
GRIEF 101

AN OVERVIEW OF LOSS, ITS IMPACTS & ITS REMEDIES

JULIE STROUD, BEREAVEMENT COUNSELOR, MISSION HOSPICE & HOME CARE
CALIFORNIA ASSOCIATION OF COLLABORATIVE COURTS CONFERENCE
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MISSION HOSPICE & HOME CARE



- Mission Hospice & Home Care is a small but mighty independent non-profit hospice serving the San Francisco Peninsula and South Bay for over 40 years.
- Working as a team, specially trained nurses, doctors, Social Workers, Spiritual Counselors, and volunteers offer a continuum of care that stretches all the way from community education and advance care planning to palliative care, hospice care, and bereavement and grief support services.
- We offer individual grief counseling, drop-in grief support groups, specialized grief support groups (including Book Club, Parent Loss, Resilience Group, Suicide Loss, Writing Through Loss, etc.), and grief education workshops
- Tax-deductible donations from the community support our exceptional care and educational programs, like this one, and help us serve people regardless of their medical coverage or ability to pay.
- To learn more or donate, visit us at MissionHospice.org!

OVERVIEW

- Loss
- Grief
- Vicarious trauma
- Discussion / Q&A



LOSS



Sharing:

Just by a show of hands,
how many of you have experienced
a loss in your lifetime?

LOSS

- The state of no longer having something or as much of something
- The process that leads to no longer having something or as much of something
- The act or fact of being unable to keep or maintain something or someone
- The harm resulting from losing or being separated from someone or something
- All change is a form of loss.

DEATH LOSS

- Expected, predicted, anticipated death loss
 - For example: Degenerative disease, old age, terminal illness
- Sudden, unexpected, shocking death loss
 - For example: Accident, catastrophic health event (heart attack), homicide, miscarriage, overdose, stillbirth, sudden infant death, suicide
- Traumatic death loss

NON-DEATH LOSS

- Illness or injury
- Shift or weakening of family/support system
- Loss of employment or another role
- Loss of home
- Loss of autonomy, freedom, independence
- Marital discord
- Divorce
- Separation
- Estrangement
- Loss of safety
- Loss of custody of children
- Mental illness
- Dementia
- Life-changing diagnosis
- Infertility
- Substance use
- Addiction
- Life transition

OTHER TYPES OF LOSS

- **Ambiguous (aka inconclusive) loss:** When something or someone profoundly changes or disappears (e.g., dementia, substance use, traumatic brain injury, or missing person)
- **Cumulative loss:** Suffering a new loss before the chance to grieve a previous loss or suffering multiple losses in quick succession. Age & substance use increase risk for cumulative loss.
- **Non-finite loss:** Anytime life doesn't match assumptions, expectations, schema, or working models, there is a risk of non-finite loss.

SECONDARY LOSS – LOSS THAT FOLLOWS A “PRIMARY LOSS”


- Loss of income
- Loss of a home
- Loss of a business
- Loss of financial security
- Loss of identity / role / affiliation
- Loss of life purpose
- Loss of self-confidence
- Loss of faith/belief system
- Loss of hope for the future
- Loss of goals/dreams
- Loss of a sense of a life shared with others
- Distance/loss of unsupportive friends
- Distance/loss of family relationships
- Changes in the ways of relating to others

PANDEMIC LOSSES

- COVID illness
- COVID deaths
- Work disruption
- Job loss
- Financial insecurity
- Housing loss
- Home life disturbance
- Quality of life
- Experiences & activities
- Events & milestones
- Etc.....

Sharing:

What are some of the losses participants in collaborative court settings are experiencing?





GRIEF



WHAT IS GRIEF?

- Grief is a **normal** and **natural** response to *actual, perceived, or threatened* loss of a person, place, or thing to which we are emotionally attached.
- Grief is a response to a particular loss, multiple losses, old losses, anticipated (or feared) losses.
- Grief is an **ongoing** and **evolving** experience to be **allowed** and **acknowledged**, not a problem to be solved, a condition to be treated, or an illness to be cured.
- There is no right or wrong way to grieve.
- Everyone grieves at their own intensity, pace, and in their own way.
- Grief does not follow a set path and it has no timeline.

“Each person’s grief is as **unique** as their fingerprint.

But what everyone has in common is that no matter how they grieve, they share a need for their grief to be **witnessed**.

That doesn’t mean needing someone to try to **lessen** it or **reframe** it for them.

The need is for someone to be fully present to the **magnitude** of their loss without trying to point out the silver lining.”

-David Kessler



7 Domains of Grief Responses



(Source: Christina Zampitella, Psy.D, FT)

COMMON PSYCHOLOGICAL RESPONSES TO LOSS

- Denial
- Repression
- Intellectualization
- Rationalization
- Projective identification
- Dissociation
- Regression

COMMON PHYSICAL RESPONSES TO LOSS

- Appetite change
- Sleep change
- Fatigue/lack of energy
- Weight change
- Tightness in the chest, heart aches, or heart pounding
- Digestive problems/upset
- Agitation/hyperactivity
- Impaired immune system
- Restlessness
- Headaches
- Accident-prone
- Crying and sighing
- Shortness of breath
- Lack of energy
- Increased or decreased tobacco, alcohol, food, or substance use
- Panic attack-like symptoms

COMMON EMOTIONAL RESPONSES TO LOSS

- Shock
- Numbness
- Sadness
- Fear
- Anxiety
- Anger
- Guilt
- Relief
- Mood swings
- Irritability
- Sensitivity
- Meaninglessness
- Joylessness
- Loneliness
- Hopelessness
- Shame
- Yearning
- Apathy

COMMON COGNITIVE RESPONSES TO LOSS AKA “GRIEF BRAIN”

- Forgetfulness
- Poor concentration
- Overwhelm
- Negative attitude
- Low productivity
- Work/schoolwork is slipping
- Nightmares and active dream life
- Feeling “foggy” or spaced out
- “No one understands”
- Confusion
- Lack of motivation
- Disbelief
- Slowed thinking
- Searching

