



Hospice Bereavement Services Following Death Due to Opioid Overdose

A Toolkit for Bereavement Professionals



NHPCO
National Hospice and Palliative
Care Organization

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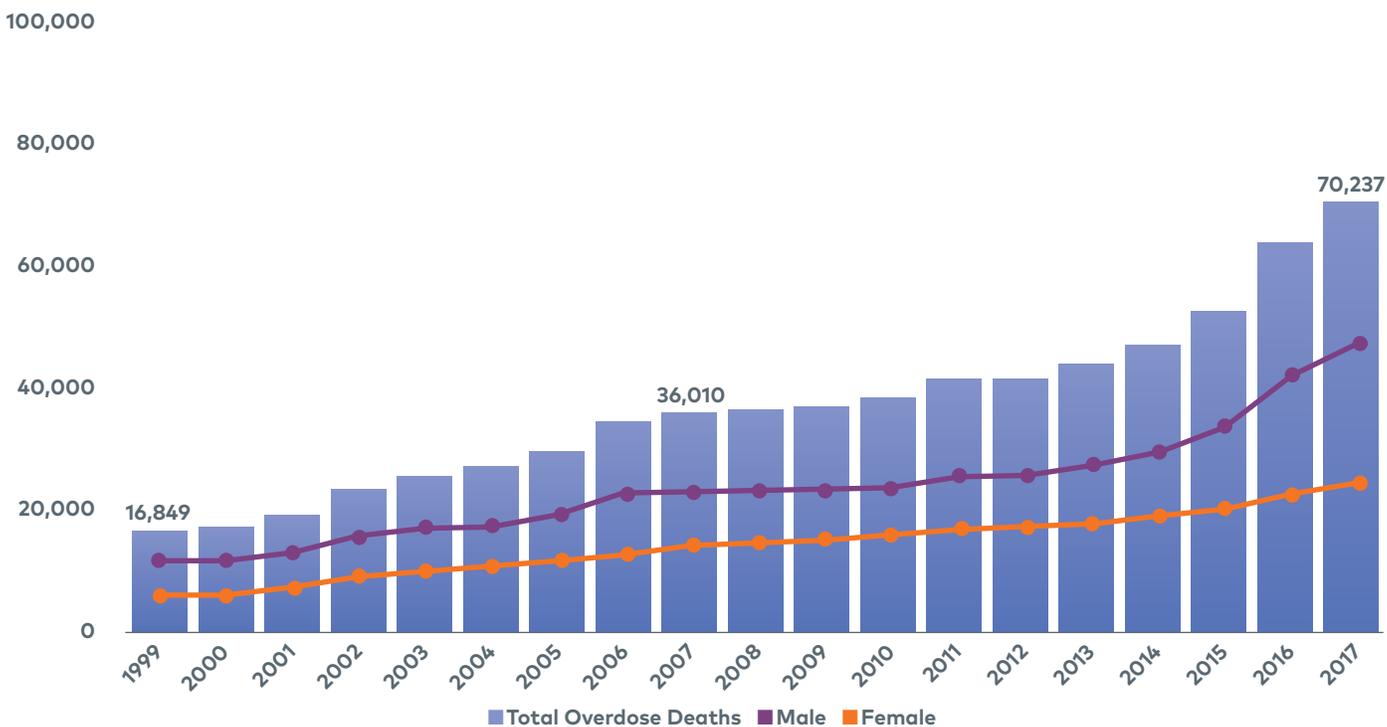
Introduction

More than 49,000 Americans died of opioid overdoses in 2017, a statistic that continues to rise. Our nation’s communities are working tirelessly to respond to the opioid epidemic, while each day more family members join the ranks of the bereaved. In addition to providing expert care and support to hospice families after death, hospice bereavement programs are expected to respond to community bereavement needs. Many programs have begun to include those grieving death by opioid overdose to their groups, commemorative events, bereavement camps and other programming as well as to offer specialized services. Collaborating with local service providers who understand addiction and addictive family systems, these hospices are responding to the needs of a growing population of bereaved family members of all ages.

Thank you for your interest in serving this specific population of your community’s bereaved. Understanding the unique aspects of bereavement for this population of grievors and providing outreach to them is an important extension of care into the community and one that meets a growing need.

This toolkit has been developed to provide information, tools and resources to help you be successful in developing or expanding services to your community’s bereaved following death due to opioid abuse.

