



Journey to Healing

A Newsletter for Survivors of Suicide

Third Quarter 2017

Listening to Young Children's Grief

The grief responses of parentally bereaved pre-school-aged children can be easy to overlook. They are very oriented to the present, see death as reversible and their separation distress is expressed in brief episodes. Affection and attentive caregiving go a long way for bereaved children. In previous articles we have talked about the importance of attunement of the caregiver to the child's temperament, the necessity of routine, relaxation and play, and supporting the child's continued development. Yet, even with the essential stable base, a grieving young child's needs may be more complex than simply coping with absence. Sometimes, children struggle with grief challenges that are tied to their particular relationship with the deceased parent, and the nature of that relationship can influence their interpretation of the parent's sudden absence.

As the young progress between infancy and preschool stages, the way the attachment relationship is experienced has implications for their bereavement. Shapiro (1994) explains that an infant experiences grief through the disruption in caregiving, the loss of familiar body-feel and scent of the caregiver. Toddlers experience bereavement as separation. They will continue to look for the missing parent. Preschoolers have a beginning notion of death associated with the lack of movement they have observed in dead bugs, birds and animals, but they can't shift this notion to close attachment figures. Even with compassionate explanations that a deceased parent cannot return, the death of the parent is experienced as a frustrating, temporary absence. With only a beginning sense of what makes things happen or disappear, the young child may interpret the parent's absence in self-blaming terms.

Young children view the world from a self-referential perspective. That is, they believe their actions directly influence events around them. They have only the self as a way of understanding causality. From age three to six, losses and scary events might be managed with magical thinking: "I can keep the monsters away as long as I sit up with Teddy." "I dumped my oatmeal, and Daddy disappeared." "I disobeyed, and Mommy is gone." The absence of a vital attachment figure is understood in terms of the self.

In pre-school-aged children, self-esteem is influenced by a sense of mastery; being able to make things work, achieving more body control and competence, and practicing skills, such as writing letters and words. Behaviorally, they are practicing cooperation and compliance, but also continuing to develop autonomy by saying no, showing resistance, even disobeying. So, when a young child loses a parent with whom such struggles were rising, a sensitive situation exists. Because an egocentric view of causality is normal for children up to age 7, the child who remembers conflict with the deceased parent may carry feelings of guilt regarding the death. And although this way of making sense of the loss may be pre-verbal, the child will express it with mood and behaviors.

What are some indications that a young, bereaved child is struggling in this way? As the surviving parent or caregiver, consider honestly the reflection that the child generally received about him/herself in interactions with the parent who died. How were the child's autonomy-testing behaviors received by the parent? Was the relationship somewhat punitive? With

which parent did the child's non-compliant behaviors primarily occur? Are you aware of resilience in your child after a relationship conflict? Early childhood insecurities and frustrations are often met with self-blame, but children can be eased through these difficulties with caregiving that prioritizes and cultivates a message of self-worth. The child will gradually experience him/herself as affirmed and recognized when all feelings and preferences are acknowledged, with unacceptable behaviors receiving limits and alternative suggestions. This diminishes the power struggle and allows compassion and even good humor to redirect the child's behavior. It preserves the message that the child is precious, and the emotional experience is validated. With patience, we may witness the child's gradual competence in coping, and adaptation to age-appropriate expectations.

We typically see young children regress temporarily in their ability to manage frustration and handle transitions after a parental death. Tantrums, bedwetting, difficulty with self-soothing or not wanting to sleep alone are common after the loss of a primary attachment figure. Helping the child to understand that the behaviors are connected to the loss can minimize self-esteem issues and foster resilience.

Emotional stability can also be compromised in the acute phase of adult grief, and being able to recognize why and how our internal regulation is compromised can help with self-understanding. We must learn to allow ourselves a broad range of grief responses after a life-changing loss, and this allowance should also be made for children.

It is the role of a child therapist to interpret the behavioral grief responses of young children. Their development does not allow them to make rational sense of the loss, or free them from feeling responsible for the parent's death, as it would an older child whose logic is sufficiently developed to explore thoughts for discussion. But young children's behavior, play and art reveal much about the way they relate the loss to themselves. Together, the therapist, child and the surviving caregiver address the sense of responsibility for the loss that can burden a young child and be carried into adulthood. As the person matures, the early childhood reasoning about the loss is no longer remembered, yet self-esteem problems can develop. Any death, but especially sudden death and suicide, will be a challenge to integrate without confusion about responsibility, and the message of disillusionment that is a legacy of suicide. A child therapist joins with surviving parents to maintain development and foster emotional expression and resilience in grieving young children.

The SOS Program for Children and Youth values the uniqueness of each child's development and the experiences that influence their loss narrative. Fortunately, what children tell themselves regarding the death changes with time, and the way a trained person listens to this can encourage healing while the child learns to grow with life-changing loss.

Shapiro, E. R. (1994). Grief as a family process: A developmental approach to clinical practice. New York: The Guilford Press.

A Gentle Reminder:

Losing a loved one through suicide is an especially devastating loss. The loved ones left behind (survivors) have a difficult array of emotions to overcome on their journey of grief. There are many reasons for this.

