

# Coalition News

Quarterly Newsletter of the Minnesota Coalition for Death Education and Support  
P.O. Box 50651 ♦ Minneapolis, MN 5540 ♦ 763-391-3051 ♦ [www.mcdes.org](http://www.mcdes.org) ♦ [info@mcdes.org](mailto:info@mcdes.org)

Vol. 41 No. 3

Since 1977...Education and Support for Those Providing Care to Grieving Persons

September 2019

## Mark Your Calendars

**August 19** ♦ *Being Present: A Conversation About Humanness Through Life's End*, broadcast on MPR at 12n and 9 pm.

**August 24, 10:30 am** ♦ *Expanding End-of-Life Options in Minnesota*. Free event. Presented by Compassion & Choices. Highland Park Library, St. Paul.

**September 20** ♦ *Palliative Care: A Multidisciplinary Approach to Life-Limiting Chronic Disease*, <https://mayoclinichealthsystem.org/classes-and-events/palliative-care-conference>.

**September 24** ♦ *Palliative Care and Home Care: What You Need to Know*. [https://www.mnhomecare.org/events/event\\_list.asp](https://www.mnhomecare.org/events/event_list.asp)

**September 26** ♦ *Best Practices in Dementia Care: Learning to Give Care, Without the Fight*. This program is for professionals. More info on page 11.

**September 27** ♦ *13th Annual New Richmond Caregiver Conference*. This is a day for family caregivers. Info: <https://www.witc.edu/continuing-education-and-training/conferences-and-events>

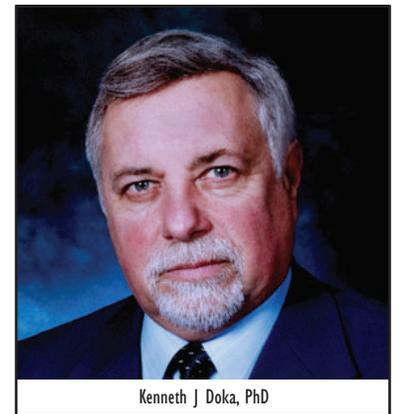
**October 4** ♦ MCDES Fall Conference. *Living With Grief in the Aftermath of Natural and/or Human Caused Tragedy*. Info available at [www.mcdes.org](http://www.mcdes.org).

## In this issue

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## MCDES Fall Conference ♦ October 4, 2019 *Living with Grief in the Aftermath of Natural and/or Human Caused Tragedy* Speaker: Kenneth J Doka, PhD

This program is designed to assist health care and mental health professionals in knowing effective ways to respond to public tragedies and disasters—whether the result of natural disasters such as earthquakes, hurricanes, or tornadoes, horrific accidents, or malevolent events such as random shootings or terrorist attacks. Participants can learn the impact of such factors on individuals and communities and can find effective ways to partner with other organizations in preparing responses to such events as well as to consider preventive plans should disaster strike their community.



Kenneth J Doka, PhD

Kenneth J Doka, PhD, is a Professor of Gerontology at the Graduate School of The College of New Rochelle and Senior Consultant to the Hospice Foundation of America. Dr. Doka was elected President of the Association for Death Education and Counseling in 1993. In 1995, he was elected to the Board of Directors of the International Work Group on Dying, Death and Bereavement and served as chair from 1997-1999. The Association for Death Education and Counseling presented him with an Award for Outstanding Contributions in the Field of Death Education in 1998 and Significant Contributions to the Field of Thanatology in 2014. In 2000 Scott and White presented him an award for Outstanding Contributions to Thanatology and Hospice. His Alma Mater Concordia College presented him with their first Distinguished Alumnus Award. He is a recipient of the Caring Hands Award as well as the Dr. Robert Fulton CDEB Founder's Award. In 2006, Dr. Doka was grandfathered in as a Mental Health Counselor under New York State's first licensure of counselors. He has published numerous books, and is the editor of both *Omega: The Journal of Death and Dying* and *Journeys: A Newsletter to Help in Bereavement*. His website is [www.drkendoka.com](http://www.drkendoka.com).

Conference brochure and registration information are at [www.mcdes.org](http://www.mcdes.org).

## From The Editor: On Looking for Helpers

*When I was a boy and I would see scary things in the news, my mother would say to me, "Look for the helpers. You will always find people who are helping.*

~ Mr. Rogers

As I write this, late August of 2019, it feels important to say, first of all, that all of the articles in this summer issue of *Coalition News* came together before the deadline of August 1st. Which means the articles submitted were written...all these comforting thoughts....in July, or even June, long before the latest shootings in Texas and Ohio had occurred, and long before yet another week of discord and anger and fear flooded the airwaves. Scary things, indeed.

Toni Morrison (may her memory be a blessing) said in her 1993 Nobel address, "Language alone protects us from the scariest of things. Language alone is meditation." Looking for the helpers, like Morrison and Rogers, and all our contributors who arm us with well-written insights in this issue, helps me feel less afraid and even hopeful.

I feel hope in the company of helpers like the ones in this issue who somehow were able to write words, in advance, that especially today, inspire

and comfort us. They offer language, phrases, and thoughts that help express our sorrow and suggest ways for us to carry on in the face of ongoing national uncertainty, grief and worry.

I suspect this latest issue will remind you, as it reminds me, that we are indeed fortunate to be members of an organization that consists of all sorts of wise, empathetic and competent helpers. My association with MCDES so often encourages me...that there are among us, kind and humble helpers in our lives who far outnumber the evil, the arrogant, the thoughtless, and cruel of this world. This knowledge helps me sleep at night.

