

Coalition News

Quarterly Newsletter of the Minnesota Coalition for Death Education and Support
P.O. Box 50651 ♦ Minneapolis, MN 55405 ♦ 715-733-0265 ♦ www.mcdes.org ♦ info@mcdes.org

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

September 2022

Mark Your Calendars

Sept 16-28 ♦ Hope United Grief Group
Fall Retreat, *Healing Takes Time*. Info:

- <https://www.facebook.com/Hope-United-Grief-Group-707366586008882/>
- Marlene Hunt, 507-381-1177
- hopeunitedgriefgroup@gmail.com

Sept 22-Nov 10 (8-week course) ♦ *Understanding Your Grief*. This series will dive into Alan Wolfelt's book, *Understanding Your Grief*. Books are provided and registration is required. Register at <https://account.allina-health.org/events/60273#classSchedule>.

Sept 29-30 ♦ MNHPC Conference, *Celebrations & Transformations*. Info on page 9 and at <https://www.mnhpc.org/>.

Oct 7 ♦ MCDES Fall Conference, *From Cultural Considerations to Socially Just Practice: Disrupting Patterns of Suffocated Grief*. Info on page 1 and at www.mcdes.org.

Oct 13-Nov 17 ♦ *Growing Through Loss*, Fall Grief Series, North Metro Grief Support Coalition. No pre-registration and no fee. Info: 763-354-7828.

Oct 14-16 ♦ Retreat. *Fear Less, Live More with the End in Mind Project*. Info and registration at <https://www.bouncetravels.com/travel/fear-less-live-more-in-pequot-lakes/>.

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MCDES Fall Conference: October 7

From Cultural Considerations to Socially Just Practice: Disrupting Patterns of Suffocated Grief

Speaker: Tashel Bordere, Ph.D., CT



Tashel Bordere, Ph.D., CT

This conference will address patterns of loss, disenfranchisement, and suffocated grief of marginalized youth and families and ways in which grief has been further complicated by the COVID-19 pandemic and on-going systemic inequities. Social media and national movements have been pivotal in bringing widespread attention to the trauma and loss experiences of youth populations, families, and communities representing marginalized identities and backgrounds (e.g., Black female, LGBTQZ, single parent household, intellectual disability). This presentation is designed to contextualize the multidimensional components that characterize loss and grief for youth and families from marginalized backgrounds. Research, theory, and recent events will be integrated as we examine loss and coping, systemic impediments to coping, and some practices that are essential to diversity, equity, and inclusion in service provision and support. We will examine socially just practices that contribute to effective outreach, cross-cultural communication, and grief enfranchisement of bereaved youth.

Tashel Bordere, Ph.D., CT is a certified Thanatologist (Death, Dying, and Grief), author, researcher, and educator. She is a New York Life Foundation Grief Reach Grantee and conducts research and programming through the Center for Family Policy and Research at the University of Missouri. She currently serves as Board Member of the Association for Death Education and Counseling, Board Member of the National Alliance for Grieving Children, and Advisory Council Member of the Tragedy Assistance Program for Survivors (TAPS). She has served as Editor of the ADEC Forum publication. Dr. Bordere's research program assumes a contextual approach focusing on trauma, loss (homicide loss, assaultive violence—sexual assault), suffocated grief and Black youth and family bereavement. She studies cultural practices that promote healing and survival. Dr. Bordere has done numerous workshops, consultations, keynotes, and published research relating to social inequities and culturally responsive practices in loss including her co-edited/co-authored book, *Handbook of Social Justice in Loss and Grief* (Routledge).

The conference brochure and registration information is at www.mcdes.org. CEUs will be available for professionals in Psychology, Marriage and Family Therapy, Social Work, Behavior Health and Therapy, and MN Nurses.

From The Editor: On Bargaining

One small fact. You are going to die. Despite every effort, no one lives forever.

~ “Death’s” opening lines: *The Book Thief* (movie)

We feel better speaking our hopes and fear aloud. Narrative theorists teach that bargaining is part of who we are as humans. To suppress our bargaining instinct is to suppress an essential part of ourselves.

~ Rabbi David Evan Markus

One recent evening, I curled up and re-watched a favorite movie, *The Book Thief*. Adapted by Michael Petroni from a 2005 novel by Markus Zusak, it stars Sophie Neisse, a Canadian actress, who stole my heart with her performance as Liesel, a young girl caught in the horrors of WWII Germany. The hardships she faced, the lessons she learned, and the inner light she managed to carry, reminded me of another story of enduring courage and fortitude which I loved as a child: *The Diary of Anne Frank*.

The heartbreak of these characters and stories took me back to my own childhood as I reflected with new understanding on why this stark, matter-of-fact opening line from the character, Death, “...Despite every effort, no one lives forever...” triggered such deep memories for me: fear, longing, sadness, and yes, bargaining.

July 11, 1959; I was 10-years-old. Our family was on a camping vacation in Montana; my older sister and I sitting blissfully on the back of a fat pinto pony. My parents had been notified of an emergency back home, delivered to them via a phone call to a nearby rural store. My much-loved aunt, my father’s brother’s wife, had suffered a sudden heart attack and died in her sleep. She was just 36 and left my two (almost-like-brothers) cousins, without a mother. I remember the specifics of being told, tumbling, sobbing, off the horse and into my mother’s arms. “She died?” I wailed, disbelieving. “No!” It was my first close brush with death.

I recall little of the long two-day car ride home, or our distant families gathering, or even Aunt Babe’s funeral. But I do remember bargaining with God later, in the dark, in my bedroom. (Religious side-note: My mom made sure my sister and I never missed Sunday school, we, always coloring within the lines, slipping pennies from our allowance into a little plastic church that lit up as the coin dropped...to “feed the starving children.”) So I knew who was in charge! I got on my knees and prayed, “God, please don’t let my mother die and I’ll.....”

And thus began, my fear, my fascination, my obsession, my bargaining with God and fate and death and how it might all affect me personally. Who

could possibly be next; me, my teachers, my friends? Two years after Babe’s death, my Uncle Bill’s fatal heart attack again had me pleading, “God, please don’t let my dad die.” (My father was chronically ill but I never really ever imagined he would actually die.) Once again, I prayed, pleaded, begged God to spare my parents and I promised...what?

In hindsight, this is probably a pretty typical spiritual response for a good Lutheran child in the ‘50’s and ‘60’s. Magically, I imagined my deal-making might just somehow overcome God’s omnipotence and save my family.

Elizabeth Kubler-Ross would, of course, include bargaining in her “five stages of grief for the dying” in 1969. Rabbi David Evan Markus suggests that the “Integrative Theory of Bargaining” includes our emotions as bargaining outcomes. Even if our wishes aren’t granted, we feel better just saying them aloud. Believe me, my bedtime prayers during these uncertain growing-up times were full of my own terrified heartfelt wishes. Death both fascinated and frightened me. I wanted to experience life and live!

