

FAMILY BEREAVEMENT SUPPORT PROGRAMME



Social Work Department
Royal Children's Hospital

APRIL 2007 NEWSLETTER

Welcome to the April newsletter of the Family Bereavement Support Programme. Through the newsletters and groups of the Programme, we hope that you will find connection with others, resources, and opportunities for reflection and expression to help sustain you as you grieve for your child.

Not Only My Heart: caring for the self in grief

A very warm welcome was extended to the parents who came along to the April Parent Bereavement Support Group. In welcoming the parents it was acknowledged that for many reasons it can be difficult to make the journey to the group. For those parents coming after a busy work day there may be additional challenges. The aim is for group to provide a safe respectful opportunity for parents; a place where they can share thoughts and experiences and *take away* from the group whatever they find helpful. The hope is that parents will experience in the group a sense of support and comfort.

The P.B.S groups are available for parents to come and go as they feel would be supportive. Parents may come from time to time, regularly or perhaps just once. Because of this, each month the group can have both *a uniqueness and a sameness*. There is the common bond of being a parent who has had a child die and yet each group member has very personal and distinctive experiences. The size of the group, how long it may have been since the child's death and the issues being encountered can vary every month. In the April group, for example the fathers and mothers had been living with the grief of their child's death from two months to four years and all but one of the parents had been to a group before. Amongst parents in the group their children had been from one day of age to sixteen

years when they died. There were a number of differences in the cause of the children's deaths. Congenital abnormalities, cancer and complex medical conditions had ended the child's lifetime. One parent had experienced the death of her only child. The other parents in the April group all had living children, children who were in their adolescence.

As the group was further introduced, it was noted that if at times parents feel they need to take a break from the discussion, then they are invited to do this. This time may be spent on their own or with Carol or Jane. It was also mentioned during this time of introduction that notes without names are taken throughout the evening to help form the newsletter. The newsletter is a resource for families. Carol and Jane are available to meet with parents between groups if there is something they would like to talk over more privately. Parents who read the newsletter but do not come to the groups are also most welcome to call Carol or Jane. They can be contacted through the Social Work Department on (03) 9345 6111.

The April group welcomed back Ms. Geraldine Paine. Over many years Geraldine has been a great support to the Parent Bereavement Groups. She has supported many people who are grieving for someone they love. Geraldine is a grief counsellor, educator and family therapist.



It was a pleasure to have Geraldine at the group to explore with parents how grief can affect all dimensions of a person and to think together about ways of caring for the grieving self.

As Geraldine began she acknowledged the “courage and difficulty” that can come with attending the parent group. She said that she felt honoured to be “part of the journeying with you”. Later, Geraldine remarked about the group that “in this room people dare to share like this”. That isn’t easy. Out of their loss, “grieving parents”, Geraldine observed are in a “vulnerable” position. Geraldine had brought an outline for how she would suggest that the evening could be used by parents but also said that she was “flexible” in her approach. She emphasized that she hoped very much parents would use the group in ways that they wanted.

Suggested
Session Outline:
19.04.07

- ◆ Welcome / Introductions
- ◆ Naming our child - remembering something special about them
- ◆ Mind, Body, Soul - connecting / separating
Impact on emotions - impact on our physical well being
Nurturing the Soul - embracing our inner child
- ◆ Self Care - Group discussion - caring for oneself - What do you currently do?
- ◆ Rituals, Journaling
- ◆ Mindfulness exercise - been your own minder / observer
- ◆ Meditation exercise
- ◆ Questions / feedback
- ◆ Finish

To introduce herself a little more to the parents, Geraldine described how she has been working in the area of bereavement for thirty years. Originally Geraldine trained as a nurse and then as a midwife. She is also a qualified family therapist. She has worked in various roles in palliative care and grief support. She is a Family Support Worker at North Yarra Community Care. Geraldine also shared something of her personal experiences as a mother

of three now grown children. She explained that parents often ask her about *whether she is a parent or not*. Geraldine said she is “a parent but not a bereaved parent” and noted that as a parent the death of a child is “our biggest dread....The dreams of the child growing up and leading a fulfilling life are gone”.

Love, Memory and Grief.

