



THE *witness to witness*
PROGRAM

MIGRANT CLINICIANS NETWORK
MCN

GRIEF IN THE TIME OF COVID: LOSS, CONNECTION AND HOPE

Kaethe Weingarten, PhD



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MIGRANT CLINICIANS NETWORK



A force for health justice

Somos una fuerza dedicada a la
justicia en salud

Our mission is to create practical solutions at the intersection of vulnerability, migration, and health.

We envision a world based on health justice and equity, where migration is never an impediment to well-being.

THE
witness to witness
witness PROGRAM



Kaethe Weingarten, Ph.D.

Founder and Director of the **Witness to Witness Program**

Sponsored by Migrant Clinicians Network

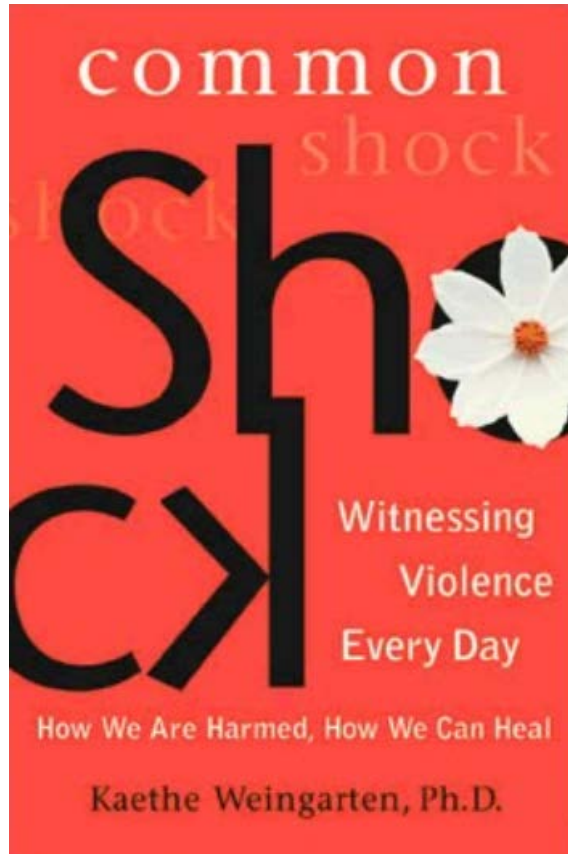
**Affiliated and Endorsed by the American Family
Therapy Academy**



Deliana Garcia, MA

Director of Research and International Projects
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Dr. Weingarten's Work



Associate Clinical Professor of Psychology, Harvard Medical School, 1981 - 2017

Taught the Program in Families, Trauma and Resilience at the Family Institute of Cambridge

Author of *Common Shock: Witnessing Violence Every Day – How We Are Harmed, How We Can Heal*



GRIEF

THE *witness to witness*
PROGRAM



Objectives

- Describe the nature of grief/loss generally
- Grief in the time of Covid
- Understand reactions to grief or loss
- Identify personal and family losses that may happen during the pandemic
- Understand how children react to loss and strategies for talking to them about it.
- Identify resources to manage grief

