



Virginia Mason Franciscan Health
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chifranciscan.org/hospice

Virginia Mason Franciscan Health

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Understanding Grief





Dear Bereaved Friend,

Your life has been forever changed by the death of someone close to you. The process of realizing, adjusting to and living with this change can be a difficult one. The name of this process is *grief*.

We have assembled lists, articles, poetry and information about the grief process. Our hope is that this material provides insight about feelings you may be experiencing as well as ideas for taking care of yourself as you work through your grief.

There is no universal timetable for bereavement. Grief does not come in nice, neat stages that are completed in a certain amount of time. Each person is unique and you will grieve in your own way and time. There are many factors that influence how a person grieves. Please be kind and patient with yourself and allow those feelings to be experienced and expressed.

The materials included in this booklet come from many sources and were compiled, written and edited by several professionals throughout the Puget Sound area who work with people who are grieving. We thank them for sharing their insightful work.

May this booklet be part of your healing. If you have any questions, need someone to talk to, or would like information on bereavement resources in your community, please call (253) 534-7015.

Blessings to you,

Bereavement Services Staff

Virginia Mason Franciscan Health Hospice and Palliative Care

Resources

What a support group can offer you

It is not easy to understand or accept the loss of a loved one. Many emotions surface which take time to sort out, to understand, and finally, to resolve. A caring support system is important during this time. Many people worry whether they are grieving in the “right way,” and wonder if their feelings are normal. A grief support group provides trusted and compassionate people who can be with you to listen to your concerns. It also provides insights about the grief process and what you might expect to happen during your period of adjustment.

By sharing with others, you will learn that you are experiencing natural and normal grief responses. You will receive permission to grieve and validations of your emotions. Support groups bring you together with others who know what you are experiencing because they are going through a similar situation. You are given

a safe, confidential place to both accept the support of those around you and to offer it back to others. Being with others helps you gain a sense of perspective about loss. You begin to realize that many lives are touched with sorrow. This is no way invalidates your pain but may allow you to see it in a different light.

Often friends and relatives think you should be over your grief long before you actually are. You may find that you are hiding it from them and trying to pretend that you are “back to normal.” A support group is one place where you may express exactly how you really are feeling. It is time to focus on your loss and to remember your loved one.

Grief support groups are not depressing. They are designed for you to have an opportunity to share as much as or as little as you feel like sharing. The purpose of the professional facilitator is to see that everyone gets time to speak if he or she wants. The facilitator also provides information about the

grief process and may offer helpful suggestions for individual situations you may be experiencing.

There are many grief support groups in your community.

Created by Ginny Tesik, MA and Mary Ellen Shands, MN



“Every ending contains within itself the seeds of a new beginning.”

— James E. Miller

For more information on grief groups offered by Virginia Mason Franciscan Health Hospice and Palliative Care, please visit: chifranciscan.org/griefsupport.

If you are looking for a grief group for a specific type of loss, there are a number of peer-led groups you can get more information about on the Internet. If you do not have access to the Internet, please contact us at 1 (800) 338-8305 and one of our counselors will be happy to help.



I Am Not Resigned

I am not resigned to the shutting away of loving hearts in the hard ground.

So it is, and so it will be, for so it has been, time out of mind:

Into the darkness they go, the wise and the lovely.

Crowned.

With lilies and with laurel they go; but I am not resigned.

Lovers and thinkers, into the earth with you.

Be one with the dull the indiscriminate dust.

Of what you felt, of what you knew,

A formula, a phrase remains—but the best is lost.

The answer quick and keen, the honest look, the laughter, the love—

They are gone. They have gone to feed the roses.

Elegant and curled.

Is the blossom. I know. But I do not approve.

More precious was the light in your eyes than all roses in the world.

Down, down, down into the darkness of the grave

Gently they go, the beautiful, the tender, the kind;

Quietly they go, the intelligent, the witty, the brave.

I know. But I do not approve. And I am not resigned.

— Edna St. Vincent Millay

Table of Contents

Understanding grief	2
We remember them.....	2
Some realities of grief.....	3
Why we grieve differently	4
Stages in the cycle of grief	6
The grief spiral	7
Crying: It can reduce tension	8
Guilt.....	10
Do nice people get angry?	12
Toward an understanding of the “Going Crazy Syndrome” Part One.....	13
Toward an understanding of the “Going Crazy Syndrome” Part Two	15
Toward an understanding of the “Going Crazy Syndrome” Part Three.....	19
Caring for yourself as you grieve	24
Suggestions for helping yourself through grief.....	24
Suggestions for helping yourself: Ways for you to be good to you.....	26
Meditation	27
Spirituality.....	28
Making a memory book.....	29
Engaging your grief	30
Write a letter	31
Returning to “Normal”	32
Grief rituals.....	32
Men in grief.....	34
Determined to survive!.....	34
Children’s grief.....	36
Guiding children through grief.....	36
Various losses	41
Answers to questions most frequently asked by widows and widowers.....	41
Loneliness and the widowed	43
Sexuality and the widowed	44
Adult orphans.....	45
Coping with the death of an adult sibling	47
Disenfranchised grief: Losses that don’t seem to count	49
Please understand: A letter to friends.....	50
Please understand	51
I Am Not Resigned.....	52
Resources	53
What a support group can offer you.....	53

Understanding grief

We remember them

At the rising of the sun and at its going down,
We remember them.

At the blowing of the wind and in the chill of winter,
We remember them.

At the opening of the buds and in the rebirth of spring,
We remember them.

At the shining of the sun and in the warmth of summer,
We remember them.

At the rustling of the leaves and in the beauty of autumn,
We remember them.

At the beginning of the year and at its end,
We remember them.

As long as we live, they too will live, for they are now a part of us,
We remember them.

When we are weary and in need of strength,
We remember them.

When we are lost and sick at heart,
We remember them.

When we have joy we crave to share,
We remember them.

When we have decisions that are difficult to make,
We remember them.

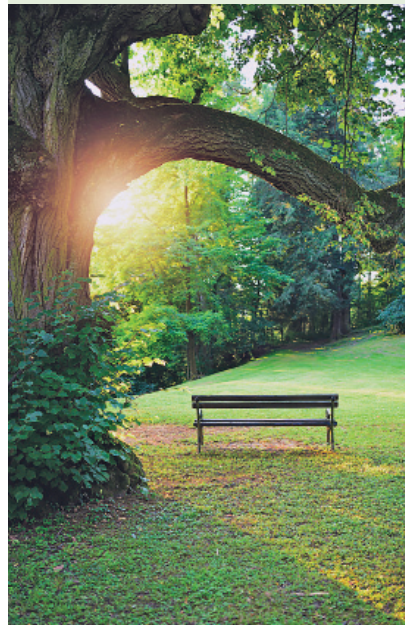
When we have achievements that are based on theirs,
We remember them.

As long as we live, they too will live, for they are now a part of us, as
We remember them.

— Sylvan Kamens & Jack Riemer

**Listen to your feelings.
They tell you when
you need to
take care of yourself,
like finding a friend
if you feel lonely,
crying if you feel sad,
singing and smiling
if you feel happy,
and acting frisky
if you feel good.**

— Pat Palmer



Please understand

by N. Suzanne Miller

Submitted by Freddie Johnson

My spouse died.

There—it's down in black and white. What I mean is, he's still alive in spirit, but his body died. And that's how I became a member of the community of the bereaved. And as a member, I ask for your understanding. Not your pity—your understanding.

As individuals, we in the community of the bereaved need you. Don't worry about saying the "right things." We're tired of clichés. We know our "dear ones are at peace with God" and that they feel no more pain.

But we still miss their physical presence. There was this one person on earth to whom we were the most important; one person who knew us so completely that no words were necessary. We miss that.

If we seem distant, please understand. Some of us are still in shock. Even if the illness was long and the prognosis unfavorable, we maintained the hope that death wouldn't come. We had to. How else could we face each hour, by encouraging our loved one?

If we seem angry, please understand. Most of us are angry, but we know that God accepts our anger and refines it into an energy that will be vital in our outreach to others.

If tears come at inappropriate times and places, please understand. Our emotions, even yet, are still raw. Just when we think we are in control, a song or a scent—or a feeling of utter desolation—overcomes us.

Or, if we laugh, know that deep inside we are hurting. We know that God had given us the gift of a sense of humor, and that our loved ones are rejoicing that we are exercising this gift.

We may be forgetful. Sleep is elusive; we may not eat properly; we may make foolish purchases. Please don't condemn us. Just know it can be part of the grieving process. In time, we'll come around.

And please, oh please, let us follow our own timetables. We each march or stumble along the route at our own pace. Grief has no calendar; don't hold us to a timetable. For the moment, we are drifting, buoyed by the love of God and our faith in Jesus Christ.

This faith, along with your understanding, will enable us—eventually—to celebrate life once again.



**Grief is not an enemy—
it is a friend.**

**It's a natural process
of walking through hurt
and growing because
of the walk.**

Let it happen.

**Stand up tall to friends
and to yourself and say**

**"Don't take my grief
away from me.**

**I deserve it and I am
going to have it."**

— Doug Manning
(from "Don't Take My
Grief Away From Me")

Please understand: A letter to friends

by Loren Whipple, Naples, FL

Editors Note: The following is a letter written by D. Loren Whipple, Hospice of Naples Bereavement Services Coordinator. It is a collection of information gathered directly from bereaved persons.

Dear Friends:

I know one can receive without giving for only so long, but I have not yet had enough energy to return the attention I've received. I know the mourning process varies with each individual, so I have no idea how long this lethargy will last. Though I can see light at the end of my tunnel, I have no idea how long the tunnel is.

I can only ask that you stand by me as long as possible. Mostly, I need you to be a good listener. Please don't try to problem-solve. This is not something that can be solved. I need your support as I go through my "process," and the best support is your ear and your attempts to just understand and accept.

So many of my thoughts and feelings just need to get out, they just need expression. Sometimes I may have a way of doing things that seems strange to you, but I am in all new territory myself. Since most of us don't have much experience in loss, and have not received any education in it, I didn't know what to expect of myself. I do believe that healthy expression is the key—if only I can be patient with the process.

If I have trouble being patient with my path, I know it must be difficult for you also. It is not easy to feel helpless watching another grapple to find his or her way. So let's try to be honest with each other so that neither of us feels like we are walking on eggshells. If you're not sure if it's okay to talk to me about my loss, ask. If I wonder if it is okay to discuss something with you, I will ask.

I need special attention on significant dates. Sometimes I may just need a ride or an invitation to dinner. Sometimes I may need to talk. Many times I won't know what I want.

To the extent that it's comfortable for me, I will try to regain as much as I can of the "me" that you used to know, but I will be changed. Parts of me must be redefined, and new parts of me are emerging. I can only hope you like me even better, but also I realize you may be uncomfortable with the changes. You will see me differently either because of my behavior or your perception of my new status. I hope we can hug about our changing relationship and strengthen it.

With love,

Loren

Hold on to what is good even if it is a handful of earth.

Hold on to what you believe even if it is a tree which stands by itself.

Hold on to what you must do even if it is a long way from here.

Hold on to life even when it is easier letting go.

Hold on to my hand even when I have gone away from you.

— Pueblo Blessing



Some realities of grief

In our society, we do not spend much time talking about death, so when we experience a major loss, we have little modeling and information for coping. If someone you love has died, you may be experiencing some of the things listed here. These are normal, natural reactions to the loss of a loved one.

- Your grief will take **longer** than most people think.
- Your grief will take **more energy** than you would have ever imagined.
- Your grief will involve **many changes** and will be **continually developing**.
- You will not **"get over"** your loss. Eventually, you will **learn to live with it**.
- Your grief will show itself in **all spheres of your life**: psychological, spiritual, social, emotional and physical.
- There is **no quick fix**. Working through your grief is the hardest work you will ever do. Confucius said, "It does not matter how slowly you go, so long as you do not stop."
- Your grief will depend on **how you perceive** the loss.
- You will grieve for **many things both symbolic and tangible**, not just the death alone.
- You will grieve for what you have **already lost** and what you have **lost for the future**.
- You will grieve for **all the hopes, dreams and unfulfilled expectations** you held for and with the person, and for the **needs that go unmet** because of the death.
- The loss will **resurrect** old issues, feelings and unresolved conflicts from the past.
- You will have some **identity confusion** as a result of this major loss.
- You may have a **combination of feelings**— anger, guilt, depression, irritability, relief, joy, annoyance, intolerance, loneliness, fear and deep sorrow. It is possible to have these feelings all at once.
- You may have a **lack of self-concern**.
- Things that **used to be important** to you will be of **little significance**.
- You may experience **grief "attacks"**—surges of grief that occur suddenly and with no warning.
- You will have **trouble thinking, organizing, remembering and making decisions**.
- You may feel like you are **going crazy**.
- You may begin a **search for meaning** and may **question your religion and/or philosophy of life**.
- You will be **surrounded by triggers** everywhere you go.
- Holidays, family events, anniversary **dates** and other times/dates, seasons and days of the week may be difficult for a long time.
- **Society will have unrealistic expectations** about how long you should mourn, the intensity of your mourning, and how you should deal with your grief.
- Your grief will **probably hurt more before it hurts less**. **You will not always feel this bad**.



Why we grieve differently

by Ginny Tesik, M.A.

We accept without question uniqueness in the physical world...fingerprints, snowflakes, etc... But we often refuse that same reality in our emotional world. This understanding is needed, especially in the grieving process.

No two people will ever grieve the same way, with the same intensity or for the same duration.

It is important to understand this basic truth. Only then can we accept our own manner of grieving and be sensitive to another's response to loss. Only then are we able to seek out the nature of support we need for our own personalized journey back to wholeness and be able to help others on their own journey.

Not understanding the individuality of grief could complicate and delay whatever grief we might experience from our own loss. It could also influence us should we attempt to judge the grieving of others—even those we might want to help most.

Each of us is a unique combination of diverse past experiences. We each have a different personality style, various ways of coping with stressful situations, and our own attitudes influence how

we accept the circumstances around us. We are also affected by the role and relationship that each person in a family system had with the departed, by circumstances surrounding the death and by influences in the present.

