

Dealing with Death-Listening Guide Key

How do you feel about death? (You may wish to have students complete the listening guide, as you relate the following information concerning death.)

1. How would you define death? (ANSWERS WILL VARY.)
2. Why do most people dislike talking and thinking about death? (ANSWERS WILL VARY.)
3. What positive and negative statements could you make about your life thus far? (ANSWERS WILL VARY.)
4. What are some ways people deny that death is part of everyone's life?
MANY PEOPLE AVOID USING THE WORD *DEATH* OR *DEAD*, PEOPLE DO NOT MAKE WILLS, PEOPLE DO NOT MAKE ARRANGEMENTS FOR WHAT WOULD HAPPEN IF THEY DIED, ETC.
5. What do you fear most about dying? (ANSWERS WILL VARY.)
6. Name the three major stages the body passes through in dying and briefly describe what happens in each stage.
 - a. CLINICAL DEATH—WHEN THE HEART AND LUNGS CEASE TO FUNCTION
 - b. BRAIN DEATH—LACK OF OXYGEN TO BRAIN CELLS
 - c. CELLULAR DEATH—WHEN OXYGEN IN THE TISSUES AND ORGANS IS DEPLETED AND ALL FUNCTIONS SLOWLY CEASE
7. How is it possible that there can be disagreement concerning whether or not a person is dead. (BECAUSE OF MEDICAL TECHNOLOGY, MACHINES CAN KEEP A BODY FUNCTIONING EVEN THOUGH THE INDIVIDUAL IS NO LONGER AWARE OF HIS/HER EXISTENCE. MANY PHYSICIANS DISAGREE AS TO HOW LONG CERTAIN MEDICAL TESTS SHOULD BE PERFORMED TO DETERMINE IF DEATH HAS INDEED OCCURRED.
8. List the stages of dying and grieving. Write down the characteristics of each stage.
 - a. DENIAL—A TYPICAL, NORMAL, HEALTHY, TEMPORARY REACTION TO KNOWING THAT ONE FACES DEATH.
 - b. ANGER—RESENTMENT AND/OR ENVY OVER IMPENDING DEATH. SOMETIMES THE PATIENT RELEASES FRUSTRATIONS ON HIS/HER FAMILY AND FRIENDS. AT OTHER TIMES, THE PATIENTS MAY ALIENATE THEMSELVES FROM THEIR FAMILY AND FRIENDS. UNDERSTANDING AND PATIENCE ARE VITAL AT THIS TIME TO HELP THE PATIENTS GAIN CONTROL.
 - c. BARGAINING—THIS IS A DEFENSE MECHANISM FOR THE PURPOSE OF POSTPONING ONE'S IMMINENT DEATH, SOMETIMES INVOLVING BARGAINING WITH GOD. THE PATIENT SEARCHES FOR MORE CIRCUMSTANCES WHICH WILL CHANGE HIS/HER POSITION AND CONDITION.
 - d. DEPRESSION—THIS STAGE SETS IN WHEN THE PATIENT'S DYING HAS TO BE RECKONED WITH. SADNESS AND GLOOM TAKE OVER. THE PATIENT OFTEN PREFERS ISOLATION AND WANTS TO BE LEFT ALONE. AT THIS STAGE THE PATIENT HAS TO DEAL WITH THE PERMANENT LOSS OF HIS OR HER JOB AND HOME, AND THIS PLACES THE PATIENT IN A POSITION OF DEPENDENCE.
 - e. ACCEPTANCE—WITH THE PASSAGE OF TIME, THE DYING PATIENT REACHES THE POINT OF ACCEPTING HIS/HER IMMINENT DEATH. THIS STAGE CAN BE REACHED ONLY AFTER THE PATIENT HAS EXPERIENCED THE OTHER STAGES.
(A PATIENT MAY PASS THROUGH AND THEN RETURN TO THIS STAGE OF ADJUSTMENT FROM TIME TO TIME.)

