

White Paper: Grief in American

Americans are decidedly grief avoidant. Why? What's at stake if the country doesn't reckon with our grief culture?

By the end of the 1918 flu pandemic, an estimated 675,000 people had died across the United States, ten times more people than were killed in the First World War and as many as were killed in the Civil War. Yet, the crisis was "virtually forgotten in the American consciousness within just decades, as the public focused instead on the optimism of the era, particularly when it came to the development of modern medicine." This, historian Nancy Bristow notes, left many Americans in a kind of emotional lurch. "Some Americans felt only grief [in the aftermath of the pandemic], and lived quietly for decades to come with a profound sense of loss." (Stat News)

One hundred and four years on, a similar avoidance of the reality of grief and loss appears to be creeping on us. Since 2020, more than one million people have died from COVID-19 in the U.S., the largest number of deaths from the virus in a single country. Each person who has died from COVID-19 leaves nine people in grief.

Yet, the national conversation about the pandemic has been quiet on grief and loss. People living with COVID-related losses told journalist Ed Yong, "that their individual tragedy was subsumed by the pandemic's enormity, and that people were constantly discussing every aspect of the crisis *except* for grief." (The Atlantic).

We have also been amid push toward forward momentum, animated by a desire to leave the pandemic behind. It is conceivable that this is partially a result of fatigue from the constant vigilance and fear that has governed daily life as the virus and attendant uncertainty spread through communities.

But the tendency to rush out of painful experiences is also emblematic of a classically American discomfort and impatience with difficult emotions like grief.

"I think many people feel a version of what I've felt, which is that they don't know how to grieve in American culture," writer Meghan O'Rourke observes. O'Rourke is among a cadre of Americans in grief and the people who support them who have chronicled the nuances of the country's grief distortions.

Among the themes that predominate their observations: the idea that many Americans expect grief to be relatively linear and predictable. In a 1989 paper that remains relevant today, bereavement researchers Camille B. Wortman and Roxane Cohen Silver outline myths about grief that drive these attitudes, including the idea that grief is something people "work through" and that recovery lies at the end of that work. "It is generally assumed that although a person who experiences an irrevocable loss will go through

¹ For context, the U.S. population is 4.25 percent of the world population, but at 1.02 million, the country accounts for more than 15 percent of global COVID deaths. And while there are <u>epidemiological explanations</u> for this high death rate, there is a consensus that the U.S. death rate from COVID is inconsistent with its characteristics/resources.



a phase of intense distress, this will not last indefinitely. In fact, after a relatively brief period of time, the person is expected to achieve a state of recovery and return to normal functioning," they write.

In pop culture, the idea that people move through five stages of grief (denial, anger, bargaining, depression, and acceptance) continues to hold much sway (tvtropes.org). Many assume that these stages are linear, but that notion distorts the framework that Elizabeth Kübler-Ross developed. As Allan Kellehear at University of Bath's Centre for Death and Society observes the stages were never meant to be viewed as linear or prescriptive of grief experiences. "These stages [were] merely a set of categories artificially isolated and separately described so that [Kübler-Ross could] discuss each of these experiences more clearly and simply." (Elizabeth Kubler Ross Foundation)

Dr Alan Wolfelt of the Center for Loss and Life Transition, who calls these linear ideas about grief the "North American resolution wish" (The Atlantic), observes that there is a tendency to pathologize grief experiences that don't fit easily into existing frames. When the American Psychiatric Association recently identified "Prolonged Grief Disorder" as a new diagnostic category, Wolfelt expressed concern that the definition grows out of a larger American discomfort with grief. From the Center for Loss and Life Transition, "[Dr. Wolfelt's] belief is that pathologizing grief and mourning only compounds our unhealthy cultural stigmas surrounding death and grief, and that this new diagnosis is a projection of our social taboos against despair."

What lies beneath these grief distortions in American culture? Pauline Boss, an expert on ambiguous loss (the kinds of losses which, by their nature have no resolution, such as the disappearance of a loved one) finds them to be rooted in the country's mastery orientation (On Being). The term describes "an adaptive pattern of achievement behaviour in which individuals enjoy and seek challenges, and persist in the face of obstacles." (Association).

Mastery orientation is typically a good thing; in education and sports, "psychologists tend to agree that a mastery orientation is highly adaptive and carries the most positive qualities, including perseverance, seeking out challenges and a desire to learn" (Stanford University News).

Boss agrees. "We like to solve problems. We're not comfortable with unanswered questions... That's a good thing, by the way. It is probably what has made our society great and has made technology so wonderful and cures for diseases," she says. "But here's the crux: Now and then, there's a problem that has no solution. Now and then, there are problems that don't have a perfect fix."