COMMON BEHAVIORAL RESPONSES TO LOSS

- Sleep disturbances
- Appetite disturbances
- Absent-minded behavior
- Taking on traits of the deceased
- Avoidance
- Needing to talk about the loss

COMMON INTERPERSONAL RESPONSES TO LOSS

- Withdrawal
- Avoidance of others
- Sensitivity to others' comments
- Lack of interest
- Sense of isolation
- Difficulty with things others say
- Difficulty with the way others are showing or not showing their grief
- Clamming up
- Loneliness
- Less cooperative with others
- Lashing out
- More aggressive with others
- Desire to be left alone
- Desire for others to reach out
- Distrust
- Feeling like “a fifth wheel”
- Less social contact

COMMON SPIRITUAL RESPONSES TO LOSS

- Altered sense of reality
- Signs, signals and visitations
- Questioning purpose of life, suffering
- Search for meaning
- Anger at God, fate, or higher power
- Emptiness
- Re-evaluation of assumptive world
- Loss of meaning
- Doubt of beliefs
- Loss of direction
- Loss of faith
- Future-lessness
- Sense of presence

DIFFERENCES IN GRIEF RESPONSES



Gender/Style Differences

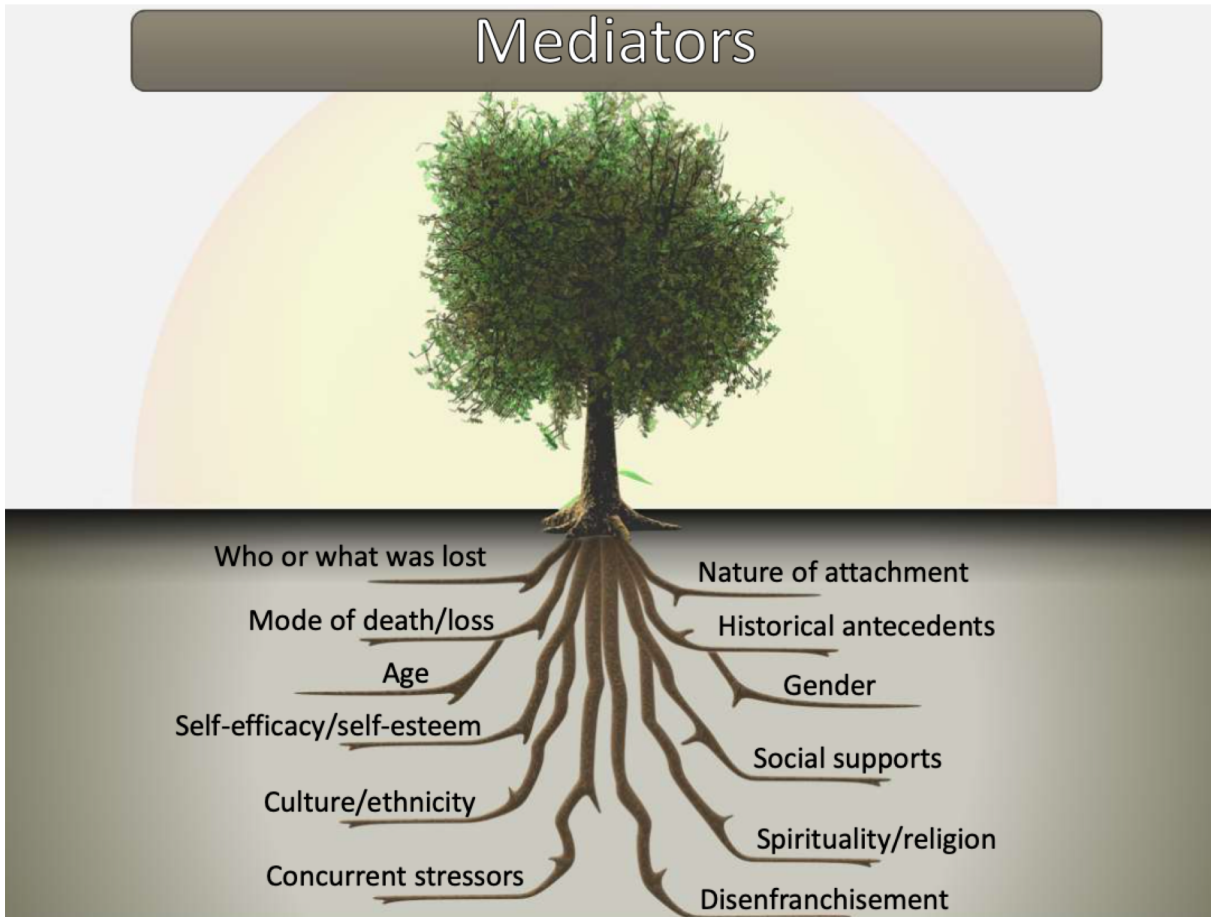
Instrumental vs. Intuitive grieving
(head vs. heart)
(Kenneth Doka)



Cultural Differences

Stoicism, privacy vs. outside support
Impact of faith
Access to services

Mediators



(Source: Christina Zampitella, Psy.D, FT)

TYPES OF GRIEF

- Anticipatory: Grief that comes before a loss
- Acute: Early after a loss, characterized by intensity
- Early: The first two years after a loss
- Mature / Integrated: When grief finds a place in someone's life

(Source: Grief.com)

TYPES OF GRIEF

- Disenfranchised: “a grief that doesn’t have a name”
 - Grief that is unsupported or unrecognized by society or culture
 - Loss, griever, or relationship is not recognized
 - Circumstance of loss or death is stigmatized
 - Grieving style is deemed unacceptable
 - Disenfranchisement aggravates grief by:
 - Intensifying emotional reactions
 - Creating concurrent crises
 - Factors that facilitate grief may not be present (i.e., rituals)
 - Lacking social support
 - Grieving remains private

(Source: Kenneth Doka)

SPEAKING OF DISENFRANCHISED GRIEF...WHAT ABOUT YOURS?

Mental Health Providers as Grief Survivors

Monthly Drop In Group

January 20th, February 17th, March 17th

10 -11 am



How do you mourn the death of a client?