To gain a sense of the parents’ experiences and their journey so far, Geraldine asked parents if they felt able to say their name and to briefly introduce their child by way of giving a “fond memory of the child”. As always it was noted that if parents felt unable to speak within the group at this or any point that they did not need to. As parents gave voice to a memory of their child and a number of moving comments were made. Memories were shared.

We think that others who read the newsletter will connect with them and may want to call to mind what they would have said to the same invitation.

“I remember so many things....the smile, her curls, the ripper of a belly laugh”.

“The closeness we had, his positive outlook, not many sixteen year olds say I love you, he did”.

“He was heavily sedated then it was reduced. We made the decision to let him go. He opened his eyes and he knew my voice”.

“My little soldier... he’s army mad always....he had his little uniform”.

“The way he made friends...I miss his laugh I miss him”.

“Our closeness”.

“He was so intuitive”.

“His outlook.... there were hurdles he overcame them...He never once said why he just got on with it”.

Themes within the parents’ memories highlighted just how precious the child is to the parent, how much they are missed and that despite facing adversity of differing kinds the children had showed extraordinary qualities.

After the parents had recalled and savoured for a moment these memories, Geraldine observed “these are the things that you remember forever. A parent never forgets”. Out of her conversations with others who are bereaved often for quite long times, Geraldine shared with the group: “you will know it (the memory) when you’re eighty years old...it’s innate you’ll never lose it”. Through the night Geraldine would emphasize that “remembering is an opportunity to reconnect and

that's very important There is the message do not forget who I was for you". Without showing identifying details Geraldine told the group about a father in his sixties who had two children die some years before and had asked "when can I stop grieving"? Yet grief, as Geraldine indicated, like love does not have a *use by date*. For parents, Geraldine would remark, the child is "always alive in the memory". Later we would explore how memory can be triggered by particular sounds or music. When Geraldine talked about how for her children's laughter can evoke a memory there were lots of nods around the room. One mother spoke about how she was in the car on her own playing music **"when he would have been with me it pops into my head"**.

Memories can be bittersweet. At first good memories can be masked by distressing ones such as a child being in pain. Later Geraldine gave as an analogy for memory a cup of rich strong coffee. The sediment at the bottom needs time to filter up and through the cup; the bitterness mixes in with the sweetness to become the full flavour. While parents remember and mourn, our community however does not always recognize the significance of memory and the experience of parental grief. "We live in a society" Geraldine said that "does not deal too well with tears...Not everyone will be able to *sit with you*.... We need to be able to better deal with bereaved people". People she went on, "don't talk naturally about those who have died". In response to these remarks a parent from her experience said that sometimes others will "bolt". As the parents in tonight's and other groups have found, the mention of a child who has died can *close down* a conversation very quickly. From her time with those who are bereaved Geraldine has seen how often have "learnt how to be with others and may be *drawn to others* who have similar experiences". In speaking about *being drawn* to other people or a closeness with others who have walked a similar path, a group member spoke about her experiences. She talked of closeness with a family whose child had the same diagnosis as her son and who had also died. She said it's **"a friendship that will last forever...a bond"**.

In slight contrast another mother shared some of her interactions with other people who may not have experienced loss, saying: **It's strange when you start talking they don't know which way you will go whether you'll be happy or cry... they still say some stupid things"**. The view Geraldine now takes is that their comments have come from "a lack of experience and

embarrassment... it's not intentional they don't know any better". As one mother reflected **"I tried to keep in mind that it's not apparent to others what's happened"**. Continuing with these thoughts, Geraldine described how sometimes "it's left to the person who is bereaved to model how they are and how they want to be supported". Geraldine was very honest with parents in saying "I could rabbit on but I haven't got Buckley's to know exactly how you feel, no one can know exactly how someone else feels... it's impossible to know what it's like without that precious person who is so special in our lives".

In reflecting about communicating with others Geraldine gently challenged the group by asking "Who will know your story out there? It feels like you're wearing a neon sign but others don't know". Through *not knowing* they may say or do something that upsets the grieving person. Geraldine said this generation doesn't have the outward symbols such as a black dress, ribbons on the door and the mourning jewelry that former generations may have had. These outward trappings of grief alerted people to their loss.