October 1961, President Kennedy advised, in the interest of civil defense and fear of atomic fallout, we should all build fallout shelters. You can bet I chewed my finger nails to the quick and begged God, “Please, just let me graduate 8th grade!” I was sure this was it! Just a year later, in 1962, we came especially close to nuclear war with the Cuban Missile Crisis. Now I was planning what I would take into our dirt root cellar to survive; my Nancy Drew



Sharon Dardis

Coalition News is published quarterly by the Minnesota Coalition for Death Education and Support. Your submissions are encouraged. Editor: Sharon Dardis Layout: Verla Johansson Deadline for December newsletter: **November 1**. (covers December, January & February events). Please send your items to:

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The Minnesota Coalition for Death Education and Support (MCDES) is a nonprofit, 501(c)(3) interdisciplinary organization dedicated to providing education, networking opportunities and support to professionals and volunteers who are involved in the care of dying and grieving persons.

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From the Vice Chair

By Kay Johnson, MCDES Vice Chair

Dear Readers,

The MCDES Board had another productive board retreat in June. Our annual retreat agenda is always full with lots to discuss and think about as our organization continues to evolve. As you know, we have been searching for a couple of good people to fill impending openings on the board (treasurer and newsletter editor). We have also been searching for a qualified person to fill our incredibly important administrative assistant role which is our only paid position. All three of these openings are because of board member retirements. While we will dearly miss Peter Thoreen, Sharon Dardis, and Verla Johansson, we also look forward to welcoming three new contributors to the MCDES Board. We will share more at a later date. The board bids a fond farewell to Rev. Dr. Ron Bell as he has been appointed to Extension Ministries: The Upper Room Institute for Healing and Wholeness as Executive Director. Thank you, Ron, for your MCDES service.

Can you believe it is August already? I hope you have had some time to refill your “tank” this summer in whatever way works for you. Perhaps you have done some traveling. My husband and I had planned a July trip to Alaska. This was our third attempt to make it there (first attempt was postponed due to pregnancy, and the second attempt in 2020 due to COVID). Our anticipation of July 6th was palpable and we had a fabulously packed schedule to take advantage of the 10-day trip. It started with hiking and sightseeing around Anchorage. From there we took the train to Denali and are now fortunate enough to be a part of the 10% that has actually seen the mountain. Wildlife sightings, hiking, delicious salmon meals and endless photo ops. The return from Denali (day 5 of the 11 day trip) brought about an unpleasant surprise. COVID symptoms and a positive test. We had certainly considered this possibility so we weren’t completely caught off guard. We briefly pivoted and finished the trip strong. While our trip did not go as planned, there were so many things to be grateful for.

We are all continuing to live with unknowns and uncertainties. We’ve learned to move forward and adapt. Many of you support clients who are working hard to live in a healthy manner each day. Thank you for your continued efforts, for your compassion, empathy and belief in humanity.

On behalf of the entire board, I say thank you for being a MCDES member. We look forward to seeing you at our fall conference on October 7th with speaker, Tashel Bordere, PhD, CT. Her topic is *From Cultural Considerations to Socially Just Practice; Disrupting Patterns of Suffocated Grief*. Until then, enjoy the rest of your summer. Take care of yourself and stay well.



Alaskan Travelers, Stuart and Kay Johnson

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books, my pillow, and my beloved chihuahua, Bootsie. “And please God, let me live long enough to have my first date, my first kiss, my confirmation day.” I was desperate.

I wasn’t an anxious kid, worrying about dying, not outwardly, at least. I was full of energy; always on the go. I read voraciously and was attracted to poets, especially loving Emily Dickinson (*Because I Could Not Stop for Death*), Ralph Waldo Emerson, (*Terminus*), and Louisa May Alcott (*Little Women*.) There seems now a common theme here. Interestingly, I also remember doing interpretive readings in high school, memorizing and reciting stories about “little Bobby Shafto dying at sea” and tales of the “Scarlet Ibis.” I also sang solos at weddings and yes, many local funerals. Seriously!

Looking back, I never discussed my bargaining with anyone. When my father died, just before I turned 14, I understood it was his heart condition, not God, that caused his demise. Still I bargained, “Please let me live to graduate high school.”

As I told this story recently to my husband, Stan, who has known me my entire life, I said, “Sadly, I can’t even remember what I actually promised in return for all these bargains?” Stan just looked at me and smiled, “You promised to be good!” Bingo! And that was it. Easy to be good, when my older sister was demonstrating how not to be good, climbing out her basement bedroom and hiding cigarettes under her bed. I would be the opposite, I bargained earnestly. Thinking magically, I was annoyingly good; just ask my sister!!

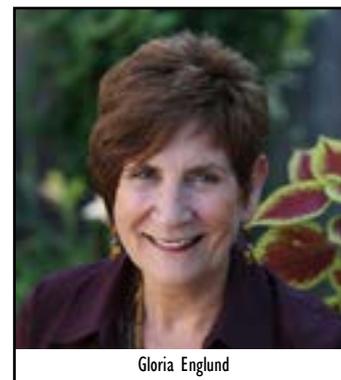
Of course, you all know better than anyone that our early experiences with

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Grief Support For Addiction-Related Deaths

by Gloria Englund

Editor's Note: Gloria Englund is the founder of *Recovering u*. As an ally of the recovery community, she honors all pathways of recovery. She is a psychotherapist, who holds a Master of Arts degree in Human Development. As a professional Recovery Coach, she works with individuals and families dealing with an addiction to alcohol, drugs, food, and relationships. Besides individual coaching, she offers two, on-going coaching support groups. She facilitates a CRAFT Family Support group, sponsored by Minnesota Recovery Connection, recoveringu.com/ru/wp-content/uploads/2020/04/Family_Support_Group.pdf, for those who have a loved one experiencing active addiction. A Different Kind of Grief© is a support group for those who have a loved one who has died from an addiction-related cause, <http://recoveringu.com/grief-recovery-support/>. At the present time, both groups are offered via Zoom. Gloria has personal as well as professional knowledge of addiction and recovery; her oldest son, Aaron, died of a heroin overdose in 2007. Her book, *Living in the Wake of Addiction: Lessons for Courageous Caregiving*, demystifies addiction, defies stigma, offers hope for recovery, and serves as a guide for professionals, families and individuals seeking support on the journey of recovery. As an accomplished public speaker, advocate and published author, Gloria brings a message of hope and recovery to others. For more information, please see <http://recoveringu.com/>.



Background

In 2013 I authored an article, *A Different Kind of Grief*©, for the MCDES September newsletter. Sharon Dardis recently asked me if I would write another equating where things are now with substance use-related deaths compared to where they were in 2013. As an advocate in addiction recovery, my initial jaded response to Sharon's request was that not nearly enough has changed for those seeking recovery services, as well as for their loved ones. After contemplating this further, I'd have to say the biggest change in the last nine years is increased awareness of addiction-related deaths. This unfortunate "gift" arrived with the opioid epidemic which was just beginning to raise its ugly head in 2013.

Special Support for Group Members

My previous article focused on why/how I discovered the need for specific grief support for those who have loved ones who have died from addiction-related causes. This need hasn't changed, but the numbers of loved ones need-

ing this support has exploded, as have the deaths of their loved ones. To my knowledge in 2013, *Recovering u* was the only organization offering this specific grief support. Now there are more ongoing weekly or monthly groups (see my resources on page 7). These differ from our consecutive six-week groups because each week we offer an educational component relating basic understandings of substance use disorder (SUD), the disenfranchised nature of their grief, and the interplay of trauma that occurred both while their loved one was alive and how it follows them in their grief and mourning. The stigma and shame that still accompanies SUD sometimes keeps our group members ignorant about the nature of SUD while their loved one is alive. They may not even be aware that their loved one suffered from a SUD until they died. Healing begins when they let go of the stigmatized ideas connected to SUD. Primarily, they need to understand that neither their loved one, nor they, have the power to rid their loved one of this disease alone. When they let go of the "why did my loved one

die" and accept the "what"—that their loved one died from a brain disorder for which there is no cure—only recovery, real healing begins. Until they understand and accept their loved one died from an illness they couldn't cure, control, nor cause, they can't move into processing their own grief.

