

# Caring Connections

*A hope and comfort in grief program*

Volume 17, Issue 2

Winter 2013

Grief Line: (801) 585-9522

## A Message from the Director Kathie Supiano



Welcome to the Winter 2013 edition of the *Caring Connections* newsletter.

Like many of you, we have been shocked and saddened by the tragedies of 2012—deaths in hurricanes, floods, tornadoes, traffic fatalities—but none more devastating than the senseless deaths of school children and teachers in Connecticut.

Whether death is sudden or anticipated by long illness, it changes the life of those left behind forever. We offer respect for the journey of each grieving person, and while there is no “one answer” to the navigation of grief, we are convinced that the support of caring people is vital. We hope this issue will provide information and guidance, and we invite you to consider joining one of our support groups or attending any of our upcoming events.

We will again be sponsoring the Hospice Foundation of America *Living with Grief Teleconference* for professionals; this year the teleconference will focus on end-of-life care for Veterans and their families. Our annual memorial event, *Seeds of Remembrance*, promises to be particularly edifying for those remembering beloved family and friends, and will be held Tuesday, May 14, 2013. Please review our calendar of events and plan to join us for these and other activities.

We are grateful for your readership and support. It is our hope that this newsletter and our efforts remind you that you need not face your grief alone.

Sincerely,  
Kathie Supiano, PhD, LCSW

*“We all want to do something to mitigate the pain of loss or to turn grief into something positive, to find a silver lining in the clouds.*

*But, I believe there is real value in just standing there, being still, being sad.”*

*John Green*

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**Upcoming Grief Groups  
Spring 2013: Eight Weekly Sessions**

**Salt Lake City**

**May 8 - June 26, 2013  
(Wednesday Evenings)  
6:00 - 7:30 p.m. (All groups)**

**University of Utah College of Nursing  
Annette Poulson Cumming Building  
10 South 2000 East  
Salt Lake City, UT 84112**

This location offers seven types of grief groups, all in the evening:

- Children (7-11) - Adjusting to the death of a loved one
- Adolescents (12-17) - Adjusting to the death of a loved one
- Adjusting to the death of a loved one (adult traditional)
- Adjusting to the death of a spouse or partner
- Adjusting to the death of a loved one to suicide
- Adjusting to the death of a loved one to murder
- Adjusting to the death of a loved one to perinatal loss

**Midvale  
(South Salt Lake)**

**May 9 - June 27, 2013  
(Thursday Evenings)  
6:00 - 7:30 p.m. (Two groups)**

**UUHC Greenwood Health Center  
7495 South State Street  
Salt Lake City, UT 84047**

Two adult grief groups for those adjusting to the death of a loved one (**traditional**), or adjusting to the death of a loved one to **suicide**.

**Orem**

**May 8 - June 26, 2013  
(Wednesday Evenings)  
5:30 - 7:00 p.m. (Two groups)**

**University of Utah Parkway Health Center  
145 West University Parkway  
Orem, UT 84058**

Two adult grief groups for those adjusting to the death of a loved one (**traditional**), or adjusting to the death of a loved one to **suicide**.

**Layton**

**February 13 - April 3, 2013  
(Wednesday Evenings)  
6:00 - 7:30 p.m. Location to be determined**

Wingman Advocate Program Suicide Survivors Group  
Adult grief group for those adjusting to the death of a loved one to **suicide**.

Caring Connections  
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To register for any class or location, please call:  
(801) 585-9522.

There is a participation fee of \$50. If this fee is a hardship, please notify *Caring Connections*. Scholarships are available.

Should there not be enough people registered for a particular group, the group may be postponed.

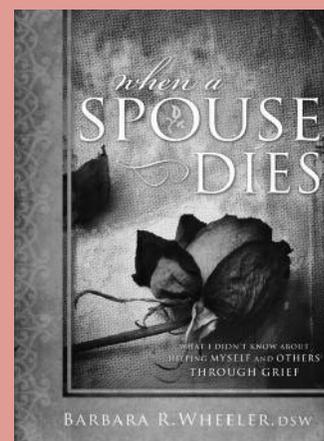
## Book Review: *When A Spouse Dies*, By Barbara Wheeler, DSW

Reviewed by Ann Rees and Erich Mille

Although Barbara Wheeler achieved the highest professional levels as a clinical social worker, educator and administrator, it wasn't until her husband of 51 years died that she realized there was much about losing a spouse she had yet to learn. And learn she did—about "brain fog" and the emotional rollercoaster that takes over, about pondering the patterns and intricacies of the marriage, figuring out how to be "herself" without her partner, wondering how to manage in the future, and dealing with changes in life and in herself while still grieving.