Figure 1. National Drug Overdose Deaths Number Among All Ages, by Gender, 1999-2017



Source: Centers for Disease Control and Prevention, National Center for Health Statistics. Multiple Cause of Death 1999-2017 on CDC WONDER Online Database, released December, 2018

NHPCO’s Commitment to Bereavement Services for this Population

NHPCO’s interest in this population stems from the epidemic that is sweeping the US and that is resulting in a large population of bereaved individuals looking for and needing bereavement services. In 2018, NHPCO began offering educational programs designed to help the hospice and palliative care field understand addiction, its impact on families, the unique aspects of bereavement following opioid death and the role/responsibility of managers and leaders in attending to the opioid epidemic. We have been busy “setting the stage” if you will, for the work to come and the work within which you will be engaged in your communities. In 2019, NHPCO convened a group of bereavement experts to guide the development of

services to the bereaved following death due to opioid overdose. They helped develop information, training, resources and guidelines to help hospice programs.

NHPCO was awarded a grant from Legal & General America, a life insurance company, to focus efforts on this population of bereaved people. NHPCO is grateful to Legal & General America for its interest and its support to advance access to hospice bereavement services.

Legal & General America

<https://www.lgamerica.com/corporate/who-we-are>

[Legal & General America](#) is a London-based company with branches the United States. It is the 7th largest insurer in the world with a strong commitment to corporate and social responsibility.

In addition to providing funding to help hospice bereavement programs develop services to meet the needs of survivors following death due to opioid addiction, L & G America provided the funding for NHPCO's "[Find a Bereavement Provider](#)" tool.

Who Should Use this Toolkit?

This toolkit was developed with the guidance of hospice bereavement professionals for hospice bereavement professionals. Its goal is to provide information, tools and resources to help you be successful in developing or expanding services to your community's bereaved following death due to opioid abuse. With that goal in mind, the following audiences will benefit from its use:

- Counselors, social workers, spiritual care providers and others working within hospice bereavement programs
- Coordinators, managers and directors that oversee hospice bereavement programs
- Hospice staff who want to provide (or are providing) services to those who have experienced a death due to opioid overdose

Scope of Hospice Bereavement Services

Hospice bereavement programs and services are focused on providing education and support for family members following the death of a family member receiving hospice care and to non-hospice members of their communities. NHPCO's *Guidelines for Bereavement Care in Hospice* (2017) identify hospices as a "resource in providing bereavement education and services to their communities." The *Guidelines* clarify that

...the extent of the hospice's involvement in community bereavement service delivery will vary. Specific community needs, other community resources, and the bereavement resources available through the hospice program will determine the level of service delivery provided. Performing a community bereavement needs assessment will help identify specific gaps in service that the hospice bereavement program can fill. In addition, hospice bereavement programs should work collaboratively with other community providers and hospice programs to develop and provide community bereavement services, thereby increasing the resources available and avoiding duplication of services.

Hospice bereavement programs are also expected to ensure that appropriate referral(s) are made when a person's needs exceed the scope of the hospice's bereavement services. The *Guidelines* state:

Hospice bereavement programs are not expected to operate as mental health agencies in philosophy or function, but they are expected to encourage bereaved family and friends to have access to bereavement services. Hospice bereavement programs are preventative models of care. They facilitate healthy grieving and thereby aim to prevent the development of grief-related health and mental health problems.

Most hospice bereavement programs are not equipped to provide psychotherapeutic intervention and treatment for mental health disorders. Psychotherapy may be indicated when individuals have preexisting personality, emotional or developmental issues that preclude the ability to focus on the tasks of mourning that are usually addressed in grief counseling.

As you begin to develop or expand services and support to this unique population of your community's bereaved, it is important to keep these *Guidelines* in mind and to ensure that your program's scope and limitations are well defined and understood by all staff and community stakeholders.

Additionally, you'll find alignment with two key elements identified above as you make your way through this Toolkit. First, that it is imperative for you to complete an assessment of the needs in the community; this is addressed in the section below. Second, the importance of working collaboratively with other community providers, is addressed further below.

Community Assessment

Prior to initiating new services in the community, it is important to conduct a formal or informal community assessment. Your organization's policies regarding the initiation of new services may require a specific approach.

The primary purpose of the community assessment is to determine the strengths and resources available in the community to meet the needs of its bereaved following death due to opioid overdose. It helps you develop an informed understanding of the gaps and needs that exist within the community and their impact upon the community's members. Your assessment of your community's assets and needs can then be used to strategically plan and deliver relevant and timely services. In addition, it can prevent you from duplicating services that already exist and are adequately filling an identified need.

A secondary purpose and benefit to the community assessment is identifying organizations and service providers focused on the identification, treatment and support of as well as assistance to those with substance use disorders. These providers are important stakeholders in the community and, at the very least, need to be aware that you plan to offer bereavement services to this population. They may also become important collaborators who can help you navigate your emerging new role in service provision to this population.

Key pieces of data to consider including in your community assessment:

- Numbers of deaths due to opioid overdose in your community (or service area) and its percentage increase
- Number of substance use disorder treatment programs, their capacity and current status
<https://dpt2.samhsa.gov/treatment/>
- Number of support programs for families coping with a member's substance use disorder
- Number of bereaved support resources for families following the death of a member due to opioid overdose, their location and accessibility to your service area
 - Are all ages of family members served?
 - Are programs ongoing or time-limited?

