



# sudS Spirit



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## Welcome *from the Editor*

This month of June made me realize that I have spent half the time without my wife Sue than I did married to her. A perspective that allows one to think about but not be focused on. I miss her everyday and consider myself lucky to have met her, fall in love with her, and marry her. The time we did have together was good for both of us as we explored life as one and had fun along the way. Some recent signs tell me she is always around guiding and encouraging me to be the best that I can be.

**sudSSpirit** was founded in 2008 to help provide a place of comfort, compassion, and hope for those that have experienced a sudden unexpected death of their spouse or significant other. Meetings are held monthly in Reading, PA and Bennington, VT. All meetings are Free and No registration is required. Additional information is within this newsletter. **sudSSpirit** stands for "*Sudden Unexpected Death of a Spouse – Survivors in Participation to Inform, Renew, Improve, and Triumph*".

If this is the first time you have heard about us and are in need of some help through our support group chapters, please see page three in the right margin for additional information about our chapters. We also have a list of other resources on page two in the left margin that may be helpful to you. This newsletter is available to anyone anywhere regardless of their specific loss, so if you know of someone that can benefit from these pages, please share this with them and have them contact us with their email or address information and we will make sure that they become part of our mailing list for future publications. You may also contact the editor/founder directly at **717-866-2401** or [sudsspirit@gmail.com](mailto:sudsspirit@gmail.com). We also have a facebook page should you want to check that out.

Thank you to those that have been long time supporters of our group and thanks to all of those that we have helped along the way for believing in yourself and us to help you in your time of need. ***Together We Can Help Each Other Heal.***

## Change of Plan

*by John Kreiser*

Sometimes, I just sit and ponder  
Focus free, my thoughts do wander  
To happier times in the past  
When I believed that things would last  
Unchanged by time or circumstance  
Forever locked in love's sweet trance  
Looking forward to tomorrow  
Denying any would be sorrow  
Convinced that love could conquer all  
Completely sound, no chance to fall  
Contented in my mindless bliss  
Protected, safe from all of this  
A future that once seemed so bright  
Now ghostly dark, devoid of light  
The secret slate that held life's plans  
Has been erased by unseen hands  
Agenda gone without a clue  
Unfinished life bereft of you  
No longer traveling side by side  
No one to love nor to confide  
Nor share an unknown destiny  
Just empty days ahead for me  
Resolved to better understand  
This unexpected change of plan  
I'm left to journey all alone  
Until the good Lord calls me home  
Reflecting on your memory  
With shadows of what was to be

*Reprinted with permission from the author*

## Thoughts to Ponder - Editor

"Not everything that is faced can be changed,  
but nothing can be changed until it is faced."

*-James Baldwin*

"Life is like an onion; you peel it off one layer  
at a time and sometimes you weep."

*-Carl Sandburg*

"Though no one can go back and  
make a brand new start, anyone can  
start from now and make a brand  
new ending."

*-Carl Bard*



Dominic Murgido - Editor

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## Quarterly Quote

*- Editor*

"May the stars carry  
your sadness away.  
May the flowers fill  
your heart with beauty.  
May hope forever wipe  
away your tears. And,  
above all, may silence  
make you strong."

*Chief Dan George*

## Resources

- Editor

GRMHA (Greater Reading  
Mental Health Alliance)  
www.grmha.org  
610-775-3000

Tower Health at Home  
www.towerhealthathome.org  
855-843-8627

St Joseph's Spiritual Care  
www.thefutureofhealthcare.org  
610-378-2297

Compassionate Care Hospice  
1-800-777-5109

Family Guidance Center  
www.familyguidancecenter.com  
610-374-4963

Heartland Home Health Care  
and Hospice  
610-373-6898 or 888-800-0224

Circle of Life Coalition  
www.circleoflifecoalition.org

www.griefshare.org

Diakon Family Life Services  
www.diakon.org/fls/NPLoss.asp  
610-682-1337

Bennington Area VNA & Hospice  
www.bavnah.org  
802-442-5502

Bayada Hospice Services  
www.bayada.com  
855-696-2072  
610-367-1608

Pathways Center for Grief & Loss  
www.pathwaysthroughgrief.org  
800-924-7610

Spiritrust Lutheran Home Care &  
Hospice  
800-840-9081



## What's Your Status? *by Dominic Murgido*

Single, Engaged, Married, Separated, Divorced, Widow, Widower. A question I dreaded being asked directly or responding to on a form that I was asked to update for the first few years after the death of my wife, Sue.

