

# Living well with Grief

Hello again, I hope as the year draws to a close, you may find some comfort in reading this newsletter, especially if it is your first Christmas without your loved one. I hope the article on how to cope with Christmas is helpful.

I also hope you find the articles on coping to be beneficial in helping you see you are not alone on this journey and they may give you some strategies to help you with your loss and accompanying grief. This edition also looks at coping with the loss of a loved one from a wife's, husband's and a son's perspective. As you will see each individual has different ways of coping and no one way is better than the other, it is as individual as you are. Unfortunately there is no magic wand to take away the pain of grief; just knowing you are not alone can sometimes help.

I have also included an article from a nurse's perspective, encompassing how she copes with the loss and grief faced daily in her work place. Coming from a nursing background and working in haematology and oncology with children and adults myself, I know how difficult it can be to achieve a balance, so one doesn't become burdened with the loss and grief which is ever present. I believe it is important to nurture our health professionals working in this area and to this end we offer in-services, debrief sessions and of course our health professional breakfasts. The breakfasts are an opportunity for individuals to meet others working in similar areas, in different hospitals, enjoy a meal and also listen to a guest speaker.

Another article which might be of interest to some of you, encompasses a sometimes sensitive subject but a relevant one on sexuality and grief. In our work both Jenny and I have been asked the question, "When is it alright to date again?" or "I'm so lonely now all I want is to be able to get a cuddle and have a chat with someone of the opposite sex, is that wrong?" or "What will I tell my children?" Even when the children are adults, this can be a difficult issue to raise. There are no hard and fast rules; each case needs to be assessed individually. The decision comes from the bereaved, but it is often better if they have had a chance to work through their thoughts and feelings with someone they feel will not judge them or misinterpret what they are trying to say. Remember if this or another area of grief is bothering you and you would like to have a chat with us, please feel free to give Jenny or myself a call, we are here to support you in all areas of your grief.

I hope those reading this newsletter find comfort in family and friends especially as Christmas draws near, and know Jenny and I will hold you in our thoughts also.

I'd like to leave you with this quote:

*"When you are sorrowful look again in your heart, and you shall see in truth you are weeping for that which has been your delight."* Kahil Gibran

Warm Regards

**Shirley Cunningham**  
Grief Support Services Coordinator  
Leukaemia Foundation of Queensland



# Coping with grief is this possible?

"I was in a shopping centre one day when I looked up from my cup of coffee and saw Don walking past. I got up and walked after him, he had a shirt that Don wore, his hair was as black as Don's, my heart was thumping, this was crazy! But I had to get closer to see his face... I felt crazy." Pam, aged 58

This lady had thought she had seen her husband, but he had died six months previously. Grief causes an array of emotions from anger to acceptance but pain is at the centre of them all. Most individuals who lose someone they love are only too aware of the gaping hole where once their loved one had been. Often the reality of the loss takes time to be accommodated. One moment people may behave as if no loss has occurred at all, then only moments later the individual is overcome with grief and anguish. In a sense as Robert Neimeyer points out in his book *Lessons of Loss, a Guide to Coping*, if individuals were consistently orientating to the reality of the loss it would be like looking into the sun: it would be blinding if they did it for too long. So what occurs is intermittent looking which allows the person to look at the reality and then look away, it eventually becomes undeniably real. Then they begin looking at the future and its implications for them (Neimeyer, 2000).

As time goes by the full impact of the loss is felt and often the question is asked, "How can I go on living without the person I love?" A time when loneliness and sorrow can be very intense, a journey of hard lessons as the loved one is missed a thousand times every day. Each night you are alone in the bed, and you may have eaten alone, watched television alone, you may have had no one to have a casual conversation with. Your despair may deepen and you may suffer intrusive images, dreams of the loved one returning. Many may have unpredictable crying spells, loss of motivation, inability to concentrate or take pleasure in work or play, and hopelessness about the future. As if this is not enough individuals may also have physical symptoms of nervousness, choking sensations, nausea, and possible digestive upsets, also pain in various parts of the body which can last minutes to hours. The physical symptoms, especially if the pain is in the chest, should be checked out by a general practitioner, to reassure you it is nothing sinister. But mostly with time and the gradual assimilation of the loss these symptoms lessen or disappear altogether.