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*In the very end, civilizations perish because they listen to their politicians and not to their poets.* ~ Jonas Mekas

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Helping comes in many forms. Shielding someone from bullets is a terrifyingly courageous example; laying down one's own life for that of a friend, family member, or even a stranger. Helpers have done and will continue to do that. But there are other kinds of helpers; those among us who listen with compassion, who share tears, within the therapeutic setting but also in every day life. As a terrified child finds solace holding a hand or sharing a hug, so adults need to feel safe in the arms of compassionate listening and supportive language.

MCDES members do that in spades!

In the midst of so much unrest and ongoing national tragedies, our fall conference should prove to be another sellout. Don't miss Ken Doka on Friday, October 4th. He will address living with grief in the aftermath of tragedy. And in the meantime, this latest issue, full of helpers' insights, should tide you over until then.

Thanks to MCDES Chair Kay Johnson, for her latest, most-personal reflection, which focuses beautifully on caregiving and love. And MCDES board member Eunie Alasaker again honors us with yet another brilliant piece about self-care and self-compassion. Helpers grieve, too. Eunie recognizes this and offers suggestions to help calm and restore us. This is another "clip and post" keeper! Thank you, Eunie and Kay.

Past MCDES board member Ted Bowman addresses the topic of "Great Grief." He puts into words what many today struggle to name. Ted is also a poet, having shared his work with us in past issues. His writing reminds me of a quote by Jonas Mekas, who said, "In the very end, civilizations perish because they listen to their politicians and not to their poets." If you, like I, find comfort in Ted's words, please respond to him, as he requests, with your own thoughts on this topic, which may lead to ongoing articles in future *Coalition News* issues. Thank you, Ted.

Tom Hubler, MCDES member, addresses a new topic; the unique



Sharon Dardis

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MCDES is a nonprofit 501(c)3 volunteer organization whose purpose is to promote and provide education, opportunities for networking and support to individuals and groups involved with the care of persons confronting death and their families and friends, and those who are bereaved, regardless of the cause of death.

## From the Chair: Focused on Love

by Kay Johnson, MCDES Chair

*“Love is our essential nutrient. Without it, life has little meaning. It’s the best thing we have to give and the most valuable thing we receive.*

*It’s worthy of all the bullabuloo.”*

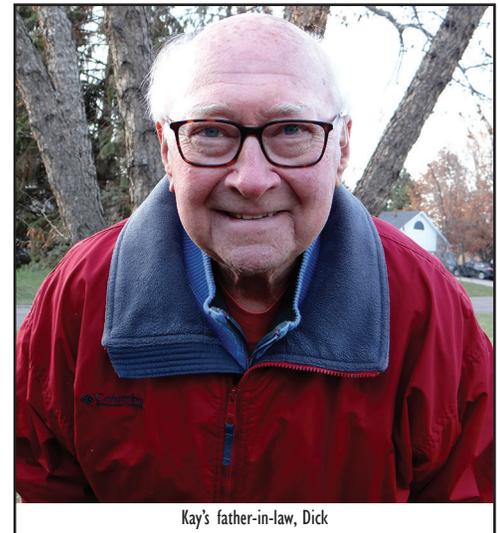
~ Cheryl Strayed

Dick is an 82-year-old man, in good physical health, a kind soul, a fun-loving guy, a mechanical engineer who retired after a successful career, a great provider for his family, a gadget guy, a survivor of child loss (16-year-old son) and a loving family man. I have been so fortunate to call him my father-in-law for the past 31 years. This sweet man was diagnosed with Alzheimer’s approximately 9 years ago and is now a part of the 5.8 million Americans experiencing the gradual deterioration of a lifetime’s worth of wisdom, experience and personal relationships. Overall, I would say that Dick and our family slipped into acceptance of his slow descent into memory loss and confusion. The grief has been present, real and raw throughout the years.

Dick and Ginny just recognized 59 years of marriage and continue to live

together in their own home, despite the increased demanding caregiver challenges. They have one surviving son, daughter-in-law, and three grandchildren. Time together throughout the years as a family of seven included: countless meals together, bleacher time cheering on soccer/football/volleyball/baseball/softball/gymnastics, holiday and special occasion celebrations. We are a small family but one that only knows our time together as one unit.

Due to Dick’s illness, we have gotten used to: not being able to have a conversation or even understand what he means when putting a few words together, monitoring his whereabouts when he decides to stand up and walk away, not being recognized by name, answering his never-ending pointing to the TV and question of “Do you know him/her?,” interpreting what he needs/



Kay's father-in-law, Dick

wants and trying to stay ahead of that, monitoring him in public as he doesn’t seem to have a filter or inhibition controls any longer, and assisting him at restaurants. My husband has lovingly taken on the responsibility of caring for his dad every Saturday at our home along with stopping at their home during the week nights. The expectations of our ability to assist both Dick and Ginny have been unrealistic and yet we continue to be committed to contribute while knowing we are falling short.

