge of the treasury of the queen of Ethiopia. This man, a eunuch, is reading from the Holy Scripture. When Philip approaches him to ask if the man knows what he is reading, the eunuch replies "How can I understand unless someone explains it to me?" Philip not only explains the passage but tells the man the Good News about Jesus. (GNB) The man becomes a convert and takes the good news back to Ethiopia.

The functions that have been outlined are each important in seeking to present a model for grief management support ministry. Each contributes a significant element in the healing process. Each involves commitment and self-disclosure. Each requires sharing in the pain and sorrow of another. It appears to me, that in grief management ministry, this model has relevance for those who would choose to serve persons who grieve.

## Chapter 4

### IMPLEMENTATION OF THE MODEL

In order to begin the work of training for grief management, it was necessary to inform church members of the beginning of the ministry and also to recruit those who had an interest in participating. This was accomplished through an announcement in the church newsletter and also from the pulpit during worship. Initially, persons were very slow in responding to the announcement. In the fall of 1996, I made a decision to include persons in the training who had some time passage from the death of their loved one. As a result, I obtained a church listing of persons who had experienced death in their families in 1994. Through telephone contact, I conversed with and invited ten of these persons to a grief management group. For a period of four weeks, beginning Sept 25 - Oct 16, the group met from 6:30pm to 8:00pm every Wednesday. This became the pre-test group.

At the first session, a questionnaire was introduced and administered in an effort to gain an understanding of each person's experience with loss. The questionnaire was also designed to determine the support, or lack of support which each person received during and after the time of the loss. After the second week, the group was impacted by

various situations with its members. One woman's husband became critically ill and was hospitalized for several weeks. Another woman's grief was so intensified by the sessions that she was unable to continue with the group. She acknowledged in one of the sessions that her loss was still too painful and she did not feel ready to work with anyone. Another woman acquired a debilitating illness which kept her homebound for several months. Two people (one male and one female) experienced death in their family which took them away and shifted their attention from the group to family needs. However, one did report that God had prepared her for the experience through the sessions they had attended. One man became the evening babysitter for his grandchildren. Three people actually completed the training and began the process of ministry to others.

It was very interesting to note that as the group's training began and circumstances arose within the family life of group participants, those remaining in the group became a support system for its missing members. Calls and visits were made. Cards were sent in an effort to extend encouragement and comfort. The group had bonded and forged to support each other.

The next session for training for grief management occurred in May, 1997. Nine persons signed up for this

training. Five of these persons came from the lay shepherd's ministry training that was done in February (more will be said about this later). This group agreed to meet for four Saturday mornings 10:00am to 12:00pm beginning May 17 through June 6. Of these 9 persons, 5 were actually assigned persons to contact. Of the other 4 persons: 1 had other ministry responsibilities; 1 was exploring grief ministry as a viable ministry; 1 was experiencing acute grief following the death of a son; 1 had recently lost her husband, and 1 did not continue in the process.

The five persons with assignments were asked to maintain some form of contact, i.e., personal visits, telephone calls, cards, etc., for a period of six to eight weeks. Three of them were able to keep this commitment. We will report and analyze the results of this activity later in this paper.

As a result of the lay shepherd's ministry and the lay counseling institute, two additional training opportunities became available. In February, 1997 (2/29), the associate pastor of nurture and care scheduled the initial training for the lay shepherds. I consulted with him about the possibility of providing instruction for the bereavement ministry aspect. With his consent, 15 people received 45 minutes of instruction in grief, its dynamics, and the

functions of the care-giver.

It is to be noted that although the training was abbreviated, it was very well received. Some of the feedback from participants was a concern about whether or not they would be required to do grief ministry as opposed to other forms of care-giving and support which would be required of the position. A degree of their concern arose from a personal lack of readiness to commit to the time that might be necessary for this ministry. In addition, it was very clear that there were participants in this ministry who were themselves struggling with both prolonged and new grief issues.

The training for lay counselors was held in July 19, 1997. It was scheduled for three sessions of one hour length with persons who were completing the necessary requirements to become lay counselors under the auspices of the lay counseling institute. During the three sessions, approximately 37 people from the Ben Hill UMC and the community actually received the instruction in grief management ministry.

At this time it should be mentioned that the doorkeeper/nurturer model was interwoven throughout the various training sessions. The four function areas of the model were incorporated into the four week training

sessions. In these classes, special emphasis was placed on both tasks and expectations of each care-giver. In addition, particular focus was given to the theology undergirding the model. The model was introduced in the other instructional opportunities.

The combined experience of all of these training sessions has yielded the fruit of nearly 50 people who have received some form of instruction in the area of grief management. Although not all of them have indicated a desire to serve in this ministry, I am pleased that twenty people have complied and committed to be involved in this ministry. This list will be made available to both the pastoral counselor and associate pastor of membership nurture and care.

