

## Review Research Paper

# Husain-Usmani Model for Grief Truncation Acronym “Seeding of Solace” (SOS): An Integrated Approach

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### Abstract

There are various situations that require consolation for the bereaved. Each one of the situation demands special task to be effective. This study focuses exclusively on grief counselling of the bereaved restricted to the mortuary. It is the culmination of decades of cumulative experience of the authors in dealing with myriad complexities associated with autopsy, the thin line of balance required to be maintained with confidentiality and disclosure, and at the same time discharging the task of counselling in a highly charged atmosphere some time bordering rebellion. An attempt has been made to construct a model named “**Husain-Usmani Model for Grief Truncation acronym ‘Seeding of Solace’ (SOS)**”.

It is hoped that by following this model some level of amelioration of grief could be achieved and the situation could be saved from getting worse aptly a distress call SOS - Save Our Soul. At the same time it is advised that personal discretion is required tantamount to situational freaks because no two situations are alike.

**Key Words:** Grief Counselling, Bereaved, Husain-Usmani Model, Seeding of Solace, SOS

### Introduction:

There are different types of grief situations in health and health care setting. Each of these situations would demand some modification in counselling for the bereaved.

Much work has been done in this and related field covering aspects like Accident and Emergency (A&E) Department [1], how to communicate bad news [2], teaching physicians how to break bad news [3], and ethical problems associated with grief counselling. [4]

Communication is like a poniard, it pierces and prescind towards better the obnoxious thoughts pervading freely in the mind of the bereaved provided the communication is used as a symbol [5], enriched by empathy [6] which in turned is governed by the narrator's own perception and culture, [7] necessarily meeting those of the bereaved.

In health care system and more accurately in a setting of tearing and incising of flesh that is mortuary, empathy assumes many dimensions.

These dimensions are namely, perspective taking (the ability to take on the viewpoint of another person), emotional dimension (experience other's perception), and concern (for the welfare of the other person). [8]

The autopsy surgeon who is delegated the task of quenching voracious thirst by answering questions like “did it?” or “didn't it?” must realize that language is ‘rule governed’ and that ‘it shapes and reflect attitude’ [9] both of the questioner and the answerer.

Emotive language can break the barrier in communication whereas evasive language builds the blockade. Hence it is important that the autopsy surgeon must rely on listening rather than on hearing. Faulty assumptions must never be passed.

With this background the authors now venture to discuss the model created in this respect and elaborate upon the role it can play constructively. We urge the readers to pass the torch in a relay effort aimed at mitigating guilt, remorse and anger in the survivors of the deceased.

### Prelude to SOS:

All medico-legal cases brought to the mortuary for autopsy have met sudden unnatural death, whatever their age or physical constitution may be.

It is but natural that this factor alone produces grief compounded by grief, vindictiveness, helplessness, hopelessness,

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remorse, anger, and non-reconciliation to the event fate has brought to their door-step.

Persons having natural interest in the undoing of victim's life have strong urge to know the exact sequence of events that led to the demise of the unfortunate individual.

The authors experience tells us that they have two arbitrary questions to pose initially:

- (1) Whether the person would have survived if timely help or medical aid would have been provided to the deceased?
- (2) If he had been harbouring gross pathology ante mortem, would that have contributed significantly to hasten his death despite the extent of wounding?

These two questions are important for them because (a) they would know against whom to direct their anger and retaliation, and (b) this would have a soothing effect once they realize that assault may not be the sole cause of death. Contributory factor(s) have existed.

Both these questions are easy to answer for the autopsy surgeon because both these relate to post-mortem findings. Caution must be exercised at all cost.

Nevertheless with credible medical evidence and beading together of events it would not be difficult to weave soothing gossamer.

However, the manner of delivery of such information would require tactful communication and accepting medico legal and medico moral obligations.

### **Seeding:**

By the term 'seeding' in Husain-Usmani model it imply that an attempt has been made to assuage the feeling of the relatives/acquaintances of the deceased right at the mortuary.

It must be realized that seeding done correctly would alleviate much of their sufferings.

Since the timing is correct it would tend to eliminate the recondite notion of contamination of information in case the information is given later by the autopsy surgeon recalling and churning out of memory.

Extemporaneous deduction of facts would send the message of truthful information provided. The communication tools to be used are necessarily in the following order:

- (a) Do not resort to lying or making equivocating statements.
- (b) Avoid parroting or paraphrasing of sentence because that gives an impression of gnawing words to accommodate fictitious information.

- (c) Since there is no such thing as perfect communication, ergo use narration's nimbleness to your advantage, i.e., use ample cognitive canvas giving an impression that your perception is influenced by their culture and that you feel remotely linked to their current state of emotional devastation.
- (d) Be empathic and shape your language in conformity to the situation.
- (e) Do not mislead but integrate your findings to the extent of revelation without resorting to circumscribing the issue or letting their curiosity stagnate.
- (f) Merge your attitude, beliefs, and values with those of the information seeker at least temporarily – or so it would seem to them.
- (g) Dispel the notion of sunk-cost fallacy because it would further push them in to the morass of violence begets violence or like begets like.
- (h) Finally the ethics of simplicity must be approached but with caution.

### **Solace:**

- (a) Since probably it may be one-time meeting therefore, effort should be made to plant as much soothing seeds as possible for later germination into miles and miles of foliage.
- (b) Of course there is constraint of time, space and circumstance. Use your judgment in this regard.
- (c) Action in speech must be gradatory and not sudden. Enough time must be given to allow the information to sink to a conformity level where the brain allows the mind to accept it.
- (d) One must be sedulous and seem to be so. Hear them but respond only after listening for hearing and listening are not the same. These are the two sides of the same coin but carry collateral connotations.

This attempt would determine their next course of action.

We wouldn't dare say that solace would be able to bring complete harmony in their physical and mental construct; yet to a certain extent it would denominate their anguish and make their lives easier for them to spend.

We have hardly seen relatives or friends of the deceased crying or sobbing at mortuary ambushed by their private agony.

On the contrary their faces seem to be hardened with ample demonstrable streak of apparent resoluteness.

Our endeavour should be to soften their faces. It is easier said than done. Nevertheless, its reach is far in to the future and fruition is for posterity.

### Conclusion:

This discourse is closed by raising the rainbow of hope and optimism higher. Data show that communication skills do not necessarily improve with years of medical practice alone [10] but can be learnt. [11]

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## **OBITUARY**

*If the radiance of a thousand suns*

*Were to burst at once into the sky*

*That would be like the spender of the Mighty one-----*

*I am became death*

*The shatterere of worlds.....*

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