

SereneScene

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UNDERSTANDING LOSS

BY ANDREW MARTIN,
MBA, CADC II, SAP

Loss comes in all shapes and sizes, and everyone reacts to loss in different ways. There is loss related to relationships, people we care about, family members, pets and other interpersonal connections. There is also loss related to possessions, objects, places of residence, familiar places and other tangibles. There is also loss related to behaviors, traditions, performing a job, and other actions that may have become habitual. Regardless of the type of loss, when experienced, we feel grief and must find ways of coping with the emotional suffering attached to the loss.

For those individuals with addiction in their lives, it is an unfortunate trend that friends and loved ones will die from the disease. When this occurs the event will cause grief from losing a friend or loved one, and may also cause feelings and thoughts surrounding the loss of using drugs/alcohol with them. Significant emotions can be stirred with regard to recognizing how devastating the disease of addiction can be, and additional loss is experienced when the recovering addict makes a decision to remain abstinent from the drug/alcohol that they have been so attached to in their lives.

Everyone grieves differently as it is a highly personal and individual experience. Many factors contribute to how a person grieves a loss: personality, coping skills, faith, religion, and the nature of the loss all play a part. The only commonality between individuals is that the grieving process will take some time, and healing will come. For some, a few days or weeks are enough to process the loss; for others, months or years are required. Patience and compassion are important parts of the grieving process.

A psychiatrist by the name of Elisabeth Kübler-Ross introduced the “five stages of grief” which are outlined below:

1. Denial. Denying that the event has taken place is a temporary defense which shields the individual from feelings of tremendous suffering. Sometimes an individual can get stuck in the denial phase, but generally denial is replaced with the awareness that the loss has occurred.

2. Anger. Often anger originates from the frustration and realization that the loss has taken place and nothing can change that fact. Assigning blame, to others and to self, and misplacing feelings of rage and envy are commonplace during this phase.

3. Bargaining. This phase often includes superstitious behavior such as making deals with a higher power in order to get back something that is lost. Sometimes bargaining comes in the form of compromise to lessen the impact of the loss such as when people agree to remain friends after a breakup.

4. Depression. Understanding the certainty of the loss can bring depression which allows the individual to disconnect from the people and things that have such tremendous meaning. It is important for the depressive stage to be processed and usually behaviors such as silence, isolation and crying are indicators that the individual is going through the depression phase.

5. Acceptance. And the end of the grieving process the individual comes to terms with the loss and returns to a state of normalcy.

Dr. Kübler-Ross understood that the grieving process is individualized, and never intended the five stages of grief to be a rigid framework that applies to everyone. The grieving process can also cycle over and over again. Especially when significant dates come around that remind the individual of the loss.

Loss brings grief, and with grief there are many symptoms that one can expect to experience. Especially in the early phases of grief, the symptoms can be irrational and extreme – that is normal. One of the most common is encountered when a loved one passes away: the grieving individual can keep expecting them to show up in their usual places and can sometimes catch glimpses of the loved one who has died.

Tremendous loss also brings intense sadness which can leave the individual with feelings of despair, emptiness and profound loneliness. Crying and emotional instability is normal. Sometimes feelings of guilt surrounding actions or inactions, or things that were said or unsaid, come about after the loss has occurred. Feeling guilty about a sense of relief because a person is now dead are also normal occurrences.

Although the loss may have been nobody’s fault, re-

sentment and anger can often follow a tragic loss. This anger and resentment may be self-directed or directed toward innocent parties such as doctors, God, or even the person who has died. Sometimes feelings of abandonment can come forth as well. It is normal to feel fear and anxiety during grieving as a significant loss can act as a trigger for stresses associated with past experiences or worry about possible future events.

The grief and loss process is not just an emotional transaction, there can also be physical symptoms

brought on by significant loss. It is common for an individual to be fatigued and to catch illnesses easier since immune system efficiency is compromised. Often eating habits will change and weight loss or weight gain will occur. Sleep cycles are often impacted as well.

There are many myths about the grieving process that have been perpetuated for years by individuals who did not understand the grieving process well. One such myth is exposed in stating that the grieving will go by quicker if the pain is ignored. In actuality, ignoring the pain of a loss will prolong the experience. Another myth is found in the idea of being strong to protect others around you. Showing your feelings can be the most liberating thing you can do for those around you, it may allow them to process the loss more easily and may create a sense of fellowship in enduring the grieving process together.

Sometimes individuals will not express their sadness in tears, which does not mean that they are not tremen-

dously sad. Everyone responds differently to the loss and will go through the grieving process at different rates. Some people think that the grieving process for a death takes one year, but this is also false. There is no set time for any person to go through the grieving process: it takes as long as it takes.