Eventually, the anguish begins to blend into an acceptance of the reality of the death. Yearning and loneliness can persist for months or years beyond the death, and for most individuals concentration and functioning improve. Over time individuals gain some control over their emotions and return to normal eating and sleeping patterns.

But it must be remembered, grief doesn't follow a particular path with each step being mapped out. It is more common to take "two steps forward and one step back". The effort taken to re-organise one's life is slow and punctuated by painful awareness of the loss.

"For me the real grieving didn't start until six months after the death. I was numb up until that point, and then I realized, "It's Christmas and Eric is not here". Sally, age 37 (Neimeyer, 2000)

So can one cope with the loss of a loved one? Yes, with understanding and encouragement one can be helped through these times filled with despair and pain, which is the beginning of reorganisation and renewal. But this journey is a rocky one and just when you think, 'I'm getting there', along comes a significant occasion (holiday, birthday, anniversary) especially during the first year, but can occur in the second year, the pain of your loss comes glaringly forward again, at times with an intensity that can shock you. This isn't an indication of regression and shouldn't be viewed as such, it is normal to have "grief spikes" years or even decades later, it doesn't mean you are not coping.

I hope the above helps some of you to have a greater understanding of your grief and maybe even recognise some of what is occurring in your life is normal and part of the grieving process. Remember if you are reading this and want to talk further about your loss, you can contact the Grief Support Service at the Leukaemia Foundation on 38403844. We are here to support you through your loss and help give you strategies to cope.

*Written by Shirley Cunningham with the help of Robert Neimeyer's book Lessons of Loss, A Guide to Coping.*

# How will I cope through Christmas?

One of the most valuable techniques for getting through a particularly difficult period like Christmas is to commemorate your loved one in a meaningful way. Commemoration can take many forms and can serve as a small or even large milestone in the process of grief. For example, if you've lost your partner this year, and they always said they wanted to visit the Christmas lights in the city, but never got around to it, you can commemorate them by doing just that. In this example you'd take a friend or family member with you to see the lights and honour your loved one by thinking of how much they would have enjoyed the festivities.

You might think that you'll burden others by mentioning your loss over the Christmas season. One of our biggest problems in grieving, as a culture, is that we're too frightened to raise the subject of bereavement. And this goes as much for our own loss as it does someone else's. In actual fact, by far the majority of people would be touched that you'd confide sad feelings to them, or ask after them if they've been bereaved themselves. You can raise the way you feel by acknowledging that you don't want to 'change the atmosphere' or 'bring the mood down' but that you want to confide your feelings. Most will be receptive and happy for you to discuss your emotions. Finding that you can bring up your feelings in a constructive way, and talking about how you are doing, will in turn help you move forward.

Certain traditions may be particularly painful without your loved one, but you may not want to experience a secondary sense of loss by letting that tradition go altogether. Instead tell yourself that 'just this year' you won't carry out that tradition because you're not up to it. This is part of not looking at your immediate grief as something that's going to be with you 'forever' at this level of intensity. It's about living day by day with your grief, and that includes making changes now that you might go back on in the future.

Place your needs (and if the bereavement has affected other people close to you, like your children, then theirs also) first and foremost at this time of year. You're entitled to be selfish with your time, the things you're prepared to do, or not prepared to do. This means you can say 'no' to invitations that you're not up to. Practice saying something simple, like: 'Thank you for your kind offer but I'm simply not up to it yet'. Don't be pressured by well-meaning people and stick to doing the things that work for you - even if they're a bit different!



Sometimes doing quirky and unusual things snaps us out of the heavy black cloud of grief. So if you want to watch your loved one's favourite action DVD on Christmas Day - even if it seems inappropriate - you go ahead and do so!

