GRIEF IS THE PLACE TO DO THE WORK-NOT TO STAY

Jill Johnson-Young, LCSW aka The Rebellious Widow Sponsored by The HeartLight Foundation



All about Jill (not really- the highlights) – Why did your conference allow me to come speak to you today?

- Medical Social Worker with hospice for over a decade
- Hospice Psychosocial Director, daily census 400
- Owner in Private Practice for over a decade
- Specializing in death and dying, chronic to terminal illness, and grief and loss
- Author: adult workbook, children's grief books, 8 week and weekend grief program
- Additional specialty in dementia
- Contract provider for large funeral groups and other agencies as a speaker

MSW University of South Florida LCSW

Local, state, national, and international speaker on grief and loss for community groups and professionals

Twice widowed (with kiddos)

Active in the funeral industry

Officiant for memorials

UCR Extension and CSUF Ollie program provider

Educator for multiple agencies nationally and internationally

Our Goals this evening

We will share some of the losses our group has experienced You get to hear where I came from- and how I look at grief- and not about stages!

We will talk through grief as a process, and how to move through it We will look at what comes after grief- and what recovery can mean

And we will find some humor along the way



So, to start-how did I become The Rebellious Widow?



Becoming the new Jill- over and over...



Who are you missing right now?

If you would like to share a bit of your story, please let me know in the chat so we do not miss anyone.





What things have you heard from wellmeaning people that were not especially helpful?

Have any of you been told that this is grief?





My definition – yours can be different

- Any significant change in a relationship to a person, place, item, memory, attachment that has been removed or taken.
- Any loss is experienced at 100% and should be honored by being named and addressed.

And that these special losses are disenfranchised grief?

PETS

OUT OF ORDER DEATHS

SIBLINGS

FRIENDS

SUICIDE

DIVORCE

MOVING

FAMILY FINANCIAL CHANGES NEW DISABILITIES IN THE FAMILY

FAMILY MEMBERS OUT OF AREA OR COUNTRY

FAMILY MEMBERS INCARCERATED FOSTER CARE



So what is grief, after all?

• The normal and natural reaction to a loss

• Conflicting feelings caused by the end of or changes in what was familiar to us and our lives

• It is made harder by what society tells us about grief- which is *not normal. The Grief Rules are not realistic or healthy*

• You want to reach out to someone who was always there- and no longer is.

• Or you want to reach out to someone who was never there for you as they should have been, and now that you need them most they are still not there and never will be again.



Grief trauma comes from not knowing what happened no matter how loss occurred



OR FROM MISINTERPRETING WHAT WAS SEEN OR HEARD:

- IN PERSON,
- ON SOCIAL MEDIA,
 - ON THE NEWS,
- OR FROM WELL INTENDED PEOPLE.
- MAYBE EVEN FROM A THERAPIST...
 - (ASK ME ABOUT THE VERY BAD THERAPY PODCAST)

Anticipatory grief for the survivor: This is where grief begins



Adjusting to new life expectancy for their loved one & explaining it to others who do not know terminal illness

Absorbing the emotional impact of a terminal illness on their loved one, and their reactions.

Managing the impact of diminishing capacity – activities, home environment, driving, mail, money, communication, moods, and more

Finishing the relationship before it's too late (if possible)

Coming to terms with the loved one not remembering what has been said- that *finishing* for the loved one is only for the loved one sometimes and may not be remembered

Supporting and ensuring decisions are realistic for the loved one and the family

Learning to allow the loved one some control while also ensuring safety

Making arrangements

Coping financially

Giving permission to go

Saying goodbye

Sudden death & losses and coping: (this also applies to Covid)



- Research found that it was social support that made the critical difference in coping and successful movement into post loss growth.
- Family and friends, as well as professionals (including therapists), did not rate as particularly helpful
- Pets, specifically dogs, received the highest ratings for social support and successful outcomes- others were noted as not caring for feelings so much as getting business taken care of.
- Sudden loss grief requires social support and acknowledgment of emotional impact. That includes emergencies, mass loss events- all kinds of losses, not just death.

The grief rules= my challenge (and now yours)

- Don't be sad- be strong, especially during the illness and dying process (or hospitalization with COVID)
- Support others who are grieving- to your detriment
- Don't talk about how grief may be impacting you
- Don't smile too soon, or too often. Don't look sad, either.
- Be done: sooner, not so quickly, not so well, do it better
- If you are a widow no dating or changing anything for one year

• Do you know what cancels these out and makes healthy grief possible? *Boundaries*



Those who do not assert control in their grief process, and decide to reorganize...