My healthcare experience has exposed me to patients at varying stages of dementia, and their families attempting to cope with the endless list of losses. Family members working to maintain their loved one’s dignity, independence and also honor their wishes often related to remaining in their own homes. Family members who become physically and emotionally exhausted meeting all of life’s responsibilities, advocating for their loved one, navigating the healthcare system, attempting to stay afloat with the financial drain of illness, and making the necessary decisions about the type of care needed. I realize all of that and yet, nothing



Kay's family

Chair continued on page 11

## Self Compassion

by Eunie Alsaker

This spring I noticed a common theme among the grief clients I saw in counseling. I heard comments such as: I don't know if I think about my mom often enough. I think about my friend all the time, and I shouldn't anymore. I should be further along than I am. I get frustrated with my brother and then feel so ashamed. It feels worse than before—what am I doing wrong? They all held some piece of the false belief that there is a “right” way to grieve, and they were doing it wrong. As I reflected on their self-judgments and considered ways to respond, I turned to the literature on self-compassion therapy. I found it helpful and have been incorporating it into my clinical work, as well as, if truth be told, my own personal life.

Self-compassion therapy is a fairly new topic in psychology, with the leaders first writing about it in the early 2000s. While little has been written directly on the intersection with grief, there is much for grief counselors to take from the ideas. Kristen Neff (2014) explains that self-compassion has three essential elements. Self-kindness is primary. This allows us to respond to our pain and shortcomings, perceived or real, with the same gentleness and understanding we extend to others. Secondly, it involves a recognition of our common humanity.

“Between the stimulus and response, there is a space.”

~ Victor Frankl,  
*Man's Search for Meaning*

Believing that others have it figured out and we are doing it wrong leads to feelings of isolation. This compounds our pain, for we now also feel inadequate. Self-compassion recognizes the shared human experience of pain, suffering, and imperfection. Thirdly, Neff incorporates mindfulness into self-compassion. Because we cannot simultaneously ignore our pain and direct compassion toward it, she highlights the necessity of observing and acknowledging our painful emotions without immediately trying to fix the unfixable or push the feelings away. Resisting or denying suffering has the paradoxical impact of increasing it. Self-compassion reduces self-criticism and self-evaluation and increases an awareness that we are doing something incredibly difficult and that we are not alone in our pain. It allows for greater acceptance, not of the death itself, but of our pain in living with the loss.

Self-compassion therapy, as most orientations, combines previous fields. It uses elements from cognitive behavioral therapy but differs because it fundamentally offers more than alternative words and a logical response (Gilbert, 2009). It goes deeper and integrates kindness and gentleness, which allows space for greater healing. While similar to self-care, it goes beyond a mere “break” and incorporates a change in perspective. Self-compassion is positively correlated with an increase in resilience and happiness and a decrease in anxiety and depression. It has a role in more successful relationships.

Harsh self-judgement is something that many grievers engage in, and the encouragement to be kinder to themselves can leave them scratching their heads. Nice idea, but what does that even mean and how would I possibly do it? Though skeptical, they begin

to see that self-compassion is a skill set that can be learned.

While maybe our clients don't know how to be kind to themselves, most do know how to recognize when

others show compassion. They also most likely understand that within a relationship, judgment creates distance and compassion creates connection. Their friend/brother/therapist/doctor is kind. So, we ask, “What does that look like? What does it feel like to be in this person's presence? What do they say? How do they say it? What is it like to be accepted and not judged?” They also typically know how to be kind to someone else and accept another's experience with pain without judgment. We have them describe what compassion looks and sounds like, so they have a concrete picture to work from.

With a picture of compassion and an understanding of its impact, clients are in a better place to notice times of self-judgment and to develop a compassionate inner voice. Germer and Neff (2015) teach clients to stop when they notice negative intrusive thoughts and take a “self-compassion break.” They recommend the words, “This is a moment of suffering, may I be kind to myself,” (p. 53) followed by the physical response of putting hands on the heart and noticing one's breath. Physical touch is comforting for most, even when directed at oneself. Done repeatedly, this process can create a powerful shift. It allows for the awareness of pain and provides the reminder



Eunie Alsaker

that the goal of grief is not to avoid or fix, but to find nurturing ways to live with the pain.

A simultaneous place to start involves body work. When we respond to our pain with fear, judgement, or criticism, we activate the threat response, or the sympathetic nervous system. And when we respond to that pain with compassion, we release oxytocin and activate a calming response. So, part of self-compassion work is to equip clients with ways to calm their body and mind, so they are able to first feel safe, allowing access to a different response. In *Man's Search for Meaning* (1946), Frankl writes, "Between the stimulus and the response, there is a space." Creating that space through breath work, grounding exercises, and anchoring activities/thoughts/music/physical objects sets the stage for success in shifting perception. It is a self-perpetuating loop. Physically calming oneself increases the ability to use kind words and compassion, which in turn relaxes the central nervous system.

In *The Mindful Self-Compassion Workbook*, Neff and Germer (2018) offer many practical suggestions for increasing self-compassion. I have chosen a few of my client's favorites.

- Write a monthly letter to oneself where both the difficulty of one's situation and one's strengths are acknowledged. Restate an on-going commitment to self-compassion and describe what this will look like.
- Establish an image of directing compassion or shooting love to the source of physical pain. With difficult emotions, kindness is directed to one's feelings. With judgmental or negating thoughts, kindness is directed to one's self-talk. Grief also lives in the body.

- Develop a practice of gratitude. Suffering is real, and that is not the only thing that is real. When grievors notice something of hope or love or a moment of peace each day, they are practicing compassion. It also is training the brain to be open to previously missed moments.
- Learn to ask, "What do I need right now?" Perhaps the answer is simply to sit with the pain. Or perhaps there is no answer at all. But asking the question gives the message that it is okay to notice what is needed, and it is okay to pursue it if possible.
- Consider ending a counseling session with a loving kindness meditation. Repeating the words, "May I be safe. May I be healthy. May I be loved. May I live in peace." sends a consistent message that these things are possible. Grievors can then use these words in response to self-judgment or other times when grief feels overwhelming.