Crisis Support Services is offering a free drop in group for all providers to explore the impact of loss on our professional and personal identities. This group is **VIRTUAL**. Email ahenderson@crisissupport.org for more information



TYPES OF GRIEF

- Ambiguous: Grief that's hard to see
- Complicated/Prolonged: When painful emotions of grief don't improve with time and are so severe that there is trouble resuming life
- Collective/Public: When we grieve as a group an event or public figure
- Delayed: Grief that is not felt in the moment because it's not safe or survival mode has kicked in
- Masked: Grief that is presenting in another way and the resulting feeling is actually a grief response
- Traumatic: Combines trauma with bereavement or grief responses

(Source: Grief.com)

WHAT MAKES GRIEF HARDER? MYTHS & MISCONCEPTIONS

- Only death losses matter.
- All losses are the same.
- It takes two months to get over your grief.
- Everyone grieves in the same way.
- Grief always declines over time in a steadily decreasing way.
- When grief is resolved, it never comes up again.
- It is better to put painful things out of your mind.
- Expressing feelings that are intense is the same as losing control.
- Because you feel crazy, you are going crazy.

Sharing:
**What are other
myths and misconceptions
about loss and grief?**

Elizabeth Kubler-Ross Five Stages of Grief

- Denial
- Anger
- Bargaining
- Depression
- Acceptance



David Kessler's Sixth Stage

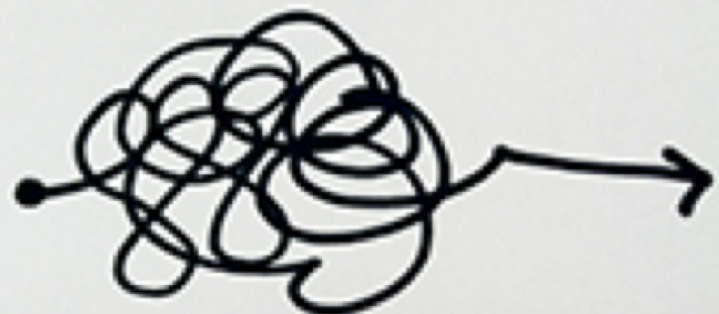
- Finding meaning

(Sources: Elizabeth Kubler-Ross & David Kessler – *On Grief & Grieving*; David Kessler – *Finding Meaning*)

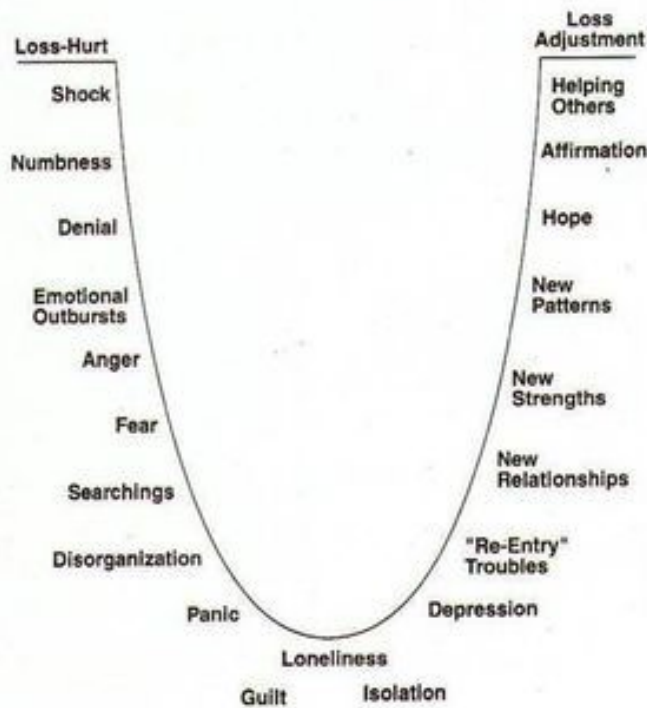
HOW WE
WANT
GRIEF TO
WORK



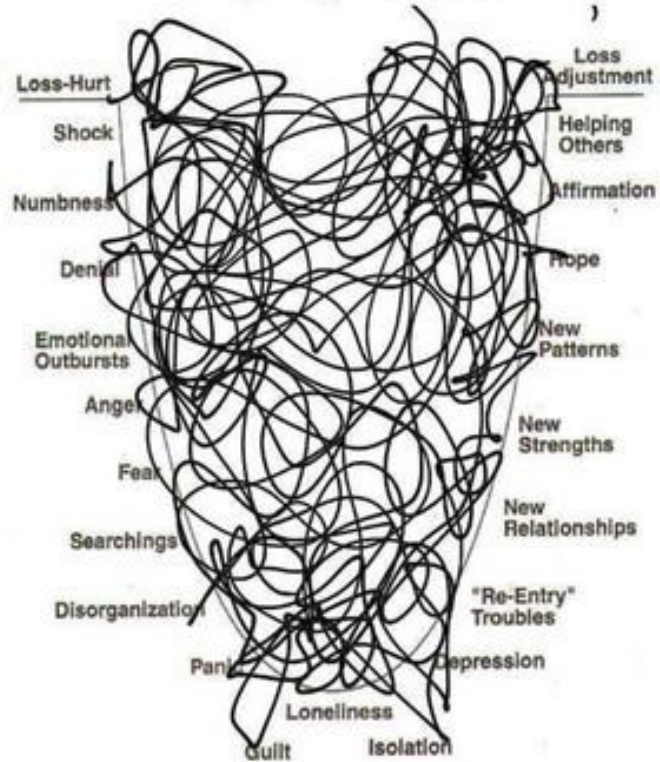
HOW GRIEF
ACTUALLY
WORKS



STAGES OF GRIEF



My experience





USEFUL WAYS TO THINK ABOUT GRIEF



SEARCH FOR THE VERB: WHAT IS HAPPENING WHEN WE ARE GRIEVING?

