

Gone too Soon



Navigating grief and loss
as a result of substance use

At First

Nothing makes sense.
You think you won't survive.
Somewhere deep down you know the reality,
but on the surface it is unbelievable, unbelievable.

You may sense a small relief as now the worst imaginable has happened.
There will be no more unrelenting, debilitating worry,
but then there's guilt at the sense of relief.

You sleep away the days or you can't sleep,
you question your god, your own intelligence, your memory,
you may lose your appetite or the will to even drink water,
you feel exhausted all the time
you feel out of control, ungrounded,
or you may wish for total control over your environment

All these things, and sometimes all at once.

Then

You want everything back to the way it was – house clean and orderly,
work, bills, laundry but you find you have a new job now: obituary,
funeral plans, condolence cards, visitors, the loved one's possessions,
official business with the hospital, the coroner, the police.
Grief may hide behind the door for a moment or an hour,
but it never walks away.

—*Leslie McBain*



About this handbook

This handbook was adapted by Alberta Health Services (AHS) from material written by the BC Centre on Substance Use in collaboration with the BC Bereavement Helpline and the Affected Persons Liaison with the BC Coroners Service. The original handbook was created with the guidance of Leslie McBain and Jennifer Woodside, who generously shared their stories and experiences and what they wish they had known in the immediate days after they lost children to drug-related harms, as well as what they wished they had known in the months and years after. The original content and spirit of the handbook remains, with the addition of Alberta resources, processes and information replacing BC-specific information.

BC Centre on Substance Use

The BC Centre on Substance Use (BCCSU) is a provincially networked organization with a mandate to develop, implement and evaluate evidence-based approaches to substance use and addiction.

For more information: www.bccsu.ca

Alberta Health Services

Alberta Health Services (AHS) is a province-wide, fully integrated health system that is responsible for promoting wellness and providing quality, patient-focused health care services to all people living in Alberta, as well as to some residents of Saskatchewan, British Columbia, and the Northwest Territories. For more information: www.albertahealthservices.ca

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Table of Contents

Introduction	1
Reactions to Trauma and Loss	2
Physical reactions	2
Emotional reactions	2
Responding to difficult emotions	2
How long will I feel like this?	5
Grieving together	5
Self-Care	6
Early days	6
Spirituality and meditation	6
Grounding skills	7
Self-Care	8
After 12-18 months	8
Practical Considerations	9
Police	9
Office of the Chief Medical Examiner	9
Death registration and documents	10
Social assistance for burial	10
Death announcements	10
Planning a funeral	12
Important notifications	12
Taking bereavement leave	13
Executing a will	13
Survivor's pension	14
Social Considerations	15
How to inform family members and other loved ones	15
Talking to children about death	15
Social Media	16
Get Support	16
Support groups	16
Counsellors	16
Ask for help	16
Supporting a friend or family member through loss	17
Stories of Loss and Healing	19
Leslie's story	20
Jennifer's story	22
Emily's story	23
Karen's story	24
Angela's story	25

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Introduction

If you're reading this, you have likely just lost someone you love to an overdose or other harms from opioid, alcohol, or other substance use. Nothing can undo the tragedy, devastation, and pain of this loss, but you are not alone. In the following pages, you will find some of the emotions and responses you may experience, tips to take care of yourself, and practical considerations in the wake of this tragedy. You will also find stories from people who have lost loved ones.

Some of the information in this booklet might not feel relevant or helpful to you. The booklet as a whole may feel over whelming right now. We encourage you to take what works and leave what doesn't. There might just be one section that is useful now.

Reactions to Trauma and Loss

Everyone reacts to trauma and loss differently and there is no right or wrong way to react. You will likely notice that you are having both physical and emotional reactions. These reactions may come and go and they may be different from minute-to-minute and day-to-day. You may be surprised by the strength of your reactions, but it might help to remember that we grieve intensely because we loved intensely.

Physical reactions

Physical reactions to grief, trauma, and loss may include:

- Aches and pain, especially in back or chest
- Changes in sleep patterns—inability to sleep or over-sleeping
- Fatigue
- Feeling paralyzed, unable to function
- Changes in eating patterns—lack of appetite, nausea, binge-eating
- Increased use of alcohol or other drugs

Emotional reactions

Emotional reactions to grief, trauma, and loss may include:

- Shock
- Disbelief
- Anxiety
- Irritability or restlessness
- Anger and/or rage
- Emotional numbing (feeling nothing)
- Urges to hurt yourself
- Depression
- Trouble concentrating or remembering
- Sadness
- Feeling overwhelmed
- Panic attacks
- Feeling disconnected from your body
- Shame
- Dreams that your loved one is still with you
- Guilt
- Suicidal thoughts
- Desire for revenge or punishment
- Worry about burdening other people
- Loneliness
- Needing to avoid places, people, or memories associated with the death
- Relief

Although these feelings can be very unpleasant and may even feel scary, these are all very normal ways that we respond to traumatic events, grief, and loss. Many of these reactions are ways that your mind and body try to make sense of what happened and try to take care of you.

Responding to difficult emotions

The feelings you have in the days and weeks after your loss may feel overwhelming. They may feel so intense that you think you can't survive them. You can. But you might need some help navigating these intense and painful emotions. Below are some strategies for experiencing difficult emotions in general, and some strategies for specific emotions as well.

Let your body feel what it needs to feel

Some people try to fight big, painful emotions. They might try to fight this by keeping really busy, by using alcohol or other drugs to numb their emotions, or by pushing the feelings down and ignoring it. Although these all make sense, fighting the big emotions can cause more pain than actually feeling the painful emotion in the first place.

Some people find themselves afraid of feeling whatever emotions are coming up, afraid that they will be over whelmed or that the pain will never stop. The truth is, there's no getting around feeling the feelings.

If you keep pushing it down you might find it leaks out in unexpected ways, being angry at your loved ones for no reason or yelling at the grocery checkout person. If you find yourself continually pushing your emotions down, one way to let yourself feel big emotions is to set a timer for five minutes, with a plan for after. Find a safe, quiet place where you can be alone, and let yourself feel whatever you need to feel for five minutes and then do something to distract or comfort yourself—make some tea or go for a walk.

“These coping mechanisms are ways that we try to sooth ourselves and reassert control over our lives.”

Although emotions like grief, sadness, and anger can be very large and painful, they tend to come in waves, lessening in intensity if you let yourself sit with it and experience what comes.

If the emotions you’re experiencing feel like too much, it’s okay to take a break. Using grounding skills might help calm you down (see page 7). Once you’ve calmed down a bit, you can do something comforting or distracting.

Set a regular “date” with yourself

Some people might find it helpful to set a regular date to check in with their feelings—maybe once a week. Find some time and space where you can be alone and let yourself feel whatever you need to feel. Especially for people who tend to make themselves busy and focus on “getting stuff done” in the face of grief, letting yourself have space to uncover the feelings below can be very helpful.

When you set a date with yourself, it’s important to also have a plan for after and to have a plan in case the emotions that come up are bigger and more painful than you expected. Having a friend you can call or even a crisis line number can be helpful.

