

# Honoring the Past and Rebuilding the Future

## www.wingsgrief.org

Published by Nan Zastrow

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## Please read our ELetter and pass it on!

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#### WHAT IS PTSD?

Alan D. Wolfelt, Ph.D., C.T.

www.centerforloss.com Excerpted from Reframing PTSD as Traumatic Grief: How Caregivers Can Companion Traumatized Grievers Trough Catch Up Mourning

Post-traumatic stress disorder, or PTSD, is the response to a serious psychological injury that is thought to affect an estimated eight percent of Americans at any given time—yielding a figure that today tops 25 million people. In recent decades it has risen to the fore as one of the most concerning and studied mental health issues because of its debilitating symptoms. It wasn't that long ago, however, that PTSD did not even have a name.

In the 20th century, the mental health field, like other disciplines, enjoyed an explosion of new theoretical and research-based understanding. These were the rich decades of Sigmund Freud (in his later career), B.F. Skinner, Jean Piaget, and Carl Rogers, among other luminaries. From our early 21st-century vantage point, it is sometimes easy to forget that most of our assumptions and canonical mental health knowledge are less than 100 years old.

While certainly human beings have experienced post-traumatic stress since the first human being walked the Earth, the term "post-traumatic stress disorder" did not appear in the Diagnostic and Statistical Manual of Mental Disorders until the DSM-III, in 1980 (after the

Vietnam War). Before that, the anxiety provoked by various traumatic experiences was recognized in the DSM only in piecemeal fashion, including mentions of "shell shock" and "rape trauma syndrome."

After 1980, the definition of PTSD developed and evolved both in professional diagnostic tools like the DSM and in a plethora of lay-friendly publications and websites.

Today, the website of the National Center for PTSD, which is a division of the U.S. Department of Veterans Affairs (the VA), explains PTSD to laypeople in this way:

After a trauma or life-threatening event, it is common to have reactions such as upsetting memories of the event, increased jumpiness, or trouble sleeping. If these reactions do not go away or if they get worse, you may have Posttraumatic Stress Disorder (PTSD).

In turn, the website of the National Institute of Mental Health (NIMH) offers this lay-friendly explanation of PTSD:

#### Continued from page 1

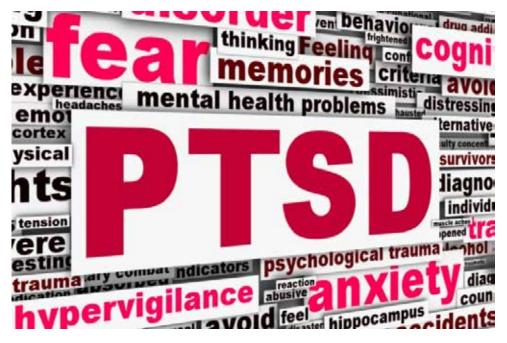
When in danger, it's natural to feel afraid. This fear triggers many split-second changes in the body to prepare to defend against the danger or to avoid it. This 'fight or flight' response is a healthy reaction meant to protect a person from harm. But in post-traumatic stress disorder (PTSD), this reaction is changed or damaged. People who have PTSD may feel stresses or frightened even when they're no longer in danger.

PTSD develops after a terrifying ordeal that involved physical harm or the threat of physical harm. The person who develops PTSD may have been the one who was harmed, the harm may have happened to a loved one, or the person may have witnessed a harmful event that happened to loved ones or strangers.

PTSD was first brought to public attention in relation to war veterans, but it can result from a variety of traumatic incidents, such as mugging, rape, torture, being kidnapped or held captive, child abuse, car accidents, train wrecks, plane crashes, bombings, or natural disasters such as floods or earthquakes.

Note that both the National Center for PTSD and the NIMH appear to limit PTSD to people who have personally been affected by physically dangerous events.

In the past, the Diagnostic and Statistical Manual classified PTSD among anxiety disorders. Today the DSM-5 has moved PTSD to a new category called" trauma and stressor-related disorders."