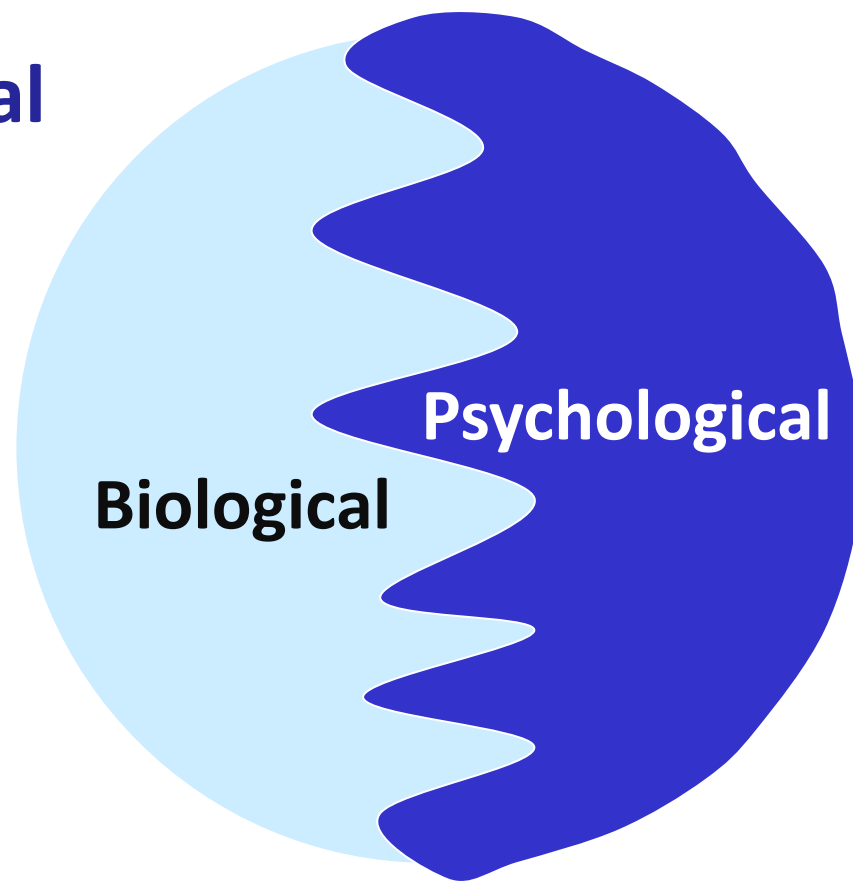
**DEATH REMINDS US OF THE INCREDIBLE
PRIVILEGE BEING ALIVE IS.**

From Nick Cave:

We have come to see that grief is not something you pass through, as there is no other side. For us, grief became a way of life, an approach to living, where we learned to yield to the uncertainty of the world, whilst maintaining a stance of defiance to its indifference. We surrendered to something over which we had no control, but which we refused to take lying down.

Interpersonal

Spiritual



Individual

Sensations in the Body

- Clamminess or chilliness
- Exaggerated startle
- Fear responses to non-threatening stimuli
- Hyper-arousal
- Hyper-vigilance
- Lethargy
- Muscle aches and pains
- Numbness
- Poor concentration
- Rapid heartbeat
- Spacey feeling
- Sweating
- Tingling
- Sudden cold or hot

Psychological Experiences

- Aggression
 - Anger
 - Disbelief
 - Fear
 - Grief
 - Guilt
 - Helplessness
- Memory alterations
 - Numbing
 - Rage
 - Sadness
 - Shame
 - Vulnerability
 - Worry/ Anxiety



Grief is often a lonely experience

- People often watch other people's lives go on as before while their life feels very different after the death of a loved one.
- While everyone's loss is unique, many people have experienced loss because of the pandemic.
- For some people this makes them feel less alone and this softens the grief.

Dimensions of a Disaster

- Predictability
- Controllability
- Speed of onset
- Duration of Impact
- Severity
- Intensity

How would you rank this pandemic along these dimensions?

Phases of Disaster



Sources of Anxiety for Healthcare Workers

1. access to appropriate personal protective equipment,
2. being exposed to COVID-19 at work and taking the infection home to their family,
3. Not having rapid access to testing if they develop COVID-19 symptoms and concomitant fear of propagating infection at work,
4. uncertainty that their organization will support/take care of their personal and family needs if they develop infection,
5. access to childcare during increased work hours and school closures,
6. support for other personal and family needs as work hours and demands increase (food, hydration, lodging, transportation),
7. being able to provide competent medical care if deployed to a new area (eg, non-ICU nurses having to function as ICU nurses), and
8. lack of access to up-to-date information and communication.

Requests From Health Care Professionals to Their Organization During the Coronavirus Disease 2019 Pandemic

- Hear Me
- Protect Me
- Prepare Me
- Support Me
- Care for Me

MORAL DISTRESS

MORAL INJURY

MORAL OUTRAGE

MORAL APATHY

Moral Distress at this Time

Failing to meet the needs of the people we believe we should be able to take care of - including ourselves - due to conditions that are beyond our control.