## Chapter 5

### ANALYSIS AND EVALUATION OF THE DATA

The principal data for this study derive from the two questionnaires and the insights that were shared within the support group by participants in the training. The task at this point will be to analyze the questionnaires.

As was mentioned earlier the desired goal of the questionnaires was two-fold. The first questionnaire was developed to obtain background information on the participants experience of loss, and grief, and to assess as to whether or not there were nurturing support systems to help with the grieving. The second questionnaire posed questions regarding the training itself.

#### Questionnaire I

I collected 20 questionnaires from persons who were either in the 4 week training group or the lay shepherd's training session. Of the 20, 13 stated that they had suffered the loss of at least one relative or friend. Some of these respondents had endured multiple losses. One person indicated that the loss was that of a job. When asked "how did you respond to this loss?", 10 persons described one or more grief-related symptoms. 8 out of 20 responded that their grief was still unresolved. 11 people said they would have sought additional help had it been

readily available. 17 responded that they would be willing to help others with their grief work.

The evaluation of this material encouraged the following responses: 1) Loss of one type or another impacts every one, 2) Most people have some type of emotional or physical response to grief, 3) What proved to be helpful at the time of loss was believe in God (spirituality), friends, co-workers, and keeping busy; 4) Most people indicated they would have sought help apart from what they had; 5) Grief, as we know, takes time to be resolved. Perhaps we can say that it is never fully resolved. One respondent said that prayer, scripture, and keeping busy helped to contain the pain of grief; 6) People who have somehow managed their own grief are more likely to want to help others who are in a grieving situation.

### Questionnaire II

This questionnaire was administered 2-3 months after the training. A total of 14 questionnaires were collected. 5 of the persons who completed this questionnaire also completed Questionnaire I. The other 9 respondents were those who participated in the lay counseling institute training session.

Question 1 simply asks whether or not instruction have been received in grief management ministry.

Question 2 dealt with the level of impact of the grief management ministry informational meetings. Respondents were asked to rate the sessions on a scale of 1 to 5, 5 being the highest level of impact. The results were that 3 persons rated the sessions at 5; 8 persons rated the sessions at 4; 2 persons rated the sessions at 3; and, 1 person did not give a rating.

Question 3 asked the question of what was most meaningful: group sharing, group support, group instruction, or other. In every situation, it was the group sharing that was most valued. The group support was signaled as the second most meaningful experience. Group instruction was rated last.

Question 4 required a more subjective and substantial response. The question was asked as to whether or not anything was learned that had not been previously known. It was interesting to note that every one learned something. Some responded that they received affirmation regarding things that they had felt, thought, or experienced.

Question 5 was designed to assess whether or not the respondent felt more equipped to work with those who are grieving. Most responded that they had not worked with anyone yet but still expressed a willingness to do so.

Question 6 dealt with the functions of the caring model and how people verbalized their gifts for service. From the caring model, the function(s) which were most amenable to participants were the encourager/guide and the partner/helper.

The most rewarding aspect in obtaining the information from this questionnaire was the stories that people shared as a result of the training experience.

#### Case 1

Mrs. E. revealed that she worked in the field of social work. Although she had been able to recognize grief and had counseled with others, she had not been able to identify grief in herself. She told of a situation wherein she'd lost a baby and never grieved about this loss. The training was freeing for her. It provided the impetus for reflection and a time to re-examine her feelings. She was appreciative of the training session and noted that although she had seen the announcement regarding the grief management sessions, she did not volunteer to come forward. For her, it was valuable to have the training available through the counseling institute.

#### Case 2

Mr. G. expressed a sensitivity to the fact that he had never grieved the loss of his brother. He experienced the emergence of feelings that he realized he had been trying, unsuccessfully, to keep at bay. The session allowed him to experience other people's stories and listen for their grief. He said he was given permission to re-visit his own grief and reflect on the various aspects of his loss. He finds that he now has more patience and a greater tolerance for listening to others.

#### Case 3

Mrs. R. expressed appreciation for hearing about the dynamics of grief and a model for caring. She is working

with a friend who is dying and trying to help the friend's family make preparations for the change. The sharing offered support and suggestions as to how to proceed in this situation.

#### Case 4

Ms. N. reflected to her mother's grief and anger regarding the death of her husband. There seemed to be a tremendous need for the expression of forgiveness. Ms. N. expressed appreciation for the encouragement to allow her mother to tell her story in an atmosphere of acceptance. She recognized that her mother was still harboring angry feelings toward her father which was hindering her grief resolution or management. Mrs. N also expressed that there was obviously a need for the expression of forgiveness.

#### Case 5

Mrs. E acknowledged several losses in her life. The most difficult loss for her has been the loss of her father. The session encouraged her, yet put her on notice that she still has more grief work to do.

In summary, the questionnaires and the group sessions proved to be beneficial to the participants. The group setting allowed for free exchange of ideas and the sharing of wisdom and experiences.