In this context of thinking about exchanges with *the non-bereaved*, a mother recounted one of the responses she has given to someone who wasn't understanding her reaction, she said- **"You haven't made me cry...I'm sad"**. Another group member spoke about how most people think **"you're either grieving or not. They're uncomfortable if it's not like that"**. This would connect with the later comments about being able to laugh and grieve at same time. Yet very sadly amongst family and friends as a parent observed there are some who **"don't remotely understand where we are"**. Over time parents had seen that **"no one misses him like we do"**. As Geraldine said parents have different relationships with their children than others have "they are part and parcel of you".



Grief and Loss

What is grief?

Grief is a universal response to a loss. Not everyone will grieve in the same way so it is important to allow each person his or her own style, space and time. Grief is a process that takes time and is dependant on many factors including:

- ◆ The relationship / friendship you had with the person who has died
- ◆ The support / understanding you receive from others - your own network - family, friends and community - (including professionals)
- ◆ Your own coping style and how you have handled similar situations of loss and grief in the past - your own emotional wellbeing
- ◆ How the person died - circumstances, suddenness etc

SOME COMMON GRIEF RESPONCES

- ◆ Shock, disbelief, despair
- ◆ Numbness
- ◆ Memory loss
- ◆ Sense of helplessness
- ◆ Repetition
- ◆ Anger / fear
- ◆ Anxiety / sadness
- ◆ Tearfulness - crying / sobbing
- ◆ Sleeping difficulties
- ◆ Weight loss/gain - comfort eating
- ◆ Guilt / blame
- ◆ Loss of control
- ◆ Dreams / flashbacks
- ◆ Yearning
- ◆ Confusion
- ◆ Social withdrawal
- ◆ Sighing
- ◆ Feelings of abandonment & isolation

No two people will experience grief in the same way - some people experience a combination of some of the above grief responses at the same time whilst others may just feel sad. There is NO right or wrong way to grieve

THINGS THAT HELP

- ◆ Talking - sharing your feelings, experiences and memories with someone you trust and who is understanding
- ◆ Exercise - walking, swimming etc
- ◆ Sleep - ensure you get enough sleep and rest
- ◆ Diet - eating small amounts of nutritious food
- ◆ Journaling - writing down your feeling and memories
- ◆ Rituals - remembering and celebrating the persons life

Geraldine Paine

Notes for the P.B.S.G April 2007

Heart, Mind, Body and Spirit.

The theme for the April group's discussion was chosen to reflect how grief can impact all dimensions of a person's being and their life. To help understand this Geraldine gave parents the handout Grief and Loss. In thinking about the body, mind and soul connection in grief Geraldine said, "our brain knows when we are grieving and what we need but in grief the brain can become very tired... overloaded". Geraldine encouraged parents not to have "too many things" in their day.

She also recommended getting plenty of rest. For example by going to bed early and not having busy schedules. Sleep can be hard to come by. Sleeping problems Geraldine observed are often experienced by those who are grieving. Geraldine's tips for getting sleep include having a warm bath, lighting a candle and having a hot drink. Several parents in the group could relate to this particular problem. Further ideas for trying to get a good night's sleep were suggested by Geraldine. One idea is to write a note of what *you've* done during the day can help *to leave it behind*. Geraldine also *advised* parents to make their last thought before they go to bed a positive thought, a positive thought about their child. Not to let the intrusive thoughts in (I can't think about this now) and by giving message to the self and to the child "I am not going to forget you, tonight I need rest". To help keep disturbing thoughts at bay and to promote sleep, Geraldine gave this *suggestion*. Lie on your back with their palms facing upwards and extend the thumb to the little finger. Focusing on this posture may keep out unwanted images. "Without sleep" she said "and with a low immune system further difficulties and health problems can be created". These thoughts of sleep led again on to thoughts of dreams. Some parents in the group had dreamt of their child and some with great regret had not. "**Every night I hope that he will come to me in my dreams**". Dreaming of the child who has died can be beautiful. To try *to seed* a dream Geraldine gave several ideas. She gave an illustration of how with a bereaved parent she had worked on arranging a series of photographs of the child at different ages. These were then moved into painting and creating some artwork. For the mother whose baby had died at one day of age, Geraldine wondered about remembering her pregnancy. Geraldine also encouraged parents to find a photo of their child and just look at one aspect, perhaps their eyes, before they went to sleep. This may *call out* a dream.