Coping with Moral Distress

Kaethe Weingarten, Ph.D.

The Witness to Witness Program

<https://www.migrantclinician.org/witness-to-witness>

1. Start each day by remembering that your intention is to offer compassionate, competent care.
2. Notice sensations in the body that are signaling that you are in distress. Pause and take a few full breaths.
3. Create a buddy system for each shift and check in, even briefly, with your buddy regularly through your shift.
4. Think of how much a loved one cares for you every time you wash your hands.
5. Recognize that circumstances, not you, may produce harms.
6. Everyone, including you, is just doing the best that one can do.
7. Be kind to others and yourself whenever possible.
8. Designate someone on each shift to offer a brief appreciation at the end of the shift to those who have served. Preferably the acknowledgment and appreciation can be observed by at least one other person.
9. When you leave work, take good care of your body, mind and spirit. Sit in silence to allow your soul to catch up with you.

Ideas for Team De-Brief to Help with Workplace Stress and Moral Distress

1. Set aside a few minutes at the beginning of each day to arrange for “buddies” during the shift. The role of the buddy is to be supportive. This may only be achievable with a glance or a smile. Anything counts.
2. At the end of the shift, take a few minutes together to de-brief. If possible, rotate facilitation of the de-briefs so that the responsibility is shared.
3. Go around “popcorn style” (when each person is ready to speak, s/he/they speak) and say one word or phrase to sum up how you are feeling right now about the work situation.
4. Optional. Play a two minute mindfulness or breath exercise. These are readily available as free apps (Insight Timer, Headspace and Calm all have good tools for this). Listen to this exercise together. Breath together.
5. Share an anecdote in relation to work that made you feel useful, hopeful, appreciated, acknowledged or grateful. Express appreciation to someone else. Facilitator: be sure that everyone is mentioned at least once.
6. Commit to doing something for self-care before you return to work. Say out loud what you are going to do. No one will check up to see if you have followed through.
7. Conclude with offering a word or phrase for how you feel right now.

Covid vs Non-Covid Deployed Staff

Two preliminary studies, one from Singapore and one from China, suggest non-Covid deployed health care workers are more distressed post outbreak than Covid-deployed health care workers

Need support now!

Mental Health Outcomes for Health Care Workers

In a study conducted in China at the end of January a sample of frontline and non-deployed physicians and nurses found that about 70% had **symptoms of anxiety, depression, insomnia and distress**. Frontline workers in Wuhan who were female nurses had the highest scores. Also, being in an “intermediate” position was associated with higher distress, anxiety and depression. Overall, frontline workers had worse mental health indicators.

Stress Indicators

- | | |
|--|--|
| <ul style="list-style-type: none">• Change in eating habits• Change in weight• Loss of will power• Losing interest / apathy• Can't hold a conversation• Excessive guilt• Taking lots of time off• Drinking more• Conflict in relationships• Fatigue / more sleep• Don't give self break (leaders)• Changes in relationships | <ul style="list-style-type: none">• Loss of control• No longer feeling like self• Can't get tasks done• Can't think clearly• Things excessively piling up• Isolating self• Feeling overly busy, hurried• Physical changes• Going through the motions• Memory problems• Post traumatic stress symptoms• Depressive or anxiety symptoms |
|--|--|

HEAD OFF PTSD

Current conditions of the pandemic lend themselves to forming the ground out of which people may develop PTSD

Leading trauma expert, Bessel van der Kolk, MD, says we can take action now to mitigate that risk.