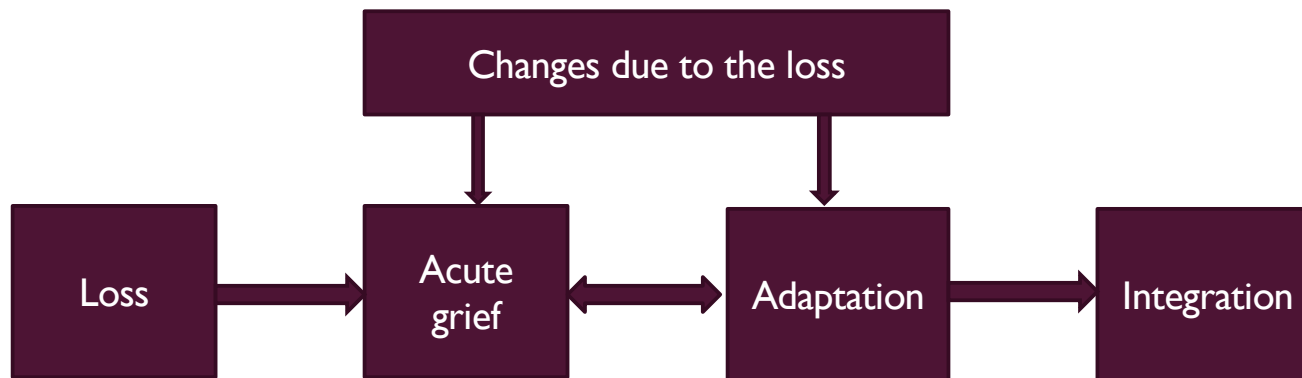
- Adaptation
- Healing
- Integration
- Reconciliation
- Recovery
- Reestablishment
- Reorganization
- Resolution

INVITE THE USE OF A METAPHOR FOR GRIEF

“Grief is like the ocean;
it comes in waves,
ebbing and flowing.
Sometimes the water is calm,
and sometimes it is
overwhelming.
All we can do is
learn to swim.”
– Vicki Harrison



GRIEF AS A (RE)LEARNING PROCESS: THE TRAJECTORY OF GRIEF



Keep an eye out for “derailers” of adaptation

- (1) Disbelief or protest
- (2) Counterfactual thinking – imagined alternative scenarios
- (3) Misunderstanding grief
- (4) Placing blame on self or others
- (5) Survivor guilt
- (6) Feeling unable or unwilling to adapt
- (7) Being overly cautious in close relationships
- (8) Excessive avoidance of emotional pain

(Source: Dr. M. Katherine Shear,, [Columbia University Center for Prolonged Grief](#))



People tend to believe that grief shrinks over time



What really happens is that we grow around our grief

(Source: *Growing Around Grief*)

STROEBE & SCHUT

DUAL PROCESS MODEL OF COPING WITH BEREAVEMENT



(Source: *What's Your Grief*)

“It’s typically American to equate healing with *doing* something.
When we have a problem, we fix it, and we prefer to do it quickly.
But fixing is not the same as healing; in fact it can easily get in the way of healing....
Healing happens not through doing but through feeling.” – Elio Frattarolli



GRIEF RESPONDS TO ATTENTION & EXPRESSION



(Source: Alan Wolfelt, Understanding Your Grief)

GRIEF RESPONDS TO ATTENTION & EXPRESSION

- Sit with it and feel it.
 - Talk to a friend about it.
 - Jot down some thoughts about it.
 - Text another grieving person about it.
 - Pick up a book about grief and read a page or two.
 - Connect in a grief group and share your experience.
- Mourning: external expression
 - Journaling
 - Creative expression
 - Movement
 - Body nurturing
 - Rituals
 - Sharing with others

(Source: Alan Wolfelt, Understanding Your Grief)

INVITATIONS FOR THE GRIEVER

- Allow yourself to be naturally where you are and present to whatever you're experiencing.
- Allow for and acknowledge feelings as they arise.
- Notice where you are “shoulding” on yourself and let yourself off the hook.
 - Do not try to determine where you “should” be in your grief.
- Have patience with yourself and the process.
- Practice self-compassion.
- Practice mindfulness, meditation, or prayer.
 - Mindfulness can support you in nonjudgmental awareness of what's going on.
- Cultivate resilience when you can (sense of purpose, optimism, hope, courage, curiosity, creativity, asking for help, self-care).
- Find and create meaning in the loss (Robert Neimeyer).

A FEW WORDS ON RESILIENCE

- Resilience is often defined as the capacity to adjust to change, disruption, or difficulty, the ability to “bounce back” from tough times.
- Resilience is the most common reaction to loss.
- Laughter/humor is a normal response to loss.
- Absence of grief symptoms can also be healthy.



(Source: George Bonnano, The Other Side of Happiness)

POST-TRAUMATIC GROWTH



Post-traumatic growth describes the personal transformation in the aftermath of traumatic life events, which allows the individual to find the purpose of pain and to look beyond the struggle.

“People develop new understandings of themselves, the world they live in, how to relate to other people, the kind of future they might have and a better understanding of how to live life,” says psychologist Richard Tedeschi, PhD.

WHY GRIEF WORK IS ESSENTIAL...

- “The pain is there; when you close one door on it, it knocks to come in somewhere else.”
- Irving Yalom
- “When you do not honor a...loss by acknowledging it, first to yourself and then to those around you, your grief will accumulate and compound. Then, over time, this denied or “carried” grief will emerge in all sorts of potentially harmful ways in your life, such as deep depression, chronic anxiety, physical complaints, difficulty in relationships, addictive behaviors, and more.” - Alan Wolfelt
- “Repressing pain and hardship creates an internally unsustainable condition wherein we must medicate and manage our true sadness and grief in order to maintain an outer semblance of ‘happiness.’...Unaddressed and unacknowledged pain doesn’t go away. It attempts to be heard in any way it can, often manifesting in substance addiction, anxiety and depression and social isolation.” – Megan Devine

WHAT CAN HELPING PROFESSIONALS DO?

ACKNOWLEDGE | VALIDATE | NORMALIZE | DEMONSTRATE

- Listen.
- Be present.
- Be patient.
- Allow them to be who they are and where they are.
- Allow them to feel what they feel.
- Validate their thoughts and feelings.
- Validate the magnitude of their loss.
- Validate their story.
- Validate / honor their timing.
- Honor their need for space.
- Ask directly how you can support them.
- Mirror their tone.
- Follow their lead.
- Be willing to sit with their pain.
- Demonstrate comfort with silence.
- Let go of your own need to think of something comforting or clever to say. **You don't need to make them feel better.**
- Remember that thoughts and feelings aren't always rational.

