

## MEN AND MOURNING

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### *Bob's Grief Experience*

Late one night, Bob was awakened by a phone call. A hospital emergency nurse told him that his son had been seriously injured in a vehicular crash. She told Bob that he and his wife should come to the hospital at once. Bob was scared and felt angry with the person who caused the wreck, even if it turned out to be his son. His frustration continued to build during the frenzied drive to the hospital. As they waited for the doctor, Bob felt every emotion he could ever remember experiencing. Eventually the doctor came to tell Bob and his wife that the surgical team had tried but failed to save their child.

**B**ob's waves of emotional reactions were interspersed with periods of numbness so he was temporarily able to maintain his composure in the presence of his grieving family.

**A**fter a few moments, everything within Bob seemed swallowed up by grief. He felt out of control, so he began to take care of immediate needs. He called relatives and the funeral home. He nurtured other family members intermittently.

**D**uring the next few days he orchestrated the funeral, feeling that he was protecting his wife and other children from participation in the planning. After the funeral, Bob no longer had so many tasks to complete. He felt lost, trying to make sense of the crime, while desperately attempting to restore

some normalcy in his life and within his family. Appearing “strong” to his fellow workers as he went about his daily work, he constantly fought his need to mourn. During a few moments of solitude, he remembered his last conversation with his son. He tried to remember the last words of nondescript talk. He swallowed hard to keep the tears from flowing. In fact, he swallowed a lot. And he sighed a lot.

**W**hen activity slowed down, Bob felt empty. At work, his mind raced with grief, guilt, anger and sadness. He was afraid to talk about what happened, knowing he might break down. Raised with the belief that “men don’t cry,” he shoved his emotions deep down inside. He withdrew from his colleagues. He did not want to be labeled “incompetent” or “unstable.”

**T**he more Bob withdrew, the harder he had to work to keep his mind occupied. He buried himself in work. His colleagues, not knowing how to approach him, seemed to avoid him whenever they could. They didn’t know what to say, and even if they did, they didn’t want to remind Bob of the tragedy. Perhaps they were thinking about the fact that their child or wife could also be killed by an impaired driver, and that was too frightening to ponder, let alone talk about. So they ignored Bob, convincing themselves that he could find his own solace and peace.

**P**erhaps your experience has been similar to Bob’s. Some of his story may not apply to you,

but you may be able to identify with some of his reactions to his son's traumatic death.

## TRAUMATIC DEATH

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A sudden death is usually more difficult to cope with than an expected death. When a person is violently killed, the death is even more traumatic. Surviving family members and friends are emotionally assaulted with no time to gradually prepare for the loss. You could have never prepared for the incapacitating blow caused by your loved one's traumatic death.

### *Violence of the Death*

Your loved one's death was violent. Knowing this may be more painful for you than the experience was for the one who was killed. When people are seriously injured they usually go into shock and do not experience pain. Many people who have recovered from trauma do not remember the point of impact, whether it was from an automobile crash, a gunshot wound or other form of trauma. In fact, most say that it was some time before they felt pain, even if they drifted in and out of consciousness.

Even so, you probably would have done anything to prevent the violation of your loved one's body. You grieve the loss of your loved one's body and may deeply resent the fact that it was not respected by the killer.

You may not have been able to view your loved one at the hospital or funeral home. As a result, you

may be relying on fantasies to form a picture of how he or she looked. You may even have doubts that your loved one died and may find yourself expecting him or her to walk through the door or call on the telephone.

Many people who were able to view the body of their loved one are glad they did. However, there are other ways to be assured of the reality of their death. The law enforcement agency that investigated the crash probably took photos. These photos may be at the prosecutor's office. The medical examiner or the funeral home may also have photos if you wish to view them. In some cases they will not release these photos; however, you may inquire as to the possibility.

### *Senselessness of the Death*

Another difficult component of grieving is the senselessness of your loved one's death. People generally understand that death occurs when bodies grow old or are no longer able to fight disease. Your loved one's death, however, was clearly someone's fault. The fact that someone chose to be so negligent and reckless makes no sense at all. Knowing that your loved one's death could have been prevented may be one of the most painful aspects of your grieving.