It was very reassuring that Dr. Wheeler had to wing it just like the rest of us, being bewildered and wondering "what now?" She reminds us we won't forget the one we loved, and that the loss does not define who we are, accepting the death while moving forward. For those still grieving, she suggests reading this 104-page book in stages. The tone of her writing is not preachy or saccharine; she writes with honesty and brevity. At the end of the book, she emphasizes that grief is time-limited, its scars become tolerable and that each of us grieves in our own unique way.

The two of us, who experienced loss of partners at different ages and stages of life (one being sudden and the other not so much so, and one being relatively fresh and the other being 26 years) relate to this book and have shared it with others; it is a gem.



## News in Bereavement Research

**Pies, R. (2012) Bereavement, complicated grief, and the rationale for diagnosis in psychiatry. *Dialogues in Clinical Neuroscience*, 14 (2), 111-113.**

This article is one of dozens published in the past two years arguing for or against elimination of the "bereavement exclusion" in the latest version of the Diagnostic and Statistical Manual of Mental Disorders; the DSM-5. Late last year, the revision editors decided to eliminate the exclusion, making it possible for persons experiencing severe functional impairment as a result of grief to be diagnosed with major depression. Symptoms of functional impairment include suicidal ideation, significantly disorganized thinking, preoccupation with guilt or extreme feelings of worthlessness and hopelessness.

It is important to note that the elimination of the bereavement exclusion does not mean that grief itself is considered a mental illness. Indeed, the majority of grieving people will successfully experience grief and resume a healthy functional life with support of others and their own coping abilities. But between 15-20% of griever experience "complicated grief" and benefit from professional care and early intervention. As Dr. Pies observes in a subsequent editorial, "eliminating the bereavement exclusion means essentially this: the death of a loved one—a common precipitant of major depression—will no longer be a disqualifying factor in diagnosing (major depression) within a few weeks after bereavement. This emphatically does not mean that we should be starting everyone with bereavement related (depression) on anti-depressants! Some depressed and bereaved patients will heal and recover with 'the tincture of time'; some will benefit from cognitive, supportive, or grief-oriented psychotherapies. More severely depressed, grieving patients...may require medication and psychotherapy."

## Help for Helpers

Most of the readers of this newsletter are intimately acquainted with loss and grief, and because of their life experiences, may be drawn to or reach out to others who are suffering. Yet, all of us can find ourselves at a loss for words, or uncertain about what to do when we learn of someone who has experienced the death of a loved one. We have learned from our participants how frustrated they feel at the well-intentioned but often thoughtless things people say or do in the time of grief.

As griever slowly move along on their journey of grief, the fortunate ones will continue to be supported by loving family members and caring friends. The experience of grief is appropriately described as a “roller-coaster” and it is not uncommon for griever to perceive the natural ups and downs of mourning as a lack of progress. Those supporting griever often perceive change in their friends’ grief experiences before the griever “feel it” within themselves. Gently pointing out areas of growth is a kindness that helpers can offer those in grief. The “downs” as well as the “ups” are often signs of growth—growing “pains” as it were. As you are helping a grieving person—be attentive in your observations of what is the same and what is different in grief as time goes on. You might observe that the griever is crying less...or perhaps, finally able to cry. You might note that the griever is more comfortable sharing unhappy memories or regrets...or has been able to laugh about their loved one for the first time. Unless the griever is reporting a profound deterioration in their emotional well-being, or adamantly insists that he/she is stuck—the ups and downs are usually a sign of progress. In the right environment, and that usually means in the safety of a supportive relationship, the “roller coaster” means that all aspects of grief are being experienced, dealt with, and will eventually be mastered by the griever. A patient observer is witness to these changes and can share observations and offer support.

*“Sadness flies on the wings of the morning, and out of the heart of darkness comes the light.” Jean Girardoux*

## Meet Our Participants

The suicide death of Ellen and Dan Lowell’s oldest son, Peter, was a shock that began their journey through grief on a road lined with so many questions. “There seemed to be no answers for our family,” Ellen says. Peter was a student at Westminster College and a member of the Reserves Officers’ Training Corps’ (ROTC) when he took his life in April. Support and love from family and friends guided the Lowells through spring and summer as they grieved together.