CONDITIONS

LACK OF PREDICTABILITY

IMMOBILITY

LOSS OF CONNECTION

NUMBING OUT/SPACING OUT

LOSS OF A SENSE OF TIME

LOSS OF A SENSE OF SAFETY

LOSS OF SENSE OF PURPOSE

THREE MAJOR TAKE-AWAYS

1. ACTIVATE YOUR BODY

2. SELF-COMPASSION

3. CONNECTION

Health care workers may have a particular burden of grief

- Many hospitals don't have enough resources to take care of all their patients.
- Most providers have never practiced medicine under these circumstances.
- The volume of death is shocking and deeply distressing for many providers.
- Some providers are suffering grief over a loss of idealism due to betrayals
- Health care workers are dying. Colleagues grieve and fear.



CULTIVATING RESILIENCE



EVERYONE HAS STRENGTHS IN A CRISIS?

What is your strength?

Here are some examples:

Planning, Responsive to others, Compassion, Spirituality, Faith, Caring, Resistance, Altruism, Mindfulness, Humor, Good Communication, Self-Awareness, Creativity, Finding meaning, Sense of purpose, Flexibility, Resourcefulness, Empathy, Insight, Logical thinking, Imagination

Life challenges are catalysts for the development of wisdom

These five resources are key to the development of wisdom:

- *Managing* uncertainty and uncontrollability
- *Openness* to viewing situations from multiple perspectives
- *Reflectivity* as the motivation to think about complex issues in a complex way.
- *Emotional sensitivity and regulation*
- *Empathy* as taking the needs of others and the common good into account

We need
Reasonable Hope
not rainbow hope

HOPE IS SOMETHING WE DO WITH OTHERS

Phases of Disaster



Disillusionment and Reconstruction

Grief is profound in these two stages

Reconstruction involves

- **Adjusting**
- **Re-building**

Nature of Grief

- Everyone's experience of grief is unique. There's no right or wrong way to grieve
- Grief consists of many kinds of feelings: sadness, anger, regret, confusion, fear and more.
- Even if other people have lost the same person, that doesn't mean that their grief will be the same as yours.



Living with Grief

There may be disturbances of:

Sleep

Appetite

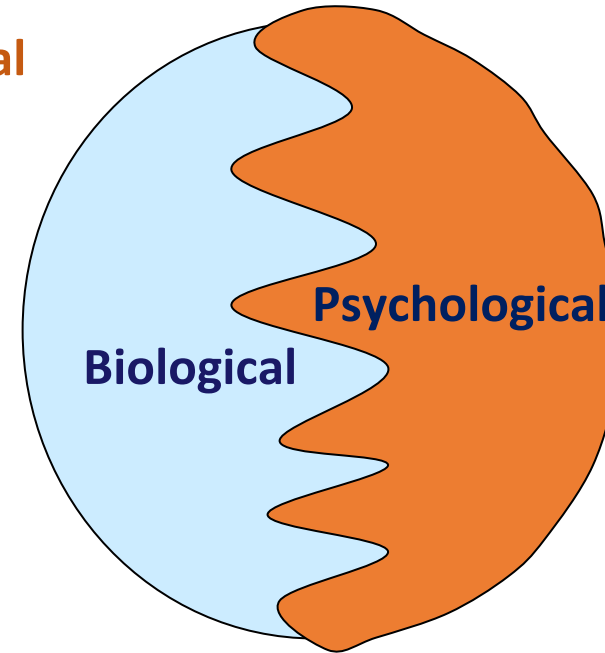
Energy level

Mood

Dreams

Our physical experience affects our psychological experience and vice versa.

Interpersonal



Individual

Spiritual



There are so many ways to grieve.

Here are some ways that have helped people grieve

- Taking care of oneself physically: getting enough sleep, eating nutritious food, exercising
- Not being harsh with yourself when it is hard to do the things you need to do and want to do.
- Finding ways of feeling connected to the person who died on a daily basis
- Giving yourself moments when you allow yourself to imagine that nothing has changed...but knowing that it has



Grief is the other side of love

This is an idea that some people find helpful. If you accept that grief is a transform of love, then these other ideas follow:

- Grief is a feeling
- Even when grief is very strong, it doesn't have to hurt us.
- Grief is the pain of loss. If we didn't care, we wouldn't feel grief.
- When we accept the intensity of our grief it helps us bear it.
- If we share it, that helps also.

