

A photograph of two women sitting in chairs and talking. The woman on the left is wearing a light-colored cardigan and has her hand near her face. The woman on the right is wearing glasses and a patterned shirt, gesturing with her hand. The background is a simple room with a window and curtains. The entire image has a purple overlay.

Communicating well with bereaved supporters

The National Bereavement Service (NBS) gives people the help, information & support they need to navigate grief & bereavement

PRACTICAL:

Comprehensive 'death administration' help, guidance as to what happens next, & signposting

PSYCHOLOGICAL:

Emotional 'first aid' for people who need support, & signposting to specialist services

Ground rules for a safe and respectful space

- A safe space for sharing
- What's shared here, stays here
- Listen actively and empathetically
- Avoid judgment and criticism
- Be mindful of time constraints
- Avoid distractions during discussions
- Be gentle with yourself
- It's okay to feel a range of emotions



Learning Objectives:

- To increase understanding of the psychological impact of bereavement, grief & loss
- To increase confidence levels when supporting and communicating with bereaved people
- To understand the importance of resilience and self-care



The experience of bereavement



UK Bereavement Commission: **Key Statistics**

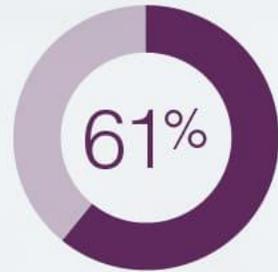
6.8m

bereaved in the UK in 2020 and 2021 compared to 6.1 million in 2018 and 19, with 750,000 additional bereavements*

*Compared to what would have been expected based on the five-year average from 2015-2019



of adult respondents received **no support** from family and almost half (46%) received no support from friends following bereavement



of adult respondents **had difficulties** with at least one practical or administrative task following bereavement



of respondents wanted to access bereavement services but indicated **no support was available** and 37% said they didn't know how to access support



Over 40% of those who wanted formal bereavement support **did not get any**

Barriers to support from friends, family and communities include:

- Death is taboo
- Stigma
- Poor understanding of grief
- Limited awareness of what to say
- Not wanting to be a burden
- Family dynamics and strained relationships

“

When you are newly bereaved, you are expected to organise a huge array of practical things at a time when you feel exhausted, confused and at a loss. It adds to the pressure and anxiety you feel.

What can be done legally and practically to ease this burden for grieving people?

WOMAN IN HER 50s WHOSE AUNT, MOTHER-IN-LAW AND FATHER-IN-LAW DIED

Source: UKBC 2022 Summary Report

An **important** rule:

Grief is completely normal.

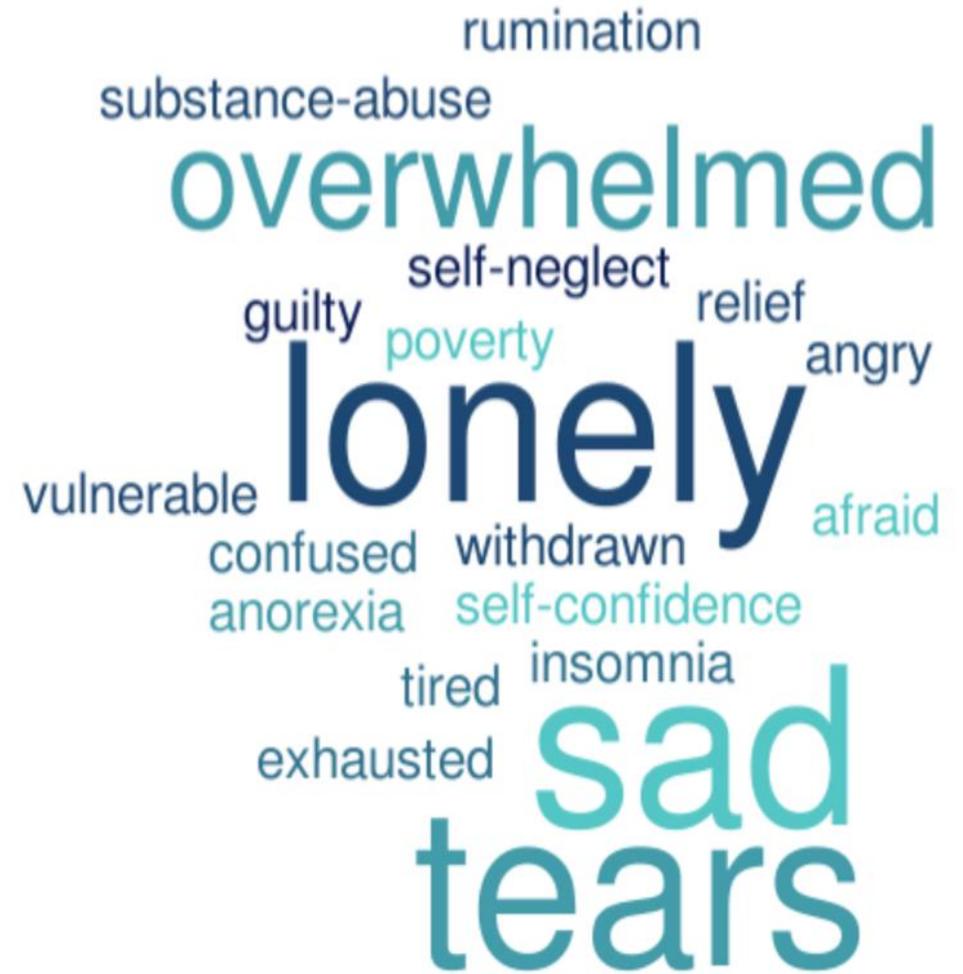
It's not an illness to be treated or a problem to be fixed.

