

Gorer, G. Death, Grief and Mourning

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I THINK THAT the material presented has adequately demonstrated that the majority of British people are today without adequate guidance as to how to treat death and bereavement and without social help in living through and coming to terms with the grief and mourning which are the inevitable responses in human beings to the death of someone whom they have loved. The minority who are convinced adherents of religious creeds or sects have the assistance and comfort provided by the traditions and eschatology of their religions and (in some cases) by the social ritual which is interwoven with the religious practices; and members of such modern movements as Spiritualism, Christian Science, and European or American adaptations of Asian religions have at least the support of their fellow dogmatists in their denial of the 'reality' or importance of death and their refusal to admit mourning.

It has also been demonstrated that only a minority of the British are active in the practice of their religion—less than a third attend a religious service once a month, and less than a half say daily prayers; consequently, the fact that the only social techniques available for coming to terms with death and dealing with grief are phrased exclusively in religious terms means that the majority of contemporary Britons with either residual or non-existent religious beliefs have in effect neither help nor guidance in the crises of misery and loneliness which are likely to occur in every person's life. I think my material illustrates the hypothesis that this lack of accepted ritual and guidance is accompanied by a very considerable amount of maladaptive behaviour, from the triviality of meaningless 'busy-ness' through the private rituals of what I have called mummification to the apathy of despair.

To the best of my knowledge, there is no analogue from either

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the records of past societies or the description of present societies outside the Judeo-Christian tradition to this situation in which the majority of the population lack common patterns or ritual to deal with the crises inherent in man's biological nature. Within societies deriving from the Judeo-Christian tradition there is a faint analogue in the confusions concerning appropriate sexual behaviour. With sex, too, the traditional patterns and ritual have been phrased in religious terms and controlled by sanctions justified by scriptural authority; and the majority who pay at most lip-service to the authority of the scriptures have had to develop their own lay patterns and ethics, often at considerable psychological cost.

The problem of dealing with sex in secular terms has been discussed with increasing clarity for the better part of a century. Although there is still no complete consensus on the most appropriate social ways of dealing with sexual urges, there is now a very general recognition that human beings do have sexual urges and that, if these are denied outlet, the result will be suffering, either psychological or physical or both. But there is no analogous secular recognition of the fact that human beings mourn in response to grief, and that, if mourning is denied outlet, the result will be suffering, either psychological or physical or both. At present death and mourning are treated with much the same prudery as sexual impulses were a century ago. Then it was held, quite sincerely, that good women, or ladies, had no sexual impulses, and that good men, or gentlemen, could keep theirs under complete control by strength of will or character. Today it would seem to be believed, quite sincerely, that sensible, rational men and women can keep their mourning under complete control by strength of will or character so that it need be given no public expression, and indulged, if at all, in private, as furtively as if it were an analogue of masturbation. The gratitude with which a number of my informants thanked me for talking to them without embarrassment about their grief—a typical phrase was 'I've got a lot off my chest'—must, I think, be similar to the gratitude felt a couple of generations earlier by people when their sexual secrets could finally be discussed without prudery or condemnation.

There is not, as yet, sufficient information available to

determine the 'normal' pattern of mourning by adults; but judging by my interviews and the range of rituals and practices reported by historians and anthropologists, it would seem as though most adult mourners pass through three stages: (a) short period of shock, usually lasting between the occurrence of death and the disposal of the body; a period of intense mourning accompanied by the withdrawal of much attention and affect from the external world and by such physiological changes as disturbed and restless sleep, often with vivid dreams, failure of appetite and loss of weight; and a final period of re-established physical homeostasis—sleep and weight again stabilized and interest again directed outward.

The first period of shock is, it would appear, generally given social recognition. Kinsfolk gather round the mourners for the family gatherings, religious ceremonies and, often, ritual meals in Britain, as has been described in earlier chapters; and, in the United States, the curious elaborations of the morticians, with overtones of religiosity,¹ are concentrated on this period. Once the funeral, and possibly the post-funeral meal, are finished, the ritual which might give support to the bereaved is finished too, and they are left to face the period of intense mourning without either support or guidance.

The traditional customs of Britain, of all European countries and of very many societies outside the Judeo-Christian tradition prescribe usually in great detail the costume and behaviour appropriate to mourners in the period of intense mourning after the funeral; they also typically impose an etiquette on all those who come in contact with the mourners; and usually designate the number of days, weeks, months or years that this behaviour should be followed. It is this pattern which I dubbed 'time-limited mourning'; and, on the basis of comparative material from other societies, from the findings of psycho-analysis, and from the material presented in the foregoing pages, it would appear to be the most appropriate technique for mourners to make the complicated psychological and social adjustments involved in the loss of a primary relative. If these adjustments are not made, the outcome is liable to be either the permanent despair of depression or melancholia, an impairment of the

¹ See, for example, Evelyn Waugh, *The Loved One*; Jessica Mitford, *The American Way of Death*; Ruth Mulvey Harmer, *The High Cost of Dying*.

capacity to love in the future, or various irrational attitudes towards death and destruction. Some of the possible irrational developments of denied mourning will be discussed subsequently.

The material presented in the foregoing pages (and, I believe, most people's personal experience) demonstrates that the most typical reaction of the majority in Britain today (and, as far as my evidence goes, in all English-speaking countries with a Protestant tradition) is the denial of mourning, in the period after the funeral. Certainly, social recognition of mourning has practically disappeared; we no longer recognize a mourner when we see one—a black tie may be worn for its elegance, without any symbolic intent—and are at a loss and embarrassed when we do consciously meet one. Giving way to grief is stigmatized as morbid, unhealthy, demoralizing—very much the same terms are used to reprobate mourning as were used to reprobate sex; and the proper action of a friend and well-wisher is felt to be distraction of a mourner from his or her grief; taking them 'out of themselves' by diversions, encouraging them to seek new scenes and experiences, preventing them 'living in the past'. Mourning is treated as if it were a weakness, a self-indulgence, a reprehensible bad habit instead of as a psychological necessity.