Help is available 24 hours a day, 7 days a week:

Health Link: [811](tel:811)

Mental Health Helpline: [1-877-303-2642](tel:1-877-303-2642)

Addiction Helpline: [1-866-332-232](tel:1-866-332-232)

Indigenous Mental Health & Wellness Hope for Wellness Helpline: [1-855-242-3310](tel:1-855-242-3310)

Note: Service available in some Indigenous languages. For more information: www.canada.ca/en/indigenous-services-canada/services/first-nations-inuit-health/health-promotion/mental-health-wellness.html

Anger

Anger is a very common response to losing a loved one to an overdose. You might feel angry at the world, angry at the substance, or angry at the person who sold the substance to your loved one. You might also feel angry at the system that you feel let your loved one down. You might even feel angry at your loved one.

“Anger is a normal, healthy response to losing someone you love.”

It can feel scary and confusing to have such a strong emotion, especially if anger is a new emotion for you. Anger is a normal, healthy response to losing someone you love. Here are some ways people express their anger:

- Talk to a therapist, other mental health professional, or spiritual counsellor
- Talk to a trusted friend or family member
- Make art—paint, draw, or write about your anger
- Exercise—walk, run, lift weights, swim
- Punch a pillow
- Listen to loud, angry music
- Yell or scream

Panic attacks

A panic attack is the sudden onset of intense fear or discomfort. Panic attacks can be really scary—so scary that you might think you’re having a heart attack or other health emergency. Even though it might feel like you’re dying, it’s important to know that a panic attack won’t literally kill you.

Panic attacks can include:

- Rapid heartbeat or pounding heart
- Trembling or shaking
- Shortness of breath
- Feeling like you’re choking
- Chest pain
- Dizziness or light-headedness
- Nausea or diarrhea
- Sweating
- Feeling out of control

Even though it might feel like it will last forever, most panic attacks reach their maximum intensity within 10 minutes or less and then start to subside.

Using grounding skills (see examples on page 7) can help calm you down enough to prevent a panic attack or to help you come out of one once it’s started.

Suicidal thoughts

Thoughts of suicide are not uncommon when faced with a devastating loss. Sometimes the hurt can feel so big and overwhelming that you want any way to stop feeling it. Other times it can feel like the one thing you have control over.

Suicidal thoughts should be taken seriously. If you are worried that you might hurt yourself, call a crisis line or a trusted friend or family member.

Mental Health Helpline: [1-877-303-2642](tel:1-877-303-2642)

Indigenous Mental Health & Wellness Hope for Wellness Helpline: [1-855-242-3310](tel:1-855-242-3310)

For immediate help, call **911** or go to the nearest emergency department.

Negative coping mechanisms

You might find yourself engaging in coping mechanisms that concern you (for example, drinking more than usual, taking medications other than as prescribed, or binge eating). You should know that these are common responses when something awful happens.

These coping mechanisms are ways that we try to sooth ourselves and reassert control over our lives. They may not be the coping strategies we’d wish for, but they might be the best ones we have in the moment. If that is the case, you can try working through the self-care strategies on page 8. Getting help through a counsellor and/or support groups might also help you come up with new coping strategies that feel better.

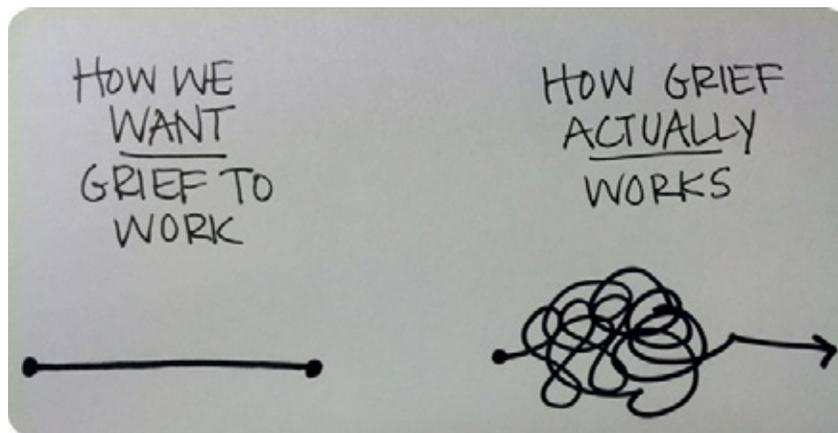
“Sometimes the hurt can feel so big and over-whelming that you want any way to stop feeling it.”

How long will I feel like this?

There is no timetable or schedule for grief. For some, the pain will soften over time. For others, they'll find they have longer periods of less pain in between bouts of great pain. No matter how your experience of pain shifts over time, you will never forget your loved one (nor would you want to). It's important to know and remember that grief recovery is not linear. You will move up and down the scale of intensity, experiencing disbelief, anger, acceptance, and other emotional and physical reactions.

This is a new normal. That doesn't mean that it is okay or that it doesn't hurt. But it is your new reality. Life will never be the same again. Gradually the intense pain will subside in frequency and you will have longer periods of less intense pain. You will survive what you thought would be unsurvivable. The path will be challenging at times, but you will find a way to deal with the pain and grief.

Give yourself time and space to do this. There is no map, there are no stages that you must attain. Grief is unique to each individual. Life will be different. It may seem impossible to believe this after such a heartbreaking loss but gradually you will find a way to honour your loved one and a way to be more at peace with yourself.



Source: Unknown

Grieving together

There are as many different ways of grieving as there are people—each person will grieve a little differently. Where one person may get very inward-focused and spend a lot of time alone and crying, another may find they want to be constantly surrounded by people, focusing on remembering the good times with the person they've lost. Sometimes this can cause confusion and even resentment if someone's way of grieving is significantly different from yours—you might even wonder if they're grieving "properly." The grieving process and grief rituals will also vary by cultural background and family traditions.

As much as possible, try to remember that each person will grieve in the way that is best for them, even if it looks very different from how you are grieving. Although you might find yourself feeling resentful of someone who is grieving very differently, try to remember that they are hurting too and stay in touch with them.

You may also find yourself feeling anger or resentment for things that another person did or did not do when your loved one was alive. Although this is a very natural response, most people already have regrets and guilt over things they did or did not do and will not be helped by hearing about the things you wish they'd done differently. Similarly, if someone is putting blame, anger, or resentment on you, remember that they are grieving and trying to make sense of their loss. You don't have to accept or agree with the blame or anger they place on you.

When grieving, one of the best things you can do is ask for help. Tell your family, friends, or other loved ones what you need them to do and be specific.

Self-Care

Self-care can be understood as practices, routines, and boundaries that we do to limit stress, meet our own needs, and nurture our physical and mental health. Your self-care needs will change day by day and month by month, and your ability to meet your needs may also change.

Early days

You may feel, besides huge grief, a sense of being in a dream, being disconnected from the rest of the world – nothing seems very concrete or grounded. You have had a major shock to your system. Self-care includes letting yourself sit and do nothing at all as long as you are able.

Be aware of the energy grief and shock take. You may be tired most of the time at first. Rest. Drink lots of fluids, eat light comforting nutritious meals, and sleep. Sleep is restorative and is a good coping mechanism. Sleep when you need/want to, not when you “should.”

Ask your family to treat you gently. Tell them that you will survive this, that life won’t be the same, but you will again find meaning and joy, even if it seems impossible now. If possible, have one or two people who can take care of you (answering the phone, receiving guests, preparing meals, household chores, child care).

