

# FAMILY BEREAVEMENT SUPPORT PROGRAMME



Social Work Department  
Royal Children's Hospital

NEWSLETTER FEBRUARY 2009

A very warm welcome to the 2009 newsletters and groups of the Family Bereavement Support Programme. We hope that as this new year unfolds you will find the Programme to be a source of connection with others, support, information and understanding, to help sustain, encourage and comfort you as you grieve for and love your child.

*Our hearts and thoughts go out to those families and communities touched by the recent devastating Victorian bushfires.*

*We are with you.*

## *As Time Goes By: families and grief, love and loss*



We warmly welcomed and acknowledged the parents who joined together for the first monthly Parent Bereavement Support Group of 2009. An evening for recently bereaved parents had been held earlier in the month.

Before introducing the group and our guest for the evening, Ms Yasna Blandin de Chalin, we took a moment to *reintroduce and meet again* Ms Vivienne Bateman (Bereavement Services Coordinator, RCH). Viv is known to many parents through her work in the Hospital and the community, taking part in previous groups and from her contributions to the newsletter. Next month Viv will be joining Carol in the PBSG's. As parents know from our letters in January, Jane will be leaving the Hospital at the end of the month to return to full-time study.

### *About the PBSG*

As we moved further into the group's time together we spoke a little about the PBSG. The group hopes to be a safe place for parents who are grieving to come together, to talk about their children and their lifetimes and to share as little or much of their experiences as they feel able. The group is also a supported time to explore and exchange ways of living with loss and grief. Participation in the group is through, listening, talking, questioning and wondering. In the PBS group tears often mingle with silence and laughter. Parents are invited during the

evening *to move in and out* of the group as they need. Parents are welcome to be apart of the group whenever they feel would be helpful to them. This may be regularly, from time to time or just once. Although when the group meets there is usually a topic and guest for the evening, the discussion is very open and can go in various directions.

Hearing other parents' stories can be reassuring and offer *first hand* suggestions about how to carry the grief that flows from a loved child's death. However it can also be difficult and unsettling to be *with others who are hurting*. Returning to the Hospital, with all its recollections, may have an impact on parents. Having noted this, parents are encouraged to take particular care of themselves. It may be helpful after a group to talk with a trusted family member, friend or supporter. Viv and Helen Stewart (Senior Social Worker) is also available to talk with parents more privately between groups, in person or by phone. Viv and Helen can be reached through the Social Work Department on (03) 9345 6111. Parents who do not come to the groups are also very welcome to contact Viv, Helen or their Hospital unit social worker to talk over any concerns they may have

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During the evening Jane takes notes without names for the newsletter. The





newsletter is a resource for families and those who accompany them as they grieve.

### *Beginning: the conversation unfolds*

It was a pleasure to welcome Ms Yasna Blandin de Chalin to the group. Yasna is a counsellor and psychotherapist. Yasna works at the Mercy Hospital for Women where she is counsellor for families who had a perinatal loss and coordinator of their research programme. Yasna, who has an extensive background in nursing, shared some of her professional and personal journey with the group. Yasna graduated first in nursing in the mid-70's. She has additional qualifications in psychiatric nursing, midwifery and in maternal and child health nursing, and counselling. Yasna has worked in the community and had "the privilege of getting to know parents and children well". Yasna's nursing in the maternity ward encompassed situations where there had been death in-utero or at birth. It was here that she first learned that a maternity ward is "not always the happy place it should be". Yasna described how she has "learnt...and been taught most from the people she has cared for". This has included bereaved parents who have had "traumatic experiences".

Yasna also shared with the group that she is the mother of two adult children and although not a bereaved parent "I have not lost a child, but know that is the most profound loss that can be experienced". However Yasna in her life's journey, has had "significant grief" and in her professional life has supported many families who are grieving.

Having heard something of her story, Yasna then invited parents, if they felt "comfortable", to say something about themselves and what had brought them to the group. Yasna acknowledged that this can be "daunting...and difficult". To make it more possible to do this Yasna suggested that parents may want "say a little extra". Yasna reminded parents that they could *pass* on this invitation if they wished. During the night Yasna also *applauded* those members of the group who'd been able to continue to share their insights and experiences through their tears and not stop sharing their reflections. "*Crying is healing*" she said. In her early comments, Yasna also noted that it was "great to see the men in the group" and welcomed them especially.