Hospices already engaged in providing services to this population of bereaved find that their assessment of the community's needs was based less on a formal assessment and more on collecting information, data and responding to requests for services.

For some, data revealed increasing phone calls for services to these bereaved people and they quickly determined how to include them in existing services. Others received outreach from substance use disorder treatment programs looking for help for clients they served, which spurred them into action.

Other hospices hosted an educational forum to which the community was invited. Speakers included representatives from various community agencies focused on substance use disorders as well as bereaved family members. Small breakout groups provided additional information about the needs in the community. Following these events, new services were initiated for this population of bereaved.

Again, your assessment of your community's needs is an important first step in determining what supports already exist, what is needed and where you might work to fill a gap. Identifying and seeking opportunities to collaborate with existing community providers can also be achieved through this activity.

For more information on conducting a formal community assessment, see [Conducting a Community Assessment](#).

Community Collaboration

Community collaboration is a key strength for hospices, and one that can be further developed and explored as services are expanded to meet the needs of your community's bereaved following death due to opioid overdose. Many communities have expanded services to respond to our country's opioid epidemic and they can be important allies, referral sources, consultants and collaborators as you expand services to this unique population of the bereaved.

As mentioned above, local substance use disorder treatment programs are key to your efforts. Reach out and learn about them and what they perceive to be the needs of the family members they see; suggestions are provided below.

In addition, collaborating with local first responders, healthcare providers, hospitals and emergency departments, law enforcement, funeral homes and others can help build your collaboration network.

Compassionate Friends www.compassionatefriends.org

A self-help organization offering friendship, understanding, and hope to bereaved families that have experienced the death of a child

GRASP (Grief Recovery after a Substance Passing) www.grasphelp.org

Created to offer understanding, compassion, and support for those who have lost someone they love through addiction and overdose

International Cemetery, Cremation and Funeral Association www.icfa.com

Local Crisis Response Teams

Local Medical Examiners

Local Substance Use Disorder Professionals

National Funeral Directors Association: www.nfda.org

Opioid Treatment Recovery Programs (by state) <https://dpt2.samhsa.gov/treatment/>

State Drug Treatment Programs

The Association for Addiction Professionals <https://www.naadac.org/>

Training

NHPCO's Work Group on Bereavement Following Opioid-Overdose Deaths identified key training needs for hospice bereavement professionals who want to develop or expand services to this population of their community's bereaved. Hospice bereavement professionals generally have training and expertise about grief and bereavement and the ways that it impacts family members but understanding addiction and addictive family systems is not a key competency.

NHPCO designed an introductory three-part Webinar series that was offered in October 2019 to introduce hospice bereavement professionals to the nature of addiction and how it impacts families and the unique and significant aspects of bereavement for this population of grievers. In addition, one Webinar featured bereaved family members themselves, describing their experiences and providing an unprecedented learning opportunity.

NHPCO recommends that hospice bereavement professionals participate in this Webinar series (available free after the live event occurred to NHPCO members) to provide basic understandings of addiction, addictive cycles and the bereavement experience following opioid overdose deaths. In addition, this toolkit contains several resources that are available to provide additional training and ensure competency in serving these bereaved.

[Access the Webinar Series](#) or call NHPCO's Provider Solutions Center at 800-646-6460

Some hospices have engaged local addictions specialists and/or treatment programs to provide in-person training to their staff. This can be an effective outreach and collaboration opportunity for your bereavements services and is highly recommended. In addition, having key addiction specialist contacts in your community can be helpful should you need to consult with an expert about an issue presented by a bereaved family member.

Staff Competency

NHPCO's *Guidelines for Bereavement Care in Hospice* (2017) recommend that hospice bereavement professionals engaged in the direct and ongoing provision of bereavement services "have education, training, and professional experience in mental health and grief and loss, and basic understanding of human development and behavior. Mental health and bereavement expertise is important given the complexity of human nature and the potential for complicated grief and complex family dynamics."

This is certainly also true when considering providing services to family members following death due to opioid overdose deaths. Ensuring that staff understand addiction and its impact on families is a basic competency; increasing their knowledge, improving their practice in working with these families and measuring the impact of their services on an ongoing basis is recommended.

Securing the expertise of local addictions specialists and/or treatment programs to provide addiction-specific clinical supervision may be helpful; another reason that community collaboration is so important when developing or expanding services to these bereaved.

A number of templates designed to determine levels of competency and proficiency in any given skill area are widely available and may be helpful to employ when planning training for staff and determining their level of competency to serve these bereaved, or any new service, for that matter. The following template, from the National Institutes of Health, can be a useful tool to employ. The template identifies, by column, proficiency levels and describes them as well as identifies focus areas for continued learning to increase competency.