THE INCITING EVENT, OR "STRESS-OR" Since the DSM-III, what counts as a "recognizable stressor" has been examined and defined and redefined. The current DSM, the DSM-5, stipulates that a PTSD diagnosis can only be made if the person was exposed to death, threatened death, actual or threatened serious injury, or actual or threatened sexual violence, as follows (criterion A):

- 1. Direct exposure
- 2. Witnessing, in person
- 3. Indirectly, by learning that a close relative or friend was exposed to trauma. If the event involved actual or threatened death, it must have been violent or accidental.
- 4. Repeated or extreme exposure to aversive details of the event(s), usually in the course of professional duties (e.g., first responders, collecting body parts; professionals repeatedly exposed to details of child abuse).

This does not include indirect nonprofessional exposure through electronic media, television, movies, or pictures.

So, given this definition of the kinds of experiences that cause PTSD, what's included? Violent acts of war or terrorism, certainly. Many murders and suicides. Natural disasters. Sexual assault. Violent accidents, such as car crashes. I think we all agree that exposure to these experiences—whether by direct exposure, witnessing, or learning of a loved one's involvement—is traumatic and can give rise to the debilitating symptoms outlined in Chapter Three.

But what may be reasonably excluded under this definition also merits consideration. According to at least one possible interpretation of this definition, if your son attempts suicide by taking too many sleeping pills

#### **EDITOR'S JOURNAL**



NAN ZASTROW Co-Founder, Wings – A Grief Education Ministry

Recently, the doorbell rang about 7:00 in the evening. My husband and I had just put away the documents we were working on and switched our "head work" from overload to neural. It was time to settle down from the day's anxiety. We looked pretty relaxed, casually dressed, and totally not ready to answer the door. No one ever comes to our house without calling first. But curiosity overcame me. I opened the door and in the dark, only shadowed by the yard light a few feet away, I saw a woman and a young man. She asked, "Do you remember me?" I hesitated briefly. Her features were familiar but my cognitive lull was not equipping me with instant recognition. Then I questioned, "Margaret?"

It was at least 40 years since I've seen Margaret...and the young man, her son, of course I had never seen. The distance of miles and years faded almost instantly. I was stunned how she found me and where we lived (since we've moved ever so many times), and even more stunned that she actually made the effort to reunite. She has lived in the West for most of that time. Though her sister was my friend and schoolmate, Margaret and I also had deep roots through our common place of worship and just because she often was involved with things her sister and I did. We sat and visited for several hours shar-

#### LIFE IS ABOUT THE TRANSITIONS

ing precious memories and funny stories. We also caught up on all our in-common friends from the years past. Nearly all of them had relocated, and I knew little of their lives. Even Margaret's son was fully engaged in the lively tales we told and the emotions shared.

Another incident similar to this happened in the summer when five good classmates and friends finally got together after about a 20 year span. We were "buds" growing up together. We shared the hard knocks of life, the indecisiveness of being a teenager, and the treasures of have not seen in many years for a variety of reasons. Dr. Wolfelt says, "Life is full of bittersweet transitions and painful losses."

My reunions this year represented bittersweet transitions that changed each of our lives while we were dealing with the highs and lows and chasing our dreams .Many of those dreams never came to fruition. In this case, change was due to marriage, relocation, and new circles of friends. Yet, we still valued those moments of growing up together. Remembering the "good times" created a new sensation of fusing friendships that last forever. We were ev-



secrets and stories that for so many years had been locked in our memories. Oh what gets revealed when the past years aren't so vulnerable anymore!

These two incidents reminded me of the transition from grief to recovery—a skill I've been practicing for the past 22 years. Dr. Wolfelt describes grief as what we think and feel whenever something we value is harmed or taken away. Like the loss of a loved one, we also grieve for the relationships and companionship of friends (though not deceased) whom we ery bit the "kids" of the past rather than wisely carved adults of the present.

I intuitively registered a fact: Sad times are overridden by positive memories. It's a reminder that no one can take away our past experiences. The factor of time mellows any negative comments, situations, or sudden good-byes that might have disturbed us. Not a hurtful or painful story surfaced in these brief wonderful visits with long-time friends. We've really figured it out.