## **THE GRIEF EXPERIENCE**

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It is difficult to imagine the magnitude of pain associated with the traumatic death of a loved one. When someone is killed suddenly and violently,

reactions of family and friends can be intense, complicated and long lasting. If your loved one was killed in an impaired driving crash, you may feel angrier than you have ever felt and sadder than you thought possible. You may have scary thoughts and you may do strange things. You may be afraid you are “going crazy.”

**What you might feel now:**

*Numbness*

*Physical Pain*

*Emotional Pain*

*Mental Pain*

*Spiritual Pain*

*Anger*

*Intense Guilt*

*Loss of Control*

*Confusion*

*Deep Sadness*

**R**egardless of your relationship with the one who was killed, the shock can be overwhelming. As human beings, we form strong physical and emotional bonds to others. When these physical and emotional attachments are severed, we react in ways to cope with the loss by grieving.

**G**rief is not an event but a process of experiencing the physical, emotional, mental, social and spiritual effects of a death or other loss. Grief reactions are common to most people although each person grieves in their own way and in their own time. How you grieve depends on a number of things, including: prior coping skills, quality of the relationship with the person who was killed, circumstances surrounding the death, emotional support from family and friends and cultural background.

**F**or many people grief is uncharted territory

and can be very unsettling. Understanding more about your grief will not change how you feel about the death of your loved one, but it may help you to feel more comfortable with the process. Only by allowing yourself to emotionally experience the pain of your loved one's death is it possible to eventually confront the loss and begin to heal.

## GRIEF WORK

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Confronting reality and enduring the wide range of emotions that accompany it are a difficult part of grieving. Confronting reality involves exploring what death means. Grieving is an intense period of disorganization that can include:

- sadness, confusion, anxiety
- powerlessness, loss of control, helplessness
- anger at God and injustice in the world
- anger toward oneself or the one who was killed
- guilt for not being able to prevent the crash
- physiological symptoms such as insomnia or indigestion
- irritability

Each surviving family member is unique in how or even when he or she works through the pain, but it is necessary to work through grief by facing it.

## GRIEF AND GENDER DIFFERENCES

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When looking to your spouse, partner or other family member to share in the grief process, remember that everyone grieves differently. Nowhere is this more apparent than when looking at the differences

between male and female grief patterns. Women and men are different. Consequently the manner in which they cope is also different. Because of these well documented disparities in coping styles, family members are sometimes unable to communicate effectively and as a result are not always supportive to one another.

*Men tend to experience grief:*

- feeling that they must remain strong
- keeping busy, holding things together, working more hours
- concerned for the grief of a wife and other family members
- believing someone must be punished for the death
- demonstrating less intensity in their grief
- reporting less anxiety and depression
- expressing few feelings verbally
- expressing only anger and guilt outwardly

*Women tend to experience grief:*

- communicating thoughts and feelings with others, verbally expressing their grief
- demonstrating more intensity in their grief
- reporting more anxiety and depression
- feeling angry toward a husband or male partner for not sharing his grief

The differences between male and female coping stem from social conditioning and how we are raised. Men are often taught to focus on tasks or jobs while women are often taught to focus on family and relationships. Women may deal more directly with feelings while men may intellectualize situations in order to understand them. It is

important to point out that some men grieve with more verbal expression and demonstrative behavior whereas some women seem to intellectualize their experiences.

A time frame for working through grief is not definite or predictable. In some ways, it is different for men and women. The suddenness of the death, the age of the person killed, the degree of violence to the body and the quality of the relationship are all complicated variables. It is difficult to come to grips with the fact that you did not have the opportunity to say "I love you," "I'm sorry," "Thank you," or "Goodbye." The process involves restructuring and reorganizing life, which can include changing goals, directions or relationships.

