Moving forward after death: an adaptation of Kubler-Ross’ five stages of grief with a biblical understanding at ST. Mary United Methodist church Hogansville, Georgia

Gregory Stacey Williams
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MOVING FORWARD AFTER DEATH: AN ADAPTATION OF KUBLER-ROSS' FIVE STAGES OF GRIEF WITH A BIBLICAL UNDERSTANDING
AT ST. MARY UNITED METHODIST CHURCH
HOGANSVILLE, GEORGIA

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at
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ABSTRACT

MOVING FORWARD AFTER DEATH: AN ADAPTATION OF KUBLER-ROSS’ 
FIVE STAGES OF GRIEF WITH A BIBLICAL UNDERSTANDING 
AT ST. MARY UNITED METHODIST CHURCH 
HOGANSVILLE, GEORGIA 
by 
Gregory Stacey Williams 
May 2007 
111 pages 

The issue of death and dying, despite its inevitableness, may be one of the most complex phenomena within the context of ministry. This paper addresses how mourning persons may move beyond grief through an adaptation of Kubler-Ross’ Five Stages of Grief paradigm while examining the construct of death and dying from a biblical and theological perspective.

Kubler-Ross’ five stages provide the framework from which a model was designed to help empower grieving members of St. Mary United Methodist Church to overcome the loss of loved ones. The purpose of the model was to develop a mechanism that could be replicated in the church that equips congregants to cope with grief and move on to productive, spiritually whole lives.
DEDICATION

I dedicate this dissertation with love to my mother, Annie Lee Williams, who died May 26, 1981, and to my sister, Rose Angelo Williams, who died September 6, 2001. I look forward to a happy reunion with my mother and sister in heaven when the three of us shall meet to part no more.

I also dedicate this work to my faithful wife, Davina Randolph who encouraged me to never give up, my daughter, Deviny LeAnna, and my son, Justin Gregory. Finally, I dedicate this work to my eldest brother, Leroy Williams, who reared me when my mother passed away, my eldest sister, Beverly Chambers, my second brother Kenneth Williams, my youngest brother, Jayson Williams, my younger sister, Rose Marie Williams, and my baby sister who followed me and became a doctor, Dr. Jacquetta Manigo.
ACKNOWLEDGMENTS

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I would like to acknowledge the wonderful people of St. Mary United Methodist Church and Burns United Methodist Church for their participation, prayers, and encouragement.

I would like to thank my wife, Mrs. Davina D. Williams, my daughter, Deviny LeAnna Williams, and my son, Justin Gregory Williams, for their love, patience, and support during this tedious process. Finally, I express appreciation to my father E.J. Williams and all my siblings for believing in me and for their constant prayer.
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CHAPTER I

INTRODUCTION

Death and dying is an issue that confronts all living beings. William Shakespeare expressed it this way: “Everyone who lives must die, passing through nature to eternity” (Vernon 1970). Despite its inevitable nature, however, death and dying represents an area of ministry that may be complex and often neglected.

Over the past six years, the author has worked side by side with parishioners of St. Mary United Methodist Church (St. Mary) who have lost a loved one. He has seen the hurt on their faces as many try to put their lives back together without proper counseling. Many of these parishioners have felt the harsh impact of death, affecting what Vernon calls the “social side” of death, which is evidenced by the fact that “death comes to people who are members of an ongoing interaction system. Death is involved in the social structures which man has built, and has a profound impact upon those structures” (Vernon 1970).

Losing a loved one to death can also be a tough psychological barrier to cross. Death delivers a blow to the family system and family members must continually strive in self-corrective ways to regain control of their lives. This recovery is done as the family or individual experiences the normal stages of grief.

The purpose of this paper is to develop a model of ministry to help mourning parishioners adapted from Elisabeth Kubler-Ross’ five stages of grief. Kubler-Ross is a pioneer in thanatology – the study of death and dying - and her work has touched the lives of millions. Her book, On Death and Dying, “helped to popularize a
characterization of the process of grief as steps or stages through which the dying and, to some extent, those close to them, ordinarily pass” (Backer and Russell 1994).

Finally, the author will use the Bible as a vehicle to help parishioners in the local church setting deal with death and dying from a biblical perspective. The Bible, i.e., Scripture, when used appropriately, can help individuals conquer their fears of death and dying. For example, the Apostle Paul reminds us that grieving is a natural process and as children of God, we “do not grieve as those who have no hope” (I Thessalonians 4:13). Then, too, Christians are challenged by I Peter 5:7, to “cast our cares upon God, for God cares for us.” For as Christians, our hope lies in the life and resurrection of Jesus Christ. The writer will correlate Kubler-Ross’ five stages of grief with a biblical understanding in a local church setting. These stages – denial, anger, bargaining, depression and acceptance – have proven to be a valuable resource for understanding grief as a process. Persons confronted with death and dying may use the five stages chronologically or randomly; they may go back and forth according to their particular situation.

**Personal Purpose and Perspective for Research**

The writer’s desire to conduct research in the area of death and dying emerged as a result of the death of the writer’s mother in 1991, and later, sister’s death in 2001. The area of death and dying became even more intriguing when the writer became senior minister of Burns United Methodist Church and St. Mary United Methodist Church where death became a persistent reality for the congregation.

The writer’s mother died May 26, 1991, of a massive heart attack. Initially, when she died, the writer was angry with God; and to make matters worse, took the blame for his mother’s death, because the writer was home with her the day she died. Somehow,
perhaps she could have been saved if there had been medical attention sought for her in time.

Mother's death affected all of the writer's siblings, who felt lost, lonely, and did not know where to turn for help. The minister of the church came by to visit with the family. However, he did not have the proper theological training to deal with the hurt and pain with which our family was grappling. In retrospect, the writer now understands that we were coping as best we could. Some of us were angry and questioned the death event. There is no doubt that our mother's death changed our family structure. Each person in our family was striving to regain control of his or her life. The family system to which we had become accustomed was suddenly interrupted.

Ten years after Mother's death, the writer sought counseling at Interdenominational Theological Center. It was in counseling and in the Clinical Pastoral Care Unit at Southern Regional Hospital that the writer was able to conceptualize and come to terms with feelings in connection to death and dying. The writer learned that we are "communal beings, sharing intimately in the shadow and pain as well as gifts" (Wuellner 1996). The writer learned that no one ever totally gets over the death of a loved one. However, through comprehensive coping strategies and biblical applications, one can work through the challenges that accompany death.

Rose Angela Williams died viciously at the hands of her husband on September 6, 2001. Rose's death was unexpected and mind-boggling. The fact that her own husband murdered her made it even more difficult. Thus, the writer's motivation is to let people know that there are events that occur in our lives that are tragic and traumatic, and that
the death of a loved one can alter one’s life forever. However, there is a God who loves us and with God’s help and proper counseling, one can reenter the circle of life.

In terms of the writer’s relationship with the congregation and a personal perspective of the relevance of the project, it is appropriate to examine how building a model impacts ministry. The term model “was introduced into theology from the language of scientific theory and given wide circulation by I. T. Ramsey” (Hadgood 1983). Ramsey, in his book Models and Mystery gave a theological definition of the term ‘model.’ According to Ramsey, models are derived from ordinary human experience. The writer strongly believes that with God personal experiences can be used to help others.

Therefore, the writer will embrace the model of a servant of hope. The servant of hope model, as defined by the writer, means one has been employed by God to do God’s personal work. The servant of hope model is illustrated in three verses from the gospel of John: Jesus said, “I am the good shepherd. The good shepherd gives His life for the sheep” (John 10:11). “My sheep hear My voice, and I know them, and they follow Me. And I give them eternal life, and they shall never perish; neither shall anyone snatch them out of My hand” (John 10:27-28).

What is hope? The writer defines hope is to desire with expectations of fulfillment; something or someone that gives promise for the future. The writer realizes that only God can provide a sense of hope in the hearts of grieving persons. However, as a minister of the Gospel, the writer can help to encourage and inspire grieving persons to hope here on earth by imitating the works of Christ the heavenly Shepherd.
Addressing the issue of death and dying will give the parishioners of St. Mary UMC a chance to discuss death and dying in a controlled environment. Some of the parishioners avoid talking about death and dying because the perplexities and anxiety of death overpower them. Other individuals are perfectly comfortable discussing death.

In short, the researcher will develop a grief ministry model and instruct other leaders on how to encourage and help grieving parishioners in need. In essence, “each congregation needs a mature person to be in charge of the ministry of comfort, to work alongside the pastor when death visits a home. This is not time for heroics. Rather, it is a time for understanding, behind-the-scenes ministry that lets people know that the church cares” (Wiersbe and Wiersbe 1985).
CHAPTER II

MINISTRY IN CONTEXT: THE SUPPORT GROUP

The Ministry Setting

The ministry setting is St. Mary United Methodist Church (St. Mary) in Hogansville, Georgia. St. Mary is a congregation of African Americans located in a middle-class community, which consists mainly of younger and older adults. The researcher was appointed to St. Mary June, 1996, and the average worship attendance was thirty. Today St. Mary has 250 members. In reality, the researcher feels that God placed him at this declining church for the purpose of revitalization. August 2005, the members of St. Mary completed their family life center. The family life center would be used to offer new and extending ministries such as: after school tutorial ministries, affordable daycare, youth bible study, and dance ministries.

St. Mary is Episcopalian in structure. Ministers in the United Methodist Church are appointed by the Bishop to serve at a church for one year at a time. *The Book of Discipline* governs the United Methodist Church. The presiding Bishop is the overseer of the general church. Equally important, the United Methodist Church is divided into districts, which are supervised by District Superintendent’s appointed by the Bishop.

Today St. Mary is a full time church, and the average attendance continues to escalate. St. Mary is located in a lower middle class neighborhood. However, St. Mary itself is a vibrant community composed of hard working individuals who value God and family.
St. Mary is blessed with many educated and talented members who are working diligently to carry out the mission of Jesus Christ. The former mayor of Hogansville is a member of this church, as well as several retired school teachers, an assistant principal, retirees from Georgia Power and Ford Motor Company, a young man employed by the State Highway Patrol, and many employed by the federal government. Because of the diverse gifts and talents with which God has blessed the people of St. Mary, the church, historically, has done a credible job preparing and equipping the younger generation for Christian service, as well as working to improve the community spiritually and demographically.

Andrew Billingsley states, “The African American family remains a resilient and adaptive institution reflecting the values, hopes, and aspirations of the descendants of Africans in America” (Billingsley 1992). Many of the members of St. Mary are deeply religious people and are open to counseling as well as what the Bible says about death and dying. Therefore, one improvement the author sought to make at St. Mary and the surrounding community is adequate counseling for individuals who have lost loved ones.

St. Mary is a strong church; however, it shares its pastor with another church, which limits its capacity to engage in auxiliary ministries. From June 1997 to June 2002, families at St. Mary witnessed over twenty-five funerals. Most of the deaths were family related. Many of the individuals who have lost loved ones are dealing with their hurt and pain without proper counseling or professional help. For example, one parishioner who lost her son said, “I couldn’t believe it... it felt like my heart was being ripped out. Losing him felt like emotional amputation.... When my son died a large part of me died with him; life will never be the same again” (G. Williams personal communication).
Many of the bereaved have been thrown into what Victor M. Parachin called an "emotional jungle, the psychological geography is unknown, unfamiliar, uncomfortable" (Parachin, 2001); they are unfamiliar with the normal stages of grief and the changes death brings.

During the moment of bereavement, the effectiveness of the churches’ ministry is greatly influenced by the leadership of the pastor. It is the responsibility of the senior minister to equip the congregants with the skills needed to work through their grief. A grief support group is needed at St. Mary because the “ministry of comfort is important to the bereaved, to the church family, and to the lost, but it is also important to the pastor. If his ministry of the Word is to be effective week after week, he must know what it means to minister to broken hearts. The pastor, who is isolated and insulated, locked up in his study, is robbing himself and his people of some of the most enriching experiences of ministerial life” (Wiersbe and Wiersbe 1985). It is the researcher’s belief that a grief support group will help the parishioners of St. Mary to make sense of their faith and loss in the midst of despair.

In short, if St. Mary is to be the church that God has called it to be, it must provide additional grief support for bereaved persons. Today’s church must help equip parishioners with the skills and tools needed to work through grief. A grief support group is a missing component at St. Mary. Many of the bereaved are left alone to grapple with their loss after the funeral.

**The Ministry Issue**

The ministry issue on which this model will focus is the grieving process as related to death and dying. The proposed question is: *How do the five stages of grief as*
delineated by Kubler-Ross correlate with a biblical understanding in a local church setting? The writer will incorporate Kubler-Ross' five stages of grief in a model of ministry to help parishioners cope with death and dying.
CHAPTER III
REVIEW OF LITERATURE

Empirical

In order to provide some insight into each paradigm, this chapter analyzes the issue of death and dying from an empirical, biblical, and theological review of literature on death and dying. The construct of grief is defined and examined at two levels, which are called normal and complicated grief. Finally, the researcher will end with a discussion of the five stages of grief as noted by Kubler-Ross.

There are many individuals who have addressed the issues of grief. Wayne E. Oates' book, Your Particular Grief, defined the meaning of grief by asserting that many circumstances can cause grief. But what exactly is grief? Grief can be summarized in these words: "An individual may lose someone or something of great value. This loss may have occurred in any number of ways. Grief is often caused by death, but grief is caused also by divorce, by the loss of a particular function of the body such as eyesight, hearing, the ability to talk or walk, or by the loss of a treasured job through resignation or demand for resignation. Grief is the aftermath of any significant loss" (Oates 1981).

Everyone in his or her own way will experience grief, which usually results in deep mental anguish. In her dissertation, "Grief Management: Programming for Care in the Local Church," Carol Norman Helton defines grief as "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" (Helton 1998).
Edward P. Wimberly, in *African American Pastoral Care*, defined bereavement as “the sudden cessation of a close and abiding relationship. Bereavement often elicits negative emotions called grief, or mourning, which come after the death of a person who has had a particular place in one’s life. This follows a somewhat characteristic pattern as the bereaved try to fill a void made in their lives by this loss” (Wimberly 1991). Wimberly adds, “Loneliness is common to all who experience the death of a loved one. To help ease your loneliness, find a kind and compassionate friend who will listen and allow you to speak about your pain. Grief shared is grief diminished. Remember playwright William Shakespeare’s sage advice: ‘Give sorrow words, the grief that does not speak / Whispers the o’er-fraugh the heart, and bids it break’ (Macbeth 4.3.209)” (Parachin 2001).

**An Explanation of Normal and Complicated Grief**

It is imperative that individuals grieve in ways that are healthy. “Normal” grief is characterized by three phases. First, the grief sufferers yearn for the lost loved ones and experience anger toward the loved ones for abandoning them. The second phase begins when the bereaved accept the fact that neither yearning nor anger will bring the loved ones back. This leads to despair and disorganization in the lives of the bereaved. Following this phase is a period of reorganization, in which the bereaved turn toward the world and begin to find new relationships and meaning in life. During this period, the grief sufferers either begin the task of revising and editing the old story or begin to develop a new story without the deceased (Wimberly 1991).