Proficiency Scale

Proficiency Level	Proficiency Description	Focus Areas
Fundamental Awareness (basic knowledge)	Common knowledge Understanding of basic techniques and concepts	Focus on learning
Novice (limited experience)	Level of experience gained in classroom, experimental scenarios or on-the-job training Help needed when performing this skill	Focus on developing through on-the-job experience Understand and discuss terminology, concepts, principles and issues related to this competency Utilize the full range of reference and resource materials in this competency
Intermediate (practical application)	Successfully complete tasks in this competency as requested Help from an expert may be required from time to time Can usually perform the skill independently	Focus is on applying and enhancing knowledge or skill Apply this competency to situations occasionally while needing minimal guidance to perform successfully Understand and can discuss the application and implications of changes to processes, policies, and procedures in this area
Advanced (applied theory)	Perform the actions associated with this skill without assistance Recognized within organization as “a person to ask” when difficult questions arise regarding this skill	Focus is on broad organizational/professional issues Consistently provide practical/relevant ideas and perspectives on process or practice improvements which may easily be implemented Capable of coaching others in the application of this competency by translating complex nuances relating to this competency into easy to understand terms Participate in senior level discussions regarding this competency Assist in the development of reference and resource materials in this competency
Expert (recognized authority)	Known as an expert in this area Provide guidance, troubleshoot and answer questions related to this area of expertise and the field where the skill is used	Focus is strategic Demonstrated consistent excellence in applying this competency across multiple projects and/or organizations Considered the “go to” person in this area within organization and beyond Create new applications for and/or lead the development of reference and resource materials for this competency Diagram or explain the relevant process elements and issues in relation to organizational issues and trends in sufficient detail during discussions and presentations, to foster a greater understanding among internal and external colleagues

(Adapted from NIH, 2019)

Promotion and Marketing

Hospice bereavement programs currently providing services to the bereaved following opioid overdose deaths utilize key methods for reaching them. As previously described, holding educational forums of general interest can garner attention and interest and help identify potential participants. In addition, hospices have focused on reaching key community stakeholders who are willing to refer people to these services and help promote them.

The following broad groups may be helpful to seek out in your community as you develop or expand services.

- City/county leadership councils or related groups (community leadership development programs)
- Community service organizations (Kiwanis, Rotary)
- County medical examiners
- Drug treatment agencies and related professionals
- EMS, police and first responders
- Funeral homes
- Local print and online newspapers
- Mental health professionals
- Outpatient treatment programs
- Recovery programs
- Universities (especially graduate programs in medical and mental health areas)

In addition to reaching out to various stakeholder groups, press releases, social media announcements and securing interviews with local TV and radio broadcasts have been helpful. Once an initial group of participants has been formed, "word of mouth" promotion seems to be very successful.

Conclusion

This toolkit was created to provide information, tools and resources to help you be successful in developing or expanding services to your community's bereaved following death due to opioid abuse. We hope you find its contents valuable as you work to serve this population and that you will embrace a process of "continuous learning" with respect to bereavement services for this population. These community members deserve our respect, compassion and commitment, and we must commit to serve them in an informed, competent, helpful and responsible manner.

Selected Training Resources for Bereavement Professionals* on Opioid Addiction and Bereavement Following Opioid Overdose Deaths

Addiction Cycle and Impact on Family

Da Silva, E A. Noto, A R and Formigoni, M I (2007) [Death by drug overdose: Impact on families](#). *Journal of Psychoactive Drugs*, 39(3), 301-306.

[National Resources for Families Affected by Addiction](#) (Judi's House/JAG Institute, 2019)

[The Many Ways Addiction Affects the Family](#) (Addiction Center, 2019)

[The Ripple Effect: The Impact of the Opioid Epidemic on Children and Families](#) (The Milbank Quarterly, 2019)

[Wasted: Exposing the Family Effect of Addiction](#) (TEDx, 2018; 15:17 minutes)

[Facing Addiction as a Family](#) (Hazelden/Betty Ford Foundation, 2019)

Bereavement following Death due to Overdose

Feigelman, W. (2012). *Devastating losses: How parents cope with the death of a child to suicide or drugs*. New York, NY: Springer.

Feigelman, W., Jordan, J. R., & Gorman, B. S. (2011). Parental grief after a child's drug death compared to other death causes: Investigating a greatly neglected bereavement population. *Omega: Journal of Death and Dying*, 63(4), 291-316. doi:10.2190/OM.63.4.

Guy, P. (2004) [Bereavement through drug use: Messages from research](#). *Practice*. 16(1) 43-54.