### *Cherished Stories: love and loss*

As parents spoke we had a small window into family

stories and a tiny snapshot of what they were now facing in their life without their child.

In this time of introductions we *met* their children. Each child's journey had been unique. The children of parents in the group included children who had lives of a few brief months, were toddlers, preschoolers, and those who had reached adolescence. There were lives lived only in Hospital. Lives spent at home but punctuated with stays in Hospital or regular visits for treatment. In reflecting on their child's lifetimes one parent said "*We had some beautiful time at home. We got to celebrate his first Christmas and first birthday... it's still hard for me to speak of him in the past tense. As a parent you need to talk in the present tense*". And another "*We got to say goodbye...I'm grateful for that...*".

Through introducing their children parents explained that their children had been born with congenital conditions and disabilities or had died suddenly and for whom the cause remains largely unknown. Amongst the children were those who had died through accident and those whose lives had been ended by cancer. All their lives that were just too brief. In essence *summed up* later by one mother by "*None of the children deserved it*".

In the February group parents have been living with their grief for varying amounts of time and this deepened the conversation. This included parents whose child had died six months to almost fifteen years ago, with several parents now in their second and third year of grief. The mother who had been grieving the longest in the group later importantly said "*I want to encourage you. It does get better*". As she had looked around the group she had noticed that some of the parents were young enough to be her child. In seeing their suffering she commented that she felt "*angry (that she can't) protect the next generation*". Grief can cause all sorts of emotions and reactions. As well as parents who were grieving, the group also included a partner who was not the parent of the child who had died. He and his partner had thought that it would be helpful for him to come to the group, "*to help him understand*" some more about grief – "*It's a bit unknowable.... Hard to (share grief). At times you try to ignore it. Doesn't work and she elbows me*". The partner would comment during the group that he had come to "*See what it's all about... I don't understand*". A grandmother also joined her daughter in the group.

Further on in the discussion, Yasna asked the parent whose child had been born with disabilities whether she felt there was “*less acknowledgement*” for her child. Yasna wondered too whether grief had begun during the pregnancy. There was some sense that this had happened. It seemed that parents who had learned through pregnancy that their child would have health difficulties had faced not only their own reaction to this, but the expectation by health professionals about not continuing the pregnancy. Instances where the parent felt criticized or judged for their decisions were also shared. Parents had faced many hard matters and challenges.

After hearing something of their experiences from parents it was very clear that they shared a common bond, overlaid with their own situation, distinct personality, family relationships and experiences. All parents continued to love and miss their child beyond measure.

#### *Coming to a PBBSG: together and by ourselves*

In talking about what had brought parents to the group, a father commented that this was “*the first opportunity to talk with people who’ve had the same experience... I recognise the compassion and empathy in the group... we’ve had the same terrible loss. . . We’re taking each day as it comes... Some are good*”. Reminding us of the compassion that parents who are bereaved frequently reveal and the concern they can feel for other people who are suffering, the father went on to say “*Our hearts bleed for those families affected by the bushfires*”.

Another parent in the group said she came for “*...for the support. . . to hear other parent’s stories (and) how to deal with grief. . . I struggle with the support not always being there*”. To this another member of the group added “*I’ve been to a fair few of these meetings over two years*”. Responding to the parents’ comments, Yasna said “To know you’re not alone is really important...others have had similar experiences, not the same”. From her time as a group member a mother commented that, in the group you can “*talk openly and not be scared, not judged at, not stared at*”. Another added “*That look of ‘I hope I don’t have to go through that’*”. In reply, a group member remarked (they) “*don’t get it, without the loss... what are you to say? Words are inadequate*”. From her own recent experience of grief, Yasna commented how “People can be varied in their response and there can be a lack of response,

even from health professionals in the area who, you would have thought, would be empathic and reach out”.