It was stated that the abbreviated training for lay shepherds and lay counselors needed to be longer. This aspect will need to be negotiated with the pastoral counselor and the associate pastor of membership nurture and care.

Another bit of information that needs to be shared is that participants in the 4 week sessions expressed excitement and enthusiasm about the meetings. Also

noteworthy is the fact that they recognized the tremendous need for the ministry and the need for an increased number of participants.

## Chapter 6

### IMPLICATIONS OF THE PROJECT FOR GRIEF SUPPORT IN AFRICAN AMERICAN CHURCHES

The project indicated that there is still much more work to be done in the area of grief ministry, particularly as it relates to the African American church. For instance, the greatest handicap or drawback to the project and to grief resolution seems to be a general reluctance among the people to ask for help with those aspects of life that are emotional or spiritual. In a recent worship celebration for "All Saints Day", persons were asked to stand who had experienced death in their families within the past year. In three worship services, nearly two-thirds of the congregation stood. Only a small fraction of these people had contacted the ministerial staff for support or have participated in a grief support group. This is very much in line with the difficulty within the project to recruit persons who would be in ministry with others.

This paper has highlighted that historically, the African American church embraces a rich heritage of offering care and support to its people. It has been a life-line in the midst of suffering, disillusionment, and times of confusion. It has pointed its people to the grace of God and God's liberating love and concern for all people. Not

only this, but the African American church has been instrumental in facilitating the support structures of family and community.

The implication behind this study is that the African American church in some way needs to validate, re-capture, or gain permission to enter into the lives of its parishioners. It cannot exist apart from the people. Nor can the people exist, flourish and thrive beyond the boundaries of the church. The hurts and sorrows of life are so great that people need a refuge from the storm. They need a place where God's grace can still be found and experience.

We have also said in this study that opportunities to mourn are essential in the grieving process. If this is true, then part of our work as care-givers could be the establishment and re-establishment of grieving rituals. In some way, we must offer persons sanctions to take care of their grieving needs. The question for immediate investigation centers around how could these mechanisms be put into place so that the church could teach and/or re-learn signals and symbols of mourning.

## Chapter 7

### SUMMARY AND RECOMMENDATIONS FOR FURTHER STUDY

The full story of any one person's experience with grief is never really completed. It seems that as soon as one's situation becomes manageable another arises to draw attention. Therefore, grief resolution is an on-going process. As such, our greatest hope is that grief can be managed in such a way not to render the bereft helpless or overwhelmed as the journey through grief is taken. As a result of this study, I am even more convinced that it is important that the church prepare itself to engage in helping parishioners manage grief.

It seems that the most important factor for those who would work with those who grieve is to have an avenue or venue to inform, encourage, show, lead, and support parishioners in the awareness that grieving is both necessary and acceptable. The well-being of parishioners, indeed of all people, depends on their ability to do "grief" work or the "work of mourning". A significant role for care-givers may be to communicate or model that grieving is "OK" and that it will be "OK". Our function may be to make ourselves instruments of healing as we work through our own pain and help others work through theirs.

Recommendations which would be important for further study are as follows:

1. To determine methods of inviting more people to enter into the arena of grief management.
2. To help people overcome preconceptions that inhibit the expression of grief.
3. To explore avenues in which the African American church can validate its contribution to the nurturing of souls.
4. To explore symbols and signals for mourning.
5. To explore opportunities for outreach beyond the boundaries of the church.

## **APPENDIX**

Grief Management Training

Session 1 - Week One

Devotion (Scripture and Prayer)

Introductions

Goals and Objectives for the course

Questionnaire I and Handout "About Grief" - Discussion

Sharing Stories of Loss

"How to Care" - Doorkeeper Model

Closing

Session 2

Devotion (Scripture and Prayer)

Recapitulation of Last Week's session

Handout "Circle of Grief" and Discussion

Continuation of Loss Stories - related to the handout

"How to Care" - Doorkeeper Model

Closing

Session 3 - Week 3

Devotion and Prayer

Recap of Last Week, Questions and Concerns

Handout "Coping Skills Inventory" - Discussion

"How to Care" - Doorkeeper Model

Closing

**Session 4 - Week 4**

**Devotion (Scripture and Prayer)**

**Recap of Last Week's Session, Questions, Concerns**

**Handouts "Some of the Facts"**

**"Stress Survival"**

**"Scriptures to Facilitate"**

**"What To Say"**

**"How to Care" - Doorkeeper Model**

**Assignments**

**Closing**

**\*Questionnaire II administered**

**Lay Counseling Institute Training**

**Introduction**

**Handout and Discussion "Grief Management"**

**"Circle of Grief"**

**"What To Say"**

**"Scriptures to Facilitate"**

**Sharing Stories of Loss**

**\*Questionnaire II Completed**

**Lay Shepherd's Training**

**Handout and Discussion "About Grief"**

**"Circle of Grief"**

**Invitation to attend other sessions**

**\*Questionnaire I completed**

**GRIEF MANAGEMENT MINISTRY  
QUESTIONNAIRE I**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone No.: (     ) \_\_\_\_\_