Be prepared for the roller coaster of emotions. Don’t guilt yourself when you are feeling alright or even having a laugh. It is normal and good for you. You may feel a sense of relief that you no longer have to wait for the worst possible news. It has already come.

Find a counsellor as soon as possible. This will allow you a safe space to grieve and rage, while also learning healthy coping strategies. See page 16 for more information on how to find counselling, including financially accessible options.

Be aware of the energy it takes to have a lot of visitors. Be honest when you need visitors to depart—you are allowed to set the boundaries you need. You might say something like, “Thank you but I just need some time alone today.” People will understand.

Keep a journal, or just a pad of paper and a pen nearby. Write it all down. Keep in mind, no one else has to read your writings. It is for you alone.

Have a corner of your living space for photos, flowers, and important objects (a key ring, a piece of jewelry, anything your loved one had that is meaningful to you).

Prepare yourself for possible well-meaning but hurtful comments from friends and family. Many people don’t know how to talk about loss and death and may say exactly the wrong thing. Remembering their good intent may help take some of the sting out of what they’ve just said.

If possible, don’t return to work until you feel you are ready to meet the world again. If you must return, try to have a chat with your employer, supervisor, and/or colleagues about your present capacity. Your mind may not be fully present at your work.

Spirituality and meditation

If you have a spiritual or religious practice, try to take solace through that practice, whether that is at home, in nature, or at church, temple, mosque, or other place of worship. This loss is about heart and spirit.

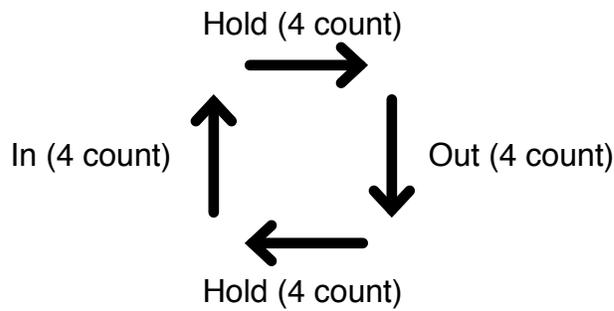
Grounding skills

Very strong emotions can feel overwhelming, like you're out of control and can't trust your body. Grounding skills help us to calm down and come back into our bodies. Different strategies will work for different people at different times. Having a list of possible activities can help prepare you and lessen the fear and anxiety associated with extreme emotions. Here are some grounding skills that might help:

- 5-4-3-2-1

This exercise helps you reconnect with your senses and come back into your body. First, look around and notice five things you see (this booklet, a lamp, a mug of tea, etc.), then notice five things you hear (sounds of traffic, people in the next room talking, etc.), and then notice five things you can feel (the chair beneath your legs, this booklet in your hand, the blanket on your lap, etc.). Then do the same exercise, counting down four of each, then three of each, two, and one.

- Go for a walk, do some gentle stretching, or go for a swim if you think it will help bring you back into your body.
- Pet an animal, matching your breath to theirs.
- Sit up straight, plant your feet flat on the floor, and breathe deeply and slowly.
- Try square breathing



In your head, draw a square as you breathe. In for four counts, hold for four counts, out for four counts, and then hold for four counts. The slow breathing will help slow your breath and heartrate, calming your body, while drawing the shape will help distract your brain. Repeat until you are feeling calmer.

- Hold a piece of ice in your hand.
- Sniff a strong smell like peppermint or other essential oils.
- Bite into a lemon or grapefruit—the sourness and strong sensation can help bring you back into the present moment.
- Ask a friend or loved one to talk to you; having a normal conversation can be soothing.
- Turn on loud music.
- Use your hand or ask a friend or loved one to squeeze your arm tightly over and over. This can help bring you back into your body.

Self-Care

Other examples of self-care include:

- Getting enough sleep
- Eating enough nutritious food
- Having enough down time
- Setting healthy boundaries
- Spending time with friends
- Getting outside into nature
- Doing an activity or hobby you enjoy
- Creating nourishing rituals and routines
- Moving in a way that feels good
- Eating your favourite food
- Spending time with pets
- Therapy or counselling
- Taking necessary medications
- Writing in a journal
- Exercising or other physical activity

Some people, especially people who spend a lot of time taking care of others, feel guilty about taking time that is just for them, but it is an integral part of healing and taking care of yourself.

After 12-18 months

Grief doesn't magically end after 6 months or a year. It does, however, at some point lose some of its intensity. After some time has passed and you have emerged from the initial shock and destabilization of loss (which may take months or years), you may find different challenges arising, as well as different needs and opportunities emerging.

"Grief doesn't magically end after six months or a year."

Some people who have lost a loved one to drug-related harms find themselves wanting to learn everything there is to know about addiction, alcohol and other drugs, and drug policies. Some people take that education and apply it to advocacy, working to increase access to treatment, to change laws, or to support others who have lost someone to drug-related harms. There are many organizations that support advocacy to prevent drug-related harms. These include:

Moms Stop the Harm (www.momsstoptheharm.com)

See Beyond. See The Lives. (www.see-beyond.ca)

Change the Face of Addiction (www.facebook.com/ChangetheFaceofAddiction)

Although the day-to-day grief you're experiencing may feel less sharp and overwhelming, there are certain days that will be very difficult. These days include the anniversary of your loved one's death, their birthday, and other meaningful days like holidays.

Planning for these days is important. A ritual of candles and family, a walk in nature, engaging with your faith practice, visiting a grave or other resting place can all help acknowledge the day in a meaningful way. Some people find these days very somber and difficult, while others want to celebrate the life of their loved one. This might look like going somewhere you know they loved, sharing your favourite memories, or going out for their favourite meal. There is no right way to spend these days, and it may take some time to figure out what feels best for you.

Some people find the holiday season especially difficult. There can be a lot of pressure to feel the "Christmas spirit" or "holiday cheer." It may feel like there is a lot of pressure to celebrate in the "right" way, especially if you don't want to celebrate at all. It is up to you how, how much, and even if you celebrate at all. You may choose to skip the holidays this year, to have a quiet celebration, or to build a new tradition that honours the person you've lost.

Above all, it's important to remember that there are no timelines for grief. Grieving is not a linear process, rather it's a messy process that can look wildly different from day to day and month to month.

Practical Considerations

There are several practical matters which must be attended to when a loved one dies, some specific to an overdose death. Some or all of these may need to be dealt with, depending on the circumstances and your relationship to the person who died. The following sections won't answer all of your questions, but will give you an overview of the tasks that may need to be done in the days and weeks after a loved one dies.

Police

Police investigations run parallel to the Office of the Chief Medical Examiner (OCME) investigations, meaning that the OCME death investigation is separate from any investigation that police may pursue.

You may or may not find yourself having much interaction with the police. Some people who have lost a loved one due to drug-related harms find themselves very frustrated with the police and the amount of information they are given. It can be hard to get information from the police, due to the slow speed at which many investigations move, officer workloads, shiftwork schedules, and, unfortunately, due to the police being inundated with similar deaths during the opioid overdose crisis.

