

Understanding and Working with Multiple Loss

Multiple Loss leads to complicated bereavement when grief remains unresolved. Unresolved Grief and Complicated Bereavement may be:

- Chronic (extended or excessively intense)
- Absent (fending off usual grief-associated emotions, “I’m fine”)
- Delayed (normal symptoms arise after a long period of absence)
- Distorted (interpersonal: isolation, excessive irritability, avoidance, other changes in interpersonal dynamics)

And may show up as:

- Social withdrawal
- Preoccupation with detail of the deaths/losses
- More difficulty accepting the reality of the losses
- More disorganisation through life
- Anxiety
- Pessimistic future outlook

Grieving arises from lost hopes and dreams, material goods, expectations as well as people.

Attachment to loved ones provide “for us the center of the universe, the place where all the threads of our life, of our world, come together”, what we love “appears to us as something indispensable” (Ortega y Gasset ’61).

Challenges In Adjusting to the Reality Of Multiple Loss

- **Chronic Denial** – In order to remain functional: pervasive emotional shutdown and/or fervent hyperactivity. “*No big deal, shit happens, so what*”
- **Depression** – “feelings of hopelessness, helplessness, sadness, cognitive impairment, somatic complaints, and problems falling asleep, staying asleep, and waking early; suicidal ideation, including thoughts about taking one’s life, plans for doing so, and actual attempts”. (Martin & Dean ’93)

Reactive depression, not accompanied by a fall in self-esteem, may in some instances be a form of self-punishment related to survivor’s guilt.

- **Anhedonia** – The complete and pervasive absence of pleasure.
- **Depersonalisation** - The experience of watching my life like it was a TV show; without being engaged; sexually, behaviourally, interpersonally.

- **Powerlessness** – evoking feelings of inadequacy. Grief is often accompanied by feelings of shame “I am flawed” and guilt “I behaved wrongly
- **Suicidal and death thoughts** – related to:
 - Anxiety
 - Fear of Death
 - Bodily Mutilation
 - Separation
 - Fear of Loneliness
 - Isolation
 - Ignominy
 - Rejection
 - “I can’t take anymore”
- **Anxiety** – a normal accompaniment to anticipated loss, is “exacerbated (by) continual change and loss...as part of an unstoppable process” (Nord '97)
- **Alcohol and Drug abuse** – healthy grief resolution is impeded by substance abuse and it “perpetuates complicated mourning” (Rando '93). Martin ('88) found a “significant dose-response relationship between the number of bereavements and recreational drug and sedative use”. Although emotional responses may be more accessible when drunk or high, the attribution to the substance “it was the booze talking, not me” does not allow for the integration of the mourning experience. It is like drinking salt water when thirsty; initial feelings of relief followed by increased difficulty.
- **Social Withdrawal** – a common response in single loss, in multiple loss there is no possibility of the need to withdraw to subside with time
- **Diffuse Anger** – while a single loss response is accompanied by anger, multiple grief events bring multiple angers, including:
 - Anger that values and beliefs seem empty and unhelpful
 - Anger that losses are beyond any normal expectation
 - Anger at being left alone
 - Anger at family of choice or origin
 - Anger at those dying and deceased
 - Anger at medical personal and caregivers for being ineffectual
 - Anger at society
 - Anger arising from personal helplessness
- **Survivor Guilt** – “Why not me?” may be accompanied by sorrow for our own survival (this does not need to be rational). Helplessness in the face of unrelenting loss, “there is nothing I can do” leads to a desire to make meaning of the experience, “there must be a *reason* I survived”.

Multiple Loss as Trauma

Symptoms of trauma cluster into three categories:

1. Persistent avoidance of stimuli associated with the trauma or generalized psychic numbing
2. Recurrent distressful recollections associated with the traumatic event
3. Persistent symptoms of increased arousal (Nord '97)

Regarding the experience as traumatic allows a framework for normalizing the abnormal experience and helping the survivor to understand the experience as extraordinary.