“Complicated” grief, if not properly controlled, can be dangerous and devastating to the parties involved. Complicated grief occurs when a person fails to move beyond the
initial problem or trauma. The death event prevents the person from working toward holistic healing in a normal and productive manner. “When an individual fails to grieve, he or she may experience complicated mourning. It has been called many other names, including abnormal, atypical, unresolved, dysfunctional, unhealthy, and pathological grief” (Worden 2002).

Dr. William Worden describes the following symptoms of complicated mourning (Worden 2002):

- The person cannot speak of the deceased without experiencing intense and fresh grief. Different from bursts of grief, if an individual experiences renewal of fresh grief each time he discusses the deceased, this can indicate complicated grief.
- Sometimes a relatively minor event triggers an intense grief reaction. An example of this is when one may overreact to passing a car accident.
- The person who has sustained the loss is unwilling to move.
- Material possessions belonging to the deceased are difficult to give away.
- The person withdraws from friends and family or makes a radical change in his or her lifestyle.
- The person has a compulsion to imitate the dead person,
- The individual behaves in reckless or self-destructive ways: substance abuse, driving too fast, drinking too much, etc.
- The person develops a phobia about illness or death.
- The individual avoids any reminder of the deceased.

Biblical – Jesus the Christ

During His ministry, Jesus Christ provided a sense of hope and certainty about life after death that transcends any earlier writings by predecessors in the Old Testament. In the New Testament, Jesus taught His disciples that He was the vehicle through which
they could receive eternal life (John 14:6). According to Jesus, physical death is inevitable and not to be feared because death is only a temporary event. However, Christians are to fear spiritual death because spiritual death results in eternal separation from God (Matthew 10:28). Jesus taught that every Christian must confess and believe that He is Lord in order to be spared from spiritual death (Romans 10:9).

Death and dying was not a strange phenomenon to Jesus. For example, the resurrection of Lazarus was an opportunity for Jesus to teach about the nature of death. In fact, when Lazarus died Jesus responded to His disciples, “our friend Lazarus sleeps, but I go that I may wake him up” (John 11:11). The resurrection of Lazarus authenticated that Jesus can bring life and immortality out of death. It further proves that Jesus cared for bereaved persons; He understood the emotional and physical pain that people experience when a loved one dies. Jesus was moved with compassion when Lazarus died, and He even wept (John 11:35).

One other aspect of the viewpoint that Jesus held concerning death may be found in John 11:25, where Jesus articulated to Martha a critical revelation: “I am the resurrection and the life, he who believes in Me, though he may die, he shall live.” Jesus responded to Lazarus’ death, then, by reminding Martha and Mary to maintain faith in God and Him. No matter how bleak the situation may appear God can bring hope out of tragedy.

Martha and Mary expressed their grief by verbalizing their hurt, frustration, and deep emotion to Jesus. The resurrection of Lazarus authenticated that the spiritual life cannot be destroyed by physical death. More importantly, Jesus has the power to raise others in the future.
The raising of the widow of Nain’s son in Luke (7:11-17) is another example that may help Christians to better understand the philosophy of Jesus in connection to death and dying. The dead man was the only son of his mother, and she was a widow. The writer of Luke identifies Jesus as compassionate in the passage that tells of Jesus addressing the widow and tells her not to cry. Grieving parishioners can have tranquility in knowing that Jesus will return and take His children to a place that He has prepared. Everyone who has experienced a loss will one day be reunited with loved ones.

Secondly, Jesus touched the coffin, spoke the word and the miracle occurred. The dead man spoke, affirming the Lordship of Jesus Christ. For the bereaved, Jesus in Luke’s gospel is the “healing Messiah, who shows great sympathy. He possesses this emotional capacity, while having the power to change fate. For this reason the otherwise intolerable, ‘do not weep,’ is acceptable. The source of consolation can be found only in God, who resurrects the dead” (Bovon 2002).

Jesus addressed His own death in John 14:1-11 as He faced Calvary. Jesus reminded his disciples that He was going home. “The house of the Father of Jesus is the realm of God, and within this realm there are many places for the disciples to abide (v.2a). Jesus has said that it will be so, and the disciples are called to believe in the word of Jesus.” Jesus confronted His own death by reminding the disciples to “keep faith and trust in God, and that the way to God was through Him” (Moloney 1998).

In John 5:24-26, 28-29, Jesus declares explicitly:

“He who hears my word and believes in Him who sent has everlasting life, and shall not come into judgment, but passed from death to life. Most assuredly, I say to you, the hour is coming and now is, when the dead will hear the voice of the Son of God, and those who hear will live. The hour is coming in which all who are in the graves will hear His voice, and come
forth-those who have done good, to the resurrection of life, and those who have done evil, to the resurrection of condemnation.”

Jesus addressed the issue of death and dying by reminding the people that “there will be tribulation; but be of good cheer, I have overcome the world” (John 16:33). For that reason, Christians can work through the grief process knowing that Jesus Christ is with them. Revelation 21:3-4 reminds us “God will wipe away every tear from their eyes, there shall be no more death, nor sorrow, nor crying. There shall be no more pain, for the former things have passed.”

David

The process of grief can be overwhelming at times; however, David reminds us first, that God is available to comfort those who are broken hearted (Psalm 34:17-19). In Psalm 23:1-10, David used a metaphorical illustration and described God as a shepherd. To the Palmist, God is a shepherd who cares, protects, and guides God’s people.

Also, David addressed the issue of death and dying by reminding Christians that death is not to be feared. David perceived death as a path or valley that everyone had to cross (Psalm 23:4). The valley of the shadow of death can be referred to as a “distressing time in our lives. The awareness of our mortality often comes with sickness, trials, and hardship. But the Lord, our protector, can lead us through these dark and difficult valleys to eternal life with Him. There is no need to fear death’s power (I Corinthians 15:25-27). You are with me: The Good Shepherd is with us even in what seem the most difficult and troubling situations” (Allen and House 1997). “Yea, 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” (Psalm 23:4).
In Psalm 23:6, David referred to God as merciful and good. In retrospect, David knew that human beings could not deliver themselves from the power of the grave (Psalm 89:48). Instead the Psalmist responded to death and dying with the realization that “goodness and mercy would follow him all the days of his life; and that he would dwell in the house of the Lord forever” (Psalm 23:6).

David understood that God is infinite in wisdom and possesses ultimate power over death and life. He said it best in Psalm 27:10, “when my father and mother forsake me; then the Lord will take care of me.” This belief was a mindset that David intoned in his writings, one that could be intimated and maintained throughout life to the grave.

David experienced grief firsthand when his son became ill and died. David fasted and prayed for the child’s life to be spared (2 Samuel 12:15-18). Despite David’s plea to spare his son’s life the child died. David confronted his grief with the understanding that God controlled life and death. Shortly after David’s son died, David took a bath, ate dinner, and reentered the temple for worship (2 Samuel 12:19-23). Working through the grief process can be difficult. However, David worked through his grief by allowing the grief process to materialize. For example, he did not hide his grief, tears, or emotions. David was overwhelmed by grief, but not overpowered by it.

Paul

To the Apostle Paul death was inescapable, all human beings would die as a result of sin; there is a direct assertion of this in Hebrews. The writings of Paul confirm that God has conquered death through Christ’s atonement on Calvary. In view of that, Paul reminds Christians not to mourn “as those who have no hope” (I Thessalonians 4:13). Throughout the New Testament Paul asserts that there will be a second resurrection, “the
Lord Himself will descend from heaven with a shout, with the voice of an archangel, and with the trumpet of God” (I Thessalonians 4:16).

I Corinthians 15:51, gives insight into what happens to Christians after they die. Interestingly enough Paul defines death as a deep sleep, a rest for Christians who labor and die in Christ. In I Corinthians 15:26 Paul asserts, “Death is the last enemy to be destroyed.” Death was introduced into the world through the sins of Adam and Eve, and it is through Jesus' victory on the cross that the enemy death was defeated.

Also, in I Corinthians 15:52 Paul articulates his viewpoint on life after death. He states that Christians will be transformed from the physical body to a spiritual body once they die; the physical body cannot inherit the kingdom of God, because mortal must put on immortality. According to Paul this change will accrue quickly, in the twinkling of an eye. Death to Paul was only temporary. He believed that the saints of God would meet again in the second coming never to be separated again; and the Lord Himself would redeem the saints.

Paul’s perspective on death and dying as articulated to the Corinthians, Thessalonians, and other Christians, was to pray and comfort one another during the moments of grief. Also, the word of Paul is confronting to Christians in the grief process because nothing should separate a child of God from the love of Jesus.

Isaiah

The prophet Isaiah addressed the issue of death and dying by offering comforting words to the Israelites when Judah fell prey to Assyria. Many of the captured Israelites were enslaved. Moreover, some of the Israelites lost their family in battle. As a result of their capture, many of the Israelites felt God had forsaken them and did not care about
their grief. Isaiah reminded the people of Israel that God is loving and sovereign. More importantly, Yahweh is in charge of the world and nothing is overlooked. Isaiah asserts that “God will swallow up death forever, and the Lord God will wipe away tears from all faces” (Isaiah 25:8). Isaiah reminded Israel not to lose faith in God during difficult moments.

Isaiah conveyed to the Israelites that in the midst of pain and suffering Yahweh would shepherd the flock. “The Lord who created you says, do not be afraid, for...I have called you by name; you are Mine. When you go through waters, I will be with you. And through the rivers, they shall not overflow you. When you walk through the fire, you shall not be burned, nor shall the flame scorch you” (Isaiah 43:1-2). In this quotation Isaiah asserts that God is with the bereaved in the grief process.

In short Isaiah addressed the issue of death and dying by challenging Israel to wait on God.

“Have you not known? Have you not heard? The everlasting God, the Lord, the Creator of the ends of the earth, neither faints, nor is weary. His understanding is unsearchable, He gives power to the weak, and to those who have no might. He increases strength. Even the youths shall faint, and be weary, and young men shall utterly fall, but those who wait on the Lord shall renew their strength; they shall mount up with wings like eagles, they shall run and not be weary, they shall walk and not faint” (Isaiah 40:26-30).

To Isaiah the human life is like the grass. For example, “The grass withers, the flowers fade, because the breath of the Lord blows upon it; surely the people are grass. The grass withers, the flowers fade, but the word of our God stands forever” (Isaiah 40:7-8). In this quotation, Isaiah stated that the only thing that lasts forever is the word of God. Thus, in the moment of difficulty, God is dependable.
There is no one more familiar with grief than Job. In retrospect, Job experienced grief first hand when his seven sons and three daughters where killed. The story of Job helps bereaved persons to comprehend that grief can occur to anyone at any time. Job expressed his grief and pain is these words, "Man is born of woman is of few days and full of trouble. He comes forth like a flower and fades away; he flees like a shadow and does not continue" (Job 14:1-2). Many parishioners who are experiencing grief can identify with Job because he worked through his grief by remaining faithful to God in spite of losing his entire family. There is no doubt that Job experienced pain as other human beings. When Job’s family was killed, "Job arose, tore his robe, and shaved his head, and he fell to the ground and worshiped. And he said: naked I came from my mother’s womb, and naked shall I return there. The Lord gave, and the Lord has taken away; blessed be the name of the Lord" (Job 1:20). Job maintained his faith and relationship with God in spite of his loss.

Job addressed the issue of death and dying by indicating that death does not discriminate. Furthermore, Job was a wealthy man of unflawed character, blessed with a wonderful family, and highly favored by God. However, God still allowed Satan to attack Job.

"Prostrated by total grief, he praised God. While hopeless, despondent and protesting passionately against what he interprets as an unjust divine sentence on him, Job still turns and cries to no one but God. And he repentantly commits himself anew to his Lord, although the voice from the whirlwind has offered neither explanation of the mystery of the past suffering nor promise of future restoration from his desolation" (Douglas and Tenney 1987).
Job trusted God in spite of personal loss; “though He slay me, I will trust Him” (Job 14:14). The story of Job conveys that God sometimes allows bad things to happen to good people. However, God is always with God’s children during difficult moments.

Job believed in the resurrection of the dead and that God had the power to change his predicament at any time. Moreover, Job stated, “if a person dies, they shall live again. All the days of my hard service I will wait until my change comes” (Job 2:9-10). The story of Job helps grieving parishioners to conceptualize that they can work through their grief by relying on God’s power and strength. During moments of grief Job refused to give up. Job’s wife said to him, “Do you still hold fast to your integrity? Curse God and die!” But he said to her, “You speak as one of the foolish women speaks. Shall we indeed accept good from God, and shall we not accept adversity?” (Ecclesiastes 12:14). Thus, the story of Job conveys to grieving parishioners that God is sovereign and present in the grief process.

Job worked through his grief by acknowledging God’s sovereign power over his loss. Job also believed that God had the right to determine one’s destiny or fate. God alone decides who lives and dies. Working through the grief process was difficult for Job, he cursed the day he was born (Job 3:10). However, Job did not conceal his emotions from God; he articulated his deepest hurt and fears to God. Job waited on God to relieve him from his suffering even if relief occurred through death. He waited on God to change his fate and circumstances (Job 14:14).

In short, it was Satan who planned and implemented Job’s suffering. God allowed Satan to test Job for a time, but in His time God Himself delivered Job from suffering, restored him, and blessed him even more than before (Job 42:10).
Solomon

Solomon is known in the Bible for his wisdom (1 Kings 3:4-15). God blessed Solomon with divine wisdom at the beginning of his reign as king. The book of Proverbs gives additional insight regarding death and dying. Solomon asserts, for “everything there is a season, a time for every purpose under heaven. A time to be born, and a time to die, a time to plan, and a time to pluck what is planted. A time to kill, and a time to heal” (Ecclesiastes 3:1-3). According to Solomon death is absolute, and cannot be avoided or negotiated. In addition, Solomon helps grieving participants comprehend that God controls who lives and dies.

Solomon addressed the issue of death and dying by articulating that true meaning and purpose can be found only in God. God is able to help individuals work through the stages of grief by affirming “no trouble will overtake the righteous” (Proverbs 12:21). Solomon believed God was always present with the righteous. In fact, Solomon encouraged Christians to live godly lives because “God will bring every work into judgment, including every secret thing, whether good or evil” (Ecclesiastes 12:14). Solomon believed everyone would face judgment after death. In retrospect, Solomon helps individuals to prepare themselves for the inevitable, which is death. “The living know that they will die; but the dead know nothing” (Ecclesiastes 9:5). Finally, Solomon affirms “that love is stronger that death” (Song of Solomon 8:6). In this quotation Solomon reiterates that nothing can separate true love.

Peter

The Apostle Peter made a tremendous impact on the early church. 1 Peter 1:1-25 “is a letter of encouragement and exhortation written in the name of the Apostle Peter during the latter third of the 1st century C.E. to Christian communities scattered
throughout Asia Minor suffering as an oppressed minority in an alien society” (Freedman 1992). Peter witnessed firsthand the life and works of Jesus Christ because he was a part of the inner circle Jesus equipped for specialized ministry. Peter was the first to recognize Christ as the Son of the living God (Matthew 16:16). It was during the crucifixion and persecution of Christ that Peter’s faith was tested. In fact, Peter denied Christ three times. The writing of Peter is a clear indication that he was able to overcome the death of Christ. Peter’s faith was rehabilitated and he became an affective witness for Christ.