In thinking about expectations and experiences of care and support from family and friends, some parents shared how they had had to be very assertive in what they wanted and needed. There was a little sense of discomfort around this. Although as Yasna remarked “Knowing what you need is not being bossy. In grief, Yasna observed, people can be “Disappointed or very surprised... People can rally around and support us. We do expect the most support from those closest to us... You don’t always hear from those you would expect to” she said. This comment brought nods of agreement from several in the group. Perhaps it is helpful for parents to tell other people what would be helpful to them. Yasna’s explained how her own recent experiences had illustrated again. “The experience (fear) of death” Yasna said, “is paralysing”. “The ambivalence about it stops people from doing, from acknowledging... Often it is hard to predict who will be there for you”. For example a member of the group described interaction with her sister. In response to what the mother had created for her son (a written form of memorialisation), her sister replied: “*I’m sorry, I can’t read it... it would make me cry*”.

In contrast to *less than helpful* responses from family, friends and acquaintances, a mother said that her family had been “*Overwhelmed by the amount of support that we’ve received. Flowers, memorial frames, ...even months later, still coming*”. Family and friends had come from interstate to be with the couple, employers had been sympathetic, “*even strangers have been supportive*”.

During her son’s illness and after his death another group member made very positive comments about her workplace. “*Work was been fabulous. I can come and go as I please*”. Encouragingly others in the group had also received some good care. More formal sources of support had included for the *February parents* VSK, “*who were fantastic and the Hospital has been great*”.

Our thoughts continued about finding support and understanding in grief. As they turned towards others in the parent’s world, a mother commented how she had been struck by people who, at her son’s funeral didn’t approach her “*They walked away*”. It seemed quite strange to her that they would come to the funeral and yet not make a



personal connection with her. The response of others seemed to fit with Yasna's comments about others being overwhelmed by seeing someone who is grief stricken. The *when, where, how and what* of support is a highly personal matter. Receiving condolences at funerals can be harrowing for parents was given as an example of this. Some parents felt that it was more helpful if people made contact with them at the wake, at home. ***"It's your comfort zone"***. While others wanted people to speak with them at the funeral or just hug them. Again parents who are grieving are not all the same.

During the conversation, there were some focus too on how parents' thoughts, feelings and reactions were changing. ***"Now the dust has settled down with a new job and a new routine"*** a father said. ***"Now we lean on each other"***. His partner responded ***"We are getting back to some normality as best we can. It's a new normal. I feel sad every day. Every day I'm sad. I think about her"***. To this a mother who has been grieving for many years added reassuringly ***"And you will"***. Thinking about a child who is loved and missed is natural for parents.

***"I wake in the morning, I'd feel like I've been kicked in the guts. One day I felt I'd turned the corner... there are things to focus on again"***. Yasna commented that sometimes parents could feel some guilt about not thinking about their child or not grieving all the time. This, Yasna noted, can be thought of as the grief being "incorporated into a parent's life". A member of the group extended Yasna's thoughts by saying ***"I've had a busy day, been doing things and sat down for the first time and thought, 'Oh shit... I haven't thought about him... shit', and I apologised to him. He's always in my heart. There's a war between your mind and heart. Your heart never stops breaking"***. A parent commented that she understood now that ***"grief is not logical"***. Yasna would extend this thought by saying "The experience of grief is not logical. Nor is it linear. It's a wavy process. There can be triggers. You mightn't even know what the trigger is". It seems there may be days that are just plain difficult. A parent reflected that on those bad days it is ***"Better not to fight it, better just to go with it"***. A member of the group who had been grieving for some time said she had learnt that ***"In grief, you do what you need to do to keep going and as long as it's not 'immoral or illegal or endangering others, you do what you want to do... you find something that suits you yourself"***. For at least one mother in the February group this included visiting a medium. She had an ***"open mind"*** to what may happen and found that during the visits there were some things that rang very true and gave comfort.

The earlier comment about *normal* led someone to say ***"Being here (at the Hospital) was normal. We were so institutionalised it was scary to go home"***. Yet the time at home had been precious. It is as had been said a new very different normal. Life is changed forever and parents find how often by 'trial and error' they can live with such enormous change. We have put a poem about being normal in Straight from the Heart.