Fall arrived full of triggers, bringing thoughts of school for Ellen, and the couple’s second son, a junior in high school, as well as, Kara, Peter’s closest friend for the majority of college. “Each season seems to bring another intense cycle in our grief,” says Ellen. “We all hoped that a grief support group would help us during this time and provide us with more understanding and support.” Through the *Caring Connections* Suicide Survivors Group, Ellen says their family gained a “mental health understanding of suicide, something we desperately needed.”

Over the eight weeks the Lowells “slowly accepted there was more going on for Peter than we were aware of,” says Ellen. “Listening to other people affected by a family member’s death helped us recognize factors that all too often contribute to the hopelessness and despair a person who takes his life feels.” Ellen says her family found it a powerful thing to hear another story and empowering to share our own. “The sadness could be so intense and yet week after week the time together was comforting,” she says. “Our facilitator, Ann, offered us the insight we sought and a better understanding of the path this journey of grief will take. Gaining this understanding and knowing that many others bare this grief doesn’t take away the pain but it helps us cope and move to another level of acceptance.”

Donna Hyde grew up in Utah as part of a small family. During her junior year of high school she met Steve—just one year after graduation, the high school sweethearts decided to marry. As Steve’s career took them to Las Vegas and eventually the east coast to live, the couple welcomed seven children to their lives. The family was busy and thriving —Steve and Donna’s oldest daughter had just gotten married, their oldest son was serving a mission for the LDS Church, and their five school-aged children ranging in age from 5 to 16 years were still living at home—when life as the Hyde family knew it changed in an instant. Steve and four others lost their lives in a tragic helicopter crash.

Two years later, Donna and the couple’s younger children returned to Utah and began building a new life in the place Donna and Steve had once considered home. Donna went back to school, earning a bachelor of social work degree from Weber State University followed by a School of Social Work (SSW) license. She worked for Head Start as a family service worker and later as a parent educator and outreach director at The Family Connection Center, a non-profit organization that provides services to at-risk families.

Now retired, this grandmother of 26 enjoys volunteering and spending time with family. Co-facilitating a *Caring Connections* grief group provided the opportunity for Donna to tap into her education and personal experience to lend support to grieving individuals. “Our group was filled with love, anger, sorrow, hope, and all of the emotions that surface after the loss of someone that has been a part of your life,” Donna says. “Grief is a journey; support groups can be a part of that journey, bringing people together to share and build up one another.” She admits, “I wasn't sure how this first experience would be for me, but I know I grew by listening to others and I believe our group members did also.”

## Meet Our Students

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Prior to co-facilitating the *Caring Connections* Suicide Survivor Group with Ann Hutton, Sean Erickson, a student in the Psychiatric Mental Health Nurse Practitioner (PMH-NP) graduate program at the University of Utah College of Nursing, had not participated in group facilitation. He admits that he knew even less about the grief process. “I was nervous to be a part of a Suicide Survivor Group and had many fears and feelings of insignificance,” Sean says. “Questions ran through my head... What do I have to offer? How can I connect? I’ve never suffered from grief the way some of our participants have, so... who am I to be a facilitator?”

When Sean arrived for the first group session, an eager student with pen and paper in hand, the raw emotion that he saw in each group participant immediately overshadowed any fears or insecurities he’d brought in the door. “I soon realized the grief process is dynamic and each individual experiences loss and grief in their own personal way,” he says. “There isn’t a set of guidelines, a rulebook, or an ‘App’ for your phone.” Each week over the course of the semester Sean observed how the group became more cohesive and trusting as they took risks to expose more of their pain.

“I could have never guessed how I was going to grow and change from this experience,” says Sean. “As a student I learned a lot about the process and curative factors of groups, but as a human being I have learned so much more from our participants that I will carry into my future practice. I am grateful to the Suicide Survivor Group participants for allowing me to be a part of their personal grief process. I will never forget the stories they shared, the risks they took, and the strength that each individual showed.”

## There Are No Rules; Grieving Honestly

By Rob Anderson,  
Sugar Grove, Illinois

When it came time for her to speak she said, “I made it through the holidays, but now I’m crashing. I’m having a difficult time taking my son’s stocking down and putting it away; it’s like putting him away too.”