Being Married 25 plus years, it was hard to think of yourself being anything but that – Married. The cold reality was that things changed and I was now a Widower but did not want to volunteer that let alone own up to it. I wanted my life back to the way it was but what I wanted was impossible.

In those early years of grief, the many changes on paper that one must go through are too many to deal with. Banks, mortgages, rental agreements, income taxes, shared ownership of cars, utility bills, cell phones, homes, insurance policies, beneficiaries, and of course; in case of emergency, please notify...

So often the status of you is asked for verbally or on a form that must be updated due to your new situation. And there are times you are not really thinking about it till you're asked or you are provided a clipboard at a doctor's office with a form to be completed and there it is, right at the top; Status?

The first time this happened to me, I actually began to shed tears as I looked at the form and read what it was asking me to do and the once familiar check mark in the Married space was no more. I remember leaving it blank because I did not want to check Widower. Luckily, the receptionist knew of my loss and never asked or she completed the check mark for me. I was lucky.

In other ways, it was not that simple. Trying to remove a name off a cell phone was difficult; they actually wanted a copy of the death certificate since Sue's name was on the account. Providing that had its own difficulty for me but I got through it.

Most times, those in the receiving end of the answer to the question in person or on the phone are very kind and respectful providing their sympathetic response and condolences. Sometimes even then I felt bad because they felt bad. In some of my past jobs, I was the one asking for the status of a person not realizing the impact it may have on that person until now that it has happened to me and I truly understand.

We all become different when our status changes. Different in a positive way because now we get it and are understanding and more compassionate

to others. Just like in grief, once we are in the thick of it, we become validated by others as we continue to validate those that are just beginning their journey.

Some of us have gone through this before from Married to Separated or Separated to Divorce in sadder times and Single to Married in happier times. I suppose it depends on your own status and how it changes along with life changes that make us think about this.

So what's your status? After whatever life changing situation that you have been through and now are acknowledging and adapting to it; maybe it should be Survivor.



## Book Review - Editor

### *Anxiety: The Missing Stage of Grief*

*by Claire Bidwell Smith*

Many people are looking for resources to help them cope with anxiety, yet most people aren't aware that unresolved grief is a primary underpinning - or that the two are related at all. In her therapy practice and in her own life, Claire Bidwell Smith discovered the connections between anxiety and grief.

Bidwell Smith breaks down the physiology of anxiety, giving listeners a concrete foundation of understanding in order to help them heal the anxiety caused by loss.

Taking a big step beyond Elisabeth Kübler-Ross' widely accepted five stages, *Anxiety: The Missing Stage of Grief* explains the intimate connection between death and grief and how they specifically cause anxiety - unpacking everything from our age-old fears about mortality to the bare vulnerability a loss can make us feel.

Reading this book is like overhearing a conversation between a beautiful and gifted writer and the most incisive therapist. Included with her own experiences are tools for assessment and the exercises she offers to patients dealing with grief and anxiety in her private practice. She has astutely identified the role that anxiety plays in loss and grief, and has written this wonderful book as a service to all who are suffering.



## What Do We Miss Most? *by Ellen Perry Berkeley*

Ten years ago, my wonderful husband died. I've recovered well. I'm "out and about" often, with friends or by myself. I'm working often, teaching memoir-writing workshops, and helping various people with their writing. I'm also doing a "Behind the Scenes" program at my retirement community, interviewing guests intimately about their important jobs in town. (These lively events are my creation, and I'm proud that nobody falls asleep at them!)

I don't have a lot of time for grieving.

At times, though, I miss Roy a lot. I thought I'd write about this, partly to dig into my mind (we always learn as we write), and partly to share my ideas with others who are recovering from a loss. Think with me.

What do we miss most?

I miss Roy's smiling face whenever he greeted me. I felt special. He always told me I was special. I miss waking up to his smile, and in fact I have a lovely photo of him smiling, which stands on a bureau and faces me in bed. My housekeepers often turn this photo around so that it faces the bedroom door. I turn the photo back, and smile with Roy.

I miss his always being there for me. We'd talk about what we'd just been through, or about anything else, large or small. This interaction, over our 43 years together, was deep beyond imagination.