If you are working with one, the victim services worker may be able to help you get information. Otherwise, you can call the non-emergency line of the municipality in which the death occurred, giving the police file number, and asking to be put through to the investigating officer. If you haven't been given a police file number, you should be able to get it by phoning the non-emergency line or asking the victim services worker, if you are working with one.

Some people who were at the scene of the death have experienced the police preventing them from seeing the body of their loved one until the Chief Medical Examiner comes. While this can be very painful, it may be helpful to know that the police were following protocol, which requires preserving the scene until the Chief Medical Examiner comes, in order to maintain the integrity of the investigation.

Office of the Chief Medical Examiner

When a death occurs suddenly or it cannot be explained, the Office of the Chief Medical Examiner (OCME) is authorized under the *Fatality Inquiries Act* to determine the cause of death. The OCME is responsible for determining the identity of the person who died, when, where, how, and by what means they died.

Under the Fatalities Inquiries Act, the OCME is allowed to enter and inspect spaces they think may be relevant to the death and to inspect, copy, and take records relating to the deceased person or the circumstances of their death. The OCME investigations may take many months to complete. The next of kin will receive a letter from the OCME. According to the Fatalities Inquiries Act, "next of kin" means the mother, father, children, brothers, sisters, spouse, and adult interdependent partner of a deceased person. The letter will give instructions on how to order death-related documents produced by the OCME and the cost for each one. There will be two forms:

- The "*Request to Access Information*" form will give you access to information/documents regarding your loved one's death.
- The "*Consent to Disclose Information*" form allows you to share information/documents regarding your loved one's death with someone else.

These forms are also available on the OCME website at:
www.alberta.ca/office-of-chief-medical-examiner.aspx

If you have questions about your loved one's death investigation, or need to know who to speak to, call the OCME at:

Calgary Office: [403-297-8123](tel:403-297-8123)

Edmonton Office: [780-427-4987](tel:780-427-4987)

Death registration and documents

All deaths that occur in Alberta must be registered with the Alberta government. A person who knew the deceased (e.g., spouse, parent) can register a death for one year from the date of death at no cost at a Registry Agent or Registry Connect. After one year, there is a delayed registration fee.

If you are residing in Alberta, visit the Alberta Registry Agents Directory at: www.aara.ca/agents

If you are residing outside of Alberta, call [780-415-2225](tel:780-415-2225) or visit Registry Connect at: www.registryconnect.ca

Alternately, a Registration of Death form can be completed by a funeral director when funeral arrangements are made. This is an acceptable proof of death in most cases.

Once the death of your loved one is registered, a Death Certificate can be ordered through any Provincial Registry Agent. There is a fee for the certificate. The Death Certificate is used to provide proof of death, for example, when cancelling an Alberta Personal Health Card, driver's license or to settle insurance. Once ordered, the certificate will be mailed to you. If you need additional or replacement copies, they can be ordered directly through the Service Alberta website at:

www.alberta.ca/order-death-certificate.aspx

Social assistance for burial

If the family can't afford death care costs, the Government of Alberta Funeral Benefit may be available. Financial assistance is based on income. Check with your funeral home to determine if they are approved by the Government of Alberta to provide this service (not all funeral homes are approved to have their services paid for by this benefit). For more information:

In Edmonton: [780-638-4443](tel:780-638-4443)

Toll-free: [1-855-638-4443](tel:1-855-638-4443)

Website: www.humanservices.alberta.ca/AWOnline/IS/4862.html

If the person who died is an Indigenous person who usually lives on reserve, Indigenous and Northern Affairs Canada can provide assistance to the legal representative with death care planning and managing the estate. More information: www.aadnc-aandc.gc.ca/eng/1100100032357/1100100032361

If the person who died is a current serving member of the Canadian Armed Forces, you may be able to get financial assistance for death care services. More information:

www.canada.ca/en/department-national-defence/services/benefits-military/health-support/casualty-support.html

If the person who died is a veteran, the Last Post Fund ensures that eligible veterans receive dignified death care services. More information:

Toll-free: [1-800-465-7113](tel:1-800-465-7113)

Website: www.lastpostfund.ca/EN/funeral.php

Death announcements

Death announcements inform people of the passing of your loved one and any plans for a funeral or other memorial service. Death announcements are often shared in local newspapers. They may also be used to inform family and friends of the passing of your loved one. Often, death announcements sent to friends and family are more informal and may include more information than what would be published in a newspaper. Many people find it helpful to include in the death announcement how their loved one died. Including that your loved one died due to drug-related harms can help prevent rumours from spreading and prevent a feeling of needing to keep secrets. Being open about how your loved one died can also help dismantle the stigma associated with addiction.

If you are working with a funeral provider, they can help you with the preparation and placing of an obituary. An example obituary follows:

It is with great sadness that we announce the sudden passing of our son, Joe Smith, on August 1, 2018 in Vancouver, B.C. Born on February 1st, 1991, Joe was just 27 years old when he died. Joe is survived by his mother, An Nguyen, his father John Smith, his partner Neha Singh, his brother, Tyler, his niece Janie and nephew Travis, many aunts, uncles, grandparents, and friends.

Joe struggled with substance use disorder for several years after being medicated for a sports injury. Joe died from an accidental drug overdose. He was very committed to the need for recovery, and entered treatment several times.

Joe was an avid hockey player, skateboarder, and snowboarder. He worked as a welder and was admired by his colleagues for his skills and work ethic. Joe was a favourite uncle to his nieces and nephews for his ability to be the silliest adult in the room. He loved animals, especially his dog Buddy who would race beside him at the skate park.

We will remember Joe for the loving and warm person he was. He will always live in our hearts and memories as a bright light. He will be forever missed.

A celebration of life will be held at Ocean View Memorial Chapel on May 18th, 2018.

In lieu of flowers, donations may be made in Joe's name to Sports Across Borders.

Tips for writing an obituary:

- Give birth and death dates.
- Name close relatives.
- Consider describing the passing as sudden and accidental (if appropriate)
- Describing the circumstances of your loved one's passing is an opportunity to dismantle the stigma associated with addiction and prevent rumours. Options include:
 - Struggled with substance use disorder
 - Experimented with drugs and inadvertently consumed a toxic drug
 - Inadvertently consumed a toxic drug
 - You may choose to name fentanyl, if it was a cause of your loved one's passing
- Include your loved one's story, including accessing treatment and/or wanting to attain recovery
 - You may wish to include barriers your loved one faced, including being unable to access the services they needed
- Describe your loved one and what will be missed, for example, that they were loving, skilled, compassionate, artistic, or any other characteristics and traits you would like them to be remembered as
- Have a family member or close friend check your writing for facts and grammar before submitting it to newspapers, community or church bulletin, Facebook, or any other places
- Make sure that relatives and close friends are informed of the passing before publishing the obituary

Planning a funeral

Death care planning is incredibly personal and involves making decisions about how and where to lay the deceased to rest, as well as practical considerations such as cost and types of services. Costs will vary considerably, depending on what choices you make. Decisions for funerals and death care should be informed by your needs, your religious beliefs and customs, and personal desires for how to remember and celebrate the life of the loved one you have lost. Depending on your customs and wishes, someone close to the deceased may want to deliver a eulogy. If this is the case, it may be helpful to have a friend help write it. For more information on planning a funeral:

The Alberta Funeral Services Association

Phone: [780-412-1310](tel:780-412-1310)

Website: www.afsa.ca

A eulogy is a speech or written tribute to a loved one, often given at funerals and other types of memorials. Eulogies are often given by family members, friends, or clergy, depending on religious customs and the wishes of the deceased person (if known) or family. In many cases it will be quite obvious who should give a eulogy (a close sibling or best friend, for example), in other cases, there may be multiple people who would like to speak. Depending on religious customs, multiple speakers is fine. For those who were very close to the deceased (for example, a romantic partner), giving a eulogy may be too difficult and another person may be a better candidate.