After a few moments of silence, another bereaved parent said, “Then don’t take it down.” And it dawned on her, and helped her, to realize that when our kids die, there are no rules for how we should grieve. If the stocking needs to stay up all year, that’s fine. What’s important is that we grieve in a way that works best for us, not in a way that tradition may dictate, or what others may want.

When the holidays are over we’re conditioned to take down our trees, decorations and stockings within a few weeks. Doing anything else is foreign to us because that’s what’s expected. As long as we’re not abusive to ourselves or others, and not stuck in chronic grief, we can do our greatest healing by grieving in ways that are positive and good for us.

We live by the rules we’re conditioned to live by. We go on green and stop on red. We take up just one parking space. We walk on “Walk” and don’t on “Don’t Walk.” The same goes for other rules in our lives, especially those that relate to grieving. Our modern-day society has conditioned us to believe that we’re not supposed to cry in public or show any signs of our suffering. We’re not given permission to express our pain other than in a private, sheltered way. Often we’re expected to be over our heartache and back to “normal” within days or weeks after the deaths of our children. Our continuous stream of tears and our cries for help make others uncomfortable because our traditions don’t allow us the time or space we need to at least begin to crawl again in our new lives.

Sometimes we’re judged or criticized and told to “move on.” Others have their goals for us, when our own goal is simply to breathe in and breathe out. Expectations are placed on us by those who don’t

understand our pain and sometimes we become “pleaser grievers” by putting those same expectations on ourselves, which for the most part are unrealistic and unattainable. Early in our grief we’re so wounded and confused that others can easily intimidate us into acting in a way that pleases them. If our pain goes away, then theirs can too. If, after a few years, you find you continue to be a “pleaser griever” and it’s making you miserable, you may want to seek counseling.

For our healing to begin, it’s important to grieve honestly, even if it means others may leave us. Do what’s best for you. If you don’t want to attend traditional family gatherings around the holidays, birthdays or vacations because you just can’t do it, then don’t do it. And there’s no need to make excuses, or to apologize as to why you can’t be there. A broken heart needs no reason to stay home. In time it may be necessary to push yourself to get back into living again, but that’s when it’s doing it for you, not for anyone else.

It may be necessary to defend your process. If someone’s doing something that’s hurtful, tell them. Don’t let their desire to control your grieving affect how you’re doing it. You’ll quickly find who’s going to be in your corner and who can no longer support you. For those who can’t, let them go and wish them well. Darcie Sims once said, “Forgive them for what they will never be.” We can’t demand support, some will give it and some won’t. Many just don’t know how to give it and I doubt most of us knew how to give it before our kids died. If you have support, make sure you thank them, and thank them a lot.

If you want to talk about your child, you may be the only one doing it. It can make some uncomfortable if

“Sometimes we’re judged or criticized and told to ‘move on.’ Others have their goals for us, when our own goal is simply to breathe in and breathe out.”

they bring up our children’s lives or deaths. They may think they’ll be reminding us that our child died, when in reality what they’re doing is reminding

us that our children lived. I’ve found that no matter how many times I tell people that we love to hear about, and talk about, our kids they quickly forget. Once they see us back out among the living, and we’re smiling or laughing, they think we no longer

need their support and that we're now "over" the deaths of our children. Most people want to help—they don't like to see us suffering—but they just don't know how. And there are also those who just aren't interested in our pain for their own reasons. Let them go and wish them well. If you want support you may need to become the teacher and let them be the students. When you're comfortable, tell people how they can help; let them know what you need. People can't understand your pain, but they can understand your need for support if you ask for it in a reasonable way without being demanding or pushy.

During the holidays, or on your child's birthday or death anniversary, you may need to initiate a remembrance of your child. Again, others either don't know how, or feel too uncomfortable to do it. After all, by bringing up their lives, they're also bringing up their deaths, and that

can make them want to hold back. It can be another opportunity for you to become the teacher as to what you need. By letting others know what you'd like to have happen and how great it makes you feel when they remember you and your child, you give them the opening they may need in their desire to support you.

As confusing and horrible as this journey is, it can be survived, but it takes time, courage and reaching out for help. Grieving is not something you need to do

alone, but it's important to grieve in a way that's best for you, not what's best for others. Trust your heart. If

**"By letting others know what you'd like to have happen and how great it makes you feel when they remember you and your child, you give them the opening they may need in their desire to support you."**

you grieve honestly, you'll become more comfortable in your grief and better able to learn to live with it.