Peter addressed the issue of death and dying by affirming that God will preserve Christians who are experiencing trials and difficulty (I Peter 1:6). Peter instructed Christians experiencing trials to rejoice. He reminded his readers “that they are not being left to fend for themselves. Even now they are being shielded by God’s power, that is, by One who is all-knowing about the future and all-sufficient to support those who belong to Him in anything they may have to meet. Provided they firmly believe this as a matter of faith, they can rest assured that God will not fail them in their hour of need” (Hillyer 1992). The writing of Peter reassures grievers that they can be victorious over their trials by relying on Jesus. Peter also taught that persecution makes the believer stronger because it refines their faith.

Peter provides hope for bereaved persons by informing them that God has prepared an eternal inheritance for Christians that cannot fade or be destroyed. Peter challenged his readers to remain faithful to God when confronted with trials and persecution. In addition, he reminded individuals facing grief and trials that they have been given “a living hope through the resurrection of Jesus Christ from the dead” (I Peter
Peter defined living hope as spending eternity with God. Equally important, living hope is acquired the moment a person receives Jesus Christ as Lord and Savior. "The term new birth refers to spiritual (regeneration) – the Holy Spirit’s act of bringing believers into God’s family" (Life Application Bible, 1995). Regardless of the circumstances, Peter articulates that Christian believers will spend eternity with God in spite of the persecution they face.

Peter addressed the issue of death and dying by conveying that death cannot be avoided because it is a natural occurrence. "All flesh is as grass, and all the glory of man as the flower of the grass. The grass withers, and its flower falls away, but the word of the Lord endures forever" (I Peter 1:24-25). This quotation asserts that the material and physical world will one day dissipate but God’s word will never fail.

Peter believed strongly in the resurrection and final judgment. He believed that Christ would return to judge and redeem humanity (I Peter 1:17). In fact, he challenged all Christians to live a holy and godly life. Peter challenged grievers to gird their minds and to eliminate any thoughts of doubt, "run with endurance the race that is set before us. Looking unto Jesus, the author and finisher of our faith, who for the joy that was set before him endured the cross, despising the shame, and has sat down at the right hand of the throne of God" (Hebrews 12:2-3).

Peter reminds bereaved persons that God raised Christ from the dead. Therefore, our hope and faith must be placed in the resurrected Christ (I Peter 1:21). Because of Jesus Christ,

"Believers have every reason to look forward to the future with total confidence. They may well have to face trials and tribulations – as Peter’s readers certainly were at the time – but they can enjoy the complete assurance that in God’s hands life has a wonderful purpose. Nothing can
deflect God from fulfilling His plans and that knowledge makes any effort and training involved in discipleship amply worthwhile” (Hillyer 1992).

Shortly after Jesus was crucified Peter returned to the upper room and grieved. Peter worked through his grief by relying on the Holy Spirit (Acts 1:8). Also, he depended on God’s mercy, guidance, and direction as he worked through the stages of grief. Peter’s most effective way of dealing with grief was through unifying believers. For example, Peter taught that all Christian believers had a religious obligation to help and care for one another (Act 2:44). Peter recovered from the death of Christ because he believed that Jesus rose from the dead and fulfilled His promise by sending the Holy Spirit (Joel 2:28-32).

The life and works of Peter can help Christians overcome their grief. They can identify with Peter because he was able to work through the stages of grief and become a great leader in the church. The life of Peter is a clear indication that individuals do not have to be victimized by grief and overwhelmed by loss.

**Holy Spirit**

The Holy Spirit is God’s gift to the world and it is through the Holy Spirit that the believer is strengthened. The Holy Spirit plays many imperative roles in the life of the believer. For example, the Holy Spirit transforms the people of God from within. It is through the Holy Spirit that the believer realizes God’s love and is capable of responding to the love of God. The Holy Spirit bears witness with our spirit (Romans 8:16). Also, the Holy Spirit manifests Itself in the life of the believer and draws the believer closer to God. It is through the Holy Spirit that Christians are made right with God through Christ’s atonement. The Holy Spirit helps the believer to grow in grace as the believer strives for Christian perfection. The Holy Spirit is active in the church as the church
reaches out to the world. Jesus reminds us, “Where two or three are gathered together in My name, I am there in the midst of them” (Matthew 18:20). It is through the Holy Spirit that the believer is able to live a sanctified life as well as discern between right and wrong.

“Pentecost marked the definite beginning of the new dispensation (Acts 2:4). Jesus asked God to send the Holy Spirit to help empower the disciples. Before that day came, the small band of disciples were timid and afraid. They met secretly behind closed doors for fear of the Jews. They seemed to be waiting for something, as indeed they were, for they had been promised, “power from on high.” That power was given on the day of Pentecost when the Holy Spirit came upon the disciples. Immediately everything changed. No more were there secret meetings in closed upper rooms. The lambs had become lions, and Peter stood out on the street and preached with tremendous courage and boldness. The Holy Spirit had come to be with God’s own forever” (Harmon 1992).

Like the disciples, Christians could not work through their grief without the help and empowerment of the Holy Spirit. The Holy Spirit plays an imperative role in their recovery process. The Holy Spirit is the unifying power that holds Christians together. As a matter of faith, Christians believe that God is sovereign and controls occurrences on earth through the Holy Spirit. The Holy Spirit is the very presence of God, one with God and one with Jesus Christ.

God speaks to us through the Holy Spirit. Romans 8:26-27 states, “the Holy Spirit helps us in our weakness. We do not know what we should pray for as we ought, but the Spirit Himself makes intercession for us with groanings which cannot be uttered. Now He who searches the hearts knows what the mind of the Spirit is, because He makes intercession for the saints according to the will of God.” The Holy Spirit is there to guide, lead, strengthen, comfort, and to help Christians overcome their grief. The Holy
Spirit is God’s gift to the world through Jesus. Jesus said, “I will ask the Father, and He will give you another advocate, to be with you forever” (John 14:16).

The Holy Spirit operates in Christians' lives as the living presence of God. No one can fix a broken heart except God. As the mourners work through their grief, the Holy Spirit is the perfect companion and friend. “God is gracious and full of compassion, slow to anger and great in mercy. The Lord is good to all, and His tender mercies are over all” (Psalm 145:8-9).

The Holy Spirit will not fail the bereaved during their time of grief. The Holy Spirit provides insight and revelation as they work through Kubler-Ross’ five stages of grief from a biblical perspective. Actually, the Holy Spirit can do what we humans cannot; the Holy Spirit is with us every minute of every hour. The Holy Spirit bestows upon bereaved persons the energy, passion, and desire needed to work through the various stages of grief.

**Theological**

How one deals with death and dying is related to one’s theology. The word *theology* has many meanings; however, for this purpose, the writer defines *theology* as the study of one’s religious faith or practice. The theological perspective on death and dying entails God as the Sovereign Creator. The practice of theology begins with the individual, i.e., everyone has a theology.

The theology of death and dying plays an important role in the African American family; generally speaking, African American families tend to be deeply religious and recognize God as the Creator. A theology of death helps one understand and cope with the loss primarily because African Americans believe in the creation story, in which God
formed Adam "from the dust of the ground and breathed into his nostrils the breath of life, and man became a living creature" (Tillich, 1959). Therefore, for African American Christians, if God can create life, God can take it away. Death is seen by many African Americans as being the "will of God," in fact, as another part of the creation story.

J. A. Motyer, a professor at Trinity College, contends that in the Old Testament, death is a natural process:

"Death means the end of human life on earth. Man is dust and to dust he returns" (Gen. 3:19). To ponder this may cause one to feel a sense of separation from God (e.g., Ps. 6:5; 30:9; 88:5); but as one faces death one recognizes that total confidence should be placed in the Lord (Job 19:25-26; Psalm 73:23-24; 139:8). The hope of bodily resurrection is mentioned briefly in the Old Testament (Isaiah 26:26; Daniel 12:2), but is mentioned consistently throughout the New Testament, (I Corinthians 15)" (Douglas and Tenney 1987).

Paul Badham, senior lecturer in theology at St. Davis University, cites a similar argument and purports a viewpoint that coincides with the Apostle Paul. He states, "Christ's resurrection has released man from the power of sin and death and expresses total confidence that death no longer has dominion (Rom. 6-9 and I Corinthians 15)" (Richardson and Bowden 1983).

Millard J. Erickson, a professor of theology at Bethel Theological Seminary, states, "Christians can face the prospect of death with the knowledge that its effects are not final, for death itself has been destroyed. Although the final execution of this judgment upon death is yet in the future, the judgment itself is already accomplished and assured" (Erickson 1998). This is comforting assurance for Christians that death is not final and can be viewed the entryway into a more blessed judgment.
Erickson continues with a commentary on Paul:

“This thought also runs through the whole of I Corinthians 15, which speaks of the universality of death and the effect of Christ’s resurrection. While death is said to have been defeated and its sting removed by his resurrection (vv. 54-56), there is no suggestion that humans will not die. Paul certainly anticipated his own death (II Corinthians 5:1-10; Philippians 1:19-26)” (Erickson 1998).

A biblical and theological comprehension of death can be found in Romans 5:17 and summarizes the perspectives noted in this discussion. “For by one man’s offense death reigned through the One, much more those who receive abundance of grace and of the gift of righteousness will reign in life through the One, Jesus Christ.”

The resurrection of each and every person is a part of God’s plan in the near future. “At the Second Coming of Christ, the dead will appear in their resurrection bodies; those who are alive will find that their bodies are marvelously changed, even though they remain the same individual person” (Douglas and Tenney 1987). In addition, Christ will judge each person according to their works both the living and dead. Scripture teaches that life in the New Kingdom will have no end; Christians will live with God forever never to die again.

Lorraine Hedtke and John Winslade addressed the theological perspective of death and dying in the book Re-membering Lives. According to the authors most people have a difficult time grappling with death because they fail to realize that death is only a temporary separation (John 14:1-2). Moreover, Hedtke and Winslade assert that death is not the “ultimate farewell” (Hedtke and Winslade 2004). God has redeemed humanity through the death and resurrection of Jesus Christ. Thus, Christ defeated death on Calvary and made eternal life available to all. Hedtke and Winslade substantiate that nothing can separate Christians from the love of God (Romans 8:35-39).
Hedtke and Winslade help grievers to conceptualize that death is not an isolated event. In fact, death is not the end or final chapter of a person’s life because “life does not end here” (Hedtke and Winslade 2004). Furthermore, believers can work through the stages of grief with the realization that God will reconnect them with their loved ones. God will redeem humanity from death (Romans 7:24).

Dr. Richard Steinpach’s book, *How Can God Allow Such Things?*, addressed the theological aspect of death and dying by stating that death is inescapable. Dr. Steinpach challenges Christians to prepare themselves for death because life on earth is temporary. In addition, he defines death as separation from the physical body. For example, “the physical body is merely the covering for this spirit. This covering is adapted to the nature of this world, enabling it to live and work here” (Hedtke and Winslade 2004). In view of that, Dr. Steinpach indicates that God has a plan for reuniting the living and the dead. He also helps grievers comprehend that God controls the existence of humanity.

Dr. Steinpach asserts that a person’s faith is cultivated and strengthened through their grief and pains. Faith is a necessary ingredient to please God (Hebrews 11:6). Theologically, the author addressed the issue of death and dying by asserting that no one fully understands the motives behind an omniscient God. Even Jesus asked why He had been abandoned by God in His final hour on the cross. Dr. Steinpach helps parishioners shape their theology and understand that God does care deeply about God’s children; however, God’s ways are not always clear.

Finally, Raymond A. Moody addressed the Platonic perspective of death and dying. On the same note, the Greek philosopher Plato had much to say on the topic of death. For example, Plato asserts, “death is only a dreamless sleep” (Moody 1976).
Plato believed that every person possessed a soul and physical body. More importantly, “Plato defines death as the separation of the incorporeal part of a living person, the soul, from the physical part, the body” (Moody 1976). The theological views of Plato give hope to bereaved persons because Plato believed in a two-dimensional world, the physical and spiritual. When a person dies the spirit joins the other spirits in the spiritual world and faces judgment.

Even though Plato’s philosophy on life after death differs to some degree from that of Christians, Plato’s writings and works offer hope for bereaved persons. The scripture reminds us “the dead shall live; together with My dead body they shall arise. Awake and sing, you who dwell in dust for...the earth shall cast out the dead” (Isaiah 26:19). This scripture also affirms that those who are “asleep in the dust of the earth shall awake, some to everlasting life, and some to shame and everlasting contempt” (Moody 1976).

Suicide

One of the most tedious subjects that the researcher had to address was suicide. More important, suicide is a major problem in the United States. The researcher could not address grief without dealing with this issue. More and more people are committing suicide. The writer defines suicide as intentionally killing oneself. “Some experts estimate that every minute there is an attempted suicide in the United States” (Wiersbe and Wiersbe 1985). Additionally, “according to official statistics, more than 30,000 individuals take their own lives each year. Suicide ranks as the tenth leading cause of death in the United States” (Flanders 1991).
All types of people commit suicide, people of all ages, religions, occupations, demographics, and social status. The number of reported suicides among young people has escalated in recent years; suicide has a devastating impact on both individuals and families. Family members often find it difficult to work through their loss due to the stigma associated with suicide. The bereaved often blame themselves for the loss and are left alone to work through their grief. Dr. Karl Menninger stated, “Suicide is a very complex act, and so we better leave the analysis to God” (Wiersbe and Wiersbe 1985).

Family members have to deal with painful questions such as:

- Why did my loved one decide to take their life?
- Why was he/she unhappy?
- Why was he/she depressed?
- Did he/she suffer from any form of mental illness?
- Could it have been prevented?
- Is he/she in heaven?

The book Life Lessons by Kubler-Ross is beneficial to family members whose loved one has committed suicide. Kubler-Ross addresses the issue of guilt by challenging bereaved persons to forgive themselves as well as others.

“We need to forgive so that we can live whole lives. Forgiveness is the way to heal our hurts and wounds it’s how we reconnect with others and ourselves. We have all been hurt—we didn’t deserve the pain, but we were wounded nonetheless. And, if truth be told, we have almost certainly hurt others. The problem isn’t that hurt happens; it’s that we can’t or won’t forget it. This is the hurt that keeps on hurting. We go through life accumulating these hurts; we have no training or guidance in how to let them go. This is where forgiveness comes in” (Kubler-Ross and Kessler 2000).
Kubler-Ross helps family members comprehend that blame and self-incrimination will only impede the healing process. Moving beyond those feelings allows them to begin the process of working through their anger and denial.

Family members whose loved ones have committed suicide are desperate to know what the Bible had to say about suicide. It is common belief in the African American church that persons who commit suicide are going to hell because suicide is an unpardonable sin to which there is no forgiveness. For this reason, the researcher explored the dynamics of suicide from a biblical perspective.

There is no single antidote for suicide. People commit suicide for mystifying reasons. Some suffer from depression, schizophrenia, hopelessness, terminal illness, losses, alcoholism, or drug abuse. Regardless of the reason, family members who are left behind find it more difficult to work through the different stages of grief than mourners whose loved ones died natural death. For example, “shock, anger, grief, fear, guilt, depression, shame, denial, self-recrimination, and confusion are among the many feelings that occur in the aftermath of a suicide” (Stewart 1989).