When writing a eulogy, try to keep it brief (between 2 and 5 minutes). Make it personal, sharing stories and things you loved about the person who passed. Keep your eulogy positive, while also sharing and recognizing your loved one's humanity—you don't have to share an idealized version of your loved one.

Important notifications

There are several services, organizations, and people who will need to be notified of the passing of your loved one. Notifications should be made within the first 24-48 hours to the following:

- Employer and/or school
- Landlord (if they rented housing)

Most of these notifications don't need to be done immediately and can wait until you're able. You can also have someone else make these phone calls if you're not feeling up to it. These include:

- Bank (in order to close their accounts)
- Pension Plan
 - Phone: [1-800-277-9914](tel:1-800-277-9914)
 - Website: www.servicecanada.gc.ca
- Alberta Health Care Insurance Plan (AHCIP)
 - Phone: [310-0000](tel:310-0000), then enter 780-427-1432
- Health Care Providers (e.g., doctors, dentists, other healthcare providers)
- Alberta Driver's License or Alberta ID card
 - Website: www.alberta.ca/registry-services.aspx
- Vehicle registration and insurance
- Passport Canada
 - Phone: [1-800-567-6868](tel:1-800-567-6868)
- Canada Revenue Agency
 - Phone: [1-800-959-8281](tel:1-800-959-8281)
 - Website: www.cra-arc.gc.ca

- Social Insurance Number
 - Phone: [1-800-206-7218](tel:1-800-206-7218)
- Canada Savings Bonds
 - Phone: [1-800-575-5151](tel:1-800-575-5151)
 - Website: www.csb.gc.ca
- Disability Benefit
 - Phone: [1-800-277-9914](tel:1-800-277-9914)
- Clubs, organizations, and churches
- Credit bureaus (Equifax and TransUnion)
- Utility Accounts (e.g., cable, phone, water, power, gas, Internet)
- Canada Post

Taking bereavement leave

Under the Canada Labour Code, everyone is entitled to bereavement leave when a member of their immediate family dies. Unionized employees may have access to additional benefits as outlined in their collective agreement.

For the purposes of bereavement leave, the following are included in “immediate family”:

- Spouse or common-law partner
- Father and mother (and their spouse or common-law partner)
- Children
- Children of the spouse or common-law partner
- Grandchildren
- Brothers and sisters
- Grandmother and grandfather
- Father and mother of the spouse or common-law partner (and their spouse or common-law partner)
- Any relative who lived with the person who died

If the person who died was a member of your immediate family, you are entitled to leave work on any normal working day within three days of the death and receive pay, as long as you have been continuously employed for three consecutive months. If you haven't been at that job for three straight months, you are entitled to leave work without pay. The maximum number of days of bereavement leave you are entitled to is three.

Executing a will

An executor is a person or company named in a will who is tasked with ensuring the directions in the will are completed. This includes gathering any assets, paying any debts, and dividing what remains among the beneficiaries (the people named in the will to inherit the estate).

Although you may have been named executor of the will, it is up to you to decide if you want to and are up to it. Acting as an executor can be stressful, hard, and take considerable time. Once you start dealing with estate assets you are bound by law to finish the job, so it is important to consider whether you are able and willing to take on this responsibility.

If you agree to be the executor, consider hiring a lawyer and an accountant. They can help you with paperwork, fulfilling your duties, and properly filing tax returns.

Other responsibilities for an executor include:

- Making funeral arrangements
- Confirming that it is the last will—you may be able to do this through the Vital Statistics Agency
- Probating the will—this is the process of having a court rule that a will is valid
- Cancelling all credit and debit cards and subscriptions
- Making sure that the estate is safe (for example, changing the locks on the apartment, putting valuables in a safe place, and getting a vacancy permit for home insurance if needed)
- Notifying all potential beneficiaries

Additional information on the responsibilities of an executor can be found at: www.alberta.ca/wills-in-alberta.aspx

If a person named as an executor is unable or unwilling and there is no one else willing and able to administer the will, the Public Guardian and Trustee of Alberta may provide this service. Additional information can be found at: www.alberta.ca/office-public-guardian-trustee.aspx

If your loved one didn't have a will, The Alberta Wills and Succession Act determines how their estate will be divided. More information can be found at: www.alberta.ca/office-public-guardian-trustee.aspx

Survivor's pension

The legal spouse or common-law partner of the person who died may be eligible for a survivor's pension through the Canada Pension Plan. Spouses or common-law partners are not eligible to receive a survivor's pension if they are under 35 years of age at the time of their partner's death, unless they have a disability or a dependent child with the deceased person.

Additional information and application forms can be found on the Government of Canada's website at: www.canada.ca/en/services/benefits/publicpensions/cpp/cpp-survivor-pension.html

There may be other payments that the estate and/or surviving family members may be eligible for. These include Employment Insurance payments, children's benefits, allowance for the survivor, and other possible benefits. More information: www.canada.ca/en/employment-social-development/services/benefits/family/death.html

Social Considerations

How to inform family members and other loved ones

Try to use simple, plain language. When hearing about the death of a loved one for the first time, people may not be able to take in or retain very much information. You may need to repeat yourself, and it may be helpful to confirm that they understand what you have told them.

"It is up to you how many conversations you want or are able to have."

Ideally you can find a private space, have plenty of time, and prevent any interruptions from happening. Rehearsing beforehand can help you figure out which words you want to use. If the person becomes very upset and you can't stay with them, ask if there is someone who can come be with them.

Lots of people, even those who know and love someone who uses alcohol or other drugs, have absorbed negative stereotypes and stigma about people who use alcohol or other drugs. This might include the idea that addiction is a choice or that the person who died is responsible for their death. People with these beliefs might not respond the way you expected, they might even say hurtful things about you or the person you lost. Try not to take these statements personally. Remind yourself that our society teaches us many untrue and harmful stereotypes and myths about people who use alcohol or other drugs, and that unlearning these things takes time.

It is up to you how many conversations you want or are able to have and who you want to have these conversations with. It may feel impossible to have these conversations over and over again, and it may be a relief to ask someone like a friend or sibling to inform others about your loved one's death.

Talking to children about death

Like everyone else, children feel and express their grief in different ways. This will depend on the child's personality, their age, how close they were to the person who died, and the support they receive in the days and weeks after.

When telling a child that someone they know has died, use simple and clear words. Depending on their age, they may not understand right away and need this to be explained many times. Some children will have many questions, while others may seem to not react at all.