Self-compassion is powerful. It allows grievors to step away from timelines and other false expectations, to have a way to actively care for themselves as they suffer, and to hold their grief in a new way. Anytime pain is met with compassion, healing is possible.

## Resources

Desmond, T. (14 January 2016). "Advanced Mindfulness: The Art & Science of Self-Compassion." PESI Conference. Roseville, MN.

Germer, C. K., & Neff, K. D. (2015). "Cultivating self-compassion in trauma survivors." In V. M. Follette, J. Briere, D. Rozelle, J. W. Hopper, & D. I. Rome. (Eds.), *Mindfulness-oriented interventions for trauma: Integrating contemplative practices* (pp. 43-58). New York, NY, US: The Guilford Press.

Gilbert, P. (2009). *Introducing Compassion-Focused Therapy*. *Advances in Psychiatric Treatment*, 15(3):199-208.

Neff, K. D., & Germer, C. K. (2018). *The Mindful Self-Compassion Workbook*. New York, NY: The Guilford Press.

Neff, K. D. (YouTube) (2014, October 16). *The Three Components of Self-Compassion*. Retrieved from <https://www.youtube.com/watch?v=11U0h0DPu7k>.

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situation of family businesses and loss. As yet another helper, he mentions and encourages the recurring themes found in this issue—love, trust, generosity of spirit. Better angels and helpers, indeed. Thanks, Tom.

Lastly, another MCDES member, Patricia Brenneman, wisely takes us to Lakewood Cemetery with her quiet reflections on landscape as a contemplative practice. Clearly, we must continue to keep our eyes on the helpers among us. Patricia, we thank you.

So I sleep well at night, trusting helpers such as all of you, will continue to help save our world. "Better Angels Persevere" flashes boldly in my thoughts, a neon-sign flashing with arrows pointing to "Helpers Enter Here." It's a scary time and a big job, saving the world, one compassionate word, one quiet listen at a time. But I believe if we stick together, we will be encouraged and enabled to continue the good work we do, for so many, so well.

Enjoy these waning days of summer, be generous in love and helping, and we'll see you at the fall conference.

## Seeking Words for GREAT Grief

by Ted Bowman

I'm a word-nerd; especially so for losses. Having or finding words facilitates my grieving. And having words for losses seems to be liberating for many, if not most, griever.

I think of Karla Holloway, a grieving parent, who yearned for a word to describe who she had become after her child's death. She wanted a word like widow, from Sanskrit and means "empty." She searched through many languages and traditions and found nothing that contained a name for her grief. She turned then to Sanskrit and found "vilomah," which means "against a natural order." When one's child precedes parents in death, we are vilomahed.

Recently, I have been searching for a word to fully describe my losses related to the current state of our world. One of the few writers I have found that addresses this is psychotherapist Francis Weller. In his book, *The Wild Edge of Sorrow*, he asserts there are five gates to grief. The first gate is the one most familiar because of its emphasis in grief and bereavement care: the loss of someone or something that we

come to love. It is his third gate that I wish to address here; called the sorrows of the world. Weller asserts that the grief we carry is not personal but shared, communal losses.

Only recently in my long career as a grief educator have I heard, often at the end of a session addressing personal losses, someone to speak first timidly but with growing strength that they do not stay awake in the middle of the night or perseverate during the day about their personal loss. Rather, the grief that threatens their emotional well-being and resiliency is the state of the world. And this has happened too often for me to not notice. A writer in *The Guardian*, a British newspaper, called this the "Great Grief"—a feeling that rises in us as if from the Earth itself.

Across different populations, psychological researchers have documented a long list of mental health consequences of climate change, incessant wars, and lack of leadership by world leaders: trauma, shock, stress, anxiety, depression, complicated grief, strains on social relationships, substance abuse, sense of hopelessness, fatalism, resignation, loss of autonomy and sense of control, as well as a loss of personal and occupational identity.

My purpose in writing this brief piece is not to offer a full discussion. Rather, this is an advocacy article for grief and bereavement carers that we listen and allow registrants, patients, clients or members to give voice to this "Great" loss. Failure to do so may compromise the ability of those living with personal losses to understand that their overwhelming loss may contain this communal sorrow. Attention must

be paid to losses related to the state of the world.

Yes, you may be saying, we do have words for communal losses: historical trauma, moral distress, post-traumatic stress related to war experiences, even compassion fatigue are examples. The issue raised here is that there appears to be a growing collective loss that is greater than too many personal losses and one or more communal losses. My search for a phrase or word to describe such losses is related to the challenge to griever when words are not easily found, available or used. As Ken Hardy asserted, It's one thing to lose something that was important to you, but it is far worse when no one in your universe recognizes that you lost it. In this case, many people do recognize the loss. They experience the loss and grieve it either currently and or with heavy anticipatory grief...but without an easily accessible vocabulary or validation with words to name their loss.