She *recommended strongly that* parents to look carefully at areas of rest, diet and exercise. She acknowledged that it's "hard without energy and motivation to exercise and yet it's so important". As Geraldine summarised "Grief" is difficult, it's hard work, that's why it's called grief work. Bike rides, sport or meditation can be helpful. Amongst other physical impacts can be weight gain or loss. Geraldine reflected that parents may be involved in comfort eating or not eating at all. Like other guests at the group, she too suggested small easily digestible meals somewhat similar to the diabetic diet. If a parent has a favourite food *stick with that*. She encouraged parents have meals perhaps with lots of garlic in it to help the immune system or be accompanied by a glass of red wine. Red wine has medicinal qualities!

Geraldine asked parents to think about where they felt tension or stress on their body. Necks, shoulders, chests and tummies made the list. She also explored how often parents who are grieving may "borrow the symptom of their child... it's a way of connecting". A physical check-up with a G.P. may be valuable.

During the night Geraldine took the group through some meditative exercises- exercises for the mind, body and spirit. They are hard to capture on paper! Here is an example- place a hand over the abdomen and breath in through the nose and exhale out through the mouth so that your breath is moved into the into the room. Breathing in and out to counts of 5 can be useful. People who are grieving Geraldine commented may find themselves sighing and yawning. Breathing exercises to help to oxygenate the blood and improve the sense of energy and wellbeing. The group also participated in an exercise with Geraldine through which there was an opportunity in the mind *to talk with their child who was standing next to them* and in which parents could *observe themselves doing this*.



The Emotions and Times of Grief.

As well as bodily reactions in grief there can be intense emotions. Anger may be one of the powerful and disconcerting emotions. Anger understandably is very common when a loved one has died. Geraldine believes that managing anger is very important and that it can be done constructively and safely. She reminded us about when she has previously come to the group and we done some exercises around releasing anger. These included stomping around the room while singing the Playroom Stumping Song, ripping up newspaper, and throwing rolled up paper against the wall! Geraldine was clear that anger in itself is "an okay emotion but internalizing it can create problems that are played out on the body such as headaches, stomach ache, chest pains, feeling stressed, feeling depressed". Passive anger is often not expressed and this can lead to further problems. Anger often gets a *bad press*. The *problem* with anger is, Geraldine explained, is that "we don't know how to manage it". From days when we are small we are told that having a tantrum is bad- think of the infamous two year old's tantrum. Yet the two year old doesn't have words or another means of resolving their anger other than stamping and stomping Geraldine remarked. Geraldine told parents that it's beneficial to "move the energy of the anger".

Through the evening Geraldine spoke about some of the different times within grief and how they may affect a parent. In the time immediately following a death, Geraldine explained very often "the circumstances surrounding a death are poured over, *the whys, the if onlys*". These have to be worked through. Geraldine said that early on it can be "important to retell the story in every detail". Over time the story shifts to being just "the important bits". However Geraldine was to emphasize that in telling the story "too much guilt and blame is not good".

To elaborate further the nature and experience of grief, Geraldine drew on the figure eight in the air. This is a useful description of the experiences of grief. At either end of the figure are *the past and the future* while at the middle is the *now*. People who are grieving will move between these points, at first spending more time in the past, touching briefly the present and a little on the future. The present and future may feel too painful *to stay for long*. Yet over time the pattern may shift.

“A death” Gerald argued “confronts everyone with their own mortality”. Death raises the questions - will others that I love die? It’s the unknown future”. These thoughts and fears are understandable, not pleasant but understandable. Acknowledging their presence and perhaps looking at how real they are may be a first step towards reducing their impact.

Because grief can encompass so much of a person, sometimes to keep living “it (grief) has to be put on hold”. Geraldine suggested that at times “a break” is needed from grieving. Other life issues such as relationships, work, issues she stressed have to be addressed. Some people withdraw from others during a time of grief. However Geraldine noted “it’s important...you have to reconnect with life... out there it does go on”.

