

A Primary Care Approach to Bereavement

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How the model was formed

- Personal experience and GP experience
- Noticed training gap
- Lack of resources for education
- Managing loss can be daunting

However, in Primary care:

- Managing loss is a **regular** / daily occurrence
- Can offer **long term** support
- See patients for **short** but often frequent interactions over that time

- Wanted to create a model that resonated with GPs, parallels to other consultation models and easily applicable.

Features of the model

Consultation model as opposed to a biomedical model or a description of grief

Non – linear

Contains ‘ tools ‘

Universally useful

Based on current literature (Bereavement support in primary care)

Aims to sit along-side Modern Grief Theory/
Current Neuroscience

Use of the model in teaching and training

Our Aim is to :

Disseminate more widely and cascade learning

Work towards RCGP endorsement

Improve curriculums for GP and AHP (Allied Health Professional) training

Improve funding streams

Work together with NES- shared goals

Share resources across 4 nations

Learning objectives

Why a toolkit?

What do we already know?

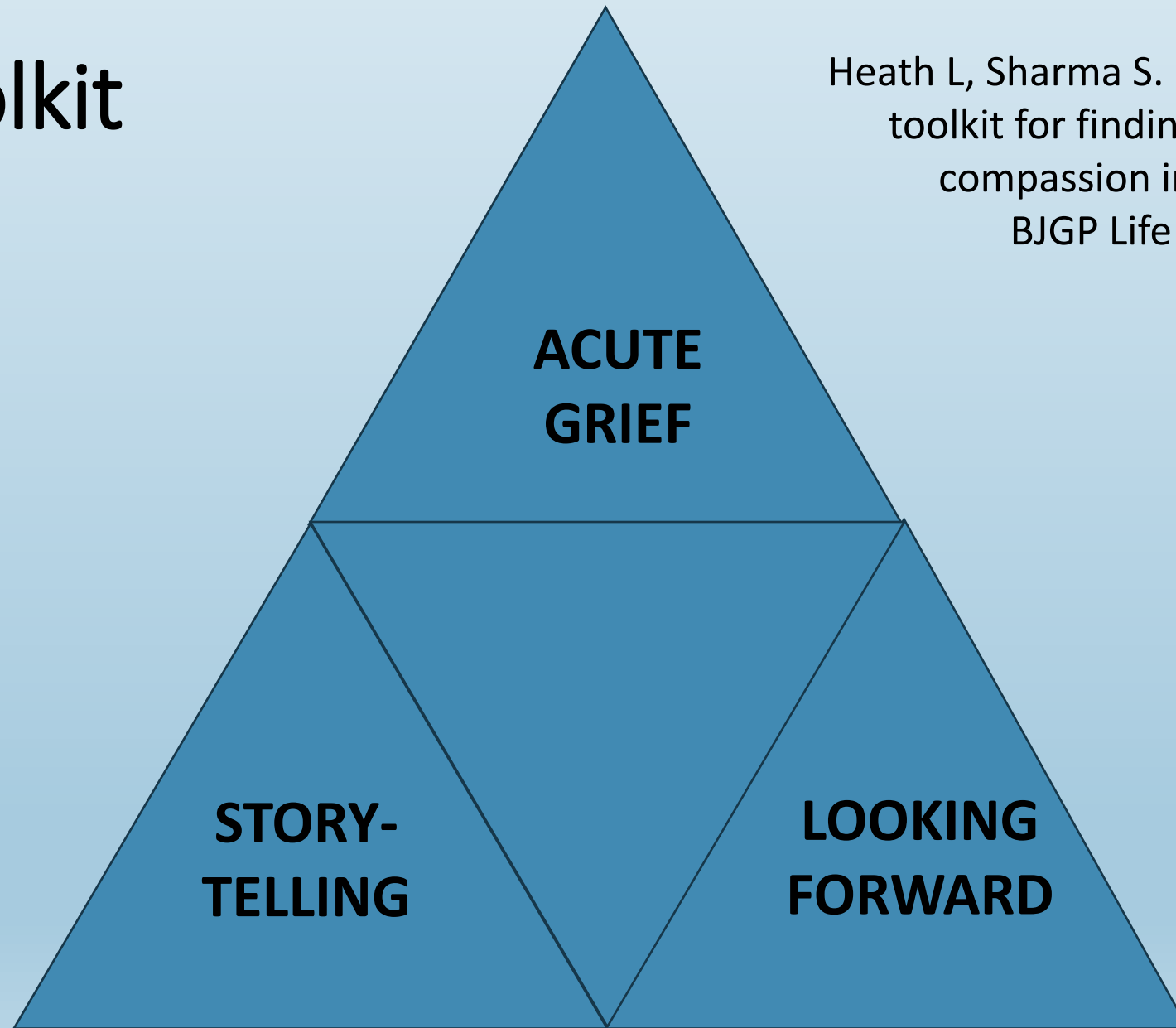
Modern grief research

Our toolkit and how you might use it

Resources

Our toolkit

Heath L, Sharma S. Bereavement Care: a toolkit for finding connection and compassion in consultation.
BJGP Life April 2022



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Why?