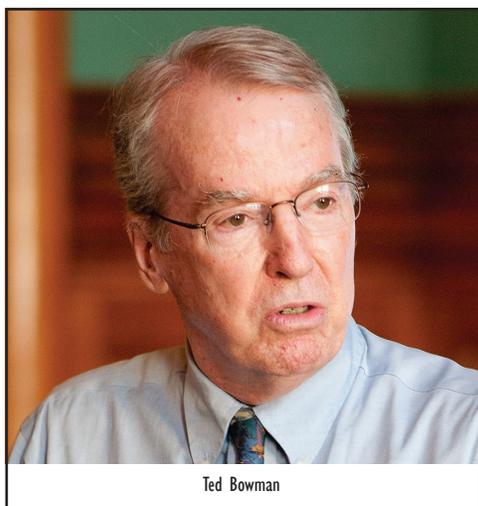
What is your experience of "Great" grief? What words or phrases best describe what I have tried to outline here? Are there resources you know of that address these losses that MCDES might include in future publications? Send any response to me at [tedbowman71@gmail.com](mailto:tedbowman71@gmail.com). I will gather, collate and share responses in future newsletters.

### Resources

Hardy, K. and Laszloffy, T.(2005) *Teens who hurt: clinical interventions to break the cycle of adolescent violence*. New York: Guilford Press.

Stoknes, P. (2015) "The Great Grief: How to Cope with Losing Our World." *The Guardian*. Thursday, May 14, 2015.

Weller, F. (2015) *The wild edge of sorrow*. Berkeley, CA: North Atlantic Books.



Ted Bowman

## Double Loss, Double Impact

By Tom Hubler

Emotionally, the death of a loved one is always “premature.” At first it feels almost irrational. Few people truly plan for it. Fewer still are ready for it. But for families who own a business, the loss of the entrepreneur has double impact. And for grief counselors, the double loss presents unique situations that require special understanding and care.

Business families typically are not inclined to prepare “early” for the loss of the founder or critical family members. One would think that the intimacy of a family working in business together would rally rather than isolate individuals. In my experience the opposite happens.

### Double Loss

Several of my clients have suffered the double impact—emotional and commercial—with the loss of the entrepreneur who heads both the business and the family. Such was the case with the Wheeler family (a composite I have created based on real circumstances) who went through the trauma of losing the family’s business founder.

Richard Wheeler started the company with his wife, Margaret, and through the force of his personality and superb business skills, built it into a strong enterprise. As was typical in the middle of the last century, Margaret managed the household while Richard ran the business. They were blessed with two sons and a daughter. All three grew up interested in the business and wanted to be part of it. This in itself was a blessing as only one quarter of family businesses survive through the second generation.

### Reality Sets In

Richard was proactive in bringing them on board. He created a trust that owned the business for the benefit of his wife and three children. This was unusual for small business families in those days. He was ahead of his time. One would think that the plan would smooth the way if he was unfortunately incapacitated or passed away. With his untimely death, reality set in.

Rather than involve a grief counselor to experience the loss as a family, they began by discussing the Wheeler Trust. They focused on issues of the business, rather than the loss of their father and husband. In fact, they avoided the topic, acting as if nothing had changed emotionally. Indeed, they maintained separate, conflicting business points.

When Richard was there to run the business, the siblings meshed well even though they brought vastly different talents to the organization. Jacob, the oldest, had started with the company right out of high school, enjoyed being in the office, and had no desire to climb the ladder. Rebecca, middle-born, was a smart, business-educated young woman who was employed out of state in a parallel business and was being groomed to rise in leadership in the Wheeler enterprise. Thomas, the youngest, was a commissioned salesperson for the company who was delivering exceptional results. Things were humming along great.

With Richard gone, the situation quickly deteriorated. Margaret, the widow, felt she should step in, especially since the children were grown and she could help steady the business. However the Wheeler Trust made her



Tom Hubler

only one of several beneficiaries and she owned no stock. Her worries about the family business caused her to start showing up at the office every day, micromanaging.

This undermined the work that Rebecca was trying to do. She had quit her job and moved back, applying herself to help bring Wheeler leadership into focus. This struggle between Rebecca and her mother made it difficult for either to be recognized by the bank as interim leadership.

Friction also increased between the two sons. Jacob expressed his unhappiness because his younger brother, Thomas, made more money. Thomas was compensated as a commissioned key sales representative, while Jacob was salaried, working in administration. Their mother felt that her older son should make more because he had more children. Everyone was bickering and undermining the others. All Richard’s plans—the trust, the positioning of his children for success, the direction of the family business—were falling apart. Grieving had devolved into competition. What had happened?

Double continued on page 10

## Sweet Nectar for the Grieving Soul

by Patricia Brenneman

*A year of mindful practice in the cemetery in the heart of the city,  
contemplating death and life,  
inviting nature's sweet nectar as soothing balm for the grieving soul.*

I've begun to explore the landscape of death and dying, of grief and loss, in a new way. When I say landscape, I really mean landscape- my exploration is about the land itself, about the earth and its creatures, about place, and how this vast and complex and alive entity is present for us in our grief, in our dying.

My practice is this: once a week I spend time in contemplative practice at Lakewood Cemetery. I walk, I sit, I meditate, I read poetry, I chant and sing. And I notice what shows up. Essentially this is a practice of mindfulness, embodied and emplaced within Lakewood's particular landscape. And then I go home to muse and ponder, eventually writing a Tiny Letter blog entry about my experiences. What I'm engaged in feels like both calling and offering- somehow I've been called into deep contemplation of grief and its landscape, and this comes with a knowing that it wants to be shared out in this world that is so often full of disconnection and suffering.