Age: \_\_\_\_\_ Occupation: \_\_\_\_\_

Marital Status:    Single   Married   Divorced

Separated   Widowed   (Circle One)

Cau   B   Hisp   Asian   (Other, please specify)

1. Please state the nature of your loss(es): \_\_\_\_\_

\_\_\_\_\_

2. How long ago did this occur?: \_\_\_\_\_

\_\_\_\_\_

3. How did you respond to this loss?: \_\_\_\_\_

\_\_\_\_\_

4. What was most helpful to you during this time?: \_\_\_\_\_

\_\_\_\_\_

5. What were the available resources?: \_\_\_\_\_

\_\_\_\_\_

6. Would you have sought help had it been readily available?: \_\_\_\_\_

7. Do you consider your grief resolved?: \_\_\_\_\_

\_\_\_\_\_

8. Would you be willing to help others with their grief due to loss?: \_\_\_\_\_

9. Would you participate in a 6 week study to help your understanding of grief and learn to do grief support ministry?: \_\_\_\_\_

\_\_\_\_\_

## ABOUT GRIEF

I. Definition: "Grief is the emotional, physical, and spiritual response to the loss or anticipated loss of someone or something in whom or in which one has been invested. The more one loves, the more acute the pain will be at the separation from the beloved."

II. What We Can Grieve For: loss of job; loss of status; loss of expectations for life; loss of items; loss of pets; loss of special friends; loss through death.

III. Persons Who Have Helped Us in Our Understandings:

1. Elisabeth Kubler-Ross
2. Sigmund Freud
3. Eric Lindemann

All of these persons worked in the area of "thanatology" which is the study of human reaction to death.

IV. The Grief Process:

The grieving process can be regarded as a journey. When an individual is going through grief, they are doing "grief work." There will be both emotional and physical symptoms.

V. Stages of Grief

1. Acute phase: marked by numbness, and denial. Denial is a "defense mechanism" to protect the mind and the body from what it cannot handle.
2. Transition phase: marked by anger (maybe at God or the deceased), bargaining.
3. Acceptance phase: Depression (natural reaction to acceptance that a situation cannot be changed), peace, inner harmony, wholeness.

VI. Our Task

Our task is to help the grieved realize the loss; accept the loss, and prepare to re-invest in life without their loved one.

## VII. How

1. Listening to the story. Also listen for feelings behind the story.
2. "Abiding" with them in a ministry of being as opposed to doing.
3. Giving assurance through our own stories that the reactions to grief are normal and that there is life beyond the loss.
4. Recognition of significant anniversary dates: date of loss; wedding anniversaries; birthdays; other significant occasions.

GRIEF MANAGEMENT SURVEY  
Questionnaire II

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE NO.: (    ) \_\_\_\_\_

1. Have you been instructed in the grief management ministry? (circle one) yes    no
2. How would you evaluate on a scale from 1 to 5 its impact on you (5 being the highest)  
5            4            3            2            1

3. What was most meaningful? (check your response)

group sharing \_\_\_\_\_

group instruction \_\_\_\_\_

group support \_\_\_\_\_

other (please specify) \_\_\_\_\_  
\_\_\_\_\_

4. What did you learn about grief that you did not know?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Since completing your instruction, have you had an opportunity to use what you have learned? \_\_\_\_\_  
\_\_\_\_\_

6. Could you define what you do in one of the following ways?

Welcomer/promoter:

Encourager/guide:

Partner/helper:

Informer:

Other: (specify) \_\_\_\_\_

## GRIEF MANAGEMENT

Grief is a normal response to a situation of loss. Whether it is a person, a job, an image, a pet, or anything that is valued, the outcome is grief.

### I. Terms associated with grief as it relates to death:

1. mourning - is the process that the grieving person goes through
2. bereavement - is the state of having experienced a loss.

### II. Grief has physical, psychological, social, emotional, and spiritual ramifications.

#### List developed by Dr. Erich Lindemann:

1. "waves" of physical distress
2. tightness in the throat, choking
3. shortness of breath
4. sighing
5. an empty feeling in the stomach or digestive complaints
6. weakness
7. tension
8. poor appetite
9. feeling of unreality
10. withdrawal from others
11. preoccupation with the image of the deceased
12. inability to initiate and maintain organized patterns of activity
13. hostile reactions or irritability

#### *Types of Grief Reactions*

1. Anticipatory - while you are awaiting the actual happening
2. normal grief
3. abnormal or prolonged grief
4. acute grief

**How do we manage grief**

- 1. We accept grief for what it is - a normal reaction**
- 2. We understand that grief can be survived and that it is a journey. It may last as long as 24 months.**
- 3. We can work on our own grief issues while we are helping others with theirs.**

## MODEL FOR GRIEF MANAGEMENT - DOORKEEPER/NURTURER

Grief Management comes as a result of the participation of caring persons who themselves have experienced grief. These persons are care-givers because they are willing to share themselves and their witness with others.