Grief is common

Widely reported negative effects of grief on mental and physical health

Diverse manifestations of grief – physical symptoms as well as emotional distress

Managing loss is bread and butter primary care work

It can make us feel helpless – time consuming, lack of experience

Many of us have had little education regards modern understanding of grief

Grief is common

Half a million people die in England and Wales every year

1 in 20 young people experience the death of a parent

Up to 1 in 5 pregnancies end in miscarriage

Covid19 pandemic associated loss

Other kinds of loss - a job, a house, one's health

RCGP 'Very Brief Advice' 2021

- Thoughtful and extensive recognition of huge amount of grief experienced during the covid pandemic
- Task group including Marie Curie and Cruse
- 'acknowledge, ask, advise, act'

Very Brief Advice Framework for those grieving

A Compassionate Bereavement Response



A few minutes to share kindness

Taking a moment to stop and listen can make a difference

Health outcomes after grief

- Death of a spouse is associated with a significant rise in death from any cause
- Disease burden in general is higher, but greater increase in mental illness and circulatory system disease
- More likely to consult GP/emergency services in the year after a bereavement
- Around 10% of people develop complicated grief

Learning objectives

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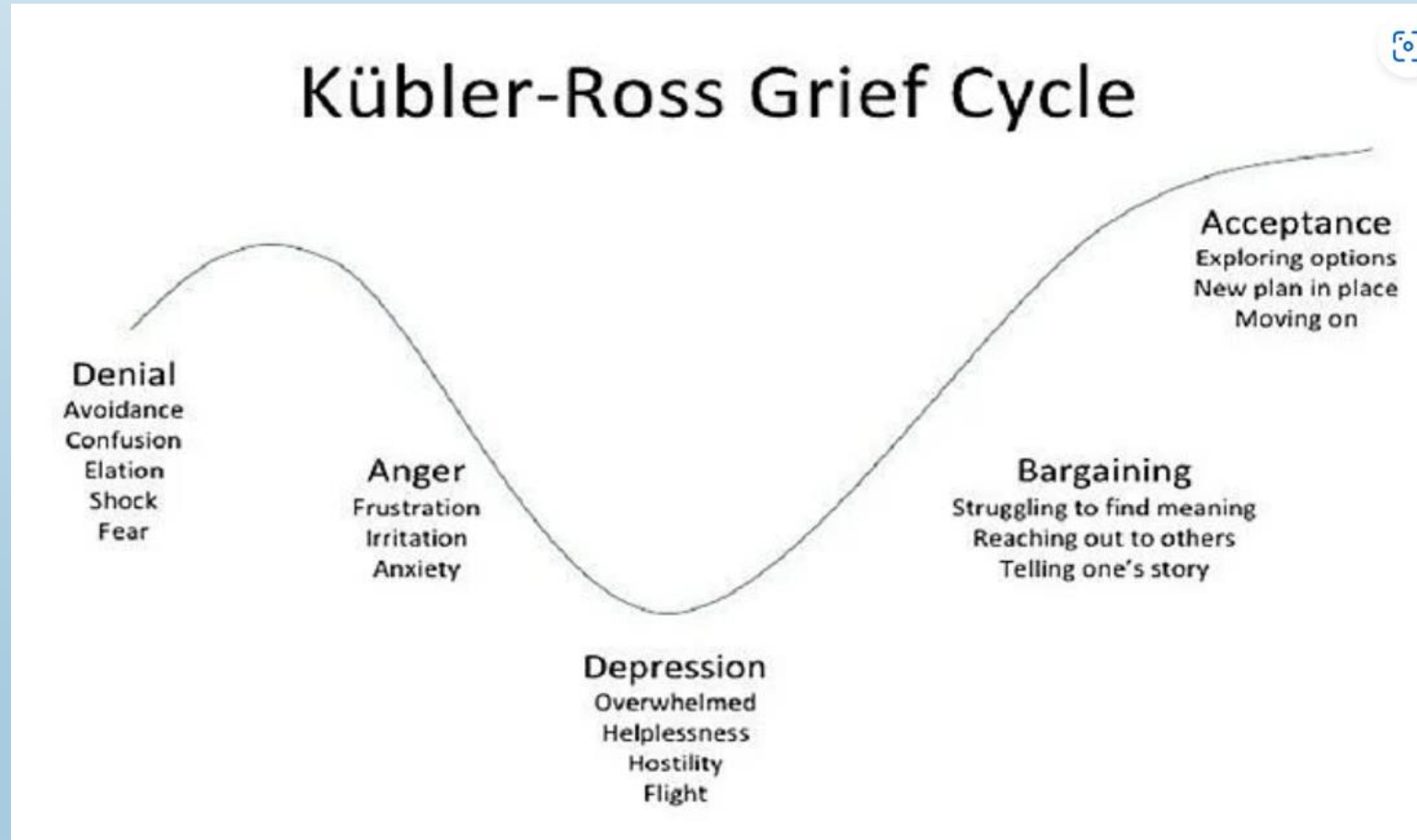
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What we already know



