

Bereavement

Headlines

Around 3,600 people a year die in Kirklees. These deaths affect the family and friends in different ways.

The impact of bereavement can lead to poorer health and even death in those who are bereaved. Men are less likely to lose their wife/partner than women, but the negative impact is greater. Bereavement can reinforce or create financial difficulties, especially for women.

People dying where they want to and having the funeral they wished for can bring great comfort to those left behind.

For some there are positive changes that emerge following a bereavement, with people getting more involved in volunteering and other positive social activities. The wellbeing of a person can be heavily influenced by what is going on around them such as changes in relationships, and life events such as bereavement.

Why is this issue important?

Bereavement is a distressing but common experience. Sooner or later most people in Kirklees will experience bereavement. For most people, these losses usually happen later in life.

Nationally around 220,000 couples in Great Britain are separated by death each year¹. Of these, 4 out of 5 are over state retirement age and 2 in 3 are women. Around 6,000 couples nationally were not married or in civil partnerships but cohabiting.

In 2011 just over 3,600 people died in Kirklees² – applying national rates this means that around 1,400 people who die locally leave a partner. It is important to note that this figure does not include cohabiting couples who are unmarried, or those who are divorced.

However bereavement doesn't just affect those later in life. The death of a child or the suicide of a partner or family member can be very traumatic, but these are comparatively rare. Between 2001 and 2009 there were 169 child deaths and between 2008 and 2010 there were 30 suicides¹.

The majority of the bereaved, 90-95%, will “recover” from their loss within a “reasonable” time period. For the 5-10% of people who do not adapt “normally” to their loss the grief process can become problematic, resulting in a reduced quality of lifeⁱⁱ.

There are some potential serious health effects of experiencing bereavement – mortality and morbidity is higher for the bereaved compared with the non-bereaved, health outcomes are worse for men than for women³.

Bereaved people are at particular risk of [poverty](#) and problem debt. The death of a partner has been shown to be a trigger for claiming benefits and has been a reason for homelessness¹.

What significant factors are affecting this issue?

Constructing a new identity as widow/er and striving for independence in the face of disrupted everyday activities and routines, loneliness, health concerns and changed relationships within the family and social network are essential features of older people's bereavement experienceⁱⁱⁱ.

Knowing loved ones have died where they wanted to be and had the funeral they would have wished can bring enormous comfort to those left behind. Many people do not die as they might have wished or where they may have wanted. Around 70% of people say they want to die at home, yet more than half die in hospitals. Less than a third (29%) of people discuss their wishes around dying and only 4% have written advance care plans⁵.

Financial hardship or stress following the death of a partner can hinder coping responses, increase likelihood of depressive symptoms and complicate adjustment to bereavement. How people feel about financial consequences following the death of a partner may contribute to their emotional responses to bereavement. Psychological constituents of grieving, such as fear, anger, guilt and gaining new identities can all be affected by constructs of financial responsibility and economic wellbeing. These might include feelings about perceived economic roles of partner and self, feeling better off or worse off, or feeling more or less financially dependent⁴.

There is an inclination to get involved in more volunteering for some who have been recently bereaved as the additional time that people may have on their hands is an asset that is being utilised at both a formal and informal level⁷. People support activities in their local areas that are of interest to them, which can include contributing to organisations that support others who have been recently bereaved, and also supporting families and close neighbours⁸.

Taking on a caring role is also seen very positively amongst some individuals and families who have been bereaved, as people having more time available is often used to ease the burden of those around them who might be caring for children within the family or even

close friends, and people are also caring for older or disabled relatives and close friends. In some cases people reconnect with family life on a day-to-day level they had not previously been involved at⁹.

People who are bereaved also take the opportunity to undertake activities that may benefit them as individuals; this could be learning new skills, taking up hobbies or a more general personal development to keep minds active. These new and existing skills are sometimes put to use helping others. This could be through informal teaching, peer mentoring or more formal contributions to things like job applications and basic skills development in others¹⁰. Life experiences shape us all and individuals are often keen to help others going through similar life events, such as major life transitions, difficult circumstances such as money problems or job loss and experiencing illness or loss¹¹. This support is often rewarding for the individual as they feel people are benefiting from their experiences, and also the recipient feels two benefits: firstly that people have been through this before and also reassurance by the fact that someone really understands the situation that they are in.

Which groups are most affected by this issue?

[Carers](#) – a period spent caring for a disabled or ill family member can have adverse effects on income and employment, and increase living costs and the risk of debt. The negative financial consequences of care giving may persist long after the death of the person cared for and reduce pension income⁴.

Older women – loss of a partner's income stream has greater overall impact on women's household finances than those of men. On average, widows' incomes can fall to around 61%, compared with a drop to 74% of pre-bereavement incomes for widowers¹.

Where is this causing greatest concern?

People experience bereavement everywhere; however as described above the ability to cope both emotionally and financially following a bereavement is linked to poverty and financial hardship. So those that are already experiencing poverty and financial hardship are likely to be even harder hit when they are bereaved.

What could commissioners and service planners consider?

- In light of the lack of local data about the bereavement experience of people in Kirklees further work is needed to understand the local picture.
- Explore ways to ensure that men who are bereaved have access to relevant support to maintain their health and wellbeing, and that women have access to support to deal with the financial impact of their bereavement.
- Ensure that investment in psychological therapies and financial hardship-related services reflects the needs of the bereaved.
- Invest in groups that offer more practical support such as help with cleaning, shopping or looking after children and coping with bills, and other hurdles such as claiming benefits.
- Recognise the potential in those who have been bereaved to make a positive contribution to their families and communities.

References

1. Calla S. Breakthrough Britain, Centre for Social Justice; 2006.
2. ONS, Deaths Registered in England and Wales; 2011.
3. Timms P et al. Bereavement. Royal College of Psychiatrists. London; May 2011.
4. Corden A, Hirst M, Nice K. Financial Implications of Death of a Partner. Social Policy Research Unit, University of York; 2008.
5. National End of Life Care Intelligence Network. Variations in Place of Death in England - Inequalities or Appropriate Consequences of Age, Gender and Cause of Death? 2010.
6. Literature Review on Bereavement and Bereavement Care, Faculty of Health and Social Care, The Robert Gordon University, Aberdeen. 2006
7. Bussell H, Forbes D. Understanding the Volunteer Market: The What, Where, Who and Why of Volunteering. International Journal of Non-profit and Voluntary Sector Marketing; 2002.
8. Cabinet Office. Unshackling Good Neighbours; 2011.
9. Carers UK. Sandwich Caring – Combining Childcare with Caring for Older and Disabled Relatives; 2012.
10. DCLG. Tackling Worklessness; 2008.
11. Centre for Welfare Reform. Peer Support; 2011.

Date this section was last reviewed

22/07/2013 (PL)

ⁱ Kirklees Observatory. Accessed 6th March 2013.

ⁱⁱ Wimpenny P. Literature Review on Bereavement and Bereavement Care. The Robert Gordon University, Aberdeen; January 2006.

ⁱⁱⁱ Naef R et al. Characteristics of the Bereavement Experience of Older Persons After Spousal Loss: An Integrative Review. International Journal of Nursing Studies; 2013.