Those who are grieving need to be able to recharge themselves, through taking care of their mind, body and spirit. To underscore this, in the middle of the room Geraldine had placed a golden mask and a card that had *spinning out of control* on it. In bereavement, Geraldine explained, it “can feel like you are wearing a mask. In here you can take it off”. Sometimes “you may need to be given permission to take the mask on and off”. Geraldine continued, “outside there’s a need to have it on, to be a certain way, to be guarded but you need a space where you can take it off”. The time without the mask is to enable replenishment. “We all need a space, our own space that’s self-care. ...space to process stuff” Geraldine said. To further explain this Geraldine gave an example from her own experience. She heads towards water, the ocean, in times when she needs to be able to “think ...and just be”. For Geraldine the sea is “healing and cleansing”, expressed in this way: “Being along by the seashore gives me an opportunity to pass things over to the enormity of the sea”. Often in workshops Geraldine will use water for rituals. Rituals can be a way to pause and look after the self. They may also be a way of reconnecting with feeling of being close to the one who has died. One mother shared with the group her ritual. Her son’s ashes are with his family in an urn at home. First thing in the morning and last thing at night she acknowledges her son by touching the urn. Whatever parents do Geraldine encourages them “not to be embarrassed.” If it’s helpful that’s what matters. During the evening a parent mentioned the book by a father, Reg Thompson whose young daughter died in a train accident called *Dear Charlie* (John Murray publishers 2006). She has found the book useful as she grieves as it connects with some of her emotions and thoughts.

Letter writing and journaling can be effective ways of remembering, connecting and expressing.



Repairing the Soul.

Geraldine gave a *cute* anecdote from her week which had struck a particular cord. She had taken a damaged pair of boots to be repaired. The slip from the shoe repairman instead of having *repairing sole* on it he had *repairing souls* written on the docket. “Repair of the soul” is what bereaved people may need Geraldine thought. Expanding on this notion, she said “it’s not healthy to be with the person who has died 24/7”. It can be too much. Geraldine throughout the discussion would *strongly advise* parents to “allocate a space for themselves”. Grieving or not people need a space for themselves. “Everyone needs time on their own a short time 10, 15, 35 minutes a day”. Through the night Geraldine drew on the concept of parents keeping a *favour bank* for themselves. In essence, intangible resources or tokens are deposited into this bank and people are entitled to draw on it for things that are needed to care for the self. It could be to have a massage or an early night or some sort of treat.

She asked the parents in the group if they were able to say something about how they were taking care of themselves. Here is a snippet of what was said:

“I have a break, Friday night is my night now, time on my own”

I’m doing the things I wanted to do first... I felt the guilt. It passed quickly fortunately”

“ I did garden, wrote poetry and (public) speaking (raising awareness amongst health professionals of the needs of families with children with a disability and of grieving families) .

“I do something ...I go to bed, basically”

My new self – is going to bed earlier and earlier.

“Becoming lost in woodwork if I see his picture his face I’m lost I’m jelly”. (In response to this comment Geraldine said that “believe me you’ll know when the time is right either to look at photos to watch videos, to change rooms or to try out a new way of looking after the self”).

“We’ve been phenomenally busy it’s a year of firsts and deaths in our family we needed time on our own”

“ I love it just to be by myself even if I’m doing the ironing etcetera, I have two nights”.

“Planning my wedding. Anything that helps me to feel happy is good. ...This year I was meant to be something else I was meant to be a mother”. (As Geraldine replied “you are a mother”.)

Ways to care for yourself

- ◆ Talk and share your feelings and thoughts
- ◆ Exercise (jog, walk, swim, bicycle, etc)
- ◆ Play or continue with a sport
- ◆ Read - short stories or magazines
- ◆ Listen to music
- ◆ Talk or spend time with pets
- ◆ Watch a good movie - don't be afraid to laugh
- ◆ Go on an outing with other family members or friends
- ◆ Join a support group

Geraldine Paine

Notes for the P.B.S.G April 2007

Contrary to popular opinion as Geraldine emphasized during the night “there’s no rights or wrongs in grief...no time constraints... no use by date”. Geraldine said to the parents that they should choose when and if they wanted to make changes in plans, behaviours, routines or homes. Geraldine explained that “clear thinking at a time where there’s shock and numbness and thoughts are full of memory isn’t possible. Geraldine suggested the early days following a loved one’s death, are not the time for making big decisions. To illustrate Geraldine used the question of whether a child’s bedroom should be left *as it is* or altered in some way. This is a very personal decision. There is no concern if the room is left for a time as it had been when the child had been alive. Although, Geraldine gently cautioned that if the bedroom was exactly as it had been five to ten years later maybe she would sensitively explore with a parent *why* this was. In the early days it can be too soon to make significant decisions. Putting them off may be wise. However one decision that Geraldine thought could not be put off is to take up self care. She did respectfully yet firmly suggest parents should take up self care if this wasn’t already routinely happening.