Let your partner know how you are feeling or what you are thinking and discuss your individual needs. This will keep the lines of communication open. If you need space, or your partner requires space, communicate this need. Your partner cannot provide you with everything and likewise you might not always be able to help. Seek support from a variety of sources.

## UNIQUE COMPONENTS OF MALE GRIEF

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From early childhood, males are taught that men should protect their families. Fathers are responsible for fulfilling their family's physical, financial and emotional needs. They are to be in control, to be strong (never scared) and able to fix things. By

adulthood, catapulted into roles they may not have chosen, men become key decision-makers who take care of everything. They sometimes feel they are being torn apart trying to fulfill all the roles that are expected of them.

Showing emotions is often labeled as weak or pitiful. Men are expected to be strong under adverse circumstances, even when an impaired driving crash involving someone they love has turned their world upside down.

Changed identity can be especially problematic for men, such as from a husband to a single man; from a father to a childless man; from a brother to an only child.

Men tend to assume full responsibility for their bereavement, almost as if mourning were an illness they need to “get over” as soon as they can. Boys are taught to consciously suppress pain and grief, especially as they engage in physical contact sports. Then, as men, their painful feelings continue to be unconsciously repressed. Repressed grief lasts much longer than acknowledged grief and can lead to complications. For many men, the longer their grief remains repressed, the more reluctant they are to allow it to surface. They know how deep the pain will go if they allow themselves to feel it.

Men are encouraged to take charge, support others and accept death as a challenge, even a test of masculinity and courage. Facing the pain constitutes a double crisis: the loss itself and the search for

instructions or guidelines about how to handle things. Both experiences may be new.

Sharing feelings, weeping and talking about what happened over and over may not feel empowering to men. Their silence is often interpreted by others as withdrawal, mysteriousness or defensiveness, even lack of caring about the death of their loved one. Men may also keep their thoughts and feelings about the death to themselves. Not saying anything, or saying very little, protects them from the vulnerability of expressing their feelings.

“**D**oing something” seems to help men more than simply talking about it. Physical challenges such as tracking down the prior convictions of the impaired driver, filing a lawsuit or helping collect evidence for the criminal case can be very useful for men because it puts them in control, at least for the moment.

**A**lthough interacting with others through the criminal justice system may satisfy the need for activity, anger and frustration may increase as men learn more about the system’s inadequacies. This only adds to their mental anguish, and can result in rage, a drive to do something concrete and specific. Some men work longer hours or take more business trips in an effort to “do” something.

**M**en can be diligent, even obsessive, about occupying their time. Activity can take on many forms, including risk-taking behaviors, physical conditioning, sports and increased sexual activity. In

moderation, they are not necessarily bad, but if used as substitutes for grief by consuming physical and psychological energy, time and money, they may not be serving you well.

If you find yourself becoming overly involved in an activity of one kind or another, honestly evaluate why you are doing it. Thrusting the mind and body into constant motion consumes time, energy and thought. If you are using the preoccupations to avoid experiencing your deepest, most disturbing feelings, you may have to search for the times and places to allow them to surface. Since time-consuming activities are acceptable behaviors for men in our society, you may not get much help or support in seeking solitude.

Many believe that the slightly higher death rate for men than women after the death of a spouse may be the result of this increased activity and repressed grief and mourning. Physical symptoms include increased cholesterol levels, ulcers, higher blood pressure, asthma and depression.

Avoidance of expressing grief-related feelings can also lead to escalating anger. Men may feel angry at doctors, their spouse, their surviving children, the law enforcement agency, God, the world in general, even themselves. Anger can set up a barrier against the pain. When anger blocks out feelings of sadness, grief work is difficult to accomplish.

After an extended suppression of grief, some men's addictive behaviors escalate, such as abuse of

alcohol and other drugs. Addictions increase among both grieving men and women, but more so among men. The addiction numbs painful emotions. Since alcohol and other drugs reduce judgment, angry outbursts can become frequent, adding to family chaos.

