

UNDERSTANDING DEATH, GRIEF & MOURNING *A Resource Manual*



A Center for Grieving Children, Teens and Adults UNDERSTANDING Death, Grief & Mourning Bereavement Resource Book



CENTERS FOR GRIEVING CHILDREN, TEENS AND ADULTS

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From the Founders

This book is dedicated to those who have lost a loved one, and to those who want to effectively service the bereaved in their professional or personal community.

Knowing the personal impact of losing our 3-year-old son, Bobby, we realized the devastating effects of how life completely changed for us. How would we handle our daily responsibilities of raising a family when we both wished life would have just stopped? Yet in the same breath, we also knew that we needed to keep going for our other children, our marriage, our jobs, and ourselves.

As a result, we sought support. We attended weekly counseling sessions and participated in a monthly support group. We could write a novel about this entire experience, but probably still wouldn't be able to find the exact words to describe those events. We are confident in one



aspect for sure; that our grief journey brought us to our knees. We have remained on our knees ever since, asking God to give us the strength to get through each day. You see, Cornerstone of Hope is not an emotional response to our son's death, but a devotional response to God's call to serve those left to grieve. We pray that you will find this guide useful as you travel your own grief journey, or accompany those who seek support after the death of a loved one.

Ultimately, we desire to change pain and suffering into purpose and meaning.

Sincerely,

hristi & Mark

Christi & Mark Tripodi Founders. Cornerstone of Hope

"...and our hope for you is firm, because we know that just as you share in our sufferings, so also you share in our comfort." -2 Corinthians 1:7



Forward

If you've been given this resource book, most likely you recently experienced the death of a loved one. Please accept our condolences and know that we want to assist you on your journey through this difficult period in your life. Our goal isn't to take away your pain, but to give you some tools to make getting through the pain a bit easier.

As you try and navigate the difficult days ahead, you may have questions and concerns about the grief process for yourself, your children, or other family members and friends. With this in mind, Cornerstone of Hope is providing this booklet to assist you in understanding death and bereavement, and how it impacts our lives. We hope it will help you and your family during this season of grief.

Cornerstone of Hope is committed to providing comprehensive bereavement services to children, teens and adults. If Cornerstone can assist you in any way, please contact us at 216.524.3787.

Cornerstone of Hope would like to thank the Cleveland Clinic Foundation for their generous grant to produce this booklet.

Definitions

GRIEF:is a natural and normal response to loss.is a holistic experience. It affects our entire being – mind, body, spirit and emotion.is a unique experience. No two people will grieve exactly alike.

MOURNING: is the outward expression of grief. it includes elements such as memorial services, funerals, wakes, mourning dress, etc. it is tied into culture.

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The Cornerstone Approach

Helping Children & Teens Through the Grief Process:

Children experience the same range of emotions as adults, but because they are still developing cognitively and emotionally, they are not able to grieve in the same way. Children's coping skills are limited and, for this reason, they need to grieve intermittently, or in small spurts, for a longer period of time. Due to their developmental limitations, children need education about grief as well as assistance in identifying their complex feelings. For them, grief issues will resurface throughout their growth. As they develop mentally and emotionally, they will need further education and support to become happy and healthy adults.

We at Cornerstone of Hope believe it is important for children, adolescents and adults to understand the grief process and be given opportunities to express their emotions of grief. We provide a place of support and guidance for families who are grieving. Our professionals help families understand that their experiences are normal and offer healthy ways to cope with those experiences.

Preschool Age

We believe that all children grieve a loss; however, they are not all developmentally ready to work through their grief with the help of a professional. It is difficult for young children under the age of six to talk to a professional about their grief at a scheduled time. When young children are experiencing grief, they express it in the moment or in their behaviors. It is important for the parent(s)/caregiver(s) to understand how their young child experiences grief, so they can better support them through the process. That is why the therapists work with the parent/caregiver to help create boundaries and a supportive atmosphere at home that will nurture grieving infants and preschoolers. Five-year-olds may be appropriate for limited sessions with a therapist, but emphasis is directed on helping a parent/caregiver emotionally support the child.

Elementary School Age

Children ages six through ten understand the finality of death and are more capable of working through their grief with the help of a professional. Due to their limited vocabulary and cognitive development, it can be difficult for children to express their grief verbally. Through the use of storybooks, games, and art & creative therapy, we help children understand their emotions and learn healthy ways to cope. The therapist also keeps open communication with the parent/caregiver to provide parenting support.

Junior/Middle School Age

As children get older, they are better able to verbalize their emotions but continue to express their grief through behaviors. Common problems include a decline in academic performance, sleep changes, and somatic complaints such as headaches and stomachaches. Through the use of books, games, and art & creative therapy, we help children understand ways in which grief affects them and how to manage it. In addition, we work with the parents/caregivers to help them understand what their children are experiencing and establish ways they can support their children through this process.

High School Age

Once a child has reached adolescence, he/she may have an adult understanding of death. Even though adolescents have the vocabulary to express themselves, they often do not share what they are experiencing because they do not want to appear different from their peers. Due to their already difficult life stage, adolescents' experience with grief is unique. They are neither children nor adults. Instead, teens constitute a special group of mourners who deserve a special kind of care and consideration from the adults around them. We use various creative therapies to help adolescents work through their grief while educating them about the grief process.

The Cornerstone Approach

Art Therapy

Art therapy is one of the main modalities Cornerstone of Hope uses in working with children and teens. Art therapy is based on the belief that the creative process involved in the making of art is healing and life-enhancing. No artistic skill is necessary to benefit from art therapy. Verbalizing thoughts and feelings can be difficult, especially during stressful life events. An art therapist can guide a client through the creative process in a safe and comfortable atmosphere. The simple use of color or line can communicate complex feelings or experiences without words. The artwork can also be a stepping stone to verbal communication about feelings or events. At Cornerstone of Hope, our professionally trained art therapists hold a Masters Degree in art therapy and are trained in both art and psychology. We use art therapy to assist in moving through the grieving process because it allows people to do the following:

- Get in touch with, accept, and express feelings
- Foster positive coping behaviors
- Gain insight and understanding
- Reduce anxiety and provide emotional release
- Create memorials that express the significance of the life of the deceased

Helping Adults Through the Grief Process:

Initial Assessment Interview: Individuals seeking grief support and counseling services after the death of a loved one are eligible for bereavement services at Cornerstone of Hope. Please call to schedule an appointment with one of our grief counselors to determine readiness for group support and individual counseling needs. Our master's level clinical staff is dedicated to guiding the bereaved on the path toward hope and healing. In the spirit of Christ, we welcome and serve all seeking support.

Individual Grief Counseling

- Average length of session is 60 minutes
- Average number of sessions per adult is 6-10
- Per session fee based upon income level

Grief Support Groups

- Structured eight-week Support Group; topics related to grief are explored each week and opportunities are provided for participants to explore their healing process
- Monthy groups that help continue supporting your grief journey

Workshops and Special Events

- Candle Lighting & Remembrance Ceremony-This December memorial event is open to all grieving families
- Journaling, scrapbooking, and guest speakers promote hope and healing in a safe group environment
- Educational seminars guide and direct professionals and guests in serving the grieving in the community

EMDR (Eye Movement Desensitization and Reprocessing)

- A non-traditional type of therapy that has been proven to help with Post Traumatic Stress Disorder
- Releases negative memories, allowing the reprocessing of the traumatic events to be worked through and become less disabling for the client

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Talking to Children

People often wear masks to hide their true self. During the grief process, people put on that happy face in order to get through their day. This is an example of an inner-outer self mask created by a 15 year old female after the loss of her father. The outside represents what she shows her friends and teachers while at school ("I'm happy and everything is going great!") and the inside represents what she is really feeling ("I really miss my dad and sometimes I just feel like crying.")



GRIEF MONSTER

The emotions of grief can be overwhelming for a child to communicate. Children not only experience grief on an emotional level, but they also "feel" their grief mentally, physically, spiritually, and behaviorally. Due to the many ways grief can affect a person, children often feel that they are losing control. After identifying the various ways grief was affecting him after his father died, this eight year old boy painted his grief as a monster. He was then asked to put himself in the picture taking control of the monster to remind him that grief is something he is going through, it is not taking over his life.

Talking to Children

Why is it necessary to inform a child when a loved one is seriously ill?

- Not keeping children informed can lead them to draw their own conclusions.
- Keeping children informed builds a trusting relationship.
- Children pick up on nonverbal signs: worried looks, hushed conversations, telephone calls in the night, relatives showing up, perhaps less contact with you, and general household tension. Children may develop a high anxiety level, because they do not know what is happening.
- Knowing helps the child prepare for loss through anticipatory grief.
- By including the children, you can demonstrate the love, support, and strength your family shows its members in times of crisis or pain.
- United families can help each other learn to cope with illness and loss. Parents can role model healthy coping behaviors for their children to prepare them for life.

According to Kenneth Doka, a leading expert in the field of thanatology, there are three questions that should be considered before discussing illness with children. They are:

1. What does a child need to know?

Information should be shared with children so they can understand what is wrong. Children have fantastic imaginations, and, if they are not provided with factual information, they create their own answers which can be worse than the truth.

2. What does a child want to know?

Allow their questions to guide you. Questions often include "What is wrong?" "How does it affect me?" "What can be done?" and with younger children, "Is it my fault?"

3. What can a child understand?

Children are on different developmental levels. At different ages, their vocabulary, sense of cause and effect, presence of magical thinking, and ability to understand abstract thought differ.

Guidelines for Communication

1. Begin on the child's level.

Children process information differently at varied ages. It is important to gear information to the child's developmental level. Vocabulary and concepts have to be consistent with the child's. Beginning with the child's experience allows one to gear information to the child's own level. For example, "You know how Grandma has been ill..."

2. Let the child's questions guide.

Adults sometimes provide too much information which can overwhelm the child. Provide basic information, and then let the child's questions guide you. It is important to understand what the child is really asking. We need to address both the questions and the underlying feeling. The response should be open-ended enough to allow the child to address all concerns and questions.