Many people, of course, can adjust to this public attitude by treating it as if it were an extension of modesty; one mourns in private as one undresses or relieves oneself in private, so as not to offend others; and this is probably the best solution now available. But there are many, I believe, who accept the implications of the current social attitude uncritically and deny their feelings of mourning to themselves, as well as in public, and fight against giving them any expression as they fight against giving way to reprehended sensual indulgences. This conscious refusal to mourn would seem to have a number of socially undesirable developments.

If one can deny one's own grief, how much more easily can one deny the grief of others; and one possible outcome of the public denial of mourning is a great increase in public callousness. That this has occurred seems probable but impossible to document; the changed techniques of mass communication have so enlarged the world in which most people live that

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increased callousness may be the only possible response to the ever-increasing amount of misery and cruelty of which one is informed. I would, however, be inclined to consider that the resignation, indeed complacency, with which the daily toll of death and mutilations by the automobile is accepted, is a sign of an increase in callousness which is, at any rate, contemporaneous with the decrease in the admissibility of mourning.

An aspect of callousness—the opposite face of it—is excessive squeamishness about references to death, pain or mourning, treating these human experiences as though they were obscene, so that any mention or depiction of them is considered unpleasant for the mature and corrupting for the immature. The constant complaints about the depiction of 'violence' on television or cinema screen are as symptomatic as the preoccupation with death and cruelty in the 'horror films', and 'horror comics' and the endless spate of ill-written paper-back books on the horrors of war and concentration camps. The 'pornography of death', whether it be furtively enjoyed or self-righteously condemned, manifests an irrational attitude towards death and a denial of mourning.

Another contemporary preoccupation which I would tend to link with the denial of mourning is the excessive preoccupation with the risk of death which is given public expression in many of the activities of those agitating against nuclear warfare and, more recently, with the risks involved in cigarette smoking. No responsible person can fail to consider a nuclear war as the greatest potential peril that the human species has ever faced; but it is the human species which is threatened and no localized population can contract out of the peril by demonstrations. The connection between cigarette smoking and cancer of the lung does seem to be statistically established; possibly other causes of death are less painful; but implicit in quite a lot of the agitation to stop the sale or advertisement of cigarettes is the suggestion that, without this indulgence, people would be immortal. *Timor mortis conturbat me* was originally an expression of the fears of posthumous Judgment on the part of the believing Christian; today it seems to be the motto of many tender-minded agnostics.

Another contemporary manifestation which I would tend to link with the denial of mourning is the increase in 'vandal-

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ism', in the destruction or mutilation of property for the sake of destruction, without any rational consideration of gain or of personal revenge being involved. The connection between vandalism and the denial of mourning is not quite so direct as is the connection with callousness or irrational preoccupation with, or fear of, death, for it takes into consideration an aspect of mourning which is given no overt expression in our culture. This aspect is the anger felt against the dead for abandoning the survivors.

Although our culture gives no symbolic expression to this anger, a considerable number of others have done so, by such rituals as the destruction of the dead person's property or possessions or, slightly more indirectly, by the various mutilations which mourners have to inflict on themselves as a sign of the pain which the dead have caused them. According to some psycho-analysts¹ this anger is a component of all mourning; and one of the main functions of the mourning process is to 'work through' and dissipate this anger in a symbolic and, to a great extent, unconscious fashion.

In psycho-analytic theory, if this anger is not worked through in mourning it will turn in on itself and result in the self-reproach and self-punishment which are the most marked symptoms of melancholia. But it seems to me possible that, perhaps particularly in the case of adolescents, such anger may be neither discharged nor turned in on the self; if adolescents are not able, or not allowed, to mourn (typically, for the loss of a parent by death or separation) it may be that this anger is, as it were, kept in suspense to be discharged as occasion offers by the gleeful destruction of insentient objects. I am informed that there is some evidence to suggest that lads committed to Borstals and similar institutions for wanton and apparently unmotivated destruction have a greater number of dead or disappeared parents, for whom it would have been appropriate to mourn, than do their fellows confined for 'rational' crimes such as theft. The validity of this hypothesis could be fairly easily determined by research, if the proper facilities were given.

{ If I am right in tracing a connection between the denial of mourning and callousness, irrational preoccupation with and

¹ See Appendix One.

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fear of death, and vandalism, then it would seem correct to state that a society which denies mourning and gives no ritual support to mourners is thereby producing maladaptive and neurotic responses in a number of its citizens. And this further suggests the desirability of making social inventions which will provide secular mourning rituals for the bereaved, their kin and their friends and neighbours.

Such rituals must be basically secular, though they could be elastic enough to comprise religious components for the pious minority. But the fact that there has been no invention of 'civil mourning' analogous to the invention of 'civil marriage' may well have contributed to the denial of mourning by the majority of the population who have residual or no religious beliefs. Such rituals would have to take into account the need of the mourner for both companionship and privacy; for the fact that it is (almost certainly) desirable for mourners to give expression to their grief without embarrassment or reticence; and for the fact that for some weeks after bereavement a mourner is undergoing much the same physical changes as occur during and after a severe illness. The period of intense mourning probably varies with the temperament of the mourner and the nature of the relationship with the deceased; my impression is that the median range is between six and twelve weeks. During this period the mourner is in more need of social support and assistance than at any time since infancy and early childhood; and at the moment our society is signally failing to give this support and assistance. The cost of this failure in misery, loneliness, despair and maladaptive behaviour is very high.

APPENDICES