

CAN ANYONE TELL ME?

ESSENTIAL
QUESTIONS
ABOUT GRIEF
AND LOSS

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1

Why Do I Have Brain Fog?

WHEN SOMEONE YOU LOVE dies, particularly if that death is sudden and unexpected, you might find yourself in a daze, thinking and behaving oddly. For many people, this adds to a sense of distress in loss. It may be helpful to know that brain fog, and a general sense of hazy thinking, is actually your amazing brain trying to protect you from more distress than your mind and body might be able to handle.

Scientists have long held that human survival is reliant on the ability of a part of the brain deemed primitive—the limbic system—to respond quickly. As technology has improved and general knowledge about the inner workings of the brain has increased, we have come to understand it to be less compartmentalized than previously thought and more a gloriously interactive system of stimulus and response. Modern neuroscience holds that the brain reacts protectively when confronted with difficult, shocking, or potentially dangerous information. This defensive activation takes place with such speed that we are not even conscious of it. When people learn of a loved one's death without something to directly fight or flee, they may find themselves quickly moving through the first two defenses and landing in a freeze state, unable to process verbal communication and deeply confused. Other strong emotions and physical responses such as anger, panic, lightheadedness, or fainting are also very common.

SO, WHAT IS GOING ON?

Blame (or thank) the amygdala. The amygdala is located in the limbic system at the base of the brain, near where the head and neck connect. It is actually two almond-shaped clusters of brain matter whose job it is to take in and code information as either neutral or a threat. For the amygdala, action means *enlarging*, increasing in size, and eventually *disrupting* the typical electrical currents from their standard routes to other parts of the brain (the tree falling across the path in part one's introduction). These missed signals contribute to the creation of brain fog. Under normal circumstances, messages would travel up the brain until they land in the *prefrontal cortex*, which sits behind the forehead and is the center of critical thinking and decision-making. When the system is in less threatening circumstances, the brain can offer a wider array of defense responses—humor, minimization, and sublimation are examples of intellectual responses that require the prefrontal cortex to function effectively. In situations of threat, the limbic system is activated and energy is redirected toward the impulses to seek social support, fight, or flight. If the activated instincts fail to solve the problem, the brain then drives a freeze state, where a person simply tries to survive whatever happens next. In freeze, many people report the slowing of time or feeling like they're moving underwater. Both the active and calming brain responses release a series of hormones that are also intended to help manage the stress response.

Amygdala activation can have a dramatic impact and long-lasting effects. A cloudy sensation known as *disassociation* is believed to be one of the brain's ways of preventing trauma from lodging in the memory. Disassociation is one of the body's tools for avoiding emotional overwhelm in the hopes of keeping you within the *window of tolerance*. Dr. Dan Siegel, codirector of the Mindful Awareness Research Center at the University of California, Los Angeles and author of *The Developing Mind*, coined the phrase "window of tolerance" to describe when a person is within the optimal level of stimulation of functioning—not too much, and not too little stress.¹ When the system reacts to a trauma, it is typically blown outside its optimal window.

Childhood trauma survivors have often been conditioned by chaotic and dangerous situations to be either hyperalert or disconnected. These individuals may have a narrow window of tolerance before dysregulation kicks in. They may be less able to stay in connection with support offered by others and will sometimes avoid people, become angry, or isolate themselves, particularly during times of stress.

In instances when grief is activated after a loss, the amount of time it takes for the amygdala and the brain as a whole to reset to neutral is unknown, and there is no limit to the number of times the system can become overwhelmed. A foggy sort of confusion and lack of focus can persist for months and even years, making it hard to do everyday things that require being inside the window of tolerance such as reading, learning new things, and following instructions.

JEFF'S STORY

My client Jeff was in his midfifties when his husband unexpectedly died of a heart attack. In our phone introduction, Jeff revealed that his head had regularly felt cloudy since his husband had died. Jeff was a lawyer at a large firm, and his managing partner had recently expressed the company's concern about Jeff's spaced-out inattentiveness in meetings. Jeff reported that he'd made concerted efforts to stay engaged but would find himself almost "coming to," as if he'd passed out or fallen asleep. Jeff agreed to see me but struggled to make it to my office for our initial meeting. My building was near where Jeff had worked for almost a decade before he had moved to his most recent firm. Though he could not report how it happened, Jeff somehow parked his car in the garage of the law firm where he no longer worked and could not orient himself to find my building despite having a map on his phone and printed directions from my website. Jeff called me repeatedly, becoming more and more distressed when he couldn't locate my office. He eventually found the building but had missed nearly the whole hour. Jeff was able to explain that though he'd always thought of himself as reasonably good at finding his way, he was no longer able to follow even the simplest directions. As soon as he moved from one

step to the next, he felt distressed that he'd made a mistake, and his head filled with what he described as a "heavy cloudy" feeling. When the same thing happened for our second session, I met Jeff at a coffee shop and guided him the half block back to my office, pointing out landmarks he might remember for our next meeting.