#### **ACCIDENTAL ANGEL**

#### Author: Scott Shaunfield

When I was in school, I participated in an undergraduate internship with a hospital chaplain. This largely consisted of me visiting with specific hospital patients and then discussing the interaction with the chaplain. I had no specific training in this, and introducing myself to strangers was not one of my natural talents.

On one particular visit, I cautiously entered a darkened room to find an elderly man lying in the bed. There was no one else in the room, and I initially thought he was sleeping. When I moved closer to the bed, I realized that he was very much awake, but also very confused and anxious. He desperately wanted to communicate something, but I couldn't understand what he was saying. He seemed weak and frail, and I couldn't tell if he was in pain, or just scared. I knew nothing about this man's life or history, and I felt totally helpless. He obviously didn't want me to leave, but I felt so lost and uncomfortable that I had to leave the room after only a couple of minutes.

The next time I was at the hospital, I was assigned to make follow up visits with the same list of patients. I expected my time with the confused man to be just as short as the last time...if he was even still alive. It seemed pointless to frustrate myself trying to interact with someone so disoriented.

As I arrived at the room, the first thing I noticed was that the lights were on. His daughter was there visiting with him. He was sitting up in the bed and much more alert. I introduced myself to the daughter and explained that I had come by before. Addressing the patient, I then suggested that I was certain he didn't remember me at all.



He corrected me immediately, saying "I remember you. You were the angel that gave me hope in my darkest hour!" I would have thought his memory was delirious, but he then accurately recounted enough details of our first meeting to remove any doubt of his clarity. I was so amazed that, once again, I didn't know how to respond. We talked a little more, I told him I was glad he was feeling so much better, and we said goodbye.

In the brief moment of my initial interaction with this inconsolable patient, I had no idea what to say or what to do. I knew of nothing I could offer him. I did absolutely nothing to help this man... except show up. I may never be able to explain it, but somehow he found in me something he needed at a critical point in his life, just because I was there.

I have thought about this encounter often over the past 25 years. It has shaped the way I see life, the way I see myself, and the way I see others. It has influenced not only my career path, but also the decisions I make on a daily basis. It makes me

want to offer whatever kindness I can to others, and I try to recognize and appreciate the kindness that others share with me. Obviously, we can't know the impact our actions, or even just our presence, will have on life.

I don't know who he was. I don't know his name, where he came from, or what happened to him after that. It took years of hindsight for me to recognize the gift he had given me, so I didn't even know to thank him at the time.

So a stranger in the form of a frail old man changed the rest of my life with a single comment. Who was the angel to whom?

With very special thanks to the author, Scott Shaunfield, for allowing us to share this story. Scott is a firefighter and paramedic from Houston, Texas.

www.inspirationpeak.com

# **HEALING GRIEF** *Education Programs*



#### GOOD GRIEF, BAD GRIEF. GETTING BACK TO LIFE AFTER LOSS—PART 1

A six-week series: Education and Support for Grief, Loss and Transition. Grief is not an event that begins and ends. It becomes part of your life. It is an active, ongoing process of turning your sadness in to a meaningful life again. Our group is not about changing you, but rather about offering you a space for healing and understanding where change can take place.

#### **2016 Spring Series Dates:**

#### 2016 Fall Series Dates:

Tuesdays: February 16, 23 March 1, 8, 15, 22

Meets September and October: (please check for dates)

Facilitators: Nan & Gary Zastrow since 1997

**Time:** 6:00—7:30 p.m. (*No charge*)

Place: Conference Room A-1, Quality Services, Aspirus Wausau Hospital

#### 19TH ANNUAL UNDERSTANDING GRIEF SPRING CONFERENCES

Dr. Alan Wolfelt – Internationally known author, educator, thanatologist

**Tuesday evening: May 10, 2016** | 7:00 – 9:00 pm | *Community program. No charge.* 

#### **Exploring Critical Questions when Someone Loved Dies**

Find answers to eight critical questions that will help you clarify your experiences and encourage you to make choices that honor your transformation from grief and loss to healing.



