

A clinical approach to treating sudden and traumatic loss during the grief process©



October 13, 2017- Reno, Nevada

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Expectations?

- Expectations can be pre-meditated resentments....
- Do you think expectations are a part of capacity building for Suicide services?
- If so who has them and why?

Four ways to consider Suicide Behavior

INTENT=DIE
AND THEY DIE
SUICIDE

INTENT = DIE AND THEY LIVE
SUICIDE ATTEMPT

INTENT=LIVE AND
THEY DIE
ACCIDENTAL
SUICIDE

INTENT=LIVE AND THEY
LIVE
PARASUICIDE

What we know about Sudden and Traumatic Loss

Psychologically unprepared for what you are about to experience

- Psychological vulnerability
- Emotional connection
- Sensory exposure



TRAUMA

Impact of trauma can be reduced

- Shopping in the hardware department
- Drinking coffee with a friend
- Kissing my son's head

RESOLVE THE TRAUMA

- Explain the triggers to the trauma
- They include sight, smell, taste, touch, and sound
- Help the survivor to cope with Dreams, Flashbacks, Traumatic Images and Intrusive Thoughts
- Talk it, Draw it, Write it,
- EMDR, systematic desensitization etc.

d. Mark



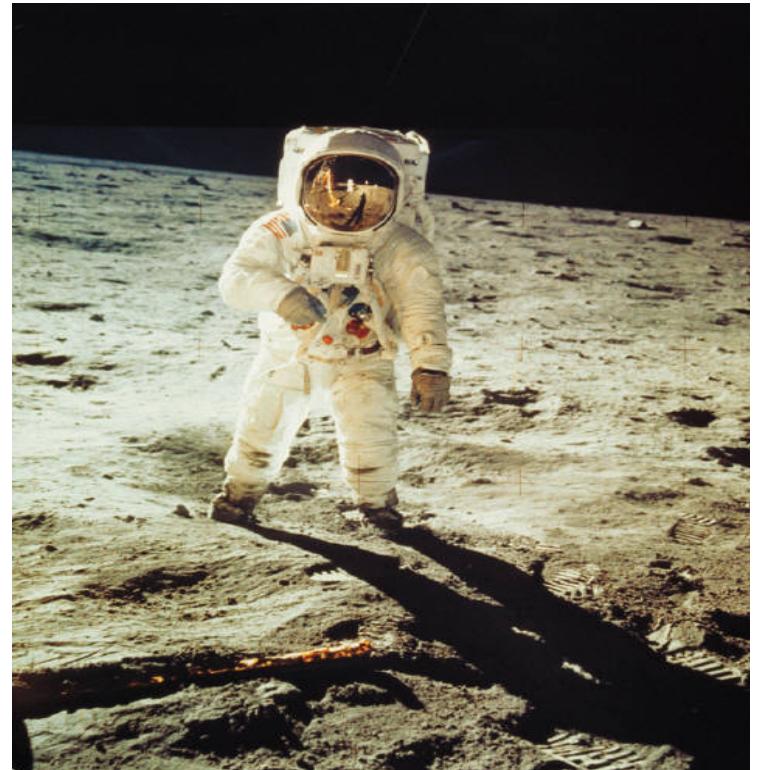
Remember that what you see in a person is just the tip of the iceberg – there's more going on underneath

Feeling what is below the surface is the first step to releasing what is frozen

If you are packing for a journey of an unknown length of time, what would you take with you? and why?



Would you agree these two trips are different in the level of challenge?



Who would you take along? And why?

- What will you need to know in order to know what to take?
- Who would you talk to for advice on what to take?

Barriers for the journey?