[Parental Overdose and Grieving Children](#) (Institute for Research, Education and Training in Addictions, 2019)

Templeton, L., Valentine, C., McKell, J., Ford, A., Velleman, R., Walter, T.,...Hollywood, J. (2017). Bereavement following a fatal overdose: The experiences of adults in England and Scotland. *Drugs: Education, Prevention and Policy*, 24(1), 58-66. doi:10.3109/09687637.2015.112732

Valentine, C., Bauld, L., & Walter, T. (2016). Bereavement following substance misuse: A disenfranchised grief. *Omega: Journal of Death and Dying*, 72(4), 283-301. doi:10.1177/0030222815625174

General Information on Opioid Addiction

[America Addicted](#) (PBS, 2017)

[Everything You Think You Know About Addiction is Wrong](#) (TED Global London, 2015; 14:35 minutes)

[Lessons Learned from the Center of America's Opioid Epidemic](#) (TED MED, 2017; 15:40 minutes)

[Let's Talk: Addiction and Recovery Podcasts](#) (Hazelden Betty Ford Foundation, 2019)

[NIH Director Francis Collins on America's Addiction Crisis](#) (*The Washington Post*, 2017; 5:10 minutes)

[Overdosed](#) (Petersburg Film, 2019; 77 minutes)

[The Opioid Epidemic Practical Toolkit: Helping Faith-Based and Community Leaders Bring Hope and Healing to Our Communities](#) (US Department of Health and Human Resources, 2018)

[This Should Scare You More Than Terrorism: The Opioid Epidemic](#) (RealLeaders, 2018)

[Webinars for Professionals](#) (Hazelden Betty Ford Foundation, 2019)

Personal Perspectives

[Don't Call My Brother a Junkie](#) (TEDx Talk, YouTube, 2017; 8:30 minutes)

[What It's Like Having a Drug Addicted Sibling](#) (YouTube, 2016; 3 minutes)

The Nature of Addiction and Impact on Brain Function

[Addiction: A Disease of Free Will](#) (National Institute of Drug Abuse, 2015; 21:10 minutes)

[Addiction as a Disease](#) (Center on Addiction, 2017)

[Addiction is a Chronic Disease](#) (TEDx Talk, YouTube, 2016; 13:40 minutes)

[Hooked: Why Bad Habits are Hard to Break](#) (CBS News, 2012; 2:02 minutes)

[Pleasure Unwoven](#) (YouTube, 2009; 8 videos, 30 minutes)

[That's Right. Addiction is a Disease](#) (Center on Addiction, 2013; 2:15 minutes)

[The Addiction Cycle: Phases of the Chronically Relapsing Disease](#) (American Addiction Centers, 2019)

[Drugs, Brains and Behavior: The Science of Addiction](#) (National Institute on Drug Abuse, 2018)

[The Struggle for Survival: Opioids, Addiction and the Brain](#) (Broken No More/GRASP, 2019; 59:48 minutes)

[Understanding Addiction](#) (Harvard Medical School, 2019)

[Why Do Our Brains Get Addicted?](#) (TED MED, 2014; 16:20 minutes)

Treatment of Addiction

[A Peak Inside Opioid Users' Brains as They Try to Quit](#) (The Associated Press, 2019)

[Primary Care Management of Opioid Use Disorders: Abstinence, Methadone, or Buprenorphine-Naloxone?](#) (Canadian Family Physician, 2017)

Relevant Websites

www.whatsyourgrief.com

www.overdoseday.com

www.survivorresources.com

www.broken-no-more.org

www.grasphelp.org

www.thebrendonproject.com

www.hazeldenbettyford.org

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Bereavement Following Opioid-Related Deaths Work Group

Patti Anewalt, PhD, LPC, FT

Hospice & Community Care

Kim Beck-Frate, LMHC

Halifax Health Hospice

Paula K Bunn, FT, LMFT

The Elizabeth Hospice

Susan Coale, LCSW-C

Hospice of the Chesapeake/Chesapeake Life Center

Diane Snyder Cowan, CHPCA, MA, MT-BC

Hospice of the Western Reserve, Inc

Nancy Dawson, LCSW

Halifax Health Hospice

Terri C Ray, MA, NBCC

Gaston Hospice, Inc

Barbara Bouton, MA, FT

National Hospice and Palliative Care Organization

Bereavement Services Following Opioid Overdose Deaths: Training for Hospice Providers Webinar Series

Webinar 1: Understanding Opioid Addiction and Its Impact

Matthew Polacheck, PsyD, MA
Hazelden Betty Ford Foundation

Webinar 2: Unique and Significant Aspects of Grief following Opioid Overdose Deaths and How Hospices Can Help

Patti Anewalt, PhD, LPC, FT
Hospice & Community Care

Diane Snyder Cowan, CHPCA, MA, MT-BC
Hospice of the Western Reserve, Inc

Webinar 3: Bereaved Family Members' Perspectives and Funding Opportunity for Hospice Bereavement Programs

James Baker, MD, MPH
Tamara Olt, MD
Lisa Carrigan Tomm, RN, BSN, CHPN, CHPCA

An MP4 recording of the Webinar series is available and can be [ordered here](#). The recording is free for NHPCO members.

