

Correspondence

Anticipatory grieving and loss during the COVID-19 pandemic

ABSTRACT

Recent correspondence shows that death and burial practices deem significant in understanding the meaning and acceptance of the untimely and unexpected death of a family member afflicted with the coronavirus (COVID-19) disease. These, in turn, raise the need to address the anticipatory grieving process of the family. This paper examines the importance of anticipatory grieving that ultimately affects the lives of the family of the bereaved.

Keywords anticipatory grief, COVID-19, grieving, loss, public health

In a recent correspondence, death and burial practices were found to give significance to the grieving family of COVID-19 patients, allowing them to find meaning and acceptance in these difficult times.¹ More often than not, it is during these practices when the bereaved family experiences grief. Grief is an emotional reaction that is felt when a loved one is taken away. This pain is oftentimes overwhelming and the person experiences difficult emotions. More especially during these pandemic times, wherein loved ones are separated and quarantined. Patients are isolated and in certain cases die in the hospital and are immediately cremated due to protocols. This immediate sequence of events leaves the people who have been left behind with little time to process their emotions and to grieve properly. The lack of time to say farewells and give closure to family members is a recurring situation for COVID-19 patients.

The Department of Health in the Philippines issued memoranda about the proper handling of the remains of COVID-19 cases. It generally states that all cases, may it be suspected or probable COVID-19 patients, who died with pending results, shall be handled similar to a confirmed COVID-19 case. Standard precautions must be observed at all times in handling the cadaver since infectious agents may be transmitted through contact and blood/body fluids.² The procedures for burial and cremation shall be done within 12 hours after death. In burying the remains of COVID-19 patients, a durable, airtight and sealed metal casket is required if cremation is not an option. No public assembly

and viewing shall occur, and only the adult members of the family are permitted to attend the funeral. As for the process of cremation, the remains should be reduced to the size of fine sand/ashes and packed in a container before turning over to the family.²

Studies show symptoms of COVID-19 disease may ultimately progress to the imminent and unexpected deaths of the afflicted patients, leading to profound grief and loss to the bereaved.³ Unexpected COVID-19-related deaths then tend to bring about appalling reactions to the grieving family. Lindemann's philosophy of anticipatory grief allows a meaningful experience to the bereaved, providing advanced grief work to deal with any unresolved issues, and most importantly, constructing adjustments post-death.

Anticipatory grief in Lindemann's philosophy includes three main tasks: 'emancipation from bondage to the deceased, adjustment to a new environment in which the deceased is missing, and formation of new relationships'.⁴ Utilizing Lindemann's philosophy, reactions to imminent death in COVID-19 may become more bearable to the loved ones. The bereaved start to (i) separate themselves from their connection and/or relationship to their loved one even prior to the actual death to be able to (ii) experience a world where their loved one is no longer physically available. Finally, the preceding two tasks then allow the grieving to (iii) form new bonds; new relationships are sown and developed. Anticipatory grief among families of COVID-19 patients

therefore yields ease in the subsequent reactions after post-death occurrence.

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Conflict of interest

The authors declare that they have no conflict of interest in this paper.

References

- 1 Sarmiento PJD. Changing landscapes of death and burial practices: public health response in time of COVID-19 pandemic. *J Public Health* 2020. <https://doi.org/10.1093/pubmed/fdaa211>.
 - 2 DOH. Department Memorandum No. 2020-0158- Proper Handling of the Remains of Suspect, Probable, and Confirmed COVID-19 Cases. 22 March 2020 [cited 5 December 2020]. <https://www.doh.gov.ph/sites/default/files/health-update/dm2020-0158.pdf> (5 December 2020, date last accessed).
 - 3 NHS. End of Life Care Guidance When a Person Is Imminently Dying from COVID-19 Lung Disease. 25 August 2020 [cited 5 December 2020]. www.palliativecareguidelines.scot.nhs.uk/guidelines/symptom-control/end-of-life-care-guidance-when-a-person-is-imminently-dying-from-covid-19-lung-disease.aspx (5 December 2020, date last accessed).
 - 4 Lindemann E. Symptomatology and management of acute grief [classical article]. *Am J Psychiatry* 1994;**151**(6):155-60.
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