As you reflect on this, you may find that you are using some of these coping strategies. Although common, they do not relieve the grief. Hopefully, you can recognize unhealthy coping mechanisms, evaluate their purpose, and understand that you must now deal with your grief squarely rather than avoiding it.

## MALE ADOLESCENTS AND GRIEF

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An adolescent boy whose father dies, especially the oldest son in the family, sometimes gets the message that he is now “in charge,” and must carry out the legacy of being the head of the family. This is uncomfortable for an adult son, and even more so for an adolescent. His perceived or real burden can result in physical or emotional rebellion.

If an adolescent male’s father has died, he may find himself wandering through the house, careful not to let his grief show, acknowledging his new role as protector. He may think he should not mention the death because it will add to others’ sadness. He may be fortunate if he can find another male to assure him that sharing his feelings is welcomed.

At times, the most available confidantes for

many male adolescent survivors are their friends. Their friends' willingness to listen, their sympathy and their affection can feel like a safer environment for a grieving teen than his own family. However, families will do well to grieve together and plan together as a team in coping with the death of a loved one. Adolescent males are encouraged to seek support from other males who can accept their grief and feelings of vulnerability.

## ABOUT INTIMACY

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Needs for intimacy and sex pose a problem for many grieving couples. There is no "appropriate" abstinence period that should be observed before resuming your sexual relationship following the death of a loved one. You will need to reestablish intimacy that is emotionally, mentally and physically satisfying to you and your partner.

**M**any women are able to enjoy intercourse only when they are feeling well emotionally. Grieving significantly decreases their desire. It may take a considerable amount of time for the two of you to readjust. Above all, communicate your needs honestly and openly.

**I**n some instances, men are faced with the death of their sexual partner. Some widowers decide that they must now abstain from any sexual relationship, as if that is the inevitable outcome of losing their sexual partner. You may feel the need for emotional intensity, kissing, hugging, affection and tenderness, which is a normal, healthy need to stay connected.

Grieving can cause temporary impotence, but it usually isn't permanent and subsides during the grieving experience.

## FOCUS ON LIFE

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Regardless of whether your child, parent or mate was killed, your life is now indelibly changed. You lost a part of yourself and a part of your future. But things will get better. You will continue to learn new things about yourself over time, and you may even enhance your relationship with others as a result of your painful pilgrimage.

Ultimately, you will have to decide when it is right to give more of your attention to living. You can use your grief to continue to drag you down, or you can use it to rebuild your life, probably with more compassion and understanding than you had before.

You may understand, in a way most people do not, how vulnerable we all are and how important it is to make each day count. You may never feel quite as safe as you once did, nor quite as trusting. These are changes that often occur after enormous loss. They are all compatible with healing.

For some, enduring trauma ignites a spark of activity to right some of the wrongs involved in a sudden violent death. Most victims/survivors want to prevent it for others. Thousands of men, women and teenagers have joined Mothers Against Drunk Driving (MADD) after their loved ones were

killed. MADD helps bereaved or injured victims/survivors to cope emotionally, helps them through the criminal justice system and works to prevent impaired driving crashes.

**M**ADD and other organizations can provide you with the opportunity to do what you can so others don't experience a similar tragedy. Some people find it helps them enormously to work to end impaired driving and victimization. It can feel as though it is the one activity that might bring something constructive out of their loss.

**G**etting involved in an organization or activity is not something that needs to start immediately. Take stock of how you are doing before you invest your time and energy into a project. Make sure that you are in a place where helping won't drain you emotionally and physically.

**G**oing on can be a way of showing that life, as it was represented in your loved one, matters to you. It can be important too for others who love you and depend on you. For your own sake and for the sake of those who need you and love you, you have a responsibility to try to heal. You could not prevent the outcome of the impaired driving crash that killed your loved one. You can, however, control how you choose to cope with their death, and how you choose to live the rest of your life.

*For more information or assistance  
visit MADD's website at [www.madd.org](http://www.madd.org)  
or call 1-877-MADD-HELP (1-877-623-3435).*

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