Reactions to loss

There are many different ways people react to loss: loss is like the many facets of a prism

What is your way?



Culture and Grief

In many families, when there is a death in the family, the expectations of men and women, boys and girls are quite different. These expectations may or may not be a good fit for you personally.



Culture and Grief

People often grew up with certain traditions that are difficult to maintain decades later. At times of grief it is natural to miss the older traditions and regret that those traditions are less available as sources of comfort.

EXTRA BURDENS ON GRIEF

Many factors besides your own feelings have an impact on how you and your family can grieve. How you are treated by the surrounding community is one factor. Your grief may be impacted by your immigration status or the immigration status of the person who died. There may be financial or legal complications that follow the death of your loved one that make it harder for you just to be with your feelings. It is important to recognize that your grief may be burdened by additional factors that in a fairer world you would not have to cope with at all.

Every community has its own way of honoring the dead

- In your culture or family, how do people honor those who have died?
- How can you adapt those customs to your present circumstances?



Connection after death

When a loved one dies, the physical connection stops. But the spiritual connection doesn't have to stop.

There are many ways to feel connected to a person who has died.

- Listen to music they loved
- Think of them at a particular time of day
- Carry a photo
- Imagine what they would say

What is your way?



Children and Death

- It's often hard for an adult to tell a child that a loved one has died. This is especially true when it's an unexpected or sudden death
- We may want to be strong and not cry and yet we fear we will cry





Children and Death

When an adult cries or is sad, this doesn't have to be problematic for a child.

We recommend starting with a short version of what has happened.

You can tell the child you will answer any questions they have and then wait.

Some children will have questions right away. Some children will have none ever. Some will have questions later. Some children will want to withdraw and not talk about the death for a while. Some children will approach you for comfort.

There is no right or wrong way for a child to grieve.

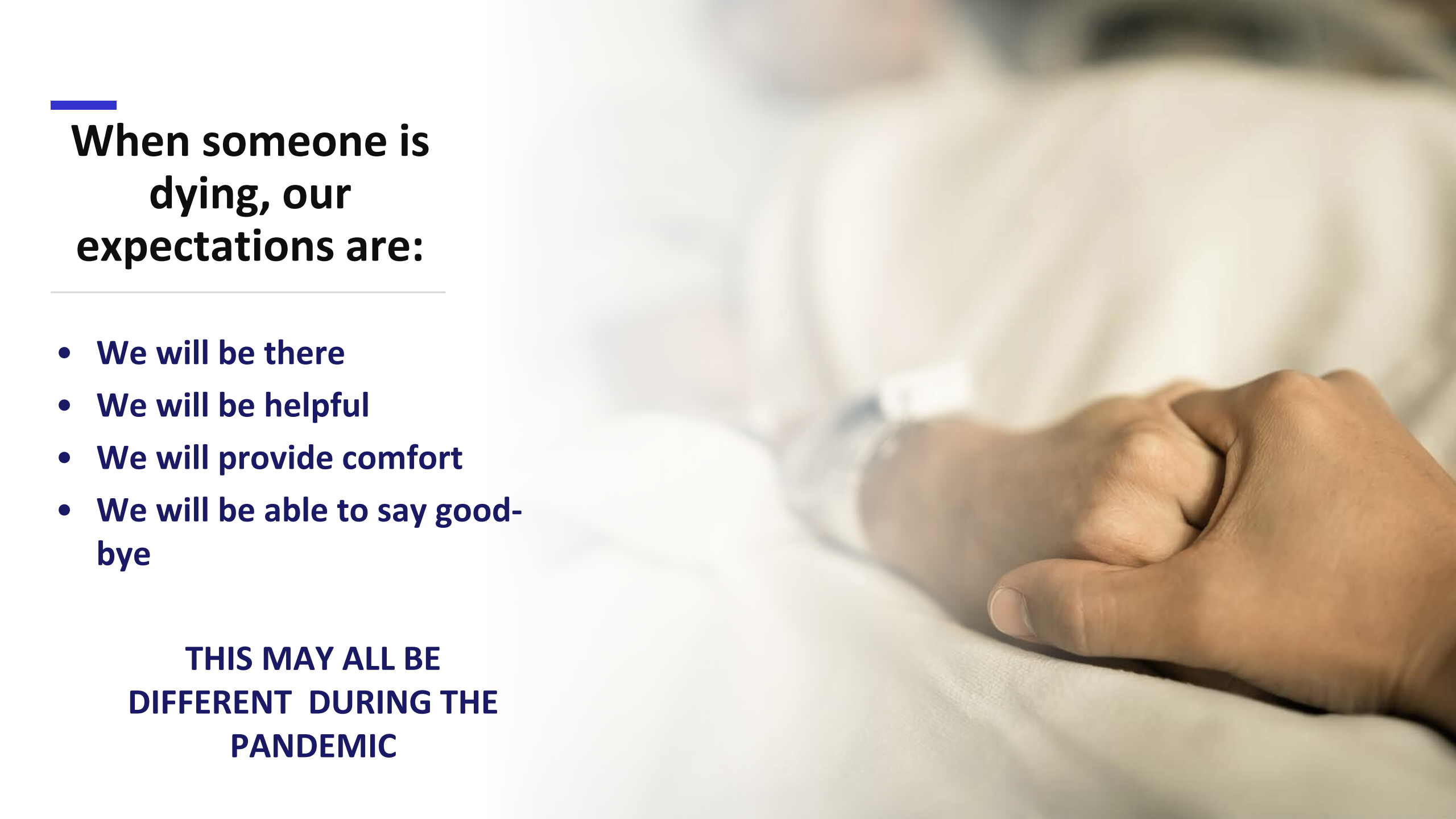
For children...

