

Grief and Healing



Table of Contents

Rage Makes Me Strong	1
Grief Overview	2
Types of Grief	4
Complicated Grief	4
Delayed Grief	5
Disenfranchised Grief	5
Traumatic Grief	5
Children and Grief	6
When Children Grieve	6
How Children Show Their Grief	7
Children's Understanding of Loss	8
Preschool Children	8
Early Years of School	9
Developmental Ages & Possible Reactions to Death	10
Grieving Child - What Parents and Adults Can Do	12
Helping Teens with Death and Grieving	15
More Thoughts on Helping a Grieving Teen	19
Helping Another Adult	21
Marriage and Relationships	22
Helping a Veteran	23
Introducing the Subject of Counseling	25
Helping Yourself	26
Grief and the Passage of Time	29
Suicide Warning Signs	30
Cause for Concern	31
Resources	32
Online Resources	32
Focus on Your Own Safety	33

Rage Makes Me Strong

In a July 1996 Time magazine article titled Rage Makes Me Strong, Susan Cohen, who lost her daughter in the terrorist bombing of Pam Am Flight 103, said:

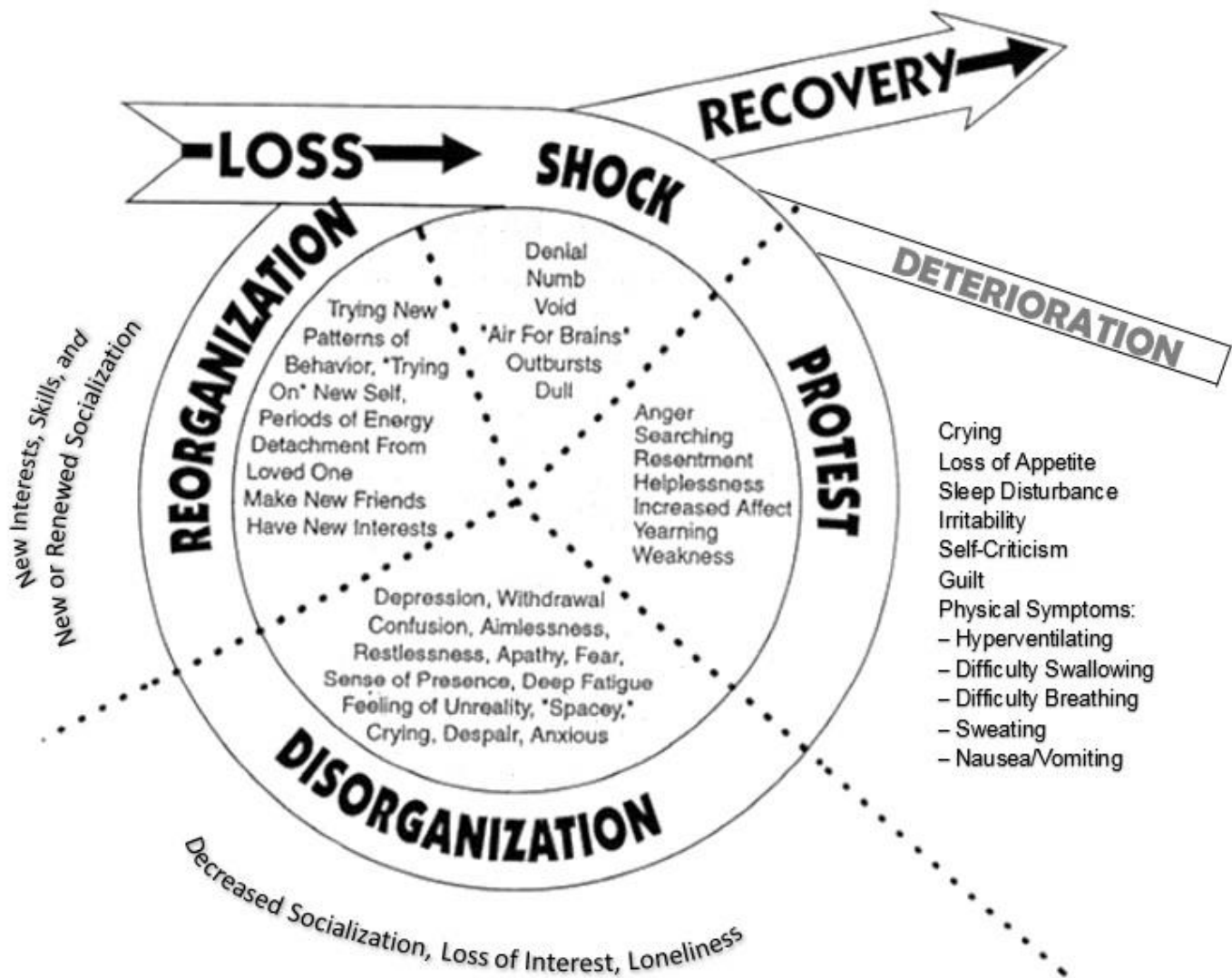
“The very phrase ‘grief process’ tells it all. Bland, neutral words that have nothing to do with the personal hell we experience when we lose someone we love.”

Loss changes our lives. We may feel drawn deep into a vortex--disoriented, unable to find our way, and believing that things will never be “normal” again.

The difference between bland, neutral words and healing begins with understanding that grief is not just an emotion. We experience grief physically and mentally after we experience a painful loss or a traumatic event. We can experience grief down to our soul--we can naturally question our spiritual beliefs. Each of us experiences grief differently—even though we may experience the same loss.