### I. A Model for Grief Management

A. Partner/Helper - persons covenant together that they will work together through the various stages of grief. This can be an informal contract.

1. Regular or frequent contact through phone calls, visits, and invitations to outings.
2. Associated Tasks
  - a. listen
  - b. be available
  - c. non-judgmental attitude
    1. will need to be able to accept expressions of anger and guilt.
    2. will need to be able to accept times of regression or lack of movement.
  - d. respect boundaries of the bereft and be aware of personal boundaries.
    1. recognize that there are things you are not comfortable doing.
    2. be aware of your limitations.
3. Function - prayer partner and confidant
  - a. maintain confidentiality
  - b. share your concerns.

B. Encourager/Guide - Lead, model, direct, and advise one who is struggling with grief.

1. Establish and maintain contact through visits and phone calls.
2. Tasks
  - a. be supportive and encouraging
  - b. offer hope through reflection of God's love and presence.

1. relate pertinent details of your journey of survival.
    - a. may introduce journaling
    - b. writing a letter to the deceased
    - c. acknowledging significant dates regarding the relationship with the deceased.
- C. Welcomer/Promoter - Communicate to others what the institution of the church offers in the way of support.
1. Initiate contact through visit or phone call.
  2. Acknowledge loss and offer expressions of sympathy and condolence.
  3. Inform bereft of the church's ministry of grief management.
  4. Tasks
    - a. be informed regarding available resources and persons to be contacted.
    - b. be informed and inquisitive regarding support systems, i.e., in the church, community, and family.
  5. Grief support groups
    1. compassionate friends
    2. bereavement support
- D. Informer/Instructor - Holds a more formal instructional or facilitating role in grief management.
1. Facilitates instructional groups
    - a. teaches the fundamentals of grief support.
    - b. has an understanding of group dynamics.
  2. Tasks
    - a. interprets the mission of the church to others
    - b. interprets the mission of Jesus and God as redeemer, deliverer, and counselor
    - c. offers avenues of hope.



Dear

This note comes as a sincere expression of concern and sympathy for your loss. Please know that we are praying for you during this time of transition.

We know that the days ahead may be difficult as you grieve for your loved one. The assurance that the word of God gives to us is that we are not alone but that God is with us. God does not intend for us to be alone or comfortless.

In the coming days, a representative from the "grief management" ministry will be contacting you. It is our hope that this person will be of great help to you as you make the adjustment to life without your significant other.

Please receive this person as an instrument of God's love for you. We are in ministry together.