First of all, the death is usually unexpected and sudden, even if the person had been talking about suicide in the past. The method is often violent, and it is difficult for survivors to think about their loved one inflicting this violence on themselves. Unfortunately, suicide carries a stigma in our society; friends and family members are at a loss for knowing what to say.

For many people, losing a loved one to suicide causes a feeling of abandonment thinking: "My loved one chose to leave me!" All of these issues are difficult to deal with during the grieving process. Fortunately, the Greenville area has a self-help/support group called "Survivors of Suicide" for family members and friends of persons who have completed suicide. This free and confidential group is sponsored by Mental Health America of Greenville County.

Groups meet on the first and third Tuesday of each month at 7:00 – 8:30 PM at St. Michael Lutheran Church, 2619 Augusta Street, Greenville, SC 29605. If a family is too fragile to attend group, we will work with them to meet privately and gently guide them into the group. Additionally, CRISISline is available 24/7 at 864-271-8888 and a call-back can be returned by a survivor as close to the type of death you have experienced.



Inspirational

In June, we set aside a day to honor our fathers. It is a day where we buy a gift or do something special for our fathers. The traditional gifts that fathers are given on this day range from a shirt, a tie or something for the toolbox, or something else manly. Those gifts are contrasted with the gifts we give to our mother – flowers, a box of candy or something more feminine. The cards are different. Very often a Father's Day card has a scene that is something from the outdoors or something that is masculine as opposed to the cards that we have for our mothers. Even the messages very often lack the warmth and the care that it has in cards that are meant for our mothers. The biggest day of the year for cemetery visitation is Mother's Day. Why not Father's Day? We can speculate as to the reasons for the above observations. My own opinion is that the male population in our society has been relegated to something less personal and less demonstrative than the female portion of the population. And yet, in all of us, there is a bit of masculinity and femininity in our makeup. One gender predominates, but no one is all masculine or all feminine. Even in the stronger person. Men are to be more stoic and less demonstrative in the expression of grief. And yes, from my experience in working with men, the hurt is as profound and as piercing. Yet, men don't always have the avenue whereby they can express the hurt and the pain of a suicide.

In many instances, men who have completed suicide have been less than candid with their feelings and with the problems that have impacted their lives and then led to their suicide. Men are asked to tough it out and be the caretakers of other members of the family who are suffering and grieving a suicide. And in looking after the other members of their families, they are overlooked and their pain and grief never gets fully addressed. Men hurt as much and as deeply as woman. This is a fact.

I remember years ago talking to a man who had lost his daughter to suicide. He and his wife were devastated. As they grieved the loss of their daughter, he would meet other family members and friends who would inquire about how his wife and the other children were doing with the grief journey. He would respond that they were doing as well as could be expected under the circumstances. After the same topic came up several times this man stopped and realized that no one was asking him how he was feeling. Family, friends and acquaintances were inquiring about how members of his family were doing but no one was asking how he was doing. He was feeling neglected because people were presuming that he was doing well but their concern was for the wife and other children and not for him. Over time he became resentful that people didn't think that he was hurting as much as the other members of his family. This is an example of people overlooking the fact that men hurt as much as women during the grief journey.

As we commemorate Father's Day, if there is a father in our life who is grieving, hopefully, we can encourage and be open and allow these men to cry and to openly express their pain and their grief. Outward expression of grief is not the sign of weakness, nor is the absence of emotion a sign of strength. To openly cry and have external expressions of grief is nothing more than an admission that we are human. We are all human, male and female. We all hurt from grief, male and female. We all cry and experience pain, male and female.

In June as we commemorate Father's Day, let us pray for the fathers of our SOS family who are grieving the death of a child and let us pray also for those people in our SOS family who are grieving the death of a father and let us also remember especially those fathers who are grieving the death of an only child. I assure you of my thoughts and prayers for each and every one of you and especially those fathers who are commemorating the

first Father's Day without one of their children and to pray especially for those people who are commemorating the first Father's Day without their father or grandfather.

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The Sequence of Care is Really Amazing....

Those who lose a loved one need people who really listen and care.

People who have suffered a loss are much more sensitive and caring to others who are hurting.

When one person gives care to another person, both end up benefiting.

This is one reason why support groups are so effective for many people. People come to these groups to receive care for themselves. But part of what they do during each meeting is to care for and support each other – and through those compassionate actions they experience healing themselves.

Look to your heart for your motivation...When you are ready and when you feel it deep inside, reach out to help someone else who may need it. How you do it – whether calling someone, sending a note, writing a letter, or some other action – depends on what's comfortable, natural and meaningful to you. It doesn't have to be big or magnanimous; look for even a small way to reach out to someone else. Not only will it be a godsend for the other person, but you might find it brings healing to you as well.

I met a person at a conference and she said it best. Her son had died a few years earlier, and she now takes the opportunity whenever she can to relate to other parents who lose a child. She said, "Helping others won't bring my son back or take away my pain. But every time I see someone else experience a little healing, I feel a little bit of that healing again myself. It helps to see some good coming out of my deep sorrow.



