

# Frontline

This newsletter is dedicated to professional caregivers. It is our hope this newsletter will help you give comfort and strength to those you serve.

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## The Bereaved Want to Know



By Dr. Earl A. Grollman

### When a Father Refuses Vital Help

*Since my sister died a year and a half ago, there is no joy in my father's life. He has little interest in normal activities and has withdrawn from friends and family. I've suggested counselling but he refuses, insisting, "There's nothing wrong with me. Just leave me alone already..." What can I do?*

#### These suggestions may help:

Don't argue. Saying "It's time to snap out of it and pull yourself together" will not make him change. Such statements could create further tensions and frustration.

Acknowledge the trauma in his life. The death of a child profoundly affects parents – emotionally, physically, cognitively, spiritually and behaviourally. There is the peril of a serious depression. Systems may shut down in response to overload.

Encourage the sharing of stories. Perhaps begin, "When I think of my sister I can't help but remember..." At the conclusion, ask, "Dad, what comes to your mind when you reminisce about...?"

When recovering from traumatic loss, there is often the need to tell the story many times so as to face our painful experiences. With each retelling, we are more able to confront the painful loss.

Help reduce the sense of isolation. Who were your father's closest friends before your sister's death? Can you call upon them and invite them to make a visit? Also, check out facilities in the area such as a community centre where your father might participate in meaningful activities as well as connect with others. Research has demonstrated that "a single good friend can make as much as a 10-year difference in life expectancy."

Tell him seeking help is a sign of courage, not weakness. Men often resist treatment because they deny they are depressed. They may believe depression is a woman's disease. Wrong! Julie Totten, founder of Families for Depression Awareness, states, "Men experience depression probably as much as woman, but they aren't diagnosed." Let your father know seeking guidance does not signify he is crazy or mentally ill. On the contrary, it takes courage to forge ahead with life.

Do your homework. Be prepared with referrals in case your father accedes to counselling. Find those who might offer him support now, such as a personal physician or clergy person. Hospices, family service agencies, mental health clinics and local hospitals could serve as useful resources.



Watch for worsening symptoms. Being stuck in intolerable grief for a period of time can be serious and sometimes fatal. Men are at a higher risk for self-destructive behaviour and suicide than women. If you believe your father is in imminent danger, call 911, your local hospital or suicide prevention hotline.

Accept your limitations. The painful truth is you can't "fix" a loved one in need. You are only in charge of your life (and then, only sometimes).

Seek your own emotional support. Not surprisingly, many caregivers become depressed themselves. Remember, you are not only trying to be a support to your father. You are also in mourning! If you collapse under the strain, you will not be a support for yourself or your father.

Find a balance of giving to yourself as you give to others. Find a respite and support for yourself, whether it is going for a walk, visiting a meditation centre or sessions with a counsellor. You will find that with help and time, your mood will improve. Then there will be better days ahead for both of you.

## Whether to Intervene into the Affairs of a Close Friend

*My closest friend has been barely able to function since his wife died. Now he has met a much younger woman and just in a matter of months, they are engaged. I'm afraid he's looking for a quick fix. Should I remain quiet or advise him that he could possibly be hurt by his impulsive decision?*

Many of us have doubtful moments about whether or not we should become involved in the private lives of our friends. Prevention, intervention and interference may be three paths through this dilemma.

The word "prevention" comes from the Latin preventive, which means "to come before" or "to anticipate." Identify your fears: Are there religious or other complications that might create friction? How about financial matters? And since 60 per cent of remarried couples bring children with them, how might that possibly play out? Could the marriage cause irreplaceable damage?

The word "intervene" comes from the Latin inter "between one another" and venire, "to come." Intervention is deciding to become involved in a human crisis with supportive responses to guide a friend through his or her experiences.

Don't start with undiplomatic counsel. By saying, "The idea of remarriage at this time is impulsive and reckless" you will only put an end to further communication. Gently engage by asking him to tell you about their relationship: How did they meet? What attracted them to each other?

Take cues from your friend. If he wants to talk, you might say, "Your wife just died. Is there now a healthy emotional separation?" "Could there be unresolved feelings, such as guilt for 'replacing'

her so soon?" You could suggest a marriage therapist who could help them through any unsettling issues they might eventually encounter.