As we begin to heal, we begin to define a new normal. We begin to rise from the vortex. We find our way. And, we realize that grieving grief is indeed a process we experience as we heal.





Grief Overview

Various life events can cause grief to varying degrees. A few of these are:

- Ending a relationship
- Losing a job
- Illness or disease (impacting you or someone you care about)
- Assault
- Accident
- A painful or traumatic event

Grieving people may experience crying, sleep changes, appetite changes, disengagement from life tasks, friends, relationships, family, and work; they may exhibit anger and they may feel guilty, lonely, depressed, empty and sad. They may feel numb or helpless and believe that things will never feel any different, or any better. They may experience moments of happiness or joy in the midst of

grief. These experiences are a normal response to grief in the days and weeks following a loss.

Grief is a natural journey that takes time and work to travel. Grief is not “one size fits all” and it is normal for people to grieve in different ways. There is no “right” way to grieve. The loss of a child, spouse, younger parent, life partner, or best friend, is usually more deeply felt than the loss of more distant relations and acquaintances. These relationships are more deeply interwoven into our sense of self. It is completely normal to “unravel” if these relationships are lost.

The following experiences are all part of normal grief:

Shock or Denial. It is normal for a grieving person to forget that a loved one is gone — until a startling reminder brings back the painful reality. A grieving person can feel air-headed or numb, and may experience frequent emotional shifts, from remorse, guilt, sadness, and regret. These emotions can be accompanied by deep sadness, crying, sobbing, or complete stillness.

Deterioration, which can include a loss of appetite, changes in sleep patterns or lack of sleep, hyperventilating, difficulties in breathing or swallowing, sweating, nausea and vomiting, is also normal during grief.

Protest. Emotions can range from helplessness to anger. A person can also experience an increased affect, which is just a technical way to talk about an increase in emotions and emotional expression. A person’s normal reaction to an event can be “blown out of proportion” when the person is grieving.

Disorganization. Depression, confusion, deep fatigue, anxiousness, aimlessness, loss of purpose, and restlessness can all accompany disorganization. A person in mourning can lose interest in normal “feel good” activities and social connections. The person may experience an increase in loneliness. People who don’t have many friends or who have friends that don’t know how to support them during a period of grief, or who have family members who live far away may feel abandoned. Elderly people who outlive their spouses and friends may suffer more because they are alone and they are grieving.

Reorganization. After a period of time, people in mourning may find themselves “trying on” their new identity. They may experience periods of energy; they may make new friends or reconnect with old friends, and they may develop new interests or hobbies.

A person will notice that they have the ability to feel joy again, to look forward to the future, to connect with others, and to re-engage in life. They no longer feel an acute sense of guilt for not wanting to grieve anymore. A final sign of a well-traveled healing journey occurs when a grieving person is able to think about their loss as a happy memory and not experience acute pain as they once did.

Types of Grief

Complicated Grief

According to the National Institutes of Health, about 7% of bereaved people experience Complicated Grief, a chronic impairing form of grief that interferes with the healing process. Risk factors for Complicated Grief include:

- A death that is sudden, unexpected, traumatic, violent, or random
- Death from an overly long illness, such as Alzheimer’s Disease or cancer
- The loss of a child
- The mourner's belief that the death could have been prevented
- A relationship with the dead person that was angry, ambivalent, or overly dependent
- The mourner having an illness that coincides with the death
- The mourner's experience of multiple losses within a short time
- Lack of social support for the mourner

People feeling trapped in grief or who are experiencing intensified grief despite the passage of several months can recover more quickly with support from a professional grief therapist or mental health professional. It’s good to ask, “If you had a broken foot, would you want to suffer until the broken bone healed, or would you want to see a doctor and help the bone heal properly and more quickly?”

Delayed Grief

Sometimes, we postpone a normal grief response until later. We do this because we need to “be strong” in order to help someone else or we are already experiencing too much stress to allow the healing process to begin, or we need more time to accept the reality of the loss, or we can’t begin grieving until experiencing an event that evokes another strong emotional response.

Disenfranchised Grief

A person may experience disenfranchised grief when he or she cannot openly acknowledge the loss, the loss is not socially accepted, or when the loss cannot be publicly mourned. Causes may include a death related to HIV/AIDS, miscarriage or stillbirth, the death of a same-sex partner or spouse, the death of the partner in an extra-marital affair, or grieving someone you can’t remember (ex. a parent or sibling who died when you were an infant or before you were born).

Victims of family violence may experience grief that is unrecognized, unsupported, and unacknowledged (by the victim and by others who are close to the victim). The aftermath may include addiction, physical health issues, disability, mental illness, continuing victimization, financial instability, PTSD, challenges maintaining a job, custody issues, and rejection by older children who identify with the parent who has the “power” in the relationship.

Traumatic Grief

A person may experience traumatic grief when a death is violent, unexpected, or causes a person to die “before his or her time,” such as an infant, child, murder victim, or accident victim. Traumatic grief can include exposure to war trauma among military members, their families, and their children.

If the loss was unexpected or sudden, and particularly if the loved one died by suicide, the pain can, at times, feel unbearable.

Children and Grief

Growing up is an ongoing process of change that can involve loss. Starting childcare, school, sleeping over at a friend's house, changing classes and teachers, or losing a pet, a friend or a family member, all bring new challenges and new learning. Depending on the support children receive and how these early losses are dealt with, children can learn to manage and cope with the losses that will happen throughout their lives.