Like adults, many children have learned negative stereotypes and myths about substance use and people who use alcohol or other drugs. Even if the child in front of you hasn't learned these negative stereotypes and myths, depending on their age, it's likely that some of their friends and classmates have. Talking to the child about stigma and myths can help remove the sting if they hear negative statements from other children (or adults) about their loved one.

The big emotions that come with loss are hard for everyone, but can be especially hard for kids, who may not have language for what they're feeling. Naming their emotions and sharing your own can help them find the words for what they're experiencing.

Talking about changes in routine and explaining funerals and rituals can help your child understand what is going on.

You can help your child remember their loved one by talking about them, sharing stories and memories, and making art about the person they've lost.

Social Media

It is likely that your loved one has one or more email and social media accounts (like Facebook, Twitter, or Instagram). If you have access to their social media accounts, you may wish to make a post about their death to inform those who may not learn of their death otherwise. It should be noted, however, that some social media platforms may have rules prohibiting non-account holders from accessing accounts. Each different platform has different rules and protocols for when a person dies. For example, Facebook will either delete their account or convert it into a memorial page. Your loved one may have already indicated which of those two choices they would like to Facebook, or you may have to make that decision by contacting Facebook through their help section. Most platforms will not provide passwords to allow you to access your loved one's account, but will delete the account if provided with a request and a death notification or obituary, and sometimes other additional documents. Some platforms may provide content from a deceased user's account in certain circumstances (i.e. Google). You can find information on managing or deleting accounts on each platform's 'help' page.

Get Support

For some people, their instinctive response to pain and loss is to isolate themselves. Others may find themselves feeling isolated due to the stigma associated with drug use and the responses they receive when they talk about having lost a loved one to substance use-related harms such as overdose. You don't have to grieve alone and may find it very helpful to talk to a professional or to others who have experienced similar losses.

"You don't have to grieve alone."

Support groups

Support groups for people who have lost a loved one due to harms from substance use exist both in-person and online.

Moms Stop the Harm offers Healing Hearts support groups in various locations across Alberta and Canada. For more information: www.momsstoptheharm.com/healing-hearts

Grief After a Substance Passing (GRASP) offer peer facilitated bereavement support groups specific to a loss due to Substance Use Disorder (SUD) or drug harms. For more information: www.grasphelp.org/community/meetings/canada-chapters/alberta/

The Compassionate Friends of Canada provides support groups for families who have experienced the death of a child. For more information: www.tcfcanada.net/chapters/alberta

Residents of rural communities are encouraged to contact their local Town office or Family and Community Support Services (FCSS) to enquire about counselling services and local resource referrals.

Counsellors

Find a counsellor who you feel comfortable with, ideally someone who specializes in both substance use and grief counselling. To find a counsellor in your area:

Phone

Health Link: [811](tel:811)

211 Alberta: [211](tel:211) (available in some regions of Alberta)

Websites

www.ab.211.ca

www.informalberta.ca

www.alberta.ca/Indigenous-organizations-and-service-directory.aspx

Ask for help

Friends or family can help with practical considerations. Consider asking for help with cooking, cleaning, childcare, and other tasks. If your friends don't know how to help, consider asking them to read the following section.

Supporting a friend or family member through loss

If you're reading this section, you may be searching for ways to support a loved one who has just lost someone they love to drug-related harms. You may have been asked to read this section by your loved one. That's okay. Many people feel unprepared to talk about death and grief and worry that they will say or do the wrong thing.

Some things are more helpful to hear in the days after the death of a loved one. These are straightforward statements that express your sympathy and help to make this new painful reality real. These might include statements like, "I'm so sorry to hear about [name] dying", or "I'm so sorry [name] is gone." When possible, try to match their language. For example, if your friend says that their loved one "passed away" then use that language. If they say that their loved one has died, use that language.

Just as there are helpful things you can say, there are also things that are not helpful. These generally include things that are meant to give meaning to their loved one's death. Examples include, "It's meant to be", "It was God's will", "[name] is in a better place/with Jesus/with the angels", or "They lead a full life." Although these are meant to give comfort, many people report finding them unhelpful and even painful.

In the days, weeks, and months after a loss, there are several very practical things you can do to support your loved one. This may include cooking for them, going grocery shopping, or ordering take-out, since cooking can feel impossible in the days after a huge loss. It may also include providing child care so they can attend to practical matters (like funeral arrangements), attend counselling, or sleep. Other things you can do might include walking the dog, doing the laundry, or helping them pay bills and set up appointments. It's important, when you offer help, to be very specific with what you're offering. For example, offering to mow the lawn, bring over a casserole, or clean the house. Making a vague offer or asking them to let you know if they need anything, while well intentioned, is unlikely to result in them asking for what they need, as they may be too overwhelmed to be able to identify and ask for what they need.

Many people express comfort and shared grief through touch, like giving hugs or patting someone on the back. However, all this touch can be overwhelming and may be unwanted. It is best to ask first rather than assuming that they want a hug. It's also really important to consider time and place when you talk to people. For example, asking about a loved one's death at the grocery store is likely to bring up difficult emotions they weren't planning to experience while running errands.

Although the grief, shock, and pain will get less acute as time passes, it's important to remember that grief does not operate on a timetable and your loved one won't be "better" after 3 or 6 months. This loss will always be with them, but the first months and even years can feel incredibly destabilizing. While your own sense of loss may decrease as time goes by, those who were very close to the person who died (for example, their parents, children, siblings, and romantic partners), may experience shock and intense grief for a long time. Continuing

"Grief does not operate on a timetable."

to offer support after the first days and weeks is one of the most important things you can do. As others go on with their lives, it can feel like people have forgotten about the person who died. By continuing to offer support and love, you help show that you know how monumental this loss is. Holidays and anniversaries can be especially painful after losing a loved one. Offering extra support around birthdays, winter holidays, and marriage or death anniversaries is important.

While you no doubt have your own ideas and beliefs about death, it's important to remember that each person has their own ideas and beliefs about death, and relationship to faith, religion, and spirituality. What you find comforting may not be comforting to your friend or loved one. It's best to follow their lead when talking about spirituality, religion, faith, and finding meaning in death.



Stories of Loss and Healing

Leslie's story

The night I learned that my son was dead was, and will be, the worst of my life. I am certain that nothing will ever compare to this pain.

Nothing we do in this moment, aside from hurting ourselves or others, is wrong. I screamed the word 'no' for hours until my voice was gone. I sat in silent shock while a police officer and the victim services person (close friends, as we live in a small community) sat in our small living room and spoke softly, about what, I have no idea.

Somehow I realized when I got myself to bed that this was the first night I would not awaken at 2 AM wondering where my son Jordan was. Exhausted and mentally sick, I fell asleep for 10 hours, and did not even turn over.

The morning brought shock and numbness. I was a zombie, shuffling to the bathroom, getting a coffee, going back to bed. I have no recollection of my husband being there, but he must have been on the same trajectory. The disbelief lasts for a very long time. I cried in gasps, I wept softly, I yelled at the sky. I continued to say the word 'no'. I slept 15 hours out of every 24 for a long time.

The few days, weeks, and months after losing a child are otherworldly. I welcomed visitors and the lovely food they brought but I had no other sense of emotion or connection. I felt like a person made of stone and alternately, cloud. I was not in control of anything around me. Family arrived from all over, friends were scattered through my days.