On Death and Dying. Elisabeth Kübler-Ross. The MacMillan Company, New York, 1969

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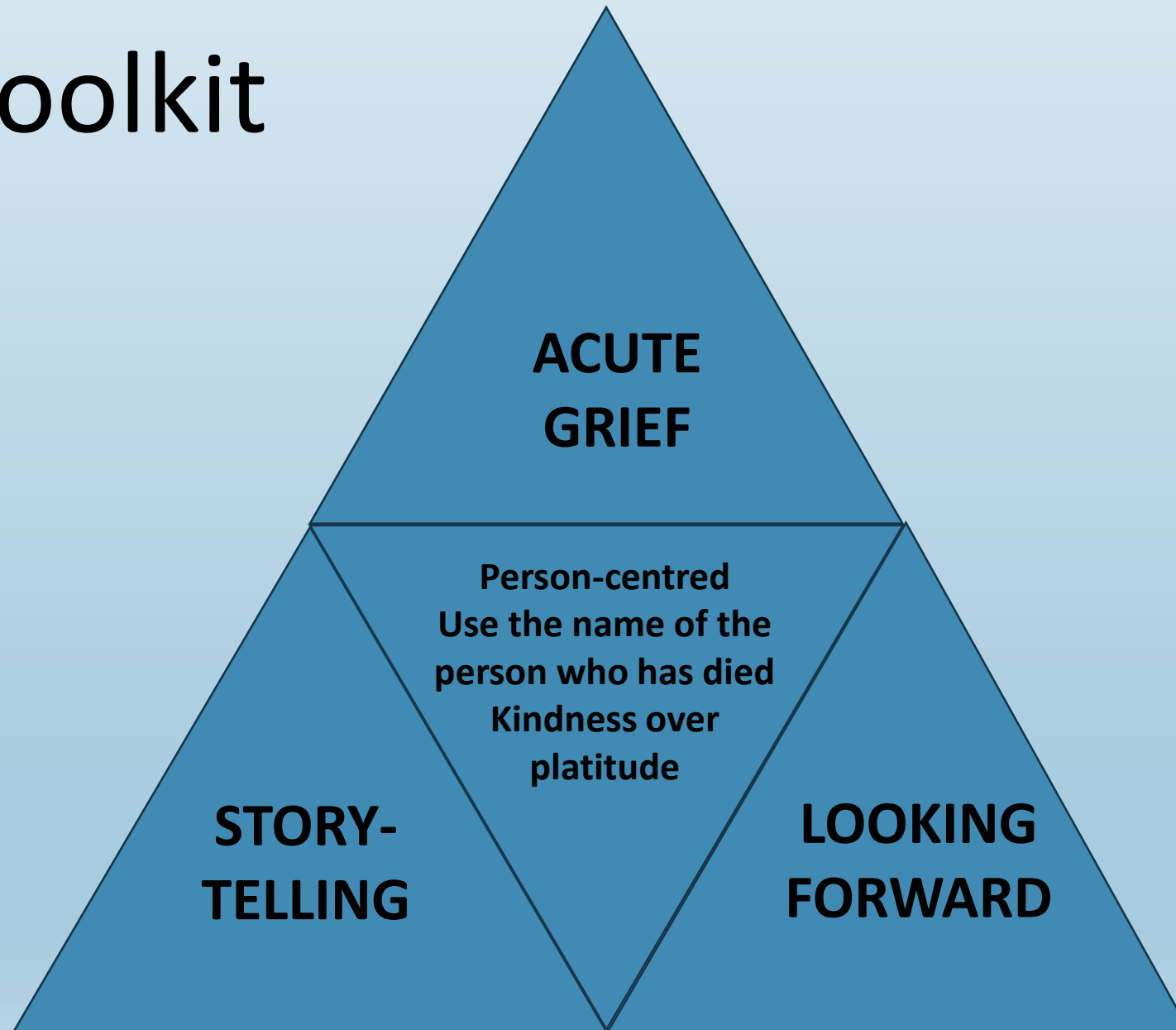
Resources