Before intervening, consider your own motivations. Might you be afraid the impending marriage could impact your own personal friendship with him? If so, your "meddling" could be counterproductive and ultimately hurtful. But empowering and warranted prevention and intervention may be the insights and the support your friend needs.

If the friend decides to remarry and plans are in progress, bite your tongue and accept the decision. Watching someone you care about engage in a potentially destructive relationship is extremely challenging and even heartbreaking but your role is to bring warmth and love no matter what your friend decides. Giving advice when not asked for is a sure-fire way to alienate rather than to support. Be in his corner, but remember he owns all of his choices – even the ones you don't like.

## A Counsellor's Limits of Giving

*I have a problem with one of my clients. She has become so dependent on me she calls me sometimes even late at night. Often, she just wants to chat. How do I let her know she is my client, not my friend? I cannot always be there for her? She is so vulnerable. I don't want to hurt or disappoint her."*

We all know the rewards of giving. But what to do when the giving becomes too much, more of a burden than an act of generosity?

It has been said two of the most important words in the English language are "yes" and "no." We say "yes" as caring people who assist mourners through their pilgrimage of loneliness, bitterness, fear and anguish. But when our own well-being is compromised, it is necessary to utter that two-letter word – "no." Failure to deliver this message may result in our own feelings of resentment that will only hinder our ability to be truly present.

Boundaries are not only helpful, but required. When a client calls us at home, perhaps we might say, "You're right. That's an important issue. Let's talk about this at our next session."

Only when we feel well both emotionally and physically, are we able to become more effective counsellors.

## About the Author

Rabbi Earl A. Grollman, a pioneer in crisis management, is an acclaimed writer and lecturer. In 2013, the Association for Death Education and Counseling presented him with its Lifetime Achievement Award, only the fourth time in three decades. This award honours "his national and international impact on the improvement of death education, caring for the dying person, and grief counseling." His books on coping with bereavement have sold more than a million copies. For further information, visit [www.beacon.org/grollman](http://www.beacon.org/grollman).





By Alan D. Wolfelt, Ph.D.

# Helping Parents Heal When a Baby Dies

A baby has died. The parents are now faced with the difficult, but important, need to mourn. Mourning is the open expression of thoughts and feelings regarding the death. It is an essential part of healing.

These parents are beginning a journey that is often frightening, painful, overwhelming and sometimes lonely. This article provides practical suggestions to help them move toward healing.

## Allow the Parents to Mourn

Whatever the circumstances of the baby's death, the parents will need to share their grief outside of themselves. Whether they were pregnant for a brief time or many months, delivered a stillborn baby or their baby lived for a longer time, they have every right to grieve.

The death of their baby may have come suddenly, without any warning. They have been given little, if any, preparation for this experience. The parents will grieve in their own special way. Try not to adopt assumptions about how long their grief should last. Suggest taking a 'moment-to-remember' or 'one-day-at-a-time' approach that allows them to grieve at their own pace.

## Expect Them to Feel a Multitude of Emotions

The death of a baby affects the head, heart and spirit. So parents may experience a variety of emotions as part of their grief work. Confusion, disorganization, fear, guilt, relief or anger are just a few of the emotions they may feel. Sometimes these emotions will follow each other within a short period of time. Or they may occur simultaneously.

As strange as some of these feelings may seem, they are normal and healthy. Allow the parents to learn from them. Don't be surprised if out of nowhere they suddenly experience surges of grief, even at the most unexpected times. These 'griefbursts' can be frightening and leave them feeling overwhelmed. They are, however, a natural response to the death of a baby.

## Allow for Numbness

Feeling dazed or numb when a baby dies is often part of the early grief experience. This numbness serves a valuable purpose: it

gives the emotions time to catch up with what the mind has been told. Parents may feel as if the world has suddenly come to a halt. Their plans and dreams for the future have been assaulted.

They may feel they are in a dream-like state. As one mother said, "It's like running head first into a solid wall. I was stunned and didn't want to believe the words I was hearing. I wanted someone to wake me up and tell me this wasn't happening." Feelings of numbness and disbelief help create insulation from the reality of the death until people are more able to tolerate what they don't want to believe.

## Slow Down Important Decisions

Some people may try to hurry the parents into decisions to protect them from beginning to feel sadness and loss. These people often mean well, but they are also potentially complicating the parents' healing. Parents should not make any major decisions until the initial pangs of shock and numbness begin to lessen.