3. Encourage feedback.

One is never quite sure how one's words will be understood, especially in anxiety-filled crises. For this reason, it is critical to ask children to summarize what they have heard. This provides opportunities to clarify misconceptions.

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Talking to Children

(Guidelines for Communication continued)

4. Provide opportunities for the child to express feelings.

A child's feelings during illness, whether the child's own or another's, can be complex and frightening. It is important that the child have opportunities to comfortably express those feelings. Adults can help by listening, validating those feelings, and sharing their own feelings and the ways they cope with them.

5. Share faith.

Our faiths, whether expressed in religious beliefs or philosophical reflections, help us face and transcend crises. It is often helpful modeling to the child to show the child ways that one's faith helps one cope with crises. These reflections should not be pronouncements that end dialogue. "We must trust God's will and believe" offers rigidity children are not likely to find useful in constructing a response to the crisis. On the other hand, a comment such as, "It is so hard to understand what is happening" allows one to share one's own faith struggle and reaffirm that one's faith helps one cope even when there are no easy answers or explanations.

6. Utilize other resources.

Books and films can often be shared experiences that facilitate conversations. There are many adults in a child's life other than parents who can be useful sources of support. Helping children identify people with whom they feel comfortable discussing their problems reminds them they need not cope alone.

7. Use the child's natural expressive means to stimulate dialogue.

Children often express themselves in stories, games, play, art, or music. Using these approaches with children can be very helpful, since they are more comfortable for the child, they offer direct opportunities for expressing feelings, and they provide opportunities for dialogue.

8. Visits and medical procedures.

Should a child visit an ill person? Leave this decision to the child. Provide the child with information, options, and support and let him/her decide.

Provide information as to what the child can expect and what it will be like. Explain how the person feels, looks, responds, and if they are connected to machines or IVs.

Provide options such as staying at home with an adult, waiting in the hall if they choose not to go in, etc. If they decide not to go, there are other ways they can show their love and support such as sending letters, tapes, drawings, and calling on the telephone.

Provide support by identifying an adult whose role is to support the child if the child needs to leave the room or talk about how seeing the ill individual is affecting him/her.

9. Additional Suggestions

- Learn as much as you can about the illness.
- Get information for children from the national organization or your library to help children understand basic concepts of the illness.
- Help children find appropriate ways to be involved in the care of their loved one.
- Children need a strong support system when their family is coping with an illness. Grandparents, teachers, neighbors, etc. need to provide more support in a child's life during this time.
- Make school counselors and teachers aware of this situation and keep them updated as changes occur.
- Prepare children for changes as the illness progresses.

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FOR INFORMING CHILDREN ABOUT THE DEATH OF A LOVED ONE

WHO

Children should be informed about a death by their parents. If this is not possible, then another adult to whom they feel close should inform them.

WHEN

Inform children of a death immediately. This reduces the risk of them hearing the news from the wrong person, at the wrong time, or in the wrong place.

WHERE

Inform children in familiar surroundings, preferably at home.

HOW

Think about the age of the child and any past experiences that may affect or help with their understanding of what has occurred.

- Speak with a calm, natural tone of voice.
- Share your feelings. However, if you are extremely upset, try waiting until you have calmed down some so the child doesn't become frightened.
- Be honest and truthful, using correct terminology, i.e., cancer; died.
- Avoid euphemisms, i.e., gone away, sleeping, eternal rest, lost, etc.
- Allow the child to lead, encourage him/her to ask questions, and answer only what the child is asking. Avoid giving unnecessary details.
- Meet the individual needs of the child and allow him/her to express feelings. The child may become angry, need to cry, need to be alone, or need a hug.

This is an adaptation of an article by Kenneth Doka appearing in Children Mourning, Mourning Children published by Hospice Foundation of America, 1995. Reference: Helping Children Understand Death. Cooperative Extensions Service, Ohio State University

Preparing for Funerals

Children need to feel a part of the family. A funeral or calling hours can be a good time to help the child feel a part of what has happened. There are some guidelines you might want to follow to help your child with the funeral experience.

- 1. Let the child know what a funeral is and that it is to say goodbye to the deceased person, to show that the person was loved and appreciated, and to give comfort and support to the family members.
- 2. Talk about where the funeral will be held. Describe the room, the casket, the appearance of the body and basic information about what happens to a body when a person dies the heart stops beating, stops breathing, cannot think or feel, etc.
- 3. Never force a child to go to a funeral, touch a body, kiss a body, etc.
- 4. Allow the child to be part of the funeral planning. This inclusion is important.
- 5. Plan to have someone answer questions about the funeral process (friend, funeral director, clergy) if you cannot handle those questions at that time. Talk about cremation if that has been chosen.
- 6. Let the child know that it is permissible to write a note, draw a picture, or leave an item in the casket making sure the child understands that the deceased person cannot give it back or answer it.
- 7. Take the child to view the body before visitors come to give the child a chance to adjust, question, or react.
- 8. Ask the funeral director to show the legs of the body to the child if he/she wants to make certain that all of the body is there.
- 9. Explain the purpose of the casket (keeps dirt off the person) and the purpose of the vault (keeps insects and water out of the casket).
- 10. Allow the child to "touch" things (the casket, flowers, the body) if the child chooses.
- 11. Do not insist that a young child stay for call hours or go to the funeral allow the child to make the decision.
- 12. Explain that calling hours and the funeral allow people to come and say that they are sorry for your loss and to say goodbye.
- 13. Allow the child to bring along a favorite stuffed animal for comfort.
- 14. If you are a close relation to the deceased and will be busy greeting mourners, arrange to have a family friend watch over your child. This person should feel comfortable explaining what is going on and be able to leave the room with the child if he/she needs a break.
- 15. Tell the child how the day will go and what will happen in the next few days.

Preparing for Funerals

- 16. Let the child know how others will act at the funeral. They are sad, so they might cry. Some people act like they don't care as their way of covering up their true feelings. People sometimes say strange things because they do not know what to say. Some people have different religious beliefs and may mention these.
- 17. Answer your child's questions as they arise with simple and honest answers. Do not allow time for their imaginations to run wild.
- 18. Be sure to go back over the "biology" of death.
- 19. Remember it is hard for a child to separate soul and body. Share your beliefs with the child.
- 20. Ask your clergyman/woman for help with spiritual questions.
- 21. Children commonly have fears about losing a parent, especially if one of the parents has already died or abandoned them. Do not say, "Nothing will ever happen to me." Explain to the child that chances are small that anything will happen to you. Assure your child that most parents live to see their children grow up and have children of their own.
- 22. After a death, children may have fears about what would happen to them if their parent or caregivers died. Let the child know who has been designated to care for them in your will. If you do not have a will, write one to ensure their peace of mind and yours.
- 23. Give your child something that belonged to their loved one. This can provide a very important connection to the deceased.
- 24. Give the child permission to cry, grieve, express feelings like anger or guilt or ask questions.
- 25. Share your emotions with the child. "It is OK for me to cry." Share with them if you are very sad, lonely, relieved, etc. DO NOT SAY, "Be brave," or "Don't cry." Allow emotions.
- 26. Remember that, as a primary caregiver, you are the child's role model. By your own actions, you are teaching your child how to grieve, cope with loss, and work through the healing process.

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The following is a guide to understanding a child's concept of death and common grief reactions based on age. Many other factors besides age and developmental level affect a child's concept of death and experience of grief including personality, life experiences, culture, level of support, religious/philosophical beliefs, etc. This information is presented as a guide based on age, not as a strict tool.

0-2 Years of Age

Developmental Stage	Concept of Death	Common Reaction to Loss and Change	How Adults Can Help
Physical, emotional, cognitive and behavioral aspects. PROVISION OF BASIC NEEDS Food, warmth, comfort, love, security. Importance of bonding/attachment to mother or key caregiver.	NONE Only an awareness of separation by absence.	PHYSICAL Feeding, sleeping, toileting difficulties EMOTIONAL Lengthy separation from key caregiver may lead to despair and detachment. COGNITIVE Need for distraction, play, and stimulation. BEHAVIORAL Regression to an earlier stage of development. Protests against separation.	PHYSICALLY Respond to children's needs for normal routines regarding feeding, toileting, and rest. EMOTIONALLY Provision of a consistent, loving, comforting caregiver. COGNITIVELY Respond to child's need for stimulation and distraction. Stranger anxiety. BEHAVIORALLY Allow for regression. Be sensitive to child's fear of separation and stranger anxiety.

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3-5 Years of Age

Developmental Stage	Concept of Death	Common Reaction to Loss and Change	How Adults Can Help
 PHYSICAL ASPECTS Becoming less dependent. Likes routine and order. EMOTIONAL ASPECTS Can tolerate some separation from key caregiver. COGNITIVE ASPECTS Beginning to understand and use two-way communication. "Why" questions. "Magical thinking" (own thoughts, wishes, and actions determine what happens to others.) BEHAVIORAL ASPECTS Beginning to know what is expected of them socially and learning appropriate ways of responding, particularly to parents. 	Separation and sleep are related to early thoughts of death. The child does not perceive death as irreversible, but rather under changed circumstances, i.e., another form of life. DRAWINGS Show concern about physical features of death and the dead, separation and abandonment, humanizing the unknown.	PHYSICAL Feeding, toileting, and sleeping difficulties. Concern about routines. EMOTIONAL Fears about separation and abandonment. COGNITIVE Will want to know what has happened. May feel that they are being punished for "bad thoughts" – that what has happened is their fault. Interested in the death. BEHAVIORAL Regression to infant needs. Aggressive, rejecting behaviors, and/or withdrawn and/or clinging behaviors.	PHYSICALLY Follow normal routines and activities. EMOTIONALLY Give as much comfort as needed and give reassurance that the children will be cared for. Enable children to keep mementos. COGNITIVELY Answer all questions as simply and honestly as possible. Reassure children that what has happened is not their fault, that they are "OK" and not bad. Allow children to see the body, attend the funeral, etc. BEHAVIORALLY Allow for regression. Be consistent and supportive regarding any changed behaviors. Inform school, family, friends, etc, as appropriate.

