

EMOTIONAL AFTERSHOCKS

WHY TEARS SOMETIMES COME YEARS LATER

Those two shocking, life-changing telephone calls came two years ago. The first was on a hot July day. "Kathleen, you'd better get here quick!" It was the quavering voice of my parents' closest neighbor. My mother wasn't home, she said, and something was dreadfully wrong with my father.

By the time I arrived at my parents' house twenty minutes later, a police car, lights flashing, was in the driveway. Father and his old friend Gil sat—as they often did—in their chairs on the front porch. It was only when I ran up the porch steps that I saw that Gil's face was wet with tears—and my father's ashen with death.

"It was his heart; the doctor was sure of it," Gil said quietly.

Frightened and disoriented, I sat down on the steps near my father's chair. My mind raced. I longed to tell him goodbye, to tell him I loved him, to hold him in my arms and cry. But I didn't. I sat there stunned, unable to look at him, and numbly carried on conversations with the growing crowd of friends and relatives. My tears came only when mortuary attendants efficiently zipped my father's body into a plastic bag and took him away. Then the numbness returned.

The second phone call I received came exactly four months later. During that time I had finished writing one book and had started another. My mother and I had grown much closer as we shared our mourning and, I thought, our healing. She seemed to be embracing life with renewed gusto. She took college courses,

traveled, swam every day, joined a widows' therapy group and bought the first new car she'd ever owned. But her health was a worry, as her doctor had found she had a cardiac arrhythmia similar to the one that had killed my father. Mother had been annoyed with the doctor's diagnosis.

"There's so much I want to do and see and experience," she told me wistfully one day over lunch. "I wish I could live forever."

Two days later, my husband, Bob, and I were paged while having Sunday brunch at our favorite restaurant. The call was from my brother, a physician, telling us that Mother had just been found dead. She had died in her favorite chair, so quickly and peacefully that she hadn't dropped the newspaper she'd been reading. A cardiac arrhythmia was, my

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brother told Bob tearfully, the best possible way to die.

I felt the energy draining from my body when Bob gently told me the news. Shaking, feeling sick and dizzy, I began to cry as we hurried out of the restaurant, but I quickly stopped myself. If I cried now, I was sure I would never stop.

For the next few days, I managed to cope with stunned efficiency. People praised my ability to get on with my life. Ignoring the lump of pain deep inside, I kept on—looking after funeral details, looking after others and, over the days, weeks and months.

(Continued)

by Kathleen McCoy

hurrying to get my life back to normal.

I buried my overwhelming feelings of grief in my work—plunging into my difficult third book with unusual tenacity. There were moments, though, when my pain surfaced briefly—times when I caught myself waiting for my mother to call, times when I would start to clip a cartoon for my father.

And there were the isolated moments, maybe in the bathtub or waking in the middle of a troubled sleep, when I would suddenly regress to childhood, crying for my mother. But I always banished that desperate child within by telling myself: "You're thirty-five years old, for heaven's sake! You should be able to handle this like an adult!"

Life went on. I finished my book nearly on schedule. Bob and I realized a long-time dream when we relocated to a lovely small town, buying a house that we thought was perfect for us. It seemed that everything was going smoothly.

Then reality hit. Ten months after my mother's death, I was suddenly immobilized by depression. I ate too much, slept too little and cried a lot. I was unusually snappish, and suffered from nightmares in which my parents were dying, and there was no way I could save them.

Once again, I turned to my work as a panacea, taking on two magazine article assignments that should have been easy. But I couldn't write, and the article deadlines came and went. I was terrified—this had never happened before. I felt out of control and powerless to cope with anything. I began to wonder if I might be crazy, and I felt very much alone.

I didn't know until I sought professional counseling that my distress was the long-delayed grief for my parents, and the accumulated stress of so many life changes in the space of only a year. I was suffering from emotional aftershocks.

I was far from alone, for emotional aftershocks happen to many people. The triggering events may be negative: the death of a loved one, a divorce or romantic breakup, a natural disaster, becoming a crime victim or losing a job. Or these "triggers" may be positive yet stressful life changes, such as marriage, graduation, a job promotion, a major move, buying a first home or reaching an important goal. Whatever the event, accumulated stresses and unexpressed feelings can add up to emotional aftershocks weeks, months or even years later.