Recent Statistics for Deaths Related to SUD

How have the deaths of those suffering from SUD changed over the last several years?

- Overdose deaths reached almost one million in the United States from 1999 through 2020, according to a new study by the Centers for Disease Control and Prevention (CDC).¹
- A study in 2019 by the National Institute on Aging examined the falling US life expectancy using data from the CDC, National Center for Health statistics and the U.S. Mortality Database. The study found that following 2014 life expectancy began declining with "A major contributor... has

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been an increase in mortality from ... e.g., drug overdoses, suicides, organ system diseases among young and middle-aged adults of all racial groups...”²

The COVID-19 pandemic proved devastating for all people with substance use disorders. Before the pandemic began, the overdose epidemic was finally getting its reckoning. Purdue Pharma was being sued in state and federal courts for their unconscionable contribution to the over-prescribing of prescription opioids. Books and movies about methamphetamine and heroin addiction, like *Beautiful Boy* and Netflix’s Emmy award-winning series, *Dope Sick* were being read and viewed by the general public. Then COVID hit. All of the things that had begun to bring the opioid epidemic into the light of everyday were buried under the pandemic’s statistics and deaths.

- The latest data from the U.S. Centers for Disease Control finds that between May 2020 and April 2021 there were 100,000 drug overdose deaths in the country. This is a 30% increase from 2019. Sixty-four percent of these overdose deaths were tied to illicitly manufactured fentanyl or its chemical cousins. These overdoses are killing the young. About 1 in 5 fentanyl-related deaths now involve males under 25 years of age.
- The pandemic disproportionately affected drug overdoses for people of color. According to the CDC, researchers found that overdose deaths jumped 49% among Black people in the United States from 2019 to 2020, compared with a 26% spike among white people.³
- American’s love affair with its long-time legal drug, alcohol, saw an

increase in consumption during the pandemic. Women most often bore the brunt of holding down a job, supervising online learning for their children, along with household duties. Their drinking episodes increased by 41%.⁴ Alcohol use increased by 19% among all adults aged 30 to 59.⁵ How interesting that liquor stores were considered an essential business during the pandemic.

- Overall, Native Americans struggle with higher rates of drug abuse, overdose, and dependence than the general population.⁶ “This new finding flies in the face of public perception and really makes it clear that, as we address the overdose crisis in the United States, we have to think of it as a racial justice issue, along with a social justice issue, because low-income people are disproportionately affected, including white Americans,” said senior researcher Dr. Helena Hansen, a professor of psychiatry at UCLA David Geffen School of Medicine.

Isolation and Substance Use Disorder

COVID disrupted all aspects of society, but the isolation it created posed unique risks to individuals with SUD. Although recovery from any addiction is possible, the isolation created by the pandemic was doubly troubling for those with a substance use disorder. First, the safety guidelines of the pandemic initially prevented people from attending in-person recovery groups. Newly recovering people often do not have the financial ability to own a smart phone or computer, so they could not even log into an online recovery meeting when one finally became available. Second: treatment centers shut down for a period of time.

The lack of connection to recovery meetings and treatment centers proved devastating for the newly recovering person and those seeking recovery. Although there are numerous pathways of recovery, sharing one’s recovery with others is how and why recovery happens. People seldom recover in isolation.

Change in Our Grief Group Population

I’d also like to comment on the ebb and flow of the nature of the deaths our group members experienced over the last ten years. Initially, and up to the COVID-19 pandemic, most of our group members loved ones had died from opioids or a combination of opioids and other narcotics. The group members were mostly parents whose children had died. This makeup grew quickly when fentanyl came on the scene.

Specific Sibling Interest

About three years ago, we began to receive interest from siblings mostly wanting a ‘siblings only’ group. They found that when their brothers or sisters died, their grief was often deferred to the parents or even grandparents. They and their grief almost became invisible. I did notice that, if we had a sibling in group along with parents, the sibling (even though they were not related) often acceded to the parents and the parents often coddled the siblings. I had one sibling repeat my group. After being in a group with parents, she joined a “sibling only” group and was noticeably freer expressing her views and feelings. She said that after completing the “sibling only” group she finally felt safe in her grief and mourning journey.

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A “Men Only” Group

In the fall of 2021, I also received a request from a few men to have a “men’s only” group. Although there are differing views about/if men and women grieve differently, we decided to honor this request. My husband, who had been in a mixed (both men and women) Alanon group and a men’s only Alanon group, definitely believes men express their feeling more freely in a group when in the presence of men only. Since he had group experience and training in group facilitation, he agreed to facilitate the group. During some of the sessions, I would offer the educational piece, then leave, and he would facilitate the reflection and group check-in. The men that participated seemed incredibly pleased and went on to be part of the monthly group we offer for those who have been through the six-week group.

My Personal Wake-up

Having a child die of overdose and discovering his body after a 20-year struggle with SUD has definitely been a traumatic recovery process for me. Myself, as well as my co-facilitator, whose daughter died of a poly-substance overdose, meet with a licensed therapist for consultation once a month. Listening to comparable stories like ours was the general make-up of our groups until this last year. Ninety percent of the people who became part of our groups in 2022 have had children, spouses, siblings, and parents who died from alcohol misuse. We are often humbled by the grueling details these courageous, dear people share about how their loved ones died. Alcohol Use Disorder often allows the user to function at a fairly high level for an extended period of time. When they start to decline, it often comes quickly,

leaving the loved one astounded as they watch their spouse, parent, sibling, or fiancée experience organ failure, internal bleeding, and dementia-like symptoms that can’t be reversed. Many of their loved ones never experienced the opportunity to receive treatment. Initially, group members’ loved ones were in the later years of their life when they died. Then more of them were middle aged—in the height of their careers or still raising a family. Most recently, we have had group members whose loved ones have been in their early 30’s and late 20’s. I didn’t realize that I had unconsciously considered that overdose deaths were the most traumatic, until I began to hear these stories of loss and death. I share this with you, not to shock or alarm you, but to help ground us all on the possible devastation of our “legal” drug. I think the statistics I shared earlier should also help bring this home.

A Needed Change in SUD Assessment in Minnesota

Awareness is always the precursor to change. With SUD hijacking the brains of those who suffer, when one decides they need help and asks for it, time is always of the essence. One of the newest changes in the treatment enrollment process for publicly-funded treatment improved in June of this year. The Minnesota Department of Health and Human Services ended its policy on June 30th, requiring a “Rule 25” assessment as the only method for eligible people to receive publicly-funded SUD treatment in Minnesota.⁶ They now offer a direct access model. “This model allows people a choice in a provider, as well as allowing them to go directly to a provider in order to receive a “comprehensive assesment.”⁷ I cannot tell you how many times my son (as well as clients’ loved ones)

waited several days, even weeks just to get an assessment, only to change their mind about going to treatment during the waiting period. And of course, their life was continually endangered because they were using while they waited for an assessment, just to keep from going into withdrawal.