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6-8 Years of Age

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Developmental Stage	Concept of Death	Common Reaction to Loss and Change	How Adults Can Help
 PHYSICAL ASPECTS Consolidating physical development. EMOTIONAL ASPECTS Working towards autonomy and responsibility. COGNITIVE ASPECTS Seeking casual explanations to "why" questions. Experiment with their perception and experience of the world through fantasy and play. BEHAVIORAL ASPECTS Social assimilation into the culture. Transition from family and home to peers and school. 	Dying and death are identified with the dead but still personified. Death is kept at a distance and externalized, associated with old age and illness. The fear of death is also associated with a fear of loss of the self, an early preview of life crisis (i.e., leaving home, middle age, and old age). DRAWINGS Symbols associated with the dark, water, sleep, emptiness, rebirth, mutilation, and personification and rituals of death.	PHYSICAL Children may exhibit psychosomatic symptoms and/or depression. They may want to be "of use" practically. EMOTIONAL Children may exhibit a range of emotions, manifest rapid mood challenges. Will often try to be brave, do not like to lose control. COGNITIVE There may be evidence of learning difficulties. Play, stories, and drawings will often reveal a child's inner feelings and fears. BEHAVIORAL Regression may accompany stress. May become withdrawn or act out in anger. May exhibit behavioral difficulties at home or school. May become the "perfect child."	 PHYSICALLY Acknowledge the symptoms and seek professional help when appropriate. Enable the child to help and give comfort to others. EMOTIONALLY Acknowledge that you know that it is very hard for him/ her at the moment and it is understandable if he/she feels upset, etc. Reassure the child that he/she will always be cared for by someone. COGNITIVELY Seek and offer help at school as appropriate. Give short, honest, concrete explanations to questions and encourage children to see the body, attend the funeral, draw, etc. and to discuss concerns if needed. BEHAVIORALLY Allow short term regression and dependence on parents & other adults. Give clear boundaries and limits to inappropriate behaviors. Inform school, etc.

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9-12 Years of Age

Developmental Stage	Concept of Death	Common Reaction to Loss and Change	How Adults Can Help
 PHYSICAL ASPECTS Relatively stable. EMOTIONAL ASPECTS Gaining a sense of self outside the family, a place in the world. Questioning parents' judgments, faulty arguments and inconsistencies. COGNITIVE ASPECTS Beginning to rationalize events. Shift from concrete towards abstract thought. Can project back into the past and forward into the future. BEHAVIORAL ASPECTS Beginning to understand the rules of society. 	Dying and death are identified with the dead but still personified. Death is kept at a distance and externalized, associated with old age and illness. DRAWINGS Display common and individual concerns about own mortality and fear of death. Interest in violent deaths. Death is represented in abstract terms (i.e., blackness, emptiness).	PHYSICAL Children may exhibit psychosomatic symptoms (stomachaches, headaches, etc.) and/or depression. EMOTIONAL Children usually manifest a more stable, surprisingly calm and accepting response to death and loss. COGNITIVE Can rationalize the death and loss. Can think retrospectively about what has happened and imagine the possible implications for the future. BEHAVIORAL Will normally respond appropriately, although there may be some changed behaviors.	PHYSICALLY Take symptoms seriously. Give children reassurance that help and support are available. EMOTIONALLY Allow children to give comfort and help without making too many "adult" demands. Encourage and enable children to talk about the deceased and the implication of the loss. Allow children to express their feelings, and do not hide adult feelings from them. COGNITIVELY Give clear, truthful answers about the manner of dying and death, and be honest if the answer is not known. BEHAVIORALLY Allow for some behavioral abbreviations and seek professional help if concerned. Inform school, etc.

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13-18 Years of Age

Developmental Stage	Concept of Death	Common Reaction to Loss and Change	How Adults Can Help
 PHYSICAL ASPECTS Bodily changes from childhood to adulthood are often very stressful EMOTIONAL ASPECTS Seeking to establish a unique identity. Need to find meaning and purpose in life. Feeling that they have deep and powerful emotions which no one else has experienced. COGNITIVE ASPECTS Data gathering to gain understanding of philosophical, existential and intellectual issues. BEHAVIORAL ASPECTS Acting out behaviors for feelings that are unrecognized and difficult to express. Testing out parental values and society's rules. 	Difficulty in recognizing the personal implications of mortality (as opposed to awareness of own death) because they have a sense of being immortal. Becoming "adult" is associated with participation in a range of experiences and activities which range from challenging to potentially lethal.	PHYSICAL May exhibit psychosomatic, stress and/or depressive symptoms. Increased concern and distress regarding physiological body changes. EMOTIONAL Regression and dependence and/or taking on an adult role. Feelings of loneliness, sadness, despair, anger, guilt, hostility, rejection. May either have a sense of seeing no meaning or purpose in life and/or may see the situation as a challenge to be overcome. COGNITIVE Difficulty in concentration. Poor or changed motivation regarding learning. May have an excessive interest or lack of involvement in important issues. BEHAVIORAL Exaggerated acting out behaviors, often masking fears with joking, sarcasm, or withdrawal.	PHYSICALLY Take concerns seriously and seek professional help as appropriate. Involve teenager in the care before death as appropriate and in practical consideration before and afterwards, but avoid making excessive demands of responsibility. EMOTIONALLY Give as much comfort and support as possible. Take feelings seriously and reassure them that their extremes of feelings are normal. Maintain privacy and modesty. Give teenagers space and respect. COGNITIVELY Enable teenagers to verbalize beliefs, concerns, & opinions. Demonstrate an interest in what seems important to them. Avoid idealizing the deceased. BEHAVIORALLY Set limits to acting out behaviors and set boundaries (preferably jointly). Inform school, etc.

Manifestations of Grief

Behavior/Social	Emotional
 Regressive behaviors (returning to a behavior from an earlier period) – i.e., bed-wetting, thumb-sucking, clinging, tantrums Aggressive behaviors (hitting, demanding) Rebellious/Defiant behaviors Withdrawal/Passivity Hyperactivity Temporary assumption of a new role or personality often related to that which was lost (identification) Increased need for reassurance (i.e., clinging and not wanting to initiate or leave home) Hoarding (food, toys, etc.) Changes in eating patterns (more or less) Changes in sleeping patterns (more or less) Lowered grades (due to difficulty in concentration and attendance) "Perfect" child syndrome Bad" child syndrome Drug use increase Sexual promiscuity Reckless or self-destructive behavior Crying Non-stop talking/attention-getting 	 Self-blame and guilt. "I caused it to happen." "I could have prevented it." Fear of the dark, going to sleep, new places and experiences: "Who will take care of me now?" "Will it happen to me, too?" "Will people care about me?" "Will people care about me?" "Will God punish me? Numbness Vithdrawal Demanding Helpless/Hopeless Toespair S Yearning and pining Unaccepting 10. Pensive 11. Anger 12. Anger disguised as general irritation 13. Sadness 14. Anxious 15. Bored 16. Apathy
Physical	Cognitive
 Changes in appetite Sleep disturbances or changes Bowel and bladder disturbances Temporary slowing of reactions Headaches Stomach aches Breathing disturbances Breathing disturbances Exaggeration of allergies Increased number of colds and infections Symptoms associated with illness or injury of the deceased 	 Impaired self esteem Disturbances in cognitive functioning (attention deficit, hyperactivity) Exaggerations in "magical thinking" ("I made it happen.") Loss-centered thinking Avoidance and denial of the loss Idealization of the past Idealization (unrealistic thinking) related to the loss Increase in nightmares/dreams
Source: Donna O'Toole, Growing Through Grief, 1989	

Common Fears & Questions

OF GRIEVING CHILDREN

- What happened?
- Was it my fault?
- Did I do something bad?
- Am I going to die?
- Are you going to die?
- Will others I love die?
- How old are you?
- Who will take care of me?
- What does dead mean?
- Why do people die?

- Where do people go when they die?
- Where is heaven?
- How can someone be underground and in heaven at the same time?
- Can I go too?
- Don't people get cold, hungry, or scared underground?
- Why would God take him/her away?
- When is (deceased's name) coming back?

Children have limited cognitive and verbal abilities and grief can be an overwhelming experience. They may or may not be able to directly communicate the above listed fears and questions. However, sensitive ears and eyes will be able to pick up on these themes in whatever forms they may appear. Even if there is no noticeable communication of these fears, chances are that some are there.

One might even say to a bereaved child, "When my grandmother died, I began to worry that other people I loved might die, too. I'm wondering if you have ever worried about that." Statements such as these do not put fears into children that do not exist. They will either tell you no, or, more likely, will grab the opportunity to hear an adult acknowledge and address this fear.

Acknowledging children's fears normalizes their experience and allows them to explore their fears and receive support. Remember, children have fantastic imaginations and will create their own answers when they can't find them elsewhere.



Helping Children Cope WITH GRIEF EMOTIONS

Listed below are some of the most common grief emotions and some specific activities to help children cope.

Anger

- Help your child identify specific things or people that make him/her angry.
- Modeling clay or playdough is great for relieving stress; have your child sculpt what makes him/her angry, then pound it flat.
- Suggest physical activity to deal with anger.
- Run around the yard
- Punch a pillow
- Scream in a closed room
- Kick a soccer ball
- Have your child let out anger into a tape recorder and then listen to himself expressing his anger.
- Suggest that your child write a letter to whomever he or she is angry with and then rip it up.

Guilt

- Have your child draw a picture of something that happened and that he/she now wished had happened differently.
- Make paper bag puppets (one of the child and one of the deceased) so your child can "talk" to his/her loved one and apologize or discuss their regrets.
- Write a letter to his/her loved one stating the regrets.
- Suggest that your child make his/her "confession" into a tape recorder and then erase it.
- Help your child recall all of the good things he/she has done.
- Help your child write his/her secret message onto a small strip of paper, attach it to a helium balloon, and then release his/her guilt into the air.