What does grief feel like?

INTENSE

CHAOTIC

UNPREDICTABLE



Sudden or traumatic death

- Types of death include **suicide, murder, accidents and medical events** such as **heart attacks**.
- Those bereaved suddenly may experience additional:
 - **Shock, Guilt, Helplessness, Anger**
- They may be **medical or legal proceedings** which can delay the grieving process,
- There may be an increased need to understand, causing them to question their faith if they are religious.



Bereaved people can be **vulnerable**

Health



Health conditions or illnesses that affect ability to carry out day-to-day tasks.

Life events



Life events such as **bereavement**, job loss or relationship breakdown.

Source: FG21/1 Finalised Guidance

Bereaved people can be **vulnerable** (cont.)

Resilience

Low ability to withstand financial or emotional shocks.

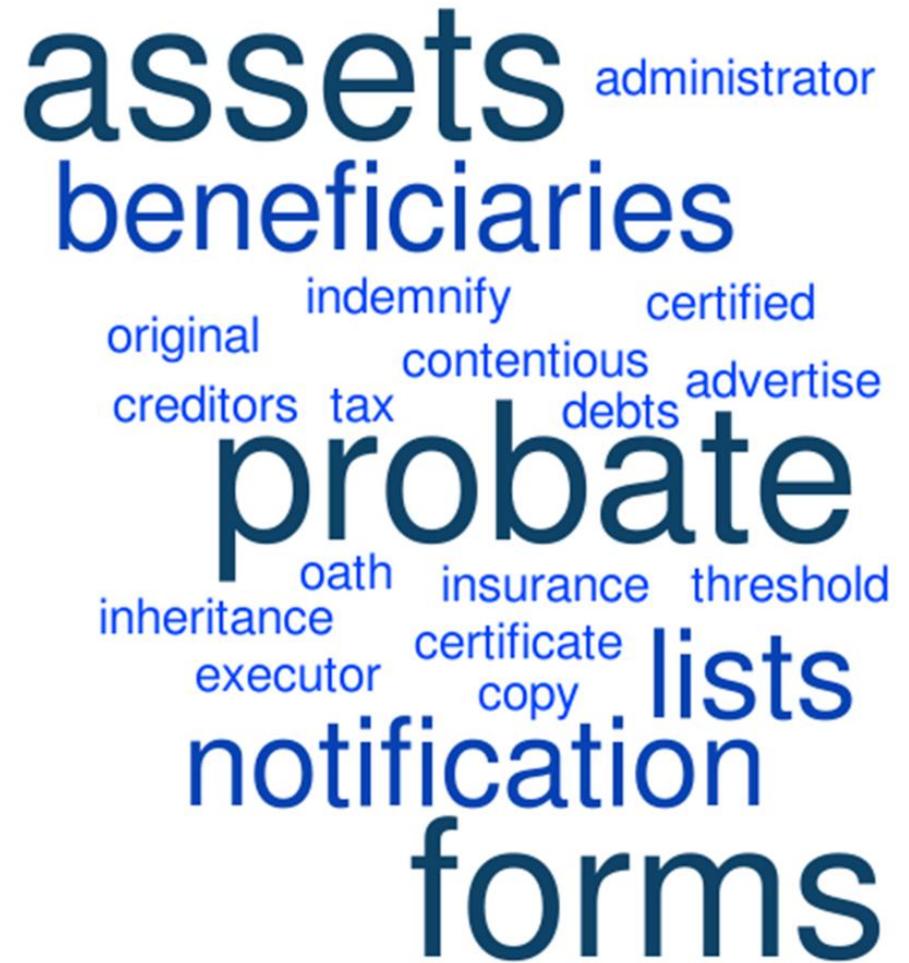
Capability

Low knowledge of financial matters or low confidence in managing money.