Traumatic experience:

- “has a profound effect on (survivors’) fundamental assumptions about the world (Janoff-Bulman '92)
- Overwhelms the individual
- Is “injurious or harmful to the psychic apparatus” (Niederland '71)

The continual challenge is to adapt and “Without a meaningful response from others, the victim is left isolated in the meaninglessness of the trauma, and thus becomes further traumatized”.

Caregivers and vicarious traumatization

Exposure to individuals who are traumatized can result in caregivers experiencing vicarious symptomatology; making them vulnerable to the increased likelihood of burnout, increased likelihood of secondary stress responses; and the “tragic transformation of hope to cynicism” (Pearlman and Saakvitne '95)

The Shattering Of The Assumptive World

Our assumptions form the basis for our security in the world and how we understand and make meaning of our experiences. We are largely unaware of how we base our reality on assumptions, as they form the background from which we operate in the world. For example, we assume that gravity is a constant, that the sun will rise and set, that there is some purpose to our existence. Multiple Loss shatters our assumptions about the world. Multiple loss severs the self “from its own history, its own grounding” (Lifton '93). Since the “individual self is interpersonal at its very core”, multiple loss is a “threat to one’s very identity” (Uroda '77). Each loss is another blow to the self within a social network of meaning. The need to make meaning, then, becomes paramount; to attempt to establish control. A typical mechanism for making meaning is to blame. The Nazis were responsible for the Holocaust. Saddam Hussein can be blamed for the Gulf war. When no credible source can be found on which to lay blame, the anxiety may be generalized to “develop a lifelong inability to trust” (Vanderkolk '89)

Inability to trust, coupled with prolonged anger, frustration, suffering and lack of support, may result in a survivor response of narcissistic entitlement, “I deserve your care and I better get it!” The experience of multiple loss may be seen to justify irritable, demanding, hard to please behaviour; what Parsons ('93) named “Pervasive ego-centric non-giving behaviour”. Such behaviour may be viewed as self-destructive in that it both undermines chances for support and inhibits resolution of intrapsychic conflict.

Another common behavioural response to trauma is “chronic passivity” (Van der Kolk '89) coupled with a tendency to isolate. Survivors adopting this strategy may be willing to engage in the painful work of examining the impact of multiple loss when the accumulation becomes more unbearable than re-exposure to memory. Therapeutic work is difficult for survivors as emotions are feared as the heralds of trauma. Living in the reality of an ongoing traumatic process brings into question the value of opening to an emotional response when the survivor's daily existence is characterized by a death surround.

The Death Imprint

- External – the impact of the losses continually intrude
- Internal – the survivor psyche is imprinted with self-deadening
- Circular – death perspective is projected outward and reabsorbed
- May develop over time
- Leads to personality changes

Learned helplessness as a response to lack of control

A Survivors reality is that s/he is:

- Helpless to prevent the death of loved ones
- Helpless to eliminate the pain
- Helpless to prevent more losses
- Helpless to escape a world saturated loss

Incompetence and defenselessness arising from these tangible areas promotes a perception of helplessness which may combine with emotional and motivational helplessness manifesting as:

- Chronic reactive depression
- Helplessness to maintain emotional balance
- Helplessness to respond capably to ongoing loss
- Helplessness to find motivation to develop and implement a future vision

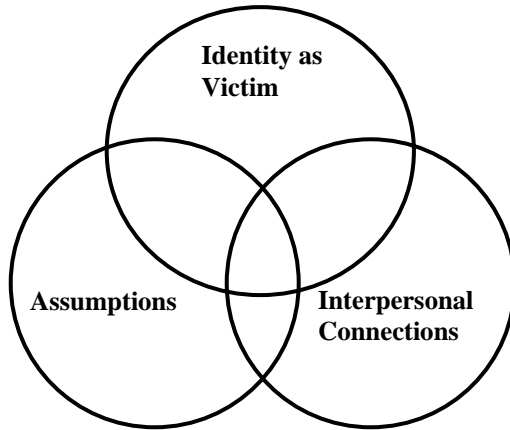
Implications for grief work:

Acquisition of successful coping responses is inhibited by difficulty realizing the success, “uncontrollability distorts the perception of control” (Seligman '75).