Most importantly, there's nothing wrong with grief. If you feel like crying, wringing your hands, or even being quiet for a few hours, then that's your prerogative. People who grieve 'successfully' know their feelings can change by the day and even by the hour. Allowing yourself to grieve, letting others know that you're feeling 'up' that day or 'down' is an important part of coming to terms with your loss.

## Some examples which may help you through this time

1. Do something special in memory of the person who has died;
2. Light a candle to burn during the day or during the Christmas meal;
3. Make or buy a special decoration to hang on the tree in memory;
4. Make a toast to the person and share stories of times past and don't be afraid to laugh as you remember the good times;
5. Some people buy a present for the bereaved and place it under the tree of a charity;
6. Don't forget to look after you- treat yourself to a massage or buy yourself a present;
7. Ensure some quiet time to reflect on your memories and your grief and remember dealing with others and their different feelings and reactions to the loss is exhausting.

This article was written by Dr Jane Spur ([ivillage.co.uk](http://ivillage.co.uk)) and information from Nalag News - Dec 2000

# The impact of loss on teenagers

Generally it is thought that young people at secondary school are in a better position to cope with the death of a close family member or school friend than younger siblings. Often however, because adolescence is a time of change anyway, they can be at their most vulnerable. Finding the best way to help young people can also be a challenge.

Any helpful strategies need to be flexible and offered in ways that allow young people to make their own decisions and choices whenever they can. It is also important to have straightforward conversations with young people as they grieve.

## Early secondary students can:

- find death very personal and real;
- have heightened emotional responses;
- experience greater feelings of being “out of control” as grieving is combined with the ups and downs of puberty;
- become withdrawn and anxious;
- lack motivation and the ability to concentrate;
- be absent from class a lot;
- struggle with school work due to impaired cognitive thinking and problem solving (it takes energy to grieve);
- use denial and avoidance as coping strategies because of a fear of losing control;
- appear mature and able to cope masking underlying fears and concerns.

## How can you help:

- have knowledge of behaviour prior to and after the death(s) to assess adaptive strategies – is this behaviour that different?
- ensure peer supports are available;
- give reassurance and normalise the grief process;
- allow flexibility in a timetable;
- offer alternatives to get work done (preferably pre-arranged with teachers);
- don't apply too much pressure;
- offering extra help – e.g. tutoring, a study partner, a buddy;

## Late secondary students can:

- more easily contemplate the way things are;
- focus on making meaning around the loss;
- fear losing control or being seen as different to peers;
- struggle with their emerging independence as they feel so vulnerable;

- have a sense of being “abandoned” at a time when they may have needed that special person (eg parent, older sibling).

## How can you help?

- assist in the young person's sense of control by providing accurate information and options;
- respect their privacy and wish to be alone at times;
- be flexible with school attendance and tasks;
- use appropriate humour as a cognitive adaptive strategy;
- consider what responsibilities they are able to take on;
- pay attention to feelings of guilt or anxiety or anger.

## A note about gender

Young males particularly need an environment where they can find appropriate ways to express their grief. Consider such strategies as:

- Diversion – into a range of activities such as playing sport or listening to music or walking the dog.
- Reflection - encouraging thinking through issues rather than talking through issues.
- Processing by action - what could you do rather than what might you feel?

### References

Louise Rowling (2003) *Grief in School Communities. Effective Support Strategies*. Buckingham: Open University Press  
Doris Zagdanski (1994) *Something I've Never Felt Before. How teenagers cope with grief*. Melbourne: Hill of Content

Contact: Children and Young Peoples Bereavement Centre  
Ph: (07) 3891 9783, or visit:  
[www.childbereavement.org.au](http://www.childbereavement.org.au)



# Dealing with grief as a health professional

By Danielle Roach (senior nurse in oncology haematology ward)

My area of work encompasses life and death. As health professionals we often refer to terminologies such as “professional distance,” but in haematology, oncology and palliative care true connections are created, and instead it becomes more about acknowledgement.