Those of you who have been to Lakewood know the beauty of this



Beautiful Lakewood Cemetery

space, with its gentle rolling hills, huge old shade trees, a small lake called Jo, and the myriad of creatures, seen and unseen, who live there. Before it was established formally by Minneapolis as a cemetery in 1871, this land was Dakota territory, nestled between Lake Harriet (Bde Uman) and Bde Maka Ska, where Cloud Man and his people lived, fished, hunted, gathered. The land that Lakewood occupies has been witness to the rupture and brokenness of people torn from their homeland-displaced; it has also been witness to ancestral experiences of deeply knowing and honoring this particular land. This land is a multilayered palimpsest of story and experience, made sacred in the losses and joys played out within it. This has always been sacred land. To be in relationship with this land is sacred practice.

Arising out of the rural cemetery movement that began with Mount Auburn in Cambridge, MA, this land was chosen as sacred space to hold our dead, our memories, our stories, our mourning. Its first burial in 1872 was Maggie Menzel, age 19; since then, Lakewood has become the final resting spot for generations of families, for well-known figures (such as Wellstone, Humphrey, Pillsbury, Perpich, Ueland, Tiny Tim, Dunwoody, Wirth) as well as for families from all walks of life and cultures. On Lakewood's website: "At Lakewood, we believe it's time to take a fresh look into the ways we approach death and remembering. To reimagine



Memorial Statue at Lakewood

how we come together to honor and memorialize life." We are being invited to inhabit this space along with the dead, to renew practices that bring us back into relationship with this place.

Sharon Blackie says that "we each carry inside us the long, age-old memory of the lands we have lived in, which have made us," describing the "long metaphoric memory" within our bodies of the lands that have shaped us. Places themselves, too, hold memory. Historian Christina DeLucia uses the word *memoryscape* to describe "constellations of spots on the land that have accrued stories over time." She described "remembrance" as "an irreducibly emplaced phenomena." Lakewood, in the particularities of its landscape, holds memory and tells story.

By walking, by paying attention, by interacting with the landscape of the cemetery, I am practicing remembering: inviting that which has perhaps become dis-membered (stories of the land, stories of those buried here, stories of those who grieve here) back into the wholeness of the landscape. By paying attention to the land and the creatures inhabiting this space, I also invite the stories of the witnesses of countless burials and raw grief: the trees, the animals, the hills,

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Nectar continued from page 8

the small lake nestled within them. Perhaps this practice is an awakening of stories that have long been dormant, stories that were silenced, forgotten stories from being out of past rhythms of cemetery visitation as a culture.

Nature heals. Studies on the Japanese practice of forest bathing indicate health benefits such as lowered blood pressure, heart rate, muscle tension, and stress hormone production, all resulting from time spent in nature. People report that they experience a sense of increased wellbeing while walking outdoors. Recently researchers have prescribed a specific minimum amount of time—two hours weekly—that we need to spend outdoors to reap these benefits. As I write about my cemetery practice, I want to remind people that nature holds and heals us. That they too can wander and wonder and notice—that they can invite their grief to wander and wonder with them, and to notice what happens when grief experiences nature’s attentiveness and infinite capacity to hold.

What I have seen: Eagle’s preening presence on a tall tree overlooking Jo Lake. Pileated woodpecker at work creating a nest cavity for his family in early spring. A turkey family, nine of

them chicks, circumambulating the pond in single file. The gravesite of a boy that I worked with years ago, who died tragically in 1988. A black-crowned night heron, and a great blue heron, stalking fish along the water’s edge. A mother snapping turtle on a mission, likely en route to lay her eggs. Muskrats gathering greens to feed their young, to line their den. A cache of small mammal bones beneath a tree, the feeding spot for a fox, perhaps a coyote. Kentucky coffeetree pods, cottonwood cotton, willows weeping, old guardian oaks shading. A dead turkey, large and sprawled there on the ground among headstones, around whom I laid a mandala of catalpa flowers. I have heard and seen and tasted and smelled cremation as it is happening. I have seen an in-ground marker inscribed BABIES. How many did this family lose? I have seen graves being dug, and gatherings of mourners, tearful, sharing stories. I have felt the heartache of this space. I have experienced death and dying, I have experienced the exuberance of life going on. The great cycle, the turning of the cosmic wheel.

Grief practice. Remembering practice. Mortality practice. The practice of heart-broken-openness, over and over again. It’s all of this.

I began my practice on Easter Sunday 2019 within the resurrection that is springtime, and intend to continue through the four seasons and all that arises and falls within them. You can read my musings at [www.tinyletter.com/PatriciaSoulTending](http://www.tinyletter.com/PatriciaSoulTending).

*Great is the master of birth and death,  
quickly passing, gone.  
Awake, awake, each one, awake!  
Don't waste this life.*

~ inscribed on the han, a wooden instrument used to call practitioners to meditation in the Soto Zen tradition

**Editor’s Note:** Patricia Brenneman offers spiritual guidance in the Jungian tradition, specializing in grief and loss, and in using sandplay as a modality for spiritual deepening and expression. She is deeply honored to have been invited to teach in Wisdom Way’s Transforming Soul and Society program, beginning with this fall’s new two-year cohort. Her website is [www.patriciaspiritualdirection.com](http://www.patriciaspiritualdirection.com).



Muskrats gathering greens



Patricia's flower mandala for a dead turkey

“By walking,  
by paying attention,  
by interacting with the  
landscape  
of the cemetery,  
I am practicing  
re-membering ...”

~ Patricia Brenneman

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## The Trust

First, the trust. Trusts are best developed when the entire family, including the entrepreneur, shares their ideas. All should have input concerning the roles and changes to apply when the business is forced to a new configuration. This is not simply a communication requirement; it's a best business practice.