Children grieve, and grief can happen at an early age, but not in the same way as adults. Children are likely to show their grief in less direct ways than adults. Children move in and out of grief. One day they will seem to be fine and another day they will not manage so well.

Children often have more needs during times of loss, which can lead to demanding behavior as they try to get closeness, care, information, reassurance and support from adults. The experience of loss affects each child differently. The child's age, emotional maturity, the circumstances of the loss, and the 'connectedness' with the person or whatever the child has lost are important factors. It is important to look at each child individually and work out what will best help that child.

When Children Grieve

Some of the losses experienced by children are the same as those for adults:

- When a parent dies or goes away.
- Moving house or changing schools.
- When parents separate or a family breaks-up.
- Long periods of separation from a parent.
- Loss of a friend or friendship.
- Being the in hospital.

- Loss of a pet.
- Having a disability.
- Loss of memories due to fire or flood.
- Loss of culture and homeland when moving to a new country.
- Death of a grandparent.
- Crying and giggling without obvious reason.
- Not wanting to separate, being clingy, wanting to be near adults.
- Running away, avoiding school, stealing.

Children may grieve for something that seems small to adults but is big for children, e.g. losing their favorite stuffed animal.

How Children Show Their Grief

Young children usually don't have the words to talk about their feelings in the way that adults do. They may not even really know what they feel. Some of the ways they show grief may be:

- Physical pain such as stomachaches or headaches.
- Sleeping problems, bad dreams.
- Eating problems, eating too much or too little.
- Being destructive; temper tantrums.
- Acting like a younger child.
- Angry play or playing the same thing over and over.

- Being unhappy and blaming themselves.
- Tendency to think the person who has gone is perfect.
- Being easily upset.
- "Switching off," acting as if they haven't taken in what has happened.
- Acting more like an adult.

Children's Understanding of Loss

Preschool Children

- In the years before school, children generally don't understand that death is permanent.
- They feel grief when they lose someone close to them.
- The impact of the loss may be greater in the early years because they don't really understand what is happening.
- They don't understand what is real and what is not real, and they may believe that their own wishes caused the person they loved to go away.
- Losing someone who cares for them is a major stress that takes time and care to overcome. In a way, it is like losing a part of themselves.
- Young children don't have the words to express feelings and will show their feelings in the way they act. They may be more clingy and needy or develop problems separating from you.
- Children can be very kind to others who are unhappy and try to comfort them and then they need to go on playing again.

Early Years of School

- Children are beginning to learn that death is permanent.
- They begin to realize that when someone dies there is no coming back, but they may ask what has happened many times over so that they can understand.
- Some children feel responsible for the death or separation and think it was because they were naughty.
- They may also be worried about who will look after them--if they have lost a parent, they may worry about losing the other parent as well.
- They may be very matter-of-fact in the way they talk about death and want lots of information, such as what happens to the body.
- They may not know what it is they are feeling or know the words to say how they feel but you will see it in their behavior and play.
- Times of Family Loss Are Times of Particular Stress on Children
- The adults who love them may not be available to support the children if the adults are very upset themselves.
- There are strange situations to cope with e.g. funerals or moving
- People around them act differently, looking sad, crying, not keeping to routines, or acting like everything is fine when it isn't.
- Children might be asked to be different, e.g. to be quiet, to be helpful, to be good.
- They are not sure what to think or do.
- When a parent dies, children need to feel (with caring acts and words) that they will not be abandoned.
-

Developmental Ages & Possible Reactions to Death

Age	Children Think	Children Feel	Children May
3 - 5 years (preschool)	<ul style="list-style-type: none"> – Death is temporary and reversible 	<ul style="list-style-type: none"> – Sad – Anxious – Withdrawn – Confused about changes – Angry – Scared – Cranky (feelings are acted out in play) 	<ul style="list-style-type: none"> – Cry – Fight – Express Interest in dead things – Act as if death never happened
6 – 9 years	<ul style="list-style-type: none"> – About the finality of death – About the biological processes of death – Death is related to mutilation – A spirit gets you when you die – About who will care for them if a parent dies – Their words and actions caused the death 	<ul style="list-style-type: none"> – Sad – Anxious – Withdrawn – Confused about changes – Angry – Scared – Cranky (feelings are acted out in play) 	<ul style="list-style-type: none"> – Behave aggressively – Behave withdrawn – Experience nightmares – Act as if death never happened – Lack of concentration – Have a decline in grades

Age	Children Think	Children Feel	Children May
9 – 12 years	<ul style="list-style-type: none"> – About and understand the finality of death – Death is hard to talk about – That death may happen again, and feel anxious – About death with humor – About what will happen if their parents die – Their actions and words caused the death 	<ul style="list-style-type: none"> – Vulnerable – Anxious – Scared – Lonely – Confused – Angry – Sad – Abandoned – Guilty – Fearful – Worried – Isolated 	<ul style="list-style-type: none"> – Behave aggressively – Behave withdrawn – Talk about physical aspects of death – Act as if it never happened; not show feelings – Experience nightmares – Lack concentration – Have a decline in grades
12+ (teens)	<ul style="list-style-type: none"> – About and understand the finality of death – If they show their feelings they will be weak – They need to be in control of their feelings – About death with humor – Only about life before or after death – Their actions or words caused the death 	<ul style="list-style-type: none"> – Vulnerable – Anxious – Scared – Lonely – Confused – Angry – Sad – Abandoned – Guilty – Fearful – Worried – Isolated 	<ul style="list-style-type: none"> – Behave impulsively – Argue, scream, fight, Allow themselves to be in dangerous situations – Grieve for what might have been – Experience nightmares – Act like it never happened – Lack concentration – Have a decline in grades