Report	Report greater levels of depression
Require	Require more meds for a longer period
Attend	Attend groups- a lot of them
Define	Define their life around the loss
Do not survive	Do not survive as long





"Steel Magnolias"- the cemetery scene

The research says we should use humor:

- Claxton-Oldfield, S., & Bhatt, A. (2017). Is There a Place for Humor in Hospice Palliative Care? Volunteers Say "Yes!" The American journal of hospice & palliative care, 34(5), 417–422.
- Ridley, J., Dance, D., & Pare, D. (2014). The acceptability of humor between palliative care patients and health care providers. Journal of palliative medicine, 17(4), 472–474.
- I was so glad when this research came out! Humor is an integral part of coping and grief.

New Language

- Grief: the time to finish the relationship, reorganize, find a place for the loved one in a new way
- Grief work: finishing the leftovers, remembering who really died, reorganizing, post loss growth
- Recovery: the work is done, life restarted, still have moments of sadness and missing
- Moments of sad and missing are grief attacks, not continued mourning. They are *normal responses to triggers from memories.*
- Grief does not have to be forever!



Things we wish we could have done better, differently, more, or in some way would have made this loss feel less like things were unfinished. Unrealized hopes, dreams, goals, plans, expectations in the relationship with the person who died. And an unrealistic memory of the person who died.

Unfinished communications with the person who died. What was not said?

What gets us to reorganization and our new lives? Finishing the unfinished. Unfinished things delay recovery in non-death losses, too. (Think about the fire victims losing their community)

<u>A realistic memory that leads to recovery means</u> addressing:

Who was your/their loved one?

What do they think or hear should not be remembered (angelic edits)? Will they allow themselves permission to hold an accurate memory?

How much energy are they investing in creating perfect where human should be? When the memory has to be artificial and perfect they cannot grieve and finish.





Grievers need support through saying goodbye to the unfinished, the unsaid, the not done, and in moving into recovery. They reorganize to include who and/or what they lost and grow into who they are becoming.

Timelines, letters, writing and art all speak into recovery.





THE REALITY IS THAT AFTER A LOSS ALL GRIEVERS, INCLUDING KIDDOS, CONTINUE TO REFER TO THEIR LOVED ONES FOR IDEAS, ADVICE, SUPPORT, CONFIRMATION. A very important fact to remember and share

- The vast majority of grievers will look for After Death Contact
- And the majority of those who do will hire someone to facilitate it
- And they do not tell their therapist despite it being therapeutic for them...
- Please feel free to share your thoughts ...



WE EVENTUALLY FIND A WAY TO GIVE BACK FOR THE LOVED ONE OR THE LOSS, TO KEEP IT PART OF LIFE TO KEEP THEIR NAMES ALIVE. TO REMEMBER WHO THEY WERE. AND TO SHARE THEM.

- Where do you think the MADD program came from?
- And highway signs on freeways?
- And honor walks?



WHAT IDEAS DO YOU HAVE TO HONOR LOSSES AND KEEP MEMORIES ACTIVE?







Handouts are included for you

Slides are included for you

Self care for you – it is a necessity – and it may not be what you think...



- Historian A. Roger Ekirch thought that sleep was a biological constant -- that eight hours of rest a night never really varied over time and place. But while researching nocturnal life in preindustrial Europe and America, he discovered the first evidence that many humans used to sleep in segments -- a first sleep and second sleep with a break of a few hours in between to have sex, pray, eat, chat and take medicine.
- "Here was a pattern of sleep unknown to the modern world," said Ekirch, a university distinguished professor in the department of history at Virginia Tech.
- Ekirch's subsequent book, "<u>At Day's Close: Night in Times</u> <u>Past</u>," unearthed more than 500 references to what's since been termed *biphasic sleep*. Ekirch has now found more than 2,000 references in a dozen languages and going back in time as far as ancient Greece. His 2004 book will be republished in April.



• From the article by Katie Hunt, CNN

How do we do self-care?

- Scheduling
- Stretching
- Talking
- Laughing
- Hydrating
- Connecting
- Book of successes
- Outdoor time (think forest washing, walking , hiking, parks, sunshine)

- Exercise- realistic levels!
- Nutrition- that includes carbs if allowed by the MD
- Retreats
- Journaling
- Time off & away
- Rituals
- Gardening- minus gloves
- Snowball fights
- Saying "no" like you mean it
- Boundaries!!!!!

I know for certain that we never lose those we love, even to death. They continue to participate in every act, thought, and decision we make. Their love leaves an indelible imprint in our memories. We find comfort in knowing that our lives have been enriched by having shared their love.

Leo Buscaglia, LCSW



Thank you for being here and being part of this experience. Thank you to the HeartLight Foundation for sponsoring tonight. Do you have any questions?





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