Sadness/Depression

- Reminisce by drawing a favorite memory.
- Make a collage out of magazine pictures that remind your child of his loved one.
- Look at photographs.
- Make a home video in which your child interviews other family members about their memories of his/her loved one.
- Talk about "keepsakes" that your child has selected to remember his/her loved one.
- Put together a scrapbook which can include: Photos, Newspaper clippings, Cards, Drawings

Fears

- Help your child identify specific fears and address them one at a time.
- Title a blank paper, "I worry about..." or "I am afraid of..." and then have your child draw a corresponding picture.
- Talk to your child about any nightmares.
- Draw the dream and then draw an acceptable ending for it.
- Help your child write his/her fears on the outside of a helium balloon, then release the balloon and fears into the sky.
- Keep daily routines and discipline consistent.
- Provide lots of hugs and safe touching.

Helping Grieving Children

1. Be aware of personal loss issues.

Our own experiences with death and grief can have a major impact on how we respond to our children.

2. Establish and maintain contact with the school.

Children spend many hours of their day at school. The more you can learn from teachers and school counselors, the better you will be able to provide support at home. Likewise, the more you can share with teachers about what you are observing at home, the better equipped the teachers will be.

3. Approach the topic of death and grief with your children.

If you tell children, "Let me know if you need to talk," there is a good chance they won't. Children are often uncomfortable initiating conversations about an emotionally laden topic, especially if they think it might upset their parents. Reach out to them and let them know it is okay to talk to you.

4. Keep in mind the developmental level of the child and begin there.

Younger children need simple, concrete definitions and explanations.

5. Use proper terminology

Such as cancer, death, died, etc. Avoid euphemisms like gone away, passed on, eternal rest, left us, etc. Abstract phrases such as these can confuse children.

6. Use the deceased person's name or title

(i.e., Mother).

7. Listen.

Let the child's questions guide you. Answer with a question until you understand exactly what the child is asking.

8. Review your conversation.

Ask the child to summarize what he/she heard you say. This provides opportunities to clarify misconceptions.

9. Be patient.

Remember, children may ask the same questions or tell the same stories over and over again as they process and adjust to their loss.

10. Avoid saying, "I know exactly how you feel."

Relate to the child's feelings, but do not take ownership of them.

11. Remember that grief may be intermittent.

Children grow up with their loss and may have reactions at various points of their development regardless of how long ago the loss occurred. Also, be aware of the resurfacing of emotions around important days of the year such as birthdays, holidays, and the anniversary of the death.

Helping Grieving Children SUGGESTIONS FOR PARENTS

12. Grief is often exhibited through behaviors.

Children need the structure of their normal routine, adult role models, appropriate limit-setting, and discipline. However, grieving children also need affection and security. The need to hear that we understand and that we care about them despite their acting-out behaviors.

13. Watch for academic decline.

Keep in mind that grieving children may not be well rested due to insomnia, sleep interruptions, and dreams. They many have trouble concentrating and getting their homework done. Offer to assist them with homework or see if the school can recommend a good tutor.

14. Share your thoughts, concerns, and feelings.

Children learn what is acceptable from parents/guardians. Give them permission to grieve by allowing them to see you grieve.

15. Reassure the child the death is not their fault.

Children often think something they did or thought must have somehow caused the death to happen.

16. Remember, loss and grief are unique.

Allow children to teach you what their loss means to them.

17. Encourage and provide opportunities for the expression of feelings.

Communicate that it is okay to express emotions. Use children's natural expressive outlets such as stories. Encourage and provide opportunities for the expression of feelings. Utilize children's natural expressive means such as stories, art, games, play, and music to stimulate expression and conversation.

18. Share your religious and spiritual beliefs with your child.

Children may become angry with God. Let them know that this is a normal reaction that happens to some people. Reassure them that God still loves them and will use time, love, and the special people in their lives to help them through their anger and pain.

19. It is okay to say, "I don't know" to your child.

Nobody has all the answers. There are some things beyond our understanding.

20. Do not be afraid to seek grief support for your child.

Individual support can address personal loss issues, and support groups can help children feel less isolated and different from others their age.

Reference: Fitzgerald, Helen. The Grieving Child: A Parent's Guide, New York: Simon & Schuster 1992.

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How Can I Tell IF MY CHILD NEEDS COUNSELING?

First of all, trust your instincts. If your gut feeling tells you a child needs additional support, work to get that help for him. Many of the signs and symptoms of complicated grief are the same responses we see in normal grief. What makes these "red flags" is a matter of degree. Fear and/or anger, for example, are normal grief reactions. Persistent or prolonged fear or anger, however, is symptomatic of unmet mourning needs. If the child is progressing in his or her grief journey, reactions should soften in intensity and duration over time.

Signs of Normal Grief	Signs of Complicated Grief or Clinical Depression
Usually connect depressed feelings to the death.	• Often do not relate depressed feelings to any life event.
Disbelief, denial, shock.	 Total denial of the reality of the death.
Often openly angry.	• May suppress anger. May complain and be irritable, but
 Sense of unreality, withdrawal from others. 	may not directly express anger.
• Disruption of typical behavior patterns or personality.	 May be persistently angry and hostile.
Children respond to comfort and support.	 Consistent withdrawal from family and friends.
• Can still experience moments of enjoyment in life.	 Prolonged change in behavior or personality.
• Adults can sense sadness and emptiness in the child.	 Often reject support.
Often have transient physical complaints.	 Often project a pervasive sense of doom.
 May express guilt over some aspect of the loss. Self-esteem temporarily impacted, but is intact. 	 Often project a sense of hopelessness and chronic emptiness.
	 May have chronic physical complaints or actual medical illness.
	 Often have prolonged feelings of guilt over the death or generalized feelings of guilt.
	• Typically a deep loss of esteem. May use drugs & alcohol.
	 Suicidal thoughts or actions.

So once you determine a grieving child may benefit from counseling, how do you tell her/him? Talk to the child with compassion and understanding. Many children and adults associate counseling as something for people who have something wrong with them. Assure children that they are not crazy or abnormal. Explain that, just as there are people like doctors and nurses who can help with physical pain such as a broken arm, there are people who can help with the pain of grief.

References: Wolfelt, Alan. Healing the Bereaved Child, Fort Collins, Colorado: Companion Press. Simons, R.C. Understanding Human Behavior in Health and Illness, Baltimore, Maryland: Williams and Wilkens.

Books for Children & Teens

Dealing with Illness, Grief & Loss

Frahm, Amelia (2001). <u>Tickles Tabitha's Cancer-Tankerous Mommy.</u> Nutcracker Publishing Company. Told through Tabitha's eyes, this book uses candor and comic reality to dispel stereotypes and acknowledge the moody truths faced by families living with cancer.

Heegaard, Marge (1991). <u>When Someone Has a Very Serious Illness</u>. Minneapolis, MN: Woodland Press This is a workbook created to help young children understand and accept the changes in their lives when a loved one is diagnosed with a life threatening illness.

Le Shan, Eda (1987). <u>When a Parent is Very Sick.</u> Little Brown and Co. This book identifies the many responses a young person might have to a parent's illness, hospitalization, or death.

Numeroff, Laura, & Harpham, Wendy (1999). <u>The Hope Tree</u>. New York, NY: Simon & Schuster. Various kids describe their feelings and how they cope with their mothers' breast cancer.

Parkinson, Carlolyn (1996). <u>Mommy's In the Hospital Again</u>. Solace Publishing. An honest caring depiction of how life can go on successfully for a child and family despite the painful experiences of dealing with the unpredictable course of mom's illness in a gentle, easily understandable, and non-frightening fashion.

Parkinson, Carolyn (1991). <u>My Mommy Has Cancer</u>. Rochester, NY: Park Press. A book for young children explaining cancer and why hospitalization is necessary. Written by a mother who has cancer.

Peterkin, Allen (1992). <u>What About Me?</u> New York, NY: Magination Press. A book for siblings when a brother or sister has an illness.

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Vigna, Judith (1993). <u>When Eric's Mom Fought Cancer.</u> Morton Grove, IL: Albert Whitman & Company. A ski trip with his father helps a young boy who feels angry and afraid when his mother gets sick with breast cancer.

Specifically Children and Grief

Brown, Laurene Krasny and Brown, Marc Tolon (1996). <u>When Dinosaurs Die: A Guide to Understanding Death</u>. Boston. The authors explain in simple language the feelings people may have regarding the death of a loved one and the ways to honor the memory of someone who has died.

Greenlee, Sharon (1993). <u>When Someone Dies</u>. Atlanta, GA: Peachtree Publishers, Ltd. Great discussion starter. Attempts to describe the "goneness" created by death. (No more phone calls or birthday cards). Helpful suggestions for remembering and taking care of yourself.

Puttock, Simon and Bartlett, Alison (2001). <u>A Story for Hippo</u>. New York, NY: Scholastic Press. A gentle and reassuring book for anyone who has ever lost a loved one. With beautiful simplicity, it answers difficult questions that even a very young child can understand and shows us how to keep the spirit of a cherished person alive forever.

Karst, Patrice and Stevenson, Geoff (2000). <u>The Invisible String</u>. Marina Del Rey, Calif. Author Patrice Karst shows children that they are always loved, whether their parents are near or far. This lesson is perfectly suited for a variety of situations, including for military families while a parent is serving overseas as well as for coping with loss.

Greive, Bradley Trevor (2005). <u>The Blue Day Book for Kids: A Lesson in Cheering Yourself Up</u>. Kansas City, Mo: Andrews McMeel Publishing. The deceptively simple, imaginative story line reflects a child's sensibility about the symptoms, causes, and cures for those times when children feel tired, grumpy, left out, or think that nothing ever goes as they planned.

Books for Children & Teens cont.

Specifically Children and Grief cont.

Kaplow, Julie B. and Pincus, Donna (2007). <u>Samantha Jane's Missing Smile: A Story about Coping with the loss</u> of a Parent. Washington, DC: Magination. Since her father died, Samantha Jane has become fearful and does not want to acknowledge her grief. Using examples from the natural world this book shows how to acknowledge feelings and give them a proper place in life.