Wednesday Morning: May 11, 2016 | 9:00 am - Noon | Community and Caregiver program. Cost \$60

#### Post Traumatic Stress (PTSD)—A Wound That May Be Healed

What do PTSD and traumatic grief have in common?

This informative seminar will help you explore PTSD and traumatic grief, not as a "disorder," but instead as a normal and necessary response to abnormal events. If you've been diagnosed with PTSD, care about someone who has, or if you provide counseling to those suffering from traumatic loss, this seminar will help you understand "trauma processing" and offer hope for recovery.

**Location:** Holiday Inn & Suites – at Cedar Creek, Mosinee, WI *Professional CEUS available for both seminars* 

#### LIVING THE NEW NORMAL AFTER LOSS -PART 2

This four-week series is a follow-up to Part 1 and also designed for those who have done some grief work and are ready to move forward. You may find that your old life doesn't fit you anymore because you are a different person now. Learn how to begin a new chapter in your life without regrets.

Meets Tuesdays: May 17, 24, 31, and June 7, 2016 Facilitators: Nan & Gary Zastrow Call: 715-845-4159

**Time:** 6:00 – 8:00 pm (*No Charge. Group size is limited. Pre-registration recommended.*)

Place: Conference Room A-1, Quality Services, Aspirus Wausau Hospital

#### **20TH ANNUAL HOLIDAY REMEMBRANCE PROGRAM**

When the Holidays Hurt—a community program for the bereaved

Each year, an inspirational theme-based program is presented with fresh ideas and personal insight about coping with grief before and during the holidays.

**Date:** Tuesday, December 6, 2016 **Facilitators:** Nan & Gary Zastrow *Watch for Program details* 

These programs are provided as a service to the community. For more information, contact Nan or Gary Zastrow – Wings-a Grief Education Ministry at 715-845-4159, wingsgrief.org, FACEBOOK, or email wings1@charter.net.

WINGS-004a 2016

# Grief Tip: Grieving Forward in the New Year

As the calendar flips over to a new year, a certain amount of sadness becomes apparent to the grieving soul. First, we are leaving our loved one behind in another time, and we may even feel guilty about moving on. Secondly, we ponder what we can do differently that will help us heal a little more. The one-day-at-a-time concept has passed us by. We desire to find peace and purpose in the future.

Entering a New Year is a good time to evaluate how or if your grief has progressed throughout the last months or years. Perhaps the loss was too recent for you to see progress, or perhaps, your progress has stalled along the way. But even a little movement forward is progress!

#### Here are some questions to ask yourself to determine if you have made progress.

- What meaning can I find in this loss?
- What lesson of life have I learned from my experience?
- What have I discovered about myself...my weakness or my strengths?
- What has surprised me about my behavior as a result of this loss?
- What changes have taken place in me since the loss?
- What have I found that is "really IMPORTANT" in life since my loss?
- How does the world seem different to me now?

"Grief changes us. The pain sculpts us into someone who understands more deeply, hurts more often, appreciates more quickly, cries more easily, hopes more desperately, and loves more openly."

- Unknown

### How to Connect with Wings:

- Email: nanwings1@gmail.com
- Postal: P.O. Box 1051, Wausau, WI 54401
- Phone: 715.845.4159
- Follow the EVENTS calendar posted at the website wingsgrief.org
- Subscribe to the free online ELetter sent quarterly.
- Order a Free copy of Grief Digest at www.centeringcorp.com
- Visit Wings on Facebook

#### A New Year's Prayer

May God make your year a happy one!

Not by shielding you from all sorrows and pain,

But by strengthening you to bear it, as it comes;

Not by making your path easy,

But by making you sturdy to travel any path;

Not by taking hardships from you,

But by taking fear from your heart;

Not by granting you unbroken sunshine,

But by keeping your face bright, even in the shadows;

Not by making your life always pleasant,

But by showing you when people and their causes need you most, and by making you anxious to be there to help.

God's love, peace, hope and joy to you for the year ahead.

#### LIFE IS ABOUT THE TRANSITIONS

#### Continued from page 3

Life is all about making successful transitions –however we did it!