(Source: Grief.com)

WHAT IS UNHELPFUL FOR HELPING PROFESSIONALS TO DO?

- Don't judge.
- Don't compare.
- Don't imagine how you would feel.
- Don't try to fix.
- Don't minimize.
- Don't pressure them to talk about it if they don't want to.
- Don't project your beliefs on to them.

(Source: Grief.com)

What can you anticipate would
make it challenging for you
to sit with someone's grief?

“We think that the point is to pass the test or to overcome the problem, but the truth is that **things don’t really get solved**. They come together and they fall apart. Then they come together again and fall apart again. ... The **healing comes from letting there be room** for all of this to happen: room for **grief**, for **relief**, for **misery**, for **joy**.”

- Pema Chödrön

**VICARIOUS TRAUMA,
COMPASSION FATIGUE &
SECONDARY TRAUMATIC STRESS**





“The expectation that we can be immersed in suffering and loss daily and not be touched by it is as unrealistic as expecting to be able to walk through water without getting wet.”

Rachel Naomi Remen
Kitchen Table Wisdom

WHAT IS VICARIOUS TRAUMA?

- Vicarious trauma is an **ongoing process of change over time** that results from witnessing or hearing about other people's suffering and need.
- When you identify with the pain of people who have endured terrible things, you bring their grief, fear, anger, and despair into your own awareness and experience.
- Your commitment and sense of responsibility can lead to high expectations and eventually contribute to your feeling **burdened, overwhelmed,** and perhaps **hopeless.**
- Vicarious trauma, like experiencing trauma directly, can deeply impact **the way you see the world and your deepest sense of meaning and hope.**

(Source: Jefferson Center)

COMPASSION FATIGUE & SECONDARY TRAUMATIC STRESS

- **Vicarious trauma** describes the profound shift in world view that occurs in helping professionals when they work with participants who have experienced trauma.
- **Compassion fatigue** refers to the profound emotional and physical erosion that takes place when helpers are unable to refuel and regenerate.
- **Secondary traumatic stress** is the emotional duress that results when an individual hears about the firsthand trauma experiences of another.
- They are all cumulative over time and evident in the personal and professional lives of helping professionals.
- They are an occupational hazard of working in the helping field.

Examples of Vicarious Trauma: Personal

- **Physical**
 - Rapid pulse/breathing, headaches, impaired immune system, fatigue, aches
- **Emotional**
 - Feelings of powerlessness, numbness, anxiety, guilt, fear, anger, depletion, hypersensitivity, sadness, helplessness, severe emotional distress or physical reactions to reminders
- **Behavioral**
 - Irritability, sleep and appetite changes, isolate from friends and family, self destructive behavior, impatience, nightmares, hypervigilance, moody, easily startled or frightened
- **Spiritual**
 - Loss of purpose, loss of meaning, questioning goodness versus evil, disillusionment, questioning prior religious beliefs, pervasive hopelessness
- **Cognitive**
 - Diminished concentration, cynicism, pessimism, preoccupation with clients, traumatic imagery, inattention, self doubt, racing thoughts, recurrent and unwanted distressing thoughts
- **Relational**
 - Withdrawn, decreased interest in intimacy or sex, isolation from friends or family, minimization of others' concerns, projection of anger or blame, intolerance, mistrust

(Source: Boccellari; Adapted from J. Yassen in Figley, 1995)

Examples of Vicarious Trauma: Professional

- Performance
 - Decrease in quality/quantity of work, low motivation, task avoidance or obsession with detail, working too hard, setting perfectionist standards, difficulty with inattention, forgetfulness
- Morale
 - Decrease in confidence, decrease in interest, negative attitude, apathy, dissatisfaction, demoralization, feeling undervalued and unappreciated, disconnected, reduced compassion
- Relational
 - Detached/withdrawn from co-workers, poor communication, conflict, impatience, intolerance of others, sense of being the “only one who can do the job”
- Behavioral
 - Calling out, arriving late, overwork, exhaustion, irresponsibility, poor follow-through

(Source: Boccellari; Adapted from J. Yassen in Figley, 1995)

ORGANIZATIONAL RISK FACTORS FOR VICARIOUS TRAUMA

- Type & number of clients & their traumas; social, political and cultural contexts of their traumas and current work
- Complex, “difficult” clients
- Large caseloads – overextension due to work demands
- Large percentage of clients who have trauma histories
- Cumulative exposure to trauma clients over time
- Professional isolation (includes lack of peer support and supervision)
- Workplace strains: lack of resources, personnel, and time to complete work

(Source: Boccellari)

PERSONAL RISK FACTORS FOR VICARIOUS TRAUMA

- Your own personal history of trauma
- Current life stressors & support
- Lack of support system
- Being new in the field or in training
- Having unrealistic expectations of being able to save or cure all of your clients!

(Source: Boccellari)

DOMAINS OF PERSONAL SELF-CARE

- The Physical Self
- The Nutritious Self
- The Emotional Self
- The Humorous Self
- The Playful Self
- The Recreational Self
- The Relaxation/Stress Reduction Self
- The Solitary Self
- The Spiritual Self

(Source: Boccellari)

What are some of the barriers or obstacles that may get in the way of your self-care?

How can you go about removing some of these barriers to self-care?



ACKNOWLEDGING THE POSITIVE

Compassion Satisfaction
Vicarious Resilience
Vicarious Transformation

(Source: Vicarious Trauma Toolkit)

VICARIOUS RESILIENCE

The process of learning about overcoming adversity from trauma survivors and the resulting positive transformation and empowerment through their empathy and interaction

(Hernandez, Gangsei, and Engstrom, 2007)

(Source: Vicarious Trauma Toolkit)

Impact of Vicarious Resilience

- Greater perspective and appreciation of own problems
- More optimistic, motivated, efficacious, and reenergized
- Increased sense of hope, understanding, and belief in the possibility of recovery from trauma and other serious challenges
- Profound sense of commitment to, and finding meaning from the work

*(Source: Vicarious Trauma Toolkit:
Hernandez, et al, 2007; Engstrom, et al, 2008)*

IT'S NOT ALL ON YOU

- A **vicarious trauma-informed organization** recognizes these challenges and assumes the responsibility for proactively addressing the impact of vicarious trauma through policies, procedures, practices, and programs.