Formal services such as counselling may help *to repair the soul*. Linked with this Geraldine said that sometimes it may be that parents who are grieving have to “counsellor shop” until they find the support person they can feel comfortable with.

Grieving parents, partners tears and laughter.

Through the conversation, it was acknowledged also that fathers and mothers can have different relationships with the same child. Parents may also have different relationships with each of their children. For this and other reasons such as personality, partners may be quite different in how they grieve. Geraldine commented that grief “sucks relationships of energy”. *Understanding is needed*. However as is often mentioned it can be hard to be understanding when you are in so much confusion and pain. Responses such as silence or laughter can be misconstrued. Geraldine gave parents a handout about ways to help a spouse who is also grieving. Grieving people Geraldine remarked may need “permission to laugh again and to not feel guilty... fits of laughter are okay”. As thoughts touched on the topic of laughter and tears, it is perhaps important and timely to note that the P.B.S group is a space which knows both laughter and tears.

Brothers and Sisters.

During the April group there was some discussion on the impact of a child’s death on their brother/sister. As mentioned earlier, all but one parent in the group, this evening had living children. All the brothers and sisters were in their adolescence. Overall parents felt that their children were “okay”. Parents spoke however about how to know how their *living children* were *doing*. Typically their children were not talking directly with them about *what and how they felt*. Expressed by one group member as “**First he seemed ok... he’s not really coping now.... it’s changed**”. While another reflected “**At four months it became a reality (his brother’s death).... it really hit him**”. Another parent reflected “**on the surface they’re like others.... you hope that they’re talking to someone...It took me a long time to accept their way, they don’t miss her like us**. Several parents had learnt from the *grapevine* that their children were either talking with their mates or with family friends. This was comforting to them. “**We can feel lonely that he doesn’t come to us but it doesn’t matter where (they get their support) if they get it**”.

Adolescents, Geraldine suggested often “don’t want to talk”. For them support as they grieve may come from journaling, visiting websites, and talking with friends over pizza. Young people often become involved in “risk taking or harmful behaviours” Geraldine said. Grief may compound these behaviours. As Geraldine emphasized it is important for support to be available to young people in ways that they can accept. **“Just because you don’t see me do it doesn’t mean I’m not (missing his brother-feeling the loss)”** were the words of one young person to his mother who wondered how he was faring.

For young people as one of the parents commented **“Friends are all important”**. They may be *the best form of support*. Usually young people don’t want to stand out from their friends or be different and the death of a sibling can impact of how the young person wants to be seen. Connecting with these observations, Geraldine recalled a young man and what he did when bringing his friends home. He would dash in ahead of them to take down from the wall the large photo of his brother who had died. His mates didn’t know he had a brother. As with parents and children, brothers and sisters can have complex relationships. Interactions are not always easy or pleasant. It is natural and common, as the group discussed, for siblings to *fight*. Although parents spoke of how their children had often fought but they knew that *deep down* they loved their brother or sister. It was important for parents to remember this.



From listening to the parents in the group, we heard that some of the children who had died had had such complex care needs that there was **“a sense of relief”** that they no longer had to injure the limitations imposed by their conditions. Their conditions or treatment had meant that by necessity family had been centred around them. The feeling for their living siblings was along the lines of **“we can get on with being normal now”**. One of the parents thought that her living children saw her **“as more available to them”**. Geraldine invited parents to think about “creating a new normal. After someone you love dies life is altered forever”. In reshaping their lives Geraldine noted that one of the challenges parents face is “remembering the child who has died but not forgetting the living children and their needs”. “The living” she said “can resent the dead...it’s important to have a balance”. Additionally she remarked that any honest “modelling (of emotions) in front of a child of grief is okay, it’s okay to name it...naming any embarrassment or difficulty can be important”.

“Grief is not fun we all have crazy thoughts” Geraldine told the parents. Words which resonated with their experiences.