Past experience

Past experiences from childhood on have a great impact on how we are able to handle loss in the present.

What other losses have we faced in our childhood, adolescence, adulthood? How frightening were these experiences? Was there good support? Were feelings allowed to be expressed in a secure environment? Has there been a chance to recover and heal from these earlier losses?

What other life stresses have been going on prior to this recent loss? Has there been a move to a new area? Were there financial difficulties, problems or illness with another member of the family or with ourself?

What has our previous mental health history been like? Have we had bouts with depression? Have we harbored suicidal thoughts? Have we been treated with medication or been hospitalized?

How have our family cultural influences conditioned us to respond to loss and the emotions of grief (stoic father, emotional mother, etc...)?

Relationship with the deceased

No outsider is able to determine the special bond that connects two people, regardless of the relationship, role or length of time the relationship has been in existence.

Our relationship with the deceased has a great deal to do with the intensity and duration of our grief.

What was that relationship? Was the deceased a spouse? A child? A parent? A friend? A sibling?

How strong was the attachment to the deceased? Was it a close, dependent relationship? What was the degree of ambivalence (the love/hate balance) in that relationship?

It is not only the person, but also the role that person played in our life which is lost.

How major was that role? Was that person the sole breadwinner, the driver, the handler of financial matters, the only one who could fix a decent dinner? Was that person a main emotional support, an only friend? How dependent were we on the role that person filled?

Circumstances surrounding the death

The circumstances surrounding the death, i.e., how the death occurred, are extremely important in determining how we are going to come to an acceptance of the loss.

or witnessed their suffering. Recovery from trauma involves working through the pain, and articulating thoughts and feelings about the loss to a trusted person. While this long process is going on, you can gain strength by working to increase your self-esteem. Each step that you take towards becoming your "best self" will create a corresponding rise in self-esteem. You will then be strong enough to handle another 'piece' of your grief. Traumatic grief must be dealt with bit by bit, not all at once.

— From The Sibling Connection website

Disenfranchised grief: Losses that don't seem to count

When someone's grief is downplayed by others, it isn't always an intentional attempt to enforce cheerfulness. Sometimes the bereaved are simply overlooked, their grief downplayed by oversight. Professor of gerontology Kenneth Doka routinely explains in his books and lectures on grief management that "there are circumstances in which a person experiences a sense of loss but does not have a socially recognized right, role, or capacity to grieve. In these cases, the grief is disenfranchised." Such people often do not receive the comfort they need in order to grieve properly and can be vulnerable to loneliness and serious,

long-term depression. Examples of bereaved persons who may feel disenfranchised include couples who have miscarried or given up a child for adoption; women (or men) whose spouses are missing in military action; and those whose loved ones have died from socially "unacceptable" causes such as suicide.

Divorce also leaves many bereaved in its wake, and the same is true of brain-altering injuries and dementias. The bereaved in these situations may not be grieving the actual loss of physical life but of crucial intangibles, without which their lives and families will never be the same. Grief is grief, despite the fact that each of us will experience it in highly individual ways depending on personality and circumstance.

Often ignored at times of bereavement are young children. Barring the loss of a parent, in which case their grief is usually recognized, their needs may become almost invisible to other bereaved members of the household. If a child has lost a grandparent, aunt or uncle, it may be assumed that there was little attachment, or they may not be expected to understand the permanence of the loss. Even worse, the loss of a child's own sibling is usually seen primarily as the parents' loss. When this happens, the surviving children may not only grieve alone but may also be expected to support the parents.

Elizabeth DeVita-Raeburn, in the book *The Empty Room*, suggests that this mindset is a relic from old Freudian stereotypes about sibling rivalry. "In fact," she writes, "until the early 1980s, almost every academic article on the subject of siblings took up the topic of rivalry or birth order. That the sibling relationship might meet other needs, or evoke any emotion other than competition, rarely came up."

Even adult siblings sometimes find their grief dismissed on the unspoken assumption that when individuals establish their own family, their siblings are no longer primary relationships. The reality, says T.J. Wray, author of *Surviving the Death of a Sibling*, is that, "like your parents, however, your siblings are people you assume will be part of your life for the rest of your life, too." Acknowledging that every family is different, and that there is a wide variety of sibling relationships, she posits that it's devastating to lose even difficult sibling relationships. "Only your brothers and sisters know firsthand what it was like to grow up in your particular family," she notes. "Losing a sibling, then, can also mean losing a part of yourself, part of that special connection to the past."

Whatever our loss, when grief is acknowledged it is easier to bear.

— From Vision web page

You don't "get" over this as much as "grow through" it.

The loss of a future with your sibling

Not only have you lost the actual person and your relationship with them, but you have lost the part they would have played in your future. You go on to marry, have children, buy a house, succeed or fail, and each event underlines the terrible reality that your brother or sister is not there. Forever after, all events, no matter how wonderful, are bittersweet. Anniversary reactions plague the surviving sibling on birthdays or holidays and other special occasions. Bereaved siblings need not be too hasty in making life changes at these times. They may unwittingly be "acting out" the loss unless they are conscious of the date.

Compulsive caregiving

What prevents many bereaved siblings from an uncomplicated grief process is their desire to protect someone—perhaps their parents, spouse, or their own children. The focus on being there for someone else helps them put their own grief process on hold. One of the most commonly noted responses to sibling loss is that surviving siblings learn not to fear the grief of others. They have been there—they know what it is like so they can listen to others who are grieving. This can be carried too far. When bereaved siblings project their



own hurt feelings on to others, and then take care of those others, it becomes counter-productive. Compulsive caregivers live on the periphery of their existence, focusing so much energy outside themselves that they become empty, over-stressed, and ultimately clinically depressed. Often, they appear "brittle," speaking in short, quick sentences, while they deny the underlying pain. The un-felt feelings then become a heavy burden that prevents the sufferer from becoming his or her best self. To help resolve this compulsive caregiving, you need to confront your own sadness and pain, own it, feel it deeply. You may need to talk about

every detail of the death, and express the related feelings over and over until you wear out the pain.

Dealing with trauma

A related issue that is particularly troubling in certain kinds of death is that of trauma. Our minds can only process so much information at one time. When the event is of a magnitude to create excess stimulus, it is traumatic. When a brother or sister dies suddenly from an accident, suicide, or homicide, this is definitely too much for us to take in at once. Trauma may also be a factor for those bereaved siblings who helped to nurse their sibling through a disfiguring disease,



Was the loss in keeping with the laws of Nature as when a person succumbs to old age? Or was chaos thrown into order, as when a parent lives to see a child die?

What warnings were there that there would be a loss? Was there time to prepare, time to gradually come to terms with the inevitable? Or did death come so suddenly that there was no anticipation of its arrival?

Do we feel that this death could have been prevented or forestalled? How much responsibility am I taking for this death?

Do we feel that the deceased accomplished what he or she was meant to fulfill in this lifetime? Was their life full and rewarding? How much was left unsaid or undone between ourselves and the deceased?

Does the extent of unfinished business foster a feeling of guilt?

Influences in the present

We have looked at the past, at the relationship, and how the loss occurred. Now we see how the influences in the present can impact how we are finally going to come to terms with a current loss.

Age and sex are important factors. Are we young enough and resilient enough to bounce back? Are we old enough and wise enough to accept the loss and to grow with the experience? Can our life be rebuilt again? What opportunities does life offer now? Is health a problem?

What are the secondary losses that are the result of this death? Loss of income? Home? Family breakup? What other stresses or crises are present?

Our personality, present stability of mental health and coping behavior play a significant role in our response to the loss.

What kind of role expectations do we have for ourselves? What are those imposed by friends, relatives and others? Are we expected to be the "strong one" or is it all right for us to break down and have someone else take care of us? Are we going to try to assume an unrealistic attempt to satisfy everyone's expectations, or are we going to withdraw from the entire situation?

What is there in our social, cultural and ethnic backgrounds that give us strength and comfort? What role do rituals play in our recovery? Do our religious beliefs bring comfort or add sorrow and guilt? What kind of social support is there in our lives during this emotional upheaval?

Conclusion

When a person who is a part of our life dies, understanding the uniqueness of this loss can guide us in finding the support we will need and to recognize when help should come from outside family or friends.

When the loss is experienced by someone we would like to help or by someone under our care, this same understanding is essential. Thus we can guard against a temptation to judge or to compare their grief responses to our own.

Stages in the cycle of grief

by Ginny Tesik, M.A.

Grief is a natural and necessary reaction to a significant loss in our lives. It is a healthy human response.

The grief process often works in a CYCLE. It is not linear. There may be times when you think you have completed a certain stage or “feeling state,” then a new circumstance arises which causes feelings to resurface unexpectedly. This is not a setback. As you move through the stages, though they may reoccur from time to time, the intensity of the feelings will lessen and the length of time they remain with you will diminish.

SHOCK AND DENIAL are generally the first feelings that hit you when you experience a serious and sudden change in your life. Your mind immediately says: “NO, this is not true.” Shock is a natural buffer which protects you from absorbing more than you can handle. Often it is months before you can completely let go of all the denial and face the reality of the present.

ANGER may be caused by feelings of helplessness and frustration. Your world has been turned upside down. Nothing is the way you thought it would be. Feeling angry at God/Higher Power is common. Anger at your loved one who died is also



normal. Anger and blame can be directed toward others such as your family, friends and medical professionals.

Anger turned inward against yourself produces GUILT. You may be filled with thoughts of “if only” and “I should have.” These feelings of self-blame and regret are also normal reactions to grief.

You may find yourself BARGAINING with life. You make wild promises and deals in the hopes that suddenly you will “wake up” and everything will be all right again.

These initial stages may allow you to deny your loss, to feel anger that it has occurred, and to bargain for life to return to normal. None of these change the reality of the situation.

Now you may be left with anguishing pain, unanswered questions, and the heartache of loneliness. Sadness and tears often seem to have no end.

DEPRESSIONS AND DESPAIR characterize this period. You may feel drained of energy, and even the day-to-day tasks of living can be difficult. Fears of being unable to cope often surface.

Gradually, you will find a way to ADJUST to the reality of your loss, ACKNOWLEDGE what has happened, and begin to think about going on with your life. You will one day look back and realize that your “good days” are outnumbering your “bad days,” and that you are moving through your healing journey.

Coping with the death of an adult sibling

Disenfranchised grief

When adults lose a sibling, they often feel abandoned by society. The sympathy goes to their parents, but brothers and sisters are supposed to “get over it” quickly so they can comfort the parents or replace the lost sibling. This is one of the reasons why adult sibling loss falls into the category of “disenfranchised grief.” Bereaved individuals are encouraged to feel guilty for grieving too long. When society fails to validate the grief and sadness of siblings, they do not receive the support necessary to heal. There is a tendency for the bereaved to go into hiding with their feelings. This often results in a low-grade depression with which bereaved siblings struggle for many years. One of the benefits that technology has brought to the grieving population is by providing, through the Internet, a way to connect to others in similar circumstances. When adults lose a brother or sister, the following are some of the issues they deal with:

Seeking a new identity

When someone has been a part of your life since birth, your identity is based on having them there. They form a part of the field or background from which you live your life, and

as such, they are essential. They make up part of the unbroken wholeness that defines who you are. This relates to the concept of birth order. When the first child is born, he or she develops certain characteristics and talents. Other siblings will most likely choose other characteristics to develop in order to differentiate themselves from each other. The first child may become a

star athlete, while the next sibling excels in academics. The siblings support each other by their differences. In doing so, siblings actually loan each other their strengths, and when one of the siblings dies, that strength is lost, and the survivor’s identity with it. It takes time to learn how to live your life again. You have to grow within yourself the parts once carried by your brother or sister.

A Mother’s Roots

Excerpt from *Motherless Daughters: The Legacy of Loss* by Hope Edelman

In the redwood ecosystem, all seeds are contained in pods called burls, tough clumps that grow where the mother tree’s trunk and root system meet. When the mother tree is logged, blown over, or destroyed by fire the trauma stimulates the burls’ growth hormones. The seeds release, and trees sprout around her, creating the circle of daughters. The daughter trees grow by absorbing the sunlight their mother cedes to them when she dies, and they get the moisture and nutrients they need from their mother’s root system, which remains intact even after her leaves die. Although the daughters exist independently of their mother above ground, they continue to draw sustenance from her underneath. I am fooling only myself when I say my mother exists now only in the photograph on my bulletin board or in the outline of my hand or in the handful of memories I still hold tight. She lives on beneath everything I do. Her presence influenced who I was, and her absence who I am. Our lives are shaped as much by those who leave as they are by those who stay. Loss is our legacy. Insight is our gift. Memory is our guide.

The first parent's death is felt as especially shocking, not because it is necessarily felt as off-time, but because it involves a realization that parents die. Bereaved adult children may feel a sense of being an orphan and of extreme loneliness.

Changes in self-identity/heightened awareness of own mortality

The death of a parent is a highly significant event to midlife. It is a sign to the adult child that life is transient and finite.

Reassessment of personal priorities and relationships

Many experience strengthening within relationships to spouse and/or siblings following parent bereavement. The death of a parent is an important aspect of midlife transition which may involve much positive change and growth.

The perceived notion of timeliness of the parent's death

Social expectations may fall on people who have been bereaved of elderly parents to have 'less' grief because of the age of the deceased. This experience is no exception to the social challenges of grief. The notion there will be less grief when it is an elderly person who dies, can be a fallacy. Timeliness may be irrelevant to grieving offspring.



Gender

Daughters express more upset and physical symptoms following bereavement of an elderly parent and tend to have stronger ties with the deceased. Sons seem more accepting of a parent's death, although they are more likely to express guilt about not spending time or caring for their parent.

There's a striking gender difference in father loss between sons and daughters. Men reported far less emotional upheaval compared to women. In response to mother death the responses of sons and daughters were similar.

The death of the first parent

A feeling of support for their own grief through actions on behalf of the surviving parent was evident in interviews with both men and women.