As any individual I experience grief and deal with it in my own unique way, but there are a couple of things I remind myself of during difficult times. Death is part of our journey and whilst for some it comes too soon, dying should be viewed, and deserves equal attention and professionalism as birth and life. Sharing with someone the last stage of their life is a very spiritual and rewarding experience. I understand I cannot change a person’s destiny, but as a nurse I am incredibly privileged to be able to aid in making a person more comfortable, less terrified and assist in supporting a grieving family. It is not from saving lives that I derive my job satisfaction; it is achieving “quality of life” and “quality of death”. I understand my limits and my belief system, which I think is important, and I let them be challenged. I discuss my feelings about a person’s life and death with my colleagues frequently, and I think debriefing as a team or unit can offer great benefit.

Allison (pseudonym) was an amazing young woman for whom I grieved when she lost her battle with cancer early in my career. However, when I think of Allison it is not the cruelty of her disease or even her suffering that I remember, it was her incredible bravery, selflessness and ability to achieve one of her life’s goals in the face of



adversity. Against all odds, I had the privilege of attending Allison’s wedding ceremony, (held in our chapel with the help of many nursing staff from our ward), to her life long partner. Witnessing their nuptials was one of the highlights yet one of the saddest moments of my career to date. When Allison passed away age twenty-five two days after her wedding day, I grieved. I grieved for her, for her family’s loss and for what her death represented to me. After Allison’s death I took comfort in the support of my colleagues, we organised a formal opportunity to grieve and debrief which really helped the healing process. In summary, when I look back, I remember Allison’s strength, the girl who taught me so much in so little time, and not the disease that took her away.



## Six years ago I lost my dad...it seems like a moment ago

by Tory Gallagher 17yrs old.

The loss of a loved one such as a parent is often a catalyst to a series of life modifying events. In the time after such an event, eventually our grief will bring us to rely, at least to some extent, on those surrounding us.

In my case, grief delivered me straight to those closest to me almost immediately after the initial shock of losing my father. I drew comfort from my friends and from my family, whom provided whatever form of support they could. Kind words, a shoulder to cry on, a friend on the phone or a person just to lie with, all gave me the strength I needed to drag myself through the deepest trenches of my sadness.

It was these small, innocuous actions that provided me with the greatest support in my time of need and I thank each person close to me for helping me to deal with my grief.



# How did I cope?

by Mary Ball

My husband passed away 12 months ago after a four year battle with Multiple Myeloma (Plasma Cell Leukaemia). We spent more time together in those four years than we did at any time in the previous 30 years we had been together, so I felt completely lost when he passed away.

How did I cope? I'm not sure - at first I just took things a day at a time. There are so many things to attend to in that first six weeks.

Then reality set in - I was on my own now- no job to go back to, no one at home and no money to go anywhere with. I developed a few health problems of my own and the doctor was not keen on me going back to work for a while. He said it was best to give myself time to get over the stress of the last few years.

I found it hard to be at home day and night with just my thoughts for company. The best way I found to cope was to keep busy. I volunteered to help at the local high school library four or five mornings a week. It was a great way to make new friends and my greatest joy is looking after my grandson in the afternoons while his parents are at work. He always gives me something to smile about and we all have dinner together before they head home.

Thanks to Jenny (Leukaemia Foundation) for always keeping in touch. Family and friends and your unexpected phone calls were always a blessing.

# Emotional ride

By Gordon Shaw

After 40 years of marriage to a wonderful, loving, kind, caring lady, my known world came to an end on 12 February 2007. Kayleen, who suffered from lymphoma, passed away suddenly when bacteria caused multiple organ failure.

After seemingly "wandering around in the wilderness" for about three months, a friend, Trevor, phoned and suggested we join the Cycle Queensland bicycle event in early September, 2007. The bike ride was over 9 days from Miles to Mooloolaba, via Kingaroy, a distance of 530km.

Neither Trevor or I were "serious" cyclists. Nevertheless, we decided to undertake the challenge, which, apart from the physical aspects of the ride, meant that we would be pitching a tent and camping with 1,000 + other cyclists each day. We both knew that the camping would be the real challenge!