When the conversation unfolded several parents spoke about what they felt were milestones in their grief and how they had spent significant days in their family's year. This included getting through the year that follows a child's death, the anniversaries and birthdays. Having moved through the first anniversary of her son's death, a mother commented ***"It feels like something's lifted, it really does. I feel better in myself. I've had one of everything, now I know what's ahead. We can celebrate his birthday"***. In connecting with what parents had said about anniversaries and firsts, Yasna explained how the first year of grief is often thought of as "the most acute...it never goes away. It's always there in some way, shape or form. There are new meanings".

### *Celebrating & Remembering*

How some parents had spent personally important days had generated ideas for others in the group. Several families had gone out of Melbourne and that seemed to be very helpful to them. One family had gone to the ocean because their child had not had that chance. They went swimming. The father said ***"I had to do it, for him... it turned out to be so good, a happy day"***. Another family who had also gone to the beach, lit a candle, had some incense burning and walked on the beach at sunset. ***"I'm sceptical about signs and omens, touchy-feely stuff like John Edwards"*** the mother told the group, ***"but on that day the sun came out like 'I'm here with you'. You remember, but you don't stop missing them"***. Joining with these parents another father's aim was ***"to make it happy"***. The family's plans included lunch at a favourite bayside restaurant. This determination to have a *good* anniversary of a child's death seemed to be mirrored in some thoughts about services after the child had died. A member of the group was determined that her baby son's service would be ***"to celebrate his life...not to be all about death... I refused to call it a funeral"***. Commented that some funerals in particular faith traditions can be ***"so death focussed"***. Such perspectives didn't seem to fit with the happiness and vibrance of the child. A number of very painful matters were touched on during the February group's discussion at one point in the group and Yasna asked parents "What's coming up for the

rest of you?” In response a parent said to the group **“You feel everything was done that could have been done”**. There was a sense that this was not her experience and the group silently felt for her.

Capturing memories and creating personally meaningful memorials had been occupying the thoughts and time of a number of parents in the group. For some this involved the developing a blog. It included the emails sent while a child was in Hospital. In looking back, themes could be found in the emails. Nearly every email spoke of surgery, perhaps preparing for it, or perhaps recovering from it. Encounters with websites and blogs prompted a parent to mention a particular website that has been providing comfort to her and it seems to many other parents who are grieving. Called To Write Their Names In The Sand (<http://namesinthesand.blogspot.com>) and the creation of a bereaved mother, it offers the opportunity for parents to have their child’s name written in the sand, at sunset. A photo is then taken and put on to the website. The mother who discovered the site explained that there are other dimensions to it. **“It’s quite good to look around. There are bits and pieces in there”** she told the group. Using websites and blogspots to support the grieving heart may for some parents be more in keeping with the era in which their child lived and that they find themselves in.

One of the other parents shared some of the things that she had done to honour and celebrate her son over the years. She spoke about a particular activity or activity that she has. On special days she puts sunflower seeds in helium balloons and send them off. There are notes within them that explain what *they are* about and who they honour. Often she hears back from people very far afield, who have found the sunflowers. As an inside as to how to manage intense emotions she also has bought cheap china from opp shops and smashed it up. This has relieved some of the anger and tension. She also cautioned care with doing this **“so as not to injure yourself”**. But she said to **“Go for it”**.

#### ***Other Thoughts***

“In prolonged grief”, Yasna explained, “people can stop caring for themselves. They may resort to overeating or drinking and emotionally, not talk and deny their feelings”. Yasna asked for some “hints from the guys”. Responding to Yasna, a father said **“Drinking doesn’t work. We drank heavily... it made it harder. It blocks it. You need to deal with it naturally, not clouded with artificial substances”**. Several other fathers in the group nodded in agreement. Exercise and talking with mates on the phone can be helpful, but **“None of my mates know – you people do. You**

**connect, you cry, you remember... That’s emotional maturity, not weakness”** a father commented. We could only agree with him. It is.