Within the stories of responsibility for the surviving parent was sympathy because they had lost their spouse. This sadness is felt in addition to the daughter's or son's own grief for the deceased parent and may be felt as a form of grieving through the surviving parent. An individual may feel sorrow for a loss suffered by another person as if it were his or her own pain.

"I double grieved...you've got your own sadness, but also sadness for the other half."

The midlife transition of losing one's parents means bereavement is not experienced in one stage but as a two-phased transition.

—Materials referenced from Helen Marshall, "Midlife Loss of Parents: The Transition from Adult Child to Orphan" in Aging International, Fall 2004.

The grief spiral



- The spiral never closes. You are forever changed by your loss.
- How you are changed depends on your own attitude and determination.
- You may come through this experience with new depth of character and strength or you may become closed, withdrawn, bitter and angry. The choice is up to you.
- Unresolved grief comes from trying to jump from one side of the spiral to the other without acknowledging and experiencing your feelings.
- Not everyone will experience all these feeling, nor will they necessarily come in this order. This is a very general guideline.

Crying: It can reduce tension

by Victor M. Parachin

At a community hospital in a Chicago suburb, an eight-year-old girl asked, "May I cry or should I be brave?" It was a question she posed moments before being taken to surgery for a leg amputation.

In New York City an editor received a phone call and dissolved into tears. When co-workers expressed concern, he reported that his mother had just died. Flowers were sent to him, and then it was discovered that the death was not his mother, but his beloved cat.

These two examples demonstrate the high-level ambivalence and conflicting feelings people have about crying. On the one hand, shedding tears can show deep love and concern. On the other hand, tears can convey lack of discipline and courage. Yet, at one time or another everyone cries. Recent statistics show that 85 percent of women report crying, as do 73 percent of men. There is perhaps, no other element of living that has so much mystery and confusion connected to it as the meaning of a human tear.

In spite of mixed feelings about tears, poets and novelists have known intuitively that crying is somehow good for us. For example, William Shakespeare wrote: "To weep is to make less

the depth of grief." And poet Alfred Lord Tennyson once wrote about a woman who learned that her military husband had been killed: "She must weep or she will die."

Amazingly, science is beginning to confirm the accuracy and truth of such statements. For the first time in history, researchers are verifying that crying is good for us because tears reduce tensions, remove dangerous toxins and increase the body's ability to heal itself. In short, scientists are drawing the conclusion that people who are able to cry enjoy better physical and emotional health.

To help understand and interpret tears better, here are scientific answers to five of the most common questions and concerns about crying.

1. Why do people often feel better after crying? Alan Wolfelt, Ph.D., a professor at the University of Colorado Medical School who works primarily with people mourning the death of a loved one, makes the following observation: "In my clinical experience with thousands of mourners, I have observed changes in physical expressions following the expression of tears... Not only do people feel better after crying, they also look better." And according to Dr. William Frey, a biochemist and director of the Dry Eye and Tear Research Center in Minneapolis, the reason people feel better after crying, "is that they may be removing, in their

tears, chemicals that build up during emotional stress." His research indicates that tears, along with perspiration, urine and the air we breathe, rid the body of various toxins and other wastes.

As far back as 1957, it was discovered that emotional tears are chemically different from tears that result because of an eye irritation. Emotional tears contain more protein and beta-endorphin, one of the body's natural pain relievers. In addition, researchers are also discovering that people who cry frequently enjoy better health overall. Margaret Crepeau, Ph.D., professor of nursing at Marquette University, has studied the subject of tears from both physical and emotional angles. She claims that healthy people view tears positively, while people plagued with various illnesses see them as unnecessary and even humiliating. Dr. Crepeau states: "I found that well men and women cried more tears more often and more times than did men and women with ulcers or colitis."

Consequently, in the school of nursing at Marquette University nurses as well as those in training are urged not to automatically provide tranquilizers to weeping patients but to let the tears do their own therapeutic work. Dr. Crepeau states: "Laughter and tears are two inherent natural medicines whereby we can reduce duress, let out negative feelings and



their mate. Personal beliefs and religious affiliations will highly influence one's sexual behavior. For some, sex outside of marriage is never considered.

Many people don't understand how to achieve closeness in a relationship without being sexual. This misunderstanding arises out of a failure to communicate feelings to members of the opposite sex. Establishing a mutually nurturing relationship is an option for everyone who has lost a mate. Both women and men want warmth, acceptance, sharing, trust, specialness, companionship and love. Communicating our needs and desires and taking the necessary time to create a special bond is one of life's rewarding pursuits. This new relationship may or may not be a sexual one. There are

unlimited opportunities for adventure, growth, renewal and change as long as we live.

Adult orphans

"I was driving up there the day after I heard and I just thought to myself, 'Well that's it, I'm an orphan now' and it was a very strange sensation of sadness and quiet."

The two-staged life transition

The death of one's parent involves a many-layered sense of grief, which is filtered through feelings towards, and sense of responsibility for, the surviving parent. The importance of the surviving parent's grief is regarded as more important than the adult child's. Grief for the deceased parent is not necessarily discussed with the surviving parent. Rather, support for and

concern about the surviving parent may override the adult child's own grief process.

Death of the second parent is felt differently by adult children because the parent-child relationship is totally lost on the death of the second parent. New information may be learned about both parents, and the second loss may trigger much reflection on the first parent's death, so that the adult child only grieves wholly on the second death. Ownership of grief now belongs to the adult child, whereas previously grief was experienced on behalf of, with and alongside the surviving parent. A life transition is felt as all these issues are considered.

The second and final parent loss may involve grief for both parents and not a grief which can be distinguished as a grief for one or either parent.

Sexuality and the widowed

by Dr. Margie Kennedy-Reeves

We never outgrow our need for closeness, intimacy and love.

Age is certainly no factor, physical limitation does not diminish the need, isolation will not dampen it, rejection cannot quell it, and the loss of our partner does not take it away. Therefore, it is safe to say that the loss of intimacy that occurs when a partner dies may herald the most dramatic social change of the survivor's lifetime. There is a wide range of normal reactions to the need for intimacy during the grieving process. However, so little is written on this sensitive subject that many fear their feelings are abnormal. By looking at some common reactions here, perhaps we can put some of those fears aside.

Countless times widows have told me how much they would like to have a male companion in their lives. As escort for dinner once in awhile, just a nice friend to talk to, "someone trustworthy, presentable and not too possessive," they say. Then hastily they add, "I'm not interested at all in another sexual relationship!" I usually tell them they have just described the need for another lady friend because the qualities they say they desire in male companionship are unrealistic.

Widows are often afraid to acknowledge their sexual needs. Some had a gratifying love life. Many did not. The latter may be secretly relieved that they are no longer sexually involved. Some women may feel inadequate because of limited sexual experience. They may have a poor self-image, a physical limitation, a fear of rejection, or a number of other reasons for denying this kind of interest. These are all valid reasons and may remain unchanged, for what we are dealing with is a very personal choice.

Men who are widowed have a different approach. They too would like to have a female companion; someone to cook a nice meal occasionally, someone who will listen to their loss-stories—which usually include endless recountings of what a good husband they had been, or what a beautiful, loving, perfect wife they had. Men rarely, if ever, claim to have no sexual interest while grieving. Some claim that the mere thought of a new sex partner creates some degree of performance anxiety. All believe it can be overcome with the 'right' partner. Both sexes admit to a varying degree of guilt when considering intimacy with someone new. This may seriously impair their ability to honestly identify needs and desires.

Guilt is a powerful emotion at any time but after the loss of a sexual partner, it may

manipulate our normal sexual responses in a crippling way. The idea of being disrespectful of the loved one's memory or the thought of cheating on the lost partner often retards the griever's ability to establish rewarding new relationships.

Ideally, I like to see the first social efforts of a newly grieving spouse revolve around the activities of a whole group. Learning how to re-socialize with other widowed persons is of great advantage because of the common bond they share. One doesn't need to fear that embarrassing emotions will surface; no explanations are needed because everyone has been there and fully understands. Once the bereaved individual begins to show outward signs of developing a new sense of self that includes being comfortable with the altered circumstances of his life, then he is ready to contribute to, as well as take from, the nurturing found in a serious relationship.

The most important thing one can do about sexuality after loss is to understand it in relation to the grief process. First, learn how to cope with all the new emotions that grief induces and how to assess your own needs. Learn to take responsibility for yourself, to overcome fear and to be alone comfortably before you become involved with another person. Not everyone wants or needs to be sexual after the loss of

recharge. They truly are the body's own best resources."

2. Why do women cry more than men? It is true that women cry more often than men. Dr. Frey and his colleagues worked with 331 volunteers, aged 18 to 75, asking them to keep a "tear diary" for 30 days. Women reported crying four to five times more than men during this period. The reason has more to do with body chemistry than cultural conditioning, states Dr. Frey. He notes that women have much higher serum prolactin levels than men. Prolactin is a hormone connected with the production of tears as well as breast milk. "Hormones may help regulate tear production and have something to do with crying frequency," Dr. Frey states.

Interestingly, studies show that there is no difference in crying patterns between boys and girls up to the age of puberty. "Then, between the ages of 12 and 18," says Dr. Frey, "women develop 60 percent higher levels of prolactin than men do, and they start crying nearly four times more often."

3. How often do people cry and why? People shed tears far more often than is realized. Thanks to Dr. Frey and the "tear diaries," the pattern emerges about how often and why we cry: Sadness accounts for 49 percent of tears; happiness for 21 percent; anger for 10 percent; sympathy, seven percent; anxiety, five percent; and fear, four percent. But these statistics do not tell the whole



story. Tears reflect a profound humanity. One man, a driven and successful executive, breaks into tears on the subway while reading about the debilitating poverty of a homeless mother with four children. A woman who is a high-powered attorney in Chicago weeps whenever she hears a Mozart concerto.

4. And if you can't cry? Since more and more research is giving credibility to the idea that good health is tightly connected to the shedding of tears, those who are unable to cry should look more closely to see if they are unconsciously blocking the flow of tears. The secret is to get in touch with your own deepest emotions.

For some this may mean therapy. One woman, normally a non-crier who grew up in a family where keeping a stiff upper lip was the rule, found herself crying deeply almost every time she met with her therapist. She said, "There were latent feelings all bottled up inside of me for years and years. After every teary session I felt better and better." However, most people will find

tears flowing when they experience a touching story or have thoughts of past sadness.

5. Should tears be controlled? The simple answer is "no." Very few people overreact and cry for the wrong reasons. Consider this father who rushed his daughter to the local hospital after she experienced a severe fall. Because the tears were pouring down his cheeks, the doctor slapped the father, ordering him to stop crying. Clearly, the person with the problem was the doctor, and not the father whose concern and care for his daughter manifested themselves in tears. The fact is that most people would do better to let go and have a good cry periodically. More and more scientists as well as therapists say it is unwise to make a habit of holding back tears.

Perhaps the best advice about tears comes from Charles Dickens, who has Mr. Bumble, in *Oliver Twist* declare that crying "opens the lungs, washes the countenance, exercises the eyes and softens the temper." *So cry away.*

Guilt

by Margaret H Gerner, M.S.W.

Few people escape some feelings of guilt when a loved one dies, whether the loved one died as a result of something totally outside of the griever's control, or the result of an accident in which the bereaved was directly involved. We seem to feel that somehow we could have prevented our loved one's death, whether, in reality, we could have prevented it or not. Guilt can create a considerable amount of difficulty for the grieving person, and if it is not resolved, it can prevent healthy resolution of grief.

There are various types of guilt. They are causation guilt, cultural guilt, moral guilt, survival guilt, and recovery guilt. While we label the different types, it is important to remember that rarely does one type of guilt present, as it is usually a combination of various types that create our guilt feelings.

Causal guilt is belief that something we did or did not do caused the death. Persons with this kind of guilt will say, "I should have insisted she see the doctor sooner," or "I should have seen that he was depressed."

Cultural guilt comes from cultural expectations. In our society a "good" wife sees that her husband takes proper care of his health. A "good" son or



daughter cares for and protects his/her aging parent. When the person who has died was a child or young adult, grieving parents are even more likely to feel this guilt because of the myth that, as parents, we should protect our children at all costs.

Moral guilt comes from fantasies related to sin and punishment. It is the idea that our loved one's death is a punishment for some sins that we have committed in our past. With this guilt you will hear, "I have tried to be a good person, why did this happen to me?" or "I know this is my punishment for..." While our religious faith may not actually state that we will be punished for our sins in this world, we assume that this is what is meant and see our loved one's death as our punishment.

Survival guilt is another type. Older bereaved people are especially susceptible to survival

guilt. They want to know why they are still living at 60 or 70 when a younger person is dead. They feel guilty that they have lived the number of years they have and have experienced much more of life than the deceased did. Bereaved grandparents are very likely to experience survival guilt.

The last type of guilt is **recovery guilt**. This sets in when we have a good day versus a not so painful day, or begin to recover. We think we are being disloyal to our loved one if we are not continuing to suffer.

Guilt can be **conscious** or **unconscious**. Unconscious guilt is the most difficult to deal with because we are not directly aware that we feel guilty. A manifestation of unconscious guilt can be seen in defensiveness at talk of the cause of the deceased's death. Frequently this is the case when the death occurred under circumstances such as a suicide or an accident

Loneliness and the widowed

by Dr. Margie Kennedy-Reeves

The word that I most frequently hear during grief therapy is loneliness. Many people can find various ways to overcome most of the hardships of early widowhood but a large percentage of individuals thrown into singleness by the loss of a mate tell me the loneliness they feel is often overwhelming. Not everyone experiences loneliness in the same way of course, just as not everyone feels love in the same way. Love means one thing to one person and is perceived differently by another. So it is with loneliness. The degree to which we feel lonely is likely to be the motivating force behind doing something about it.

Like every other difficulty that befalls us there are definite things we can do to combat loneliness. I encourage those who grieve to take control of their lives and to create new situations, activities and friends that are conducive to eliminating the negative aspects of aloneness.