After four days riding and a cold and wet rest day in Kingaroy, the weather conditions deteriorated for the next day's ride to Blackbutt, especially when you add in a strong headwind and rolling hills for the 90km ride. It was a challenging day, both physically and emotionally and we were way outside our comfort zone.



However, we achieved it and that day was a turnaround for me as I gained the emotional strength I had been looking for to return to Gordonvale where Kayleen's funeral had been held. My anxiety about returning to Gordonvale was short lived, as I felt calm and peaceful staying in Kayleen's family home with all the wonderful memories.

The support of my children, extended family and friends (old and new) has helped me survive. For me, the worst day of my life was 12 February 2007, so anything after that must be better. While I miss Kayleen so much, I simply reflect on the good times and the priceless gift she gave me - 40 years of her life.

However, the challenge of the bike ride was a key turning point for me and I am now hooked!

# Grief and Sexuality

Sexuality is a key component in a wide variety of thoughts, feelings and, behaviours. It combines our identity, our sense of well-being and, is related to our emotional, physical, spiritual and psychological individuality.

When we lose a partner, we not only lose their companionship, we also lose the ability to express ourselves sexually with the person we have chosen to share this intimate relationship with. No longer can we roll over in bed for a cuddle or walk hand in hand, and, no longer can we satisfy our need or express our love for each other through sexual intercourse.

A recent client mentioned that since his wife had died, he had not had physical contact with any other women. He said that this did not mean in a sexual way but in an intimate way. He said that he missed 'the familiar smell of a woman's perfume' and, the way that women 'give hugs'. Similarly, a woman who had lost her husband mentioned that she missed the 'talks' they had at night time when the children were in bed.

We have included a dedication from a widower to his beautiful wife where he talks about the special things that he misses about this special woman who was not only his wife but the mother to his children. Please take the time to read it.

As you can see, this man talks fondly about his wife's fond caress, her tender loving kiss, her flowing locks and, her smiling face. These are all intimate thoughts and feelings that are now 'sadly' missed by the partner left behind.

You see, after losing our loved one, we are quite often void of any contact with another individual in any manner that can be considered to be intimate. So, how do we cope with this? Is there a solution? Well, this largely depends upon what your own individual needs are, how intimate your relationship was with your partner and, ultimately what you believe intimacy really is. Sexuality does not just include the physical act of intercourse. It can be symbolic of closeness and love. It can involve touching, hugging, kissing and holding.

The beauty of all of these intimate expressions is that they do not necessarily have to come from a partner. Your sister, brother or friend giving you a hug may be all that you require to regain comfort and support. So the solution to feeling to connected to others maybe as simple as asking or giving a hug from/to a family member or partaking of activities which require contact for an example one person said coming to the grief brunch when we had a massage therapist giving hand / neck/shoulder massage, was the first time he had felt connected to another human being via touch since his partner died. Another lady shared how she goes for a regular head and back massage to gain relaxation and feel connected to another person even if it is only for a short while.

In the new year Jenny and myself will be looking at this subject more in depth and will be holding a grief brunch which will look at this important subject of sexuality, intimacy and relationships when your partner has died. We will send invitations closer to the date, until then we hope this Christmas season, you get many hugs over the coming weeks.

Dear Betty

Though I have resisted it I cannot contain,  
The leaden feeling in my heart, the numbness in my brain,  
It's been so for some years now, the things that most I miss,  
The pleasure of your fond caress, and tender loving Kiss.

Always bright and happy, so generous and Kind,  
A vision like an angel, is etched upon my mind,  
I close my eyes and clearly see your lovely smiling face,  
Surrounded by those flowing locks so neatly kept in place.

I see again so clearly, the twinkle in your eye,  
With sparkle like the morning sun, shining in the sky,  
Once again I also see the day you were my bride,  
I remember how my poor old heart, nearly burst with pride.

Of how you bore our children and tended them with care,  
Whenever you were needed, you were always there.  
A wonderful example, as you went on living,  
Always doing so much more than your share of giving.