Grief work invites the feeling of *more* pain, albeit temporary and periodic, which hinders breaking out of the learned helplessness pattern

Multiple Loss and the Disruption of Identity

A survivor's sense of self is forever altered as they continue to be challenged to live purposefully and deliberately. Identity disruption occurs at 3 levels:



1. Identification as a victim of these experiences influences the self-concept
2. Assumptions about the universe are shattered
3. Interpersonal connections are disrupted as they occur in the context of a death surround

Healing Multiple Loss: What can we do?

Identity disruption is both normal in multiple loss and profoundly alienating, forcing the question: ***“Who am I now?”*** The beginnings of the answer can come from an exploration of the impact of the losses.

“Where do I start?”

There is often one overshadowing death (partner/best friend/family member) that indicates a starting point in grief work. Particularly if the relationship was conflicted or ambivalent, the need to grieve may present itself more forcefully.

Using the journey of Grief as a road map, allowing your road to wander and meander, and working the four tasks of grief while focussing on one significant loss will lead to developing the ability to process other losses. The process is like developing a new “personality sub-routine”. Conscious, focussed grief work, like the work of learning to drive a car, requires practice and determination. Eventually, it becomes almost unconscious – not requiring as much time, energy and attention, freeing us up for other creative ways of being.

Disruption of Core Identity: Working Through the Challenges

Ongoing loss events and the anticipation of more to come overwhelm the individual. Assumptions about the world, and myself in the world are shattered. Each loss event becomes a repeated shock – and the response to these shocks is to “numb out” – a protective coping strategy.

Commonly, social isolation is an additional coping strategy which enables an individual to avoid reminders of what has been lost, avoid risking re-attachment (and the subsequent risk of more loss) and avoid the recognition of depersonalisation of themselves. Typically, these combined factors result in an ongoing depression of variable severity.

Making it Real

The experience of multiple loss challenges us at the core of our being, where “Who am I?” becomes a bewildering question in the light of all I used to believe to be true. To begin the work of healing in response to ongoing multiple loss, the reality of the experience must be named and experienced. Unlike a single loss, where naming the person lost is the beginning of storytelling, in multiple loss the naming of all those who are dead can increase distress. The difficulty in remembering all the names and faces coupled with a sense of disbelief, can further entrench a person in protective coping strategies. Working with symbols, metaphors and rituals permit the experience of community devastation to be addressed, and is the most effective way to invite storytelling.

Because we make meaning through our attachments and heart connections in the world, inviting the shift of focus from talking about “them” to talking about “me” invites a recognition of the parts of self that have been lost. If all my friends are dead, do I have anyone in the world who knows me as a friend? If not, do I have a sense of myself as a friend? As able to care? As open to receiving friendship?

Inviting the Feelings

As the impact of multiple loss is realised through the process of storytelling, feelings will begin to emerge. Part of the depression characteristic of multiple loss survivors is a reactive depression to a catastrophic event, which represses deep feeling. The disenfranchised nature of the multiple loss experience evoke feeling responses of great magnitude. Protest or anger in single loss, here becomes diffuse anger and rage. Inviting the full venting of anger, asking “what else makes you angry”, working with physical expression (a bat, a tackle dummy, sounding) helps legitimise the rage response and enables the energy to shift out of the body.

Due to the layering of emotional responses, expressing anger will typically lead to the awareness of despair – “All these people are dead and I can scream and pound a cushion from here until doomsday and it won’t make any difference – they’re still dead!” Feelings of hopelessness and meaninglessness in multiple loss often lead to suicidal ideation.