"What is death?", I asked myself over and over. My boy, my only child, had vanished from the planet.

I dealt with the police, the coroner, the funeral home. I ordered a wicker basket for a green burial. Somehow I was able to rise to the occasion of the burial and the memorial. I had written an obituary, submitted it to the local paper, explaining that his was a drug-related death. I did the eulogy and spoke of Jordan's struggles with the hungry ghost. Only the grief that surrounded me made Jordan's death real. I had to console people, I had to respond to awful questions and difficult comments ("It's God's plan" is one of the worst along with "Everything happens for a reason"). I had to keep my act together in public. I had a frightening new identity – I was the unthinkable – a mother who had lost a child.

We must not only deal with the brutal loss, we must redefine ourselves. Who am I if I am not Jordan's mother? Being a mother was my job. I often felt guilty in this job because I loved it so much. Others might have to work at jobs they hated, or not have enough work and scramble to keep the home together. They might have other children, demanding partners, so many difficult life situations. But me, I had one child, time, resources, a solid family, art, friends and motherhood. I spearheaded many initiatives for kids in our small community. I was involved at the school being the Parent Advisory Council chair for 5 years.

My son and I raised funds and built a mobile skate park. We spent weekends going from one skate park to another on Vancouver Island. I was a child advocate, I was a serious mother. We allowed Jordan a lot of freedom, maybe too much. And here begin the questions and the guilt. Where did we go wrong? What signs did we miss? Why didn't we do more, why, why, why? This sense of guilt goes on for a long time. Maybe forever. But it diminishes with time too. As parents, we do the very best we can at any given moment. Often we think that our best is not good enough. And when we lose a child to drug-related harms, we are sure of it. This thinking hurts us, and while I can say that it is something we must let go of, I can also say we almost never do. We learn to live with it.

Which brings me to this: We will not get over our grief, we will not go through our grief. Our grief becomes part of who we are. Living with the pain slowly becomes the new normal. If we are lucky we will find a counsellor or a support system that will keep us safe and moving forward. Over a period of time which is different for everyone, the pain softens and becomes a room in our heart. The door to this room must stay open. We must visit it and work with it regularly. If we shut the door, the pain may leak out in unexpected and unhealthy ways.

We all have opinions on the worst days, the best days, the best and worst years on this path. Unquestionably the anniversary of our loved one's death is the worst day of the year. It is good to plan the day – a ritual of candles and family, church, a walk in nature, placing flowers, something that acknowledges in a meaningful way the transition. You will find a way.

As I write this, it has been 3 ½ years since Jordan died. I do not go a week without tears. There is a place inside me that carries the weight of a headstone. But I am stronger for it. And occasionally now I find moments of joy.

Jennifer's story

I lost my youngest son, Dylan, almost 4 years ago at the age of 21. He had taken a street drug laced with fentanyl. Dylan was an occasional substance user but that is only a small part of who he was.

Dylan was completing a Studio Arts Program at Capilano University and was in his last semester. He was a gifted artist he loved photography and sculpting.

He had a long term girlfriend who he had met in high school. He was an avid athlete who loved snowboarding, biking, hiking, and canoeing. Dylan was your average boy next door who, unbeknownst to him, accidentally ingested fentanyl.

The reason I'm telling you about Dylan is to let you know that I have experienced firsthand what you are going through right now. I know the agony, despair, and anger that you are feeling. I want you to know that what you are feeling is completely normal. Grief is not linear and you will have mood swings, grief bursts, and anger towards the person(s) responsible for your loved one's death as well as anger towards your loved one for taking the drug. You might feel guilt that you weren't able to protect them, to save them, and that somehow you are responsible for their death. You might find yourself asking yourself, did you not love them enough, were you too lenient or too strict? The one that is the hardest to accept is that you might feel a sense of relief that the worst has happened: you no longer have to fear what might happen. That stress is no longer present, but now you have to accept the death and learn to live without them. It is said that we grieve deeply because we love deeply, I know that I wouldn't want it any other way.

When I received the news about Dylan it felt like I had received a blow to my stomach and all the air left my body. From that moment on I was numb and felt like I was living in a dream-world.

At first, due to the stigma of his death, I refused to tell anyone how he had died but after approximately 10 months I began to feel that I was being disrespectful to my son and his life.

I introduced a support group for people who had lost loved ones to substance use. I then proceeded to get involved with advocacy work. I travelled to the UN, met provincial and federal politicians including Prime Minister Justin Trudeau. I fought relentlessly for the rights of our substance users.

In the 4 years since Dylan's death I have been on an emotional rollercoaster—disbelief, anger, frustration, guilt. What I could have or shouldn't have done. The first year I felt like I was buffered in cotton batting. In the second year, reality set in with the realization that he wasn't ever coming back. I wouldn't see his goofy smile or hear him tell me "I love ya, Momma!" This was my "new life": a life sentence of living without my child.

At the end of my third year, those emotions have faded into the background. I haven't forgotten Dylan and who he was. I still mourn him and find certain times of the year are harder than others: birthdays, Christmas, and his Angel Birthday (the anniversary of his death).

I still experience grief outbursts, which sneak up unexpectedly, but I am in a much better place than I once was. I celebrate Dylan's life, his love of art, and his belief in Eastern Teachings. I have come full circle. I still like my time alone to think about Dylan but I am no longer acutely grieving. I know that Dylan would want me to be happy and to live for him and I'm now able to do this. I am living my new "new life."

Emily's story

I lost my 17 year old sister 9 months ago, from a cocaine and fentanyl overdose. My unfortunate reality, that I'm still exploring.

Losing her has been the most painful experience imaginable. The death of my only sister left me with an open wound that will never heal. It's a feeling like having to continue on with life, with only half a heart.

There are many mornings filled with anger, denial, disbelief and many, many tears. Her passing left me with a feeling like I was drowning all the time. People told me, "It will get easier", but that made me even more upset, because it wasn't getting any better. It wasn't until about 6 months after her death that I felt something lift a bit of weight off my heart. However, it was half a year that went by, where I felt like I could barely keep my head above water.

My little sister suffered sexual abuse and interference at age 14, from a known predator, who unfortunately was never charged. The abuse lead her down a destructive path of addiction for many years, to numb her painful experiences. When she tragically died in the original abusers' motel room, 4 years later, a part of me died with her. It was like I was robbed of something I worked so desperately to save, for so many years. And I'm still fighting.

There is a constant ache in my heart for all the memories we won't get to share together. My sister, Heather, is my best friend in this world. I become flooded with thoughts of never getting to see her smile or hear her laugh again, and those are unbearable. My sister and I will never be able to hug and kiss each other again. We won't be able to sing aloud to our favourite John Mayer songs together. We won't be standing proud to watch each other get married. We won't get to hold our nieces and nephews, and help each other through motherhood.

I will never get to see her dance again.

All of these thoughts leave me with a lump in my chest, because my sister and I planned our lives out together. It feels as if she's been ripped away from me forever, when neither of us ever deserved that.

Losing my sister has given me a re-evaluation of life that I never wanted. As much as it's been the most painful, overwhelming, never-ending, uphill battle I've ever had to endure, what stems from all the pain is love. LOVE. LOVE. LOVE. The amount of grief I have felt losing her, is proportionate to the amount of love I have for her. There is so much agony, because our love runs so deep.