Geraldine also *asked* parents to think about whether they could “take up a new hobby something you wouldn’t have done (or)... a new way of doing something”. Doing something new can be self care. Through the night once more we heard about how the death of a child may shift our priorities and what is valued. **“I used to love bags and shoes but now it just doesn’t matter”**. Now self care needs to become a priority!

Geraldine left the group with *a narrative evaluation* to complete. This was to let her how they had experienced the April group (before and after).

To draw to a close, this recounting of the April group it may be good to call to mind two particular thoughts that Geraldine had shared during the night. She told of an older friend who had said “we’re not fully grown until we have experienced life’s sorrows” and to know that “in loss as well as suffering there can be growth”.

We thanked Geraldine very much for all the insights and material that she had shared with the group and for being such a good friend to the group once more.

A Gift from Those who Care

The group had been given the most wonderful array of embroidered cushions by Shannon's Army. Shannon's Army is a voluntary small group of women who have provided quilts, cushions, pillowslips and hampers to parents of children in the Hospital. They are a symbol of care and support.

Parents were invited to choose one of the pillows to take with them.

We are most grateful to Shannon's Army for their thoughtfulness and for the beautiful cushions which given to the parents in the April group.

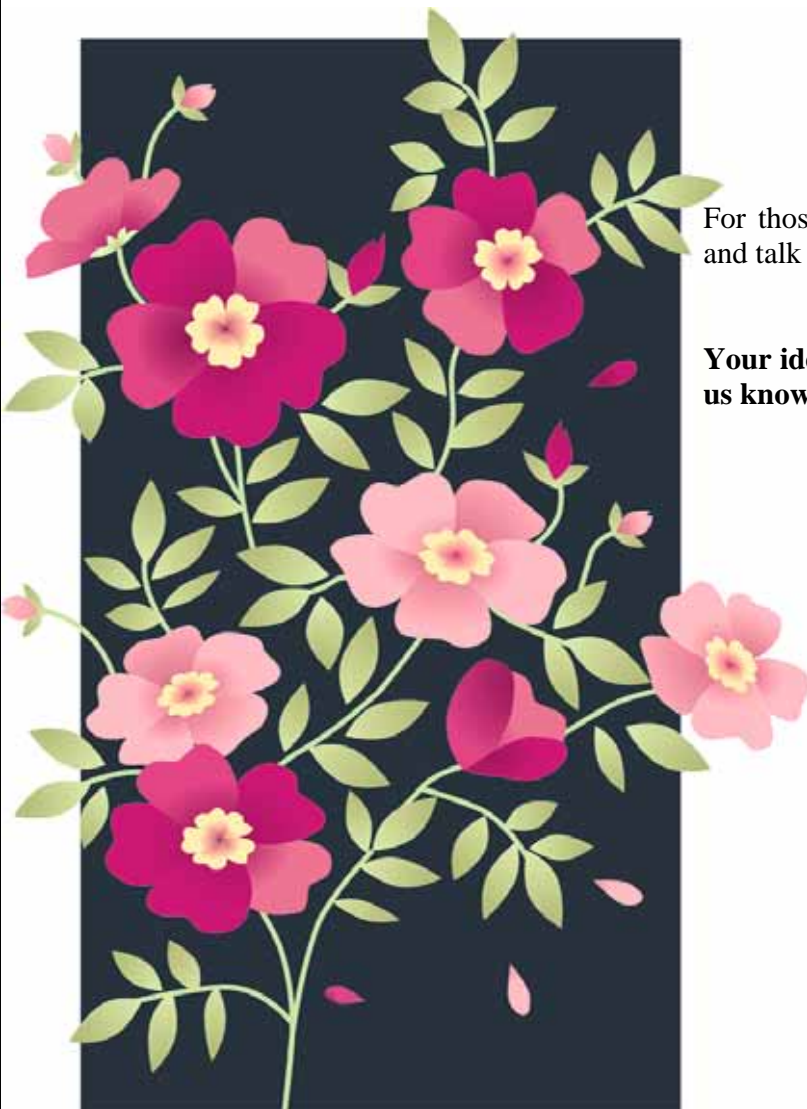


Shannon's Army

Here's a special gift from me to you
For when you are feeling down and blue
Just hold me tight and you'll feel the love and warmth
Guiding you through the day's and night's.