When your loved one’s life is endangered by this chronic illness, the right help can never come fast enough. Let’s hope this change in the Rule 25 Assessment opens the door more quickly to those who seek and need recovery treatment support.

References

¹Hedegaard H, Miniño AM, Spencer MR, Warner M. “Drug overdose deaths in the United States, 1999–2020.” *NCHS Data Brief, no 428*. Hyattsville, MD: National Center for Health Statistics. 2021. <https://www.cdc.gov/nchs/products/databriefs/db428.htm>.

²*The Role of Alcohol, Drugs, and Deaths of Despair in U.S.’s Falling Life Expectancy*, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7144704/>.

³(2021). “Alcohol & Substance Abuse.” *National Congress of American Indians (NCAI)*. Retrieved April 2021 from <https://www.ncai.org/policy-issues/education-health-human-services/alcohol-substance-abuse>.

^{4,5}*Alcohol Consumption Rises Sharply During Pandemic Shutdown; Heavy Drinking by Women Rises 41%*. RAND Corporation. <https://www.rand.org/news/press/2020/09/29.html#:~:text=Amer-ican%20adults%20have%20sharply%20increased,a%20new%20RAND%20Corporation%20study>.

⁶(October 2020). *Injury Prevention in American Indian and Alaska Native Communities*. Centers for Disease Control and Prevention (CDC). Retrieved April 2021 from <https://www.cdc.gov/injury/tribal/index.html>.

⁷Substance Use Disorder (SUD) Services: Rule 25 Process (state.mn.us).

NOTE: See Addiction-Related Resources on page 7.

Lessons in Letting Go: A Love Story

by Alyssa Johnson

Before my grandpa's Alzheimer's diagnosis, my only exposure to memory loss was from romance movies like *50 First Dates* and *The Notebook*. In both, the person with memory loss eventually experienced emotional, joyous moments of remembrance through storytelling and daily routines designed to trigger memories. Like with most movies, these depictions of memory loss and its impacts did not at all resemble my family's experience with Alzheimer's.

My grandpa, Richard "Dick" Johnson, was everything to my family and me. The son of tough, no-nonsense Swedish immigrants, he was our family's light; smiley, kind, and gentle. He loved helping. He chatted with absolutely everyone, everywhere we went, volunteered in his spare time, sang in the church choir, and got tremendous joy from hosting friends and family, playing card games, golfing, and skiing. Then, slowly and ruthlessly, one-by-one, Alzheimer's stole these joys.

For ten years, I watched grandpa go from being active, social, busy, and full of joy to being unable to walk, talk, eat, or do any daily activities without assistance. By the end, Alzheimer's had stolen nearly everything from him. Every time I visited, there would be another thing missing from the person I had known my whole life; another loss to grieve. What helped me get through it was clinging to the one silver lining I could find, which was that, despite everything, Alzheimer's could not take what we loved most about him: his warmth. He still laughed, smiled, made funny faces, and spread his kindness like the magic it was.

Something *The Notebook* didn't show was how dementia comes for one's personality first and physicality last. You will first powerlessly witness your loved one turning into a shell of who they were; then their motor skills decline to become more like an infant than an adult. For me, Alzheimer's was not a million goodbyes, a thousand cuts, or any of the other expressions used to conceptualize the experience. It was an unfathomably painful, sometimes beautiful, terrible ordeal in a league of its own, impossible to compare, and unique to everyone on this journey.

Throughout my grandpa's ten years with Alzheimer's, not once did he suddenly remember who I was or my relation to him. There were no happy moments of

lucid conversation. Toward the end, there was no conversation at all. What my family did experience, though, was our own version of a love story. One filled with deep love, learning, silliness, pain, loss, tears, and a continuous reminder that the only option—despite all attempts to fight it—is to surrender to what is, and let go of what was.

Editor's Note: Alyssa Johnson is the 28-year-old daughter of our vice-chair, Kay Johnson. She received her undergraduate degree in political science from the University of Minnesota and her Masters degree from the Humphrey Institute on Public Policy. She is a consultant for Slalom Consulting in Minneapolis.



Resources Addiction-Related Deaths

1. <http://recoveringu.com/resources-links/>
2. **Recovering Hope: Using the 12 Steps to Find Healing when You've Lost a Loved One to Addiction.** Offered every 2nd Wednesday via Zoom. <https://www.theretreat.org/programs/family-program/recovering-hope>. Contact Sherry at 952-476-0566.
3. **Survivors Resources.** Offers crisis response, grief support and services for families of victims of death due to homicide, suicide, accidental overdose and violent death. Contact Colleen Luna: Colleen@survivorsresources.org, 651-395-7349, 651-373-4808.
4. **Grace for Grieving** (faith-based) Contact: Karrie Snyder at specialkarrie1@msn.com or 612-867-7405.



Grandpa Dick and Alyssa

Practitioner's Corner: Burnout

by Eunie Alsaker

The expectation that we can be immersed in suffering and loss daily and not be touched by it is as unrealistic as expecting to be able to walk through water without getting wet. ~ Rachel Naomi Remen

In the field of grief and loss, we daily connect with people who are hurting. The potential for burnout is always high in our field, but when we add the challenges of the last two years, it is heightened. Burnout is in the news more than any other time that I can remember in my professional life. And during this past year, I was contacted to address the topic with professors and students more than in all my other work years combined. In my dive into burnout prevention, I found some helpful ideas and resources I'd like to share.

Costs of Burnout

The costs of burnout are serious and include emotional and physical fatigue, a reduction in caring or compassion, and a decreased sense of accomplishment. Burnout can diminish our job satisfaction and impact our identity. It happens when we are completely exhausted, but instead of stopping, we continue to push through. And when we keep going during those times we need to rest, it is easy to feel like we aren't effective or that we aren't doing enough. These feelings of inadequacy often cause us to carry burnout silently.

Emily Nagoski and Amelia Nagoski, authors of *Burnout: The Secret to Unlocking the Stress Cycle*, remind us that stress has a cycle—a beginning, middle, and end. During the middle, our sympathetic nervous system reacts. These are the physiological responses of our heart, lungs, brain, and hormones. This isn't necessarily a problem if we reset

after the stress. Stress doesn't automatically leave our bodies; we need to find ways to intentionally return to a state of calm. But in our busy lives and high demand jobs, we often jump from one stressful state to the next. We don't take the time to stop, recenter, reset. The authors claim it isn't necessarily the stress that leads to burnout, but rather our failure to have ways to step out of the stress and bring it to an end, even if just temporarily. This framework can be empowering. I may not have a lot of control over the stressors in my life. I do have some control over my ability to reset.

Resetting the Grief Response

How can we reset from the stress response? The authors teach that active physical movement is the single most effective way. More passive ways of meditation, yoga, literally shaking it off, or full, deep breaths also work. Creative self-expression through art, music, or food are effective. A deep dive into our imagination through reading or watching a show can transport us into this state. Relationships are key because our chemistry shifts when we connect. All these strategies are more beneficial when we set the intention that they will help. "I am going to go for a walk to shed the stress of the day." "I'm making this meal and am shifting my focus to nourishing my family." "I'm going to transport myself to another place through painting."

The NPR Life Kit episode, "Burnout Isn't Just Exhaustion," highlights

multiple protective factors. Because we often ignore the signs of burnout, Chatterjee and Tagle (2021) encourage us to pause often and do a self-check-in.