With the loss of a spouse, it isn't just being alone that hurts. After all, each of you were alone at times during your married life. Some of you were even lonely during your marriage, but at least you had a sense of belonging. You had a place, a position, an identity



and your life had a plan. You had a partner, someone to eat with, to share ideas with, someone to fuss over, to help you make decisions. You felt accepted in social activities because you had a companion. You were part of a couple, you were protected. Much of what we experience in a state of loneliness is the loss of our identity. When our identity is so abruptly changed by the death of a partner, we feel disoriented, unreal, less than whole, often useless and without a purpose or hope for the future.

One of the first things I advise if you are feeling lonely is to identify that feeling to at least one other person. To do this, it is important to understand:

1. Why you feel lonely.
2. The difference between loneliness and aloneness.
3. The sense of identity loss.
4. The inner resources each of us possesses.

Once we have learned some of these basic premises and admitted out loud that we are lonely, much of the sting will be taken out of the feeling, much of the stigma connected with being alone will fade. It leaves us free to pursue ways of belonging again and the doors will begin to open to all manner of possibilities for growth. The second thing I advise is a strong involvement in helping others. The more concentrated your effort becomes and the more you give of yourself, the more strength you gather.

the house. This phenomenon has to do with the way our subconscious mind works. We have images of our loved one indelibly imprinted upon our minds. We have seen them in many familiar places or postures over a period of time and have heard their voice on countless occasions. Our subconscious mind is a very powerful force which has recorded everything we have ever experienced. Therefore, these 'glimpses into the past' occur when our mind replays familiar images.

Q: I could never admit this to anyone but I feel so relieved since my spouse died. How can this be?

A: Experiencing this feeling is not as unusual as you might think, but expressing it takes great courage. If the spouse had been ill for a long time or there was a great deal of pain at the last, the caregiver can become totally exhausted. Standing helplessly beside a sick bed watching your spouse's pain and suffering certainly promotes the need for a release of some kind. Of course, feelings of relief have other reasons. All marriages are not made in heaven. In many cases, death brings resolution to a problematic marriage. It is very often guilt-producing to admit this to anyone. We only feel good when we say nice, kind, flattering things about the deceased. When a survivor

doesn't feel that kindly about their late spouse, they usually keep it to themselves rather than risk being thought of as a 'bad' person. These folks are more likely to identify feeling relief. Even if you had the worst marriage in the world, when a spouse dies, one still grieves and will experience a period of adjustment before feeling better. Any major life change requires adaptation to some degree. The only way to recover from grief is to grieve.

Q: I promised him I wouldn't sell the house, but it is a huge financial burden to me now. What shall I do?

A: So many of us make death bed promises that we simply cannot keep. After all, how could we refuse this request. Later, if we find it necessary to 'break that promise,' the guilt comes flooding in. However, we must make decisions based on what is best for us at this time. To take a different direction in no way dishonors the memory of your spouse. In the long run you will be better off for having made decisions based on your needs rather than on a promise that is no longer binding.

Q: It has been several months since my wife died. I am beginning to feel pretty good again, I even laughed at something today but why do I feel so guilty?

A: There are many kinds of guilt. After working with grieving

people for a number of years, I believe guilt is synonymous with grief. Even for the people who did everything right—who said everything right—who managed to be there all of the time in the right ways for their spouse, they still find something to feel guilty about. This is why it seems that no matter what we do, guilt is connected with major losses. People say they wish they had been more loving, more open, and more expressive. They wish they had spent more time with their spouse, or related to them differently. Regardless of the reasons, I think it is helpful to know that we experience guilt even if there is not defined reason. There is a particular term referred to as 'survivor's guilt' which occurs because we are still alive, still able to work, still able to enjoy life, to be happy, and to experience things that our spouse cannot. Therefore, we feel guilty just for being alive. Guilt can be manifested in depression, in low self-esteem, and in reactive behavior. This type of remorse seems to be very much a part of our everyday review when thinking about our loved one. Guilt may be one of the strongest of human emotions, but it is a normal reaction for many who grieve.

involving the deceased's use of drugs or alcohol.

Projection is another way unconscious guilt can manifest itself. Projection is when we put the blame onto someone else rather than ourselves. We blame the doctor for not doing enough, instead of recognizing that we feel guilty that we didn't get our loved one to the doctor soon enough.

Unconscious guilt is not only difficult to rid ourselves of because we are not directly aware of it, but it is the most destructive. It may lead us to self-destructive behavior such as alcoholism or drug abuse, working until we drop, engaging in demeaning activities or work, or by constantly subjecting ourselves to the demands of others. These behaviors are a way of unconsciously saying, "I am guilty, therefore I am unworthy and should be punished."

To rid ourselves of guilt we must first be aware that we "feel" guilty. Then we must identify, as clearly as possible, just what it is we believe we are guilty of. The next step is to ask ourselves if the guilt is logical or not. A good way of doing this is to ask ourselves if we did our best with the information and resources we had available at the time.

Ask yourself specific questions about the death of your loved one. The questions may appear

ridiculous with their obvious answers, but the question will help us look at our guilt in its true light.

Another thing to consider when looking at our guilt is what was our intention when we made the decision or action that we did. Obviously we did not intend that the results would be as they were. The real value in examining our guilt in a logical way is that it gives us a different perspective from which to view our actions.

It takes time to resolve guilt, and one time of logical examination will not do it. It must be done over and over again. Talking with a nonjudgmental person about our guilt is helpful. Many times when we say our guilt out loud, we can hear the illogic of it all.

Writing out guilt feelings in a journal or letter to the deceased

helps many people. Imagine yourself talking directly to our loved one is another way to deal with guilt. And, some people find it is helpful to simply wallow in their guilt for a period of time until they tire of it.

A sudden death provides a better chance for guilt to develop since the death freezes the relationship. What is said or done at the last parting is crucial. We get "hooked" into guilt because we play over and over in our minds the bad parts of the scene, yet the scene is complete with both the good and bad parts.

For some bereaved individuals, asking for forgiveness from our loved one or God is the only answer. Most important is forgiving yourself. Confession may be helpful for those who are Catholic. For those of other



faiths, a talk with your clergy person may bring forgiveness. However you resolve your guilt, whether by looking at it logically or by seeking forgiveness, it is important that you make every attempt to know that you cannot live the rest of your life punishing yourself over something that cannot be changed. You have suffered enough.

Do nice people get angry?

Adapted with permission by Hospice at Home, Inc. Bereavement Program

THEY SURE DO! Angry feelings are a normal and healthy response to the death of a loved one. They are a sign that we have loved very deeply. Emotions such as anger are not right or wrong, they simply are. Anger is a part of us just as love and joy are. Life at times hurts and that hurt generates anger. We often see anger as the enemy, so we continue to deny it and the pressure continues to build. Many of us were inaccurately taught as children that it is not “nice” to be angry. It is best to recognize and express this anger rather than to deny or repress it.

If we don’t deal with our anger, if we don’t allow ourselves natural responses and outlets, then we accumulate the anger. We may forget about it in our brain but it accumulates in our gut. We slowly fill up like a reservoir. When we reach our

capacity, we begin to spill over internally by turning our anger against ourselves as depression, apathy, guilt, withdrawal or lost self-esteem. We may turn to excessive alcohol or drug abuse, smoking or eating. Anger may spill outwardly against other targets—our family, friends, co-workers. If we keep our anger inside or just below the surface, we may experience constant tension. Unexpressed anger does not dissipate, it merely hides until it emerges in another form. Unrecognized anger may be suppressed for years. So much energy is required to keep the lid on. It is very tiring. Anger and hate drain you of energy.

It is important to identify your anger and allow yourself to experience it. Because those who bottle up their rage often develop psychosomatic symptoms as well as experience a lack of energy. They may have chronic headaches, earaches, eye aches, sinus trouble, acne, arthritis, backaches, ulcers, colitis, constipation, high blood pressure and more.

Anger may be directed at OURSELVES. We are cross at ourselves that we are not handling our grief better or that we somehow were not able to prevent the death. Anger directed at ourselves is dangerous. Anger can be likened to a hurricane; when it is directed at us it can emotionally rip us to pieces.

It may also be directed at GOD. He can handle our anger. We get angry with people we love. We tell them how we feel. We don’t expect them to reject us for our words or to change something that can’t be changed. We want them to give us a hearing and to care about how we feel. Our purpose is to develop understanding and to clear the air. When we tell God how we feel, we feel better for His knowing just what we think on an issue. We might as well tell Him because He knows what we think anyway.

Our anger may be directed at OTHERS, the ambulance crew, the funeral director, a nurse, another family member or other “intact” families who have not had a loved one die. It is important to recognize such anger. We are not really angry at them. Often it is displaced anger.

For some people their anger may be directed at THE PERSON WHO HAS DIED. It is understandable that our loved one might receive some of our anger. You may feel as outraged as an abandoned child. You may feel “How could you die and leave me?” Since that seems unreasonable the very thought is suppressed.

It is healthy to express such anger but be sure that you are with someone who is understanding and accepting of your need to verbalize the full impact of your anger.

Various losses

Answers to questions most frequently asked by widows and widowers

by Dr. Margie Kennedy-Reeves

Q: How long should I keep my late spouse’s personal effects in the house?

A: The best advice I can offer is keep these things around you if they feel comforting. If they are disturbing you then it is time to dispose of them. There is no right or wrong way to handle this matter—just your way. Let this decision be yours alone and not be influenced by what others have done or by what the family wants you to do. Keeping your spouse’s things does not complicate the grief process except in very rare cases where a widowed spouse will endeavor to create a ‘shrine’ out of a certain room filled with the belongings of the late spouse. Listen to your own feelings about this and act upon them when it’s most comfortable.

Q: My adult children have been wonderful since my wife died, but now I feel like they’re smothering me. How do I ask them to give me some space?

A: The time comes to every grieving parent when taking charge of one’s own life becomes important and necessary. It is up to you to take the responsibility for setting up the guidelines to make this work. Sometimes when the adult children seem to be over solicitous, it is often related to the fact that they are suffering from the loss of their other parent and are worried that they could lose you, too. After you have reassured them a few times, you may notice their willingness to give you the time and space you need to work through your grief.

Q: Holidays are so painful for me. How will I ever bear facing his birthday, our anniversary or special days again?

A: Some days are going to be harder than others and some of the most difficult days will be those special days you used to share together. Many people

have found that the anticipation of holidays is worse than the days themselves. If we anticipate sadness, tears and other hurtful emotions, we may create something that doesn’t necessarily have to happen. One good way to help yourself through these days is by taking control of the situation and setting a game plan. The way to get one’s life back on track is to assume responsibility for our own behavior. For example, plan ahead for your special days, be specific about them and leave nothing to chance. Don’t count on others to plan these days for you—or even to remember how sad you feel. They may believe you prefer to be alone with your memories. Try to find a way to pay tribute to your loved one by honoring him in a special way. Let your special days work for you, instead of against you.

Q: My husband died three months ago. I could swear I saw him sitting in his favorite chair last night. I often experience his presence around me. Do you think I am losing my mind?

A: The answer is, of course, NO. There is a very good reason why people experience what may be thought of as hallucinations. Many people report hearing their loved one speak to them or call out their name. Often they see them in familiar places about

Grief, when it comes, is nothing we expect it to be.

— Joan Didion, *The Year of Magical Thinking*

One way to deal with discomfort at the funeral home is to ask for your own time to say good-bye. If you do not want to be alone, ask the funeral director, a pastor, a counselor, or a good friend to come with you. Do the crying you need to do, compose yourself, and then get as comfortable as possible with the body and the funeral setting so you can be available to your child. Try to spend some quiet time alone with your child, seeing the body and answering questions.

If your child is adamant about not attending the funeral, offer options to ensure that he or she has every chance to say good-bye and share feelings. Children who do not attend need to be cared for in a loving environment and not criticized for their decision. They need to be hugged a lot and encouraged to say their own good-byes in their own ways.

What is a child's greatest fear?

Even children who are not grieving are most afraid of being abandoned. When Katie's brother was very sick, Katie asked her mother if he was going to die. "We hope not, Katie," her mother replied. "But remember, even if he does, you and Daddy and I will still be a family. We'll be very sad for a while, but we'll be OK."

Bambi recently reappeared on movie screens. A local parent's group recommended that

children not see it because they would be frightened by the scene in which Bambi's mother dies. "A mother's death is what a child fears most," the group announced, "and this movie encourages that fear."

"Balderdash and nonsense!" I replied. "What a child fears most is abandonment, and Bambi's father moves in immediately, letting Bambi know that someone will care for him. Bambi is allowed to be sad, and his love for his mother is expressed." Children grieving the death of a loved one need to know they will not be left alone to fend for themselves.

What typical reactions might occur? In younger children you can probably expect some understandable regression. How many of us do not curl up in a fetal position when we crawl into a warm bed following a sadness? Now is the time for extra hugs, reassurance that sadness is normal, and confidence that grieving is something everyone does sooner or later.

Earl Grollman, in his excellent book, *Explaining Death to Children*, lists possible reactions for children six and up. These reactions also apply to adults.

- Denial: "If I pretend it didn't happen, I won't hurt so much."
- Bodily distress: "I can't breathe." "I can't sleep." "I can't do my homework."

- Anger at the deceased: "Didn't he love me enough to stay alive?"
- Guilt: "She got sick because I was naughty."
- Anger toward others: "It's the doctor's fault."
- Replacement: "Uncle Ben, do you really love me?"
- Taking on mannerisms of the deceased: "Do I look like Dad?"
- Idealization: "Don't say that about my Grandpa! He was perfect."
- Anxiety: "I feel like Grandma before she died. I hurt right here."
- Panic: "Who will take care of me? What if Mommy dies?"

As author Robert Kavanaugh notes, in helping our children deal with death and grief, "Volkswagens do the same job as Cadillacs." When given love, support, and simple answers to their questions, when aware that we are willing to walk with them and guide them in their grief, our children may surprise us with how well they understand death and grow through grief. It is up to us to take the black shroud off the death image and let some sunshine in.

— *Mothering Spring*



A more difficult type of anger to recognize is the GENERAL type of just plain being angry. You are not angry at anyone but angry that your loved one has died. You may be angry because you hurt so much.