Grieving Child - What Parents and Adults Can Do

- Provide a safe environment where children are able to express feelings through play, water play, writing a letter, a story, a poem, painting or drawing.
- Give clear and truthful information to children in a way that they can understand. Children need to know what is happening even if they don't ask. Children may not seem sad when you think they should be because they still don't really understand what happened.
- Allow children time to talk, ask questions, and share worries with a caring adult. They might be very confused and need to ask lots of questions over and over again. If you can't talk about it because of your own emotions, find another trusted adult who is close to your child who can. If children can't talk to you about the loss, they might feel that it is not safe to talk about it at all, and they may continue to have muddled and scary feelings.
- If your child feels unable to talk about his feelings. Say something like "Some things are really hard to talk about, but talking can help. If you ever want to talk about what has happened, let me know."
- Stick to as many normal routines as you can. Too many changes will add further stress.

Don't hide your own sadness. Children will feel more normal about their own feelings and feel comforted to know that the feelings they have are in line with those of the rest of the family. It is also important for children to know that you are in control and can keep them safe.

- Think about letting your child's teacher or childcare worker know if there has been a big change or loss in your child's life so that schools can be supportive.
- Keep some rules about what children are allowed to do.
- Get support for yourself. Talk with your partner, a friend, a grief counselor, an online support group, or listen to a podcast, which may fit your situation.
- Ceremonies such as funerals can be important ways for children to help make sense of the big changes in their lives. Sharing emotions can help people feel connected to others.
- Remember that children grieve in bursts. They have their own individual reactions, and they feel loss just as much as adults; they may just show it differently.
- Allow many opportunities for extra closeness and comfort; snuggle while watching a comforting TV show, work on a craft together, grab a camera and go take pictures of nature together.
- Review the warning signs of suicide and get professional help if you are wondering if your child is at risk.

Be honest. It may be tempting to lie to children because we want to protect them.

By using age appropriate language to tell them what has happened, we can help children avoid long-lasting trust issues, promote healing, and we can teach them how to grieve in a healthy way.

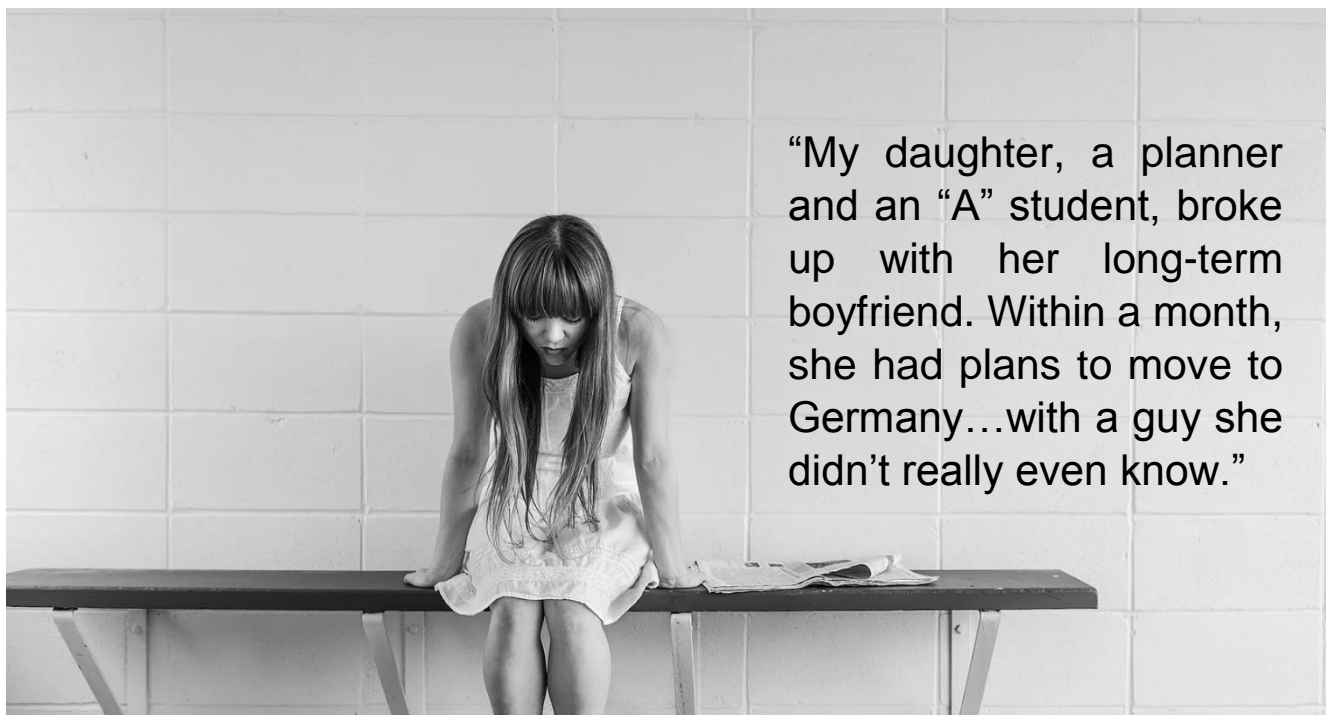
Teen Grief

The prefrontal cortex of the brain is the decision-making part of the brain, and in teens, the prefrontal cortex isn't fully developed until the mid-twenties. Because the prefrontal cortex is still developing, the amygdala in the teen brain is used to make decisions and solve problems. The amygdala controls emotions, impulses, aggression and instincts.