Family members are often left grappling with guilt and feeling partly responsible for their loved ones death. Eric Marcus, who lost his father to suicide, is helpful to family members. Marcus writes,

“The suicide of a loved one leaves in its wake a painful confusion that’s expressed with a one-word question: Why? Embedded in that question are three others that begin with why. Why didn’t we see it coming? Why didn’t he/she come to us for help? And above all, Why did he/she do it? The search for answers and the vast array of emotions may continue for years, or even a lifetime. This is part of the tragedy of suicide. People commit suicide hoping to end pain and suffering, yet they inflict more trauma on their loved ones than ever anticipated” (Stewart 1989).
The second issue facing family members is this: can and do persons who commit suicide go to heaven? The researcher found that “the act of suicide does not, however, condemn anyone to eternal punishment and separation from God. Salvation and eternal life are gifts that God freely gives to all who acknowledge their sinfulness to God and trust personally in the death of Christ on the cross as the just payment for their sinfulness (John 3:16; Ephesians 2:8-9; Romans 8:31-33; II Corinthians 5:21)” (Stewart 1989). The researcher also found “that salvation for any person rests in the finished work of Jesus Christ on the cross, not in abstaining from sinful acts. Our committing suicide in and of itself does not condemn us to eternal punishment any more than does any other sin for which we have not asked forgiveness at the time of death (I Corinthians 3:9-15; II Corinthians 5:10)” (Stewart 1989).

The Bible records the suicides of six men: Samson (Judges 16:30), Saul and his armor-bearer (I Samuel 31:4-5), Ahithophel (II Samuel 17:23), Zimri (I Kings 16:18), and Judas (Matthew 27:5). The Bible says that Judas “went to his own place” (Acts 1:25)” (Wiersbe and Wiersbe 1985). Additionally, the Bible does not give specific information about their fate nor state directly what penalty God will impose on a person for committing suicide, if any. For family members whose loved one has committed suicide, this information can be a major breakthrough and the beginning of healing. The Bible does not condemn people who commit suicide to hell; they still have an opportunity to go to heaven.
None of the aforementioned examples embrace the notion of suicide. Moreover, suicide is wrong. Three factors that support the truth of this statement are:

1. Life is a gift from God. I Corinthians 6:19-20 reminds us that “your body is the temple of the Holy Spirit who is in you, whom you have from God, and you are not your own. For you were bought with a price; therefore glorify God in your body and in your spirit, which are God’s.”

2. Suicide is wrong because it has lasting effects upon the family; it causes the family and those left behind more pain.

3. Suicide is wrong because we are made in the image and likeness of God (Genesis 1:26). Therefore, life is a gift not a burden. Jesus said in John 10:10, “I came that you might have life and life more abundantly.”

The suicide of a loved one leaves the bereaved lonely and distressed. These emotions, subsequently, may lead to alienation. Therefore, the job of the pastor is not to further alienate the bereaved by passing judgment; his/her job is to help the bereaved persons work through the aftermath and perplexities of the suicide. The pastor must not condemn the deceased or the grieving family; the person’s fate and judgment must be left to God. The pastor must provide avenues for bereaved persons to process their grief.

Family members who have lost loved ones to suicide, like any other mourners, want to know that someone cares. Therefore, as pastors, lay counselors, friends, family members, or neighbors, we should not be afraid to “put our arms around him or her, and give comfort. Don’t give in to the embarrassment and shame society imposes on suicides and families. Reject the notion that suicide results from ‘bad’ and ‘sick’ families.
Remind family members that someone in the family was very sick and died. The rest of the family is well” (Wrobleski 1989).

In attempting to come to terms with a suicide, bereaved will often replay the suicide event over and over in their minds in hopes of altering the event that resulted in the death of their loved one. It is imperative for loved ones to bear in mind that the past cannot be changed; one can only live in the present. “While one cannot bring the person back, and while there are no second chances with the person who died, there are many second chances with the living. There is an opportunity to make up in the present what is desperately wished for in the past” (Wrobleski 1989). In summary, family members lives are changed forever when someone they love commits suicide. But with God’s help, the bereaved can and will recover.

Euthanasia

Another complex subject that confronted the researcher was euthanasia. Euthanasia is a growing problem that confronts many Americans. What is euthanasia? The word “euthanasia means an easy and painless death. As commonly used, it also refers to the way death is attained. Advocates of euthanasia argue that a person in intense pain or suffering should be allowed to die in a peaceful and humane way” (Flanders 1991). There are two types of euthanasia, voluntary or involuntary. According to the writer, voluntary euthanasia occurs when an individual decides independently or with assistance to terminate his or her life eliminating pain and suffering. In contrast, the writer identifies involuntary euthanasia or mercy killing as when a person’s life is taken against their will to spare the individual from pain and suffering.
The writer divides voluntary euthanasia into two compartments, active and passive. Active euthanasia occurs when a person takes the necessary steps to end or terminate life. Passive euthanasia allows the terminally ill person to die of natural causes i.e. there is no intervention to prolong life. On the same note, passive euthanasia originates when medical treatments is denied with the intention of causing death.

There is much debate and controversy surrounding euthanasia and physician assisted suicide. There are two major groups that argue for and against euthanasia. The Hamlock Society supports the enforcement of laws governing physician aid in dying. The National Right To Life Committee opposes euthanasia and works for the protection of all human beings from the moment of fertilization until natural death (Appendices I and J).

The ethics surrounding euthanasia is very much a part of life; with daily living comes challenging questions pertaining to how and when a person dies. In his book, First Do No Harm, Bruce Hilton, director of the National Center for Bioethics, addressed euthanasia from an ethical perspective. Hilton stated that the church will have to answer tough questions in the area of death and dying due to the increase in technology. In fact, Hilton contends that our society has not properly prepared individuals to deal with euthanasia. Hilton asserts, “Most schools don’t teach the discipline called ethics. Even in church school, we tend to get a laundry list of do’s and don’ts, rather than experience in making moral choices ourselves” (Birch and Rasmussen 1976).
Hilton helps us to see that the church must prepare its members to deal with the issue of euthanasia. Due to the increase in technology that prolongs life, the church must now answer questions such as:

- If a person is terminally ill, does the person have the right to decide when he or she will die?
- Should the dying person or their family members, act on his or her behalf, or let nature take its course?

No matter how the aforementioned questions are answered, Mr. Hilton makes it clear that the church can no longer disregard these issues. Ministers of the gospel must provide answers for their members who find themselves confronted with euthanasia.

Robert Kastenbaum and Ruth Aisenberg addressed the issue of euthanasia by stating, “our cultural heritage not our specific education and training have prepared us to comprehend the place of death in our lives and thoughts” (Kastenbaum and Aisenberg 1976). Therefore, human beings must come to grips with death and dying because death is a natural process that cannot be avoided. Death is inescapable; for every human being there is an origin and a conclusion to life. The church should provide extended care for bereaved families following a loss.

Many parishioners still look to their ministers and doctors for guidance and direction when confronted with euthanasia. Nonetheless, it is not the minister’s job to judge the family. Deciding to terminate a loved one’s life is a tedious and emotional decision for any family to make. Therefore, “The pastor must be a part of the answer and not a part of the problem. He must understand what the grief process is and how he can minister effectively to those who sorrow. His task is not to shelter people from their
pains of bereavement, nor to help them escape. Rather, his task is to help them draw upon the divine resources that God provides, so that they might accept their situation maturely" (Wiersbe and Wiersbe 1985).
CHAPTER IV

SUPPORT GROUPS AND KUBLER-ROSS’ THEORY

Before examining the five stages of grief as depicted by Kubler-Ross, it may be appropriate to provide a brief summation on the nature of support groups and how that approach relates to ministry. This is particularly relevant since the project is utilizing a support system strategy to provide counseling and guidance for the grieving members of St. Mary United Methodist Church (St. Mary).

When a person is confronted with a loss or traumatic event having a support system in place is essential. Support groups provide avenues for people to learn, influence, and encourage each other during difficult moments. Support systems are a way of meeting the psychological needs of people.

How are support systems organized? Support systems are composed primarily of everyday people. For example, Edward P. Wimberly in his dissertation, “A Conceptual Model For Pastoral Care In The Black Church Utilizing Systems And Crisis Theories” defined support system in these words: “A support system is comprised of family, the extended family, friends, neighbors, and members of voluntary groups” (Wimberly 1976). In this quotation, Wimberly asserts that when diverse people come together to work through their losses support groups are organized.

It is within the context of these structures that the five stages of grief will be discussed. Kubler-Ross’ book, On Death and Dying, describes five stages of grief. The stages are: “denial, anger, bargaining, depression, and acceptance” (Kubler-Ross 1969).
These five stages of grief that Kubler-Ross identifies are necessary and should be worked through within the support group environment in order for individuals to complete the grieving process.

**Denial Stage**

The first stage of grief is denial. Denial is the inability to accept reality or the truth concerning the dying loved one, or one’s own impending death. In retrospect, denial is a temporary defense that protects the individual from the full impact of the trauma. The manifestation of denial is often displayed in the form of disbelief. When death occurs the person makes statements such as “this isn’t happening; it is only a dream” and there is a fleeting belief that the deceased person will come back.

Kubler-Ross asserts “denial is usually a temporary defense and will soon be replaced by partial acceptance” (Kubler-Ross 1969). Therefore, the griever must decide whether to embrace or reject their denial. If the griever chooses to maintain their denial the grief process will be decelerated. On the other hand, affirming the loss allows the individual to move beyond their denial and begin the true work of mourning. The denial of grief dissipates when the griever accepts and embraces the reality of their loss. Denial is overcome when the bereaved is willing to face their loss head-on and accept their loss for what it is.

A person will eventually move beyond denial and readjust to daily life because permanent denial cannot be maintained. Eventually the reality of the loss will be accepted because the griever will recognize that the loss is permanent and that the deceased person is not coming back. The griever begins to reorganize his or her life and begins to work through the other stages of grief.
Anger Stage

The second stage of grief that is common following the death of a loved one is anger. What is anger? Anger is the frustration, hurt, or disappointment that a person experiences when confronted with a loss; a person may find that they are angry at the situation, person, or life in general.

Kubler-Ross states that anger is a healthy emotion and is a necessary component of the grief process. A dying patient, for example, “may resent the fact that others will remain healthy and alive while he or she must die. God is a special target for anger” (Kubler-Ross 1969). Anger usually originates when a person feels helpless and cannot change the inevitable results.

Kubler-Ross affirms that anger is a difficult stage for people to work through. The anger stage is difficult for family, staff, and friends to overcome. “The reason for this is the fact that anger is displaced in all directions and projected onto the environment at times almost random. The doctors are just no good, they don’t know what tests to require and what diet to prescribe” (Kubler-Ross 1969). Kubler-Ross emphasized that grieving persons must be allowed to work through their anger without individuals feeling personally offended. No one chooses to be angry after a loss. For that reason it is imperative for ministers and other health care professionals to learn the symptoms of anger in order to assist angry grievers. Each person responds to loss differently; some people may self direct their anger; others may direct their anger at the events surrounding the loss, family, friends, fate, doctors, or God.

Finally, if anger is not dealt with properly depression can set in and impede the grief process. In retrospect, each individual has a choice as to how anger is expressed
and resolved. It is imperative that one’s anger be channeled in a healthy and productive manner. Facing anger is the beginning of accepting reality and overcoming grief.

**Bargaining Stage**

The third stage of grief is bargaining. Bargaining occurs when an individual tries to make a deal or does something to change or alter the outcome of the situation or problem. One bargains with God or a significant other to prolong the dying person’s life. Kubler-Ross asserts that bargaining occurs directly after the denial and anger phases. If a person is “unable to face the sad facts in the first period and have been angry at people and God in the second phase, maybe we can succeed in entering into some sort of an agreement which may postpone the inevitable happening: If God has decided to take us from this earth and did not respond to my angry pleas, he may be more favorable if I ask nicely” (Kubler-Ross 1969).

Kubler-Ross asserts that most bargains are made in privacy with God and can be associated with guilt. For instance, an individual may promise to serve God, attend church frequently, or do community service if God would extend their loved ones life granting them one last wish. Kubler-Ross taught that permanent bargaining cannot be maintained and will eventually be replaced by depression. Nevertheless, bargaining is a necessary stage to work through because the individual is beginning to accept that the relationship has ended or will end. Another reason bargaining is an important phase is because the person has moved beyond the stages of denial and anger.

**Depression Stage**

The fourth stage of grief is depression. Depression occurs when the person can no longer deny the loss. Kubler-Ross helps us to understand that depression usually
occurs when the grieving person has worked through the stages of denial, anger, and bargaining. Depression occurs when the person realizes that he or she has a debilitating sadness when reality of the loss sets in.

During the depression period many people will experience depressive symptoms such as: crying, anger, withdrawnness, emptiness, appetite loss, feelings of self-pity, and sleeplessness. There are two types of depression described by Kubler-Ross, reactive and preparatory. Reactive depression is when an individual elicits the help of other people to help them work through their depression. In preparatory depression, the individual prepares him or herself for death or permanent loss. When experiencing preparatory grief “the patient grows quiet, doesn’t want visitors. When a dying patient doesn’t want to see you any more,” says Doctor Ross, “this is a sign he has finished his unfinished business with you, and it is a blessing. He can now let go peacefully” (Kubler-Ross 1969).

In short, Kubler-Ross affirms that depression is necessary in order for the patient to fully accept his or her loss. Also, full acceptance of depression prevents the patient from holding on to unrealistic dreams and false hopes.

**Acceptance Stage**

The fifth and final stage of grief that Kubler-Ross underscores is acceptance. In retrospect, when a bereaved parishioner reaches the acceptance phase they have learned to accept the lost. The person has made the necessary adjustments to rejoin daily life. The individual is able to accept their loss as an inevitable part of life; they are able to accept the bad with the good and the pain begins to subside. However, the deceased person will always be loved and missed. Kubler-Ross asserts that the deceased person will always remain alive in our hearts and minds.
Full acceptance means that the griever has “worked through the previously described stages, he has reached a state in which he is neither depressed nor angry” (Kubler-Ross 1969). However, Kubler-Ross affirms that the different stages of grief can resurface sporadically. For example, a person may find themselves angry in regards to their loss after they have reached the stage of acceptance.

Kubler-Ross identifies acceptance as a victory because the individual has successfully and productively worked through all of the stages of grief. The griever has shown great courage and strength by facing the reality of their lost. More important, the griever is ready to move forward with his or her life.
CHAPTER V
A GRIEF MINISTRY MODEL

It this chapter the researcher will elaborate on a grief ministry model for St. Mary United Methodist Church (St. Mary). The model is designed with the intent that it be replicated within the local church. It explains how this model can be facilitated to help aid mourning parishioners through the stages of grief. Church leaders can utilize this grief ministry model in total or part to suit the needs of their congregation.