***Caring Connections* is able to carry out our mission thanks to the generous support of our sustaining sponsor:**

Over 125 Years Serving Utah Families



Mortuaries • Cemeteries • Mausoleums • Cremation Center

*Caring Connections: A Hope and Comfort in Grief Program* is announcing the latest publication of the guide, "Dealing with Sudden and Unexpected Death: A Handbook for Survivors" written by Beth Vaughan Cole, PhD, APRN, Jan Harvey, MS, APRN and Leslie Miles, RN.

The handbook, published by the University Health Sciences Center, contains a checklist of things to do in the first 24 hours after death, including keeping a notebook of information, making child care arrangements, notifying friends and family, talking about organ donation and locating a will and keeping it safe. It also discusses initial grief responses, such as confusion and denial, funeral arrangements, what to expect from children at different ages and how to help them understand death.

DEALING WITH  
SUDDEN AND  
UNEXPECTED DEATH



*A Handbook for  
Survivors*

Copies of the book are available through College of Nursing for \$14.99, plus tax, shipping and handling. To order, call *Caring Connections* at (801) 585-9522.



Music has been around since the beginning of civilization. With primitive instruments, people celebrated births, marriages and other triumphs of life. Music was also used to ward off diseases so that healing and good health could be restored.

Today, we hear music everywhere we go; when we travel, where we work, shop and do business. It entertains, helps to sell products and services and is used to enhance everything from meditation to physical exercise. Now a new audience is recognizing the positive healing benefits from music. Grief resource organizations such as The Centering Corporation in Omaha, Nebraska, as well as some funeral directors, are making specific music available for those who grieve a loss.

Grief is a natural response to loss. When hospice nurse, Deborah Sigrist, works with grieving individuals and facilitates grief support groups, she reminds people that, "The relationship with your loved one never really ends. It changes from physical presence to memory and spirit." Most individuals find it comforting to know they do not have to "cut the cord" with someone so precious in their lives. By participating in the healing process, the most intense pain of grief will eventually lead to a changed but meaningful relationship with the loved one.

One of the steps in grief healing is to accept and recognize that what we are experiencing is a normal reaction to loss. It's important to remember to be patient as we go through the grieving process. During the most intense phase of grief, Sigrist encourages individuals to find hope in reminding themselves and others, "It's normal for me to be abnormal for awhile, but I won't be like this forever."

Besides nature and time, music can also act a healing agent. It offers the listener some surprising results. Research has concluded that certain music can slow down the brain waves allowing for numerous benefits to occur. Music can reduce muscle tension

and anxiety as well as regulate stress levels. It boosts the immune system and will regulate the individual's heartbeat and pulse as well as the nervous, digestive and respiratory systems. Music is also known to reduce stress levels as it eases depression. Any or all of these can be normal symptoms that accompany grief. Getting these issues in order can alleviate further physical harm.

Therapists, clergy and medical professionals believe one of the best things a grieving individual can have is human contact, people who are present to be sensitive, listening companions. When my family and I lost my mother several years ago, and most recently my father and then my wife's step-father, people were very generous with their time and concern to comfort us. At the time of each loss, family and friends would call to "check in" and see if we were all right or if we were in need of anything. Some stopped over to visit and brought their dinners, smiles and hugs. They reminded us that we were not alone.

My family and I were lucky; we had each other and a stable of supportive friends and family. But some people may not have many friends or family members who live close to them. In addition, there are times when the grieving individual either wants to, or has to, be alone. This is a perfect time for music to be that friend that stops over to "check in." Similar to an interested friend, music provides company. When you put music on, it's there. One can hear its presence. However, with music, you can do what you want when you want and not have to worry if your actions are going to affect it. If you choose, you can talk to it, cry with it and even shout at it if it makes you feel better. I'm not suggesting music should ever take the place of human contact and interaction, but it can be a wonderful and beneficial alternative. At times it can do everything a companion can do except hand you the box of tissues.

Certain music is specifically designed to relieve tension and bring stability to the mind and body. I am one of those composers who create music to make people feel calm and centered. This style of music can be effective in ways that other mediums are not. Television and radio can keep people company.

However, television can be too "busy" as pictures and sounds come at you at a chaotic rate. Radio is more subtle, but you don't always get to hear the music that would do the most good. Soft and soothing music will facilitate relaxation.