(Source: Vicarious Trauma Toolkit)

ORGANIZATIONAL STRATEGIES TO ADDRESS VICARIOUS TRAUMA

- Creating a healthy work environment/organizational culture
- Providing supportive leadership
- Providing quality supervision
- Debriefing staff
- Hosting staff/team meetings, retreats, formal and informal opportunities to socialize
- Encouraging formal and informal peer support
- Acknowledging stress, vicarious trauma, secondary traumatic stress, compassion fatigue as real issues
- Providing training and education, including orientation to the organization and role
- Encouraging staff health and wellness (e.g., practices, programs, policies)

(Source: Vicarious Trauma Toolkit)



Q&A



GET IN TOUCH

Julie Stroud

Bereavement Counselor

Mission Hospice & Home Care

jstroud@missionhospice.org

650-532-2518

Appendix I:
Grief Theories That May Help Frame the Process
& Support the Griever In Locating Themselves



GRIEF THEORY DISCLAIMERS

- Do not use these theories to judge anyone's grief or process.
- Do not use these theories to “should” on the griever.
- Do not expect that any stages, processes, or tasks presented here happen in a fixed order. They don't. Like all stage models, the process is not linear. Individuals frequently revisit prior stages/processes/tasks as they progress in their integration and do not always proceed through all stages/processes/tasks.
- These theories can help illuminate grief's terrain.
- The theories can serve as a backdrop for the experience of grief.
- The theories can be helpful in inviting the griever to locate themselves in what resonates with them, i.e.,
“Where do you see yourself and your process in what the theorists suggest is happening as we grieve?”

Elizabeth Kubler-Ross Five Stages of Grief

- Denial
- Anger
- Bargaining
- Depression
- Acceptance



David Kessler's Sixth Stage

- Finding meaning

(Sources: Elizabeth Kubler-Ross & David Kessler – *On Grief & Grieving*; David Kessler – *Finding Meaning*)

Therese Rando

Six R Processes of Mourning

1. Recognize the loss.
2. React to the separation.
3. Recollect and re-experience the deceased and the relationship.
4. Relinquish old attachments to the deceased and the old assumptive world.
5. Readjust to move adaptively into the new world without forgetting the old world.
6. Reinvest.

(Source: Therese Rando, Treatment of Complicated Mourning)

M. Katherine Shear

Healing Milestones

- Honor your loved one and yourself.
- Ease your emotional pain.
- Accept grief and let it find a place in your life.
- Learn to live with reminders of your loss.
- Integrate memories in meaningful ways that can help you learn and grow.
- Narrate stories of the death to understand and accept its reality.
- Gather friends and loved ones and let them into your life.

(Source: <https://complicatedgrief.columbia.edu/wp-content/uploads/2020/05/1.-HEALING-Milestones.pdf>)

Stroebe and Schut Dual Process Model of Coping with Bereavement (Oscillating Between Loss and Restoration)



(Source: <https://whatsyourgrief.com/dual-process-model-of-grief/>)

Alan Wolfelt

Six Needs of Mourning

1. Acknowledge the reality of the death
2. Embrace the pain of the loss
3. Remember the person who died
4. Develop a new self-identity
5. Search for meaning
6. Receive ongoing support from others

(Source: Alan Wolfelt, Understanding Your Grief)

William Worden

Four Tasks of Mourning

1. To accept the reality of the loss
2. To process the pain of grief
3. To adjust to a world without the deceased
4. To find an enduring connection with the deceased in the midst of embarking on a new life

Gradually you create a balance between remembering the person who died and living a full and meaningful life

(Source: J. William Worden, Grief Counseling and Grief Therapy 5th Edition)



Appendix 2: Expectations & Bill of Rights



APPROPRIATE EXPECTATIONS YOU CAN HAVE FOR YOURSELF IN GRIEF (THERESE RANDO)

1. Your grief will take longer than most people think.
2. Your grief will take more energy than you would have ever imagined.
3. You will grieve for many things both symbolic and tangible, not just the death alone.
4. You will grieve for what you have lost already and for what you have lost for the future.
5. You may experience grief spasms, acute upsurges of grief that occur suddenly with no warning.
6. You may find that there are certain dates, events, and stimuli that bring upsurges in grief.
7. Society may have unrealistic expectations and may respond inappropriately to you.
8. Certain experiences later in life may resurrect intense grief for you temporarily.

(Source: Therese Rando, How To Go On Living When Someone You Love Dies)

REALISTIC EXPECTATIONS FOR GRIEF AND MOURNING (ALAN WOLFELT)

1. You will naturally grieve, but you will probably have to make a conscious effort to mourn.
2. Your grief and mourning will involve a wide variety of different thoughts and feelings.
3. Your grief and mourning will impact you in all four realms of experience: physically; emotionally; socially; and spiritually.
4. You need to feel it to heal it.
5. Your grief will probably hurt more before it hurts less.
6. Your grief will be unpredictable and will not likely progress in an orderly fashion.
7. You don't "get over" grief; you learn to live with it.
8. You need other people to help you through your grief.
9. You will not always feel this bad.

(Source: Alan Wolfelt, Understanding Your Grief)

A MOURNER'S BILL OF RIGHTS (ALAN WOLFELT)

1. You have the right to experience your own unique grief.
2. You have the right to talk about your grief.
3. You have the right to feel a multitude of emotions.
4. You have the right to be tolerant of your physical and emotional limits.
5. You have the right to experience “griefbursts.”
6. You have the right to make use of ritual.
7. You have the right to embrace your spirituality.
8. You have the right to search for meaning.
9. You have the right to treasure your memories (added by Julie – or not!).
10. You have the right to move toward your grief and heal.