Interest Assessment

Before a grief support group can be established within the local church, the pastor should do an interest assessment. The interest assessment will tell the pastor if congregants want a support group of this nature. The pastor can determine if there is a desire for grief support within the congregation through the various methods. One method is to assess verbal responses when the pastor addresses death and dying from the pulpit. When congregants vocally affirm the pastor when addressing the topic of death and dying then it can be inferred that more in-depth discussion of the topic may be desired. Another method is to insert a brief questionnaire in the weekly bulleting or church newsletter, which congregants can return anonymously. Congregants can be asked questions such as:

- Would you be interested in attending a grief support group held at St. Mary?

  Yes  No
• Would you like to receive additional information about grief support groups?

Yes  No

Congregants will be asked to return their forms to the ushers and have the option to include their names and phone numbers to receive more information. Another method of assessing interest is through an open-ended questionnaire. In retrospect, an open-ended questionnaire is the best way for the pastor to gain additional information from possible participants. The questionnaire should include basic questions such as:

A. Who was the closest person to you to die?

B. When did they die?

C. How do you feel you are coping with the death today?

D. Do you feel guilty about the loss?

E. Did you have a close friend, or someone you trusted, to confide in about your loss?

F. Have you ever attended a support group before?

G. Would you be interested in attending a support group?

H. What was most helpful to you during the initial stages of grief?

I. Do you believe that God is with you in your grief?

J. How do you see God working in this situation?

K. Do you sleep well at night?

L. How did your immediate and/or extended family assist you in coping with your loss?

M. What are some of the most comforting comments that you can recall others making during your time of grief?

N. What, if any, were some of the most annoying remarks that people made?

O. What role did the church or minister play in the process?
P. What do you hope to gain from these group sessions?

The final means of determining interested is through telephone calls. The pastor can call family members who lost loved ones in previous or recent years. For example, this researcher made a conscious decision to contact all the families for whom funerals had been performed and extended the opportunity to attend the grief support group sessions.

**Location**

The second step that is necessary to duplicate this model is location. The pastor who replicates this model must decide where the grief support group will be held. For example, the researcher must communicate with the participants to determine the day and time for the grief support group to be held. For this researcher, interested participants articulated that they would attend the grief support group if the meetings were held at our local church, St. Mary. The location was important to each of the participants because many of them worked long hours and a few of them relied on the church to provide transportation. Therefore, a designated driver from St. Mary provided transportation for participants in need.

The duration of the sessions was also important to future participants. After communicating with each of the participants the researcher decided that the session would run from August 22-September 19, 2004. The group met on Thursday evenings from 6:00 p.m. to 8:00 p.m. There were a few participants that signed up for the grief support group but were unable to attend.
Facilitator Preparation

Before the group is organized, the researcher must redefine the ministry issue and objectives so that they can be formally communicated to participants. It is imperative that everyone in the grief support group understands the ministry issue and mission of the support group. The ministry issue on which this model focuses is the grieving process as related to death and dying. The objective of the project is to correlate the five stages of grief as delineated by Kubler-Ross with a biblical understanding in a local church setting.

In order to help the parishioners grapple with their loss the facilitator should read Kubler-Ross' book, On Death and Dying, to understand the different stages of grief: anger, denial, bargaining, depression, and acceptance. In retrospect, knowing the different stages of grief would enable the facilitator to identify what stage of grief each person is currently experiencing. Remember, participants may use the five stages chronologically or randomly; they may go back and forth according to their particular situation.

The facilitator should address the difference between normal and complicated grief as well as the meaning of loss. Each person in the support group experiences grief differently. On the same note, the facilitator should read Chapter II (Pastoral Care and Support Systems Illness and Bereavement) of Dr. Edward P. Wimberly's book, African American Pastor Care, in which he discusses normal and complicated grief and defines the meaning of loss. The facilitator should also read Chapter I of Wayne E. Oates' book, Your Particular Grief, in which he defines the meaning of grief as well as highlights some of the root causes of grief.
The sessions should include presentations that address the biblical perspective of death and dying as it relates to the support group. For many Christians the Bible is a source of hope during moments of bereavement and grief. Jesus cares for bereaved persons; He understood the emotional and physical pain that people experience when a loved one dies or when confronted with grief. Therefore, the facilitator should read Chapter III of this dissertation to determine what Jesus, Paul and David had to say about death and dying. The facilitator can also refer to Appendix D for scriptural support.

**Group Sessions**

The facilitator must realize that the success or failure of the model will be based on implementation and execution. Therefore, the facilitator should start each of the sessions with prayer and refreshments. During the first meeting the facilitator should discuss the importance of maintaining confidentiality which allows each of the participants the security needed to fully engage in the grief process. The facilitator should then define the ministry issue and objective of the grief support group. Following which participants should be allowed to introduce themselves and share what they hope to gain through attendance.

Once the facilitator has worked out the described preliminaries, the support group is ready to begin. The facilitator can begin each session in the similar fashion. Each of the sessions will begin with prayer. Next, each member will be given the opportunity to share the loss story; which will allow each participate in the group to learn from each other's stories and experiences. In addition, the participants will read sections from Kubler-Ross' book *On Death and Dying* each week and discuss the different stages of grief. Also, scriptures will be used each week to understand what the bible has to say
about death and dying. Participants will also be asked to read sections from the books *Your Particular Grief* and *Healing Grief*. The facilitator who implements this model can refer to the agendas below as a weekly guide.

**Session Agendas**

**Session I**

A. Prayer and Refreshments  
B. Define the ministry issue and objective  
C. Discuss the importance of confidentiality  
D. Introductions—each member will introduce him/herself  
E. Have group members complete the open-ended questionnaire  
F. Have each participant share what he or she hopes to gain through attendance  
G. Discuss sections of *Death and Dying* and introduce participants to Kubler-Ross’ five stages of grief  
H. Closing prayer

**Summary:**  

The session opens and closes with prayer. Once guidelines have established governing confidentiality members became acquainted with each other by introducing themselves. Next, participants should complete the open-ended questionnaire. Completing the questionnaire begins the process of members revisiting their grief in a supportive environment. Following completion of the questionnaire, members should share what they hope to gain from attending sessions. Introducing members to Kubler-Ross’ five stages of grief and prayer should conclude the session.
Session II

A. Prayer and Refreshments
B. Review questions from the open-ended questionnaire
C. Discuss loss stories
D. Introduce the book, *Your Particular Grief*
E. Closing prayer

Summary:

The session began with prayer, and then led to reviewing the open-ended questionnaires completed the previous session. Some members in the support group were asked to share their loss stories. This led to the introduction of the book, *Your Particular Grief*, which exposed participants to the signs of grief and what to expect during the grief process. The session was concluded with prayer.

Session III

A. Prayer and Refreshments
B. Discuss *Your Particular Grief*
C. Discuss loss stories
D. Discuss meaning and types of grief
E. Closing prayer

Summary:

Prayer should be a key component for members of the grief support group. Prayer allows group members to focus their attention and invites the presence of God into the discussion. The facilitator should continue discussing the signs of grief from *Your Particular Grief* and participants should be better able to relate them to their situations
when sharing their loss stories. Members who had not shared their loss stories previously should be allowed the opportunity to do so. Next the group should focus on different types of grief and what they mean. Again the session should close with prayer.

**Session IV**

A. Prayer and Refreshments  
B. Discuss loss stories  
C. Introduce biblical passages related to death and dying  
D. Introduce sections of the book, *African American Pastoral Care*  
E. Review Kubler-Ross’ five stages of grief  
F. Closing prayer

**Summary:**

The group should begin with prayer. Members should continue to share their loss stories. The *Bible* should be used as a vehicle to help parishioners grapple with their loss from a biblical perspective. Doing so should enable parishioners to conquer their fears of death and dying. The *Bible* should be a source of strength and hope as parishioners work through their loss. Members should discuss the difference between normal and complicated grief from the book *African American Pastoral Care*. The session should conclude with a review of Kubler-Ross’ five stages of grief and prayer.

**Session V**

A. Prayer and Refreshments  
B. Discuss loss stories  
C. Reflect on biblical passages related to death and dying
D. Reflect on excerpts from *Your Particular Grief* and *African American Pastoral Care*

E. Discuss Kubler-Ross’ five stages of grief

F. Discuss the incorporation of knowledge gained in group sessions in everyday life

G. Complete grief support group completion questionnaire

H. Fellowship dinner

I. 10-15 minute private meetings with the facilitator

J. Closing prayer

**Summary:**

Again the session should begin with prayer. Participants should discuss loss stories that reflect new insight gained from discussion of biblical passages regarding death and dying, excerpts from *Your Particular Grief* and *African American Pastoral Care*, and Kubler-Ross’ five stages of grief. Each member should be able to adapt Kubler-Ross’ five stages of grief as it relates to the state of grief they are currently experiencing. Additionally, participants should be able to relate how biblical passages and other knowledge gained in group sessions have been used in private as a source of additional support and spiritual strength. Following the discussion, participants should complete the grief support group completion questionnaire (Appendix C). While the fellowship dinner is taking place, participants should meet privately with the facilitator to discuss improvements gained as a result of participating in the group sessions and provide recommendations, if any, to improve the effectiveness of the group. Lastly, the session should conclude prayer.
Evaluation

As the group progresses, the facilitator should keep a written journal on how each participant is faring. Maintaining a journal is a way for the facilitator to evaluate each participant's progression or regression. The open-ended questionnaire (Appendix B) completed during the first session should be compared with the questionnaire (Appendix C) completed during the final session to assess self-identified progress.
CHAPTER VI

MINISTRY PROJECT

Objectives and People with Whom I Worked

Incorporating Kubler-Ross’ five stages of grief principle into a ministry model within a local church setting will help to achieve three primary objectives: first, to help individuals faced with grief acquire comprehensive coping techniques, next, to enhance parishioners understanding of biblically based paradigms on death and dying, and finally, to create a church setting that invites people in the community to come and receive adequate counseling and support.

Many parishioners who have lost loved ones are dealing with their hurt and pain without proper counseling or professional help. The participants were members of St. Mary United Methodist Church (St. Mary). Parishioners were willing to receive counseling but only in their local church. This ministry sought to meet those needs in an environment that is nurturing and promotes emotional and spiritual healing.

In order to effectively research the issue of death and dying, the writer had to cross one major hurdle. As pastor of both Burns United Methodist Church in Newnan, Georgia, and St. Mary in Hogansville, Georgia, it was necessary to limit the study to one church. For research purposes, a combined study of the two churches would have made the size of the support group unwieldy.
Origin of the Study

From June 1997 to June 2002, the St. Mary family witnessed more than 25 funerals. Because of this many of the parishioners felt ill-prepared and ill-equipped to deal with the challenges and changes that occur before and after death. They expressed a need to have a support system in place that would help them cope with feelings and emotions surrounding death and dying.

Prior to beginning the grief support group, the writer developed a systematic approach to recruiting participants. First, the writer extended an invitation to the congregation during the 9:00 a.m. and 11:00 a.m. worship services to attend the grief support group. Second, the writer recruited participants during our weekly Bible study. Finally, the writer recruited participants through telephone calls to members who had lost loved ones in previous years. A conscious decision was made to contact all the families for whom the writer had performed funerals and extend them the opportunity to attend the group sessions. As a result of recruitment efforts, seven people signed up to participate. The grief support group met on Thursday evenings from 6:00 p.m. to 8:00 p.m. at St. Mary. The session ran from August 22 – September 19, 2004.

Methodology

The methodology for the model is based on a biblical adaptation of Kubler-Ross' five stages of grief and includes a series of grief support group sessions. The effectiveness of the sessions will be monitored through the use of a weekly journal kept by the writer containing an assessment of how each person is coping with grief from the beginning to concluding session. An open-ended questionnaire will be completed during the first session to provide the writer more insight regarding participant's self-identified
state of grief. During the last session, participants should complete final grief support group questionnaire. The writer will evaluate participant’s stage of grief and determine any progression or regression in their coping mechanisms since the groups’ inception by comparing the first and last questionnaires. Effectiveness of the model will be determined by the data received. Another means of evaluation will come from the books, articles, and biblical content used in each session. Participants will be asked what role, if any, the books, articles, and biblical passages played advancing in their stage of grief.

**Evaluation**

People attended the grief support group because they were confronted with a loss; they were experiencing grief symptoms mentally and emotionally that were unfamiliar to them. The researcher articulated to participants that each person’s loss is different and unique. However, grief is universal because it is natural for individuals to experience grief after a loss.

The researcher informed participants that grief is an unstable process because they will experience symptoms such as anger, isolation, denial, fear, sadness, and anxiety, which are all signs of grief. Also, they were warned that they might experience a few of these symptoms one at a time, or experience a number of them simultaneously.

In retrospect, many parishioners that attended the grief support group worked through the stages of grief with the belief that their loved one lives on inside of their hearts. All of the participants believed that God permitted their loss to occur. However, all of them worked through their grief by putting total faith and confidence in God.

All sessions opened and closed with prayer. Prayer focused participant’s attention and invited the presence of God. The first session began by defining the ministry issue
and objective, discussing confidentiality, and allowing participants to introduce themselves. Participants then completed an open-ended questionnaire that provided the researcher more insight about each participant’s particular situation.

The participant’s responses to the open-ended-questionnaire were useful in aiding the researcher to understand how each person was dealing with their loss. Also, it provided information regarding what type of support, if any, they received during their bereavement. The questionnaire illustrated how each member was fairing at that time and articulated what they hoped to gain through attendance.

Furthermore, a questionnaire was administered following session completion. Additionally, the writer kept a written journal recording and evaluating the effectiveness of the group and each participant’s progression or regression. The researcher documented the observed visual and verbalized improvements each member expressed. Other resources included books, articles and biblical passages regarding death and dying. Each participant in the group was asked what role, if any, the books, articles and biblical passages played in the sessions and their private lives.

During the first session, three individuals decided that they could not continue on in the sessions. They were not ready to share their loss or be part of a support group at the present time. The writer continued the sessions with the remaining four individuals. Ultimately, the group consisted of African American suburbanites, urbanites, and rural community dwellers of various social and economic groups. The population was diverse and an equal representation of males and females. All members were professing Christians and attended church regularly.
Members of the support group were grappling with the loss of mothers, fathers, sisters, brothers, children, aunts, uncles and friends. A few of the members in the group experienced multiple losses. One of them reflected upon deaths that occurred some 25 years ago, while others grappled with wounds that occurred just two weeks prior. Once members had been and assured of confidentiality and introduced themselves they freely shared their personal loss stories. The process was an open and candid exchange. It appeared that a few members in the support group were adjusting mentally and physically to their loss and were faring well in the grieving process. However, a few members were experiencing complicated grief. Some were having trouble sleeping, eating, and verbalizing their feelings.

**Evidence of the Stages of Grief Demonstrated by Support Group Members**

**Denial**

The manifestation of denial took place in the support group through various conversations. For example, Ms. C attended the support group because her son was hit by a car and died. Ms. C verbalized her loss in these words, “My son was killed eight years ago. He was hit by a car and died a few days later at the hospital. At times it is difficult for me to accept my son’s death because of the parental connection that inextricably connects a parent to her child. My child was a part of me; I gave birth to him, I nursed and clothed him, and now he is gone. As long as I live he lives on the inside of me; at times I can’t believe that he is gone” (G. Williams personal communication).