Notice, name, and acknowledge emotions, then focus in on the present moment. Find things about work that we can control and carve out time for short breaks. Notice what we accomplish each day and give permission to complete remaining tasks later. Highlight a time from each day when we felt connected to our purpose or values. Find ways to shed our professional role after work and devote even a few minutes to something which brings joy.

Empathy and Burnout

In his book, *The War for Kindness*, Zaki (2019) devotes a chapter to the intersection of empathy and burnout. In his research, the author found that rather than shy away from empathy, people who are less prone to burnout move toward it. But they do it with intention and know how to contain



Eunie Alsaker

Burnout continued on page 9

*It's not the amount
of the darkness that
matters. It's how you
stand in the darkness.*

~ Robert Wicks

Burnout continued from page 8

it. These people are very clear in their role. They understand what they can and cannot do for their clients/patients. These providers find ways to be fully present to the person while with them, and then send loving kindness wishes to them at the conclusion of their interaction, aware that their work for the time being is complete. Just as stress has a beginning, middle, and end, so does our interactions with clients. We center ourselves before we meet, we are fully present with wide-open empathy while together, and we end the interaction without being a sponge and carrying the heaviness or responsibility for change home with us. (For those who were at the May conference on self-compassion, this will remind you of the GRACE model of care.)

Burnout is real and should not be ignored. Certainly, there is a limit to

the amount of stress we can hold, and there are many things organizationally beyond our control which we hope leaders will address. The good news is that there are also many skills that can at least partially mitigate burnout. Here are some questions for self-reflection.

Questions for Self-Reflection

- What are my body's signals that I am experiencing distress?
- How do I/might I complete the cycle of stress and experience "reset"?
- How can I show myself self-compassion in this difficult job?
- What do I need to put a bubble around and protect at all costs?
- Is there a place in my life where I can use a "good enough" approach? What can I not do?
- How can I create more meaningful connections at work?
- How can I show concern for clients without trying to fix?

- How do I experience meaning in my job? How I can be more intentional about noticing it?
- What fills me up? And do I make time for at least a sliver of this each day?
- How can I design an end-of-the-day ritual to shut down my workday?

References

- Chatterjee, R. & Tagle, A. March 18, 2021. *Burnout Isn't Just Exhaustion: Here's How To Deal With It*. NPR Life Kit. <https://www.npr.org/2021/03/08/974787023/burnout-isnt-just-exhaustion-heres-how-to-deal-with-it>. Retrieved 1/10/22
- Nagoski, E. & Nagoski, A. P. (2020). *Burnout: The Secret to Unlocking the Stress Cycle*. New York: Ballantine Books.
- Zaki, J. (2019) *The War for Kindness: Building Empathy in a Fractured World*. Broadway Books, New York.



MNHPC Virtual Conference Celebrations & Transformations Sept 29 & 30

Information provided by the MNHPC (Minnesota Network of Hospice & Palliative Care).

Our theme reflects on our collective experience working in serious illness and end-of-life care through the heightened complexities of a pandemic... We bring attention to the ways we may have been called to transform our work and day-to-day existence. We rely on our hospice and palliative care community to acknowledge both the challenges and beauty brought forth by transformation. Keynote speakers are:

Haider Warraich, MD ♦ Haider Warraich is a physician, author and researcher at the VA Boston Healthcare System and Brigham and Women's Hospital and Assistant Professor at Harvard Medical School.

Marissa Renee Lee ♦ Marisa Renee Lee is a called-upon advocate, writer, and speaker on coping with grief. In 2008, she lost her mother to breast cancer, in 2019 Marisa and her husband lost a much-wanted pregnancy, and most recently, she lost a young cousin to the COVID-19 pandemic.

Jen Crow ♦ Jen Crow serves as Senior Minister at the First Universalist Church of Minneapolis. She is the founder of Wellspring, a Unitarian Universalist program of spiritual deepening used across the country.

Hospice Nurse Julie ♦ Julie McFadden, BSN, RN has been a nurse for 14 years. Julie is an experienced ICU, and now Hospice/Palliative Nurse.

Barbara Karnes, RN ♦ Barbara Karnes, RN, is an internationally recognized author, speaker, thought leader and expert on end of life care and the dynamics of dying.

Visit the MNHPC website for more information and to register: <https://www.mnhpc.org/>.

Book Review: Unburying My Father: The Life and Photography of Randy Masser

By Zander Masser, Self-published, 2022

Reviewed by Eunie Alsaker

Zander Masser's 2022 book, *Unburying My Father: The Life and Photography of Randy Masser*, is multi-layered. On its most basic level, it is a coffee table book with captivating photos from the 1970s-1990s illustrating ordinary moments in New York City.

It is also a creative endeavor telling the story of a son, friend, husband, father, and photographer through the words of those who knew him best and the photos which he amassed over his life.

While not a medical book, it offers a clear explanation of hemophilia and how Masser lived with the disease before and after critical medical advances. It provides an adept explanation of why over 50% of people with hemophilia in the US became infected with AIDS in the early 80s through the errors of agencies charged to heal, protect, and advocate for the vulnerable.

It is a moving tribute to a much-loved father who died when the author was fourteen and his brother seventeen.

It is a demonstration of how an instrumental griever used art, writing, and both his father's and his own creativity to process his grief. It is a testament to our knowledge that connection to our loved ones continues after their death. And it confirms how healing can happen years after a loss.

Randy Masser was born with hemophilia in 1947. He did not expect to live long or have children. With increased medical knowledge, the quality of his life improved, allowing him to marry,

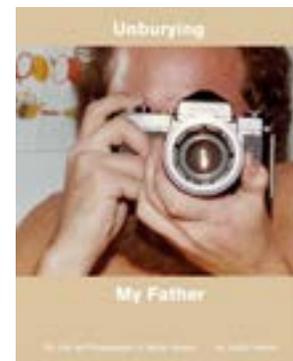
have two sons, and pursue a career as a photographer. In 1986 he tested positive for HIV after receiving tainted blood. A decade after his death in 2000, his son, the author Zander, discovered boxes of his father's photographs/slides.

In sorting through the thousands of pictures, Zander and his brother gained deeper knowledge and insight into their father through the eyes of the adults they had become. They knew him as children and teenagers; now they could continue that relationship as adults who had become fathers themselves. The author reaches out to the important people in his father's life and asks for their stories. "Help me understand who my father was," was the essence of his request. Zander and his brother grew up with a physically vulnerable dad who was unable to roughhouse. Their exploration led to discoveries about him as a young child and young adult, as a friend and a colleague. Children so often see a narrow slice of their parent's life. This was no longer the case for these sons.

Zander's succinct writing style is a fitting match to the nature of the photos. The mood of each photo is skillfully matched to the narrative. The finished product is brilliant and reflects the physical as well as emotional labor applied. It preserves and expands a life.

In the end, writing this book brought healing to the author. It allowed him to shift from the absence of his father to his presence. In his own words, "...I pivoted from focusing on how my father's death shaped me, to focusing

on the impact his life has had on me. I did find a part of myself in experiencing his death, but I have much more of myself in his life" (pp. 278-9).