The Dual Process Model of Coping with Bereavement –Stroebe and Schut 1999

Grief is unique, multi-faceted and oscillates between loss and restoration

Our toolkit



Acute grief

- **Tolerate distress and hold the space**
- Allow negative emotions to fill the encounter
 - Shocked, angry, overwhelmed, paralysed, guilty
- Normalise the need for support
- No judgement- hold your own assumptions at arm's length
- Supportive phrases which avoid inferring recovery
- Time off work
- Explore rituals around death
- Insomnia

'I can see how painful this is for you right now. That pain might never go away but you will learn ways to live with it '

Storytelling

- Remembering the person who has died
- Refer to them by name
- Ask simple questions ‘how are you right now?’
- Introduce the concept of a rest from grief BUT this can bring guilt, betrayal, also the pain of fading memories
- Connect with the grief of others – books, films, support groups

Looking forward

- Continue to refer to the person by name, even years after death
- Once again, keep your own assumptions at arm's length
- Open questioning style - allow the patient to reflect on where they are now and where they would like to be
- Consider how the patient feels vs how they think they should be feeling
- Memorial events eg marking the person's birthday, erecting a bench in their favourite place, charity sports event
- Introduce the idea of growing around grief

Tonkin's Model of Grief

Growing around grief

Your life



Time



Grief can take many forms

- We may grieve eg when we lose a job, a house, a particular role
- We may grieve for someone we have never known eg a parent who died when we were very small, or from whom we are estranged
- Anticipatory grief – when we know someone is going to die
- Men may grieve differently to women
- Ethnicity and culture
- Grief plus mental illness – difficult to tease out grief vs depression/anxiety
- Grief plus cognitive impairment
- Our toolkit is designed to be applicable in all forms of grief

Complicated grief

- Prolonged grief disorder – when we are ‘stuck’
- 10% of people – an underestimate?
 - I.R.Galatzer-Levy & G.A.Bonanno (2012)
- Recently included in the latest ICD-11 & DSM
- ‘Intense yearning, emotional pain, inability to function for a year or more’
- Our tools are universally applicable - don’t be scared to try them!
- Targeted grief therapy by a skilled clinician
 - M K Shear et al (2014) “treatment of complicated grief in elderly persons: A randomised clinical trial”

Neuroscience of grief

- Changing Lives of Older Couples (CLOC) University of Michigan – grief resilience - Bonanno et al
- Center for Complicated Grief – Columbia University – novel therapy for grief (CGT)
- University of Rotterdam – alterations in brain volume and cognitive function in grieving people
- Grief, Loss and Social Stress (GLASS) Lab – University of Arizona –fMRI work

Useful resources

- **Sue Ryder – grief guide <https://griefguide.sueryder.org>**
- **Cruse <https://www.cruse.org.uk>**
- The Good Grief Guide – UK government supported resource
- The Compassionate Friends – supporting bereaved parents and their families
- The Lullaby Trust – anyone affected by the loss of a baby or young child
- Survivors of Bereavement by Suicide (SOBS)
- Widowed and Young (WAY)
- Winston's Wish (national) & Seesaw (oxfordshire only) – bereavement support for young children

Useful resources

- Books
 - The Grieving Brain – Mary Frances O’Connor**
 - The Madness of Grief - Rev Richard Coles
 - A Grief Observed- C S Lewis
- Film/TV
 - Scrapper - 2023 – adolescent grief
 - After Life - 2019
 - Manchester by the Sea – 2016 – grieving men
- Podcasts
 - What We’ve Learnt About Grief – Cariad Lloyd BBC Sounds

Acknowledgements

- Dr Sheena Sharma
- Dr Laura Heath
- Thames Valley & Wessex Primary Care School Fellowship scheme
- Summertown Health Centre, Oxford

Questions?

The Madness of Grief, Rev Richard Coles

‘your loss is pretty much invisible, unless people know about it, and you live and walk in the land of the not-yet bereaved, and should your wounds suddenly show people may recoil’