Our grief transitions can parallel our life transitions. We move through the hard times, the sad emotions, and the unful-filled dreams; but, we find beauty, peace, and joy in the memories that link us together. Sharing those stories with family and good friends allows us to be grateful for the years we had together.

We are approaching our 23rd year since the death of our son, Chad. It still doesn't seem possible. I read a quote recently that I think applies: "Sometimes your life has to be completely shaken up, changed, and rearranged to relocate you to the place you were meant to be."

I believe this is what happened at the moment of Chad's death. I'm comfortable

now where I am though the journey to get there has been very emotional and sometimes lonely.

Just recently we spoke at a group and one of the people attending was Chad's high school teacher. He re-introduced himself to us and said, "Just the other day, I was talking about Chad." Was that music to Gary's and my ears? Absolutely! The fact that Chad was still remembered in a positive way after so many years was the best thing a parent can hear.

If you want to be a "hero" to someone who is grieving, take a moment to remember their loved one by name and/or through a story or memory you have of them. We, the bereaved, never stop remembering, never stop loving, and never grow tired of the stories of life—no matter how many years it has been!

Like grief, on our journey, we each could relate stories of loss, disappointments, and sorrow. But the sustaining impact is how far we've come. We've been blessed. Our relationships were valuable experiences that even time can't fade. Who knows when we'll see each other again?

And then I think of the more obvious and difficult grief--the loss of loved ones through death. There is comfort in knowing that we will be reunited with them again someday. There will be no hesitation to open the door. There will be instant recognition and the beautiful memories will overwhelm us with Love. It's a grief reunion like no other.

#### WHAT IS PSTD?

#### Continued from page 2

(a nonviolent act) but is not successful, and you do not witness it but later find out about it, you cannot technically develop PTSD—even if you end up having intrusive thoughts, numbness, anxiety, and

even nightmares about this difficult reality. Similarly, if you learn that your partner of many years has been sexually abusing children, you cannot go on to have PTSD. And if you receive a phone call in the middle of the night saying that your fit, healthy, and young best friend died of a sudden stroke, you cannot develop PTSD. Does this make sense? Maybe or maybe not. Again, I would simply urge readers of this book

to consider that common circumstances yield highly individualized grief responses that are not easily placed in a box.

Of course, not everyone agrees with the DSM's language about what constitutes a traumatic event. In fact, in 2013 the NIMH decided to eschew the DSM and instead develop its own diagnostic criteria not just for PTSD but for all mental health issues. And my chart of traumatic losses on page 17 may serve to demonstrate that loss, and the resulting grief, comes in many shades of gray.

Through this discussion of the inciting event, or the "stressor," I do not mean to be disrespectful or trivialize a very real psychic injury. Neither do I necessarily seek a redefinition of PTSD in the next DSM.

Rather, I merely hope to shine a light on the fact that when we medicalize and attempt to strictly define and measure an emotional and spiritual internal response to an external reality, we sometimes end up missing the point. My purpose is to join in the conversation about this important topic—to reframe it, not to determine how it should come out.

Dr. Wolfelt is the guest speaker at the Spring Seminar in Wausau on May 10-11, 2016. Save the Date!

# Understanding Grief **Spring Seminar 2016**

# SAVE the DATE

#### Alan Wolfelt, MD (Seminar Presenter)

#### Internationally known author, educator, counselor and thanatologist

Dr. Wolfelt is the recipient of the Association for Death Education and Counseling's Death Educator Award, he serves as the Director of the Center for Loss and Life Transition (www.centerforloss.com) in Fort Collins, Colorado. He is also a faculty member of the University of Colorado Medical School's Department of Family Medicine. Dr. Wolfelt is a popular media resource who regularly provides his expertise to many top-tier television shows, newspapers, and magazines. He is the author of more than fifty best-selling books on grief and loss.

Dr. Wolfelt's compassionate messages about healing grief—based on his own personal losses as well as his experiences supporting children, teens, adults and families over the last three decades—speak not only to the intellect but to the hearts of all who hear him.