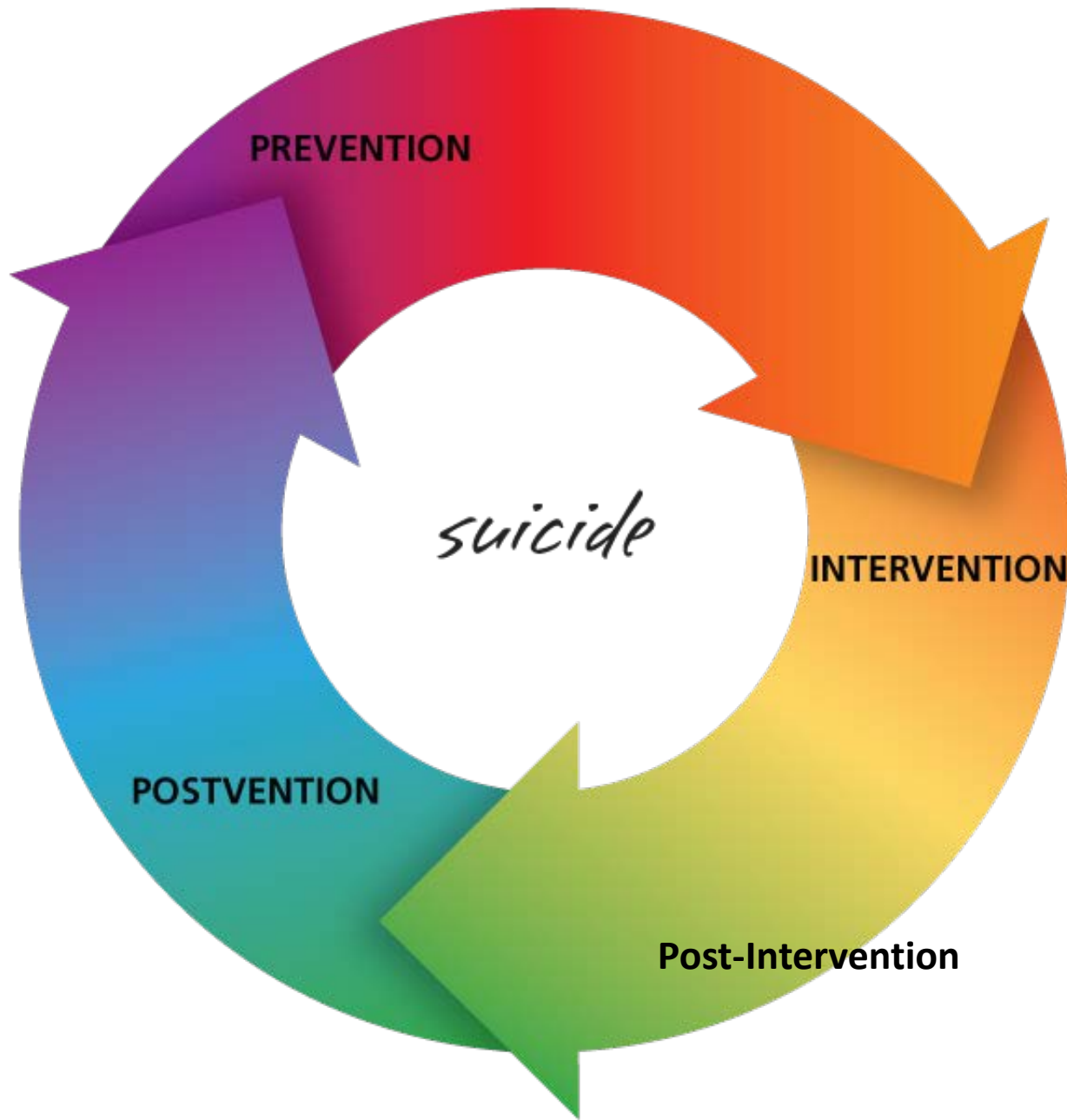


What is the goal of the grief process?

- For the individual?
- For a family?
- For a community?
- What is a community?

Then how would you pack for the grief journey following a suicide?





How to really hear a story
about loss?

❖ Content Vs. Affect

Basic or core feelings

- Angry
- Sad
- Scared
- Happy
- More cognitive:
- Guilt (goal here is to reframe to Regret)
- Relief

Theoretical Construct

Past

Present

Future

Emotional

All feelings

Sad/anger

Hopeless

Physical

Healthy

Somatic/ADLs

Bad Health

Cognitive

Variety

Intrusive

Confusion

Spiritual

Intact

Scared

Apart

Traumatic Loss Interview

(Please See handout for this section)

Traumatic Loss Interview
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Taken by: _____ Date _____ Time (begin & end) _____ am/pm

Referred by _____

General Information About Survivor

Survivor's Name _____ Race/Ethnicity _____

Address _____ Phone _____ (Home)

_____ (Work)

E Mail _____ County _____

Date of Birth _____ Age _____ Gender _____ Living Situation _____

Marital Status _____ Marriage History _____

Religion _____ active/passive. Religious counselor _____

Occupation _____ How long? _____

Currently working/student: yes / no Number of hours/week _____

Information About the Deceased

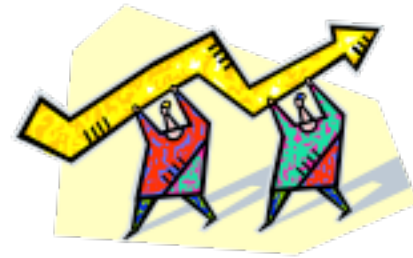


“First place the mask on yourself before attempting to help others!”