Working with Suicidal Ideation

In multiple loss, core parts of self are lost. It may be the belief that “I would always feel safe in the world”. Or that “I only really know I am alive when I’m with those I love”. Or my understanding of living in a world looked over by a benevolent deity. When what I believe to be true about myself in the world is no longer possible to maintain, a part of myself has died.

As part of working with suicide, it is helpful to ask, “Is this about actively wanting to die, or not knowing how to live like this?” If the latter, It is helpful to ask, “Which part of you needs to die/do you need to let go of?” Framing the question this way invites the disidentification with the suicidal aspect, recognises a person is more than their suicidal intent, and validates the depth of despair while recognising it as part of a process – not the end.

Who Have I Been?

From the place of despair, when all meaning and hope is absent, the fuller exploration of what has been lost in relation to self can begin. In terms of beliefs about the self, this exploration can invite reflection on early learning. “What did you believe to be true about yourself growing up?” “Who taught you that?”

The formation of the self-concept occurs throughout life, much of it formed in early childhood where certain behaviours/ways of being were reinforced and supported, and others extinguished. Life’s journey may be seen from an essentialist perspective as uncovering more and more of the authentic self, as the recognition of the necessary and perhaps false self-construct emerges into awareness.

This is a painful process as the recognition of living for much of one’s life with erroneous beliefs brings powerful emotional responses. Because the core of self-belief is being brought under scrutiny, this exploration necessarily entails self-doubt and anxiety as the “self” is in a process of realignment, often making “self-confidence” unavailable as the uncovering proceeds.

This phase of journeying through multiple loss sees a shift from victim to agent. Awareness is present that “just because I have experienced these losses, and I live in anticipation of others, does not mean that in this moment I have to be a victim. I have choice”. Motivation is, however intermittent as, at times, the task feels overwhelming. This feels like a slippery slope: some days up, others way down.

Reinventing: Who am I Becoming?

The recognition of the experience of multiple loss as a catalyst for personal growth affords the opportunity to name gains and learnings from the experience. The survivor’s sense of personal capacity is greatly enhanced as the reflection on the remarkable journey to this point is internalised with a sense of self-mastery. From meaninglessness to a sense of reconnection to the soul’s purpose, current challenges may now be viewed from an increased capacity to respond.

The process of reinventing the self by the working through of responses to multiple loss, the ability to identify current challenges with strong internal resources, and realise what supports are required with the capacity to seek them out or create them, frees a survivor from being a victim of the catastrophic impact of multiple loss.

Working with Multiple Loss

The work of addressing the impact of multiple loss “*requires introspection and increased levels of self-awareness*” (Sprang and McNeil '95)

Normalising: “The times are crazy, *you* are not”

Recognises that extreme responses are required for extreme circumstances. Recognising the abnormality of the circumstances, and honouring the need to bear witness can help us:

- Stop feeling guilty about feeling guilty
- Stop feeling anxious about feeling anxious
- Liberate more creativity and spontaneity for the healing process
- Shift from a pathological identity to an empowered one
- Shift from being oppressed to being challenged
- Shift from victim to survivor

Constructing A Timeline

Typically after 2 or more significant deaths, survivors will adopt a strategy of refusing to mourn, which may include not attending funerals etc.(Nord '97). In order to begin the long-term commitment to uncovering the meaning of the losses a timeline can help separate out the different losses.

The timeline should include all losses including those that are intangible and global (e.g. community, sexuality, fun, safety) not just death events. This then invites the process of methodical storytelling.

Expressions of Recollections

Emotional responses are “generally constricted initially” (Sprang and McNeil '95). Inviting your own flow of expression which dips in and out of the mundane and the intense allows for expression without becoming overwhelmed.