Few fields embody the impulses of mastery orientation as much as the medical sciences. A desire to deepen understanding and improve processes is invaluable for life-saving, cutting-edge research. But as physician and writer Atul Gawande observes, this traditional posture in medicine can be unhelpful in preparing patients and their families for death.² "In medicine, when we are up against unfixable problems, we're often unready to accept that they are unfixable," he says (Being Mortal Doc | PBS).

To momentarily state the obvious: these attitudes about death and grief are harmful. They leave people in grief without much support from their communities as we see playing out in the experiences of people

² Death was not always the province of the medical field—in previous eras, people died at home, under the care of family/community members and ideas about death and grief drew primarily from religion. One writer argues that this shift of death matters to the realm of medicine partly explains the troubled relationship with grief across western countries.



facing COVID-19 related losses (<u>The Atlantic</u>). Individuals in grief themselves may also may harshly evaluate their own responses and may believe them to indicate underlying problems or pathology.

Whole societies too may live out dysfunctions when emotions are repressed, an idea that feels especially true of the U.S. As Pauline Boss notes, "We are a nation founded on unresolved grief." From the genocide of Native American peoples, to slavery, and the Civil War,³ there is much violence, death, grief and loss in the country's foundational stories. Boss notes that these repressed experiences get passed down through generations, creating "a society of suffering." If the U.S. feels tumultuous in this moment, perhaps the trouble lies partly in the unacknowledged histories of harm and grief and violence.

One American in grief expresses a longing for relief from our grief repressions: "the act of pressing close to death, looking at it straight on... would be cathartic and scarring and honest—like it would be important."

Other insights/anecdotes that illustrate the U.S.'s poor relationship to grief.

- <u>Bereavement Leave</u>: There is no federal provision for bereavement leave. Only two states— Oregon and Washington—currently require employers to provide provisions for bereavement leave. Illinois requires leave only for companies that have a staff size of 50 or more; Many companies do provide some bereavement leave but few offer more than five days. By contrast, Denmark provides employees who lose a child with up to 26 weeks of unpaid leave. (<u>Vacation Tracker</u>)
- Quotes from articles about the realities of grief and death:
 - 'We have a knack for gliding over grief even in literary works where it might seem to be central, such as "Hamlet" and "The Catcher in the Rye." Their protagonists may be in mourning, but we tend to focus instead on their existential ennui, as if the two things were unrelated.' –Meghan O'rourke in the New Yorker

Other resources/helpful articles:

1. *The Myths of Coping With Loss* by Camille B. Wortman and Roxane Cohen Silver, in the Journal of Consulting and Clinical Psychology in 1989.

Silver and Wortman review of existing research about grief experiences to test the myths about grief that dominate U.S. culture. They identify five myths: that distress and depression are inevitable; that failure to experience distress is indicative of pathology; that it's important to work through loss; that people will recover from grief, and that they will reach a state of resolution. They find these myths to be lacking when cast against existing realities for people in grief. Read more

³ Repressed grief also carries into more recent U.S. history. For instance, reflecting on the grief response following the 9/11 attacks, one rabbi writes, "Our unresolved grief as a country morphed into rage — and then found an easy target in the American Muslim population" (<u>The Wisdom Daily</u>)



- 2. Meghan O'Rourke's writing/conversations on death in the U.S. features a lot of gems. Two pieces for your consideration:
 - o In the New Yorker, Good Grief
 - o In Foreign Policy, The Exchange: Why Americans Can't Cope With Trauma
- 3. 5 Myths about grief in western cultures, according to Russel P. Friedman of the Grief Recovery Institute (via WebMD):
 - o Don't Feel Bad
 - Replace the Loss
 - Grieve Alone
 - o Time Heals all Wounds
 - Be strong for others
 - Keep busy
- 4. A corrective to the cultural misread of Kubler-Ross from her foundation. Key ideas:
 - First, On Death and Dying was never a study of grief and bereavement. It was a
 discussion of some key emotional reactions to the experience of the dying.
 - Secondly, the so-called "stage theory" that you will read in this book is openly described and discussed as a heuristic device. In other words, these stages are merely a set of categories artificially isolated and separately described so that the author can discuss each of these experiences more clearly and simply.
 - Thirdly, many of the "stages" of the dying described in the book have been subsequently simplified and publicly caricatured beyond recognition.
 - Fourthly, and rather inexplicably, On Death and Dying has regularly been mistakenly and mischievously construed as a research study. It is a popular book of description, observation, and reflection based upon a series of dialogues with dying people.
- 5. Americans' views of human suffering.

— Dupe Oyebolu for The Mash-Up Americans