Grieving for a teen can be a whirlwind of emotions. While grief is normal and can be processed in a healthy way, teens may not want to experience the whirlwind. Like adults, teens grieve in different ways -- one teen may want total isolation for a while; another may stuff the feelings and become the family comedian. Keep an eye out for warning signs of alcohol or drug use, rage, antisocial behaviors, changes in sleep patterns and suicide risk.

For teens, relationships with friends become as valuable as relationships with family, and unique in that teens establish their own identities based upon their relationships with friends. The death or loss of a boyfriend or girlfriend may have a stronger impact on them than loss of a grandparent. Like adults, teens may experience complicated grief. For example, the loss of an addicted or abusive parent.

Keep an eye out for warning signs of alcohol or drug use, rage, antisocial behaviors, changes in sleep patterns and suicide warning signs.



"My daughter, a planner and an "A" student, broke up with her long-term boyfriend. Within a month, she had plans to move to Germany...with a guy she didn't really even know."

Helping Teens with Death and Grieving

I WANT YOU TO KNOW THAT: **YOU CAN HELP ME WHEN YOU:**

*I may feel sad, scared, empty, or numb
but be embarrassed to show my true
feelings. Yet, I may say too much on
social media.*

Acknowledge that it is painful when someone you care about dies. Remind me that whatever I'm feeling doesn't need to be kept hidden.

Talk about your own feelings and reassure me that when I'm ready to talk, I can.

Discuss your concerns about sharing things on social media. Encourage me to reach out to the Oregon YouthLine, where my privacy is assured and marketers won't be sold my data.

If you can't do this yet, it's okay to be honest and say "I am still so emotional about this that I can't help you right now." Ask me who is another adult I can trust to talk with about my feelings.

Offer to find me a counselor if it seems easier for me to talk to someone outside the family.

I WANT YOU TO KNOW THAT: **YOU CAN HELP ME WHEN YOU:**

I might have behavior problems that are new or worse than before the trauma (angry outbursts, irritability, rule breaking, revenge seeking). I may be doing serious, unsafe, or harmful behaviors (self-injury, risky sexual behavior, drug or alcohol use).

Have patience and try to remain calm while setting appropriate limits on my behavior.

Assure me that it's okay to and encourage me to get back into routines and activities with friends. For serious, risky, or harmful behaviors, let me know that we're going to get professional help.

I am having trouble concentrating and paying attention or have a change in sleep patterns, such as staying up later or sleeping all day.

Realize that I may be having scary thoughts about the trauma and may not tell you.

Talk with me about ways to cope with these, like getting back to enjoyable activities or listening to calming music. Taking a technology break at night will help me to sleep better.

I have physical reactions like jumpiness, stomach aches, headaches, a pounding heart, or body aches. These may be worse after being around people, places, sounds, situations or other things that remind me of the trauma or the person who died.

Recognize that I may minimize these physical reactions—or do the opposite—exaggerate a minor ailment or injury.

Encourage me to use physical activities to release tension or try relaxing things, like deep breathing or gentle stretching.

I WANT YOU TO KNOW THAT: **YOU CAN HELP ME WHEN YOU:**

I may think that life is meaningless, feel guilty for being okay, or withdraw from family and friends—or retreat to social media or gaming.

Discuss solutions for feeling sad and mention that, while social media can be helpful, I may feel better seeing friends in person.

Check with other adults I can confide in to discuss ways to support me. If I seem very sad or guilty, seek professional help.

Sometimes I wonder if something bad will happen to me or other important people in my life.

Help me develop a realistic picture of the dangers in life.

I may express this by appearing anxious or worried or seeming not to care about the future (not studying, skipping school), or risk-taking behavior.

Talk about ways for me to take control of my safety and future (e.g. driving carefully, eating well and exercising, asking others for help). Remind me that I make good decisions and that you and other trusted adults will care for me.

I may talk about feeling responsible for the death.

Let me know that this is a common response to grief by youth and adults.

Give honest, accurate, and age-appropriate information.

Remind me that you will always tell me the truth. If I feel responsible, reassure me to not worry; that I did the best I could at the time.

I WANT YOU TO KNOW THAT: **YOU CAN HELP ME WHEN YOU:**

Sometimes I might not want to talk about the person who died. I may try to change or reject the topic (“leave me alone”), shrug it off, or be angry with the person who died. I may hide my discomfort and act as if nothing bothers me or as if I’m doing fine.

Realize that I may think that talking about the trauma or the person who died will upset you.

Let me sort out my feelings in my own time. My anger will become less as I adjust to the loss. Remind me that it’s okay to talk to a professional and help me make that connection.

If you feel rejected, stay involved with me. Know where I am and what I’m doing. I need your presence more than ever.

I might refuse to go places or do things that remind me of the person who died, or of how my life has changed since the person died.

Understand that I may be overwhelmed by all of these feelings, but I want to look strong or act as if nothing is wrong. This may be a sign of traumatic grief, and a professional can help.

I may not want to talk about or remember good things about the person who died because it brings up reminders of the traumatic death.

Keep pictures of the person who died. Let me know that when I’m ready, you have them safely stored.

When I’m ready, tell me stories about the person and help me make me a memory book so I can keep the person in my mind and my heart.

Adapted from the National Child Traumatic Stress Network

If any of these problems get in the way of your teen’s functioning at school or home, or continue more than 1-2 months, get help from a mental health professional who has experience treating children and teens with trauma or traumatic grief.