There are several ways to extract the healing benefit of music. Many of us face the responsibility of going through the belongings of an individual who has passed on, and that can be a very difficult time as you decide what you should do with clothing, possessions and the special objects that were the passion and soul of the deceased.

I remember procrastinating for months about doing this task. Then one day, on the spur of the moment when my own family was not at home, I decided to go through the remaining pieces of my mother's and father's lives. I put on calm, soothing music to lightly play in the background. I went through boxes and held in my hands old photographs, letters and other memorabilia. And as most people experience in this situation, I became very emotional. I realized that I was holding objects and expressions that are not only my mother's and father's but what symbolized earlier periods of my own life. On that day I was physically alone, but I didn't feel all alone; I connected with the music. It filled the silence that would have been present if it were not filling the air with beautiful sounds. The music was like a friend who was working quietly on the other side of the room helping me with the difficult task at hand.

Another way to benefit from music is to sit in a comfortable chair and just listen. Start by doing some deep breathing. Push the clutter from your mind by focusing on the music. Listen to the emotion in the music and let your mind drift where it wants. You can close your eyes and imagine you are somewhere else, such as a beach where you watch the waves meet the shore. Or you can visit a forest where you quietly hear the wind blow through the tall trees standing above you.

Some people close their eyes and recall meaningful moments with their loved ones in the presence of music. They watch "a movie in their minds" as if it were being watched on a large movie screen. One person used music as the catalyst for his movie. When the music sounded sad, he saw the sad times with that individual. On the contrary, when the music was brighter, this person viewed the happier times. This individual followed the emotional elements and dynamics of the music to help him to relieve pain and grief.

When we are experiencing emotional pain because of whom or what we have lost, emotions rise to the surface. What often follows is crying, even sobbing. This should be welcomed; it's therapeutic to cry. It's one of the best things we can do when we grieve, for we release hormones, stress and toxins when we release tears. And crying releases pain. That is why

so many of us feel better after "a good cry." We return to a calm state. Music augments these moments. There is something about its presence that heightens the moment in what we are experiencing.

I hope you will remember the gift of music if you are grieving a loss. It is truly a wonderful friend that can help you feel and heal, better. Music is non-judgmental and never asks too much of you. Music stated the obvious where words are difficult to speak. You don't have to entertain it, and its feelings aren't hurt when you tune it out or shut it off. Music is available anytime to act as a reliable companion. And this friend is only your CD collection away. What should you keep in mind when picking out appropriate music to help you heal? Each individual is different, so the "right" music will ultimately be your choice. Some may find albums containing one instrument to be therapeutic. Solo harp or piano music is very popular. Some people find joy in hearing two instruments play together, such as piano and flute. Others may prefer to listen to the sounds of a full orchestra. Here are a few suggestions to guide you:

- Many people choose instrumental music. It is "simpler" to listen to in these situations. Non-lyrical pieces leave more to the individual's imagination.
- You may find it is easier listening to just the music rather than listening to someone sing as well.
- Music that is slower, where there are between 60-90 beats per minute, is the best choice when using it to heal. The average person's heart rate is between 70-90 beats per minute. Music billed as ambient, spiritual or celestial music will usually be at "heart-level" or below. Read the album notes to see if its contents are of interest to you.
- You may want to consider purchasing original music that you haven't heard before and will not connect you to the time you spent with your loved one. This album will be like getting to know a new friend. Years from now, you may remember that it was this album that helped you through this difficult time in your life.
- Music using a minimal amount of drums and percussion can be beneficial, because drums add an emphasis on the beat. You want something that is "beat-less" and feels smoother, which will be soothing.

*Grief Digest Quarterly Magazine, Volume 5, Issue #2 October 2007. Reprinted with permission.*

## Caring Connections in the Community

Monday, November 5, 2012 *Caring Connections* hosted its annual *Grief and the Holidays* program. With the hope of offering solace to griever during what can be a dark time of the year, *Caring Connections* themed the 2012 event *Bringing Light to Your Grief Journey* and filled the evening with a blend of information and entertainment designed to guide griever into the holiday season.

“For many individuals, the holiday season brings celebration and joy. But for someone who has experienced the death of a family member or friend, the holidays can be a time of sadness, pain, anger, or dread,” says Kathie Supiano, PhD, LCSW, director of *Caring Connections*. “With *Grief and the Holidays*, we encourage griever to be kind to themselves during the holidays. In this way, people can free themselves from the belief they must feel a certain way or do certain things during the holiday season.”



