

Impact of COVID-19 on loss and grief: a personal lens

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The coronavirus disease (COVID-19) pandemic is changing the way people live their lives, with the introduction of social distancing by different governments across the globe, at a scale never seen before. Such huge change can be argued to be loss of normality as we know it, and as is usual with any loss, grief follows (Murray-Parkes, 2010; Worden, 2018; Kessler, 2019). Using Kessler's new ideas of adding meaning as a sixth stage to the grieving process first developed by Kubler Ross in the late 1960s, this commentary discusses the impact of COVID-19 on loss, grief and the meaning people attach to their circumstances.

The first step is acknowledging that this loss we are experiencing applies at multiple levels: personal, social, economic, political and also global aspirations. With that, comes uncertainty and anxiety, leading to such a mixture of emotions that find their way through our own levels of consciousness. The fact that deaths in their hundreds per day in the UK alone are being shared with us on a daily basis means we are being connected together emotionally in collective loss and grief. As human beings, we are connected at that level, and we are also connected as health professionals, as are other key workers. At my university, we learnt of the death of one of our aspiring students, and all those who knew the student, like me, will feel some grief. The fact that we cannot even attend the funeral rituals or support the family physically due to social distancing tends to compound the grief felt. Normally, at funerals, people offer support to the family and friends and pay their own respects to the dead person, but with COVID-19-related deaths, we now see mass burials without family and close friends and, with that, the lack of dignity and uniqueness of the death. This is no criticism of the authorities, but simply to point out the impact that COVID-19 and these protective and necessary measures have on grief and life going forward.

Kessler (2019) talked about how death interrupts our plans for the future, and with that comes anticipatory grief. COVID-19 seems to have thrown everything we know about anticipatory grief into chaos, not because we cannot see the virus, but we do not know who might be carrying it around, as it can also cause asymptomatic disease. Therefore, it is possible that, while people are socially distancing, they now do not trust other people nor care—a sad indictment in a society as large and diverse as ours. As is often the case, a minority in society with other underlying agendas of hatred or selfishness is now

using COVID-19 to further its own agenda and blaming the pandemic on certain groups (for example, those from China, where it started, or, as recently reported Muslims in India, who are being assaulted for spreading the disease (BBC, 2020)). Once again, this demonstrates a mixture of emotions and confusion about the disease. Naturally, such behaviours do not form a solution to the problem. Kessler made the point that such irrational behaviours are common when we, the people, feel or perceive that our sense of security is threatened (Kessler, 2019). For example, at the start of the COVID-19 outbreak in the UK, there was panic buying and hoarding of food and other necessities, including toilet paper. The point is that, even in a society that is normally caring and looks after its citizens, all these values are lost to the detriment of others, including health professionals working long hours only to find empty shelves in supermarkets when they needed food. In terms of anticipatory grief, what was happening in these behaviours is people imagining their future without food, which will eventually lead to death. Toilet paper hoarding was in anticipation of diarrhoea (a symptom of COVID-19). Therefore, people wanted to be ready to maintain their own dignity and forgot or did not realise that others also wish for the same dignity. Thus, the COVID-19 pandemic has created uncertainty, because of which people may find it difficult to imagine what the future will be, which is often a source of hope.

Anger is also associated with a grief reaction, and people may experience this when their businesses are forced to collapse, they lose jobs and are deprived of watching their favourite sport. Staying at home during lockdown resembles house arrest, and unless one is creative, other negative consequences may occur: inactivity, overeating and drinking, frustration and lack of purpose in life. Even for me, having been used to working from home with my university job, it has become harder to work from home 24/7 for the last 6 weeks. However, the use of technology to hold virtual meetings and lectures has helped to keep my spirits high.

Since the introduction of the lockdown in the UK, we have seen evidence of some people going through grief or denial: they refuse to accept that the pandemic will curtail their life and take away their liberties and freedoms. For example, such denial is acted out when people hold parties at friends' houses, have barbecues and go out to the beach or parks. These

behaviours align with Freud's idea that people imagine other people's death but deny that it will happen to them (Freud, 1917) until someone close is affected or dies. It also shows how people fear the loss of their freedom and pleasures.

It is possible and can be argued that more people started taking social distancing and staying at home guidance seriously when the Prime Minister, Boris Johnson, was admitted to the intensive care unit after contracting COVID-19. Most people will know who he is and, as he said on his discharge, 'it could have gone either way', people might have realised that life is so fragile and death is always closely following it (BBC, 2020b).

Such realisation can make us humble and appreciate others around us. During the COVID-19 pandemic, although many people understand the need for the stay at home guidance, there is also the sadness of not being able to visit loved ones, which therefore increases episodes of loneliness. There are stories of patients dying alone away from their families, and families feeling helpless that they cannot say goodbye, or tell them how much they love them. These situations have become familiar in the pandemic, and it is clear to see how this may affect the bereaved in the immediate future.

The use of modern technology and smartphones/iPads can help control these feelings and maintain some pseudo-social connectedness, which arguably may minimise the grief experienced as a result of the separation. 'Social distancing' is an unfortunate term; 'physical distancing' might be a better one to use, as people should still be encouraged to be socially close to their loved ones by use of modern technology and social media.

The fact is that the COVID-19 pandemic has forced us into collective grief, and we must find collective systems and ways to help us cope and survive the lockdown, as well as eradicate the virus. Health professionals and social care workers must be given correct and adequate personal protective equipment

(PPE) to enable them to care for patients with the confidence that their own safety is guaranteed to the greatest possible extent. As a society, we need to be even more caring of each other, especially those who are frail, homeless or living alone, as well as older people. It is important that social distancing does not translate into avoiding each other and not speaking to other people while out exercising or shopping; we may be the only person they speak to that day.

Finally, let us continue to clap for our key workers every Thursday night, as this shows appreciation and connectedness as a society and helps them to manage their own grief from the patients who died in their care. However, the challenge will come once the pandemic ends, where we will see whether we will continue to value our key workers in more ways than clapping for them. There needs to be a clear policy change to improve how we view and treat health professionals and other key workers. It would be absurd to value them during the pandemic, only to forget them afterwards. As the prime minister confirmed on his discharge from hospital, the NHS and health professionals saved his life. We live in hope that he will do the right thing for all key workers, as well as those experiencing grief in our society. **BJCN**

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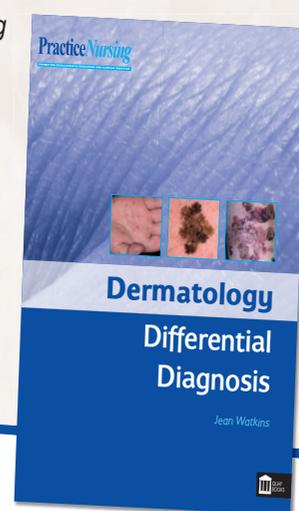
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