Through the evening, Yasna was to note a number of the impacts that follow a child’s death. One of these includes the impact on partner relationships. Yasna commented that “Grief can change the dynamics in a relationship. Being able to talk is a real gift...the need to protect each other may get in the way of talking”. In thinking about her relationship with her child’s father a mother observed , if they had not separated earlier, then certainly the death of their son would have led to the breakdown of their relationship as **“We see it differently”**. The March group will explore this further.

In the evening’s conversation Yasna spoke about how death and grief *teach* people significant but painful lessons. **“The death of a child”** she said “is an immense issue, yet somehow parents do manage to keep living after their child has died”.

Towards the end of the group’s formal time together Yasna said we would *“Shift focus”* and asked parents if they could say “one good, positive thing you remember about your child” . We know that parents remember many wonderful things about their children. It can be hard to select just one. The parents also spoke of some things that they yearn to do once more with their child. Parents reading the newsletter may want to think what they would say about their child. Here is some of what the February group said.

#### ***The Children & Good Times***

**“Cheeky”, “Away with all of us in the family”, “Calms the others down”, “Run to papa’s home”, “Didn’t talk or walk, but so accepting”. “Always smiling, being positive”, “Taught me to accept. I can’t control everything – I’ve got to accept”, “Taught me to be positive and take what I can from each day”, “A tomboy and a princess fairy ballerina...very assertive, funny little sayings”, “Happy”, “Sense of humour”, “Always saw the funny side”, “Warm, loving and affectionate”, “She knew how to love”, “He loved his bath. I miss that with everything else”, “A great smile”, “How mornings started in the household”, “An aura”, “Beautiful smile”, “Drawn to him”, “Too big for this world”, “Games of peek-a-boo after work”, “Arms outstretched”, “Cackles and rolls”, “Sneaky”, “Spunk”, “Charm”, “Loving nature”, “Relationship strengthened by experiences with him. Every day I was with him. Every day he said he loved me and he was thankful”, “Children who open their eyes**

*when they hear their mother's voice, even if they can't respond in any other way", "We're going to beat this... don't cry for me", "Smart, Beautiful, With a future".*

Parents hold these treasured memories close to their heart. They savour their remembrance. As part of being together drew to a close Yasna reflected "*There are different stories, but the same feelings*". She commented about the power of the group being a place of acceptance where you can be "The authentic you, not a front. Just be vulnerable and allow that to happen, because here it's OK and safe".

Yasna asked Jane as it was her last PBSG if she would share some of her reflections about tonight's parents group. Jane said that the February group in many ways had been like all the Parent Bereavement Support Groups. They are precious, intimate times when parents can share from the depths of their hearts and minds. The PBSG is place where the love between parents and child, the desolation of loss and suffering from a child's death are powerfully witnessed. Yet so too are the strength, resolve and generosity of the human spirit. In the PBSG "companions in adversity" can be found and bonds of compassion and understanding forged; all manner of feelings and wonderings expressed. Courage and struggle walk side by side.

There is no easy way to sum up a Parent Bereavement Support Group. No easy way to sum up all the stories, experiences and insights- nor to conclude the lived experience of grief or say just how it is that parents keep going after their child has died; how they can live with such grief. It is an extraordinary privilege to be a part of the Family Bereavement Support Programme. Jane ended by thanking parents and wishing them well as their journeys continue.

*"In the midst of winter, I finally learned that there was in me, an invincible summer"*

Albert Camus

Sincere thanks to Yasna for being guest at the February group. Yasna's sensitive, thoughtful guidance enabled parents to express and explore their experiences and share some *strategies* for living with grief.

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#### **From our Bereavement Services Coordinator-**

Like all Victorians, staff at the Royal Children's Hospital have been deeply saddened by the tragic events of Black Saturday, 7<sup>th</sup> February 2009. Some staff have been personally and professionally effected.

Since 7<sup>th</sup> February, many words have been spoken and written in response to the devastation and loss which occurred on that day. During the "National Day of Mourning Together for Victoria" Service on Sunday 22<sup>nd</sup> February, the words "courage", "compassion" and "resilience" were used a number of times to describe the behaviour of those who were and are personally effected by the bushfires.