## See and Hold the Baby

Only the parents can decide what their needs are related to seeing and holding their baby after the death. But, one thing is certain – they should be given the option. Many parents value this opportunity to say goodbye (and sometimes hello if the death was a stillbirth or premature delivery). There is nothing wrong with parents wanting to see, hold and touch their baby.

Parents should not make quick decisions about this. They should take their time and think it over. If they have fears about what their baby might look like, they can ask the doctor or nurse to describe the baby's appearance. Should they decide to see and hold their baby, they should spend as much time as they need with him or her. Even a short time will go a long way toward helping them heal.

## Give the Baby a Name

Even if a baby never lived outside the womb, he or she deserves a name. If the parents had already decided on a name, they should keep it. This name truly belongs to this unique child. Having a name for a baby allows parents to talk about their loss in a personal way. They are openly acknowledging that they have loved a child and

will always remember him or her. Later on, they will find it easier to embrace their memories if they can refer to their baby by name.

## Gather Important Keepsakes

Memories are one of the best legacies that exist after a baby dies. Parents may want to collect some important keepsakes that help them treasure their memories. While some hospitals automatically offer to provide parents with ways of remembering their baby, not all do. So, be certain the parents request any items that they may want to keep.

Examples of mementoes parents may want to keep include the following: a picture of their baby (even if they don't want it now, they might later), a birth certificate, a set of footprints, the plastic arm bracelet from the hospital, the blanket their baby was first swaddled in, or a lock of hair.

Suggest the parents create a memory box to store these special keepsakes in. Then, when they are missing their baby, they can open up the memory box and embrace these special memories. The reality that their baby has died does not diminish their need to have these objects. They are a tangible, lasting part of the special relationship they had with their child.

## Make Use of Ritual

The funeral does more than acknowledge the death of a baby. It helps provide parents with the support of caring people. The funeral is a way of giving testimony to the life and death of a child. Most importantly, the funeral is a way for parents to express their grief outside themselves.

Parents might have some people tell them, "It will be easier (or better) not have a funeral." Actually, choosing not to have a funeral is a decision many parents later regret. Parents and their baby have a right to have a funeral. The funeral is one thing they can do for their child at a time when they feel so helpless.

## Parents Should be Tolerant of Their Physical and Emotional Limits

Parents' feelings of loss and sadness will probably leave them fatigued. Their low energy level may naturally slow them down. They should respect what their bodies and minds are telling them.

## Talk About Grief

Parents should express their grief openly. Ignoring their grief won't make it go away; talking about it often makes them feel

better. Parents should speak from their hearts, not just their heads. Doing so doesn't mean they are losing control or 'going crazy.' It is a normal part of their grief journey.

## Develop a Support System

The most compassionate thing parents can do at this difficult time is to find a support system of caring friends and relatives who will provide the understanding they need.

## Allow a Search for Meaning

Parents may find themselves asking: "Why did this baby have to die?" "Why this way?" "Why me?" This search for meaning is another normal part of the healing process. Some questions have answers. Some do not. Actually, healing takes place in the opportunity to pose the questions, not necessarily in answering them.

## Parents Should Move Toward Their Grief and Heal

To love is to one day mourn. People can't heal unless they openly express their grief. Denying this grief will only make it more confusing and overwhelming.

Reconciling one's grief will not happen quickly. Remember, grief is a process, not an event. Never forget that the death of a baby changes the parents' lives forever. It's not that they won't be happy again, it's simply that they will never be exactly the same as they were before the baby died.

The experience of grief is powerful. So, too, is one's ability to help himself or herself heal. In doing the work of grieving, people are moving toward a renewed sense of meaning and purpose in their lives.

### About the Author

Dr. Alan Wolfelt is a respected author and educator on the topic of healing in grief. He serves as director of the Center for Loss and Life Transition and is on the faculty at the University of Colorado Medical School's Department of Family Medicine. Dr. Wolfelt has written many compassionate, bestselling books designed to help people mourn well so they can continue to love and live well, including *Loving from the Outside In*, *Mourning from the Inside Out*, from which this article is excerpted. Visit [www.centerforloss.com](http://www.centerforloss.com) to learn more about the natural and necessary process of grief and mourning and to order Dr. Wolfelt's books.



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*It is our hope that the information provided within this newsletter will assist you in working with families at a time of death. Your professionalism and understanding are so important to a family that has just experienced a loss.*