(Source: Alan Wolfelt, Center for Loss & Life Transition)



Appendix 3: Children and Grief



CHILDREN AND GRIEF

- When they experience loss, children grieve as much as adults do but they grieve differently.
- For children, grief is intertwined with normal developmental tasks.
- They may not have the language or life experience to express their grief like grown-ups.
- Grief is often more physical (i.e., headaches or stomachaches) for younger children more often than expressing emotions of grief.
- Children may need to express themselves through play, creative art, or physical activities instead of words.
- Physical affection and hugs can provide tremendous solace to children.
- Rules and limit-setting can provide grieving kids with structure and security. Discipline for inappropriate behaviors should be imposed with a compassionate respect for the impact of grief on a child's life.
- Children are naturally focused on themselves; this is developmentally appropriate. They may be more concerned about their well-being and meeting their own needs than those of others. Children sometimes have the capacity to be compassionate with grieving adults, but should not adopt a significant role of taking care of adult grievers.

WHAT GRIEVING CHILDREN NEED

- To have their loss acknowledged
- To learn to name feelings and be allowed to express their feelings without shame
- To learn coping skills to help manage stress that comes with grief and change
- To learn tools to foster communication with caregivers, other adults, and peers
- To know it's okay to ask questions and that adults will listen to them
- For death loss, to be allowed to remember the person who died and find ways to connect with them, symbolically and spiritually
- To take “grief breaks” - play and laughter are okay during grief.

CHILDREN AND DEATH LOSSES

- For death losses, as children develop, their understanding of death changes.
 - Younger children, generally under seven years, are “concrete thinkers” and may not understand abstract thoughts like the afterlife or how a loss impacts us into the future.
 - Kids need honest, age-appropriate explanations about death and grief.
 - They need to know it's not their fault.
- According to research, children can take as long as two years to be able to understand and express the impact of the loss of a loved one in their lives.
- New milestones as a child grows up (starting a new school, having a significant performance or sporting event, graduations, and many other significant moments) can temporarily reignite grief over the years. Sharing memories and telling stories, going to the cemetery, or doing something the person who died loved can be proactive ways to take care of the waves of grief that come and go over time.

DEATH LOSSES: BASIC FACTS ABOUT DEATH FOR CHILDREN TO UNDERSTAND

- Use age-appropriate language to explain death to children and what to expect after death.
 - Death is irreversible and permanent (the person who has died is not “on a trip” or “sleeping”).
 - One can use the words “died” and “dead” and not words like “gone” as a child may be confused by ambiguity and mistakenly think that a loved one has gone on a trip and abandoned them, rather than having the opportunity to begin to understand the permanence of the death of a physical body.
 - All living things die.
 - All living functions end completely at the time of death.
 - There are real physical reasons why we die.
 - Death is not contagious.
- Clarify the cause of death so children do not have magical ideas of responsibility or self-blame. Reassure a child that any thoughts or words they have had are not the cause of their loved one’s death (e.g. a child who is angry with their parent may fear that their angry thoughts caused the death).
- Give kids choices around participating in rituals or funerals. Allow children to say goodbye through art, ritual, or if they desire, in person.
- Don’t say anything to dismiss, deny, or minimize a child or teen’s grief.
- Be mindful of unfair and unrealistic expectations on kids, such as “You’re the man of the house now.” (Children may take this kind of message as pressure to be a mini adult, when they need reassurance that they will be safe and cared for by the actual adults around them).

GRIEVING CHILDREN AND EMOTIONS

- Grief presents kids with strong emotions they have never experienced before.
- They may regress and act younger than their age.
- They may be more “clingy” and need much reassurance.
- Anger is a healthy and normal type of protest against change and loss, yet it needs to be expressed in a healthy way.
- Teaching kids how to name emotions using a feeling chart is one idea for helping them control these feelings and become more self-aware.
- Learning how to calm their body is another important step for soothing the pain of grief.

SELF-SOOTHING FOR GRIEVING CHILDREN

- Shaking one's body to release energy
- Singing, moaning, chanting
- Blowing bubbles slowly (to regulate breathing)
- Giving oneself a “butterfly hug” (wrapping their arms around themselves, so that each hand touches the opposite upper arm or shoulder. They then move their hands like the wings of a butterfly, to tap their arms/shoulders in an alternating rhythm.)
- Screaming into or hitting a pillow
- Hitting a drum or punching bag
- Stomping on bubble wrap

CHILDREN AND GRIEF: THE POWER OF ACKNOWLEDGMENT

- When you are responding to a grieving individual be sure to use statements such as:
 - I feel..... I believe.... I would want/ need.... I acknowledge....
- Be careful of statements that may not give the child the opportunity to express their own unique needs and feelings
 - You should/ shouldn't... I know just how you feel...
 - Everything will be ok. Don't worry, be sad, cry, be angry (etc.)
- Support of caring adults and peers who respect their grief, allowing them to express feelings and be heard
 - Be available, but not intrusive: "I'm here if you want to talk or if you need me."

(Source: Jamie Byron, MFT, Kara)

CHILDREN AND GRIEF: PROVIDE A RANGE OF OUTLETS FOR EXPRESSION OF THEIR GRIEF

- Mind
 - Games and Play
 - Engaging problem solving strategies and planning provide a sense of agency and allow children and teens to enact or reenact transitional times
- Body
 - Movement- Hiking, Stretching, Sport/ Dance
 - Anchoring a person's grief to an external environment can create a sense of control, for they can visit a place when seeking out solstice or reliving a memory (eg.A hiking trail)
- Heart
 - Creative Outlets
 - Listening to music, creating with one's hands (painting, Zentangle, cooking/ baking)

(Source: Jamie Byron, MFT, Kara)

TEENS AND GRIEF

- Adolescence is a time of great change and growth. The brain is expanding rapidly and more complex, abstract thoughts emerge. So teens react similarly to loss as adults. Yet they also are still learning about regulating their emotions, being self-aware of their needs, and communicating their experience to others.
- Adolescence is also a time of growing independence. Teens choose when to be private about their feelings and when to share them. They may choose to share their grief with coaches, teachers, counselors, or peers, rather than parents. Rather than talking, they may express grief through social media, athletics, journaling, art, or other outlets.
- Like younger children, teens need to be able to take turns focusing on grief and then setting grief aside and focusing on their lives. Hanging out with peers and having positive social engagement are important during grief. Teens may not want to be different from their peers and should have control over whom they inform about their loss.