An unexpected byproduct of experiencing this book is the seed of an idea for my own project. Perhaps it will be for you as well. We may not be professional writers, but we can write. We may not have boxes of professional photographs, but most of us have some pictures. We may still know people who knew our loved ones. There are endless possibilities for what we could do with the existing memories, stories, and pictures. It is possible the author hoped for such an impact. He is an occupational therapist who offers interactive workshops to assist participants in reconnecting with their loved ones. Healing is always possible, and Zander Masser leads the way.

Editor's Note: Zander Masser is an occupational therapist, husband, father, musician, and author of the narrative photography book, *Unburying My Father*. Zander's father, Randy, died in 2000. Twenty years later, Zander unburied ten thousand slides from Randy's career as a professional photographer, which prompted him to dig deeper into his father's life. What started as a photography project evolved into a transformative exploration of living with, and healing from, grief. Zander Massey is available for in-person and virtual events, including workshops, multimedia exhibits, and talks about hemophilia, HIV, and exploring grief through creativity. His website is <https://www.randymasserphoto.com/>. Contact Zander at zander@randymasserphoto.com.

Book Review: The Grieving Brain—The Surprising Science of How We Learn From Love and Loss

By Mary-Frances O'Connor, PhD, HarperOne, 2022

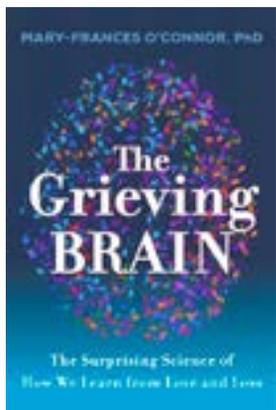
Reviewed by Chris Lewis. MSN, CNS

Here. Now. Close.

With this three-word mantra, Mary-Frances O'Connor lays down the backbone of her new book, which is that our deep attachments to loved ones, whom we need “like we need food and water,” causes our brain to store in its hippocampus structures a virtual map of where our loved ones are in three dimensions: space, time, and closeness.

Interestingly, the author describes, on page 206, the two attributes that define an “attachment figure,” the loss of whom we would grieve, by asking these questions: “First, does this person think I am special, and do I think they are special, compared to other people in the world? Second, do I trust this person would be there for me if I needed them, and do I trust I would make the effort to be there for them, if they needed me? If a relationship fulfills these two questions, regardless of what the social role of the person is, then likely one’s attachment needs are being met. This could be a neighbor, a sibling, a secretary, a pet, or a partner. What society calls them is much less important than the role they play in your life.”

Our brain spends much effort mapping where those attachment figures are, in the three dimensions, while they are alive. The



brain exists to solve problems, and when a loved one dies, the brain has a PROBLEM TO SOLVE. If our brain cannot comprehend that something as abstract as death has happened, it cannot understand where the deceased is in space and time, or why they are NOT here, now, and close. This is not logical to the brain, which needs to “go find them.” Thus, the grieving begins. Because the loved one existed, and we love them, the person still physically exists in the neurons of our brain, which cannot re-learn reality all at once. O'Connor reassures that “you are not losing your mind; you are just in the middle of a learning curve.” Grieving (learning to live a meaningful life without my loved one) is a type of learning.

Like “phantom limb” pain, grieving requires neural re-wiring. We are not very different from chimpanzee mothers, who have been observed carrying and grooming their dead infants for days, while other chimps groom the mother. If they are allowed to carry the deceased infants as long as they need to, the mothers will finally leave them permanently and move on. If the infant is taken from the mother, she will protest loudly and leave the group to search intensely. What they and we need is the support of our community, final rituals, and time.

O'Connor’s book is divided into two parts: Grief, and Grieving. She asserts that grief itself, made up of intense repetitive emotional moments, never really ends, but grieving is a process with a trajectory, and adaptation changes it. The author sees yearning, which

is very much like hunger or thirst, as “the heart of grief.” She describes this yearning as “wanting the person to again be here, now, close.”

What makes this book very different from many other insightful and helpful texts about grief is its focus on brain function, and what can be learned from studying the brains of bereaved persons in action by using Functional Magnetic Resonance Imaging (fMRI). Through an unexpected opportunity about twenty years ago, Dr. O'Connor ended up implementing the first-ever neuroimaging study of a group of grievers, which showed that grief is a very complex process using many specific areas of the brain, though not all, and notably not the amygdala. Her imaging findings are discussed in detail, along with results of the second fMRI study some years later using different participants, which compared neuroimaging of those with resilient grief and complicated grief, and found where yearning is activated in the brain. These findings were not related to time since the death, or age of subjects.

Descriptions of neuroanatomy and brain functions in this book, scientific details about grief previously unknown, should help us see bereavement in a more holistic, physical way, much like what Dr. Bessel van der Kolk’s transformative book, *The Body Keeps the Score*, has done for the field of trauma.

Besides its unique information gained from brain studies, this book generously cites other grief researchers whose work has pushed the whole field forward. And a surprise to me was the author’s humble sharing of lessons learned through her own painful losses, and deep insights that raise the neuroscience to a philosophical level.

Grieving Brain continued on page 12

Grieving Brain continued from page 11

Dr. O'Connor has personalized this material and sprinkled anecdotes and unexpected humor throughout, which made it a fascinating read.

One complaint: I have a strong ethical bias against the use of animals in research, and during the descriptions of other researchers using invasive or manipulative methods to gain scientific knowledge faster or easier by using animals, just because the research is permitted, I literally had to use mindful breathing. It is bizarre that smart people don't see the violation in causing mental (or physical) pain to one creature in order to learn how to cure it in another. We must do better.

The author won points with me by discussing the timely topic of the new diagnosis Prolonged Grief Disorder, and seeming to find the term "Complicated Grief" more useful. Additionally, I appreciated her self-critique of the fMRI studies, wisely pointing out limitations due to the gender and race of participants. Hopefully these valuable studies will be replicated with more representative subjects.

For a brain science geek/grief therapist like me, this book was a page-turner. I found it practical, understandable, and absorbing. The word must be out, because my library copy had to be returned without renewal due to the 31 names on the wait list. Fortunately, I found one at a bookstore and will value it as an essential, groundbreaking work to keep close at hand.

Editor's Note: Mary-Frances O' Connor earned her PhD in Clinical Psychology in 2004 at the University of Arizona, followed by a post-doctoral fellowship in Psychoneuroimmunology at UCLA. She now directs the Grief, Loss and Social Stress (GLASS) Lab at the University of Arizona.

Farewell

by Sharon Dardis

Sadly, we had hoped to have Rev. Ron Bell with us at MCDES much longer. Although his time on the Board was short-lived, we know he was busy behind the scenes in ministry at Camphor United Methodist Church in St. Paul. While he was here, he worked tirelessly in the community on gun violence, CPE and prison chaplain work, writing, singing, and teaching. And so, we were not surprised to learn Rev. Bell has been called to create an institute for healing and wholeness for pastors and leaders wrestling with trauma, grief, and other emotional issues. He and his family moved this summer to Charlotte, North Carolina, where he will be Executive Director for The Institute for Healing and Wholeness, sponsored by Discipleship Ministries and the United Methodist Church. He sends greetings and blessings to MCDES members and asks "for your prayers as we launch out into this new work." As always, I am amazed at the quality of members in this organization and what a difference each of you make in the world! Again, thanks to Ron for his time with MCDES. We hope to stay in touch and wish him and his family the very best.