- Just as it is for adults, living with death is a process
- Children need to stay connected to the person who died
 - Photos, stories, objects, music
- They need to feel loved and safe.
- Helpful for them to share the loss with community, be it family, neighbors, friends or relatives





Even the most heartbroken child can recover, grow, develop and live a good life, full of love and deep relationships.



**When someone is
dying, our
expectations are:**

- We will be there
- We will be helpful
- We will provide comfort
- We will be able to say good-bye

**THIS MAY ALL BE
DIFFERENT DURING THE
PANDEMIC**

How do we manage a different kind of dying and death?

- It may be quick
- We may not be with the person
- We may have regrets and blame ourselves
- We may not have been able to say good-bye
- We may not believe our loved one had the best care possible
- We may not be able to be with our loved one after death
- Funerals and rituals of death will be different
- Other...

How can you create rituals of mourning that feel right to you?

- Connect through phone, apps and internet with family and friends
- Create activities that people can do and then share through photos
- Consult your faith community to learn what others are doing and have done
- **Don't let what you can't do stop you from doing what you can do**

Resources

Where is help available?

Friends and family

Online webinars

Social media platforms

Hot lines

Online Support groups

Readings: articles, books, poems

Faith communities

In Nature

Other...

Where do you turn for help?





Loss in the Future

- It is hard to know what the world will be like when we are no longer coping with the pandemic.
- Some people are feeling grief now about anticipated losses



Contemplating death during the pandemic

WHAT MATTERS NOW?

**Consider the possibility that you may not live through this outbreak or the next iteration of it or the next.
Contemplate your death.**

Are there some things you would do differently now?
What truly matters?

Are you doing your best under these circumstances to live in alignment with what truly matters?

We need
Reasonable Hope

HOPE IS SOMETHING WE DO WITH OTHERS

If we don't feel hopeful, how about vicarious hope?

Life After Death

These things I know:
How the living go on living
and how the dead go on living with them
so that in a forest
even a dead tree casts a shadow
and the leaves fall one by one
and the branches break in the wind
and the bark peels off slowly
and the trunk cracks
and the rain seeps in through the cracks
and the trunk falls to the ground
and the moss covers it
and in the spring the rabbits find it
and build their nest
inside the dead tree
so that nothing is wasted in nature
or in love.

-Laura Gilpin