More Thoughts on Helping a Grieving Teen

- The best way to help a grieving teen is to provide meaningful assurance, validation, non-judgment, patient and open-minded support, and lots of listening. Validate their feelings, even if you don't agree.
- Allow for open dialogue about religion and philosophy. Nurture them in finding their own answers; if appropriate, be open to admitting that you're still trying to answer some questions, too, or connect them to trusted faith leaders.
- If your family is involved in memorial planning, discuss what to expect depending on the type of services. If possible, include them in the planning. Allow them to participate—or not.
- As teens adjust to loss, they may explore a new role in life. Be mindful of whether their role is a teen role or that of an adult. Responsibility is healthy as long as it's appropriate for the age and stage of the teen.



- Encourage additional social support systems (family, friends and/or community).
- Check in with other adults involved in their life – other parents, teachers, school counselors, coaches.
- Be prepared for full recurring emotions in response to milestones and rituals such as birthdays, graduations, weddings, and the birth of children.
- Notice what's going on in your teen's life—even as you deal with your own grief. Remember that it's okay to ask for help, from a trusted friend, a crisis hotline, or a professional, and encourage your teen to do the same.



Helping Another Adult

Helping a person who is grieving can be gut wrenching. It's good to ask ourselves if we are in the right place to help someone else or if we need to connect that person to others who can help.

For the first days, weeks or months following a sudden loss, friends and family may find it helpful to take turns staying with the grieving person. It is not necessary (or even possible) to stop the grief. What may be of most help is to:

- Just be there
- Listen quietly and non-judgmentally
- Allow the person to say what they need to say or to say nothing, to cry when they need to cry, and to fully express all the painful and complicated emotions they are experiencing
- Don't say that they shouldn't feel this way or that they shouldn't cry anymore
- Don't argue if the person feels responsible for the loss—over time, gradually and gently try to help the person see things from a different perspective
- Listen--some more
- If the grieving person talks about wanting to end his or her own life, acknowledge the pain that the person is in. If the person is displaying suicide warning signs, follow through with calling 1-800-273-8255, BestCare at 541-475-6575, or 911 if you feel it is an emergency.

The process of grieving, though gut wrenching is also a process of healing. If a person who has experienced loss does not seem to be able to grieve fully, but seems to hide all the feelings inside, it is time to get help from a professional counselor. You can gently confront the person and caringly introduce the subject of counseling.

Marriage and Relationships

- Good communication is necessary. If you're having a bad day, it's okay to say so. Let others know what is helpful to you.
- Consider the "gender" differences. Men and women grieve differently and at a different pace. Usually women are more comfortable expressing their emotions. Men often get busy, burying themselves at work or taking on projects at home. Men may find this website helpful:
<https://www.mantherapy.org/>
- Be sensitive to the needs of your partner. Grief is different for each person.
- Plan for upcoming birthdays, holidays, anniversaries, and other special events.
- Don't stress if the dishes are left, laundry piles up, and the yard isn't as tidy as before. Trusted friends will feel useful if you let them tackle these tasks for you.

It is okay to seek professional help if your loss is interfering with relationships.



Helping a Veteran

According to the U.S. Department of Veteran's Affairs, about 6 of every 10 men, and 5 of every 10 women, experience at least one trauma in their lives. Women are more likely to experience sexual assault and child sexual abuse. Men are more likely to experience accidents, physical assault, combat, disaster, or witness death or injury. Older Veterans may have served many years ago, but their military experience can still affect life today.



Post Traumatic Stress Disorder (PTSD) is described as a mental health condition that can happen when a person experiences trauma. Symptoms include flashbacks, nightmares, severe anxiety, depression and confusion. PTSD is not a weakness. Veterans and Service members are at an elevated risk for PTSD.



A person with PTSD may act differently and may exhibit many different behaviors and symptoms. He or she may not want to do things that were once enjoyable. You may feel scared and frustrated about the changes you see. It's also normal to feel angry about what's happening to your family or wonder if things will ever go back to the way they were. These feelings and worries are common in people who have a family member with PTSD.

With Help Comes Hope. If you or someone you care about needs help, reach out, and keep reaching out until your needs are met.

Falling through the cracks is not an option.

Some reactions to stress and trauma are normal. Others may be more complex, such as PTSD. Since many common reactions look like the symptoms of PTSD, a professional must assess and diagnose PTSD. For a comprehensive list of resources, see: Bestcareprevention.com/post-traumatic-stress.



Veteran's Behavioral Health Peer Support Specialist in Madras **541.475.6575**

provides peer mentor support to Jefferson County Veterans who have been are engaged in behavioral health services at BestCare Treatment Services-Jefferson County Mental Health Program and/or the Veterans Administration. This includes Veterans on the Warm Springs Indian Reservation.

Veterans Service Officer in Madras **541.475.5228**

By Scheduled Appointment
Monday & Wednesday, 9:00 AM to 5:00 PM
Outreach by Scheduled Appointment
Tuesday 9:00 AM to 5:00 PM
Closed Thursday and Friday

Central Oregon Veterans Ranch **541.706.9062**

A 19-acre working farm in a rustic setting that promotes the healing of combat trauma across the lifespan. COVR's unique model of healthcare brings together different generations of veterans together in non-stigmatizing, natural environment where they can heal each other, and heal together. Now offering AA meetings for Veterans every Friday.

Introducing the Subject of Counseling

If you are worried about a friend, your child, or another family member and have made the decision to get help, you may want to begin by pointing out what concerns you. For example, “I'm sorry that you've experienced such a tremendous loss. I know that I would feel lost if that happened to me. I'm worried about you because...”