FOR THE GRIEVER

For many people, brain fog is annoying but resolves on its own. Over time, the brain shifts the coding around the loss from new to permanent. The brain works hard to take in the information and to create "new" ways forward without using old road maps. As the reality of the loss becomes more familiar, the brain's reactive defense of disassociation lessens.

You may find that light exercise helps to stabilize the body in the early days of loss. Walking outside for any amount of time can be good, not only for the movement of energy through the body but also because sunshine impacts neurotransmitters like *serotonin* (mood stabilizing) development. Take caution before jumping back into intense boot-camp or AMRAP (as many reps as possible) workouts, as the wear and tear on the body can register as additional stress and add to overwhelm. In clinical cases, I encourage clients to try cross-punching, jumping jacks, the butterfly hug (crossing your arms across your chest and tapping on alternate shoulders), or other activities that cross the midline of the body to stimulate and balance both the activation and calming systems of the brain.

FOR THE SUPPORT NETWORK

Support in early grief is utterly critical. Though you cannot erase what has happened, helping griever stay out of the freeze state can positively impact their mental health. As I have previously stated, fight, flight, and freeze are progressive, with freeze being where we believe trauma can shift from a hard event to something that takes on more meaning. If a person is left alone in a freeze state, they may begin to tell themselves a story about their loss that begins to limit their beliefs about the future. Sending in

support, so that a griever is not stuck alone in distorted thinking, can help the griever from becoming traumatized.

Brain fog usually peaks in the early days of grief. The griever's mind and body are overwhelmed, trying to integrate information amid a sense of loss. Ask your griever about sleep. For many griever, sleep is elusive for many reasons but remains important in helping the brain reset and the body restore. People report feeling challenged by the need to relax enough to fall asleep. Sometimes the fact that they are alone is part of the problem. Perhaps an offer to sleep on their couch so they are not alone might be welcome. Maybe they'd like to sleep somewhere else, like a hotel or your house.

Check in about emotional connection. The overwhelm of early loss can cause griever to withdraw, which can readily become isolation. Providing an environment that encourages a griever to be as they are is important to grieving. The best kind of support involves listening without judgment, asking questions, and trying not to fix. This might be invitations to your griever to be included in events with assurances that they will be welcome no matter what their current energy level is or offers to visit to keep a griever company or simply share space while they do something else, like watch TV or take a walk. If you cannot do this in person, you can offer to do it over the phone or by video.



SOMETHING TO TRY

Drink Water and Box Breathe

In the early days and weeks of loss, it can be both helpful and hard for a griever to focus on what their body needs to stay in the window of tolerance as much as possible. Simple interventions like drinking sixty-four ounces of water over the course of the day can be impactful. Water is critical in promoting healthy brain function, and we need more water when our brain is overstimulated. Because waking hours are unpredictable, I often tell my clients to set a timer and try to drink four to eight

ounces of water every hour. Another simple intervention that can be generally helpful is box breathing.

Box breathing is a strategic form of breathing that is based on an Ayurvedic practice known as pranayama that originated in India. Box breathing, reportedly a favorite of Navy SEALs, is simple and effective and can be used anywhere. It relaxes the nervous system and brings the mind back into focus.

Box breathing is a patterned breathing technique that can regulate your central nervous system. It is a great intervention in times of stress as well as a useful proactive practice because it requires no tools, can be done anywhere, and works quickly. If you are a more visual learner, you can readily find tutorials on the internet.

Box Breathing

Sit comfortably in a chair. As you settle in, make a quick note of any tension in your chest or your body. Give it a rating on a scale of 1–10, where 1 is no tension and 10 is the inability to breathe.

Draw the outline of the four even sides of a box with your index finger in the air. Size doesn't matter, though the longer the sides of your box, the deeper your breath.

Start at the top left corner. Inhale to the count of four while tracing the horizontal line of your imaginary box from left to right.

Hold the breath as you extend your finger vertically from the top right corner down to the bottom right corner as you count to four.

Exhale as you trace the bottom horizontal line from right to left.

Rest for a four count as you trace vertically from the bottom left corner back to the top left corner.