Those words often apply to bereaved parents and those around them following the death of a child.

As do the words spoken by the Governor General, Quentin Bryce during the Service on Sunday 22<sup>nd</sup> February. Bryce said:

*"We must allow the thoughts and images and words that have so recently scorched and swamped us to gently settle, and find their proper and worthy place in our hearts and minds. We must recognize these memories as an inseparable part of us. They are the make-up of our growing wisdom and our fresh intent. We are altered by them, yet they are what will forever sustain us.*

*We must tend to the gaps left by those we have lost, and we must keep their smiles always in our sights. We must hold on to the pride we feel in what we've built, and the admiration and gratitude we have for others' strength and courage, and our belief in our own."*

It is clear that the practical and emotional support given by family and friends, being with others who experienced the events of that weekend, and spending time with others in their community has been of great help to the survivors of the bushfires. As has the outpouring of compassion, love, financial and practical support from the Australian people as a whole.

But as all bereaved people know, the grief of the survivors of Black Friday will not end in a month or a year. It will go on, and we hope they continue to be supported over future years.

If you have been bereaved as a result of the bushfires there are a number of organizations which are available to support you. They include SIDS and Kids Victoria, Compassionate Friends, Griefline, the Australian Centre for Grief and Bereavement and others.

You can also phone the Social Work Department at the Royal Children's Hospital on 9345 6111 – and ask to speak with me, Helen Stewart or your Hospital Unit Social Worker.

Warm regards,

Vivienne Bateman  
Bereavement Services Coordinator  
Royal Children's Hospital

# *Straight from the Heart*

*Our sincere thanks to Ms Debra Gates, Melissa's mother, for sharing with us her poem 'Time'. With its essential questioning and authentic responses, 'Time' will resonate with many parents who are grieving. Debra's poem also foreshadows next month's P.B.S.G. theme.*

*'Time' is included  
in loving and enduring memory of*

*Melissa Violet Grace Gates  
10.03.1992. – 25.08.2002.*

## *Time*

Where does the time go?  
I wish that I knew  
It feels like forever  
Since I last held you

Where does the time go?  
I'm really not sure  
It seems just like yesterday  
You went through that door

Where does the time go?  
I want to know why  
It is but a moment  
Since you said goodbye

Where does the time go?  
An eternity  
Or just a heartbeat  
That you were with me

© Deb Gates. 16.01.2004.



# *Straight from the Heart Continued*

*A large thank you Ms Julie Cozens, Thomas's mother, for sending us this poem. Julie has seen it on a number of websites. We are not sure of its author, however it is written by mother who is bereaved. Other parents who are grieving may relate to its insights and sentiments.  
Thank you Julie.*

*In loving remembrance of  
Thomas Cozens  
17/10/07 - 29/02/08*

From the heart of a Bereaved Mother

This is now what "normal" is...

Normal is having tears waiting behind every smile when you realize someone important is missing from all the important events in your family's life.

Normal is feeling like you know how to act and are more comfortable with a funeral than a wedding or birthday party...yet feeling a stab of pain in your heart when you smell the flowers and see the casket.

Normal is feeling like you can't sit another minute without getting up and screaming, because you just don't like to sit through anything.

Normal is not sleeping very well because a thousand what if's & why didn't I's go through your head constantly.

Normal is reliving that day continuously through your eyes and mind, holding your head to make it go away.

Normal is having the TV on the minute I walk into the house to have noise, because the silence is deafening.

Normal is staring at every baby who looks like he is my baby's age. And then thinking of the age they would be now and not being able to imagine it. Then wondering why it is even important to imagine it, because it will never happen.

Normal is every happy event in my life always being backed up with sadness lurking close behind, because of the hole in my heart.

Normal is telling the story of your child's death as if it were an everyday, commonplace activity, and then seeing the horror in someone's eyes at how awful it sounds. And yet realizing it has become a part of my "normal".

Normal is each year coming up with the difficult task of how to honor your child's memory and their birthday and survive these days. And trying to find the balloon or flag that fits the occasion. Happy Birthday? Not really.