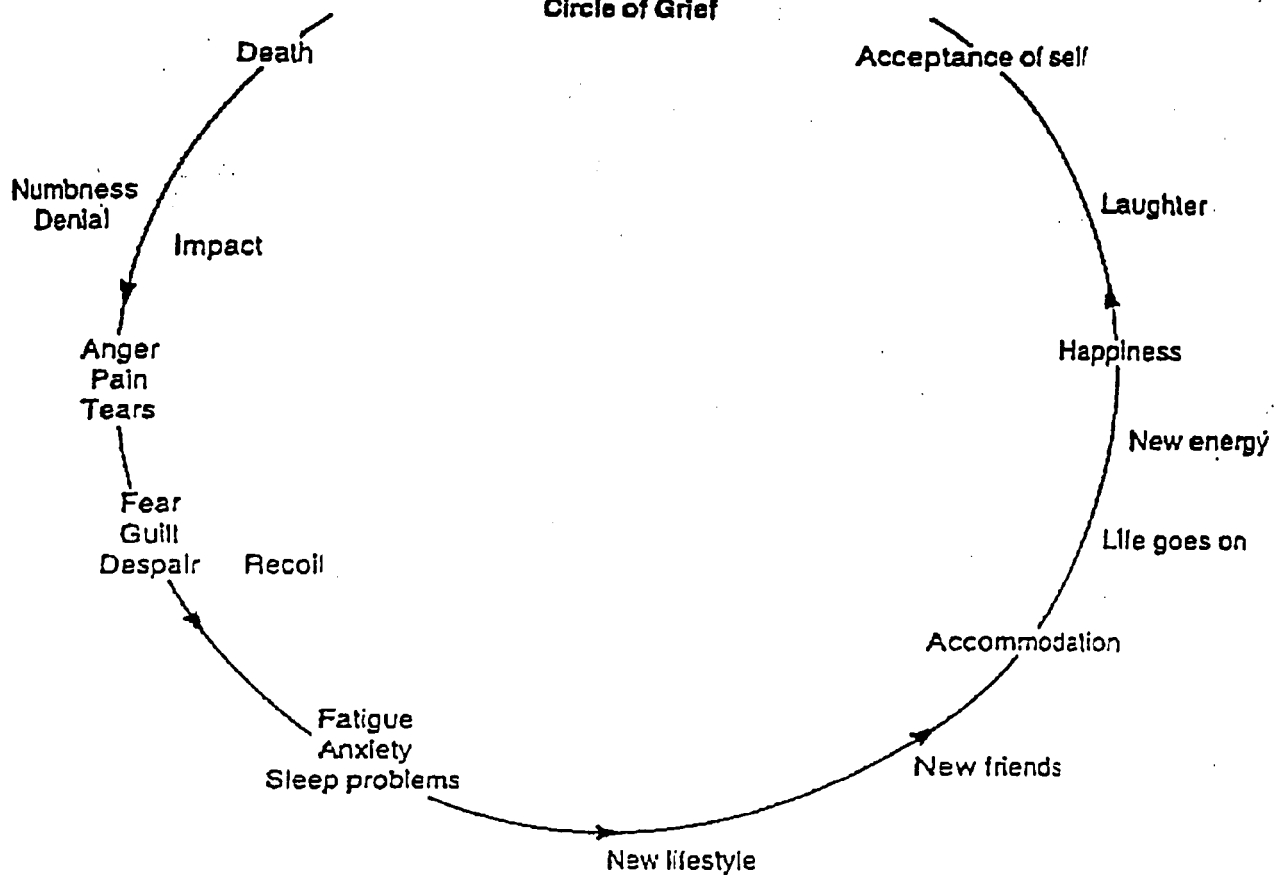
In grace, sincerity, and hope,

Rev. Carol N. Helton

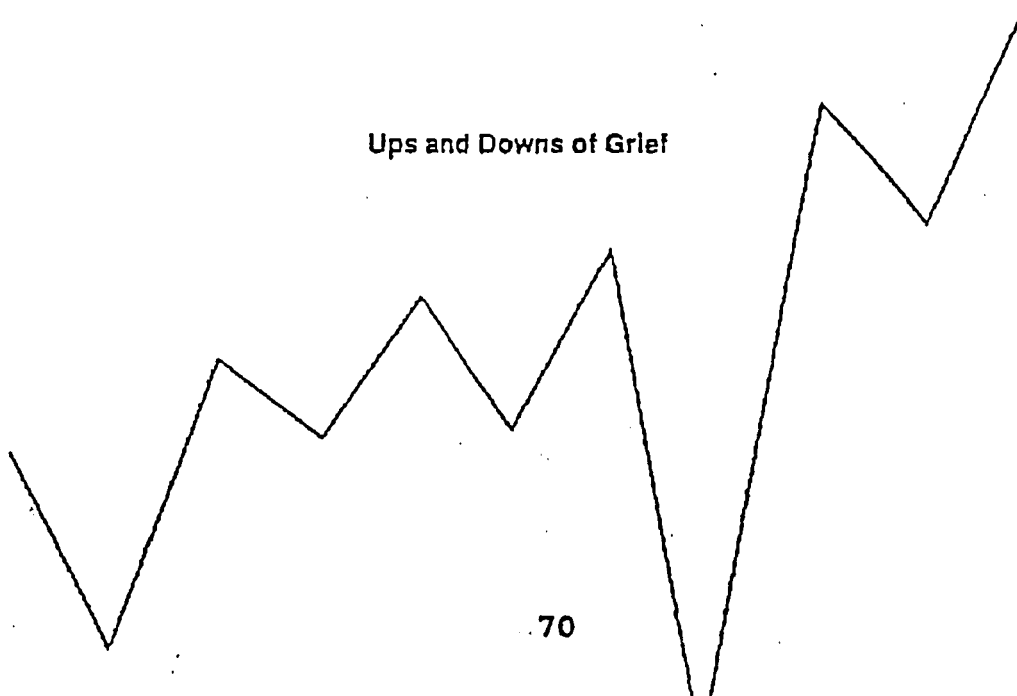
Grief Workshop Study Questions

1. Grief is a normal reaction to any significant loss.
2. Normal grief can be resolved in a reasonable amount of time.
3. Complicated or prolonged grief may require grief therapy or intensive counseling.
4. The overall goal of grief counseling and support is to help a survivor complete unfinished business with the deceased, be able to say good-bye, and realize that there is life beyond the death.
5. Grief counseling and support should begin a few days after the funeral.
6. Grief support can be offered to anyone who experiences a loss.
7. In grief counseling and support, it is important that the survivors be encouraged to talk about the loss. People need the opportunity to tell their story.
8. A major tool which the grief counselor must have is the ability to listen.
9. Feelings such as anger, guilt, anxiety, fear, and helplessness are problematic for survivors.
10. Grief has physical manifestations such as "waves" of physical distress, tightness in the throat or chest, shortness of breath, sighing, a feeling of emptiness, poor appetite, inability to sleep, irritability.
11. Developing a relationship with the survivor is an important aspect of grief support.