Barbara Wheeler, DSW, author of *When A Spouse Dies*, shares with griever her own insights for navigating holiday traditions after a spouse has died.

During the event, featured speaker Barbara Wheeler, DSW, author of *When A Spouse Dies: What I Didn't Know About Helping Myself and Others Through Grief*, offered suggestions for managing the holiday season and beyond. The evening's musical performance was provided by renowned folk artist Peter Breinholt. Following the program, guests gathered for refreshments.



Nationally-renowned guitarist Peter Breinholt offers *Grief and the Holidays* attendees a chance to relax and reflect.

Every year, *Grief and the Holidays* is free and open to the public thanks to Larkin Mortuary, which provides sustaining support for *Caring Connections*.

**The mission of *Caring Connections*** is to provide excellent evidence-based bereavement care to grieving persons in the intermountain west through clinician facilitated support groups, with particular attention to the care of families served by the University of Utah Hospitals and Clinics; and, in keeping with the academic mission of the University and the College of Nursing, to provide opportunity for clinical education in grief and loss to students in the health care professions, and to conduct research which promotes greater understanding of loss, grief and bereavement. **Visit us online at [www.nursing.utah.edu/practice/caringconnections](http://www.nursing.utah.edu/practice/caringconnections)**

## Calendar of Upcoming Events

### **April 2013 - Hospice Foundation of America Annual Living with Grief Program Improving Care for Veterans Facing Illness and Death Hosted by Caring Connections**

This continuing education program is designed to assist end-of-life care provider organizations and health and human service professionals in enhancing their sensitivities and understanding of veterans and to provide professionals with new interventions to better serve dying veterans and their families. Particular attention is placed on veteran generations now aging and most likely to be seen in end-of-life care (WWII, Korean War, Vietnam). In addition to individual interventions, the program also will look organizationally at military benefits and intersections with VA systems. Finally, the program explores the traditions and sensitivities of grieving families and resources that can assist them. The information will be useful to clinicians, administrators, and other staff working in hospice and palliative care, hospitals, long-term care and assisted living facilities.

### **Tuesday, May 14, 2013 at 7:00 p.m. - Seeds of Remembrance: Forget-Me-Not Hosted by Caring Connections**

Refer to back cover for Save the Date information.

### **Saturday, June 29, 2013 at 7:30 AM - Race For Grief 2013 10K Run & 2 Mile Walk West Bountiful Park Benefitting Caring Connections and SHARE**

The annual Race for Grief event includes a 10K run (6.2 miles) and 2 mile walk held at the West Bountiful Park (550 West Pages Lane), Utah. The race is put on in memory of Samantha. Participants are encouraged to participate in memory of someone. To learn more visit: [www.RaceForGrief.com](http://www.RaceForGrief.com) or [www.BlondeRunner.com](http://www.BlondeRunner.com)

### **Wednesday, August 28, 2013 - Larkin Charity Golf Classic Eaglewood Golf Course Benefitting Caring Connections**

Watch for registration information in the next issue of the *Caring Connections* newsletter.



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#### **Remember Your Loved Ones—Caring Connections Memory Wall Order Form**

**Memory Wall** (located in entry hallway to *Caring Connections*) 4" by 4" Tiles: \$35.00

Male: First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name \_\_\_\_\_

Birth Year \_\_\_\_\_ Death Year \_\_\_\_\_

Female: First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name \_\_\_\_\_

Birth Year \_\_\_\_\_ Death Year \_\_\_\_\_

Send checks and information to: *Caring Connections: A Hope and Comfort in Grief Program*  
University of Utah College of Nursing  
10 South 2000 East  
Salt Lake City, UT 84112-5880



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Non-Profit Org.  
U.S. POSTAGE PAID  
Salt Lake City, Utah  
Permit 1529

10 South 2000 East  
Salt Lake City, UT 84112-5880

Grief Line: (801) 585-9522

Address Services Requested

*Caring Connections presents:*  
*Seeds of Remembrance: Forget-Me-Not*

Tuesday, May 14, 2013

7:00 p.m.

University of Utah College of Nursing  
Annette Poulson Cumming Building  
10 South 2000 East  
On the University of Utah Campus



Free and open to the public  
To learn more, contact *Caring Connections*  
(801) 585-9522