For Ms. C attending the support group was a refreshing experience. The researcher conveyed to Ms. C that denial is not a negative emotion. Ms. C began to
embrace her denial when she came to the realization that denial is a natural part of the grieving process. Ms. C articulated her denial by stating, “My denial was helpful, in essence it kept me sane because I was not ready to accept the reality surrounding my son’s death” (G. Williams personal communication). For Ms. C the denial of her son’s death allowed her time to come to terms with her feelings. The researcher conveyed to Ms. C that there is no time table for working through the various stages of grief, each individual responds to grief differently.

The second illustration of denial that manifested itself in the support group was that of Mr. X. Mr. X’s daughter committed suicide. The first week in the support group Mr. X said very little, he listened attentively as others talked about their loss camouflaging his denial. When Mr. X spoke he told the support group that he was dealing with his hurt and pain alone. Moreover, Mr. X did not speak directly about his loss; he talked about other relevant issues. The researcher recorded the following words from Mr. X about denial in the journal:

“When I first received the phone call that my daughter had committed suicide I could not believe it; I thought I was creaming. I thought the person on the phone had me mixed up with someone else and had mistakenly dialed the wrong number, but there was no mistake. He had the right man on the telephone, as well as the correct number. For months I was in denial. I could not believe this was happening to me. I thought this kind of tragedy happens to other people’s families not mine. I did not want to believe that my daughter could do such a thing” (G. Williams personal communication).

The researcher reminded Mr. X that denial protected him from the full impact of the loss and is a stage of grief from which he could and will overcome with God’s help.
Anger

A few of the members were harboring anger as a result of their loss. To assist parishioners with their anger the researcher focused on three major aspects of anger. First, the researcher informed the support group that facing anger is the beginning of accepting reality. Secondly, anger must be channeled in a healthy and productive manner. Finally, God understands the emotion called anger.

Another young lady (Ms. Z) that attended the support group was angry with herself, friends, and family members. Ms. Z’s baby died two months after he was born. To make matters worse, some of her family and friends told Ms. Z not to cry, that she could have another baby. Ms. Z was angry because she never gave herself permission to grieve the loss of her son; moreover, the negative comments by family and friends complicated her anger. The writer recorded the following statements from Ms. Z’s:

“When my son first died I was so hurt because I missed him very much. I carried little man inside of me for months; I felt him developing inside of me. To hear someone say get over it because you can have another child was unfair. I was angry when I was told to get over my loss and that I could have another baby” (G. Williams personal communication).

The researcher conveyed to Ms. Z that it is okay to be angry at the events and circumstances surrounding her loss. For Ms. Z admitting her anger allowed her to face the reality of her loss. The researcher suggested to Ms. Z that she had a right to grieve the loss of her son because the baby that died was unique. Furthermore, the support group was a place for Ms. Z to verbalize her anger. In group sessions Ms. Z learned that she deserved the right to grieve and needed no one’s permission. Attending the support
group was helpful to Ms. Z because for the first time in years she gave herself permission to grieve the death of her son. The writer articulated to Ms. Z that one does not choose to become angry when confronted by significant loss; however, one can choose how they channel their anger.

Finally, Ms. Z thought that God was angry with her for being angry over her loss. Also, some of the members were under the assumption that anger is only a negative emotion that needed to be suppressed. The researcher conveyed to Ms. Z and the group that God understands anger. Moreover, God understands that there are events and circumstances surrounding loss that sometimes makes people angry. Ms. Z was able to work through her anger issue once she understood that anger was apart of the grieving process.

Bargaining

The third stage of grief was evident in the group’s behavior as well. Some of the members that attended the support group attempted to bargain with God. Mr. J attended the support group because he lost his mother to cancer. Mr. J conveyed to the support group that his mother was ill for three years until she succumbed to cancer. The writer recorded the following thoughts expressed by Mr. J:

“When I first discovered that my mother had cancer I was devastated. To discover that the cancer had spread was even more troubling. I was distressed because the doctors had done all they could do for my mother and chemotherapy was not working anymore. I knew that my mother was going to die and I did not want to accept that fact. Therefore, I began to bargain with God, I pleaded with God to extend my mother’s life, to heal her. I arrived at the conclusion that God is good because God spared her life another year” (G. Williams personal communication).
The researcher conveyed to Mr. J that when a person reaches the bargaining phase, he/she is beginning to accept the reality surrounding their loss. Theoretically, the researcher helped Mr. J to comprehend that bargaining is a frequent human response that a grieving person exercises when something significant is about to be taken away.

**Depression**

The fourth stage of grief, depression, was prevalent in the support group as demonstrated by two of the members that attended the sessions. The first illustration of depression that manifested itself in the support group was that of Mr. X. As previously mentioned Mr. X’s daughter committed suicide. Mr. X described his depression in these words, “When I look back over my life and I think of my daughter’s suicide, I should have spent more time with her. Sometimes I feel that my life is over. I think of my daughter and sadness comes over me. I get depressed from time to time” (G. Williams personal communication).

The researcher explained to Mr. X that depression usually occurs when the grieving patient realizes that the deceased person is gone forever and they are not going to return. In retrospect, depression is a dangerous stage for some people because this is the stage when some contemplate giving up. Depression leaves the person feeling left alone, unworthy, and wondering what the future holds. The researcher conveyed to Mr. X that depression is a necessary stage to work through because if one refuses to confront their loss they cannot reach the fifth stage of the grief process that is acceptance.

**Acceptance**

Kubler-Ross’ fifth stage of grief is acceptance. Some of the members had reached full acceptance. In particular, a mother (Ms. C) who was faced with the decision to
remove machinery that was preserving her son’s life experienced almost all of the stages of grief during the sessions before arriving at acceptance. She was scared by the painful decision to discontinue the life support of her son. Therefore, she joined the support group to receive additional support.

Regardless of one’s position on euthanasia there is a tremendous difference between debating euthanasia and being confronted with it. Her 8 year-old son was playing in his front yard with a basketball when he lost control of it, ran onto a busy street to retrieve it, and was struck by a car. The young boy was rushed to the hospital; hours later the doctor advised the parents that he was brain dead and being kept alive by a respirator. After extensive testing, the results were the same.

The researcher quickly realized that the grieving mother knew very little about the stages of grief and was ill equipped to overcome her grief in particular how it relates to euthanasia. Also, she was grappling with feelings of guilt, anger, and depression. The researcher reminded the mother that she had made an enormous decision to terminate her son’s life support and that she did not warrant the situation or cause her son’s death. For the grieving mother this was a relief.

The researcher reminded the mother that God understood her motive for removing the life support of her son. As a parent she did what she felt was best for her son, therefore, the moral and religious decisions that she made were right. The mother was also reminded that guilt, anger, and depression are natural elements of the grief process and completely normal.

The grieving mother wanted to know if God would forgive her for the decision that was made to terminate her son’s life. The researcher reminded the mother that God
is a forgiving God and that she needed to ask God to help her to forgive herself. The mother attended the grief support group seeking emotional support. “Family and relatives are not always adept at reaching out. They may not realize how long grief can take to resolve. Or they may not perceive a loss as meaningful, though it leaves a great void in the griever’s life” (Bender 1998).

Ms. C talked about accepting her loss in these words. “I know that my son is gone, it has been eight years and I have to let him go. I have grieved his death for eight years and I have to accept life for what it is. I will forever love and miss my son, but I have accepted the fact that life is different now” (G. Williams personal communication). The researcher explained to Ms. C that reaching full acceptance does not mean that the other stages of grief will not resurface.

Another illustration of acceptance is that of Mr. J who attended the support group because his mother died of cancer as previously stated. Mr. J described his acceptance of his mother’s death in these words, “My mother was a religious woman and she loved God. I have accepted the fact that my mother is gone; we all have to die someday. Death is a natural part of life, it is something that we cannot control or prolong. God and my mother would not want me to worry about her and not enjoy the life that God has blessed me with” (G. Williams personal communication). The researcher reminded Mr. J that full acceptance means that a person has resolved some of the issues related to death and dying.

**Belief in the Resurrection Power of Jesus and Heaven**

In the grief group sessions many of the members found a sense of peace and comfort in the resurrection power of Jesus Christ. Individuals in the group used the
words “resurrection” and “power” repeatedly. One young man said, “I’m not worried about my loved one anymore because Jesus has the power to resurrect my loved one from the grave.” Many of the members in the support group were making progress in their grief recovery because they strongly believed that their loved one was with God in heaven.

The resurrection power of Jesus is displayed in three biblical narratives: Luke 7:11-15, the raising of the widow’s son; John 11:17-25 and 38-44, the resurrection of Lazarus; and Mark 5:21-24 and 35-43, the resurrection of Jairus’ daughter. One hundred percent of the members in the support group believe that Jesus Christ is the Son of God. Another group member said, “God is in control of our lives and I know I will see my loved one again. I’m at peace with my loss because Jesus Christ is Lord over death. The resurrection power of Jesus is a clear indication that Jesus has the power to bring hope out of death” (G. Williams personal communication).

The resurrection points to Jesus’ victory over death as well as hope for humanity. In I Corinthians 15:14, Paul asserts, “If Christ has not been raised from the dead, then our preaching is in vain and your faith is in vain.” Jesus’ resurrection affords us the opportunity to have a direct relationship with God because He intercedes on our behalf. The Apostle Paul reminds us, “We do not look at the things which are seen. For the things which are seen are temporary, but the things which are not seen are eternal” (II Corinthians 4:18). King Solomon said it best, “love is stronger than death” (Song of Solomon 8:6). The love that Jesus has for us cannot be destroyed by physical death.
Analysis of Results

Questionnaire I

From the 17 questions asked in the questionnaire, the writer learned that none of the 4 individuals received grief counseling. They were dealing with their hurt and pain without professional assistance. The responses also indicated that each of them was uninformed about the stages of grief and how to recover from their loss.

Questionnaire II

As stated earlier, the final questionnaire was administered at the conclusion of the last session. Participants were asked to answer the following questions:

1. Has this grief ministry group session been helpful to you? Circle one.
   Yes   No

2. How would you rate the group ministry sessions on a scale of 1 to 5? Circle one (5 being the highest).
   5   4   3   2   1

3. What have you learned about grief that was most helpful to you during these five sessions? Please comment.

4. How do you feel you are coping with your loss after having attended these group ministry grief sessions?

5. What was most helpful to you during these sessions? Explain your answer.
   a. Books read
   b. Articles used
   c. The Bible
   d. Group sharing
   e. Group support
   f. Other

All four persons indicated a degree of satisfaction with the group sessions. For example, all four stated that the group sessions were helpful. Three individuals rated the session a “5” and one person rated the sessions a “4.” One man felt that it was helpful to
know Kubler-Ross' stages and included the following comment, “It’s good to know Ross’ stages of grief” (G. Williams personal communication). Another person said, “It is good to know that I am not alone. Also, attending these sessions taught me how to grieve in a healthy manner” (G. Williams personal communication).

At the conclusion of the last session, members were asked how they were fairing with their loss. One woman said, “I have learned what to look for now. I now understand the difference between normal and complicated grief. I also learned that it takes time to get over the death of a loved one. Therefore, I am going to take better care of myself and allow God to heal the pain. I know that it is not going to be easy” (G. Williams personal communication).

Finally, each person was asked what was most helpful during the group sessions. Two persons enjoyed the articles and the books. The other two enjoyed the group sharing, support, and the biblical passages.

**The Written Journal**

The researcher kept a weekly journal on each of the grief support group participants. The following excerpts provide greater insight regarding each participant’s progression while engaging in the grief support group.

**Case 1**

Mr. X’s daughter committed suicide. Mr. X expressed the following feelings surrounding his daughter’s death:

“Attending the grief support group was helpful because I did not know how to handle my grief. Attending the support group was the best thing that could ever happen to me. Learning what the Bible had to say about suicide and Kubler-Ross’ five stages of grief has really helped me in the grief process. The death of my child is going to be difficult to overcome. My child and I are inextricably connected; I brought her into the world. I
reared and clothed her. I am not in denial any more and I am beginning to accept the fact that she is gone. However, as long as I live, she lives inside of me. I am not clear why my daughter's death happened the way it did, but I am at peace knowing that my child has a chance of making it into heaven” (G. Williams personal communication).

Case 2

Ms. Z’s baby died shortly after birth. She was told not to cry and that she could have another baby. Ms. Z. stated,

“The support group was refreshing because I discovered that I had a right to grieve the loss of my baby. Kubler-Ross’ stages of grief really helped me because I was bargaining with God and didn’t know it. I wanted my baby to live, but God said no. Attending this support group has allowed me to grieve my loss. In fact, I have reached the stage of acceptance because I have moved beyond the pain and hurt. I still think of about my baby at times. But God is good because God has blessed me with another baby” (G. Williams personal communication).

Case 3

When Mr. J’s mother died he expressed the following concerns regarding overcoming his grief:

“I did not know how to deal or responded to my mother’s death. How to handle grief is not taught in public schools, so I dealt with my grief the best why I knew how. Coming to the support group was helpful because I know the different stages of grief. Also, it is good to be around people who have had similar experiences. Attending this support group was a breath of fresh air. I learned a number of things that helped me in the grief process. First, the support group has helped me to see that grief is an ongoing process. Second, the support group was a place for me to open up and articulate my feelings. I enjoyed it. I have always been a man of faith and believe in God. I enjoy reading and going over the scriptures that were used in the support group. The word of God gave me comfort and strength” (G. Williams personal communication).
Case 4

Ms. C expressed the following feelings surround her experience with death and dying:

"The loss I have experienced in my life was used by God to strengthen my life and journey here on earth. When I think of the experiences of the death of my brother, mother, father, and sister along with the abandonment of my husband and father of our son, it prepared me for whatever life would hurl at me. Nothing was further from the truth. The death of my son revealed how frail and powerless I was without God and my only way of overcoming and not perishing was in Him.

My journey to strength began with the acceptance that God is the Ruler of the Universe. He can do what, when, where, how and to whom whatever He wills and He is not required to tell us why. God has power over everything and everybody. Death could not come until God said so. My son did not die until God said so. Attending the sessions was helpful. However, the tool that helped me come to grips with my son’s death was the Bible. Jesus promised never to leave me nor forsake me. Being a part of the support group that cared about me also meant a lot to me” (G. Williams personal communication).

From the research findings the writer concluded that no one ever truly gets over losing a loved one. Two important factors that support this statement are recollection and agape love. Recollection, as defined by the writer, means to bring back to the level of conscious awareness the memories one shared with the deceased. When someone dies, the grieving person will often recall memories of the deceased. For example, many of the bereaved parishioners who lost loved ones some thirty years ago were still grieving. Ironically, many of the family members had worked through Kubler-Ross’ five stages of grief and moved beyond the death event. When the loved one’s name was mentioned, many of them were taken back to the death event and the hurt and pain resurfaced.

It was evident in the support group that an individual could move beyond the death of a loved one and reenter the circle of life. However, it was not possible for an individual to move beyond recollection of the deceased. The recollection of death is
similar to a walk down memory lane. When we reflect on our interactions with and memories of the person who died we create an imaginary impression of the deceased. Thus, the dead person becomes alive in our minds as well as our hearts. Seventy-five percent of the people in the group had never heard of Kubler-Ross’ five stages of grief; they were happy and relieved to discover that what they were experiencing was normal. Moreover, they were on the correct path to recovery.