Ronald Bell, DMin

Welcome

by Sharon Dardis

Our newest MCDES Board member and future treasurer is someone you most certainly may have seen, sat next to, or visited with at past MCDES gatherings. Bob Furniss has only missed one MCDES conference since 2008, when his daughter graduated college! He and his wife live in Woodbury and have three adult children and a brand new grandson, born in May. Bob served 17 years in active ministry with the Episcopal church, and is currently a contracted hospital chaplain at Lakeview Hospital and Hospice in Stillwater. Although he claims no "accounting or finance background," Bob has served as treasurer for other non-profits such as Rotary and is currently and has been the Executive Director of the St. Croix Chaplaincy Association for the past 16 years. He tells us he is anticipating retirement in the next year and is "looking for meaningful ways I can continue to serve." Yea, Bob! Thank you for volunteering to share your time and talents with MCDES! Bob tells us you may also find him serving as a supply preacher at small Episcopal churches, or serving on the Woodbury Days Council where, known as "Beer Tent Bob," he runs a Beer Tent as a fundraiser for Rotary. Welcome, Bob and thank you for your service!!



Bob Furniss, MDiv, DMin, BCC

Poetry Corner

More Love, More Love

by Rosemerry Watola Trommer

Sorrow is how we learn to love.

~ Rita Mae Brown, "Riding Shotgun"

If sorrow is how we learn to love,
then let us learn.

Already enough sorrow's been sown
for whole continents to erupt
into astonishing tenderness.

Let us learn. Let compassion grow rampant,
like sunflowers along the highway.

Let each act of kindness replant itself
into acres and acres of widespread devotion.

Let us choose love as if our lives depend on it.

The sorrow is great. Let us learn to love greater—
riotous love, expansive love,

love so rooted, so common

we almost forget

the world could look any other way.

There Is Only the Field

by Rosemerry Watola Trommer

On the day my father begins hospice,
I watch the pronghorn in the field,
marvel as their brown- and white-striped bodies
nearly disappear in the dead grass where
they graze. If only I could camouflage
my father so death can't find him, so that pain
would never have discovered him.

Tomorrow, my mother and brother and I
will gather around him the way a herd
might gather, circling him as some antelope
circle their young. But death will come.

And we, unable to run fast enough,
unable to hide, will meet it together.

And if I could fight death, would I? Whatever horns
I have are more for ritual than dangerous.

When death arrives, I want to bring
my softest self. I won't bargain,

but I'll tell death it's taking the best of us—
the one who worked hardest to survive.

When death arrives, I want to ask it, Please,
be gentle. He suffered so much already.

I want to tell death, You don't get all of him.

I carry in me his goodness, his courage.

While I live, he will always be alive in this field.

Rosemerry Wahtola Trommer is an American poet, teacher, and storyteller, with a MA in English Language and Linguistics. Her poetry has appeared in *O Magazine*, *Prairie Home Companion*, Ted Kooser's *American Life in Poetry*, on stage at Carnegie Hall, in back alleys and on river rocks. She lives in southwestern Colorado with her husband and daughter. Rosemerry became a bereaved mother, when son, Finn, died suddenly on August 14, 2022. She says it was "all the outpouring of love, kindness and goodness" that has "buoyed and changed" her throughout the past year. She gratefully acknowledges and honors all the losses that made those who reached out to her, "so tender and generous toward others."

Rosemerry has maintained a "poem a day" practice since 2005, served as the third Colorado Western Slope Poet Laureate and was a finalist for Colorado Poet Laureate in 2019. She has published several poetry collections; *Holding Three Things at Once* was a Colorado Book Award Finalist. Rosemerry travels widely, performing and teaching. She also performs with Telluride's eight-woman acappella group, "Heartbeat." Watch her Ted talk, "The Art of Changing Metaphors" at <https://www.youtube.com/watch?v=eXC3-ZFkhDo>. She and her poetry can be reached at <https://www.wordwoman.com/>. Her blog is at <https://ahundredfallingveils.com/>. Rosemerry Wahtola Trommer's poems have been reprinted here with her permission.



Editorial continued from page 3

death shape us in more ways than we imagine. I suspect I became a nurse, who searched for meaningful work and finally found it in hospice, and bereavement work, especially with grieving kids, because of my early exposure to death. As the old saying goes, “We teach that which we most need to learn.” I came to understand that death is a part of living, and that, yes, as Death himself said in *The Book Thief*, “No one lives forever.”

Fair enough, God, so here I sit, in my young-old age. I’ve been kissed and courted, graduated college, married, had a family and grandchildren and lately, even our first great-grand baby. My prayers of late are more of gratitude than bargaining. I fully understand that not all bargains/wishes are granted; not everyone is cured, not everyone lives a long life, not every wish is granted. And, I understand fully that I, like everyone living, will die and that goodness or badness has little to do with it. Nor does bargaining, although somehow, all those experiences helped make me who I am today. And that, in itself, is an answer.

There just may have been a little bargaining on my part, however, as Verla and I pulled together this latest newsletter issue. There are never guarantees that articles promised will actually materialize, so we hope for the best. I can attest here to having our hopes realized and that once again, thanks to the generosity of many contributors, this fall issue is a good one.

Note all the upcoming fall events to educate and support you and your clients. MCDES is proud to offer another virtual conference on Friday, October 7th. Tashel Bordere comes well-qualified and ready to offer a stimulating, informative day of learning. Don’t miss it.

Thanks to vice-chair Kay Johnson for keeping us all in the loop and to Kay and Stuart’s daughter, Alyssa, for a touching reflection on the love and recent loss in their family. If Alyssa’s story triggers a personal memory in your life you wish to share, *Coalition News* welcomes your articles for a future newsletter.

Huge thanks to Gloria England for her (requested!) update on addiction-related deaths and the progress being made since her last article for this publication in 2013. You will find valuable information and a list of resources to use in your own work with similar grief and loss issues. Thank you, Gloria for sharing your expertise!

Board member Eunie Alasker found time this summer to submit a terrific piece on “Burnout.” Again, she offers valuable insights and ideas to help with this growing problem in the world of helpers and healers. Thank you, Eunie, for this and for another inspiring book review, *Unburying My Father* by Zander Masser. What a great example of how creativity can help us grieve! Thank you to author, Zander for his generosity in sharing his work, and to Eunie for reviewing it!

MNHPC is a friend of MCDES and we highlight in this issue their exciting upcoming Conference September 29 and 30. Check out the impressive list of presenters and plan to attend.

Board member Chris Lewis dives into a book review of *The Grieving Brain*. I appreciate the passion and clarity of this review, Chris. Thank you for sharing your brilliant ability to unravel these mysteries with you detailed discussion. Amazing.

Thanks to another new poet who tells us she has “Minnesota Connections!” Rosemerry Wahtola Trommer is an accomplished poet who tragically became a bereaved mother in August,

2021, when her son, Finn, died suddenly. Her poetry will draw you in and warmly hold you. Thank you, Rosemerry, for your generosity and new-found friendship!

Speaking of friendship, see page 12 to say hello and bid farewell to two longtime MCDES supporters and friends. Godspeed to Rev. Ron Bell, former Board member, for a successful move and transition to his latest calling in North Carolina. Thanks for your service to MCDES, Ron. You will be missed.