The Wheeler family would have also benefitted by having established a professional Board of Directors and advisory members. Their advice and assistance before the unthinkable happened—and then when changes had to be made—would have supplied critical support during the transfer period and leadership transition. The Board could also have selected and hired a suitable interim president while the daughter continued her career growth. Together, the family and Board could have prepared plans in advance to determine new roles, affirm changed relationships, recognize the next generation, address standards, expectations, and compensations for family members working in the company.

## The Family

Second, the family. When the business entrepreneur dies, family comes first. The double-whammy of losing an important family member and the business driver complicates the emotions about both. I highly recommend that the family work with a grief counselor so that both family and business perspectives can be shared.

There is nothing positive about stoic, stiff-upper-lip, soldiering on. The business will suffer as well as everyone in the family. I have always recommended the practice of having regular Family Business Planning Meetings to

share what's happening and address concerns. This becomes vital if there is a loss. These become meetings where survivors can share their grief. This is a positive way to begin healing and build confidence in moving ahead.

## The Company

Third, the company and community. Family businesses are visible, important anchors to their community. The loss of the entrepreneur produces a grieving process inside the company. It needs to be recognized and talked about, especially when people have fears.

I have urged families to hold company-wide or department meetings to share the impact of the loss with employees. Reach out to customers in a timely manner. Reassure them about the company's stability and the family's commitment to the future. Involve financial partners, bankers and other professionals early (even when the trust is being drafted) so that they recognize their part in continuing the success.

## Take Time to Grieve

It is certainly important to acknowledge an important loss in the business. But it is initially even more important that family members themselves take time for the grieving process. Healing does not happen overnight. It usually takes longer if feelings are suppressed and business preparations are delayed.

My advice for any family, especially those working together in business: Be prepared, emotionally as well as practically. At every opportunity, contribute to the common good of your family out of your generosity, love, sense of abundance and trust. Make it your lifestyle and a conscious attitude. It will support everyone during any unforeseen event, especially if a leader and loved one is taken.

**Editor's Note:** Tom began his family business consulting practice in 1980 as one of few professionals addressing family-owned businesses in the United States. He integrates the notion of spirit in his work with family businesses, and assists family business clients with succession planning, leadership development, business planning, board development, and wealth preparation planning.

In addition to consulting, Hubler has served as a professional in residence at the University of St. Thomas in Minneapolis and served on the advisory board for the Center for Family Enterprise for ten years. Formerly, he was an adjunct instructor at the University of St. Thomas where he co-taught a class on Family Business Management for ten years.

He is a founding member and Fellow of the Family Firm Institute (FFI) in Boston. Additionally, he served as a member of the editorial board for 22 years of the *Family Business Review*, and has authored articles on success strategies for family-owned businesses and has been widely quoted in publications such as *The New York Times*, *The Wall Street Journal*, *Business Week*, *Corporate Report*, *Nation's Business*, *Inc.* and *StarTribune*.

Hubler was a guest multiple times on the *NBC Weekend Today Show* and a periodic guest on Minnesota Public Radio programs. Hubler had online columns that appeared in *Elite Advisor Forum*, *Minnesota Business Magazine*, and *Twin City Business*. Hubler is the founder of the Minnesota Family Business of the Year Award, now in its 12th year of celebrating outstanding Minnesota family businesses. He currently serves on the board for Banyan Community.

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prepares you for your own story of a loved one with a chronic disease. So many variables to navigate.

At this point in time, Dick is attending adult daycare during the week and spending Saturday at our home. I have never heard my husband complain about his caregiving duties and giving up one of his precious weekend days. We've had a lot and I would even say, "too much caregiving experience" after having cared for both of my parents as well. We know the road ahead will become even more difficult to travel. The history of Alzheimer's disease has been defined by heartbreak and loss, courage and perseverance. We have found that to be true with our family's story. Alz-

heimer's will not defeat us. We take one moment at a time and we use humor a lot. One of my favorite moments was when Dick was asked who I was and he responded, "the good one." Believe you me, I have gotten a lot of mileage out of that response.

Gratitude is an important part of my life and it is present even during difficult times like this. These caregiving experiences have provided the gift of allowing us to feel that we made a positive difference in how our parents lived and died. Alzheimer's is a thief, stealing everything it can and yet what it cannot take from us, is our love. Dick is not the person that he was, but he is still our person. We are grateful that his personality and sweet demeanor has not changed. The

Johnson family has responded with the purest and deepest form of love imaginable for our beloved dad, father-in-law and grandfather.



Kay, "The Good One," and Dick enjoying "forbidden" sodas.

## Sundries

### Caregiver Conference

**September 26**, New Richmond, WI, *Best Practices in Dementia Care: Learning to Give Care, Without the Fight*. This is an in-depth intensive workshop that will help learners use effective strategies for helping people with dementia during interactions, care delivery, and daily engagement. The goal is to help reduce resistance to care and foster participation and use of preserved skills. The workshop will help learners develop better observational skills to recognize and intervene effectively when behavioral challenges occur. It will emphasize the value of matching helping behaviors to the person's needs and retained abilities to promote a sense of control and self direction.

The speaker is Teepa L. Snow, MS, OTR/L, FAOTA. She is a Dementia

Care Training Specialist, a Consulting Associate, Duke University School of Nursing, and is on the Clinical Faculty at UNC-CH, School of Medicine. More information about the conference, and registration is at <https://www.witc.edu/continuing-education-and-training/conferences-and-events>.