Resources

NHPCO is grateful to member programs that provided the handouts and resources on the following pages to provide samples of the types of things they make available to the community. We hope this inspires you to create your own resources. Do not duplicate these without permission.

Pathways Center for Grief and Loss

After an Overdose Death: Suggestions for Talking with Children and Teens

Talking with children and teens about serious illness and death are uncomfortable topics for all adults to approach. Having frank conversations with them about death due to an overdose is even more challenging. It's natural to want to protect children, however withholding the truth is exactly what you should not do when it comes to a drug overdose death. Being able to talk openly and honestly with children about a difficult topic such as this one actually builds a foundation of trust. If you convey the desire to be truthful, they are far more likely to come to you with future questions and concerns. Children and teens look up to the adults around them and turn to them as models for how to behave and cope with difficult situations. They want, need and deserve to know what happened, and it's far better to hear it from an adult they are close to than through someone else or by social media. In most cases they usually don't need to know all the details you might know. But they need to be told the basic facts because if they are not, they will fill in the gaps with something worse. What they imagine will be worse than the truth. Talk about how the person died, why they died, and how this is impacting you.

Initiate the conversation. This may be difficult for you to do and, if so, perhaps start with a question. *"What have you been thinking about Uncle John's death?"* conveys you are interested in, and care about, how this is impacting them. Ask what they have heard. Talk about your surprise (if appropriate) and your sadness. Think about the developmental age of the child or teen when considering how to explain the death. Use short, simple sentences. You are helping them begin to understand and adjust to the reality of what has happened. Although they need to be told the truth about the cause of death, focus on how it is impacting them. This is one of those times you have the opportunity to help them realize that life can be difficult but they are not alone, you will always be with them to help them through it. Talk about the feelings of sadness, grief, perhaps anger or guilt. Listen for the questions behind their questions; let that be your guide for what to say and how to say it.

Part of addiction's control is the secretive nature of it. Addicts keep it hidden, families don't talk about it. By being open about the cause of death and talking about it with children you are helping to break down the secrecy. Emphasize to children and teens that you don't want them to keep secrets about addiction in themselves or others from you and you can use this opportunity for discussion.

Age Specific Suggestions

- **Three to five year olds**

Children this age cannot grasp the permanence of death so may ask the same questions repeatedly. They won't understand but they will react to the emotions around them. *"I have some sad news. Uncle John died last night. Died means his body doesn't work anymore. He can't breathe, he is not alive like he used to be. We are all feeling very sad."* If they were close to the person who died, expect regressive behaviors such as separation anxiety, sleeping problems, an increase in clinging or crying behaviors.

- **Six to eight year olds**

Six year olds may still view death as reversible, so watch for magical thinking. Your child might ask *"I know you said Uncle John died, but will he be here for Thanksgiving?"* Children this age express feelings through behavior. The concept of cause and effect is developing and there is some understanding of what death involves, so this may result in a fear of death. Reassurance and a sense of security are important. *"I am very sad and need to talk with you about something. Last night Uncle John died because he took too many pills. He's been having trouble taking too many pills and this time he took so many it caused his heart to stop working. It's so hard to believe he's gone and we are all very sad. I think you will have more questions over the next few days and I want you to come ask me whatever questions you have at any time. How are you feeling about this news?"*

- **Nine to twelve year olds**

Life is often seen in a black and white manner. There is a tendency to intellectualize and act as if it doesn't matter. A fear of abandonment keeps them on this cognitive level, so stress your ongoing support and availability to them. Children this age may exhibit either emotional avoidance or emotional outbursts that are followed by feelings of embarrassment. *"I am very sad and need to talk with you about something. Last night Uncle Johnny was found dead in his apartment of a drug overdose. He has been struggling with addiction to pain pills for a while – we thought he was doing better so that's making it all the*

harder to grasp that he's gone. I think you will have more questions over the next few days and I want you to come ask me whatever questions you have, at any time. How are you feeling about this news?"

- **Thirteen to eighteen year olds**

Teens are able to understand, so need to be told, almost as much as you know. Their peers are using drugs and probably know more than you think they know. Create an open environment for sharing and asking questions. Talk with them as you would another adult. They need to feel safe to express their thoughts and feelings and have their feelings validated. Talk openly with them about the power of addiction and how seductive it can be.