Working in Groups:

- Validates losses
- Builds community
- Provides a setting to consistently 'lean into' the pain of grief
- Affords the certainty of being witnessed
- Helps in sharing feelings to receive support
- Counters alienation/isolation (others hear and support)
- Lessens survivor guilt
- Aids in the search for meaning
- Fulfills a need for catharsis
- Fosters a sense of choice and control

“Disenfranchised grief is best dealt with in a social setting” (“Nord ’97)

Bearing witness:

- Ensures the experience will never be forgotten
- May include writing books/articles, attending support groups, creating lasting memorials
- Prevents catastrophic loss having the final victory of total eradication

Working with Core Loss

Multiple loss experiences will bring back old losses. We all experience losses in childhood that are profound experiences. Early experiences of loss will shape a person's life and beliefs about themselves.

Adults often minimise the pain of the child and childhood losses need:

1. Recognition
2. Attending to
3. Healing
4. Repair

And may include loss of:

- Safety
- Worthiness
- Confidence
- Love
- Entitlement
- Power

If the sense of (e.g.) a sense safety in the world is part of the experience of childhood (as for example with abuse survivors) then safety tends to be sourced outside of the self in significant others. When these others are no longer available, what is lost is safety in the world. *Therapeutic exploration of early childhood losses of parts of self and subsequent reclaiming of these parts is the key to healing multiple loss.*

Addressing Multiple Loss Using Ritual

Ritual may be defined as: a ceremoniously performed *series of acts* with an implied purpose

Ritual may be used as: a *container* for the energies, thoughts, feelings and actions associated with the purpose

Ritual may be viewed as: the *marking and honouring* of a passage

Rituals can:

- Symbolise transition and healing
- “affect our minds, will and heart. Rituals stir passion” (Kollar '89)
- Aid griefwork in symbolising the irreversibility of the loss
- carry cultural meaning and the opportunity to create new metaphors and standards
- connect to the larger; the metaview, the sacred
- provide structure to assist passage
- act as a vehicle to safely undergo passage
- provide the opportunity to evoke the emotional response accompanying the change
- can restore a sense of control and mastery over the transition (counters helplessness)
- *acknowledge the three stages in the process of change:*

The Three Stages In The Process Of Change:

1. **separation** – the intentional leaving of a connection to meaning
2. **transition** – the old is no longer present; the new is not known
3. **incorporation** – when enough of a transformation has occurred to lead to a new sense of self

Transition

Any change is a new beginning; and by definition the end of something. To mark an ending is to facilitate a beginning. The end is where we start from.

Transition is:

- The process whereby the *past* is being left behind
- The process whereby the *present* is met with ambiguity
- The process whereby the *future* is acknowledged as unknown

A loss model applies to transition in three time dimensions in relation to the self:

- **the loss of what was**
- **the loss of what is**
- **the loss of what was possible (probable future)**

The Five Components of Ritual (from “Crossing the Bridge”– Sydney Metrick)

- 1. Focus:** Decide on the goal, what is needed from the experience of this ritual and how that will be of benefit. The more clarity you have as you focus on your goal, the easier the desired outcome will be to achieve
- 2. Plan:** What needs to be in place in order to achieve the goal in terms of materials, symbols activities etc. Consider the practical realities that need to be dealt with
- 3. Prepare:** Relax. Close your eyes and imagine the ritual from the beginning. Notice if it feels right. Allow the ritual to unfold in your mind. Check to see if everything flows smoothly or if there are additional supports you need. Ensure they are in place
- 4. Manifest:** Bring your planned activities into the ritual; work with symbols, writing, photographs, bodies, crafts or whichever medium you feel will best achieve your goal
- 5. Incorporate:** Make meaning from and begin to integrate the experience. Take time to reflect in order to become clear on what has been let go of, what has died, and what may be emerging as a result of the process

Examples of Rituals include:

- Keeping lists of the dead
- Keeping a memorial box
- Collecting photos
- Installing a permanent marker
- Collectively writing an obituary
- Building a shrine or special place
- Visiting a special site
- Releasing balloons
- Support groups