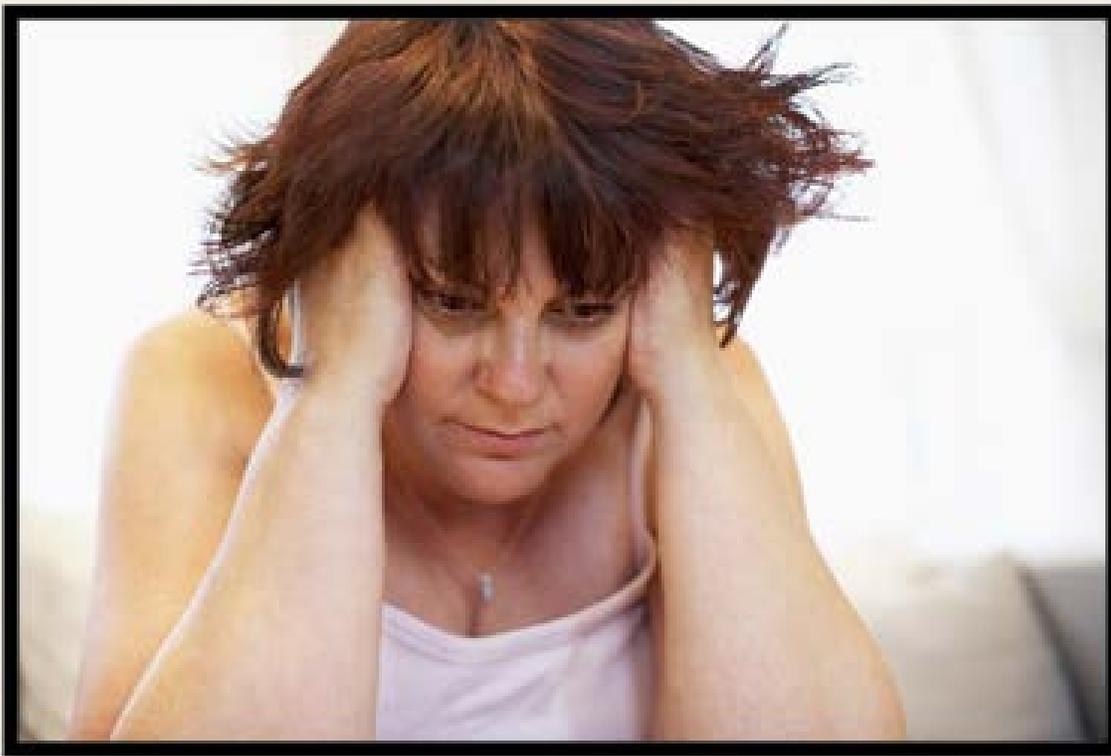
Coping with grief is highly complicated but there are clearly certain steps one can take to help with the grieving process. First and foremost is connecting with others. When support comes from other people,

accept it: it will help you heal. Common places to find support include family and friends, religious groups, self-help groups and peer groups. However there are also more formal forms of

support which can be found in grief groups and clinicians that specialize in loss.

Looking at what one can do to help themselves through the grieving process there are many activities and behaviors that can help. People that acknowledge the pain of loss will move more quickly through the grieving process. Sometimes writing in a journal, or expressing emotions through art or music can be therapeutic. Letters to the individual or thing that was lost can be very freeing. Also, taking care of one's physical health is important at time of loss. Exercising and eating a healthy diet will help.

Sometimes other people will attempt to tell us how we should feel at a time of great loss. We must remember



that the loss is our own, and we must process the loss in our own way. Nobody can tell us how we are feeling or how we should process our emotions.

It is normal for grieving and feelings of loss to come and go. Holidays and anniversaries are particularly known to bring back the emotional impact of losses. Over time, the impact should lessen in intensity: however, some individuals may encounter a persistent form of grieving that does not get any better with an extended period of time. These individuals should seek the assistance of a clinician with grief and loss training.



Depression is a common symptom of grieving a significant loss. However, clinical depression is a different thing altogether and requires treatment by a psychiatrist. Determining the difference between the two can be difficult, but there are a few tips for recognizing clinical depression. An individual suffering from clinical depression will not encounter moments of laughter or happiness. Thoughts of suicide or a preoccupation with dying are also indicators of clinical depression. Additionally, an inability to function at work or at home may be a symptom of clinical depression.

Regardless of what causes the loss, it is important for us to recognize that loss is a very real response and that the grieving process must be experienced in order for healing to occur. Support, compassion and understanding are critical in helping individuals through the process and minimizing the necessary suffering experienced from significant loss.

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Andrew Martin began his entrepreneurial approach to business in 1982 at the age of fifteen. Throughout his career, Andrew has fulfilled his duties as a senior executive in viable business ventures in various industries including; health care, sound reinforcement and lighting, electrical safety equipment, commercial catering, specialty metal

shapes manufacturing, and the entertainment overhead suspension industry.

Andrew's current business efforts are encompassed by Serene Recovery Network, a group of branded organizations with a common vision of helping people in early recovery to help themselves to a long-term rewarding quality of life without addiction. The individual businesses include Serene Center, a 36 bed transitional sober living facility in Long Beach, CA which also conducts outpatient counseling services, drug testing and monitoring, and outpatient detoxification. Serene Connections, a publishing and professional educational conference production company catering to the field of addiction treatment. Serene Directory, an online directory of professionals and organizations affiliated with behavioral and mental health. Serene Foundation, a micro loan lender providing funding for the continuum of addiction care.

Andrew has authored many articles related to addiction treatment, health care agency productivity, industry specialties, as well as business approach and leadership and has been published in Serene Scene, Behavioral Health, Freedom Newspaper, Sound & Video Contractor, Western Wall and Ceiling Contractors Association Bulletin, Connections Magazine (Australia), dB Magazine, EQ, Lighting & Sound International (Canada), Sound & Communications, Live Sound International (UK), Recording-Engineering-Production. Additionally, many patents and trademarks have been awarded to Andrew Martin for various business related products, brand names, and service marks.

Andrew is also very active in the California Association of Alcoholism and Drug Abuse Counselors (CAADAC) Board of Directors and Sober Living Network. Andrew also keynotes for many organizations.