Similar to many adults, children and teens are left wondering "why" this happened and "what they might have said or done to prevent an overdose death. Understand it is normal if initial reactions of shock and disbelief last several weeks given the sudden nature of the death. If the person who died is not someone they saw on a daily basis, it may be harder to grasp the finality. Explain it is common to feel angry or guilty and that loving a person is not enough to prevent someone from an overdose. They may have been unaware the person had sought help or treatment for addiction. On the other hand, they may have been well aware because they had witnessed their struggle or erratic behavior.

Know that the conversation you have with your child or teen is not a one-time conversation. You are laying the groundwork for many future conversations about this death, their reactions and your thoughts. This will give you the opportunity to correct misperceptions or inaccurate information along the way. They will realize you may not have all the answers but you are always ready and willing to hear all their questions. What greater gift can you give than the realization that they are not alone and there are others always there for them to help them with these difficult times in life?



Prepared by Pathways Center for Grief & Loss, 4075 Old Harrisburg Pike, Mount Joy, PA 17552

Phone: (717) 391-2413 or (800) 924-7610 • info@pathwaysthroughgrief.org

www.pathwaysthroughgrief.org • Permission to copy required

Pathways Center for Grief and Loss

Losing a Loved One to Drug Overdose

If you have experienced the death of a loved one from accidental drug overdose, your reactions and emotions may be unlike anything you have ever experienced! You are not only left with the devastation of the loss, but there may also be feelings of veiled guilt, shame, discomfort or anger. Society treats this death in a much different manner than death from any other natural cause, often creating a stigma difficult for you to navigate and uncomfortable for others. It is important for you to know that the following responses are common in, what for you, may feel like an abnormal and uncharted situation. Even if you have experienced some of these, please know that the intensity and duration often change and lessen over time. We have also included some tips to better cope and move forward through the pain of your loss.

Common Reactions:

- Sadness over not having the chance to say "goodbye"
- Helpless that you could not protect your loved one
- Fear of judgement from others regarding you, your family or your deceased loved one
- Disappointment in yourself for not having a sixth sense or picking up on clues
- Struggling with unanswered questions and the need to understand how this happened
- Mood changes of sadness, anxiety, irritability or crying spells
- Impatience while waiting for toxicology or police reports if these were initiated
- Anger at your loved one, or others who may have played a part in their addiction
- Needing to place blame ~ either on yourself, someone else or your deceased loved one
- Difficulty concentrating, forgetfulness, fear you are "going crazy"
- Frustration over the lack of support and understanding from others about addiction
- The need to have your loved one remembered for the good in him/her and not the way he/she died
- Difficulty sleeping, having intense dreams, intrusive thoughts or flashbacks about the deceased or circumstances at time of death
- Feeling isolated from supports and possibly lacking places to talk about your grief
- Fear of this happening to others you care about

What May Help:

- Acknowledge the reality of the circumstances of this death. This helps to address complicated feelings and reactions to your loss which may open doors to healing for you and others who have experienced the same type of loss. Each voice expressed begins to change the stigma of death by overdose and decreases the vicious cycle of isolation.
- Don't define your loved one by his/her addiction. The way your loved one died does not take away from the fact that he/she was a person who was valued and loved. A person who deserves to be remembered and grieved. Begin to consider ways to continue this legacy of love by finding positive ways to remember your loved one.
- Find healthy ways of acknowledging and expressing your feelings.
- Understand addiction. Learning about this disease may help you to know that you are powerless over addiction. All the money and love in the world cannot beat addiction.
- Understanding the struggle your loved one had may decrease feelings of guilt rather than having them spiral into unhealthy and untruthful proportions.
- Help others understand and know what is NOT helpful in regards to their comments and actions. Educate them if they are willing to learn, and if not, you have the right to limit your interaction with them and focus on healthy and positive supports.
- Research what specific resources are available in the area of addiction loss. Some of the ones below may help you feel less alone and provide a safe place to express your feelings.
- Seek professional help from a therapist or your doctor for reactions that persist and may interfere with functioning.

Websites:

- www.thefix.com/mothers-lost-children-overdose - The Fix is the world's leading website about addiction and recovery. Their mission is to destigmatize all areas of addiction and mental health matters.
- www.grasphelp.org – GRASP is Grief Recovery After Substance Abuse, a national resource founded to provide sources of help, compassion and understanding for those whose loved one died from substance abuse or addiction. They also provide online and in person support groups throughout the country.
- www.overdoseday.com/tributes - International Overdose Awareness Day is an annual global event to raise awareness of overdose and reduce the stigma of drug related deaths. Acknowledging the grief felt by families and friends, Overdose Day spreads the message that the tragedy of overdose is preventable.
- www.survivorresources.org – Restoring Hope, Reclaiming Life is their focus. Survivors Resources is a non-profit organization that offers support groups, crisis response, grief counseling and other services for families of victims of death due to homicide, suicide, accidental overdose or violent deaths.
- www.whatsyourgrief.com/10-helpful-tips-talking-children-drug-related-death-loved-one
- www.pinterest.com/coveredCWL/overdose-awareness-dayribbons/ -- provides a variety of bracelets, pins, ribbons and stickers in memory of those lost to overdose.
- www.overdoseday.com/product/international-overdose-awareness-day-badge/ Provides a silver badge to show support of International Overdose Awareness Day
- www.broken-no-more.org Provides support and guidance to those who have lost a loved one due to substance abuse.

