Grief and Bereavement: Updated Theories and New Tools for Providers (FR413)

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Objectives

- Describe updated theories on grief, loss, and bereavement.
- Describe ways in which providers can engage patients and families in legacy work.
- Recognize provider grief and identify ways to prevent compassion fatigue.

As palliative care and hospice providers, we are often witnesses to patients and families struggling with grief and loss. Historically, Elizabeth Kubler-Ross’s five-stage model has helped providers and individuals understand the grieving process in an accessible and intuitive manner. However, updated theories are emerging that describe the grieving process as “tasks” instead of “stages.” Reframing the grieving process as tasks allows providers to better understand how they can serve bereaved patients and families who are working through these tasks. Providers can be particularly instrumental in encouraging legacy work that allows patients to support their family and friends by leaving a legacy and provides the bereaved with a tangible way to remember their deceased loved one. Examples of legacy work as well as practical tools for patients and providers to engage in legacy work will be discussed. Healthcare providers caring for seriously ill and dying patients often feel grief as well. Learning to grieve is a coping skill. Similarly to the tasks that grieving patients and families are facing, providers can also use this new framework to do their own grief work. Recognizing and understanding our own grief can help prevent compassion fatigue and burnout.