Made with love from
Shannon's Army

www.shannonsarmy.bravehost.com



For those who were able to stay, stories, laughter and talk about cushions happened over supper.

Your ideas for self care are welcomed. Please let us know your experiences and suggestions.

Straight from the Heart

Thank you to Mr. & Mrs. Xiao and Lubov Song, Jason and Kelly's cousins for sending us their poem for Kelly. As you will read this poem celebrates a greatly loved, vibrant, strong spirited little girl and the joy that she gave to her family. In meeting Kelly Song through this poem we feel other families will be touched. We are honoured to include this poem in the newsletter in remembrance of Kelly.

*In loving memory of our little angel
KELLY SONG
06.08.2004 - 28.11.2006*

*To our pretty little angel
Sent from up above
You blessed is for such a short time
You filled out hearts with love*

*We were so very proud
To watch you grow and play
Our clever girl, dressed in pink
Made the most of every day*

*You were Grandpa's bundle of joy
And mummy's little princess
With big brown eyes and a cheeky smile
The boys you did impress*

*Your body was weak but your spirit strong
You put up such a fight
To stay one more day in your Daddy's arms
You held on with all your might*

*But the lord chose to take you
He has better things for you planned
It's not our place to question why
It's not for us to understand*

*Now we must accept the fact
That what will be will be
And cherish all the good times
You brought to our family*

*So lay your head on a pillow of clouds
And rest your tired eyes
For you can be at peace now
With grandma in the sky*

*Time will pass but your spirit won't fade
Jason will grow up strong
For he has a guardian angel now
Her name is Kelly Song*



Straight from the Heart

Our sincere thanks to Myles' parents' Mrs Cynthia and Mr Martin Caruana for sending us 'My letter to Myles'. Written by Cynthia, for the first anniversary of Myles' death, it captures how his family each in their own way have grieved for Myles. The goodness which Myles has endowed his family with is given expression in Cynthia's words. Thank you Cynthia for sharing Myles with us. We are privileged to include this poem in loving memory of Myles and know that it will reach other families living with loss.

*Myles Ashley Caruana
18/10/1990 – 26/03/2006*



MY LETTER TO MYLES

*It's been 365 days
Since you've been gone
This past year has been desolate
We've tried to be strong*

*Oh, how we miss you
You can never suppose
We've each done things differently
And so I set down this prose*

*Your dad has been inconsolable
He can't understand it at all
The times without you with him
Leave him wondering why he can't call*

*Your brother has been steadfast
He has studied with care
But he misses you too
Sometimes it's too much to bear*

*I've tried to be busy
Thru the nights and the days
Thoughts of you crowd my mind
So that sometimes they vanish in the haze*

*We've all tried to be supportive
But sometimes it's a hard call
You see, you're the best
You're the best part of us all*

*And so we go on,
Missing you more each day
With family and friends beside us
Supporting us through in their own way*

*We will never forget the best part of you
Your love, thoughtfulness
Cheer have inspired
A few and a great many too
To be like you, it's our hearts desire*

*Because you're so special to us
We've often wondered
Why God only takes the best
It's broken our hearts asunder*

*A family's thought is so simple
A love so strong, it will never waiver*

Contributions such as reflections on the groups' themes, poems, letters, songs, quotations from parents, grandparents 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
Parents' Bereavement Support Group
Social Work Department
Royal Children's Hospital
Flemington Road
PARKVILLE VIC 3052



*Families want to hear
from families!*

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

Thursday 17th May
7:30 pm – 9:30 pm
Seminar Room 2, 4th Floor
Front Entry Building
Royal Children's Hospital

The theme for the evening's discussion will be 'Without Warning: the shock and turmoil that follows a child's death'. Ms. Vivienne Bateman counsellor from the Road Trauma Team will join with parents to help explore this significant topic.

Please be a part of the May Group

The newsletter is always a team effort. Thank you to Ms. Geraldine Paine, the parents of the Parents' Bereavement Support Group, Carol Quayle, Maree O'Toole and Jane Miller (Chief Social Worker) and to our skilled, committed Administration Team- Aleisha Desmond, Carly Burnett and Rebecca Welsh, for their work with the newsletter.



Jane Sullivan
Author & Editor