Often our anger registers in our body language; tightening of facial muscles, flushed face, sweaty palms, stiff body posture, grinding teeth, piercing stare or scowl. It also may come out as sarcasm, a loud angry voice, insults that are masked by an overly sweet attitude, nagging, nit-picking, whining or sulking.

People vary in their expression of anger. Some people have a short fuse. Their anger may even become rage. They may carry their anger to dangerous extremes, some even seeking revenge. Others have great patience and are very slow

to anger. Some just let their anger smolder. Still others may be someplace in the middle or go from one extreme to another. It may be difficult for some people to even recognize, much less express their anger, while others find it easy to express.

Toward an understanding of the "Going Crazy Syndrome" Part One

by Alan D. Wolfelt, Ph.D.

In the beautiful book, *A Grief Observed*, C.S. Lewis wrote about his experience after the death of his wife. He stated, "An odd by-product of my loss is that I'm aware of being an embarrassment to everyone I meet...Perhaps the bereaved ought to be isolated in special

settlements like lepers."

As he so appropriately teaches from this experience, society often tends to make the bereaved feel intense shame and embarrassment about feelings of grief. I'm not surprised that the most often-asked question I get from bereaved persons is, "Am I crazy?"

Shame can be described as the feeling that something you are doing is bad. And you may feel that if you mourn, then you should be ashamed. If you are perceived as "doing well" with your grief, you are considered "strong" and "under control." The message is that the well-controlled person stays rational at all times.

Combined with this message is another one. Society erroneously implies that if you, as a bereaved person, openly express your feelings of grief, you are immature. If your feelings are fairly intense, you may be labeled "overly-emotional." If your feelings are extremely intense, you may even be referred to as "crazy" or a "pathological mourner."

This article is the first in a three-part series to address this frequent question, "Am I crazy?" I have provided information about the normalcy of the disorganization and confusion that often comes when we mourn the death of someone loved. In the follow-up article, I will address other aspects of grief and mourning, that unless



normalized, might make you think you are crazy.

Disorganization, confusion, searching, yearning

Perhaps the most isolating and frightening part of your grief journey is the sense of disorganization, confusion, searching and yearning that often comes with loss. These experiences frequently come when you begin to be confronted with the reality of the death. As one bereaved person said, “I felt as if I were a lonely traveler with no companion, and worse yet, no destination. I couldn’t find myself or anybody else.”

This dimension of grief may cause the “going crazy syndrome.” In grief, thoughts and behaviors are different from what you normally experience.

It’s only natural that you may know if your thoughts, feelings and behaviors are normal or abnormal. The experiences described below are common after the death of someone loved. A major goal of this article is to simply validate these experiences so you will know—**You are not crazy!**

After the death of someone loved, you may feel a sense of restlessness, agitation, impatience and ongoing confusion. It’s like being in the middle of a wild, rushing river where you can’t get a grasp on anything. Disconnected thoughts race through your mind, and strong emotions may be overwhelming.

You may express disorganization and confusion in your ability to complete any tasks. A project may get started but go

unfinished. Forgetfulness and low-work effectiveness are commonplace for many people experiencing this dimension of grief. Early morning and late at night are times when you may feel most disoriented and confused. These feelings are often accompanied by fatigue and lack of initiative. Everyday pleasures may not seem to matter anymore.

You may also experience a restless searching for the person who has died. Yearning and preoccupation with memories can leave you feeling drained. Yes, the work of mourning is draining. It leaves you feeling wiped out.

You might even experience a shift in perception; other people may begin to look like the person in your life who died. You might be at a shopping



magic marker on a red balloon. It said: “Dear Daddy, I love you very much. You are the best daddy in the whole cemetery. I will always love you.” She read the message aloud—to her father and the world—and then released the balloon into the sky.

Older children might like to keep a journal, write poems, or talk privately into a tape recorder. Any artwork, poetry, or tapes can be put into the casket or taken to the cemetery later and buried under the grass. After our 19-year-old daughter’s date was randomly murdered in a grocery store parking lot while she watched, she journaled every night. Two of her poems were later published.

Walking through grief together. Families who love together also grieve together. Here are some of the primary concerns that arise for parents wishing to “be there” for their children.

Should a child attend the funeral? Most of us who work with grief think so. While a child should never be forced to attend, he or she needs to know what will happen and how the family will be gathering to say good-bye. Children need to be part of events that are important to their families.

Viewing the body can be a tender learning experience and need not be frightening. At a recent funeral, I saw a mother bring her seven-year-old to his grandmother’s casket. She told him how the funeral director had carefully cleaned the body and filled it with a special fluid so it would always look this way. She talked about how easy it was to see that her body was not working. What was here was like a shell, a body that Great-Grandma had used and enjoyed.

He asked what his great-grandma’s body felt like, and his mother explained that it would feel cool and solid. He asked to be lifted up, and then gently rubbed his great-grandmother’s hand. He asked why the casket opened only at the top, and the funeral director came to explain the reason for this.

I watched as the little boy later came alone to stand beside his great-grandmother and then brought a cousin to see. He told his cousin exactly what his mother had told him, and they talked together. Their natural curiosity was encouraged, their questions were answered, and since their parents were comfortable, so were they. Death was not something to be feared, nor was a funeral something to be avoided.

At the same funeral, the mother of two boys, ages nine and 11, did not want to look at her grandmother. She said that the only funeral she had attended was that of a friend, she pictured her in the casket. She finally agreed to view her grandmother’s body, but only after her children had spent a long time sitting alone in a connecting lobby...and only after they had picked up on her apprehension. Later they came into the visitation room, stayed toward the back, and sneaked looks at the body when their mother was not watching. Then they disappeared with their father into another room where they could watch football on TV. They said they had no questions.

that God does not pull strings to keep us safe or deprive us of life, but rather provides loving support through all we face.

Share feelings. Tell your child how you feel. Even though children are people-readers and know how we feel, articulating the feelings sets an example and creates a bond. Sharing tears can also bring you close together; children need to know that it is all right for adults to cry too. A shared feeling is a feeling diminished. In the book, *Where's Jess?*, a child whose baby sibling has died says:

Sometimes when I talk about Jess, Mommy cries.

Sometimes I think my talking makes Mommy cry.

Mommy smiles. She says I don't have to be afraid of her tears.

I can talk about Jess any time I want to.

Don't make grieving a requirement. Rabbi Earl Grollman, who writes about children and death, tells a delightful story of a family concerned that their young son was not feeling sad when his grandfather died. Finally Rabbi Grollman was asked to talk to the boy. When he got to the heart of the matter, the youngster's feelings surfaced. "I only met him twice," the grandson said, "and both times he had bad breath."

Let your child say good-bye. A funeral is one way to do this. My most memorable funeral was when I was 16 years old.

It was memorable because I did not go. When I was five, I fell in love with Stevie Thomas, who was four. Stevie moved away the next year, and when he moved back I was 16. I recognized him in the high school hallway, and we talked with the tender awkwardness of those who share very young memories. The following summer, Steve tried to swim across a local lake. He never made it. He drowned. His funeral was held in the big church across the alley from my home, but never having been to a funeral, I assumed they were terrible and frightening and to be avoided at all costs. I was afraid I would cry, and I did not want anyone to see me crying. So while the service was going on, I put on my own swimsuit and washed my dad's car in the backyard, listening to the funeral music and letting my tears mix with water from the hose. For years, I regretted not going to the funeral, but I was young, and no one told me about saying good-bye. In his book, *Grief*, Ed Vining writes:

The visitation, as family and friends gather, is the social release of the body, the funeral is the spiritual release and the burial is the physical release.

Funerals need not be frightening. When my mother died last year, her remains sat with dignity on one of her best-made quilts. The music was an arrangement of her favorite hymns, and the sermon

was the story of her country life. Her scrapbooks, filled with napkins she had collected over 30 years, were displayed on lecterns so people could thumb through memories. At the end of the service, her two granddaughters passed through the congregation carrying a basket filled with carnations, enough for each person to be able to take one home. Each of her grandchildren had a chance to place some small memento in the casket, to be cremated with her. We used the funeral to say good-bye, and it became a rich and comforting memory.

Saying good-bye makes death less frightening and grief more acceptable. Children can say good-bye to someone they love in any number of ways. Would your child like to draw a picture to be placed in the casket? Or perhaps make a tape recording of personal memories? (A child can easily accept the idea that "Grandma cannot hear us like she used to, but talking to her will help us, and it is one way we can keep her memory alive.") Or maybe your child would like to write a message, slip it into a balloon, fill the balloon with helium, and release it at the cemetery.

A balloon good-bye, a frequent occurrence at children's funerals, fills the sky with bright colors. One eight-year-old girl stood on her father's grave a few weeks after he died and dictated a message to her mother, who wrote it with

mall, look down a hallway and think you see the person you loved so much. Or see a car go past that was like the person's who died and find yourself following the car. Sometimes you might hear the garage door open and the person entering the house as he or she had done so many times in the past. If these experiences are happening to you, remember—**You are not crazy!**

Visual hallucinations occur so frequently they cannot be considered abnormal. I personally prefer the term "memory picture" to hallucination. As part of your searching and yearning when you are bereaved, you may not only experience a sense of the dead person's presence, but you may also have fleeting glimpses of the person across a room. Again, remember those words—**You are not crazy!**

Other common experiences during this time include difficulties with eating and sleeping. You may experience a loss of appetite, or find yourself overeating. Even when you do eat, you may be unable to taste the food. Difficulty in going to sleep and early morning awakening also are common experiences associated with this dimension of grief.

You might find it helpful to remember that disorganization following loss always comes before any kind of re-orientation. Some people will try to have you bypass any kind of

disorganization or confusion. Remember—it simply cannot be done. While it may seem strange, keep in mind that your disorganization and confusion are actually stepping stones on your path toward healing.

Self-care guidelines

If disorganization, confusion, searching and yearning are, or have been, a part of your grief journey, don't worry about the normalcy of your experience. It is critically important to never forget those reassuring words—**You are not crazy!**

When you feel disoriented, talk to someone who will understand. To heal, grief must be shared outside of yourself. I hope you have at least one person whom you see who understands and will not judge you. That person must be patient and attentive for you may tell your story over and over again as you work to embrace your grief. He or she must be genuinely interested in understanding you. If you are trying to talk about your disorganization and confusion, and the person doesn't want to listen, find someone who will meet your needs better.

The thoughts, feelings and behaviors of this dimension do not come all at once. They are often experienced in a wave-like fashion. Hopefully, you will have someone to support you through each wave. You may need to talk and cry for long periods of

time. At other times, you may just need to be alone.

Don't try to interpret what you may not think and feel. Just experience it. Sometimes when you talk you may not think you make much sense. And you may not. But talking it out can still be self-clarifying at a level of experience you may not even be aware of.

During this time, discourage yourself from making any critical decisions like selling the house and moving to another community. Difficulty with making judgments comes naturally at this part of the grief experience, ill-timed decisions might result in more losses. Go slow and be patient with yourself.

Reference: Lewis, C.S., A Grief Observed. 1963. Seabury Press, New York, NY.

Toward an understanding of the "Going Crazy Syndrome" Part Two

by Alan D. Wolfelt, Ph.D.

As C.S. Lewis noted, "Grief is like a long, winding valley where any bend may reveal a totally new landscape." As you explore the terrain of your unique grief journey, you may ask yourself, "Am I crazy?" A vital part of healing in grief is understanding the normalcy of your experience.

This article is the second in a three-part series to address this frequent question, “Am I crazy?” In the first article information was provided about the normalcy of disorganization and confusion that often comes when we mourn the death of someone loved. In this article, I will address aspects of grief and mourning that unless normalized, might make you think you are crazy.

My intent is not to prescribe what should be happening to you. Instead, I encourage you to become familiar with what you may encounter while you grieve and do your work of mourning. A vital part of healing in grief is understanding the normalcy of your experience.

The potential aspects of your journey are as follows:

- Time distortion
- Obsessive review or ruminating
- Search for meaning
- Is this death God’s will?
- Transitional objects
- Suicidal thoughts
- Anniversary and holiday grief occasions

Time distortion

“I don’t know what day it is, let alone what time it is!” This kind of comment is not unusual when you are mourning. Sometimes, time moves so quickly; other times, it merely crawls. Your sense of past and future may also seem to be frozen in place. You may even

lose track of what day or month it is.

This normal experience of time distortion often plays a part in the “going crazy syndrome.” No, you are not crazy, but if you don’t know this is normal, you may think you are.

Obsessive review or ruminating

Obsessive review or ruminating are the psychological terms used for describing how you may repeat the circumstances about the death or stories about the person who has died. It’s “telling your story” over and over again. In your grief journey, you may often review events of the death and memories of the person who died over and over again. This normal process helps bring your head and your heart together! Allow yourself to do this. Blocking it out won’t help you heal. Don’t be angry with yourself if you can’t seem to stop wanting to repeat your story. Review or rumination is a powerful and necessary part of the hard work of mourning.

Yes, it hurts to constantly think and talk about the person you loved so much. But, remember—all grief wounds get worse before they get better. Be compassionate with yourself. Try to surround yourself with people who allow and encourage you to repeat whatever you need to tell again.

Search for meaning

Naturally, you try to make sense of why someone you love died.

You may find yourself asking questions like, “Why him or her?” “Why now?” or “Why this way?”

Yes, you have questions. You are simply trying to understand your experience. No, answers won’t always be, and often aren’t specific to your questions. Yet, you still need to give yourself permission to ask them.

As you wrestle with “Why?” you may be outraged at your God or Higher Power. You may feel a stagnation or disillusionment with your spiritual life as you embrace your pain. On the other hand, you may feel closer than ever before. You can only be where you are.

You may be able to come up with dozens of reasons why the person who died should not have died under these circumstances or at this time. Whatever the nature or number of questions, asking them is a normal part of your grief journey.

As you explore the meaning of this experience through your questions, be certain not to commit “spiritual suicide.” Do not prohibit yourself from asking the questions you know are within you. If you do, you may shut down your capacity to give and receive love during this vulnerable period in your life.