Normal is my heart warming and yet sinking at the sight of something special my baby loved. Thinking how he would love it, but how he is not here to enjoy it.

Normal is having some people afraid to mention my baby.

Normal is making sure that others remember them.

Normal is after the funeral is over everyone else goes on with their lives, but we continue to grieve our loss forever.

Normal is weeks, months, and years after the initial shock, the grieving gets worse sometimes, not better.

Normal is not listening to people compare anything in their life to this loss, unless they too have lost a child. NOTHING. Even if your child is in the remotest part of the earth away from you - it doesn't compare. Losing a parent is horrible, but having to bury your own child is unnatural.

Normal is taking pills, and trying not to cry all day, because I know my mental health depends on it.

Normal is realizing I do cry everyday.

Normal is disliking jokes about death or funerals, bodies being referred to as cadavers, when you know they were once someone's loved one.

Normal is being impatient with everything and everyone, but someone stricken with grief over the loss of your child.

Normal is sitting at the computer crying, sharing how you feel with chat buddies who have also lost a child.

Normal is feeling a common bond with friends on the computer in England, Australia, Canada, the Netherlands and all over the USA, but yet never having met any of them face to face.

Normal is a new friendship with another grieving mother, talking and crying together over our children and our new lives.

Normal is not listening to people make excuses for God. "God may have done this because..." I love God, I know that my baby is in heaven, but hearing people trying to think up excuses as to why healthy babies were taken from this earth is not appreciated and makes absolutely no sense to this grieving mother.

Normal is being too tired to care if you paid the bills, cleaned the house, did laundry or if there is any food.

Normal is wondering this time whether you are going to say you have two children or one, because you will never see this person again and it is not worth explaining that my baby is in heaven. And yet when you say you have 1 child to avoid that problem, you feel horrible as if you have betrayed your baby.

Normal is avoiding McDonald's and Burger King playgrounds because of small, happy children that break your heart when you see them.

Normal is asking God why he took your child's life instead of yours and asking if there even is a God.

Normal is knowing I will never get over this loss, in a day or a million years.

And last of all, Normal is hiding all the things that have become "normal" for you to feel, so that everyone around you will think that you are "normal".

----- author unknown -----

## **New Programmes for Children and Adolescents Living in the Southern Region**

*We are very grateful to the Team at Bethlehem Health Services for passing on to us this information about their new support programmes. Families interested in knowing more should contact the Programme Coordinator Ms Karen Bolger on 9595 3402.*

### **“Creative Connections” Program – A Creative Therapies and Peer Support Program for Grieving Children and Adolescents**

#### **Beat Box**

Who? Boys aged 9-14 whose father has died within the past 12 months  
What? Facilitated by our registered music therapist and clinical psychologist, sessions will involve a variety of creative musical experiences that aim to (a) provide knowledge and education about grief; (b) provide a safe, supportive environment in which to share and normalise feelings and grief related concerns; (c) enhance or facilitate positive coping strategies; and (d) offer peer support.  
When? Thursday afternoons 26<sup>th</sup> February – 2<sup>nd</sup> April 2009 from 4.30-5.30 p.m.  
Where? Calvary Health Centre Bethlehem, 476 Kooyong Road, Caulfield South.  
\$\$? No cost

#### **Healing Through Art**

Who? Children aged between 5-10 who have experienced bereavement within the past 12 months.  
What? Facilitated by our qualified art therapist, sessions will involve a variety of art mediums whereby thoughts, feelings and ideas which may be difficult to express verbally can be explored and contained within images and sculpture. The group aims to (a) provide a safe and supportive space in which to share emotions and feelings related to grief and loss concerns and (b) to offer a shared experience amongst peers.  
When? Tuesday afternoons 24<sup>th</sup> February – 31<sup>st</sup> March 2009 from 4.30 – 5.30 p.m.  
Where? Calvary Health Bethlehem, 476 Kooyong Road, Caulfield South.  
\$\$? No cost