Such aftershocks vary in severity. One can come and go in minutes—when you hear a song, for example, that once meant a lot to you and someone no longer in your life. More disabling aftershocks can take the form of social withdrawal, prolonged depression, physical illness and inability to be close to others—all symptoms of delayed stress syndrome, recently recognized as an emotional illness by the American Psychiatric Association.

"Delayed stress, as the name implies, means that the trauma suffered was so overwhelming that the person was unable to respond at the time," says Jane Thomson, a social worker, veteran and counselor for Viet Nam Veterans' Operation Outreach in New

Haven, Connecticut. "And so one may see the pain and tears months or years later." Though they're often mentioned in the media in connection with Viet Nam veterans, delayed stress reactions can happen to anyone.

Even happy changes in our lives mean giving up old ways of being and this can cause stress and grief. And reaching a long-held goal can mean loss of that goal—and a confusing sense of sorrow.

"People find it hard to accept their ambivalent feelings at these times and so these feelings are often repressed," says Judy Tattelbaum, a Gestalt therapist in Carmel Valley, California, and the author of *The Courage To Grieve* (Harper & Row). "Also, major life events can trigger old feelings, especially old grief. A woman may be suddenly depressed on her wedding day, for example, because a parent or grandparent who died isn't there to share this happy event with her."

Why do aftershocks occur?

"We don't know how to deal with grief, ambivalence or anger, so we deny these feelings and bury them," says Tattelbaum. "Instead, we keep a stiff upper lip and go on. But the feelings don't go away."

Robert S. Brown, Ph.D., M.D., a psychiatrist and professor of psychiatry at the University of Virginia, has worked with a number of people suffering from delayed stress reactions. "These can be explained by saying that the factors that combined to form backup systems of coping finally break down," he says.

These backup systems vary. People run from their feelings with work, new romances, travel, partying—simply keeping too busy to feel or remember. But these distractions don't dispel painful feelings—they only mask them for a time. And when the distractions finally wind down, repressed grief may surface.

Not long after her mother died, Barbara Vaughn (names have been changed) found herself grieving not only for her mother, but also for a baby she had miscarried six years before. The thirty-eight-year-old editor had been single at the time, and her boyfriend quietly disappeared after she told him that she was pregnant. While dealing with her hurt and wondering what to do, Barbara suffered a miscarriage. Her feelings of pain were so overwhelming that she pushed them aside.

"I felt devastated, guilty, angry and betrayed," she says today. "The weekend I lost the baby, I cried nonstop. But then I said to myself, 'Enough!' and I tried quickly to put the whole nightmare behind me. But when Mom died, these feelings came rushing back. I had a new sense of my own mortality. I kept thinking, 'I lost my mom, and I'll never be a mother myself.' It all became very painful and immediate again."

Pushing aside grief and other stressful feelings may even result in physical illness.

"Grief, depression and stress have been shown to have an impact on the body's immune system," says Dr. Brown, whose studies have found that depressed patients (those with significant depression lasting longer than two weeks) have a significant

reduction in their white blood cell count and are thus more vulnerable to disease.

"The typical personality profile of some cancer victims includes an inability to express feelings," says Dr. Brown, who has studied the connection between cancer and stress. Dr. James Lynch, at the University of Maryland Medical School, has conducted similar research into heart disease. He has found a link between heart disease and loneliness, lack of support and failure to communicate feelings.

And in a recent study at Western Oregon State College, Eric J. Cooley, Ph.D., and James C. Keeseey, Ph.D., discovered that those most prone to illness following stressful life changes tend to deny psychological problems, refusing to deal with them.

Biological aftershocks can include gastrointestinal problems (such as nausea, diarrhea and ulcers), tension or migraine headaches, low back pain, serious illnesses or a series of minor yet annoying infections. "When a person is under stress, his or her weakest area seems to break down," says Dr. Brown.

Refusing to cope with significant losses or life changes is often an unconscious decision. "The mind tends to develop amnesia about things too painful to deal with," adds Dr. Brown. But continuing the denial can hamper recovery.