Barriers

- What do you think are the barriers for self care?



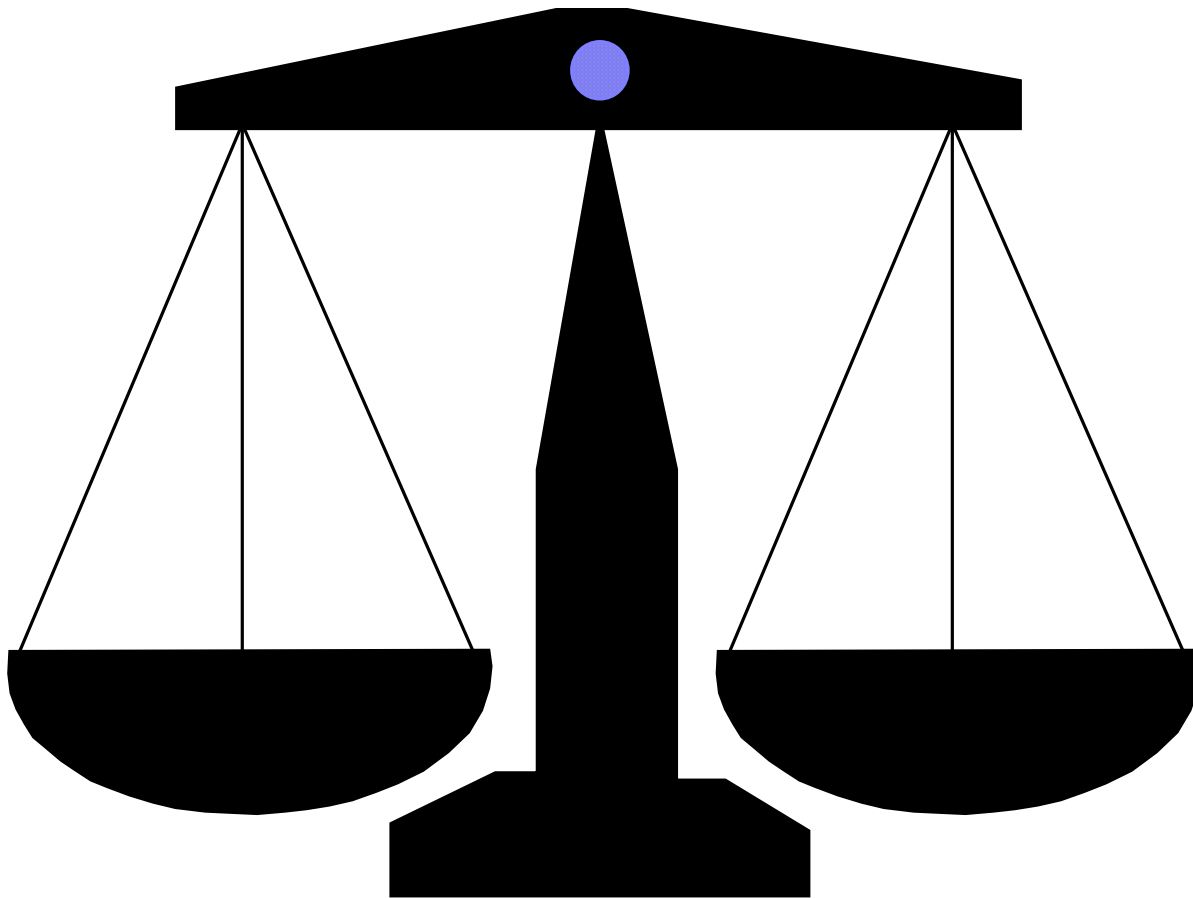
Internal and External Barriers

- Access to Survivors
- Permission to speak (imposed internally and externally)
- What to say to the survivors (also imposed internally and externally)
 - What guidelines do you follow? (are they real or assumed?)
 - Ethical challenges?

Where do these “rules” come from

- Institutional
- Governmental (apology laws)
- Malpractice insurance limitations
- Peers, war stories, worst case scenarios
- Internal fear of being with those who have such a loss
- Fear of being blamed, helpless, guilty

Caregiver Ambivalence (Potential ethical issues)



Take Care of You!

Level of coping is indicated by:

- a) Participation in a supportive community**
- b) Physical well-being**
- c) Control over daily activities**
- d) Productive and creative life**



Could this be the goal?

*We shall not cease from exploration
And the end of all our exploring
Will be to arrive where we started
And know the place for the first time*

from the Four Quartets, T.S. Eliot

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