

# To the Bereaved

BY ROBYNN MORAITES

I am so sorry for your loss. If there is such thing as hell on earth, it is surely this. And yet, in the depth of your pain, your searing anguish is a holy testament to love.

You loved with your whole heart. Your whole soul. And they knew it. And they loved you, too.

I, too, know the searing anguish. So, I found some comfort in the words espoused by Mirabai Starr. Mirabai lost her 14-year-old daughter, Jenny, which she writes about with profound vulnerability and wisdom.

*When someone you love very much dies, the sky falls. And so you walk around under a fallen sky.*

*There is no map for the landscape of loss, no established itinerary, no cosmic checklist, where each item ticked off gets you closer to success. You cannot succeed in mourning your loved ones. You cannot fail. Nor is grief a malady, like the flu. You will not get over it. You will only come to integrate your loss.... The death of a beloved is an amputation. You find a new center of gravity, but the limb does not grow back.*

The depth of your pain is directly proportional to the depth of your love. Your heart, ripped apart, is consecrated ground. If only that could turn back time or bring them back. I am so, so sorry.

*(Excerpted and adapted from a letter written to a deeply bereaved friend.)*

Grief is a natural human response to loss. Grief is also a natural human response to change, as all change in life brings loss in some form, whether big or small. Most of us have recognized this fact when making a big life change—for example, moving away to go to college and having to say goodbye to childhood friends. And for most of life's events, we navigate the grief process relatively well and mostly unscathed. But sometimes life brings devastating loss. And with devastating loss comes devastating grief. Grief of this sort can be debilitating. It can be suffocating. It can paralyze us for weeks or months or years with depression. It can make us lose the will to live.

Grief of this sort throws us into chaos. We each respond differently, and it is important to recognize that fact. A veterinarian friend reported what she has observed when she euthanizes a beloved dog, which happens almost weekly in her busy practice. There might be five people in the room who are all from the same family. The moment the dog passes, one family member begins to sob in anguish. Another family member punches the

wall. A third family member walks out of the room. Yet another family member begins obsessively talking, getting organized with the final details, while the fifth family member stares blankly ahead, almost frozen.

In fact, it is not uncommon for a person who has suffered a major loss to respond differently years later at the occurrence of another major loss. We may feel we are coming unglued. Or we may feel the opposite: completely numb, shut off inside, unable to cry for a year or more about the loss. We may have the sudden urge to relocate, to sell or redecorate the house, to buy a new car. Our behavior may be perplexing to us (and to others). Part of the reason it is perplexing is that we as a society have moved the grief process underground. Because we no longer share openly about it, none of us has any idea what to expect or how to process it. We have no idea that what we are experiencing is normal.

In modern American culture, grief goes largely unnoticed. When it is acknowledged, it is often misunderstood or minimized. The world does not stop to allow us to grieve.



Grief is already an isolating experience, but this huge cultural blind spot leads the bereaved to feel even more alienated, prompting them to stuff and deny their feelings or go further underground with their pain. We have to somehow continue with our lives and grieve at the same time. We all try to get back to work, to “be strong” (i.e. act unaffected), and to “act normal” as quickly as possible.

But for those who are deeply bereaved, they quickly discover, this is literally an impossible task. We are operating under the uninformed assumption that somehow we will be better in a few weeks, when the reality is that with most truly significant losses it can take years to move past the searing pain and anguish, the bone crushing exhaustion, the inability to breathe, the inability to eat. We have lost our cultural framework for how to compassionately move through grief ourselves and how to honor or be emotionally present for those who are grieving.

In her memoir, *The Year of Magical Thinking* (documenting the aftermath that followed the unexpected death of her husband), Joan Didion makes some poignant observations about grief. She quotes excerpts from Emily Post's 1922 *Book of Etiquette*, specifically the chapter on Funerals. Ms. Didion observes:

[The] tone, one of unfailing specificity, never flags. The emphasis remains on the practical.... There was something arresting about the matter-of-fact wisdom here [about how to assist the bereaved].

[Ms. Post] wrote in a world in which mourning was still recognized, allowed, not hidden from view. [An author] notes that beginning about 1930 there had been... a revolution in accepted attitudes toward death. "Death," he wrote, "so omnipresent in the past that it was familiar, would be effaced, would disappear. It would become shameful and forbidden." [Another author] had described this rejection of public mourning as a result of the increasing pressure of a new "ethical duty to enjoy oneself," a novel "imperative to do nothing which might diminish the enjoyment of others."... [T]he contemporary trend was to "treat mourning as morbid self-indulgence, and to give social admiration to the bereaved who hid their grief so fully that no one would guess anything had happened."