Recheck the tension in your body, and rate it again.

At the end of your breathwork, check in on your activation and make a note. Collecting and comparing data will help you hone your breathwork practice in terms of number of repetitions and may increase your ability to notice shifts in energy in your body.

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2

Why Can't I Remember Anything?

MEMORY IS ONE OF the brain's most important functions. Because the brain is largely a prediction tool, it compares present-day events to those from the past in the hopes of helping us to make sense of experiences. Something like drinking a cup of coffee is not usually particularly memorable because you have had coffee before. When I was in college, a friend took me to a Thai restaurant that had just opened, where I tasted lemongrass for the very first time. I clearly remember both the completely new taste sensation and the pleasure of it.

The newness of an experience and our current mood impact how we form memory. Our system as a whole works hard to protect us from being pushed out of the window of tolerance, which means mitigating any overwhelming feelings that may occur even by protecting against formulating a memory, if possible. If the brain understands a situation to be similar to one it has experienced before, it quickly tries to bring up coded memories from the past—both explicit (direct) and implicit (implied)—to assess the situation.

Explicit memory refers to the concrete details or facts of an event, while implicit memory is imprinted based more on how we feel. When the memory is terrible or the brain predicts something traumatic, it uses some of its capacity to try to prevent the memory from coding the pain of the experience so that it won't inevitably have to be revisited. It is

important to note that this section focuses on loose, informed memories as opposed to vivid, traumatic memories. When vivid, frightening, and painful memories have formed, it is critical *not* to tell and retell the details of the story, as they may be retraumatizing.

SO, WHAT IS GOING ON?

The part of the brain called the *hippocampus* is involved in formulating memory. The hormone *cortisol* increases in times of stress and impacts memory formation. In some cases, memories are loose, foggy, and not fully intact, while in others, the five-sense experience of the memory is so clear that you could direct it like a scene from a movie. The sudden, new, and traumatic way in which a griever often experiences loss may mean that any previous templates the brain created to protect against danger may not be activated in time to send in protective neurotransmitters.

During terrible events, the brain also tries to protect you by coding enough information to keep you alert, which will allow you to avoid similar situations in the future (if only that were possible) and not collect so many details that the event repeats in your mind's eye or your body in general. Grievers often report that they cannot remember details or sequences of events, which may be on account of the brain's attempt to prevent them from being overwhelmed by details in order to continue functioning. While hazy memories remain elusive for some grievers, it is more typical, as the brain slowly becomes acclimated to loss, for memory to generally return over time.

HEIDI'S STORY

After her husband of forty-four years died following a short illness, Heidi, aged seventy-three, became deeply fearful that she had also begun to develop acute-onset dementia. After several weeks of agitation and distress, Heidi reported to her children that she was unable to remember the sequence of events in the week leading up to her husband's death and for many days after. She could not recall the names of the doctors who had treated her husband or the names of her grandchildren.

Heidi felt tremendous fear of being moved from her home for safety issues, as had happened with her own mother, thus losing both her husband and the only house she'd ever lived in as an adult in a matter of weeks. Heidi's doctor had her memory tested and noted no particular concerns. Heidi's daughter noticed that her mother's memory loss seemed to be distinctly connected to her father's death and was worse regarding topics adjacent to the death. Heidi's doctor suggested that her increased stress might be impacting her memory and referred her to me.

Heidi spent her first session laughing and weeping with relief when she learned that it is normal for memory to falter in grief. She asked her daughter to help her make a timeline of events that she taped to her refrigerator to use as a reference anytime she began to feel the confusion of not being able to recall specific events. She also began a journaling practice. After eight months, she discovered that she had reclaimed most of the memories of the early days after her husband's death and that while they were painful, they did not push her outside the window of tolerance.

FOR THE GRIEVER

Remember that the most important aspect of grieving is finding practices that feel right to you. The best grief practice is connected to the wisdom of what your body is currently expressing a need for. If you are having trouble with memory loss, doing nothing about it is actually a reasonable choice, particularly if it is not upsetting you. Many people discover that memories return slowly over time just through living life. If you are eager to be more of a participant in the process of memory recovery, you could also begin journal writing. Writing with pen on paper to record what you do remember can help to reestablish the neuro pathways that have been damaged or disconnected in loss. This writing practice allows grievers to reflect on details in a way that takes into account the fact that memories can become overwhelming.

If writing is unappealing, some of the same work of coming to terms with your personal story of loss could be done in a spoken-word format. Even said aloud, establishing the details of the story allows for a