Holmes, Margaret M. and Mudlaff, Sasha J. (2000). <u>A Terrible Thing Happened</u>. Washington, DC: Magination. This gently told and tenderly illustrated story is for children who have witnessed any kind of violent or traumatic episode, including physical abuse, school or gang violence, accidents, homicide, suicide, and natural disasters such as floods or fire.

Bostrom, Kathleen Long and Kucharik, Elena (2000). <u>What about Heaven?</u>. Wheaton, III.: Tyndale House. The rhythmic rhyming book begins with questions kids ask about heaven and answers each one in a theologically accurate yet age-appropriate manner, including scriptures to reference.

Thomas, Pat (2001). <u>I Miss You</u>. Hauppauge, NY: Barron's. Explores the difficult issue of death for young children.

Johnson, Marvin and Johnson, Joy (2003). <u>Where's Jess?: For Children Who have a Brother or Sister Die</u>. Omaha, NE: Centering Resource. A helpful resource for children who have lost a sibling through illustrations and easy to understand text.

Specifically Teens and Grief

Hanson, Warren (1997). <u>The Next Place</u>. Minneapolis, MN: Waldman House. An inspirational journey of light and hope to a place where earthly hurts are left behind.

Loftis, Chris and Gallagher, Catherine (1997). <u>The Boy Who Sat by the Window: Helping Children Cope with</u> <u>Violence</u>. Far Hills, NJ: New Horizon. A story of a small boy whose classmate is killed by random gunfire includes coping skills and restores hope by instilling a message of peace.

Hipp, Earl (1995). <u>Help for the Hard Times</u>. Hazelden. A guide that helps teens understand how they experience grief and loss; how our culture, in general, doesn't often acknowledge their losses or give them tools to grieve; how they can keep their loss from overflowing.

Traisman, Enid Samuel (1992). <u>Fire In My Heart, Ice In My Veins</u>. Omaha, NE: Centering Corporation. A journal for teenagers experiencing a loss. Just reading it will let them know that all of their feelings are normal even though some may feel crazy. Writing in it will help them explore their feelings and insure they will never forget.

Noel, Brook and Blair, Pamela (2000). <u>I Wasn't Ready to Say Goodbye: Surviving, Coping & Healing after the</u> Sudden Death of a Loved One. Vancouver, WA: Champion.

Hughes, Lynne (2005). You are Not Alone. New York, NY: Scholastic Press. The loss of a parent has been called "the loss that is forever" and young people who have suffered this loss feel especially different than those around them. This book reaches out to teens and people who care for them with understanding and compassion. Frank and accessible testimonials, along with discussion of what helps, what doesn't, what "stinks," and ways to stay connected to loved ones.

Wolfelt, Alan (2001). <u>Healing Your Grieving Heart for Teens.</u> Fort Collins, CO: Companion Press. When you are a teen, the death of someone you love can be especially difficult. Being a teen is hard enough; being a grieving teen can feel completely overwhelming. This book was written to help teens understand and deal with their unique grief. It gives many really simple, practical ideas and suggested activities.

Books for Adults Helping Children & teens Affected by Grief or life-threatening illness

Fitzgerald, Helen (1992). <u>The Grieving Child: A Parent's Guide</u>. New York, NY: Simon & Schuster. A wonderful, readable book for parents to help understand how grief is different for children. Great suggestions for processing feelings, both within and without a group.

Heiney, Sue et. al (2001). <u>Cancer in the Family</u>. Atlanta, GA: American Cancer Society. This book outlines valuable steps necessary to help children understand what happens when a parent has been diagnosed with cancer. "Hands-on-tools" help those affected by cancer, as well as their loved ones, face many of the dilemmas that come with the disease. A specially illustrated workbook designed just for kids helps even the youngest children record their thoughts and feelings so they can learn how to navigate through this emotional time.

Huntley, Theresa (1991). <u>Helping Children Grieve</u>. Minneapolis, MN: Augsurg Fortress. This book will help you listen to children, answer their questions, and guide them in coping with their feelings. Also included are ideas for dealing with behavior changes that often accompany a child's grief.

Linn, Erin (1990). <u>150 Facts About Grieving Children</u>. The Publisher's Mark, Children do grieve, and with an intensity that would astound many adults. We are obligated to learn more about a child's bereavement. We must begin to understand their world, their feelings, and their hurts.

McCue, Kathleen (1996). <u>How to Help Children Through a Parent's Serious Illness.</u> St. Martin's Griffin. A thorough, but quick guide for parents and professionals, from diagnosis of an illness to resolution. Each chapter has a wonderful summary at the end. Topics covered include what to tell, how to deal with different ages children, and helpful hints for effective communication.

Wolfelt, Alan (1983). <u>Helping Children Cope with Grief</u>. Accelerated Development, Inc. Written to assist adults in helping children deal with their thoughts and feelings on death. Especially helpful is its approach to naming and teaching the skills needed to help children share their grief.

Coping as a Family

Communication is the key to coping and growing as a family through grief. It is important to be together to talk, cry, rage, or even sit in silence. At the same time, there should be respect for each member's way of handling grief. Some family members will grieve privately, others openly, and others with a combination of these two styles. In many ways, each family member must grieve alone. Here are some suggestions to help with family grief. Suggestion for easier reading:

- Continue to give attention and time to your present family members when you are together. Let them know that you love them.
- Maintain balance of attention between deceased family member and surviving family members.
- Try to be sensitive to each other's feelings. Feelings are often difficult to verbalize. Listen to what is meant as well as what is said.
- Hugs, a hand on the arm or back give comfort and a sense of closeness.
- It may be helpful to set aside time to be "alone together" as a family or to even hold a family meeting. Encourage but don't pressure family members to talk and express grief in their own way. Be a good listener.
- Plan family projects or trips.
- Make a "family diary" in which each family member may contribute a writing or drawing. You may want to make a collage together.
- Be careful not to give each other the silent treatment. Make sure the person who has died continues to be part of family conversations.
- Respect the life stages of various family members; an adolescent might gravitate towards peers in coping with grief. Everyone has a unique way of grieving which can at times be at cross purposes among family members. Accept each person's methods of coping.
- Discuss the loved one's former role in the family which now necessitates changes in family duties and new roles for the survivors in the family. Be careful not to expect a family member to replace or to be the same as the member who died (expecting a young boy whose father died to be "the man of the house" or a son whose sibling died to be like that sibling in schoolwork, sports, etc.). Discuss what will be missed and irreplaceable.
- If depression, withdrawal, grief or family problems are getting out of control, seek professional help.
- Recognize that anniversaries, birthdays, and special holidays will be difficult for the family. Discuss together how to observe these occasions. Should there be a variation on traditional celebrations? Do any family members have particular concerns, suggestions?
- Consult family members on the disposition of the deceased loved one's possessions, including his/her room. Take your time and tread carefully where these precious mementos are concerned. If possible, put off making major decisions about moving, giving away possessions, etc.
- Studies show that a bereaved person's self-esteem is extremely low. Survivors should work on their image of themselves and help each family member to think and feel good about themselves.
- Remember, it is difficult to help your family if you are falling apart. Working on your own grief will eventually enable you to help your family members cope with their grief.
- If you can learn to share your grief as a family, you will grow as a family.

Adult Grief

REFERENCE: THERESE RANDO, PHD

Grief: You can expect that...

- your grief will take longer than most people think.
- your grief will take more energy than what you would have imagined.
- your grief will depend on how you perceive the loss.
- your grief will entail mourning not only for the actual person who died, but also for all the hopes, dreams and unfulfilled expectations you had with that person. You will also grieve for those needs that go unmet because of the death.
- you will grieve for what you have already lost and what you have lost for the future.
- you will grieve for many things symbolic and tangible, not just the death alone.
- your grief will resurrect old issues, emotions and unresolved conflicts from the past.
- your grief will create some identity confusion as a result of your major loss.
- your grief may cause you to begin a search for meaning and you may find yourself questioning your faith and/or philosophy of life.

You may...

- feel as though the loss isn't real, that it actually didn't occur.
- become obsessed with the death and experience an intense preoccupation with the deceased.
- have a need to recount things about your loved one and retell the events and experiences surrounding the death.
- feel a tightness in your throat or heaviness in your chest.
- have an empty feeling in your stomach and either loose your appetite or begin eating more.
- have difficulty sleeping and dream of your loved one frequently.
- feel as though you need to take care of the other people who are uncomfortable around you by politely not talking about your feelings of loss.
- sense the loved one's presence. You may find yourself expecting the person to walk in the door and the usual time, hear his/her voice or even see his/her face.
- experience grief spasms. These acute feelings of grief that occur suddenly with no warning. You may find you cry at unexpected times.
- have a combination of feelings ~ anger, guilt, frustration, irritability, annoyance, or intolerance with yourself and others.
- feel guilty or angry over things that happened or didn't happen in the relationship with the deceased.
- feel restless and look for activity, but find it difficult to concentrate.
- wander aimlessly around the house. You may find yourself disorganized, starting but not finishing tasks.
- feel your mood change over the slightest thing. You may wonder if you're going "crazy"?! (...You're not!)
- assume mannerisms or traits of your loved one.
- alternate between periods of seeking the company of others and withdrawing, preferring to be alone.

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Recommended Reading

Cornerstone of Hope has a Bereavement Library with several hundred volumes of books on all topics related to grief, including Infant/Neonatal Loss, Suicide, resources for children and teens, faith-based books, and more. Please drop in during normal business hours to check out as many books as you need. Some of our favorite selections are:

- The Journey Through Grief: Reflections on Healing by Dr. Alan Wolfelt
- <u>Healing a Parent's Grieving Heart</u> by Dr. Alan Wolfelt Note: Dr. Alan Wolfelt is one of the leading authorities on grief care, and has a number of great books. His books can be ordered directly at Companion Press, 3735 Broken Bow Road, Fort Collins, CO 80526 or www.centerforloss.com
- <u>I Wasn't Ready To Say Goodbye: Surviving, Coping and Healing After the Sudden Death of a Loved One</u> by Brook Noel and Pamela D. Blair, PhD
- <u>A Healing Year Daily Meditations for Living With Loss</u> by Alaric Lewis, O.S.B.
- Children Mourning, Mourning Children by Kenneth Doka, PhD
- The Centering Corporation has a free catalog with hundreds of books and resources for the bereaved. You can request their catalogue on their website at <u>www.centeringcorp.com</u>

Other Resources/Social Media

First Call for Help, a United Way agency, is an information clearing house for many local resources, including bereavement support groups and grief counselors. They can be reached by dialing 211 on your phone.