Sometimes defining what counseling is can help ease the person's anxiety about counseling. It's okay to tell the person “You don't need to get your head shrunk, and you don't have to talk about family history for the past 100 years unless you want to.”

You might say something like “If I were to give you an airplane and tell you to fly, you wouldn't just jump in, start pushing buttons, and expect it to fly; right? First, you would take flying lessons so that you knew how to handle the plane.

Sometimes, we need help learning how to cope when life feels like an airplane spinning out of control. Just like learning to fly a plane, a counselor can help us learn to deal with things in life that make us feel like everything is spinning out of control. Let's talk about making an appointment for you to see a counselor, and together, your counselor and I will help you.”



Helping Yourself

Grief is so powerful that people sometimes look for ways to go around it rather than journey through it. You can heal more effectively if you allow yourself all of your emotions and feelings, and take care of yourself on each step of your journey.

Podcasts can touch on pain and totally blindsides you. Check in with your mental health clinician or trusted friend about recommended podcasts.

- <https://www.dougy.org/grief-resources/grief-out-loud-podcast/>
- <http://www.blogtalkradio.com/michelerosenthal/2013/12/31/depression-and-identity-how-both-move-you-forward>
- <http://www.healmyptsd.com/ptsd-podcasts>
- Continue your exercise program and develop a manageable routine.
- Meditation, perhaps in the form of prayer or yoga, can help you get the rest you need.
- At your next appointment, let your family doctor know what has happened so he or she can help monitor your health.

Outside Support –

- We don't have to isolate ourselves during our grief.
- Think about continuing to participate in faith-based services and stay in contact with people who have been a source of support to you.
- Let your friends and family help you. Reflect back on how good you feel when you help others.

Feelings –

- Read books or articles on the process of grief so that you can identify what you are feeling and have some ideas on how to help yourself.
- Allow your feelings to be expressed appropriately.
- Crying is good. You feel lighter after you have had a good cry. Consider sharing your tears with other loved ones. We laugh together, why not cry together as well?
- Keeping a journal is a good way to identify feelings and also to see progress.
- Grief Groups and Hospice can help you prepare ahead for holidays, anniversaries, and other events.

Basic Health Concerns –

Grief is exhausting. When we're exhausted, we don't function well, and things become even more overwhelming. It may sound trivial, but it is important to continue your daily health routines.



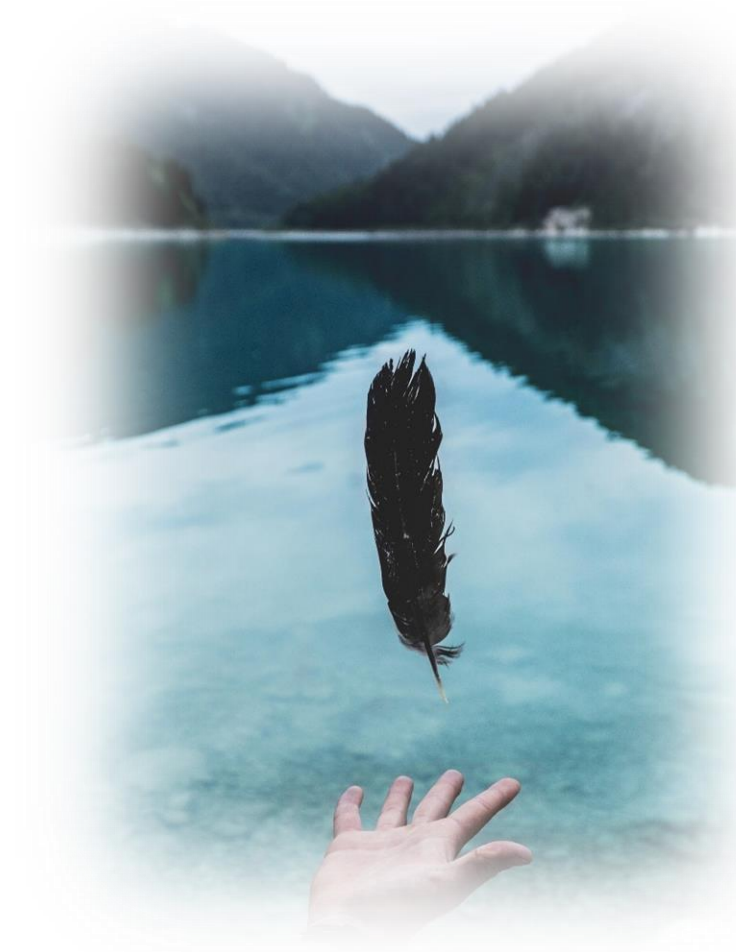
- Maintain your exercise routines.
- Try to eat regular, nourishing meals. Your appetite may change, and that's okay. Have nourishing food available, rather than chips and candy.
- Avoid misusing or abusing alcohol and medications.
- Rest. Try to develop regular bedtime routines. If you are having a hard time getting to sleep, check out some music playlists or relaxation podcasts: <https://open.spotify.com/playlist/3Kxbgyti83lxqMW4eLiA55>

Be Kind to Yourself -

- Wait a while (up to a year) before making major life changes.
- If you need some alone time, take it, as often as you need to...
- Pamper yourself in small ways; find a hobby that brings you peace in solitude (music, stained glass work, painting,).
- Take a short trip for a change in perspective.
- Allow yourself happy moments. Eventually moments will turn into days. Allow the happy to happen and don't feel guilty.
- Learn to have patience with yourself.
- Notice what you do right. Notice when you handle something well. Notice a gift from nature (a bird playing in a puddle, a puppy playing in the park).