#### **SEMINAR ONE**

# **Exploring Critical Questions When Someone Dies**

**Tuesday, May 10, 2016** | 7:00 – 9:00 pm Free of charge and open to the public

When loss enters your life, you are faced with many choices. The questions you ask and the choices you make will determine whether you become among the "living dead" or go on to live until you die. The capacity to love requires the need to mourn when someone loved dies. At this seminar, you will find answers to eight critical questions that will help you clarify your experiences and encourage you to make choices that honor your transformation from grief and loss to healing. These questions will be covered in the content of this seminar.

#### Both seminars will be held at:

Holiday Inn & Suites - Cedar Creek 1000 Imperial Avenue, Rothschild, WI

#### For more information or a program brochure contact:

Wings—a Grief Education Ministry Nan or Gary Zastrow 715.845.4159

Or Aspirus Comfort Care and Hospice Services Amy Kitsembel 715.847.2703

#### Professional CEU's available for both programs.

Presented by Wings™-a Grief Education Ministry who partners with Aspirus Wausau Hospital to provide these seminars as a community service. Other major sponsors include Brainard Funeral Home, Helke Funeral Home, and Peterson Kraemer Funeral Homes. For a complete list of sponsors, visit our website: www.wingsgrief.org

CCHS-217a (am 11-12-15)

#### **SEMINAR TWO**

# **Post-Traumatic Stress (PTSD)** – A Wound that May Be Healed What do PTSD and traumatic grief have in common?

Wednesday, May 11, 2016 | 9:00 am - Noon | Fee: \$60

When we experience a traumatic event, something significant and often sudden, violent and horrible that is outside of our control happens to us. We are injured bodily or our psyches are injured in a way that creates multiple symptoms that are fear-based. These symptoms are the hallmarks of post-traumatic stress (PTSD) such as extreme anxiety, nightmares, and flashbacks. What if post-traumatic stress disorder (PTSD) is really grief set in motion from a traumatic event? How can new research change how it is "treated"?

PTSD has recently gained national attention for our war veterans. But PTSD can result from a variety of traumatic incidents including (but not limited to) rape, torture, suicide, homicide, child abuse, kidnapping, chemical overdose, crashes, and natural disasters. Some experiences are single events and others ongoing. Mourning is the missing piece to the puzzle of healing PTSD.

If you've been diagnosed with PTSD, care about someone who has, or if you provide counseling to those suffering from traumatic loss, this seminar will help you understand "trauma processing" and offer hope for recovery. Whether the traumatic experience was recent or in the distant past, Dr. Wolfelt's information will unlock the secret to living life fully again. This informative seminar will help you explore PTSD and traumatic grief, not as a "disorder", but instead as a normal and necessary response to abnormal events.

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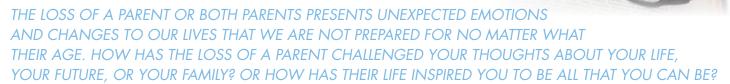
Partner sponsor:





# Reader Feedback

#### WHAT DO YOU THINK?



I've lost both parents. My dad died when I was 9 from osteosarcoma. I never knew my biological Mom. She died in a car accident when I was 2 1/2. She held me back against the seat to save my life. In the same accident, my dad just got pushed in because of the steering wheel. I have no memory of my biological mother whatsoever but the day after the accident, July 5th 1969, my oldest sister took me up to the hospital and put me in the bed next to my dad so I could give him a hug. I remember it like it was yesterday. Honestly I was too young to know what the family traditions were. The holidays can be tough on everybody. This will be my third year without my husband, Norm, so that makes it tough for me. But, they say everything happens for a reason.

Lisa - Wausau, WI

I lost both my parents at a very early age. My dad died of cancer when he was only 44 and I was 15. My mom died soon after. The deaths definitely shaped me into who I am today. My parents always stressed two things. First, having an education and doing something you are passionate about. Secondly, they stressed values and giving back to the world. I cherish the memories of them as well as their words of wisdom.