# HANDOUT Circle of Grief



## Ups and Downs of Grief



# Coping Skills Inventory

When you have problems and are under stress, which of the coping mechanisms do you use? Check all that you have used or are using. Then go back over this list and note which of your coping methods are constructive and which are destructive. Make plans to replace the destructive and dangerous techniques with more positive ones. What coping skills do you have that are not on the list? Add them.

1. Work on projects that take concentration.
2. Buy something.
3. Go to bed.
4. Drink alcohol or take mind-altering drugs.
5. Talk about it with others.
6. Read up on the problem.
7. Lose yourself in a good book.
8. Become physically ill.
9. Get professional help.
10. Blame someone.
11. Fix what is broken.
12. Put it out of your mind.
13. Eat more, or less.
14. Exercise,
15. Rant, rave, and curse.
16. Stick to a schedule
17. Go for a walk.
18. Cry.
19. Try to look at the bright side.
20. Try to see the humor in the situation.
21. Pray
22. Meditate
23. Look for other options or alternatives.
24. Say no.
25. Try something else.
26. Blame yourself.
27. Find an expert to help.
28. Tackle the problem and get it our of the way.
29. Put it off-give yourself some space.
30. Problem solve.
31. Ignore it.
32. Take a chance.
33. Accept it.
34. Hope for a miracle.

35. Escape.
36. Day dream
37. Wait to see what will happen.
38. Keep it to yourself
39. Find something else to do.
40. Work at your hobby.
41. Write.
42. Give yourself a treat.
43. Become moody.
44. Play with your pet.
45. Sit in a hot tub.
46. Hope for the best.
47. Expect the worst.
48. Get more information.
49. Analyze the problem.
50. Do something for someone else.
51. Listen to music.
52. Get a message.
53. Work on a puzzle.
54. Watch television.
55. Go to the movies.
56. Live for today.
57. Correct mistakes.
58. Figure out what you want.
59. Clean house.
60. Mow the lawn.
61. Get on the telephone.
62. Talk to yourself.
63. Sing.
64. Pretend everything is all right.
65. Put it off.
66. Journal.
67. Take a drive.
68. Write a letter to the deceased.
69. Release it to God.

No coping mechanism is all bad. None is all good. Some will give short-term help. Some will help in the long run. None will help everyone all of the time. You will develop your own list of coping skills that work for you.

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\*Adapted from "The Development and Implementation of a Grief Support Group Program," Whitford A. Shaw, Doctoral Thesis, Andrews University, 1994.

## Stress Survival

1. Exercise. Physical exercise changes the body chemistry. Endorphins are manufactured. Endorphins make you feel better.
2. Do something you enjoy that requires your concentration. This will distract you from your present stresses.
3. Do something for someone else. This will increase your self-esteem and give you a feeling of satisfaction.
4. Start and finish a short-term project. This will give you a sense of completion and accomplishment.
5. Sign up for lessons to learn something new. This will aid you in self-discovery, expand your thinking, and bring a new interest into your life.
6. Do something nice for yourself. See yourself as a person who deserves good things in life.
7. Keep up old relationships and try to make new ones. You need a support system.
8. Say yes. Say yes to invitations. Do not cut yourself off from experiences and opportunities.
9. Say no. You do not have to do anything that does not seem right to you.

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\*Adapted from "Enhancing Church Members' Understanding of the Grief Process and Equipping Them to Minister to the Bereaved." Ira Stanley Campbell. Doctoral Thesis. Golden Gate Seminary, 1991.

Appendix 11

SCRIPTURE TO FACILITATE THE GRIEF MANAGEMENT MINISTRY

1. I am the Lord, and there is no other; apart from me there is no God. I will strengthen you. (Is. 45:5)
2. My salvation will last forever. (Is. 51:6)
3. The Lord comforts his people. (Is. 49:13)
4. I will not forget you. (Is. 49:15)
5. I have made you and I will carry you; I will sustain you and I will rescue you. (Is. 46:4)
6. Do not be afraid for I am with you. (Is. 43:5)
7. Those who hope in the Lord will renew their strength. (Is. 40:31)
8. In your love you kept me from the pit of destruction; you have put all my sins behind your back. (Is. 38:17)
9. You will keep in perfect peace him whose mind is steadfast because he trusts in you. (Is. 26:3)
10. Your ears will hear a voice behind you, saying, "This is the way, walk in it." (Is. 30:21)
11. You will weep no more. How gracious the Lord will be when you cry for help. (Is. 30:19)
12. The Lord longs to be gracious to you. (Is. 30:18)
13. Before they call I will answer, while they are still speaking I will hear. (Is. 65:24)
14. I will turn their mourning into joy. (Jere. 31:31)
15. Though I walk through the valley of the shadow of death, I will fear no evil, for you are with me;

your rod and your staff, they comfort me. (Ps. 23:4)