The second reason that one never gets totally over the death of a loved one is agape love. The writer defines agape love as a love that has no limitations or end; it means to love unconditionally and unselfishly. When someone loses a loved one, agape love is often displayed in the lives of the bereaved. The young man who lost his mother said, “Life goes on. I know I have to move on and I have. I feel that I am working through the stages of grief. I miss my mother” (G. Williams personal communication).

Losing a loved one does not destroy our recollection of the deceased; neither does it affect our memory. We can live a holistic and meaningful life after the person’s death. However, the love and experiences we shared with our loved ones live on inside of us, they do not dissipate.

In summary, the Apostle Paul reminds us in Romans 8:38-39, that nothing, not even death, can separate us from the love of God. “For I am persuaded that neither death nor life, nor angels nor principalities nor powers, nor things present nor things to come, nor height nor depth, not any other created thing, shall be able to separate us from the love of God which is in Christ Jesus our Lord.”
CHAPTER VII

CONCLUSION

It has been previously stated that St. Mary United Methodist Church (St. Mary) experienced numerous deaths and funerals. More importantly, St. Mary did not have a grief support group in place to support the general ministry of the church. In fact, there was no grief support group in the city of Hogansville, Georgia. In response to this problem, the researcher adapted and implemented a model using Kubler-Ross’ five stages of grief from a biblical perspective to equip the congregants at St. Mary to deal with death and dying.

The researcher’s goal was to adapt and implement an ongoing model using Kubler-Ross’ five stages of grief. In doing so, the researcher discovered that Kubler-Ross’ five stages of grief played a vital role in the recovery process of each participant. A few of the participants came to the support group thinking something was wrong with them because they were angry over their loss. However, they discovered that anger is a normal grief reaction. The support group was a place for many of the participants to mourn and communicate their loss.

The researcher discovered that death delivers a blow to the family system from which it can recover with the proper support. This recovery is done as the family experiences the normal stages of grief. The single greatest influence on the way a person grieved is their view of God as it relates to the death event. In no way is the researcher suggesting that the participants who professed a strong belief in God were exempt from
the grief process, but their faith did influence the grieving process. The Scriptures, both Old and New Testaments, view grief as normal. Ironically, the God of hope is often blamed in the occurrence of death. However, it is the eternal perspective of death, the final resurrection, which was a source of hope for many of the parishioners that attended the grief support group. In time all of the parishioners made sense of the loss by accepting God’s sovereignty in fulfilling God’s divine plan.

Each person who attended the support group came because he or she wanted to learn more about grief and how to cope with death and dying. Learning Kubler-Ross’ five stages of grief was beneficial to each participant as they worked through the various stages of grief. Interestingly enough, each participant was able to name the different stages of grief, and identify which stage they were in. Also, they discovered that grief is an ongoing process.

The researcher discovered that all of the participants refused to be defeated by their devastating loss; each of the participants relied strongly on their faith in God and the Bible. In fact, throughout the group sessions each participant quoted statements that Jesus made in the Bible; all of them believed strongly in Jesus Christ. In retrospect, they believe that Jesus died on Calvary’s cross and defeated death when He rose from the grave. Participants in the support group talked about a future reunion with their deceased; when the dead and living will meet again never to be separated.

The Bible played an imperative role in each participant’s recovery process because his or her faith in Jesus provided a sense of hope. In view of this, the church can play an integral part as it seeks to provide care for survivors. The church, and particularly ministers of the gospel, must work to create an atmosphere in the
congregation that encourages dialogue in the area of grief recovery. Dialogue is needed because many parishioners in the support group were grappling with their hurt and pain alone. These ministerial moments provided unique opportunities to aid families in restoring some sense of normalcy to their lives. In this project the researcher focused attention on developing an ongoing model at St. Mary because the researcher believes that the church must equip the people of God with the skills and tools needed to recover from the loss of a loved one.

Many of the parishioners that attended the grief support group displayed little or no physical scars. However, as the sessions progressed the invisible hurt and pain surfaced. The grief support group is a clear indication that God is a God of healing. Also, as Christians we must not walk around hurting making no attempt at becoming healed. In essence, all of the participants came to the grief support group because they wanted to overcome their grief.

Interestingly enough the researcher discovered that all of the participants were able to apply Kubler-Ross’ five stages of grief from a biblical perspective. However, a few of the participants that lost loved ones years ago were still working through their loss; it was evident that grief was a revolving process. The researcher also discovered that losing a loved does not destroy the memory one shared of the deceased. In the grief support group the researcher learned that true love couldn’t be destroyed. Again, King Solomon said it best, “Love is stronger than death” (Song of Solomon 8:6).

Adapting Kubler-Ross’ five stages of grief from a biblical perspective at St. Mary impacted the church and community. For example, the researcher addressed the issue of suicide. The grieving parent that attended the grief support group was confused and
worried that his child had gone to hell for committing suicide. Contrary to popular belief, the researcher helped the grieving parent to conceptualize that suicide victims can also go to heaven. In no way did the researcher try to make suicide an acceptable practice. In retrospect, the researcher simply exposed the grieving father to scriptures related to suicide. As a result, the father was able to study and research the scriptures relating to suicide for himself. After careful study, the grieving father worked through the stages of grief with a biblical understanding that God forgives sins, even the sin of taking one’s own life.

The grieving father arrived at the conclusion that suicide and salvation are two separate issues. Paul reminds us, “that all have sinned and fallen short of the glory of God” (Romans 3:23). Therefore, due to humanity’s disobedience, God gave His one and only Son to save and reconcile the world. It is through Jesus’ death that salvation is made available to everyone, including those who commit suicide. Psalm 51:5 reminds us, “That human beings are born into sin.” The researcher arrived at the conclusion that every human being is capable of committing good or evil acts. We can never do enough to earn God’s salvation; therefore, God sent Jesus. Truly God is love and full of grace. The researcher will always be aware that above all God’s love for us is never-failing and never-ending. The grieving father arrived at the conclusion that nothing could separate his daughter from the love of God.

All of the parishioners attending the grief support group indicated that Jesus is Lord. Jesus was born of the Virgin Mary by the power of the Holy Spirit, and that He is the Word made flesh. The Holy Spirit is also a part of the Godhead: Father, Son and Holy Spirit. Therefore, the researcher reminded parishioners who were struggling with
grief that Jesus is Lord over government, their personal lives, and the universe. More importantly, the statement Jesus Christ is Lord asserts with confidence that Christ died so that everyone could have the opportunity to receive salvation and eternal life.

Suicide is usually carried out in privacy. Therefore, what transpires spiritually during the last moment of a person’s life is revealed only to God. Ephesians 2:8-9 reminds us, “For by grace you have been saved through faith, and that not of yourself; it is the gift of God, not of works, lest anyone should boast.” Salvation is God’s gift to the world through Jesus.

Another difficult topic the researcher addressed was euthanasia. The grieving mother who terminated her son’s life found consolation in the decision to do so. Being exposed to Kubler-Ross’ five stages of grief helped the parent to realize that anger, denial, and depression are normal stages of grief. She was able to express her feelings and arrive at the conclusion that she was not the cause of her son’s death. The grieving mother concluded that her decision to end her son’s life was, and still is, acceptable due to the circumstances. The mother left the group with a sense of peace and comfort.

Death is inescapable; for every human being there is a beginning and an end to life. The origin of life begins at the moment of conception; it is our introduction into the world. The conclusion of life ends when our spirits return to God. Losing a loved one to death is out of our control. However, the way an individual responds to their loss is not.

In short, members that attended the grief support group came to the realization that death invades one’s life. However, the participants worked through the stages of grief focusing on how to understand the invasion of death into life. All of the participants
saw God as the source of life and death. They found comfort in knowing that there will be a future resurrection when they are reunited with their loved ones.

**What was Learned**

The researcher learned a number of important things by conducting the grief support group. First, the researcher discovered that grief is a social process because it affects us directly and indirectly. In retrospect, each person in the support group arrived at the conclusion that grief is inescapable. For example, in time, those closest to us will be taken away by death. All of the participants in the grief support group faired well once they were exposed to Kubler-Ross' five stages of grief. The researcher discovered that each person in the support group was willing to make the necessary adjustments to work through their grief. The researcher observed that the entire grief support group had a strong faith in God, each of them worked through their grief recognizing that God was with them in their moments of bereavement.

Working with the grief support group allowed the researcher to comprehend that traumatic events occur in life that are difficult and painful to overcome. However, God is with God's people during difficult moments. The researcher experienced God as a sovereign Creator and bereavement counselor. All of the participants arrived at the conclusion that God was with them in spirit as they worked through the stages of grief. Many of them recited John 15:5 where it states, "I am the vine; you are the branches. If a person remains in Me and I in him, he will bear much fruit; apart from Me you can do nothing." In reality, the researcher learned that as the participants worked through the stages of grief, the Holy Spirit acted as God's divine agent. The Holy Spirit empowered and strengthened the people of God to grapple with their loss.
The Apostle Paul states that the “Holy Spirit also helps in our weaknesses. For we do not know what we should pray for as we ought, but the Spirit Himself makes intercession for us with groanings which cannot be uttered. And He who searches the hearts knows what the mind of the Spirit is, because He makes intercession for the saints according to will of God” (Romans 8:26-27). The Holy Spirit was present every step of the way in the grief support group. The Holy Spirit was the primary instrument God used to work in the life of the parishioners as they worked through the stages of grief.

The researcher also learned that all of the participants had a disciplined prayer life. Prayer was how each participant communicated with God concerning their loss. All of the sessions opened and concluded with prayer. Interestingly enough, all of the participants enjoyed praying together as a group. All of them prayed for each other inspite of their own personal grief. Prayer provided the group participants with another way of expressing their grief. In retrospect, it was an open channel to God. All of the participants believed that God is never too busy to listen as stated in Psalm 145:8, “the Lord is near to all who call on Him in truth.”

The researcher also learned that all of the parishioners had strong faith in God. All of them believed God could do the impossible and that nothing was too difficult for Him to reverse or change. Matthew 17:20 speaks of the power of faith: “If you have faith as a mustard seed, you will say to this mountain, move from here, and it will move; and nothing will be impossible for you.” Thus, as the parishioners worked through the challenges and obstacles of their grief, faith was a vital weapon in overcoming their loss. Many of the grieving parishioners arrived at the conclusion that a person never gets over death. However, with God’s help and the grief support group they can get through it.
Perhaps the most important lesson that the researcher learned was that people are looking for grief support within the church. Parishioners that attended the grief support group were hurting and needed help. The researcher has learned that people don’t always come and ask for the church to organize a grief support group; it is the senior minister’s responsibility to provide extended care for grievers after the funeral is over.

It is imperative that ongoing grief support groups be held at St. Mary on a regular basis. It must be a priority for the minister of the church. “The pastor must be willing to change his own schedule so that he might minister to those in need. But he should remember that the loved ones are going through a time of severe disruption and irreversible change. He merely has to rearrange his schedule; they must rearrange their lives” (Wiersbe and Wiersbe 1985).

**The Role of the Church**

Again the researcher learned that the church family, often an extension of the nuclear family system, plays an imperative role in the recovery and reentry of persons in life and society. Dr. Edward P. Wimberly in his book, *Pastoral Care in the Black Church*, stated, “The African American church has a responsibility to help bereaved persons to work towards healing and wholeness” (Wimberly 1991).

As with the nuclear family, the influence of the church is often witnessed in moments surrounding the funeral service. The ministry of presence, which includes sitting with bereaved, listening, bringing food, and offering available grief counseling, is a positive response. Furthermore, the presence and participation of church members during the funeral service is helpful. One lady who lost her daughter said, “It felt good to
cry and see church folk, pastors included, cry with me during the funeral” (G. Williams *personal communication*).

In short, the researcher has leaned that available grief counseling must be offered regularly. The ministry offered after the funeral is equally important as the bereaved seeks to reconnect with the community.

**The Role of the Pastor**

The researcher discovered that during the moment of bereavement all of the parishioners that attended the grief support group were greatly influenced by the pastor. Equally important, each of the participants attended the grief support group upon the request of the researcher; which indicates that ministers have tremendous influence on their parishioners. All of participants departed the support group having made tremendous strides in working through their grief.

The researcher learned from reading Rabbi Jacob Goldberg’s book, *Pastoral Bereavement Counseling*, that the pastor can facilitate the grieving process by making him or herself available to the parishioners; the pastor now becomes the bereavement counselor. Thus, “Pastoral Bereavement Counseling is more pastoral than professional. It is designed to present the counselor to the mourner’s consciousness as a shepherd who cares deeply about each member of his flock. For mourners who feel helpless, abandoned, and unloved, this can be extremely reassuring. It can be of great value in and of itself” (Goldberg 1989). The researcher now understands that he must provide holistic ministry to the parishioner of St. Mary by offering ongoing grief support.

Rabbi Goldberg helped the researcher comprehend that by providing a grief support group at St. Mary the pastor achieves “two sacred purposes. One is to help a
human being, a child of God, who is in distress. Another is to fulfill a yearning to perform a religious deed that will find favor in God's eyes" (Goldberg 1989). Therefore, the researcher believes that it is the will of God for parishioners to live a life free of unresolved grief.

Finally, the grief support group was conducted and carried out as planned. This researcher would not do anything differently because each participant worked through the various stages of grief thereby overcoming their loss.

**Goals for Future Ministry**

Due to the high volume of funerals conducted at St. Mary a support group will be continued. Therefore, I will conduct a semi-annual grief support group. The church has also introduced a caring station, which provides pamphlets and brochures about grief. Many of the members that attended the support group dealt with their pain and hurt alone before attending the support group. But as a result of these support groups, St. Mary will reach out to the community and open its doors by providing help, support and counseling for the bereaved. In the future, I will train other lay people to conduct semi-annual grief support groups.
APPENDICES
APPENDIX A

GLOSSARY OF TERMS

Acceptance – The bereaved person realizes that the deceased is not coming back and re-enters the circle of life. Moreover, the grieved person comes to terms with the reality of the event and accepts what has occurred.

Anger – Feelings of frustrations, hurt, or disappointment expressed within one’s self or directed onto others.

Bargaining – One tries to make a deal, or does something to change or alter the outcome of the situation or problem at hand. One bargains with God or a significant other to prolong the dying person’s life.

Biblical – Sacred writings used by Christians that derive from the Bible (Old and New Testaments).

Complicated Grief – Occurs when a person fails to move beyond the initial problem or trauma. The death event prevents the person from working toward holistic healing in a normal and productive manner.

Death – The termination of life, of one’s physical and conscious existence.

Denial – The inability to accept reality or the truth concerning the dying patient, an unwillingness to face reality in light of the truth or facts.

Depression – the person realizes that he or she has a debilitating sadness when reality of the loss sets in.
Grief – The loss of something that one values that causes hurt and agony. Grief can originate from the loss of a loved one, job, divorce, or physical impairment.

Guilt – The individual feels responsible for the death related event and/or circumstances surrounding the event.

Healing – To restore to one’s original self, or to work to become healthy or whole.