Be aware that people may try to tell you not to ask questions about your personal search for meaning in your grief journey. Or worse yet, watch out for people who always try to have

Use the words your child can understand. In the book *Tell Me, Papa*, a kindly grandfather explains death in a way that can be easily grasped:

When someone dies, everything inside of that person stops. The heart stops. The breathing stops. The thinking and the feelings stop.

When a person is dead, that person cannot think about things. They cannot feel any hurt. They cannot feel hot or cold. When we are dead, we do not have any life in our bodies anymore. What is left is just the body... like a peanut shell without the peanut. Like an apple peel with no apple. Like a school with no children.

Tell your child yourself. When someone your child cares about dies, it is important that you tell your child—simply and honestly. Let your child know early on that nothing is too frightening or too sad to talk about together. Children can face honesty with ease. Keep your statements simple and the details within grasp. For example, to a young child you might say, “I have some bad news. Grandma Elle died a few minutes ago. Remember how we went to see her when she was in bed? She was very old and very sick, and her body just stopped working.” Then wait for questions, and be prepared to be surprised.

Older children may see things differently than younger ones do. Sarah was the mother of six-year-old Cathy, who had leukemia. Cathy’s best friend Julie was also six and also had leukemia. The two girls met regularly at the cancer clinic, visited each other at home, and enjoyed overnights together. When Julie died unexpectedly, Sarah was tremendously concerned about Cathy’s reaction. She phoned the oncology nurse, drove to the hospital, and consulted on how to tell her daughter the news. The nurse took Cathy’s part as they role-played the telling. Sarah then drove home prepared to answer Cathy’s fears, her tears, and her grief.

She took Cathy on her lap and said, “Cathy, I have some really bad news. Julie got very sick yesterday. Her mom took her to the hospital, and the doctors and nurses tried to help her, but they couldn’t make her better. Cathy, Julie died last night.”

Cathy looked at her mother for a minute. “Gee,” she said. “What did they do with her toys?”

“I hadn’t planned on *that* question,” replied Sarah, hugging her daughter.

Different children react to death in different ways. They may pretend they do not care or act as though a death has not affected them. Usually this means they are overwhelmed and need time to let their feelings separate inside.

You can support this process by letting your child know that everyone grieves in his or her own way, that it is OK to cry and OK to play, that feelings need to be talked out, you will be there.

Encourage questions. Children need to know that their questions are valid and welcome. Do not expect all the questions to come at once, but do realize that inviting them can reduce your child’s anxiety. **Very young children, up to age five, cannot understand that death is permanent.** To them, people go away and people come back. Three-year-old Heather, whose baby sister died of SIDS, drew many pictures and mailed them to her sister. This was her way of gently letting go.

Children between the ages of six and nine often think of death as a person. A comment such as “God took her” can sound to the child as though God were a person-snatcher, an agent of death. If your child is within this age range and you do not wish to personify God in this way, now is the time to let your child know God does not snatch people. One mother said, “Betsy, I heard Uncle Gene say that God took Grandma. We think Grandma died and then God came to take care of her and take her to heaven.” If you are a family of faith, it is important to share your beliefs with your children. Let them know, if only to avoid misconceptions at this age,

Children's grief

Guiding children through grief

by Joy Johnson

Lori's grandfather was dying, 10-year-old Lori had visited him every week since he became ill, and her mother had spoken with her about his illness and the possibility of death. As death approached, Lori's mother began making a list of things to do. "I want to put down everything we need to do if grandpa dies," she told her daughter. "Mom, grandpa's dying isn't an *if*... it's a *when*," Lori answered, with the unique wisdom of childhood.

Death is never an *if*: it's always a *when*. And the *when* of death will touch all children at some time in their lives, bringing with it the grief that accompanies loss. Grief is not a pathological illness; it is a part of the human condition. We all grieve. We all die.

Yet, educating our children about death and guiding them through grief are avoided in our society. Because we are uncomfortable with the subject, we "protect" our children from what may well be the single most important learning experience of their lives. In shielding them, we deny them the richness and openness that is unique to this

occasion and also deny them the opportunity to express honest feelings. We fail to recognize that by teaching our children about death and grief, we also teach them about life and joy.

When death touches

A chaplain working with pregnant teens found that 90 percent of the girls had experienced a serious grief the year prior to their pregnancy. Some grief was death related, and some was related to the loss of opportunity (being kicked out of school) or the loss of a love relationship. He also found that the girls had few coping skills, little previous contact with death or grief, and parental directives not to discuss their feelings. He concluded that rather than discuss their feelings of grief, they acted them out! Another chaplain, working with young male felons, discovered 90 percent of the boys incarcerated for the first time had experienced a serious grief the year prior to their arrest. Their anger appeared to reflect their suppressed feelings of grief. Although children deal with grief in their own ways, guiding them from the start may be more important than we imagine.

When death occurs in the family or close by, children draw on their earlier coping skills. Loss and sadness are familiar childhood experiences. Separation fear, one of the dominant feelings expressed when someone in the family dies, is something nearly all infants know by a few months of age; and by two, children are well sensitized to feelings of sadness and measures of comfort. These are the cues children draw on when faced with death at a later age. Our choices as parents are to stand by silently or participate in the process. By participating, we can create a new learning experience. We can reinforce the healthy coping skills, introduce new ones, and help our children externalize and deal with the deep feelings that accompany loss.

Say it like it is. When talking about death with your child, it is best to talk about death and not about "passing away," "being asleep," or being "gone" or "lost." When flowers wilt, we do not say that flowers have passed away; we say they have died. People and flowers and the family pet all die. Once we get used to saying the word, it becomes less frightening.

easy answers to your difficult questions. Most bereaved people do not find comfort in pat responses; neither will you. The healing occurs in posing the questions in the first place, not just in finding answers.

Find a friend, group, or counselor who will understand your need to search for meaning and be supportive without attempting to offer answers. Companionship and responsive listening can help you explore your religious and spiritual values, question your philosophy of life, and renew your resources for living!

Is this death God's will?

Closely related to the search for meaning is the commonly asked question, "Is this death God's will?" If you have a perception of an all-powerful God or Higher Power, you probably find this question particularly difficult.

Sometimes you may reason, "God loves me, so why take this most precious person from me?" Or you may have been told, "It is God's will, and you should just accept it and go on." If you, however, internalize this message, you may repress your grief and ignore your human need to mourn.

Repressing your grief because you need to "just accept it and go on," can be self-destructive. If you don't ask questions and if you don't express feelings, you may ultimately drown in despair. If your soul does not ask, your

body will probably protest. Repressing and denying heart-felt questions can, and often does, keep your wounds from healing. Listen to your questions!

Transitional objects

Transitional objects are belongings of the person in your life who died. They often can give you comfort. Objects such as clothing, books, or prized possessions, can help you feel close to someone you miss so much.

For example, during my counseling with a bereaved woman, she shared with me that she found it comforting to take one of her husband's favorite shirts to bed with her. She said, "As I clutched his shirt close to me, I didn't feel so alone. But as I worked with my grief, my need for the shirt dwindled over time."

Some people may try to distance you from belongings such as the shirt described above. This behavior fits with the tendency in our culture to move away from grief instead of toward it.

Remember—embrace the comfort provided by familiar objects. To do away with them too soon takes away a sense of security these belongings provide. Once you have moved toward reconciliation, you will probably be better able to decide what to do with them. Some things, however, you may want to keep forever. That's all right, too. Simply giving away the belongings of the person you loved does not equate with healing in your grief.

Nor does keeping some belongings mean you have "created a shrine." This phrase is used when someone keeps





everything just as it was for years after the death. Creating a shrine, however, only prevents acknowledging the painful new reality that someone you loved has died. Understanding the difference between transitional objects and creating a shrine is important. The former helps you heal; the latter does not.

Suicidal thoughts

Thoughts that come and go about questioning if you want to go on living can be a normal part of your grief and mourning. You might say or think, "I'm not sure I'd mind it if I didn't wake up in the morning." Often this thought is not so much an active wish to kill yourself as it is a wish to ease your pain.

To have these thoughts is normal; however to make plans

and take action to end your life is abnormal. Sometimes your body, mind and spirit can hurt so much you wonder if you will ever feel alive again. Just remember that in accomplishing the hard work you will find continued meaning in your life. Let yourself be helped as you have hope for your healing.

If thoughts of suicide take on planning and structure, make certain that you get help immediately. Sometimes tunnel vision can prevent you from seeing choices. Please choose to go on living as you honor the memory of the person in your life who has died.

Anniversary and holiday occasions

Naturally, anniversary and holiday occasions can bring

about "pangs" of grief. Birthdays, wedding dates, holidays such as Easter, Thanksgiving, Hanukkah, Christmas, and other special occasions create a heightened sense of loss. At these times you may likely experience a grief attack or memory embrace.

Your "pangs" of grief may also occur in response to circumstances that bring about reminders of the painful absence of someone in your life. For many families, certain times have special meaning related to family togetherness, and the person who died is more deeply missed at those times. For example, the beginning of Spring, the first snowfall, an annual Fourth of July party, or anytime when activities were shared as a couple or a family.

I subscribe to Shakespeare's statement, "To thine own self be true." I've tried to learn to trust my "gut" feelings. Someone described it as "listening to the voice from within." Others call it instinct or intuition. I strive for a balance in which my mental, physical, emotional and spiritual needs are in harmony.

Recently, I attended a concert at Christ The King Parish. The entertainer was a 26-year-old Tony Melendez, a "Thalidomide baby," born without arms. He composes his own words and music and when he sings, he selects tones and strums his guitar with the toes of both of his feet. His philosophical message is one of understanding, love and acceptance. Needless to say, I left that holy place counting my blessings and feeling inspired to continue to work through my grief.

Four rituals have had an important part in progress in recovering from grief:

1. The traditional memorial service in our church following my wife's death.
2. Scattering my wife's ashes, in accordance with her wishes, on a special ocean beach where we had walked together many times before.

3. A candlelight memorial service at St. George's Episcopal Church, announcing the names of deceased loved ones, with music, singing, meditation, inspirational talks and readings.

4. A ritual that came about as the result of an almost "unreal" chance meeting with a young man I have since referred to as "The Stranger from Arkansas." At his suggestion, once a week for four months, I cast three flowers from the shoreline onto Green Lake while saying the words, "Peace, Joy and Love." Then I cast three more flowers onto the lake as I pictured my wife's face and said the words, "I love you." I thought about our good life together, and as the six flowers floated away, I visualized "letting go" and releasing my wife's spirit from the boundaries of planet Earth to live again in Heaven, in a new healthy body, free of pain and suffering.

Accepting the reality of my wife's death and learning to adjust to the changes in my life has been a difficult challenge for me. But a few months ago, I began to feel like a whole person again, and now I can see light at the end of the tunnel. I wonder, if our loved ones could communicate with us, would they recall the words of a popular song: "Ah! Sweet mystery of life at last I've found thee!"

Grief is Healed

Grief is healed...

When we are able to courageously stand in it and not run.

When we are able to name it and start to know its comings and goings.

When we are able to slow down our pace and find a place to experience our pain within.

When we are able to be in our body.

When we are able to accept it as a temporary visitor and not think that we are that grief.

When we are able to make an agreement with the part of ourselves that is the mask self, in order to access our pain.

When we can discriminate between the pain of grief and the pain of pain.

— from *Swallowed by a Snake: The Gift of the Masculine Side of Healing* by Thomas R. Golden

Men in grief

Determined to survive!

by Richard E. Benham

My dad died when I was 28 years old. My daughter died in 1980. In February 1987, my wife of 46 years died. She was also my best friend.

What can we do to cope with the death of a loved one? One of the most significant things I did was to begin attending support group meetings. Because of the death of a loved one, we share a devastating sorrow, pain and loneliness, and we are all “kindred souls.” We have found that we can receive support and understanding from each other.

My principal support network has consisted of friends and relatives who live reasonably nearby. They have invited me for meals, overnight visits, family celebrations, and have kept in touch by telephone and mail.

I discarded the so-called “macho image” and gave myself permission to cry when I felt the need. Instead of choking back the tears, I allowed crying to serve as a safety valve to release stress and pent-up emotions. I always felt better afterwards.

I have tried to avoid destructive behavior such as insufficient rest, improper diet or too much alcohol.

I am determined to maintain a positive attitude. Medical evidence is mounting to indicate that the way we think affects our body functions. Doctors say that laughing eases muscular tension and increases oxygen in the blood. So I’ve been learning to laugh again by watching humorous TV shows such as “Bill Cosby,” “Cheers,” “Growing Pains,” “Who’s the Boss” and “Mr. Belvedere.” Medical authorities claim there is no record of anyone who ever died laughing.

Listening to KSEA stereo several times a day provides relaxing background music while I’m reading, doing housework or preparing meals.

Studying the literature provided by support groups has helped me to learn a lot about coping, and I have been healed by reading Billy Graham’s book, “Facing Death and the Life After” and Lon Elmer’s book, “Why Her, Why Now?”

Every morning, I exercise, including calisthenics, a home cycle and a rowing machine. I also play golf several times a week, year round, and walk at interesting places like

Green Lake, Discovery Park, Myrtle Edwards and Elliot Bay Parks on the Seattle waterfront and Magnuson Park and NOAA facility on Lake Washington.

Wherever I am, I try to notice and appreciate the beauty of nature: the song of a bird, the babble of a brook, the snow-capped mountains at sunrise, sunbeams dancing over the waves on a shimmering lake, the ocean beach at sunset, the beauty of a full moon and twinkling stars on a clear night.

About seven months after my wife’s death, I suddenly became very depressed. I was very frightened when I realized that I was questioning whether my life was worth living anymore. When I fell on my knees and prayed for help, negative thoughts were replaced with positive thoughts. In my heart I knew that my wife would want me to go on living and try to make a new life for myself. I knew my family and friends cared for me, and that there is a big, beautiful world out there to be enjoyed. I made a determination to be a survivor.

If you believe in a higher power, I recommend daily prayer. For me, prayer reinforces my hope and faith in the future and gives me “peace of mind” and a feeling of well-being.