School Crisis Team is a crisis intervention available to schools throughout Cuyahoga County. Contact Cornerstone of Hope for more details.

Hello Grief developed by Comfort Zone Camp, Inc. to start an online discussion about the impact of loss, and how to help grieving persons cope; as well as build a community of support for those living with grief. <u>www.hellogrief.org</u>

What's Your Grief promotes grief education, exploration and expression in both practical and creative ways in a supportive social media community. <u>www.whatsyourgrief.com</u>

Suicide is Different

FROM "A HANDBOOK FOR SURVIVORS OF SUICIDE," BY JEFFREY JACKSON

Death touches all of our lives sooner or later. Sometimes it is expected, as with the passing of an elderly relative; sometimes it comes suddenly in the form of a tragic accident.

But suicide is different. The person you have lost seems to have chosen death, and that simple fact makes a world of difference for those left to grieve. The suicide survivor faces all the same emotions as anyone who mourns a death, but they also face a somewhat unique set of painful feelings on top of their grief.

GUILT

Rarely in other deaths do we encounter any feelings of responsibility. Diseases, accidents, old age... we know instinctively that we cannot cause or control these things. But the suicide survivor – even if they were only on the periphery of the deceased's life – invariably feels that they might have, could have, or should have done something to prevent the suicide. This mistaken assumption is the suicide survivor's greatest enemy.

STIGMA

Society still attaches a stigma to suicide, and it is largely misunderstood. While mourners usually receive sympathy and compassion, the suicide survivor may encounter blame, judgment, or exclusion.

ANGER

It's not uncommon to feel some form of anger toward a lost loved one, but it's intensified for survivors of suicide. For us, the person we lost is also the murderer of the person we lost, bringing new meaning to the term "love-hate" relationship.

DISCONNECTION

When we lose a loved one to disease or an accident, it is easier to retain happy memories of them. We know that, if they could choose, they would still be here with us. But it's not as easy for the suicide survivor. Because our loved one seems to have made a choice that is abhorrent to us, we feel disconnected and "divorced" from their memory. We are in a state of conflict with them, and we are left to resolve that conflict alone.

Write yourself a script. Suicide survivors often find themselves faced with uncomfortable questions from outsiders. It will help if you can anticipate some of these and write yourself a "script" of answers that you can mentally keep at the ready. For example, when someone probes for details of the suicide that you are not comfortable discussing with them, you might simply say "I do not want to talk about it right now," or "I'm sure we can find something happier to discuss." When new acquaintances learn of your loss, they may ask "How did they die?" You should have no reservations about saying plainly, "They took their own life," or a straightforward "They committed suicide." But if this is a casual acquaintance that you wish to deny this information, you would be equally justified in saying, "They suffered a long illness," which may very much be the truth. The more you fear these kinds of inquiries, the better a prepared "script" of answers will serve you.

The Suicide Survivor's Affirmation

FROM "A HANDBOOK FOR SURVIVORS OF SUICIDE," BY JEFFREY JACKSON

Someone I loved very much has ended their own life. I will never truly know all that was happening in their mind that brought them to that tragic choice.

However, there are things of which I can be reasonably certain...

- If they were here, even they could not fully explain their mindset or answer of all of my questions.
- In their state of mind, they could not have fully comprehended the reality of their own death.
- They could not have fully appreciated the devastating impact their suicide would have on the people in their life.

As such, by their last act, they made their most tragic mistake, unknowingly creating unparalleled pain in the hearts of those whom they most loved.

The person I lost is beyond my help now in every way but one:

• I can help them by working to ease the pain they have caused and by not allowing their most enduring legacy to be one of tragedy.

They benefit from this help whether or not I perceive them as welcoming it, in the same way that we help the aggressor whenever we nurse his victim–by minimizing the damage he has caused.

As a result, each and every day, I can help the person I lost by...

- enjoying life.
- smiling and laughing.
- not dwelling in feelings of sadness or remorse.
- loving others.
- taking new steps in life toward positive new horizons.
- helping those who feel their loss to do the same.
- and, in short, not letting their mistake continue to create sorrow, neither in the world around me, nor in myself.

I will try to picture my most loved one asking me to do this every day-to please help undo the damage they caused in whatever little ways possible.

And I promise that I will.

SUGGESTIONS FOR SURVIVORS OF SUICIDE

BY IRIS M. BOLTON

1. Know you can survive; you may not think so, but you can.

- 2. Struggle with "why" it happened until you no longer need to know "why" or until YOU are satisfied with partial answers.
- 3. Know you may feel overwhelmed by the intensity of your feelings but that all your feelings are normal.
- 4. Anger, guilt, confusion, forgetfulness are common responses. You are not crazy; you are in mourning.
- 5. Be aware you may feel appropriate anger at the person, at the world, at God, at yourself. It's okay to express it.
- 6. You may feel guilty for what you think you did or did not do. Guilt can turn into regret, through forgiveness.
- 7. Having suicidal thoughts is common. It does not mean that you will act on those thoughts.
- 8. Remember to take one moment or one day at a time,
- 9. Find a good listener with whom to share. Call someone if you need to talk.
- 10. Don't be afraid to cry. Tears are healing.
- 11. Give yourself time to heal.
- 12. Remember, the choice was not yours. No one is the sole influence on another's life.
- 13. Expect setbacks. If emotions return like a tidal wave, you may only be experiencing a remnant of grief, an unfinished piece.
- 14. Try to put off major decisions.
- 15. Give yourself permission to get professional help.
- 16. Be aware of the pain in your family and friends.
- 17. Be patient with yourself and others who may not understand.
- 18. Set your own limits and learn to say no.
- 19. Steer clear of people who want to tell you what or how to feel.
- 20. Know that there are support groups that can be helpful with other survivors of suicide. If not in your area, ask a professional to start one.
- 21. Call on your personal faith to help you through.
- 22. It is common to experience physical reaction to your grief, e.g. headaches, loss of appetite, inability to sleep.
- 23. The willingness to laugh with others and at yourself is healing.
- 24. Wear out your questions, anger, guilt, or other feelings until you can let them go. Letting go doesn't mean forgetting.
- 25. Know that you will never be the same again, but you can survive and even go beyond just surviving.

Suicide Survivor Resources

Support Groups

LOCALLY

Cornerstone of Hope, located in Independence, has professionally-led, eight-week groups for children, teens and adult survivors of suicide. Groups run quarterly; call for current dates. 216-524-3787

LOSS (Local Outreach for Suicide Survivors) Franklin County offers peer-led response to the suicide scene to provide resources, support and hope to those left behind. Email franklincountylossteam@gmail.com. There may be other LOSS groups in your areas, please visit <u>www.lossteam.com</u> for additional resources.

SOS (Survivors of Suicide) a peer-led group that meets twice a month in various locations on the east and west sides of Cleveland. Email Cheryl at m3nowak@yahoo.com or call Maureen at 440-237-1359 for meeting locations and times.

Robertson Bereavement Center in Medina has a professionally-led support group. Call 330-725-1900 for details.

NATIONALLY

Please contact these national organizations to find a local chapter near you:

The American Association of Suicidology: 202.237.2280 or www.suicidology.org

The American Foundation for Suicide Prevention: 888.333.2377 or www.afsp.org

The Link's National Resource Center for Suicide Prevention and Aftercare: 404.256.2919 or www.thelink.org

National Suicide Prevention Lifeline: 800.273.8255

Books

No Time to Say Goodbye, by Carla Fine, Doubleday publishing

Why Suicide? by Eustace Chesser, Arrow Book publishing

Healing After the Suicide of a Loved One, by Ann Smolin and John Guinan, Simon and Schuster publishing

Life After Suicide" A Ray of Hope For Those Left Behind, by E. Betsy Ross, Insight Books publishing

My Son... My Son: A Guide to Healing After Death, Loss or Suicide by Iris Bolton, Bolton publishing

Murder Loss

The loss of a loved one to accident or illness is heartbreaking, but the devastation is exacerbated when the loss is due to a traumatic crime. The horribleness of the death amplifies the grief of the surviving loved ones and forever scars their memories of the beloved victim. All too often, when an individual succumbs to a violent death, the person is remembered for how they died rather than for how they lived.

The families of murder victims face many unique struggles in their process of bereavement. A sense of loss of control is common, and the suddenness of the death is so overwhelming that, for a period of time, families are often incapable of processing through the grief. For these individuals, dealing with spiritual beliefs, attitudes toward life, and general physical health may hold special importance.

The victim's family and loved ones should understand that they don't have to suffer alone; there are many experts who can guide them through the process of coping with grief associated with murder, as well as lead them toward recovery. Begin a search with one's local police or sheriff's department. Ask if their staff can provide contact information for a local grief counselor who specializes in victim services. Additionally, consider the following questions and suggestions:

How Can I Help Myself?

- Keep a journal; sometimes it is helpful to write down in words what you are feeling and thinking.
- Talk about your loved one, if you would like to do so. Although it may be painful, it can help you heal.
- Take time to participate in a familiar activity with your family. This helps to provide stability when your world is feeling chaotic.
- Join a support group; people often respond that becoming involved in bereavement groups helped them through their loss and strengthened their relationships with others.
- Seek therapy when you, or others close to you, feel that your grief is becoming too difficult to bear, or is too prolonged.