Normal Grief – When a person works toward holistic healing in a healthy and productive manner that allows them to experience the normal stages of grief.
APPENDIX B
OPEN-ENDED QUESTIONNAIRE

Date_______________________ Respondent_____________________________
Setting_________________________ Position________________________________

The following is a sample of questions to guide the interview process:

1) Who was the closest person to you to die?

   ____________________________________________
   ____________________________________________
   ____________________________________________

2) When did they die?

   ____________________________________________
   ____________________________________________
   ____________________________________________

3) How do you feel you are coping with the death today?

   ____________________________________________
   ____________________________________________
   ____________________________________________
4) How did you cope with your loss at the time?

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

Do you feel guilty about your loss?

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

5) Did you have a close friend, or someone you trusted, to confide in about your loss?

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

6) Have you ever attended a support group before?

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

7) What was most helpful to you during the initial stages of grief?

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________
8) Has your faith in God helped you in your grief process?

9) Do you believe that God is with you in your grief process?

10) How do you see God working in this situation?

11) Do you sleep well at night?

12) How did your immediate and/or extended family assist you in coping with your loss?
13) What are some of the most comforting comments that you can recall others making during your time of grief?


14) What, if any, were some of the most annoying remarks that people made?


15) What role did the church or minister play in the process?


17) What do you hope to gain from these group sessions?


APPENDIX C

END OF SESSION QUESTIONNAIRE

Date _______________ Respondent _____________________________

Setting ____________________________ Topic _______________________

1. Has this grief ministry group session been helpful to you? Please explain your answer.

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

2. How would you rate the group ministry sessions on a scale of 1 to 5 (Circle one – 5 being the highest rating)?

5  4  3  2  1

3. What have you learned about grief that was most helpful to you during these five sessions? Please comment.

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________
4. How do you feel you are coping with your loss after having attended these group ministry grief sessions?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

5. What was most helpful to you during these sessions? (Circle one)
   a. Books read                      d. Group sharing
   b. Articles used                   e. Group support
   c. The Bible                       f. Other____________

Explain your answer.
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
APPENDIX D

SCRIPTURES

John 14:27
Peace I leave you; My peace I give to you, not as the world gives do I give to you. Let not your heart be troubled, neither let it be afraid.

John 16:33
These things I have spoken to you, that in Me you may have peace. In the world you will have tribulations; but be of good cheer; I have overcome the world.

II Corinthians 1:3-4
All praise to the God and Father of our Lord Jesus Christ. He is the source of every mercy and the God who comforts us. He comforts us in all our troubles.”

Romans 8:26
Likewise the Spirit also helps in our weaknesses. For we do not know what we should pray as we ought, but the Spirit Himself makes intercession for us with groaning which cannot be uttered.

Job 23:10
He knows the way that I take; when He has tested me, I shall come forth as gold.

I Peter 5:7
Cast all your cares upon Him, for He cares for you.
Psalm 27:10
When my father and mother forsake me, then the Lord will take care of me.

Jeremiah 29:11
“For I know the plans I have for you,” says the Lord, “plans for good and not for disaster, to give you a future and a hope.”

Psalm 56:13
For you have delivered my soul from death. Have you not kept my feet from falling, that I may walk before God in the light of the living?

Isaiah 40:28-29
Have you not known? Have you not heard? The everlasting God, the Lord, The Creator of the ends of the earth, neither faints nor is weary. His understanding is unsearchable. He gives power to the weak, and to those who have no might He increases strength.

Isaiah 40:31
But those who wait on the Lord shall renew their strength; they shall mount up with wings like eagles. They shall run and not grow weary; they shall walk and not faint.

Hebrews 4:16
Let us therefore come boldly to the throne of grace that we may obtain mercy and find grace to help in time of need.

Proverbs 3:24
When you lie down, you will not be afraid; yes, you will lie down and your sleep will be sweet.

Psalm 63:6
When I remember You on my bed, I meditate on You in the night watches.
Isaiah 65:24
Before they call I will answer, while they are still speaking I will hear.

Jeremiah 31:31
I will turn their mourning into joy.

Matthew 5:3
Blessed are the poor in spirit, for theirs is the kingdom of heaven.

Hosea 2:14
I will transform the Valley of Trouble into a gateway of hope.

Revelation 21:1-8
Then I saw a new heaven and a new earth; for the first heaven and the first earth had passed away, and the sea was no more. And I saw a holy city, the New Jerusalem, coming down out of heaven for God, prepared as a bride for her husband. And I heard a loud voice from the throne saying, “See, the home of God is among mortals. He will dwell with them as their God; they will be his people, and God himself will be with them; he will wipe away every tear from their eyes. Death will be no more; mourning and crying and pain will be no more, for the first things have passed away.” And the one who was seated on the throne said, “See, I am making all things new.” Also, he said, “Write this, for these words are trustworthy and true.” Then he said to me, “It is done! I am Alpha and Omega, the beginning and the end. To the thirsty, I will give water as a gift from the spring of the water of life. Those who conquer will inherit these things, and I will be their God and they will be my children.”

I Corinthians 15:26
The last enemy that will be destroyed is death.
Revelation 2:10
Do not fear any of those things which you are about to suffer. Indeed, the devil is about to throw some of you into prison, that you may be tested, and you will have tribulation ten days. Be faithful until death, and I will give you the crown of life.

Isaiah 41:10
Fear not, for I am with you; be not dismayed, for I am your God. I will strengthen you, Yes, I will help, I will uphold you with My righteous right hand.

Isaiah 43:1-2
Do not be afraid, for I have called you by name; you are mine. When you go through deep waters and great trouble, I will be with you. When you go through rivers of difficulty, you will not drown.

Psalm 147:3
The Lord “heals the brokenhearted and binds up their wounds.”

Psalm 34:17-18
The righteous cry out, and the Lord hears, and delivers them out of all their troubles. The Lord is near to those who have a broken heart, and saves such as have a contrite spirit.

Psalm 116:15
Precious in the sight of the Lord is the death of His saints.

Psalm 20:1
May the Lord answer you in the day of trouble; May the name of the God of Jacob defend you; May He send you help from the sanctuary, and strengthen you out of Zion.

Nahum 1:7
The Lord is good, a stronghold in the day of trouble; and He knows those who trust in Him.
I John 5:11-13

And this is the testimony: that God has given us eternal life, and this life is in His Son. He who has the Son has life; he who does not have the Son of God does not have life. These things I have written to you who believe in the name of the Son of God, that you may know that you have eternal life, and that you may continue to believe in the name of the Son of God.

Hebrews 12:2

Look unto Jesus the author and finisher of our faith; who for the joy that was set before him endured the cross, despising the shame, and is set down at the right hand of the throne of God.

Source: The Holy Bible, New King James Version
Words spoken with sensitivity and wisdom can help the grieved one in the healing process. Words spoken inconsiderately can injure, delay, or even prolong the healing process. Expressions that are spoken incorrectly cannot be taken back; therefore, when dealing with grieving persons always bear in mind that words can mend or can damage the hearer.

Don’t Say:

I know how you feel.

God loved the person more than you; therefore, the person went to be with God.

Don’t cry.

You are crying too much.

At least they lived a long life.

You’re young; you can get married again.

You can have another baby.

Hold yourself together.

Don’t let anybody see you looking depressed.
Do Say:

I am here if you need me.

Please call if you would like to talk, or if you need anything.

I’m sorry about your loss.

I am praying for you.

What can I do to help?
APPENDIX F

DO’S AND DON’TS DURING THE GRIEVING PROCESS

Do:

- Talk to other people who have experienced loss.
- Speak of the meaning of the loss to yourself, e.g., the ways in which you will miss the deceased.
- Seek support directly from those who are able to give it. A hug may be important.
- Stay with a routine, stick to a schedule, even if you feel you are just going through the motions.
- Recognize the feelings for what they are rather than why they are. Knowing what the feeling is can help in dealing with it.
- Use writing, art, and music to express your feelings and thoughts.
- Be forgiving and patient with yourself. It is all right to make mistakes or lose your concentration.
- Be good to yourself. Take the rest you need, the walk you enjoy, the gift you would like.
- Give yourself time. Time does heal, but how long it takes is an individual matter.
- Seek guidance from a source that can offer both wisdom and empathy.
Don’ts:

- Try to make major life decisions too quickly.
- Numb your pain with depressive chemicals such as alcohol or other drugs. Use chemicals only if directed by your doctor.
- Deny your feelings.
- Isolate yourself or hide out from others.
- Expect every day to get better. Accept ups and downs.

Source: (University Counseling Services 1997, 6).
APPENDIX G

SIGNS OF GRIEF

• Your body feels tired; you feel a need to sleep or rest more often than usual.
• You have trouble concentrating on daily tasks.
• You experience difficulty eating or sleeping.
• You may not want to do any physical work around the house or on the job.
• The use of over the counter or prescribed drugs in a manner that is not directed by your physician or labeling directions.
• You might have trouble having sex or feeling like your old self.
• You may feel depressed or lonely, or as if you have a broken heart.
• You may have dreams about the deceased, or find yourself thinking of him or her often.
• You may have trouble expressing your feelings.
• You may not feel like dressing up.
• You may have feelings of guilt or shame; these are normal when a loved one dies.
APPENDIX H

GUIDELINES FOR ENFORCEABLE LAWS GOVERNING PHYSICIAN AID IN DYING

The Hamlock Society clearly supports “enforceable laws governing physician aid in dying. The following guidelines offer protection for doctors, patients, and the public. The Hamlock Society will work to assist dying persons by conforming to the following principles:

1. Requires that the patient be fully informed of all alternatives, including hospice care.
2. Requires that only the patient makes the decision and that the patient must exercise independent judgment and not be coerced.
3. Defines terminal illness as one in which the patient has not more than six months to live.
4. Requires that at least two independent physicians agree on the diagnosis and the prognosis.
5. Requires a mental health consultation, which may be at the discretion of the physician, if the capacity of the patient is doubtful or if treatable depression is suspected.
6. Requires the patient to make an enduring request verbally, usually on three occasions separated by waiting periods ranging from 48 hours to 15 days.
7 Requires that one of the requests be made in writing and be witnessed by uninvolved observers.

8 Strongly encourages involvement of the family, with requests for the family to be notified and in agreement.

9 Requires that the patient have multiple opportunities to withdraw his or her request at any time.

10 Stipulates that aid in dying may be offered by no one other than the physician whose aid has been requested orally and in writing.

11 Stipulates that insurance benefits would not be affected.

12 Provides civil and criminal immunity to physician, pharmacist, and people who are present to assist the patient. Criminal penalties would attack if coercion were found or if the guidelines were not followed.
APPENDIX I

PRINCIPLES OF THE GEORGIA RIGHT TO LIFE

The Georgia Right To Life (GRTL) mission statement states, “The fundamental purpose of GRTL is to engage in actions that will restore and respect effective legal protection for all human beings from the moment of fertilization until natural death.” GRTL adheres to the following principles:

1. Educational Goal – The education of all people to foster respect for and protection of the intrinsic value of all human life in accordance with our mission statement.

2. Organizational Development Goal – The development and coordination of pro-life people to work cohesively to protect the precious gift of life in accordance with our mission statement.

3. Legislative Goal – The initiation and defense of pro-life legislation and the coordination of efforts to oppose national, state, and local legislation that conflicts with our mission statement.

4. Political Action Goal – The development, implementation and participation in the political process to further the pro-life cause on the national and state local levels.
APPENDIX J

SUICIDE WARNING SIGNS

Below is a list of suicidal warning signs. Moreover, the signs listed below do not mean that a person will commit suicide; these are possible suicide indicators.

- Mental depression
- Mood changes
- Making arrangements as though preparing for a final departure
- Suicide threats or other statements indicating a desire or intention to die
- A suicide attempt
- Talking about wanting to die or commit suicide
- A well-thought-out plan of suicide
- Withdrawal from friends and family
- Changes in sleep patterns and/or appetite
- A sudden and extreme neglect of personal appearance
- Decline in job or school performance or similar problems
- Sudden change in personality and/or behavior
- Aggressive and impulsive behavior such as violent outbursts
- Prolonged depression over the recent death of a friend or relative
- Drug or alcohol abuse
• Talking about feelings of worthlessness or being in hopeless circumstances
• Giving away prized personal possessions
• Sudden preparation of a will or review of insurance policies and estates papers
• Unusual preoccupation or interest in the subject of death reflected in speech and letters
• An obsession with songs, book, or movies with suicidal themes
APPENDIX K

PRAYER FOR STRENGTH AND SUPPORT

The participants that attended the grief support group were given a prayer reading for additional strength and support.

Let me for a moment go beyond the world I see through my eyes and behold all life, all relationships, and all problems only through Your loving eyes. Help me to stand in Your light when I am tempted to become lost in darkness and despair. I humbly ask that You replace my harsh judgment with Your tender compassion and understanding, and allow me to see all situations through Your wisdom.

APPENDIX L

CRISIS INTERVENTION TELEPHONE NUMBERS

Participants that attended the grief support group were given a list of crisis intervention numbers to be used for additional support. More importantly, they were given numerous numbers to choose from.

Crisis Management (808) 833-7382
Crisis Response System Project (808) 833-7382
Crisis Intervention and Referral (425) 258-4357
Crisis Hot Line (509) 488-5611
Crisis Intervention Team (253) 584-3735
Crisis Control Center (580) 924-3030
Crisis Line (918) 341-9400
Crisis Intervention Service (307) 587-3545
Depression Crisis (303) 862-1200
Crisis Response Service (207) 282-6136
<table>
<thead>
<tr>
<th>Organization</th>
<th>Phone Number</th>
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<tbody>
<tr>
<td>Crisis Ministries</td>
<td>(864) 882-7146</td>
</tr>
<tr>
<td>Crisis Ministries</td>
<td>(803) 723-9477</td>
</tr>
<tr>
<td>Emergency Psychiatric Hotline</td>
<td>(202) 387-6775</td>
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<tr>
<td>Suicide Prevention Resources</td>
<td>(202) 750-8410</td>
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<tr>
<td>Suicide Prevention Hotline</td>
<td>(718) 389-9608</td>
</tr>
<tr>
<td>Hope For Bereaved</td>
<td>(315) 475-4673</td>
</tr>
<tr>
<td>Recovery</td>
<td>(308) 532-3286</td>
</tr>
<tr>
<td>Georgia Suicide Counseling</td>
<td>(404) 730-1600</td>
</tr>
<tr>
<td>Heart of Care</td>
<td>(402) 349-0247</td>
</tr>
<tr>
<td>Sharing Our Strength</td>
<td>(701) 244-5082</td>
</tr>
<tr>
<td>Mood Disorders Support Group</td>
<td>(212) 533-6374</td>
</tr>
<tr>
<td>Arms of Love</td>
<td>(937) 323-9605</td>
</tr>
<tr>
<td>Forgotten Victims</td>
<td>(937) 222-1226</td>
</tr>
<tr>
<td>Support Works</td>
<td>(704) 331-9500</td>
</tr>
<tr>
<td>Independent Living</td>
<td>(417) 659-8086</td>
</tr>
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REFERENCE LIST


Birch, Bruce C. 1992. To love as we are loved. Nashville: Abingdon Press.