Source: FG21/1 Finalised Guidance

The practical tasks

DEMANDING
ALARMING
LONGWINDED



A word cloud of terms related to probate. The words are arranged in a roughly circular shape, with 'assets', 'beneficiaries', 'probate', 'notification', and 'forms' being the largest and most prominent. Other words include 'administrator', 'original', 'creditors', 'tax', 'debtors', 'advertisers', 'certified', 'contentious', 'debts', 'oath', 'insurance', 'threshold', 'inheritance', 'certificate', 'copy', 'lists', 'executor', and 'forms'.

assets administrator
beneficiaries
original indemnify certified
creditors tax contentious debts advertise
probate
oath insurance threshold
inheritance certificate lists
executor copy notification
forms

The practical tasks in detail

(may take 2 years or even longer)

- Establish cause of death: Doctor/Procurator Fiscal/Coroner/Medical Examiner
- Register the death: Local Authority Registrar, Death Certification Review
- Arrange the funeral: Funeral director, Minister/Celebrant, DIY
- Notify everyone who needs to know - may take weeks, DNS TUO, Life Ledger, Settled or individually
- Find the Will (if any) solicitor, will bank. personal papers
- Identify who is responsible for administering the estate
- Value the estate asset holders, creditors, estate agents
- Establish if Probate/Confirmation is needed (demanded by asset holders) asset holders
- [Pay Inheritance Tax if appropriate HMRC]
- [Obtain Probate/Confirmation Probate Registry, Sheriff Court, solicitor]
- Gather assets asset holders
- Pay debts creditors
- Sell/transfer property HM Land Registry, estate agent, solicitor
- Distribute estate to beneficiaries
- Deal with non-valuable assets
- [Resolve future care arrangements]
- Write new Will
- Revise estate planning

The experience of bereavement

(never goes away completely)

The Primary Loss:

Death of a significant person

Secondary Losses:

Carer, best friend, sexual partner, non-sexual physical intimacy, source of income, social status, sense of security, plans and dreams for the future, faith/ meaning of life, image of the person who has died (secrets come to light)

Other considerations

What is in the news?

What is being reported soon after the death or even as it is happening?

What information emerges after the death?

Secrets in families often come to light after a death – but also into the public domain which completely change perceptions of someone.

Social media

Speed, lack of moderation, algorithms and echo chambers, misinformation, personal prejudice, AI

Language and death



Why do we find speaking with bereaved people **challenging**?

- They might become distressed during the conversation
- We don't like to think about people dying
- It reminds us of our own losses
- We don't know which words to use

All of these are entirely normal and common, but we can become more grief aware.





Do

- acknowledge the event of the death
- say you are sorry
- use the name & relationship of the person who has died
- use the real words: dying, died, death, dead



Don't

- don't use any value comments e.g.
 - She had a long life
 - At least he didn't suffer
- don't use euphemisms e.g.
 - Passed away, Passed, Lost, Popped his clogs, Kicked the bucket etc.

A further note on language:

Be careful with the word 'lost' especially when a baby or child has died

Children get lost on the beach or in the supermarket.

Some parents/carers are okay with using the word lost after a child has died.

For others it implies carelessness and almost all bereaved parents feel guilty, even if they have no rational reason to do so.

Another note on language:

NEVER say that someone has committed suicide – They have *died by suicide*, or taken their own life

Commit dates from when taking your own life was a crime and burial in consecrated ground was forbidden.

It is highly stigmatising for such a traumatic death.

Remember:

This conversation
is always focused
on the **bereaved
person and not
on you**

NEVER SAY:

- *I know how you feel*

You don't – the bereaved person grieves in their own way

- *My died*

This switches the attention to you and not them

NEVER ASSUME ANYTHING

10 Steps to follow in a conversation

1. Acknowledge what you have been told- ALWAYS
2. Check you have heard correctly and obtain more information if needed
3. Explain what you're going to do in this call
4. Invite questions
5. Explain your organisation's process
6. Manage expectations-
7. Respond to 'objections'- remember to validate emotions
8. Recap and close with timescale for next contact
9. Pace the call, don't rush- allow silence
10. Use rough notes if needed- there may be tangents

What if I become upset during the conversation?