16.I am still confident of this: I will see the goodness of the Lord in the land of the living. (Ps. 27:13)

17.When I was in distress, I sought the Lord. (Ps. 77:2)

18.Blessed are the poor in spirit, for theirs is the kingdom of heaven. (Matt. 5:3)

19.Blessed are those who mourn, for they will be comforted. (Matt. 5:4)

20.Do not worry about tomorrow, for tomorrow will worry about itself. Each day has enough trouble of its own. (Matt. 6:34)

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\*Scripture comes from the New International Version of the Bible.

SOME FACTS OF LIFE AFTER DEATH

1. People want you to be "fine" not unhappy.
2. It is a couple society.
3. You may feel that you are going crazy.
4. Tears come unbidden.
5. Physicians want to give you medication.
6. Finances change, frequently for the worse.
7. Some friends and acquaintances drift away.
8. Skills that have not been used have atrophied and need to be relearned.
9. There is anger, and guilt about the anger.
10. You may question your faith.
11. People do not know what to say to you.
12. People will try to comfort you by saying "It is for the best."
13. Widowers may remarry soon. Widows probably won't.
14. Sex is a problem.
15. You feel vulnerable to exploitation.
16. You feel incomplete. Something is missing.
17. There are Whys and If Onlys.
18. People may avoid talking about the deceased, thinking that they do not want to upset you.
19. Chronic health problems flare up.

20. People will want to give you advice or tell you what to do.

21. Relationships change.

22. There is the need to search for direction or a new meaning to life.

23. Roles change.

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\*Adapted from "Enhancing Church Members' Understanding of the Grief Process and Equipping Them to Minister to the Bereaved." Ira Stanley Campbell. Doctoral Thesis. Golden Gate University, 1991.

## "What To Say And Do When Someone Is Grieving"

### I. Some Things To Do And Not To Do

#### A. Things To Do

1. Be there.
2. Talk less, Listen More
3. Attend the Funeral Service
4. Give a hug
5. Write a note
6. Give a gift
7. Extend an invitation
8. Offer practical assistance
9. Call and visit
10. Be patient with the bereaved
11. Allow people to grieve
12. Ask how you can help

#### B. Things Not To Do

1. Be afraid to mention the name of the deceased
2. Use cliches and superficial explanations
3. Mention remarriage
4. Assign the role of the deceased parent to the eldest son or daughter
5. Force people into relationships before they are ready
6. Be critical of the Widow/Widower for dating too soon
7. Give unsolicited advice
8. Tell hard luck stories

### II. Saying The Right And Wrong Words

#### A. What Not To Say

1. Don't cry
2. Be brave
3. You'll get over it
4. You shouldn't feel that way
5. Pull yourself together

6. Come on! Get a hold of yourself
7. No use of crying. The past is the past
8. Be glad your marriage was ended by death and not divorce
9. At least he's out of his misery
10. It must be really hard not knowing if he was a Christian or not
11. Be glad it wasn't one of your children
12. Losing your husband this young should make it easier for you to adjust
13. You'll get married again
14. You're lucky enough to be young enough to have other children
15. Are you going to try to have another baby
16. Time will heal
17. It was God's will
18. God needed another angel
19. It's a blessing
20. It's okay, he lived a long life
21. God never gives us more than we can handle
22. I know just how you feel
23. Let me know if there's anything I can do
24. Your faith just wasn't strong enough
25. You wouldn't want him back now anyway
26. When it's your time to go there is nothing you can do about it
27. God knows what's best
28. We're not supposed to question God
29. Now dad, don't talk like that
30. At least he's not suffering anymore

#### A. What To Say

1. You must feel as if this pain will never end.
2. I'm sorry this had to happen.
3. This must seem like more than you can handle.
4. Don't feel as if you need to be strong for me.
5. It's okay to cry.
6. Some things just don't make any sense.
7. I just don't know what to say.
8. I'll call tomorrow to see how I can help.

### III. Suggestions for Talking With People in Grief

- A. Realize that nothing we do or say can reverse a grief situation.
- B. Remember that silence can say more than words.

- C. Be there to listen.
  - D. A sincere "I'm sorry" is okay.
  - E. Offer a remembrance.
  - F. Make specific offers of assistance.
  - G. Allow for the full range of emotions.
  - H. Allow the conversation to lag.
  - I. Let the bereaved take the conversational initiative.
  - J. Don't be afraid to touch.
  - K. Make use of prayer.
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\*Adapted from "Training Selected Lay Persons for Effective Grief Ministry." Frank Everett Neville. Doctoral Thesis. Michigan: University of Michigan, 1982.

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