"I feel that there are, essentially, three stages of grief after a crisis—shock, suffering and recovery," explains Amy Howell, director of Good Shepherd Hospice in Los Angeles and a licensed marriage, family and child counselor.

At first, there is numbness, disbelief and alienation from others. A person tends to deny the situation. "This may be nature's way of protecting us against pain too severe to handle all at once," says Howell. "This can go on for one week or a few. But if you get stuck in this phase, you may be quite vulnerable to aftershocks later on."

The suffering phase is a time of disorganization, pain, tears and constant emotional ups and downs. "You may feel very anxious, irritable and angry during this time," adds Howell. "There may also be a lot of guilt and self-blame."

In the recovery stage, you begin to rebuild your life. "But these stages are flowing, and there's considerable overlap. It isn't a simple process, yet it's something you must experience completely before recovering from a crisis," Howell points out.

If your recovery process is delayed, another problem can set in: You may feel guilty because of your inability to cope.

"After my husband was killed in an accident, everyone was saying how they wanted to help me, but I felt so numb, I just wanted to crawl off and be alone," says Ann McCormack, the widowed thirty-three-year-old mother of two small children. "Now, six months later, I cry all the time. It's hard for my friends and family to handle. I know they're thinking, 'Why isn't she over this already?' I feel embarrassed and guilty because I feel I should be coping better than this."

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It is that tyranny of the "shoulds," the tradition of keeping a stiff upper lip in a crisis, that gets many of us into trouble to begin with. "We are too often taught that we must be silent in pain, control our tears and handle sorrows privately and alone," says Judy Tattelbaum. "These are painfully misguided ideas."

"Carrying on as if nothing had happened is, actually, a danger sign that we, as counselors, look for," adds Amy Howell.

The mental health experts also listed these additional warning signs of emotional aftershocks:

- Insomnia or excessive sleeping
- Nightmares
- Diet changes—either loss of appetite or compulsive overeating
- A feeling of numbness and unreality
- Overwhelming anger—either focused (e.g. on a doctor who failed to cure or save a loved one) or unfocused
- Frenetic activity
- A tendency to take on symptoms or characteristics of the person who died
- Alcohol or drug abuse
- Feeling alienated and unable to be close to others
- Avoidance of a painful subject
- Difficulty concentrating
- Stiff and wooden posture
- An increase in physical symptoms or illnesses

Being aware of these signs is a vital first step toward coping. The next is to examine events of your past to see what might be triggering these feelings. You must look not only at what has happened, but also at how you dealt with it. Did you try to ignore the pain? Have you talked, cried and worked through your feelings?

"Being able to communicate your feelings is so important," says Dr. Brown. "Few people can do this. Most of the time, we say what is expected, allowing the stresses to build."

Part of my own healing revolved around talking and sharing my feelings with others—friends, family members, even a favorite editor who had lost his father some time before. Sometimes, though, I felt guilty for leaning on others so much—even though it helped—and decided to seek professional counseling. Such additional help can be especially important when you fear being judged or misunderstood by others as a result of your experiences.

There are self-help groups for people who have lost a child or a sibling, experienced sexual abuse or the stress of divorce. In the Los Angeles area, there is even an informal self-help group for adults who have lost parents. Such groups may exist in other cities as well. Knowing that you are not alone, that others have had similar feelings and experiences, can help you to talk more freely—and heal more quickly. Sharing is such a necessary step toward recovery that therapist Judy Tattelbaum calls it "finishing."

"I wrote *The Courage To Grieve* to teach people about finishing," she says. "This means working through feelings by talking with others and/or a therapist—even by having a 'dialogue' aloud with the person who

died about what happened—to complete the change. We must finish the grieving process before we can go on with life."

Finishing does take courage. It means a willingness to fully experience and express painful feelings before releasing them. But facing such pain can mean new freedom. You may feel relieved, at peace, newly energized.

It's also important to recognize and accept that you are healing, but recovery *doesn't* mean forgetting or never grieving again. "You never forget a major loss entirely," says therapist Howell. "You may have moments of grief, moments of missing a person, for the rest of your life."