So generous and protective, so Kind and loving too,  
So gentle and so gracious, so saintly, it is true,  
The symbol of perfection, the vision lingers on,  
But when I open up my eyes the lovely vision's gone.

# 2008 planning has begun!

We are planning to have:

- *Living Well With Grief* 6 week programs
- *Living Well With Grief* Brunches held on a Saturday several times a year
- *Bereaved Parent Weekend* funded by ING Australia and Friends of Fletcher Foundation
- Visiting North Qld and continuing to establish bereavement support in Townsville and surrounding areas.
- Introduction of rural visits. dates and times to be advised
- *Celebration of Life* in Brisbane and Townsville (dates to be advised)
- Bereaved parent brunches
- And of course continuing one on one contact via phone, home or office visit.

During 2007 the grief support team have introduced some new avenues of support ie the grief brunches, which have been very successful. We have held them on Saturdays or occasionally on a Sunday with a scrumptious breakfast and an educational component. The comments we have received have been very positive and both the ladies and gentleman have found the brunches to be beneficial.

"I don't know how I would cope without attending these sessions." (Wally)

"Good to meet others going through the same thing, thanks." (Vicki)

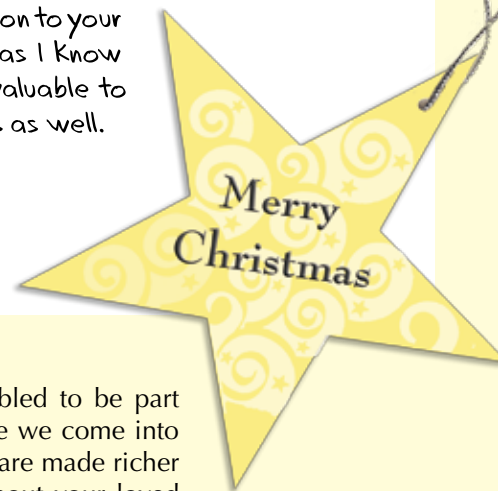
We also had the *Living Well With Grief Bereaved Parent Weekend* which was again very successful. It was again held at "Heaven in the Hills" in Maleny a beautiful spot which heals not only the emotional wounds but gives an opportunity for the spirit to be renewed. This year the parents who attended had lost adult children. It wasn't planned this way, but as often happens in this life, things work together for the outcome which is needed. See below a letter written by one of the mothers who attended the weekend.

Dear Shirley and Jenny

I'm just writing to thank-you for the weekend at "Heaven in the Hills". The beauty of the place and Carol's cooking were just fantastic, but the best part for me was to meet the other parents going through what I am. Being able to connect with these people was a great experience knowing others know how you truly feel. As a group we are going to keep in touch because of our common bond. All the activities and workshops were also of benefit, walking through the grieving journey and releasing some of our feelings.

Could you please pass on to your sponsors my thanks as I know this was not only invaluable to me but to the others as well.

Yours truly,  
Jill Smyrneos



Jenny and I feel humbled to be part of the journey of those we come into contact, and our lives are made richer for getting to know about your loved one and your family... Thankyou.

## Our vision to cure and mission to care.

The Leukaemia Foundation of Queensland is a not for profit organisation focused on the care and support of patients and their families living with leukaemias, lymphomas, myeloma and related blood disorders.

The Foundation does this by providing emotional support, accommodation, transportation and practical assistance for patients and their families. The Leukaemia Foundation also funds research into cures and better treatments for leukaemias, lymphomas, myeloma and related blood disorders.

The Leukaemia Foundation receives no direct ongoing government funding, and relies on the continuous support of individuals and corporate partners to expand its services.

To find out more about the work of the Leukaemia Foundation of Queensland and how you can help, phone 1800 620 420 or visit the Foundation's website: [www.leukaemia.org.au](http://www.leukaemia.org.au)

Disclaimer: No person should rely on the contents of this publication without first obtaining advice from their treating specialist.

If you do not wish to receive future editions of this publication please contact the Leukaemia Foundation Support Services Division on 07 3840 3844.



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