- **Don't panic**
- **Take a quiet deep breath/pause**
- Recognise that what you are feeling is your 'stuff' and as a professional you can keep going until the end of the conversation.
- If what has been shared with you is very distressing, acknowledge the fact. *'I'm sorry, I can't imagine what that was like for you', 'I'm sorry, that sounds so incredibly difficult'* BUT be careful of your tone of voice, stay quite neutral. It might be tempting to add that it has been hard to hear but that moves the focus to you.
- When you have completed the conversation, take a moment to understand why this was so difficult – there are various possibilities: awful circumstances such as homicide or suicide, sometimes something similar to what you have experienced personally, you've had several difficult conversations in one day and you're feeling overwhelmed
- If possible, take a short break, make a drink, get some fresh air.
- Talk through what has happened with a trusted person.
- Reflect whether you need to seek further help.

Cultural Practices

- Bereaved people report religious and cultural ignorance and insensitivity
- The pandemic exposed and exacerbated systematic insensitivity to minority religious and cultural needs
- *Anyone whose role brings them into contact with bereaved people should ensure they have bereavement training that is culturally-informed.*

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As an Asian Muslim I was constantly told by ‘support’ that I must be finding it hard to think about Christmas without my dad, but they totally bypassed Ramadan and Eid. Also, there are huge cultural differences which are not acknowledged or supported.

A WOMAN IN HER 30s WHOSE FATHER DIED FROM COVID

Source: UKBC 2022 Summary Report

Looking After Yourself



Vicarious trauma

Vicarious trauma is **indirect exposure** to someone else's trauma through **firsthand account** or **narrative**. It can impact a person's **worldview, mental health** and **ability to work**. Anyone who **engages empathetically with survivors** of traumatic incidents, torture, and material relating to their trauma, is potentially affected, including doctors and other health professionals.

Common signs:

- Emotional distress (anger, sadness, guilt, shame)
- Obsessive thoughts
- Overidentification (rescue fantasies)
- Negative coping mechanisms (avoidance, numbness)
- Difficulty maintaining boundaries

Strategies for reducing the risk include becoming more self-aware, looking after yourself emotionally, maintaining a **healthy work/life balance**, using peer and social support, **reviewing workload and exposure**.

Source: British Medical Association

Compassion fatigue

Compassion Fatigue refers to the “*emotional cost of caring for others or their emotional pain*”. The individual **struggles emotionally, physically and psychologically**, as a response to prolonged stress or trauma (NHS).

- Helplessness, powerlessness
- Reduced empathy, sensitivity
- Overwhelm, exhaustion
- Detachment, numbness
- Loss of interest
- Increased anxiety, sadness, anger
- Difficulty concentrating, sleeping
- Physical symptoms
- Relationship conflicts
- Self-neglect
- Withdrawal
- Substance abuse

What can we do to care for ourselves and develop resilience

- Breathe
- Vent with someone you trust and who will cope
- Do not define yourself solely by your work role
- Maintain boundaries
- Eat well, exercise and rest
- Take breaks
- Do things that bring you joy
- Don't struggle alone
- Value yourself, your family, your friends

Self-care

Carers, helpers and supporters also need care help and support

Practical

- Eating healthily
- Proper sleep routine
- Taking physical exercise
- Seeking quality social support
- Scheduling meaningful activities
- Balancing work and personal life

Emotional

- Setting healthy boundaries
- Mindfulness
- Meditative breathing
- Using positive visual reminders
- Focusing on what you can control
- Put negative thoughts into perspective
- Identify your resources and strengths



Additional resources and extra reading

- **The Grief Works app:** [Grief Works by Julia Samuel MBE \(illumapps.com\)](https://www.illumapps.com)
- **Conversation guide for talking about suicide:** [Conversation Guide \(squarespace.com\)](https://www.squarespace.com)
- **Demystifying death:** [Dying for Beginners | Dr Kathryn Mannix – YouTube](#)
- **Grief Support Guide:** [Grief-Support-Guide_Eng3-Nov-23.pdf \(nationalbereavementalliance.org.uk\)](#)
- **William Worden** - The Tasks of Grief
- **Margaret Stroebe & Henk Schut** – Dual Process Model
- **Dennis Klass & others** – Continuing Bonds
- **Robert Niemeyer** – Making Meaning
- **Lois Tonkin** – Growing Around Grief

And if you are asked a question
you can't answer, then **get help
or signpost**



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