Maxine - North Hollywood, CA

I was so close to my mother that I just could not imagine how I would cope with her death. in the back of my mind I worried about it from the time I was little until her death when I was middle aged. And yes, I missed her terribly when that time finally came. But what I didn't expect was what I can only describe as a sweetness, the pervasive feeling that she is with me. While my mother was still alive, we lived 6,000 miles apart. I spoke to her once each day and saw her once each year or two. Once she had passed away, I had the feeling that she was with me always. This feeling remains, even five years after her death.

My mother taught her children and students to see beauty in nature, in each other, in ourselves, and in all the difficult places, too, where others see only ugliness. She was kind and gentle, smart and terribly sensitive, and suffered from chronic pain most of her life. This marvelous feeling I have that she is still with me brings me a sense of walking in beauty, kindness, and gentleness. The gentle breezes of my Hawaiian home feel like the soft touch of her hand smoothing my cheek, far from my childhood home of Connecticut, where she lived. But there is no feeling of pain any more, none of the mental anguish she experienced from a life of chronic pain and debilitation.

This was all so unexpected, and goes on silently, a gift to me as my life continues -- my true legacy of my mom incorporated within myself.

Valorie – Honolulu, Hawaii

My mother died unexpectedly one week before my daughter came into the world 4-weeks early. She was born with Down's Syndrome and had special needs. I was so absorbed by life change that I didn't take the time to grieve my mother's death. I never realized how that event would affect me 20 years later after my son died. The ties between mother and child go very deep. I spent a period of time grieving both my mother and my son, individually, and deeply. I learned It's never too late to put into perspective your relationship with someone that has passed. You can take time to rewind. I found the time for putting regrets aside, being grateful for the relationship I had with each of them, and remembering what was positive and good. That's how I remember them today!

Nan - Wausau, WI

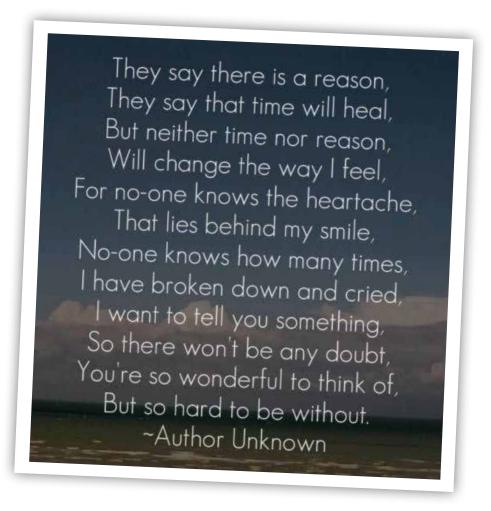
# **WHAT DO YOU THINK...**Continued from page 9

My mother died 5 days before Christmas when I was 27. Since she was the glue that held our fractious family together we soon drifted apart. It has been nearly 40 years since her death. Because of what we lost - a sense of family, belonging and trust - I have done my best to make sure that my children stayed close to each other. Each Christmas has been a bittersweet holiday for me - filled with memories and thoughts of what could have been.

Jan - Wittenberg, WI

When my dad was dying, I knew in my head that someday he would he pass away. However, it wasn't my dad was gone that it really hit me, dad won't be coming home. Even in talking to my siblings and my mom, they agreed that it was about two weeks after dad passed away that it really hit us. I think it took that long for us because we felt like he was on a "trip" of some time. Since that time I have come to understand that saying good-bye could really be the last time I see or say anything to that person. I just thought - we went through the funeral and everything but it still felt like dad might come home.

Kim - Great Bend, KS



#### FOR OUR NEXT ISSUE: What do you think?

Regrets are often felt as something we wished we would have said or did before our loved one died. However, in most instances our loved one really knew what we felt. It is never to late to say the things you want to say as it helps heal your grief.

If you had 5 minutes with your loved one, what would you tell them? What can you share with others who might be dealing with regrets?

Send your response to nanwings1@gmail.com . Please limit your feedback to about 250-300 words.

Winter 2016 ELetter: Wings - A Grief Education Ministry Honoring the Past and Rebuilding the Future