Murder Loss Resources

Family or Individual Therapy

Support Groups

When a person is dealing with the death of a loved one due to murder, their grief can be complicated. General grief issues are addressed, as well as the specific needs that arise after a traumatic death. If you or someone you know is looking for support after the murder of a loved one, this group could be just what you need. Find a support group and talk with others who understand the depth of your pain. Cornerstone of Hope offers an eight-week group specifically for those who have lost a loved one to murder.

Online Resources

Websites

PARENTS OF MURDERED CHILDREN, INC. : Parents of murdered children make the difference through ongoing emotional support, education, advocacy and awareness. They provide support and assistance to all survivors of homicide victims while working to create a world free of murder. There is a list of local chapters in Ohio. www.pomc.com/

NOVA : NOVA's mission is to promote rights and services for victims of crime and crisis everywhere. Its experience is described in the following review of its guiding purposes. www.trynova.org

BEREAVED PARENTS OF THE U.S.A. : Bereaved Parents of the USA (BP/USA) is a national non-profit, self-help group that offers support, understanding, compassion and hope, especially to the newly-bereaved, whether they are bereaved parents, grandparents, or siblings struggling to rebuild their lives after the death of their children, grand-children or siblings.

www.bereavedparentsusa.org

Books

• Coping with Traumatic Death: Homicide, by Bob Baugher.

Someone you love has been murdered. This book is intended to help you understand what to expect after the homicide of a family member or friend. The book is divided into sections that cover the first few days, weeks, and months; the first year; and beyond. One reader commented, "If this booklet had been available when I was told of my brother's homicide, I would have carried it with me and used it often."

• What to Do When the Police Leave : A Guide to the First Days of Traumatic Loss, by Bill Jenkins.

Written by a victim for other victims and their caregivers, this book offers authoritative and invaluable advice, guidance, and resources for families dealing with the traumatic loss of a family member or friend. This one of a kind resource is heart-to-heart practical advice from one who has been through the trenches of grief and loss, encouraging and helping others in their own paths. The victim's voice has never been heard so clearly.

•A Grief Like No Other: Surviving the Violent Death of Someone You Love, by Kathleen O'Hara.

From mass tragedies, such as suicide bombings, to sensationalized crimes that make the news only to be replaced by yet another victim-filled crime, more families and friends are left with the aftermath of dealing with the violent death of a loved one. Violent death brings its own special brand of grieving: Victims' families can spend years dealing with the legal ramifications, guilt, and myriad other unique circumstances. This book guides the reader to a point of survival.
Grief in the Workplace

FROM THE UNIVERSITY OF PITTSBURGH SCHOOLS OF THE HEALTH SCIENCES

We handle grief differently in the workplace than we do at home. Many of us try not to cry or show emotions at work because we are under social pressure to act normally regardless of the crisis. We tend to view a show of emotions as a sign of weakness, but that is far from the truth. When a sense of loss is present in the workplace, everyone typically experiences a series of emotions that cycle through the grieving process.

Those emotions are:

- shock/denial
- inward anger
- outward anger
- depression
- acceptance

Some may not experience every emotional stage, while others will linger longer in one stage than another. One person may have intense feelings and another may deny that any loss has occurred.

It is important to understand grief in the workplace because our jobs are a large part of our daily lives. It can be difficult to maintain productive relationships with someone who is angry, anxious, and depressed, and interacting with traumatized people can make others feel traumatized as well. Each of us must make our own adjustments and deal with our own issues.

Each of us grieves differently. During times of crisis or upheaval, we all must grieve losses: the actual physical losses of co-workers; the loss of our sense of security; the loss of the workplace as it was; and the loss of our roles in the workplace as it was. Most people have difficulty recovering from the experience of loss and the subsequent anger and anxiety by themselves. Without the help of others, many people may express their feelings of loss in inappropriate or misdirected ways. If you would like to help someone deal with their loss, try to show that you understand their pain and be positive, assertive, open and sensitive.

How can I make the loss more bearable?

- Express your emotions and talk to others
- Control your response to adverse conditions
- Weigh your options before acting
- Examine realities
- Pace yourself
- Improve your planning and organization
- Increase your sense of control, but try not to need too much control
- Ease up on yourself
- Learn ways to relax healthfully
- Recognize that you can handle a lot more than you thought you could

Helping Employees

FROM THE UNIVERSITY OF PITTSBURGH SCHOOLS OF THE HEALTH SCIENCES

Following a traumatic incident, everyone has some type of an emotional response. Each person will recover at his or her own rate, and for some, recovery can be a long and difficult process. Here are some suggestions to help employees through this trying time:

• Tell employees how you feel and that you are sorry they have to face this experience. Avoid the following statements, which may make the employees think their feelings are not understood:

- I know how you feel.
- Everything will be all right.
- You shouldn't feel that way.
- Be willing to say nothing sometimes. Just being there is often the most supportive thing you can do to help. Be visible to your employees. Circulate among them and be available to those who want to talk.
- Maintain a normal workday routine, but be flexible. Employees will generally be most comfortable when things feel familiar, but some may need special consideration.
- Attempting to explain why this incident happened is not usually helpful. Your explanation may not be believed and trust may be damaged.
- Be aware that employees may need to talk among themselves. One way people adjust to a crisis is to talk through it, and make some sense of the event.
- Be alert to signs that an employee may be having an especially hard time. The employee may seem depressed, with drawn or unusually silent. Or, he/she may be tearful or extremely anxious.
- Recognize that you are also human and are experiencing an emotional response. If you are focused on assisting employees, you may overlook your own needs. Find someone you trust–a friend, a manager, or a family member–and let them know that you need to talk.

Ideas for a Memory Box



- Photograph of you and your loved one
- Cards and letters from your loved one
- Recipe for you loved one's favorite dish
- Recipe for the favorite dish that your loved one used to make
- Drawings
- Obituary
- Funeral program
- Dried flower from the funeral
- Mementos
- Handkerchief scented with loved one's perfume / cologne
- Old ticket stubs
- Programs from special events
- Photographs of loved one as a child, wedding photo, etc.

Time Remembered

There are many creative ways to help your child cope with emotions and grief after a death. One focus could be on evoking memories of the loved one. Reminiscing is a healthy way to help your child through this difficult time. The following are some ideas to help you do this. Pick one or two that are good for you and your child and have fun!

DRAWING

You might suggest to your child that he/she draw a favorite memory that involves the loved one who died. Do one of your own, too. Then share them and just enjoy remembering. What about unhappy memories? What if your child says, "I remember when Daddy yelled at me, and I didn't even do anything!" Don't panic! We all have both good and bad memories, even our children. It is healthy to express all of our memories. You may want to encourage your child to draw an unhappy memory. This may help your child understand that relationships and people are not perfect, and that it's okay to hold on to all memories.

KEEPSAKES

Keepsakes that the child has selected to remember a deceased loved one are often more valued than the ones which we, as parents, select for them, but all keepsakes have the potential to revive pleasant memories. Find opportunities to share these special items with each other. Memories are wonderful things. They are ours, and no one can take them away from us. Memories may seem painful early in grief because they are a reminder of how much you have lost. However, with the passage of time they do a flip-flop and become treasures like an old quilt or a favorite sweatshirt.

PHOTOGRAPHS

Looking at pictures can be helpful for some and painful for others. Keep this in mind when suggesting that you get out that old box or album of pictures. Looking at pictures may be most useful for the child who is uncomfortable talking about the loved one. This can be a safe, non-threatening way to open communication. There may be tears as well as laughter.

Grief & the Scriptures

A BIBLE READER'S AID FOR STRENGTH AND GUIDANCE IN A TIME OF NEED

Many people turn to their faith in times of intense stress and grief. The following scriptures are meant to help those in search of meaning at this most difficult time in their lives.

When You Are Afraid

The Lord is my light, Ps. 27 Lazarus is raised from the dead, John 11 Jesus arises from the dead, John 20 Jesus prays for his followers, John 17

When You Are Worried

Take no thought, Matt. 6:25-34 O give thanks unto the Lord, Ps. 107 Be careful for nothing, Phil. 4:6 Humble yourselves, I Pet. 5:6-10 Be content, Heb. 13:5 Fret not thyself, Ps. 37

When You Are Bereft

Jesus has compassion, Luke 7:11-15 Christ's victory over death, I Cor. 15 Sorrow not, I Thes. 4:13-18 Christ comforteth, John 14:1-4 Jesus, the bread of life, John 6:44-51 Bring your pain to God, Isa. 53:3-5: Heb. 4:14-16

When You Are Discouraged

The Lord is my shepherd, Ps. 23 Cast they burden upon the Lord, Job 11:13-19 Hear my prayer, O Lord, Ps. 102 Christ strengtheneth, Phil. 4:11-19 For this is the love of God, I John 5:3-11 The Beatitudes, Matt. 5:3-12 God watches over all, Luke 12:6-7 Come unto me, Matt. 11:28-30 The Comforter, John 14:16-21; 26-27 The love of God, Rom. 8:28, 35-39

When You Need Comfort

He saveth the poor, Job 5:15-24 If thou prepare thine heart, Job 11:13-19 For in the time of trouble, Ps. 27:5 In His favor is life, Ps. 30:5 Save me. O God. Ps. 54 The Lord is merciful, Ps. 103:8-14 This is my comfort, Ps. 119:50 In the day when I cried, Ps. 138:3-8 Comfort me on every side, Ps. 71:21 As one whom his mother, Isa. 66:13 Be of good comfort, 2 Cor. 13:11 The Lord hasth comforted, Isa. 49:13 And even to your old age, Isa. 46:4 They shall be comforted, Matt. 5:4 He that comforteth you, Isa. 51:12 I will not leave you, John 14:18