MORE ON TEENS AND GRIEF

- Teens need to pursue sources of self-esteem and continue to develop their identities beyond their loss, and focus on their strengths, academic ambitions, and future goals.
- Sometimes this means teens are too busy to grieve.
- It can help to communicate about the benefits of focusing on the present and future, and the costs of complete avoidance of grief feelings in the present.
- Sometimes teens may experience denial of the reality of the loss. This is an important protective mechanism which helps them pace their feelings, and is a natural way of letting in only what they can handle.
- Every teen will be affected by loss differently. While loss can impose hardship, it can also be an opportunity for growth and maturation in teens. They can learn what matters most.
- Coping with the strong emotions of grief can teach teens that feelings come and go, and that we can learn to live with them.

WHEN TO GET HELP FOR GRIEVING CHILDREN

Children

- Drop in school performance
- Social withdrawal
- Low self-esteem
- Desire for self-harm
- Excessive tantrums and behavior problems
- Difficulty managing their emotions or troubling thoughts

Teenagers

- Risk-taking that can result in self-harm
- Experimenting with alcohol or drugs
- Intense anger, defiance, guilt, or regret
- Significant, pervasive social withdrawal
- Poor self-care habits (e.g. not eating, not motivated to shower or get out of bed)
- Suicidal thoughts: address any words of wanting to join their loved one who died
- Death was traumatic and/or sudden and especially difficult to absorb



RESOURCES



BOOKS ON GRIEF

- *The Other Side of Sadness* by George Bonnano
- *Bearing the Unbearable* by Joanne Cacciatore
- *It's OK That You're Not OK* by Megan Devine
- *Grief Is A Journey* by Kenneth Doka
- *Finding Meaning* by David Kessler
- *On Grief & Grieving* by Elizabeth Kubler-Ross and David Kessler
- *Grieving Mindfully* by Sameet Kumar
- *The Grieving Brain* by Mary-Frances O'Connor
- *How to Go On When Someone You Love Dies* by Therese Rando
- *The Wild Edge of Sorrow* by Francis Weller
- *Understanding Your Grief* by Alan Wolfelt
- *Grief Counseling and Grief Therapy* by J. William Worden

BOOKS ON VICARIOUS TRAUMA

- *Trauma Stewardship: An Everyday Guide to Caring for Self While Caring for Others* by Laura van Dernoot Lipsky with Connie Burk
- *Compassion Fatigue: Coping With Secondary Traumatic Stress Disorder In Those Who Treat The Traumatized (Routledge Psychosocial Stress Series)* by Charles R. Figley
- *Treating Compassion Fatigue (Routledge Psychosocial Stress Series)* by Charles R. Figley
- *The Compassion Fatigue Workbook: Creative Tools for Transforming Compassion Fatigue and Vicarious Traumatization (Psychosocial Stress Series)* by Françoise Mathieu

GRIEF JOURNALS & WORKBOOKS

- *Grief's Courageous Journey* by Sandi Caplan and Gordon Lang
- *How to Carry What Can't Be Fixed* by Megan Devine
- *The Grief Recovery Handbook* by John James and Russell Friedman
- *Processing Through Grief* by Stephanie Jose
- *Understanding Your Grief Journal* by Alan Wolfelt

WEBSITES AND APPS

- Center for Loss and Life Transition (Alan Wolfelt): centerforloss.com
- Em & Friends Empathy & Sympathy Cards: emandfriends.com
- David Kessler (online support groups & other resources): grief.com
- Refuge In Grief (Megan Devine): refugeingrief.com
- Self-Compassion (Kristen Neff): self-compassion.org
- What's Your Grief: whatsyourgrief.com
- Mindfulness & Grief Institute: mindfulnessandgrief.com
- Center for Prolonged Grief: prolongedgrief.columbia.edu
- Apps for Mindfulness: Calm, Headspace, Insight Timer Ten Percent
- Resilience: <https://positivepsychology.com/resilience-skills/>
- Trauma Stewardship Institute: <https://traumastewardship.com/>
- Vicarious Trauma Toolkit: <https://ovc.ojp.gov/program/vtt/introduction>

CHILDREN AND GRIEF RESOURCES

- National Alliance for Grieving Children: <https://nacg.org/>
- The Dougy Center: <https://www.dougy.org/grief-support-resources>
- Sesame Street Helping Kids Grieve: <https://sesamestreetincommunities.org/topics/grief/>
- Grieving Students: <https://grievingstudents.org/>
- Teen Grief Resources:
<https://www.hov.org/our-care/grief-support/grief-resources/teen-grief-resources>
- Statistics on childhood grief:
<https://www.newyorklife.com/assets/foundation/docs/pdfs/childhood-grief.pdf>
- Books and other resources on grief: The Centering Corporation <https://centering.org/>

SPEAKING OF DISENFRANCHISED GRIEF...WHAT ABOUT YOURS?

Mental Health Providers as Grief Survivors

Monthly Drop In Group

January 20th, February 17th, March 17th

10 -11 am



How do you mourn the death of a client?

Crisis Support Services is offering a free drop in group for all providers to explore the impact of loss on our professional and personal identities. This group is **VIRTUAL**. Email ahenderson@crisissupport.org for more information



VICARIOUS TRAUMA SLIDE CONTENT ACKNOWLEDGMENTS

- Vicarious Trauma slides adapted from:
 - Cultivating Resilience: Vicarious Trauma, Post-Traumatic Growth, and Self-Care Practices by Alicia Boccellari, Ph.D.
 - UCSF Trauma Recovery Center (Margaret Lamb, Cecilia Lipp, Ann Tran, Stacey Wiggall, and Vanessa Kelly)
 - Office for Victims of Crime, Office of Justice Programs, U.S. Department of Justice
 - San Francisco Department of Public Health

GET IN TOUCH

Julie Stroud

Bereavement Counselor

Mission Hospice & Home Care

jstroud@missionhospice.org

650-532-2518