The death of my little sister has shown me the true beauty of life. There is goodness, even in the bad. It's brought me to a better understanding of who I am as a person, and helped me see the preciousness of my life, and those around me. I take pride in the little things, because they do matter. I can see some of the light, beneath the dark. No, it's not easy, but the loss of such a special loved one has brought me back to reality. I miss her so much that it's helped me appreciate and be grateful for the things I do have.

Losing a sibling is like an ocean. It ebbs and flows. Sometimes the waves are rocky, sometimes the water is calm. You just have to learn to swim.

Karen's story

Grief—I honestly thought I knew what this word embodied. I was completely wrong, or was I? When I say I thought I knew what grief was, I find myself reflecting upon the memory of looking down on the body of my infant daughter. Jennafer passed away 24 years ago, from SIDS. I remember the guilt, the confusion, and the torture of not knowing why she was taken from us when she was only 5 weeks old. Now when I think of her, I barely recall her face; she hadn't grown into a personality yet, and still had that almost generic newborn look to her. I can remember fighting to survive my grief to be there for my other children, and almost succumbing many times. I was lucky to have people around me and family that supported me. There are some years where the remembrance of her death is fleeting and passes without thought or tears. And then there are years where the grief is as raw and fresh as the day when the doctors said they couldn't revive her.

Life did go on, her siblings grew up and had kids of their own, and I discovered the joy of being a grandparent.

Then, on September 20th, 2018, that secure happiness was destroyed. That was the morning I found myself in a fog of screaming, numbness, and a blinding pain that threatened to shatter me yet again. My beautiful, troubled-but-fiercely-strong son had passed away from an overdose. As I write this, it's been almost a full 4 months since Scott died. I can't tell you the number of times that we feared he had been killed or thought he might have taken his own life. To say the years Scott was with us were chaotic would be an understatement, but I would honestly go through each a thousand times over if it meant he would be alive with us now. We still don't know exactly what drug it was that took him from us, only that it's highly suspected to be Crystal Meth laced with Fentanyl. We have probably another 8 months to wait until we know for sure.

The grief I feel about Scott's death and Jennafer's death are vastly different in most aspects, but eerily similar in others. With Scott, I have 27 years of memories. I have these two beautiful children of his, to watch grow and help with their grief as well. I have all the happy memories, the silly ones, and the hurtful and angry ones. With Jennafer, I think about what could have been, what she would have done in her life, and what she will never get to do. Now she shares this with her older brother as I think of all the things he could have done and will never get to do. I never embraced the "It's God's will", "At least he/she isn't in pain anymore", or the "I am sorry for your loss" comments. As you hear them over and over, as I did, they begin to lose meaning. It's society's awkward way of dealing with someone else's pain.

There is the old saying that time heals all wounds. I challenge that; it doesn't heal them, but changes them from a sharp searing pain to a bearable ache. There is no right or wrong way to grieve, unless of course what you are doing is hurting yourself or others—that I do strongly believe. Loss in any form is hard for us to manage. From experience, I would say that the loss of a child is the most heartbreaking ordeal I have ever had to manage. I use the word 'manage' because I will never completely heal, I will not just get over it, nor will I ever forget.

The longing to hold, talk to, or just have my children back is as strong as the day I brought them into this world. And one I will have until it's my time to join them.

Angela's story

On a cold Sunday afternoon in November, my husband told me that the hospital had phoned him and that our youngest daughter had been admitted. They urged us to make our way there as soon as possible.

During the drive to the hospital I couldn't help but think of her. The youngest of three she was shy, yet fearless at times, beautiful, smart, creative, artistic, funny, athletic, girlish at times yet tomboyish, and a total clown. Her laughter was contagious and I miss it very much. It had been a difficult year as she had struggled with declining mental health and her addiction. I remember how hopeful I was on that drive that she may finally be in a place where I could work on getting her the help she needed. Sadly, when we arrived at the hospital and we saw the sign on the door with the word "private room" written underneath our family name, I knew that wouldn't be the case. It was too late. Zoe was 'gone too soon' at 18 years of age.

In the hours that followed our arrival at the hospital, we had conversations with nurses, ICU doctors, a police constable, a hospital chaplain, a social worker, and countless others. It's all a blur though because after hearing the words "I'm sorry, your daughter is deceased", my world literally stopped and every breath was a struggle. My senses stopped working. I couldn't smell or hear or taste anything. My eyesight became blurry. A fog filled my head and I felt like everyone around me was speaking in a different language. Decisions needed to be made. Discussions about organ donation and funeral arrangements needed to be secured, and all the while I kept hoping that I would wake up from this horrible nightmare.

I just could not believe that this had happened and that she had overdosed. I had warned her so many times about using drugs and had told her to be careful about the dangers of fentanyl. Why hadn't she been more careful? Why didn't the people she was with call an ambulance sooner? Why didn't the medical and justice system protect this youth? Why hadn't I been able to protect her? That was my job, after all, as her mother.

In the beginning I didn't want to talk about her struggle with mental health and addiction. I felt like a failure and that what happened was completely my fault. Because of the stigma and misunderstanding that is so prevalent with overdose and substance use deaths, family and friends did not know how to support this type of loss (and some still don't know). Often they said the wrong things which added to the confusion and made my family feel completely alone in our sadness.

Life continues on, but after the death of a child many life events that used to be happy and joyous are meaningless and extremely painful. Holidays, graduations, birthdays, and other special events just aren't the same. My group of friends, family, and acquaintances has gotten smaller and it's difficult at times. I have, however, found new friends and connections, and I'm okay with that. Grief is fluid and you have to move with the intricacies of its ebbs and flows.

I was fortunate to have met another mother who had also lost her daughter to overdose, and we formed a very close connection shortly after our girls died. I am so grateful for this friendship. Together we attended many grief support groups. We encouraged each other and spoke candidly about our emotions. We had many coffees together and cried openly at those coffee shops to the shock and dismay of many patrons around us. People don't like tears, but that didn't stop us from shedding them. We grieved our daughters and eventually found the strength to start a peer support group for other parents who have lost loved ones to substance use loss. The sad reality is that our support group's numbers are growing because of the opioid and overdose crisis. Along with supporting peers who have lost loved ones to substance use disorder and overdose, I also have tried

to push past my grief and have become involved in advocacy. I do what I can to fight for changes in health policy and drug reforms, and to crush the societal stigma that is so prevalent with regards to substance use disorders, homelessness, and poverty. Substance use disorder is a medical condition; it has no boundaries and can touch anyone at any time.

As I write this it has been 799 days since that unimaginable day, and not a day passes without thinking about her. I don't cry every day, but the tears still fall hot and heavy some days. The fog is still there, but it isn't as thick. The weight on my heart isn't as heavy as it was on day one, but it's there as a reminder. On a more personal level, I've found things to do to honour my girl. Creativity helps me to be closer to her since she was so creative as well. I paint canvasses and objects, colour and craft and I light a candle and speak her name every day. I find myself having good moments and embracing joy in the smallest of increments. I try to take solace in knowing that our family's decision to donate her organs was a selfless one. Zoe translated from Greek means "life" and the fact that she helped save four lives seemed fitting in the end.