9. Describe some ways that persons go through a kind of mourning when they experience losses other than death. (ANSWERS WILL VARY ACCORDING TO STUDENTS)
10. Explain some problems experienced by family and friends as they cope with the death or dying of someone dear to them. (THE BEREAVED PERSON MAY SHOW EMOTIONAL AND/OR PHYSICAL DISORDERS SUCH AS INSOMNIA, WEIGHT LOSS, HEADACHES, ETC.)
11. Identify the four basic needs of the bereaved:
 - a. COMPANIONSHIP—IT IS IMPORTANT TO ALLOW THEM TO TALK ABOUT THEIR LIVES WITH THE DECEASED. IT IS GOOD FOR THEM TO REVIEW THEIR LIVES AND EXPERIENCES.
 - b. VENTILATION OF FEELINGS—A FRIEND OR FAMILY MEMBER MAY BECOME THE TARGET OF EMOTIONS. THE BEREAVED MAY LASH OUT WITH ANGER, FRUSTRATION, DEPRESSION OR GUILT. THIS MUST BE ALLOWED WITHOUT CRITICISM. SOME FIND IT HELPFUL TO WRITE POEMS, STORIES, AND/OR LETTERS.
 - c. TIME TO BE ALONE—THE BEREAVED OFTEN PREFER AND NEED TO BE ALONE FOR CERTAIN PERIODS. THIS ALLOWS THEM TO THINK, PLAN, AND MAKE CHOICES. THIS IS HEALTHY UNLESS IT IS ACCOMPANIED BY DEEP DEPRESSION. IT IS IMPORTANT THEY SOON RETURN TO REGULAR DAY-TO-DAY ACTIVITIES.
 - d. TIME—WITH THE PASSAGE OF TIME, NUMBNESS IS ELIMINATED. EVENTUALLY FEELINGS OF GRIEF DIMINISH AS ACCEPTANCE TAKES PLACE. THE DURATION OF THE GRIEF PROCESS DEPENDS UPON THE CIRCUMSTANCES SURROUNDING THE DEATH. WAS IT SUDDEN? VIOLENT? DID IT COME AFTER A LINGERING ILLNESS?)
12. What are some appropriate things to say to the bereaved? ("IT'S OKAY TO CRY," "I JUST WANTED YOU TO KNOW I AM THINKING ABOUT YOU.")
13. What should you avoid saying to the bereaved? ("CHEER UP," "TIME WILL HEAL ALL WOUNDS," "HE/SHE IS BETTER OFF," "IT WAS GOD'S WILL," "CALL ME IF YOU NEED ME.")
14. Describe some ways to express condolences. (DONATION TO A FAVORITE CHARITY, PERSONAL LETTER, FLOWERS, PHONE CALL, GIFT OF MONEY, GIFT OF FOOD, VISIT, AND ASSISTANCE SUCH AS MOWING THE LAWN, COOKING MEALS, DOING LAUNDRY, BABY SITTING, MAKING PHONE CALLS, ETC.)
15. Describe some local customs concerning funerals.
(ANSWERS WILL VARY ACCORDING TO STUDENTS)
16. How might costs affect the funeral arrangement made by the survivors?
(QUITE OFTEN THE FINANCIAL SITUATION OF THE FAMILY DICTATES HOW EXTENSIVE A FUNERAL SERVICE CAN BE. IF ALL EXPENSES HAVE BEEN ALLOWED FOR IN THE DECEASED'S WILL, THE FAMILY SHOULD BE ABLE TO ARRANGE A SERVICE AS WISHED BY THE DECEASED.)
17. What is the purpose of a memorial service, funeral, or visitation?
(WITHOUT FUNERALS AND VISITATION, THE PROCESS OF COMING TO ACCEPT THE DEATH OF A LOVED ONE WOULD, FOR MANY, NEVER BE COMPLETE. FUNERALS ALLOW FOR THE OPEN CARING, GRIEVING, AND EXPRESSING THAT THE HUMAN ANIMAL SEEMS TO NEED TO REORDER LIFE AND RETURN TO ROUTINE LIVING.)

Name _____

Period _____

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 - b.
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