When You Are in Trouble

Preserve me, O God, Ps. 16 The Lord hear thee, Ps. 20 In Thee, O Lord, Ps. 31 I sought the Lord, Ps. 34:4-22 A refuge in times of trouble, Ps. 9:9-10 I waited patiently, Ps. 40 I called upon the Lord, Ps. 118:5-9 I will lift up mine eyes, Ps. 121 Yet man is born unto trouble, Job 5:7-8 Be not far from me. Ps. 22:11 In the time of trouble, PS, 27:5 I am in trouble, Ps. 31:9-14 Thou art my hiding place, Ps. 32:7 I cried unto God, Ps. 77 He shall call upon me, Ps. 91:15 Lord, be gracious, Isa. 33:2 The Lord is good, Nah. 1:7 Neither be troubled, I Pet. 3:14-16 My soul fainteth, Ps. 119:81-88

Grief & the Scriptures

A BIBLE READER'S AID FOR STRENGTH AND GUIDANCE IN A TIME OF NEED

When Friends Fail You

Plead my cause, O Lord, Ps. 35 Yea, mine own familiar friend, Ps. 41:9-13 For it was not an enemy, Ps. 55:12-23 If thy brother trespass, Luke 17:3-4 Bless them which persecute, Rom. 12:14-21

When You Are in Need of Peace

Hear me when I call, Ps. 4 He will speak peace, Ps. 85:8 We have peace with God, Rom. 5:1-5 The peace of God, Col. 3:15 But we have this treasure, 2 Cor. 4:7-18 God is our refuge, Ps. 46 O give thanks, Ps. 107 Peace I leave with you, John 14:27 The Lord will give strength, Ps. 29:11 For the kingdom of God, Rom. 14:17 And the peace of God, Phil. 4:7

When You Are in Need of Prayer

Have mercy on me, Ps. 4 Return, O Lord, Ps. 6 Unto thee, O Lord, Ps. 25 As the heart panteth, Ps. 25 David prays for mercy, Ps. 51 The Lord's prayer, Matt. 6:5-15 Pharisee and publican, Luke 18:10-14 Promise to disciples, John 14:13-14 Confidence in Jesus, I John 5:14-15 He shall hear my voice, Ps. 55:17 Cornelius' prayer answered, Acts 10 Ask, and it shall be given, Luke 11:9 By prayer and supplication, Phil. 4:6 Pray without ceasing, I Thes. 5:17 I intreated thy favor, Ps. 119:58 And ye shall see Me, Jer. 29:13

When You Are Weary

Eternal God is they refuge, Deut. 33:27 Cast thy burden, Ps. 55:22 Renew their strength, Isa. 40:31 When my soul fainted, Jonah 2:7 Come unto me, Matt. 11:28-30 My heart faileth, Ps. 73:26 Inward man is renewed, 2 Cor. 4:16

When You Need Patience

We count them happy which endure, James 5:11 Ye have need of patience, Heb. 10:36 Ask of God, James 1:3-5 Be patient, 1 Thess. 5:14 We shall reap, Gal. 6:9 Bring forth fruit, Luke 8:15 In your patience, Luke 21:19 The patient in spirit, Eccl. 7:8

When You Are Angry

He that backbiteth, Ps. 15:1-3 Jonah's anger, Jonah 4 He that is soon angry, Prov. 14:17 Make no friendship, Prov. 22:24 An angry man, Prov. 29:22 Be not hasty, Eccl. 7:9 Whosoever is angry, Matt. 5:22 Be ye angry, and sin not, Eph. 4:26 Cease from anger, Ps. 37:8 He that is slow to anger, Prov. 19:11 Put off all these, Col. 3:8

When You Feel That Justice Is Not Done

Jonah is reproved, Jonah 4 Avenge not yourselves, Rom. 12:19 God, to whom vengeance, Ps. 94:1 Justice and judgment, Ps. 89:14 The last shall be first, Matt. 19:27-30 Why standest thou afar off, Ps. 10

Mountain Trip

BY: ELOISE COLE

Grief is a process. We move through pain and loss; it is indeed a mountain process.

This grief model is built on the imagery of a long trip through the mountains. As we leave from our home base, we cannot take everything with us. Some of our significant support is not with us, like the loved one who has died.

This trip is through unfamiliar territory. As we leave town, we embark on the trip. The road will have interstate highways, where the trip does not seem quite so awesome. At times steep hills, hairpin turns and four wheel drive is our path. The weather changes from sunny to overcast. We may experience hail and thunderstorms, windy weather, and patches of sunshine. As we travel through varying terrain and different weather, it does not mean we have backed up and returned to our starting place; it means we are on a different part of the road.

As we process various emotions and move through the grief, feelings are often more intense. We may feel more lost, less anchored, set adrift. As the feelings and thoughts change, while uncomfortable and challenging, they often signal forward movements through the mountains.

This mourning journey affects us physically, emotionally, spiritually and intellectually.

Difficulty concentrating, low tolerance levels, emotional and physical pain are part of this process, part of this trip across the mountain.



The Power of Pain

BY: ASHLEY DAVIS PREND

"No one ever told me grief would be this painful," commented a woman who had lost her husband of thirty-three years. When someone you love dies, your world as you know it is shattered. A part of you dies as well ~ and all of this is painful. However, like many grievers, she was amazed by the fact that loosing someone you love hurts so unbearably. But why do we expect otherwise?

Our society does much to avoid pain. It encourages us to medicate ourselves, indulge in alcohol or seek mindless distractions. Our friends may encourage us to "move on" and "get over it." People are uncomfortable if we indulge our feelings of pain and anguish. They worry that we are wallowing in our grief and we may worry about that as well.

What some people may not understand is that pain is ultimately healing. You need to truly feel in order to heal. The pain, believe it or not, must be experienced, expressed, and externalized in order to move through your system. If pain is repressed or inhibited, then troubles will ensue later on. The troubles could range from depression or bitterness to lethargy and stagnation, among other things.

Staying with the pain takes a tremendous amount of courage, to be sure. It may be one of the hardest things of all to do when others push us to deny our pain. However, pushing directly through the grief by going into the abyss, by immersing yourself in the feelings of pain, by walking in the valley of the shadow, is exactly what is needed to heal. Time alone will not do this; time, plus feeling the pain, will.

Some people say they're afraid to really immerse themselves in the pain lest it destroy them. I generally tell grievers to ride the pain like a wave. Pain washes over you much like the rhythms of the ocean might. Mighty waves come crashing upon you, but then they recede. Gentler waves come lapping along, but they too recede. Just ride the waves of pain because even as they come pounding, they will eventually wash away from whence they came.

So if you find yourself awash in pain, don't think you are crazy. If you find yourself crying freely and often, even at the most inopportune moments, don't think you are insane. Know that you are healing and that the process is a natural response to having a loved one wrenched from your life. Know, too, that in time the pain will begin to soften its dull edge and the searing power will eventually fade.

Also know that even as pain stretches you, it leaves you with more capacity to contain the other side of pain which includes compassion, spirituality, and wisdom. But that will come in time. For now, don't be afraid of the pain. Feel it, let it honor your loved one, and rest assured that you are on the path to true healing.

Services Offered

BY CORNERSTONE OF HOPE

Support Groups (Eight to ten weeks in length, offered quarterly)

ADULT GROUPS

general and specific types of losses (such as Accidental Overdose, Murder, Suicide, Infant Loss, Loss of Spouse, Loss of Child, Perinatal/Infant Loss)

CHILDREN, TEENS, AND PARENT/CAREGIVER GROUPS "Taking F.L.I.G.H.T." (Families Living In Grief and Healing Together)

TAPS GROUP for families grieving the death of someone who served in the Armed Forces

MONTHLY SUPPORT MEETINGS FOR ADULTS AND TEENS AND FAMILY WORKSHOPS FOR ALL AGES

Counseling / Art Therapy

An affordable payment for each session Generally 8-10 sessions Individual, couple, or family Children, teens, and adults Individual or group sessions for local students held at their school Grief care only; mental health services are referred to community counselors

Continuing Education

Monthly programs for professionals, including two CEU's and dinner Department luncheons and community presentations for CEU credit Visit our website at <u>cornerstoneofhope.org</u> for list of topics and current schedule

Student Internship / Service Hour Programs

Master's level counseling, art therapy, and social work internship program Service hours for junior high and high school students Senior Projects for undergraduate students

School Services

Individual counseling / art therapy with grieving students at their respective schools Support groups led by professionals held at the school Crisis intervention after the death of a student, teacher, or traumatic event Crisis Intervention Team formation and training for neighboring communities Classroom presentations Administrative support and strategic crisis planning Serving all levels of public and private schools

Services Offered BY CORNERSTONE OF HOPE

Funeral Home Partnership Program

Introductory letter from partnering funeral home to each family explaining program Customized programs designed to meet the needs of families you serve on a daily basis All Cornerstone of Hope services now become services the funeral home can promote

Hospice Partnership Program

Monthly support/training meeting for hospice bereavement staff Free attendance at monthly CEU programs Free subscription to COH newsletter sent to your agency Individual counseling / art therapy for children, teens, adults, and families you serve Support Groups and special events for families of the hospice patient COH clinical staff available for consultation to the hospice team

Church Partnership Program

Dedicated Christ-centered organization to refer individuals and families to after a funeral Church members can participate in a variety of our programs Professional trainings for pastors and ministers to support their bereavement ministry

Corporate Partnership Program

Employee Assistance support for employees and their families On-site debriefing after a death Bereavement counseling for co-workers after the death of an employee Education and training for Human Resources staff

Other Programs

Summer bereavement camps Bereavement group facilitator training Resource library for grieving individuals and professionals who support them Volunteer program Annual memorial services, social outings, and guest speakers Free quarterly newsletter- contact us if you wish to be added to the mailing list

Contact Information

Address: 5905 Brecksville Road, Independence, OH 44131 Web: cornerstoneofhope.org e-mail: hope@cornerstoneofhope.org Phone: 216.524.4673 Fax: 216.524.3743

> Cornerstone of Hope is a 501 C(3) non-profit organization that would not be able to provide a single program without the generous donations of time, talent and treasure from local businesses, foundations, and individuals who give of themselves so freely to support our ministry. If you are interested in contributing to our organization, please contact us by phone at 216.524.4673. Our TAX ID # is 34-1945499.

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A CENTER FOR GRIEVING CHILDREN, TEENS AND ADULTS

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