For it is in giving that we receive.....St. Francis of Assisi

Our beauty still comes through...

even when we're

Broken



Ann-Margaret, Artist ~ Writer ~ Photographer

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Reflections by Becky

Finding our Groundlessness

Very recently, an esteemed friend and colleague died suddenly of natural causes. Not suicide. She was loved by many, and possibly at the peak of her life, but without warning, she was gone. We have lost her unique humor and animation, her dedication to helping others. Many of us at Catholic Charities are mourning her loss collectively. We are in shock, and preoccupied with taking her death in, making sense of it. I am no better at grief than my LOSS clients. But I can be grateful that experiencing this sudden loss renews my understanding of the wholly disorienting aspects of acute grief through which my bereaved LOSS families struggle: the strange body sensations, a sense of unreality, feeling disconnected from real time. If we add degrees of intimacy shared with the deceased person, such as child, sibling or spouse, the disabling sorrow and confusion created by a suicide, we know that the intensity and duration of grief becomes exponentially more intense.

At the end of the day on which I learned of her death, I felt very tired. I felt groundless. I turned to a little book by Pema Chodron that I sometimes use for restoration, “When Things Fall Apart.” Opening the book, my eye fell on a sentence: “Right now – in the very instant of groundlessness – is the seed of taking care of those who need our care and of discovering our goodness.” Almost immediately I stopped resisting the shifting-sands feeling of groundlessness (for a few minutes, at least) and allowed myself to just experience it. I quietly breathed it in. It was humbling to simply appreciate the timeless, universal humanness of a loss to which I had no choice but to submit, as I have had to at other times of loss, to cast aside my notions of control and remember how vulnerable we are when joyous connections end without preparation.

In that brief moment when I accepted the groundless sensations, I was closer to a sense of mystery and sorrow, the heart of grief. This is where compassion for the dead and the living arises. I felt grateful for my work that allows me to be with families as they also face confusion and sorrow and mystery, and rebuild lives that have been profoundly changed by the loss of the loved one who had been at the core of their lives.

I would like to learn once and for all that if I allow myself to be present to groundless feelings and the illusion that what is precious will always be with me, then love and connection can be more keenly experienced with each encounter. But I believe we have to keep relearning this. Opening to our pain and the insights it offers us have to be practiced. Perhaps now I will express my respect and love or affection for others more often. Yes, I will care for others and myself, perhaps more so in the realization that we bind to others in loss. I will witness this dynamic as my bereaved SOS families tell their stories and share their sorrow and regroup for the benefit of each other, and I will be quietly amazed as parents move through great pain to care for their surviving children in a changed world. We find reserves for surviving loss when we identify a sense of purpose. So often it is caring for others. Therein lies love and our discovered goodness.

May this summer find you gaining a surer footing of your life and some peace that is beyond our ability. As always, you remain in my heart, my prayers and my thoughts.

Grace and peace,
Becky



Inclement Weather/National Holiday Policy

We are at the beginning of summer ~ with that comes storms and cancellations. Your well-being is always the most important thing to us. *Please make certain that we have all your contact information so we can keep you up-to date; in the event of inclement weather or a major National Holiday, you may look on MHA's website at www.mentalhealthamerica.org or feel free to e-mail or call either Alice or me if you are uncertain of our meetings Becky's cell is 864-616-9413 and Alice's cell is -----.*

The main priority is to care for you, and you to care for yourself.

*Your Facilitators,
Becky
Alice
Deb*

If you are interested in having a part in the *Journey to Healing* newsletter, we welcome your poems, articles, newspaper clippings, or readings that have been helpful to you. This newsletter should be not only an instrument of healing, encouragement and education, but also a reflection of who we, the survivors are and who we have become. We need your help and input to make this meaningful for everyone, and invite your feedback to tell us what additional information you would like to see addressed. Thanks!



*“What we have once enjoyed and deeply loved
we can never lose, for all that we love deeply becomes a part of us.”
— Stephen Levine*

Mental Health America of Greenville County
429 North Main Street, Suite 2
Greenville, SC 29601

Bringing wellness home.....B4 Stage 4

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“Journey to Healing” is a newsletter for survivors of suicide. Survivors are those of us whose lives have been changed by the suicide of someone we knew. “Journey to Healing” is intended to let survivors know that we are not alone. If you would like to contribute an article or story for this newsletter, please send it to: Becky Kay, c/o Mental Health America of Greenville County, 429 North Main Street, Suite 2, Greenville, SC 29601, or beckykay40@gmail.com.

Survivors of Suicide Support Group This group meets the 1st and 3rd Tuesdays of each month from 7:00 – 8:30 PM at St. Michael Lutheran Church, 2619 Augusta Street, Greenville, SC 29605. There are separate groups for adults and children.

As we grow and recover, it is important to remember that the most powerful aid that SOS can provide new survivors is the companionship of others who have endured the same type of pain. For SOS to work at its best, we ask you to consider attending meetings to help others, even after you feel you may no longer need to go for your own healing.

SOS Support Team

This team of survivors who volunteer their time to reach out to survivors in need is available to anyone who feels the need to share with another survivor by phone or personal visit in between meetings. Please call CRISISline at 864-271-8888 to arrange a call or visit from a team member.