I miss his body, in all ways possible – seeing it as we got dressed or undressed, enjoying it as we gave sexual pleasure to each other, enjoying it also as we made contact in the special ways we developed. (For instance, and this example isn't racy, I loved scrunching his cheeks between my hands, much as if greeting a child. Roy loved this too.)

What don't we miss?

I don't miss his frequent recoveries from cancer. But as I told him whenever I cared for him, "There's nothing I'd rather do." True.

I don't miss his occasional sloppiness, on kitchen shelves or with junk mail. I've become more sloppy myself on household things. Maybe to miss him less?

I don't miss his gentle nagging to get me further along on some chores. But I'm getting better at nagging myself. I've come to hate living with tasks unfinished.

And I must admit that I'm pleased to be without him (yes, pleased) about several things in my new life. There's no need to negotiate every decision – what to eat (and where and when), whether to

go somewhere, whether to buy something, how to respond to someone's request, and more. We didn't disagree violently about such things, but even small disagreements can be tedious. We devised a new system for such decisions, and it worked. Very simply, "zero" meant NO, while "10" meant YES. So if both of us voted "4," or both of us voted "9," that settled it. If we registered separately as "4" and "6," or "5" and "7" (or we had even larger differences in our votes), only then did we present our choice more fully and hope to convince the other person. But often with any disagreement in our numbers, one of us would back out, honoring the other one's wishes.

Altogether, I miss him, of course. I haven't made any attempts to replace him. I knew a few unattached men, but haven't been on any "dates."

I think of Roy in the most positive terms – he was an excellent person, a superb companion. I feel so lucky to have picked him up, to have married him after six months, to have helped him in so many ways, and always to have received his encouragement, support, compliments, happiness, and love.

Never again, I'm sure, will I be loved so beautifully. But thinking in positive terms – relying on wonderful memories – has helped me to survive well, and perhaps (strange as it may seem) has had an impact on my not hugely "missing" him. Luckily, I had him for over four decades. And with any luck, I'll always have my memories.

## Mission Statement

- **sudSSpirit** wants to provide you with a supplemental group experience in addition to professional therapy and / or counseling sessions that are currently happening in the lives of those interested.
- **sudSSpirit** does not take the place of professional guidance and we encourage you to seek therapy as required.
- **sudSSpirit** wants to provide a comfortable setting with a sense of community among those in attendance. People should feel free to communicate and share feelings as it pertains to their journey through the grieving process.
- **sudSSpirit** wants those in attendance to realize that they are not alone with this problem and the group is available to provide infinite support.

### **sudSSpirit Bereavement Support Group**

meets monthly in the following locations:

#### **Berks Chapter**

Reading, PA.

4<sup>th</sup> Wed. of the month  
6 PM

Exeter Community Library  
4569 Prestwick Drive  
Reading, PA 19606  
610-406-9431

#### **Bennington Chapter**

Bennington, VT

4<sup>th</sup> Tues. of the month  
6 PM

Bennington Free Library  
101 Silver Street  
Bennington, VT 05201  
802-442-9051

For additional information,  
Please check our facebook page or email:

[sudsspirit@gmail.com](mailto:sudsspirit@gmail.com)

-Berks, Pennsylvania

[sudsspirit.vt@gmail.com](mailto:sudsspirit.vt@gmail.com)

-Bennington, VT

or phone:

**717- 866- 2401**

-Berks, Pennsylvania

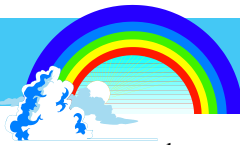
**802- 441- 5562**

-Bennington, VT

- Editor







## When Grief Won't Relent

by Jane Brody

Bereavement — how one responds and adjusts to the death of a loved one — is a very individual matter. It is natural to experience a host of negative reactions in the weeks and months following the loss of a loved one: among them, sadness, difficulty sleeping, painful reminders of the person, difficulty enjoying activities once shared, even anger.

Grief is a normal human reaction, not a disease, and there is no one right way to get through it. Most often, within six months of a death, survivors adjust and are more or less able to resume usual activities, experience joy, and remember their loved ones without intense pain.

But sometimes, even when the loss is neither sudden nor unexpected, as is true in the majority of deaths in the United States, survivors close to the deceased can experience extremely disruptive grief reactions that persist far longer.