Grief and the Passage of Time

A hand is shown from the bottom, palm up, reaching towards a single dark feather that is floating in the air. The background is a serene landscape with a calm lake reflecting the surrounding green mountains and a clear sky. The overall mood is peaceful and contemplative.

Grief is a journey with no set time frame. During the deepest stages of grief, mourners may feel complete loss -- loss of meaning, loss of joy, loss of hope. They may also feel fiercely loyal to their lost relationship, and resist anything that may take them away from that lost relationship. They may focus on honoring, remembering, or re-living the past, rather than thinking about the present (eating, resting, connecting with others), or thinking about the future.

Signs that grief's journey is less turbulent include the slow return of pleasure or joy, looking forward to things in the future, a returned or new sense of purpose, reaching out to others and re-engaging in life, and a lack of fear toward the stages of grief. This is a process that does not happen all at once. It occurs in small pieces in a back and forth manner.

A final sign of a well-traveled healing journey occurs when a grieving person is able to think about their loss as a happy memory and not experience acute pain as they once did.

Suicide Warning Signs

Cause for Immediate Action

- Threatening to hurt or kill oneself or talking about wanting to hurt or kill oneself
- Looking for ways to die
- Talking or writing about death, dying, or suicide
- Verbal—Direct Statements of Suicidal Intent—
 - “I’m going to end it all.”
 - “I wish I were dead.”
 - “I’ve decided to kill myself.”
 - “I’m going to be with (the person who has died) soon.”
- Less Direct Statements of Suicidal Intent—
 - “Everyone would be better off without me.”
 - “Pretty soon you won’t have to worry about me.”
 - “Who cares if I am dead anyway?”
 - “It isn’t worth it anymore.”
 - “I just...can't."



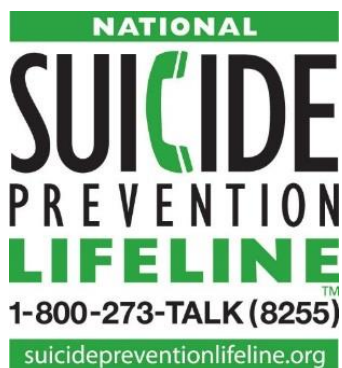
Immediate Action

- Call 911 or take the person to the Emergency Room
- Do not leave the person alone, not even for a minute—not even to go to the bathroom.
- Inform dispatch of any threats toward emergency responders.
- You may also inform dispatch if the person is experiencing a mental illness, is a child or youth, and if it would be best to not respond with sirens and lights. *Note: It is still up to the response team to decide how to respond.*

Cause for Concern

- Feeling hopeless; trapped, like there's no way out
- Feeling rage or uncontrollable anger, seeking revenge; dramatic mood changes
- Seeing no reason for living or having no sense of purpose in life
- Acting reckless or engaging in risky activities
- Increasing alcohol or drug use
- Withdrawing from friends, family, and society
- Feeling anxious or agitated; changes in sleeping patterns
- Sudden improvement in mood after being down or withdrawn
- Giving away favorite possessions; making final arrangements

Get help from any of the resources below:



Resources

Bereavement Groups

Redmond Area Bereavement Group

Facilitator Herb Baker: 503.708.3047 or herbandjudy@yahoo.com

Compassionate Friends

Contact Carol Palmer: 541-408-0667 or carolpalmerrn@icloud.com

Partners in Care – To Register: 541.382.5882

Grief Programs and Support Groups

Online Resources

Survivors of Suicide - <http://www.survivorsofsuicide.com/>

To help those who have lost a loved one to suicide resolve their grief and pain in their own personal way. This site will offer information that will help answer some of those questions, as well as provide a safe place for survivors and friends of survivors to share their struggle and pain and offer comfort and understanding to others who have experienced a similar loss.

National Suicide Prevention Lifeline -

<https://suicidepreventionlifeline.org/help-yourself/loss-survivors/>
Provides a comprehensive list of resources for suicide loss survivors.

The Dougy Center - <https://www.dougy.org/grief-resources/>

The Dougy Center provides support groups and resources, including videos on healing for people experiencing grief.

Recover From Grief - <https://www.recover-from-grief.com/>

This website contains a variety of creative mourning techniques, including talking, writing, creating art, music or poetry.

Focus on Your Own Safety

It is not uncommon for Survivors of suicide loss to experience their own thoughts of suicide. Most Survivors do not die by suicide. If you or someone you know is experiencing crisis or thoughts of suicide, it's a good idea to talk with someone you can trust and to reduce access to:

Firearms – Identify a trusted person to store the firearms off site just as a temporary step until things get better. Madras Police Department (541.475.2344) and the Jefferson County Sheriff's Office (541.475.6520) will safely store unloaded firearms temporarily. It's okay to ask.

Medications – A doctor, pharmacist, or the Poison Control Center (1-800-222-1222) may be able to help you determine safe quantities for medicines to keep on hand.

Alcohol – Alcohol increases the potential for an at-risk person to attempt suicide and increase the lethality of suicide attempts. Keep only small quantities at home.



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and each other.

To show compassion and
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To provide hope for
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confidence for today.

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Our Mission: To reach Jefferson County's full potential through progressive partnerships among community members and professionals.

Our Values: Integrity | Inclusiveness | Enthusiasm

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