Perhaps the most important thing to remember is that these reactions are natural. Sometimes the anticipation of an anniversary or holiday actually turns out to be worse than the day itself.

Interestingly enough, sometimes your internal clock will alert you to an anniversary date you may have forgotten. If you notice you are feeling down or experiencing “pangs” of grief, you may be having an anniversary response. Keep in mind that it is normal. Plan ahead when you know some naturally painful times are coming for you. Unfortunately, some bereaved people will not mention anniversaries, holidays, or special occasions to anyone. As a result, they suffer in silence, and their feelings of isolation increase. Don’t let this happen to you. Recognize you will need support and map out how to get it!

The aspects of grief outlined above are in no way an all-inclusive list of potential experiences that might relate to the question, “Am I crazy?” However, my hope is that this information helps you better understand the normalcy of your unique journey into grief. In the final article in the series, I will explore Grief attacks or memory embraces, Sudden changes in mood, Identification symptoms of physical illness, Powerlessness and helplessness, Dreams, Mystical experiences and Self-focus.

Reference: Lewis, C.S. *A Grief Observed*, 1963, Seabury Press, New York, NY.

Toward an understanding of the “Going Crazy Syndrome” Part Three

by Alan D. Wolfelt, Ph.D.

This is the final article in a three-part series to address the frequent question, “Am I crazy?” As previously noted, my intent is not to prescribe what should be happening to you. Instead, I encourage you to become familiar with what you may encounter as you grieve and do your work of mourning.

The potential aspects of your journey are as follows:

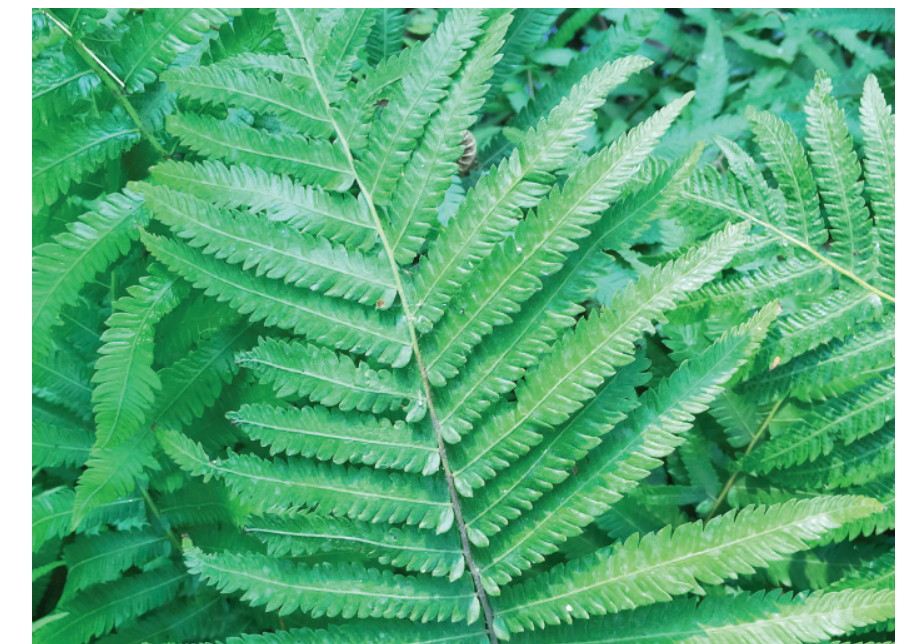
- Grief attacks or memory embraces
- Sudden changes in mood
- Identification symptoms of physical illness

- Powerlessness and helplessness
- Dreams
- Mystical experiences
- Self-focus

Grief attacks or memory embraces

“I was just sailing along feeling pretty good, when out of nowhere came this overwhelming feeling of grief.” This comment often reflects what is commonly called a “grief attack.” Another term I use for this experience is a “memory embrace.” A grief attack or memory embrace is a period of time when you may have intense anxiety and sharp pain.

You may think that long periods of deep depression are the most common part of grief and mourning. Actually, you may more frequently encounter acute and episodic “pangs” or “spasms” of grief. That’s why



they are called grief attacks. They sometimes “attack” you out of nowhere.

You may feel an overwhelming sense of missing the person you loved and find yourself openly crying, or perhaps even sobbing. As one woman reflected, “I’ll be busy for awhile, and sometimes even forget he has died. Then I’ll see his picture or think of his favorite food, and I’ll just feel like I can’t even move.”

Grief attacks are normal. When and if one strikes you, be compassionate with yourself. You have every right to miss the person who has died and to feel temporary paralysis. Whatever you do, don’t try to deny a grief attack when you experience it. It is probably more powerful than you are.

I like to think of grief attacks as a reflection of how those we love are determined not to be forgotten. Although the pain of a grief attack hurts so deeply, embrace it, or you can risk emotional, spiritual and physical paralysis.

Sudden changes in mood

When someone loved dies, you may feel like you are surviving fairly well one minute and in the depths of despair the next. Sudden changes in your mood are a difficult, yet natural, part of your grief journey. These can be triggered by driving past a familiar place, a song, an insensitive comment, or even changes in the weather.

Mood changes cause confusion because your inappropriate self-expectation may be that you should follow a pattern of continually doing better. You probably also have some people around you who share this expectation. Attack this inappropriate expectation and be self-nurturing as you embrace the ebbs and flows of mood changes.

If you have these ups and downs, don’t be hard on yourself. Be patient with yourself. As you do the work of mourning and move toward healing, the periods of hopelessness will be replaced by periods of hopefulness. During these times, you can also benefit from a support system that understands these mood changes are normal.

Identification symptoms of physical illness

When you care deeply about someone and they die, you sometimes develop ways to identify with and feel close to that person who has died. For example, if she died from a brain tumor you may have more frequent headaches. If he died from a heart attack, you may have chest pains. Of course, to check for organic problems is important, but you also should be aware that you might be experiencing identification symptoms of physical illness. Bereaved people have shared with me these examples: “She had awful

pain in her stomach, and after she died I began to have them, too. It kind of made me feel close to her. After awhile the stomach pain went away and I felt some sense of loss. As I have healed, I’ve been able to let go of the stomach pain.” I loved him so much. After he died, I wanted to be just like him. One of the ways I did it was to be dizzy just like he used to be all the time.”

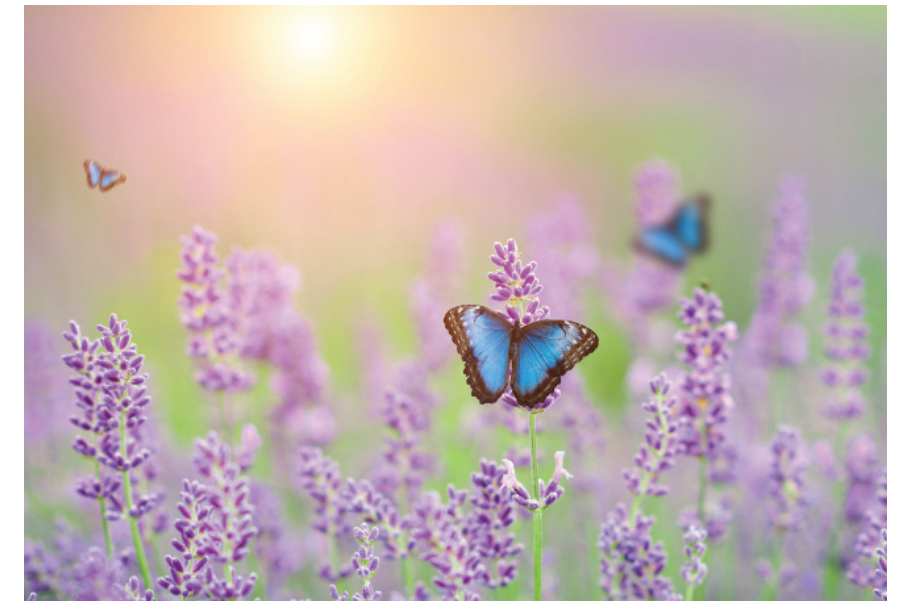
Don’t be shocked if you have a few physical symptoms like the person who died. Your body is responding to the loss. As you do the hard work of mourning, however, these symptoms should go away. If not, find someone who will listen to you and help you understand what is happening. Also, not everyone will experience these symptoms, and you may be one of those people. Of course, whenever you have questions or concerns about physical symptoms, it is wise to consult a trusted physician.

Powerlessness and helplessness

Although often ignored, your grief can at times leave you feeling powerless. You may think or say, “What am I going to do? I feel so completely helpless.” While part of you realizes you had no control over what happened, another part feels a sense of powerlessness at not having been able to prevent it. You would like to have your life back to the way it was, but you can’t.

experience by creating a bridge between the concrete and symbolic, between the conscious and unconscious, between the participant and the community, between the world of the living and that of the dead. A side effect of rituals is that they evoke a special mood or a sense of the sacred, which in turn can reduce anxiety and help to create a feeling of security. One reason rituals heal is that they encourage optimism and reduce depression and anxiety. Rituals may help the bereaved to be less analytical and be more in touch with their feelings or even become aware of feelings that they were not conscious of before the ritual.

- Symbolic objects meaningful to the bereaved, such as photos and mementos of the person who died, seem to play a particularly important role in grief rituals. Music, prayers and poetry are often used to externalize one’s feelings.
- Rituals that commemorate a special date may be an effective way to get in touch with, or come to terms with, the intense feelings associated with anniversaries and holidays.
- The vulnerability that a mourner may feel during a time of chaotic feelings and events may be eased somewhat by a sense of safety provided by the structure and order of ritual.
- Healing is not a passive process, but an active one. Rituals encourage the bereaved person to take action, particularly in preparation for the ritual.
- Two practices found most helpful in coping with grief were remembering good things about the person who died, and talking about the death.
- Rituals can help to reconfirm social ties and remind the bereaved that they are not alone even though they are mourning.
- Some families perform “hidden” rituals such as displaying photographs and mementos of the person, reminiscing with others about the person, visiting places that were important to the person, and doing things that were significant to the person. Rituals are typically designed to activate memories of the person who died and thereby help the survivor develop a different relationship to the loved one.



Grief rituals may help people make room in their lives for a relationship with grief, to learn and grow from that relationship, and perhaps, to be transformed and healed.

From “Grief Rituals: Aspects that Facilitate Adjustment to Bereavement”, by Jason Castle and William L. Phillips. Journal of Loss and Trauma, 2003.

**I walked a mile with
Pleasure; She chattered
all the way,
But left me none the wiser.
For all she had to say.
I walked a mile with Sorrow;
And ne’er a word said she;
But oh, the things I learned
from her, When Sorrow
walked with me!**

— Robert Browning Hamilton

Returning to “Normal”

What’s “normal”? Normal is different for you than for your friends because of what you have experienced. Death has a way of changing people, often making them stronger and wiser. Your sense of “normal” will change as you pass through the grieving experience, and it will be different from month to month.

Although your thoughts may be different from some of your friends, they may be normal for someone who is grieving. You may find yourself angrier or more irritable. You may worry more about money than others do. You may find you cry more easily or feel like being alone more often.

These emotions can catch you off-guard. You may be out shopping, catch a glimpse of someone who looks like your loved one, and feel like running away. Or you may hear a certain song that brings back strong memories for you. Returning to church may bring back many memories, including memories of the funeral. Anything can be a trigger and set you off crying, feeling confused, or feeling like you need to run. Know that this is a common part of grief. Take a couple deep breaths, cry if you need to, step out for a moment or two, or do whatever you need to do to center yourself. These feelings are real, and it is important to acknowledge that they are there.

You may find it difficult going back to work, back to your regular activities, back to social get-togethers, or back to church. Sometimes people don’t know what to say to you, so they avoid you. Sometimes friends or family members will say things to you that hurt you. Of course, in most cases, they don’t mean any harm; they simply don’t know the right thing to say. As you deal with these painful experiences, you will become stronger, and each step of the pain will lead you through grieving and back to life.

We really need each other; that is the way we are made. In the midst of your loss and your pain, may you discover again a sense of community.

Grief rituals

Grief rituals are defined here as rituals related to the death of a loved one, specifically those performed after the funeral or memorial service. Such rituals are intended to honor not only the loved one, but also one’s relationship to the loved one. Grief rituals may be as simple as visiting a grave site or as complex as a communal celebration. Other examples include displaying photos of the person, burning candles, reading or writing poetry, singing or playing special songs, reminiscing during a special meal, saying prayers and visiting places that were special to the person.

Humans have been performing rituals for over 100,000 years. The goal of ritual is to transform

**The earth called to my friend and he went,
Deep into the Earth Root from which he came,
Down into Blue Lake where our ancestors dwell,
Deep into the heart of the Yellow Corn Maiden,
To a place of beauty and light.**

**I watched the sky for a long time and then I saw
A cloud in the shape of my friend,
Riding a fine white horse with wings so big
They blotted out the sun, making shadows
Across my withered fields of corn.**

**I called to my friend to ask if he was happy
And if he knew more than when he left.
I called out his name and blessed him
With an eagle feather, dancing in his behalf,
The wild old dances of our youth**

**Good-bye, my friend, I said, watching the clouds
Crumble into little pillows that fell as rain
Into the dryness of my fields.**

— Poem from “Spirit Walker”



You may think, hope, wish and pray the death could be reversed, but feel powerless to do anything about it.

Also, you may wonder if you would have somehow acted differently or been more assertive, you could have prevented the death. Your “if onlys” and “what ifs” are often expressions of wishing you could have been more powerful or control something you could not. Lack of control is a difficult reality to accept. Yet, it is a reality that over time and through the work of mourning you must encounter. These feelings of helplessness and powerlessness in the face

of this painful reality are normal and natural.

Almost paradoxically, by acknowledging and allowing for temporary feelings of helplessness, you ultimately become helpful to yourself. When you try to “stay strong” you often get yourself into trouble. Share your feelings with caring people around you.

Dreams

Dreaming about the person in your life who has died may be a part of your grief journey. If it is, remember no one is a better expert than you are in understanding what your dreams mean to you.