In a report last month in *The New England Journal of Medicine*, Dr. M. Katherine Shear presents a composite portrait of what is known as complicated grief, an extreme, unrelenting reaction to loss that persists for more than six months and can result in a serious risk to health. She describes a 68-year-old widow who continued to be seriously impaired by grief four years after her husband died. The woman slept on the couch because she could not bear to sleep in the bed she had shared with him. She found it too painful to engage in activities they used to do together. She no longer ate regular meals because preparing them was a too-distressing reminder of her loss. And she remained alternately angry with the medical staff who cared for him and with herself for not recognizing his illness earlier.

Symptoms of complicated grief commonly include intense yearning, longing or emotional pain; frequent preoccupying, intrusive thoughts and memories of the person lost; a feeling of disbelief or inability to accept the loss; and difficulty imagining a meaningful life without that person.

“People with complicated grief often feel shocked, stunned or emotionally numb, and they may become estranged from others because of the belief that happiness is inextricably tied to the person who died,” wrote Dr. Shear, of the Columbia University School of Social Work and College of Physicians and Surgeons.

“Complicated grief is like a wound that doesn't heal and can follow the loss of any close relationship,” she said. The risk of complicated grief is greatest — 10 percent to 20 percent — among those who lose a romantic partner and even higher among those who lose a child. It is more common following a sudden or violent death and most common among women older than 60, she reported.

Among the factors that increase the risk is the failure of the deceased to have done advanced care planning, which can result in close family members having to make painful decisions about end-of-life care with no guidance from the dying person.

Should treatment for the underlying disease be continued until death? Should the person be attached to a ventilator or feeding tube when there is no hope for recovery? Should CPR be attempted if the heart stops? Such choices are best made when

the person is mentally competent and able to discuss choices with next of kin and one's physicians.

“The more awful the circumstances surrounding the death, the greater the risk of complicated grief,” Dr. Shear said in an interview. Thus, survivors of those who died in the horrific car-train crash in Valhalla, N.Y., on Feb. 3, like the parents of children who died in the Sandy Hook Elementary School shooting in December 2012, are more likely to experience complicated grief than, say, I was following the expected death of my husband from cancer five years ago. He had made it clear well in advance that no extraordinary measures be taken to extend his life.

Holly G. Prigerson and Paul K. Maciejewski of Weill Cornell Medical College in New York have developed a Grief Intensity Scale that can help individuals determine if their reactions to a loss are severe and prolonged enough to warrant treatment from a mental health professional.

Some 30,000 survivors have completed this scale, “but very few people — 7 to 10 percent — screened positive” for complicated grief, Dr. Prigerson said in an interview. At greatest risk, she said, are people who have lost “the love of their life” or who were strongly attached to or dependent upon the person who died, as was the author Joan Didion, who recounted her intense, almost paralyzing grief after her husband died in “The Year of Magical Thinking.”

Complicated grief is more than just a life-disrupting emotional response. It has been shown to result in neuropsychological abnormalities, including changes in brain activity that can impair memory and the ability to regulate emotions. Untreated, it can result in prolonged sleep disturbance, substance abuse, suicidal thoughts and behaviors, immunologic abnormalities, and an increased risk of heart disease and cancer.

People with intense grief reactions are commonly prescribed antidepressants. Though sometimes helpful, drugs are not the most effective way to treat the disorder, Dr. Shear said. Rather, an approach called complicated grief treatment, which relies heavily on strategies used in cognitive behavioral therapy, is most likely to achieve results in the shortest amount of time, she said.

In 16 weekly sessions, it helps those with prolonged grief find ways to think about the death without experiencing “intense feelings of anger, guilt or anxiety” and function more effectively “by generating enthusiasm and creating plans for the future,” she wrote. Unlike interpersonal psychotherapy, complicated grief treatment is highly structured. Each week, patients monitor their grief reactions and are assigned specific homework activities to help them adapt to and accept the reality of their loss.

In effect, people “reinvent their lives by revising goals and making plans” that do not include their lost loved ones, Dr. Shear said.

*Reprinted with permission: NY Times 2-16-2015*

### An Entry From My Journal

“Each year adds to the reality of you not here and not coming back and the difficulty of my continuing without you. I think of you everyday because you never left my heart.”

— Editor