One way in which grief gets hidden is that death now occurs largely offstage. In the earlier tradition from which Mrs. Post wrote, the act of dying had not yet been professionalized. It did not typically involve hospitals. Women died in childbirth. Children died of fevers. Cancer was untreatable. At the time she undertook her book of etiquette, there would have been few American households untouched by the influenza pandemic of 1918. Death was up close, at home. The average adult was expected to deal competently, and also sensitively, with its aftermath.

We have lost touch with this skill. Usually, it is only those who have been through deep grief that really understand what someone is going through when they suffer a devastating loss. It is also usually only those who have been through deep grief who are able to sit with someone who is deeply bereaved without rushing to "fix them" or "fix it," because they know it cannot be fixed. They understand as perhaps few others can that there is no way out but through: healing can only begin when we allow ourselves to feel. But as Ms. Starr so profoundly observes in the quoted material above, we do not get over it. We only come to integrate our loss. The death of a beloved is an amputation. We eventually, painstakingly, haltingly find a new center of gravity, but the

limb does not grow back.

In our culture, it is more acceptable for women to deal with feelings (whether their own or someone else's) than for men. Thus, men have a harder time processing their grief as well as responding to another person's grief. Often men best process grief through "doing." For example, a man's father died very suddenly and unexpectedly. His father loved woodworking and spent all his spare time working in his wood shop. He always had some project going on. As a kid, the son had spent a lot of time with his dad working on projects, but once he became a teen, he lost interest. The beginning of true healing for him occurred when he went out to his dad's shop with some of his dad's buddies and together, they finished the "latest project." It was his therapeutic way of grieving. This example is meant to be illustrative only; there are as many ways to process grief as there are cherished relationships to honor.

When we are deeply bereaved, we may also suffer what is known as a collateral loss. A collateral loss happens when a person we expected to understand what we are going through does not understand, or when a person we depended upon for emotional support effectively abandons us at the time we most need them, usually because of their own discomfort and inability to stay present with their own or another's discomfort. Unfortunately, collateral losses are usually a spouse/partner or very close friend. Sometimes these collateral relationships are lost in the aftermath of the primary loss. It can compound our loss and our grief, and it removes a primary area of support.

If you have suffered a devastating loss, just know that you are not alone even though you feel as if you are. You are the only person who had that specific relationship with your beloved. Your relationship was unique to you, so your loss is unique to you. But there are people around who want to help. Another anomaly to the grief process is that we find helpful souls everywhere. People we barely know step in and step up in thoughtful, generous, and unimaginable ways.

Years ago, I came across a description of grief, and our powerlessness over it, in the most unusual place. In the 1997 novel *Memoirs of a Geisha*, the main character, many years after suffering a loss, reflects, "Grief is a most peculiar thing; we're so helpless in the face of it. It is like a window that will open of its own accord. The room grows cold, and we

can do nothing but shiver. But it opens a little less each time, and a little less; and one day we wonder what has become of it."

As lawyers and judges, we are adept at compartmentalizing. We have to be good at this skill in order to do our jobs well. Deep grief bashes through those compartmental walls, turning them to ash in its wake. It is not a sign that we are broken or doing anything wrong. It is the nature of grief.

I will use an example from my own life. My father died unexpectedly while I was in law school. It was three weeks from diagnosis to death. I got the call that he had collapsed and flew home the same day. I was with him every day for those three weeks. When he died I was bereft. I was getting a joint degree at UNC: law and regional planning. That semester I only had one class at the law school. I was taking evidence with Ken Broun. I kept thinking I could pull it together and get back to class. I went to see him one day to explain what had happened and that I just needed another week and then I would be able to come back to class. I remember very little about that whole time, but I remember he scoffed at me, not unkindly, and told me that I should probably drop the class. He spoke from lived experience. I dropped the class.

I then spent the entire semester at the planning school where my classmates carried me academically. Unsolicited, they wrote the sections of papers I was responsible for in group projects. Professors gave me generous deadline extensions on papers for which I was solely responsible. I could not think. I could not eat. On one occasion, I parked at the park and ride lot, got on the bus, and started crying so hard that I got off the bus at the first stop, walked across the street, and got back on the bus that returned to the parking lot I had just left. I drove home.