And welcome to longtime MCDES member, Bob Furniss, who has volunteered to join the Board and assume the role of treasurer. Thanks to both of you, for your generous hearts and willingness to serve. We wish all good things for as you assume these newest, important roles.

Our Sundries and Resources pages continue to grow. Please think of MCDES and send us your future links to articles and resources you think your colleagues might find helpful and interesting. Thanks especially to Eunie Alasker for consistently sharing her professional online resources. This is what MCDES is all about: networking, supporting, and educating. Thank you!

To come full circle, regarding bargaining, it seems to have paid off with this latest issue. Our wishes granted, this edition of *Coalition News* helps direct our thoughts and encourages us in ways we hope you may find helpful. We should all continue bargaining, in that the world today is no more or less certain than ever and, “we just might feel better speaking our hopes and fears aloud.”

Thanks, as always, for the good work you all do so well. I hope to see you at the Fall conference. Until then, stay well, safe, and ever hopeful!

Sundries

988 Suicide-Hotline

Although the 988 Suicide-Hotline is a long-awaited and much-needed resource, it should be noted that it appears there are still some introductory issues to be worked out. These links offer insights that may prove helpful. Note that the “warm line” resources listed might be a better match for some of your clients.

1. <https://www.npr.org/sections/health-shots/2022/07/15/1111316589/988-suicide-hotline-number>.
2. <https://www.npr.org/sections/health-shots/2022/08/11/1116769071/social-media-posts-warn-people-not-to-call-988-heres-what-you-need-to-know>.

The Woulda, Coulda, Shouldas of Grief

Oh, the guilt, the regrets, the remorse. The woulda, coulda, shouldas. The if onlys. The why didn't I's? Is it possible to lose a loved one and not suffer from guilt, regret, remorse, or all three? Judging by the many, many regrets I hear aired in support groups, few of us manage. Certainly, I suffered all three after my husband's death. The *Psychology Today* article addressing this is at <https://www.psychologytoday.com/us/blog/widows-walk/202206/the-woulda-coulda-shouldas-grief>.

Untangling Grief: Living Beyond A Great Loss

“The horse has left the barn.” Those six words, said by my husband's oncologist, changed our lives forever, although the sense of impending loss had begun weeks earlier with a blood test. There would be more tests, exams, and visits to specialists. As George and I waited for a definitive diagnosis, we

bargained with ourselves and with the universe. More at <https://www.health.harvard.edu/blog/untangling-grief-living-beyond-a-great-loss-202206232767>.

Losing a loved one can be life-threatening

Grief can exact a heavy toll on a person's health. People are more likely to die when they're in mourning than in ordinary times, a phenomenon that's so well known it has its own name in scientific literature: the “widowhood effect.” That's partly due to the negative changes that can affect the heart during mourning. Check out the article at <https://time.com/6195183/losing-loved-one-heart-risk/>.

High School Grief Club

Especially following COVID, there is an even more pressing need to support grieving children. Bereavement is cited as “the number one predictor of poor school outcomes.” This terrific article from NPR supports the concept of school-based grief groups and how helpful they are for students, counselors, and teachers. <https://www.npr.org/sections/health-shots/2022/07/24/1110916298/losing-a-parent-can-derail-teens-lives-a-high-school-grief-club-aims-to-help>.

Good Listening Podcast

“Good listening is healing.”

~ The Good Listening Project
The Good Listening Project cultivates resilience and well-being in healthcare. It connects with entities such as the American Nurses Association, Mayo Clinic, Harvard Medical School, and The Association of American Medical Colleges, holding space with Certified Listener Poets for people to share whatever is on their mind, which is then reflected back to them through a custom poem. Addressing issues such as healthcare burnout, TGLP offers

interactive workshops to learn how to “listen like a poet,” how to join seasonal cohorts to become a listening poet, as well as monthly online gatherings for supportive conversations among healthcare workers. To listen to their timely podcast, go to <https://www.goodlistening.org/>, and scroll down.

Two Stories of Dying in America

After years of walking amongst the dying, I have come to one overwhelming conclusion. We are scared to death of dying. Studies show that a significant portion of people are afraid of death and the deaths of our loved ones. In fact, there is even a field of study devoted to the human reaction to death and dying called thanatology. Read more at <https://www.medpagetoday.com/popmedicine/popmedicine/100073>.

How to Process the Death of Someone Who Negatively Affected Your Life

Grief is a process that's highly personal and unknowable until you're in it. And though experts say there's no right or wrong way to mourn someone, when the person who died is someone you had conflicted feelings about, it's easy to feel like you're doing it wrong. More at https://www.huffpost.com/entry/grieving-someone-who-hurt-you_1_62ed56f3e4b0ecfe3f708516.

Here's What Parents Should Know About Childhood Grief

When I was in middle school, my friend's mother died unexpectedly. I called her up and tried my best. “I heard your mom isn't doing well,” I told her. “You could say that,” my friend snapped back. Go to <https://www.insider.com/mom-and-counselor-on-what-parents-should-know-about-grief-2022-8>.

Minnesota Coalition for
Death Education and Support
P.O. Box 50651
Minneapolis, MN 55405
715-733-0265

Coalition News

September 2022

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

Grief Resources

Jewish Grief Education/Support Group:
www.jfcsmpls.org.

Pathways—A Healing Center: www.pathwaysminneapolis.org.

North Metro Grief Support Coalition:
763-354-7828.

Allina Support Groups: Search for “grief support” at www.allinahealth.org.

Capitol City Grief Coalition: Contact coordinator Lois Knutson, 651-227-4430.

Downtown Coalition for Grief Support:
www.mplsgriefsupport.com.

MN Network of Hospice & Palliative Care:
<https://www.mnhpc.org/grief-support>.

Children’s Grief Connection:
www.childrensgriefconnection.com.

Compassionate Friends:
<https://www.compassionatefriends.org/>.

Hastings Area Grief Coalition: <https://account.allinahealth.org/events/59327>.

Grief Support—Essentia Health—St. Mary’s Medical Center (Duluth):
www.Essentiahealth.org/griefsupportduluth.

West Suburban Coalition:
www.westsuburbangriefmn.org.

The Grief Club of Minnesota:
<https://griefclubmn.org/>.

Edina Coalition for Grief Support:
www.edinagriefsupport.org.

Dakota County Grief Resources:
<https://www.co.dakota.mn.us/HealthFamily/MentalHealth/Training/Documents/GriefLossSupportServices.pdf>.

Youth Grief Services, Fairview:
www.fairview.org/youthgrief.

The Young Widowed Support Group:
mcraem@parknicollet.com.

Center for Grief, Loss & Transition:
<http://griefloss.org> or 651-641-0177.

South Mpls Coalition for Grief Support:
www.trustinc.org/programs/grief-support

Bloomington-Richfield Grief Coalition:
<https://brgriefcoalition.com/>.

Prince of Peace Grief Support, Burnsville:
<https://popmn.org/mission/support-groups>

Weathering Life’s Losses—Adult Support Group, and Kids in Grief Support Group. Thurs., Stillwater, 651-430-4586.

The Grief Project: www.griefproject.org.

Brighter Days Family Grief Center: www.brighterdaysgriefcenter.org.

Crisis Text Line: Text “MN” to 741741.

National Suicide Prevention Lifeline: Call 1-800-273-TALK (8255).

The Trevor Project: Suicide prevention line for LGBTQ. Text “START” to 678678.