#### **Art Works**

Who? Children aged between 5-10 whose parent has been diagnosed with a life-threatening illness.  
What? Facilitated by our qualified art therapist, sessions will involve using a variety of art mediums where creative visualisations, images and sculpture can safely be explored in a supportive environment. Artworks aims to (a) address anticipatory grief issues, (b) provide peer support, (c) facilitate positive coping strategies and (d) to use art to help children learn to cope with loss and change.  
When? Wednesday afternoons 25<sup>th</sup> February – 1<sup>st</sup> April from 4.30 – 5.30 p.m.  
Where? Calvary Health Bethlehem, 476 Kooyong Road, Caulfield South.  
\$\$? No cost

#### **Adolescent Focus Group**

Who? Adolescents aged 14-18 who have experienced bereavement in the past 12 months  
What? Facilitated by our clinical psychologist, this focus group is aimed at determining the needs of this unique clientele group. Information from this group will inform the structure of the Adolescent Group in Term 2.  
When? March 3<sup>rd</sup> 4.30 – 5.00 p.m.  
Where? Calvary Health Bethlehem, 476 Kooyong Road, Caulfield South.  
\$\$? No cost

#### **Adolescent Group**

Who? Adolescents aged 14 -18 who have experienced bereavement in the past 12 months  
What? Based on information gathered by our focus group, this group will be facilitated by our registered music therapist and clinical psychologist. Sessions will involve a variety of creative musical experiences that aim to (a) provide knowledge and education about grief; (b) provide a safe, supportive environment in which to share and normalise feelings about grief-related concerns; (c) enhance or facilitate positive coping strategies; and (d) offer peer support.  
When? Thursday afternoons May 7<sup>th</sup> – June 11<sup>th</sup> 2009 from 4.30 – 5.30 p.m.  
Where? Calvary Health Bethlehem, 476 Kooyong Road, Caulfield South.  
\$\$? No cost

### ***RUN FOR THE KIDS 2009 – A health giving tribute***

**In honour of their children many parents have joined with family, friends, the community and Hospital staff in this important fund raising event for The Good Friday Appeal. Parents have spoken of how meaningful they felt it was to be a part of such a positive occasion. Some families carried their child (in photographs printed on t-shirts) with them as they completed the course. Please think about being a part of this year's run or walk either completing the long 14.14k course or the short 5.76k course. Registrations close 20th March, 2009**

**[www.runforthekids.com.au](http://www.runforthekids.com.au)**



Contributions such as responses and reflections on the groups' themes, poems, letters, songs, quotations from parents, grandparents, brothers and sisters and friends are most welcome in the Newsletters. Share your thoughts, experiences and questions with others who are bereaved.

Please forward them to:

The Editor  
Family Bereavement Support Programme  
Social Work Department  
Royal Children's Hospital  
Flemington Road  
PARKVILLE VIC 3052



*Our letter box is waiting!*

Or email: [vivienne.bateman@rch.org.au](mailto:vivienne.bateman@rch.org.au)

The next meeting of the  
Parents' Bereavement Support Evening Group  
will be held on:

**Thursday 19th March**

**7:30 pm – 9:30 pm**

**Seminar Room 2, 4th Floor**

**Front Entry Building**

**Royal Children's Hospital**

Topic is "Close Connections: the impact of a child's death on relationships".  
We will be joined by Ms. Petra den Hartog, counsellor at SIDS & Kids and Ms. Penny McCredie, a parent from SIDS & Kids, to explore this important topic.

**And in the coming months-** The April group will talk about gender issues in grief with Mr Garrett Dowd, Grief Counsellor Mercy Western Grief Services and in May the group will be joined by Mr John Bradley and Mr Ray Stowe from The Compassionate Friends to discuss what can be helpful supports to parents in their grief.

The June group will not have a guest presenter. The discussion will be left open for parents to raise and share what is most on their minds and hearts.

**Please join us in March**

The newsletter is always a team effort. Thank you to Ms. Yasna Blandin de Chalin, the parents of the Parents' Bereavement Support Group, Carol Quayle and Vivienne Bateman. A particular thank you to our skilled, committed Administration Team- Carly Blanche, Rebecca Welsh and Sam Harris for their work with the newsletter and with the FBSP.



Jane Sullivan  
Author & Editor