### MNHPC Celebrates Forty Years in 2020

Their history will be highlighted at their Annual Conference, *Honoring Our Past, Celebrating Our Future*, **April 5-7, 2020**. Registration begins November 29 at <https://www.mnhpcconference.org>.

### MCDES Spring Conference

Mark your calendars for the MCDES Spring Conference, **April 24, 2020**. The speaker is Dr. Wendy Lichtenthal, Memorial Sloan Kettering Cancer

Center. The conference title and more information will be available by mid-October at the MCDES website, [www.mcdes.org](http://www.mcdes.org).

### MCDES Conferences Scholarships

The Dorothy Geis Scholarship provides small scholarships to individuals who wish to attend MCDES conferences but who are unable to afford the entire fee. Scholarship recipients also receive a one year membership to MCDES. Application information is at [www.mcdes.org/scholarships.html](http://www.mcdes.org/scholarships.html).

### Call for Future Event Listings

We welcome grief-related event information from our members. If you have an upcoming event you would like included in our Sundries newsletter listing, please email details to [sdardis@aol.com](mailto:sdardis@aol.com). Note quarterly deadlines of Feb 1, May 1, August 1, November 1.

Minnesota Coalition for  
Death Education and Support  
P.O. Box 50651  
Minneapolis, MN 55405  
763-391-3051

# Coalition News

## September 2019

### MCDES Board Members

Eunie Alsaker  
Diane Bauer  
Jan Bergman  
Allison Chant  
Sharon Dardis  
Edward Holland  
Kay Johnson, Chair  
Kelli Kinney  
Christine Lewis  
Amy Shaleen, Secretary  
Peter Thoreen, Treasurer  
Tim Thorpe  
Florence Wright, Vice-Chair

*MCDES membership does  
not imply certification or  
accreditation of its members.*

### Grief Resources

- ◆ Grief and Loss Series. 1st Wednesdays, 6:30-8 p.m. Barbara Rudnick, 952-542-4825, [brudnick@jfcsmpls.org](mailto:brudnick@jfcsmpls.org).
- ◆ Pathways—A Healing Center: [www.pathwaysminneapolis.org](http://www.pathwaysminneapolis.org), 612-822-9061.
- ◆ The Grief Project: [www.griefproject.org](http://www.griefproject.org), 651-298-1343.
- ◆ North Metro Grief Support Coalition, Grief Series, 763-442-3020.
- ◆ Mercy Hospital Grief Support Groups, Mondays, 7-9 p.m. 763-442-3020.
- ◆ Allina Support Groups, 651-628-1752, [www.allina.com/griefresources](http://www.allina.com/griefresources).
- ◆ Capitol City Grief Coalition, Thursdays 5:30-7 p.m. St. Paul. 651-227-4430.
- ◆ Downtown Minneapolis Coalitions, Saturdays 9:30–11:30 a.m. Tom Anderson: 952-927-7453, [TK4603@MSN.com](mailto:TK4603@MSN.com).
- ◆ MN Network of Hospice & Palliative Care, [www.mnhpc.org](http://www.mnhpc.org).
- ◆ Children's Grief Connection, 218-372-8420, [www.childrensgriefconnection.com](http://www.childrensgriefconnection.com).
- ◆ Compassionate Friends, 763-542-8528, [www.compassionatefriendssmpls.org](http://www.compassionatefriendssmpls.org).
- ◆ Hastings Area Grief Coalition, Thursdays, 6–7:30 p.m. 651-437-6817.
- ◆ Resource for End of Life Care Education, [www.endoflife.northwestern.edu](http://www.endoflife.northwestern.edu).
- ◆ Weathering Life's Losses—Adult Support Group, and Kids in Grief Support Group. Thurs., Stillwater, 651-430-4578.
- ◆ West Suburban Coalition, Thurs, 4-6 p.m. Alva Benson: 763-545-1108.
- ◆ Youth Grief Services, Fairview, [www.fairview.org/youthgrief](http://www.fairview.org/youthgrief) or 952-892-2111.
- ◆ The Young Widowed Support Group. 2nd Thursday, monthly, 6:30 p.m. 952-993-0594, [mcraem@parknicollet.com](mailto:mcraem@parknicollet.com).
- ◆ Center for Grief, Loss & Transition, St. Paul. [www.griefloss.org](http://www.griefloss.org), 651-641-0177.
- ◆ South Minneapolis Coalition, Thursdays 6:30–8 p.m. Norine Larson: 952-925-2437, [bnwalson@earthlink.net](mailto:bnwalson@earthlink.net).
- ◆ Richfield Bloomington Coalition, Thursdays 4:30–6 p.m. 952-835-7585, [otis.borop@nhumc.net](mailto:otis.borop@nhumc.net).
- ◆ Prince of Peace Grief Support, Burnsville. Mondays 6-7:30 p.m., 952-898-9320, [princeofpeaceonline.org](http://princeofpeaceonline.org).
- ◆ Edina Coalition, Thursdays 4:30–6 p.m. Terry Naugle: 952-937-5933, or [www.edinagriefsupport.org](http://www.edinagriefsupport.org).
- ◆ St. Mary's Grief Support Services, Duluth. Various free support groups for children and adults. Contact: 218-786-4402, [griefcenter@essentiahealth.org](mailto:griefcenter@essentiahealth.org), or [www.Essentiahealth.org/griefsupportduluth](http://www.Essentiahealth.org/griefsupportduluth).