Dreams are one of the ways the work of mourning takes place. They may or may not play an important part in your experience. A dream, for example, may reflect a searching for the person who has died. Dreams also provide opportunities—to feel close to someone loved who died, to embrace the reality of the death, to gently confront the depth of the loss, to renew memories, or to develop a new self-identity. Dreams may also help you search for meaning in life and death or explore unfinished business. Finally, dreams can show you hope for the future.



The content of your dreams often reflects changes in your experience with mourning. So if dreams are part of your journey, make use of them to better understand where you have been, where you are, and where you are going. Also, find a skilled listener who won't interpret your dreams for you, but who will listen with you!

On the other hand, you may experience nightmares, particularly after traumatic, violent deaths. These dreams can be very frightening. If your dreams are distressing, talk about them to someone who can support and understand you.

Mystical experiences

When someone loved dies, you may possibly have experiences that are not always rationally

explainable. However, that doesn't mean something is wrong with these experiences. The sad reality is if you share these experiences with others, you may be considered "mentally ill." In fact, you are actually mystically sensitive.

The primary form of mystical experience that bereaved people have taught me about is communicating with the person who died. Some people find the experience hard to believe and try to explain it away in a rational manner: "I must have been dreaming," or "I was probably half-asleep." Others try to distance themselves from the experience because they are taught that such things are impossible: "A rational mind just doesn't experience those kinds of things." So, if you

want to be considered "rational" or "sane," what would make sense is for you to feel compelled to distance yourself from this kind of "irrational" experience.

Types of mystical experiences vary. In Alabama, for example, a mother, whose daughter had died, woke up one summer morning and looked out the window and saw it snowing in her yard only. The snow lasted for 15 minutes and then stopped. The mother understood this as a communication telling her that her daughter was all right and not to worry so much. In another instance, a man whose wife had died, saw her lying on the couch in his living room. "It's like she came to me, and wrapped me in her arms,

Write a letter

Try writing a letter to the person who died. You may want to tell that person how much you miss her or him, how angry you are, or how you wish that she or he could be at your next activity. You may want to thank her or him or say you're sorry. Include whatever you want to say.

This can be your good-bye letter.

Dear _____,



Engaging your grief

Your life has been changed forever. This is a reality that takes time to absorb fully. Those who are grieving often feel emotional and social isolation, anger, and loss of vigor for life. Try not to be too hard on yourself.

One exercise you can do to connect with some of the life, energy, and the resources of the relationship that you had with your loved one is to close your eyes and, instead of seeing the person who died as small and distant, see the person life-size. Instead of seeing your loved one far away, see (her/him) close beside you. Instead of seeing your loved one being still, see (her/him) moving.

You cannot replace the person you loved, but you can preserve the benefits and the qualities of the relationship. Maybe there was warmth, intimacy and deep friendship. Maybe there was intelligence, humor and liveliness. Maybe you appreciate yourself more because of your relationship. Whatever it is, take those qualities and values that were present in your relationship in the past and imagine what form those values and qualities might take in your future, as they continue to live in you. You may want to try writing a letter to the person who died answering the following questions:

- What qualities do I miss most about you?
- What will I miss about our relationship?

- What do I wish I hadn't said?
- What do I wish I would have said?
- What do I wish I would not have done?
- What do I wish I would have done?
- What is the hardest thing I have to deal with?
- What is one special memory I have of you?
- What are some ways you will continue to live on in me?

We hope these suggestions will be helpful for you and allow you to feel the love of the person who died.

I felt warm and happy... and I experienced her presence.”

I have listened and learned from hundreds of people who have experienced seeing, hearing, and feeling the presence of someone who has died. I am a scientist and supposed to be “rational.” I can only tell you to remain open to experiences in this realm. Don't judge yourself or others who have these mystical experiences. Or if you don't have any mystical experiences, don't think that something is wrong with you.

Self-focus

The very nature of your grief requires a self-focus or a turning inward. This temporary self-focus is necessary for your long-term survival. Turning inward helps you feel protected from an outside world that may be frightening right now.

Some people may try to “take your grief away from you” by preventing you from any kind of self-focus. They may want you to quickly re-enter the outside world without understanding your need for a temporary retreat. If turning inward is part of your experience, be assured you are normal.

The word TEMPORARY in relationship to this self-focus, is important. You may move back and forth between needing time alone and time with other people. Be aware, however, if you stay only in a self-focused,

inward mode, you may risk development of a pattern of not sharing your grief. As you well know by now, not sharing your grief will stunt your healing process.

When you are in pain following the death of someone loved, the turning inward and the need for self-focus is analogous to what occurs when you have a physical wound. You cover a physical wound with a bandage for a period of time. Then you expose the wound to the open air which contains healing properties as well as contaminants. The emotional, physical and spiritual pain of grief certainly demands the same kind of respect.



A final word

The aspects of grief outlined above are in no way an all-inclusive list of potential experiences that might relate to the question “Am I crazy?” However, my hope is that this information helps you better understand the normalcy of your unique journey into grief.

Caring for yourself as you grieve

Suggestions for helping yourself through grief

Treating yourself with care and affection is important in your journey through grief.

Below is a list of suggestions which may be helpful to you.

Be gentle with yourself

Don't rush. Don't take on new responsibilities.

Be patient—healing takes time. Don't have unrealistic expectations.

Accept your feelings You have been touched by the loss of someone close to you. Allow yourself to feel the emotions that arise. It's OK to feel angry. It's OK to cry or feel depressed.

It's OK to feel a sense of relief about the death. These feelings are natural parts of grief.

Identify your support system

Finding people who can support you can be a comfort. Calling upon them (family, friends, support group, clergy or therapist) is a step toward caring for yourself. Reading about grief can help you identify what you are experiencing.

Listen to your feelings. They tell you when you need to take care of yourself, like finding a friend if you feel lonely, crying if you feel sad, singing and smiling if you feel happy, and acting frisky if you feel good.
— Pat Palmer



Making a memory book

It may help you to create a “memory book” honoring the loved one you’ve lost. Answer the questions in the spaces provided, or make your own special book by writing your answers out on sheets of paper and then stapling them together or placing them in a folder. If you make a memory book, you may want to include photos or other things.

What is the full name of the person who died?

Where was the person born?

When was the person born?

How old was the person at death?

What was the person’s favorite color?

What was your favorite thing to do with the person?

I like the way the person used to

I will think about this person when

Spirituality

Blest are the sorrowing: They shall be consoled

And what does it mean to mourn?
I asked the multitude.
And an old man stepped forward.
To mourn, he said, is to be given a second heart.
It is to care so deeply
that you show your ache in person.
To mourn is to be unashamed of tears.
It is to be healed
and broken
and built-up
all in the same moment.
Blessed are you if you can minister to others
with a heart that feels
with a heart that hurts
with a heart that loves
and blessed are you if you can minister to others
with a heart that serves
and a heart that sees the need before it's spoken.

To mourn is to forget yourself for a moment
and get lost
in someone else's pain
and then,
to find yourself
in the very act of getting lost.
To mourn is to be an expert
in the miracle
of being careful with another's pain.
It is to be full of the willingness
of forever reaching out to
and picking up
and holding carefully
those who hurt.
To mourn is to sing with the dying
and to be healed
by the song
and the death.

—Macrina Wiederkehr
Seasons of Your Heart, Prayers and Reflection



Share your grief Express your feelings to others who can support you. Don't hide your emotions from those who care. Sharing your grief can be a relief.

Be attentive to your physical needs Be sure that your body is nurtured by getting healthy meals, adequate sleep and exercise each day. Remember that your emotions can be affected by how your body works.

Avoid alcohol and drugs They can only prolong, delay and complicate your grief.

Be attentive to your emotional needs Acknowledge and applaud yourself for making it through each day. Discover the simple things that you can do to nurture yourself.

Give permission to change your routine Although major life changes should be avoided, giving yourself permission to change the little reminders of your lost relationship can aid you in the grief process. Changing the furniture in the house, the schedule of when you have meals or go to bed, or the place where you eat or shop can all be small steps toward building a new life.

Keep a journal Use a journal to express your feelings in written form. At various times you can re-read portions which can give you a broader perspective on your healing process. Writing feelings down can be an outlet for venting painful emotions in a non-threatening way.

Identify your trouble spots Birthdays, anniversaries, holidays, and even certain times of ordinary days, may be difficult to get through. Special places may also be uncomfortable reminders. Knowing what times and places create discomfort allows you to plan ahead to face them. Giving yourself permission to feel the feelings is easier than trying to pretend the hurt is not there.

Begin building toward a fulfilling future Renew old friendships. Strengthen family bonds. Plan new interests. Take a class. Join a group. Rediscover old interests and activities. Plan things you can look forward to like lunch with a friend or a trip. When you are strong enough, think about volunteering some time to help others.

Begin to create goals and meaning in your life.

There is a right time for everything:

- A time to be born,
- a time to die;
- A time to plant;
- A time to harvest;
- A time to kill;
- A time to heal;
- A time to destroy;
- A time to rebuild;
- A time to cry;
- A time to laugh;
- A time to grieve;
- A time to dance;
- A time for scattering stones;
- A time to hug;
- A time not to hug;
- A time to find;
- A time to lose;
- A time for keeping;
- A time for throwing away;
- A time to tear;
- A time to repair;
- A time to be quiet;
- A time to speak up;
- A time for loving;
- A time for hating;
- A time for war;
- A time for peace

Ecclesiastes 3:1-8

Suggestions for helping yourself: Ways for you to be good to you

Sometimes the simple things in life are overlooked when we are tired, overworked, stressed and burned out. Here is a list of “just for fun” things you could do to lift your spirits. Try those that appeal to you and forget the rest. And, after you read the list, you may think of some of your own!

- Keep a journal
- Have a good cry
- Play the piano
- Read a good book
- Take a yoga class
- Call a friend
- Row a boat
- Sing in the shower
- Say “No”
- Take a drive to the mountains
- Dance around your living room
- Wade in the surf
- Climb a tree
- Buy a present
- Look out the window
- Listen to a symphony
- Plan a garden
- Fly a kite
- Take the stairs rather than the elevator
- Finish a project
- Walk barefoot in the grass
- Watch a sunrise
- Ride a bike
- Go to the zoo
- Pick some berries
- Eat fresh strawberries
- Laugh at yourself
- Waste time without feeling guilty
- Go window shopping
- Do something you’ve never done before
- Plant a tree
- Recycle your newspaper/cans
- Get up early and listen to the stillness
- Run on the beach
- Take a bath as long as you want
- Daydream
- Write a thank you note
- Pick some flowers
- Dance
- Stop and smell the roses
- Go to the museum
- Cook a vegetarian dinner
- Write a poem
- Begin daily stretching exercises
- Listen to a story
- Pop popcorn
- Watch the rain
- Give your old clothes to charity
- Open a can of coffee
- Put on old clothes
- Float on an air mattress
- Make ice cream
- Eat by candlelight
- Sit by the fire
- Clean out a closet
- Play a musical instrument
- Throw a Frisbee
- Have someone rub your back
- Pull weeds
- Tell someone you love them
- Bake bread
- Drink a cup of hot cocoa
- Make a list of your good qualities
- See a funny movie
- Take a brisk walk
- Have breakfast in bed
- Jump in a pile of leaves
- Go to the ocean
- Take 10 deep breaths
- Go sailing
- Have a water fight
- Swing
- Make “S’mores”
- Buy a new plant
- Collect sea shells
- Meditate
- Ride the train
- Watch the sunset
- Chop firewood
- Smile at a stranger

Meditation

What is meditation? Meditation is a way of quieting your body, your thoughts, and your feelings to hear what is within you and what is beyond you. It allows you to gain insight or wisdom about yourself and others and bring peace to your life. Meditation as a tool can improve your concentration and give you control over your emotions so they don’t have control over you.

Start by practicing two to three minutes at the beginning, then work your way up. You can probably work your way up to five to 10 minutes if you’re in early grade school, 10 to 20 minutes if you’re in late grade school, and 20 to 30 minutes if you’re in junior high or high school. Adults may meditate for an hour or more. Set a timer and make a chart for yourself, keeping track of your progress. Some days will be harder than others and you may even fall asleep, which is okay.

If you’re feeling restless before meditating, try stretching your back by bending forward, backward, and from side-to-side.

While you’re meditating, if thoughts creep into your mind either let them pass through or write them down on a slip of paper. Then go back to concentrating on the exercise.

You can make up your own words to chant such as “love,” or “peace,” or “kindness,” etc. or try using images from nature. The following exercise is one way to meditate. You may find it hard to read this sheet and meditate at the same time. If so, you may want to record the following instructions on tape. Then play it back so you can simply listen to the instructions instead of reading them. Or you could have someone else read the instructions to you.

– Start by sitting in an uprights position (this can be in a chair or on the floor), uncross your legs (unless you are on the floor) and let your arms rest lightly on your lap. Close your eyes and take three deep breaths, breathing in through your nose and blowing out through your mouth.

– Starting with your feet, curl your toes and hold, one, two, three and relax. Slowly, work your way up from your feet, tightening each group of muscles to a count of three, and then relaxing. When you get to your head, scrunch your entire face and hold to the count of three and relax. Take three more deep breaths, breathing in through your nose and out through your mouth, monitoring your body and making sure all your muscles are relaxed.

– Next focus on the spot between your eyebrows. Concentrate on this area and imagine yourself breathing in through this spot in your forehead—breathing in the breath of peace and blowing out distress. Breathe in peace and blow out fear. Breathe in peace and blow out guilt. Next move your attention to your heart, and imagine yourself breathing in through this spot. Breathe in the breath of peace and blow out distress. Breathe in peace and blow out fear. Breathe in peace and blow out guilt. Still concentrating on your heart center, ask your question or just “be” in the safe, peaceful emotional space you have created for yourself. Listen for your answer. Remember it may not be what you think it should be. Then, express gratitude before you go.

– When you have finished meditating, begin by feeling your feet on the floor and your buttocks on the chair (or the floor, if you are sitting on the floor). Feel your fingers and start to move them, and when you are ready, you can open your eyes.

You may want to write about your experience of meditating in a journal.