Books:

- *When A Child Dies From Drugs* by Pat and Russ Wittberger
- *Losing Jonathan* by Robert and Linda Waxler
- *Life After the Death of My Son: What I'm Learning* by Dennis L. Apple
- *One Way Ticket: Our Son's Addiction to Heroin* by Rita Lowenthal
- *Devastating Losses: How Parents Cope with the Death of Child to Suicide or Drugs* by William Feigelman, John Jordan, John McIntosh, Beverly Feigelman
- *Dark Wine Waters: My Husband of a Thousand Joys & Sorrows*, Frances Simone
- *The Grief Chronicles: A Survivors Manual for Death by Overdose* by Marie Minnich



Prepared by Pathways Center for Grief & Loss, 4075 Old Harrisburg Pike, Mount Joy, PA 17552
Phone: (717) 391-2413 or (800) 924-7610 • info@pathwaysthroughgrief.org
www.pathwaysthroughgrief.org • Permission to copy required

Substance use and overdose... When a loved one dies

Grief reactions are often intricate and complex. When you add that your loved one died from an overdose, accidental or not, it complicates matters. There are myriad emotions that occur when someone dies, but when the death is from an overdose, the most difficult ones rise to the surface.

If you have experienced the death of a loved one from an overdose or substance use, your reactions may be unlike anything you have ever experienced. Your feelings and reactions are common in what feels like an abnormal situation or uncharted waters. If you have experienced these or continue to experience these, please know that the intensity and duration change over time.

Emotions after an overdose or substance use death:

- **Sadness** over not having had a chance to say good-bye or things left unsaid
- **Anger** at your loved one, yourself or others who played a part in their addiction
- Sometimes the bereaved feel **guilty**. You may re-live over and over the "should haves, could haves" and "if onlys." You may blame yourself or others.
- Some feel judged or ashamed for loving someone with an addiction or for having an addiction themselves. Unfortunately, **shame** makes people hesitant to share. Consequently, they don't reach out but rather become **isolated and lonely**. It is a sad, downward spiral.
- **Relief** because you are no longer waiting for more terrible news or the next upsetting phone call.
- **Frustration** that the system could not help or with the response from police or EMS. There may also be frustration if you lacked access to medical information for a loved one over age 18.
- You may feel you need to place **blame** on yourself, someone else or your deceased loved one.
- The **stigma** society imposes for substance use loss is overwhelming. You may fear judgment from others regarding you, your family and your deceased loved one. Unfortunately, people deeply misunderstand addiction.
- **Fear and anxiety** are also prevalent grief reactions with a substance use death. There is the fear that other family members or friends currently using might also die. And, there is the fear of relapse for people in recovery.

What can help:

- Accept the reality of circumstances of the death including the role substances played. Talk about your complicated feelings and grief reactions. This may help others who have experienced the same type of loss and voicing your grief can help change the stigma associated with death from overdose.
- Find healthy ways to acknowledge and express your feelings. This could be through talking, writing, making art or music, hiking, etc. Do what works for you.
- Don't define your loved one by his or her addiction. The circumstances of the death do not take away from the fact that this was a person who was valued and loved – a person you valued and loved who deserves to be remembered and grieved. Find a way to honor his or her legacy.
- Educate yourself about addiction. Understanding addiction can help put to rest feelings of guilt and blame. One thing to learn is that we are powerless. It doesn't matter how much money we have or how hard we love, we cannot control someone else's addiction.
- Surround yourself with the right support system. Avoid those who disenfranchise your grief. Research what specific resources are available in the area of addiction loss. You might find comfort with a counselor or a support group with others who are also experiencing grief of an overdose death.

Websites:

<http://grasphelp.org/> GRASP is Grief Recovery After Substance Abuse Passing, a national resource founded to provide sources of help, compassion and understanding for those whose loved one died from substance abuse or addiction. They also provide online and in person support groups throughout the country.

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Grief includes all kinds of feelings. If you feel overwhelmed with emotion, trust the grief process and give yourself permission to be with all your feelings. Know that there are others out there who feel the same. And, there are counselors and support groups that will welcome and support you. You do not have to grieve alone.



thebereavementcenter@hospicewr.org
216.486.6312 or 800.707.8922



Hospice Bereavement Services Following Death Due to Opioid Overdose

A Toolkit for Bereavement Professionals



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Care Organization