The crucial difference is that these feelings no longer *disrupt* your life or interfere with your capacity for growth, discovery and joy.

Many months have come and gone since my delayed stress crisis began. Life is different now. Although I still miss my parents and still grieve in many ways, I have learned to deal with these feelings without fear. Sometimes when I see a beautiful sunset or when something wonderful happens, I feel a twinge of sadness that my mother isn't here to share it. But now, I can simply say, "I miss her," without feeling that I'm being crazy or heartless to feel joy.

I've also learned to cry when I need to. Not long ago, while sifting through my parents' attic treasures, I found a little box I had never seen before. Inside was a stack of letters my father had written to me when I was a baby. They were playful and loving, telling me—"my dear little one"—how he loved me, what joy I had brought into his life, how he hoped I would grow up to be very strong and special. Sitting in the dusty attic, I held those letters and cried—tears of joy as well as grief.

I have found, through the pain of the past two years, the freedom to share all my feelings with those close to me. I have found new freedom to make time for fun and the important people in my life; I now enjoy each day, moment by moment. Working through a major life crisis has helped me learn to live with my tears—and to laugh during those lovely, lengthening times in between.

HOW TO GET YOURSELF READY FOR THE CRISES IN LIFE

Taking steps to *prevent* painful delayed stress reactions can be an important health measure, even if you have yet to experience a major life change or trauma. The following suggestions can help you improve your "psychological fitness":

● *Realize that stress and pain are a part of life.* "I never thought it would happen to me!" is a common reaction to a divorce, job loss or death of a loved one. Such events tend to take us by surprise and we find ourselves totally unprepared to deal with them. But coping head-on, day-to-day, with minor stresses can prepare you for the major crises of your life.

● *Develop a regular physical fitness regimen.* This means sufficient sleep, good nutrition and regular exercise. Robert Brown,

who is developing such a program for depressed patients, notes that "in our research at the University of Virginia involving some five thousand subjects over a ten-year period, physical fitness tends to prevent depression and anxiety and is usually associated with excellent health."

● *Develop communications skills.* "Try to improve your ability to say what you mean and mean what you say," says Dr. Brown. "This is so important in stress management." Amy Howell adds, "In a crisis, you may need to tell your story over and over. You may get the feeling that you're wearing out your friends, but you *need* to keep talking."

● *Develop strong support systems.* Draw up a list of relationships and activities you would like to pursue and then do it. "The more people and interests we have in our lives, the more expanded and useful our support system. The best way to build support is to be supportive. Most important in combating the effects of life stresses are caring relationships and a warm family life," says Dr. Brown. "Health depends on loyalty, honesty and kindness as the *rule*—not the exception—in relationships."

● *Develop new aspects of yourself.* This can mean balancing work with fun, expanding your interests and your personal qualities. "Try to be as mentally alert as possible," says Dr. Brown. "Too many people allow themselves to become passive and mentally dull—watching too much television, for example. Work at reading, thinking, doing exciting things mentally, and setting goals that are satisfying in a spiritual sense." Setting goals for the future is important because "this reaffirms life and helps to give structure to the road ahead," says Judy Tattelbaum.

● *Cultivate flexibility.* The capacity to face tragedy head-on and with courage and to savor happy memories, lovely moments and flashes of humor—even in the worst of times—is a crucial life skill. "The emotional pain you feel as you cope with loss and change is much like the physical pain of giving birth," says Randi Gunther, Ph.D., a Palos Verdes, California, psychotherapist. "The pain may be intense at times, but it isn't constant. Giving yourself permission to laugh in between will help you to grow as you work through this loss."

● *Learn to see crises as important growth opportunities.* A crisis may be painful, but it may also help you to grow in new ways. "If you really look at your life, you may find that the greatest milestones and periods of growth are the hard times," says Judy Tattelbaum. "What we do with our pain matters a great deal. You can use your own painful experiences to help others. You can grow in compassion and understanding. You can deepen and mature. You may create in new ways and appreciate life anew." ■

Kathleen McCoy is the author of five books including Coping with Teenage Depression: A Parent's Guide (NAL) and also writes for many national magazines.