The "grief window" opened sometimes seemingly of its own accord, like on the bus that day, but sometimes it was because of a surprise association, where my brain played a game of instantaneous connect the dots. For example, a professor's PowerPoint design... was the same design I used in an old print brochure for a program I developed at my old job... that featured a keynote speaker who was a psycho-oncologist... who was a professional friend... who I reached out to from the hospice unit in what I did not know would be

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key to both attracting and retaining legal talent. The above-referenced ABA study showed that, “A substantial number of lawyers (34%) report that guidance about enhancing mental health and well-being would help them in the practice of law going forward. Over one-third of respondents (37%) think that wellness resources are ‘very important’ or ‘extremely important.’” If you would like more ideas for firms returning to the office post-pandemic, please read my article “The Mental Health Factor: Accounting for the Emotional Toll of the Pandemic” ([bit.ly/Winter2021Pathways9](https://bit.ly/Winter2021Pathways9)) and the above-mentioned ABA publication ([bit.ly/Winter2021Pathways2](https://bit.ly/Winter2021Pathways2)).

As we navigate the upcoming months, there are likely more pandemic-related changes and unknowns on the horizon. Finding ways to resource ourselves and strengthen our firm’s wellness culture so that we navigate life as resiliently and steadily as possible may help us cope with “Pandemic Flux Syndrome,” and help us to mindfully consider career options. Notwithstanding the stress of the pandemic, there is an opportunity available to us now as individuals and firms for reflection, growth, goal clarification, and improved strategies. Taking time to reflect and reorient is important, as the realizations that come from our reflections can lead to increased passion and meaning in all of our personal and professional lives. ■

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*If you’d like to learn more about stress reduction and improved cognitive functioning using mindfulness, check out: “Mindfulness for Lawyers: Building Resilience to Stress Using Mindfulness, Meditation, and Neuroscience” (online, on demand mental health CLE approved by the NC State Bar): [consciouslegal-minds.com/register](https://consciouslegal-minds.com/register).*

## To the Bereaved (cont.)

the final hour of my father’s life. He passed away about 15 minutes after I had concluded my call with her and returned to his bedside.

If you were a fly on the wall of that classroom, what you would have seen was a professor turn on a PowerPoint, followed by me running out the lecture hall, leaving purse and books behind, gulping back sobs. For me, it was an involuntary response, an unexpected association out of left field. Throughout the years, in speaking with dozens of people who have been deeply bereaved, I have learned these types of situations are common. But, as earlier referenced, none of us has any way of knowing because, as a society, we never talk about it.

Good grief counseling really does help, both in the depths of our despair in the early stages as well as later, when we begin to move into our new center of gravity, which can feel like a betrayal of our deceased loved one. Grief counseling also helps us understand our process and the natural reactions we might have at various stages, like the backlash feeling of guilt the first time we laugh or

enjoy something again. Because we do not have a cultural understanding and acceptance of this process, grief counseling is all the more important to help us navigate these uncharted waters. Local hospice organizations almost always have grief counseling services available for a very reasonable fee. LAP can assist you in finding a grief counselor in your area.

Most importantly, go easy on yourself. Whatever you are feeling is normal—even if it feels extreme or the opposite, or if you are numb and cannot seem to feel anything at all. Whatever you are experiencing, it is not a place for judgment or “shoulds.” Honoring our beloved means honoring ourselves and our experience through this process. ■

*The North Carolina Lawyer Assistance Program is a confidential program of assistance for all North Carolina lawyers, judges, and law students, which helps address problems of stress, depression, alcoholism, addiction, or other problems that may impair a lawyer’s ability to practice. For more information, go to [nclap.org](https://nclap.org) or call: Cathy Killian (Charlottelareas west) at 704-910-2310, or Nicole Ellington (Raleigh down east) at 919-719-9267.*

## Upcoming Appointments to Commissions and Boards

Anyone interested in being appointed to serve on any of the State Bar’s boards, commissions, or committees should email [lheidbrink@ncbar.gov](mailto:lheidbrink@ncbar.gov) to express that interest (being sure to attach a current resume), by January 7, 2021. The council will make the following appointments at its meeting in January:

**Lawyer Assistance Program Board (LAP)** (three-year terms)—There are three appointments to be made. Reid Acree Jr. (volunteer) and Gerald Collins, Jr. (councilor) are not eligible for reappointment. Michael E. McGuire (clinician) is eligible for reappointment. The rules governing the Lawyer Assistance Program Board require the council to appoint the board’s chair and vice-chair annually.

The mission of the Lawyer Assistance Program is to protect the public from impaired lawyers and judges; assist lawyers, judges, and law students with issues that may be impairing; support the recovery process of lawyers and judges; and educate the legal community about issues of substance abuse. The LAP Board, which oversees the operation of the program, is a nine-member board comprised of three State Bar councilors, three LAP volunteers, and three clinicians who are experienced in working within the substance abuse and/or mental health field. The LAP Board examines policy issues and establishes policy relative to the LAP mission. The board meets during the regularly scheduled quarterly State Bar Council meetings.