

# Grief Has No Expiration Date, Part I: Losing a Loved One to Addiction

Dennis C. Daley, PhD

I wrote in a previous column that another “epidemic” not receiving sufficient attention is the impact of opioid and other substance misuse and addiction on families and children. Much has been written about the trends in opioid addiction and the significant increase in deaths from overdoses. However, there is little focus on family members left behind when people die from a drug overdose or other complications associated with substance misuse or addiction.

This column discusses grief experienced by family members who lost loved ones to addiction. It includes comments from those who shared their stories of loss with me. A follow-up column in the next issue of *Counselor* will discuss ways family members cope with the intense pain and sorrow caused by their losses. Despite the excruciating pain and horror felt from losing loved ones, many people show resilience and help others deal with their loss of a loved one.

## The Many Forms of Tragedy Caused by Substance Use

A mother is called by a paramedic who tells her that her son has overdosed and conveys the message that he may not live. She stayed all night in the hospital talking with her son, playing music and praying that he would wake up. After he died, she begged and pleaded with God to bring him back. Her other children were devastated by the loss of their brother.

Parents were called when their son was admitted to a trauma unit after getting drunk and falling from a crawl space high up in a church, hitting his head on a pew and going into a coma. He died a few days later from a traumatic brain injury.

Parents find their young adult daughter in her room dead from a drug overdose. A father is told that his daughter died from convulsions after using the drug MDMA (molly) at a concert. Two young women die in a car crash as the driver of the car they were in was drunk. A woman’s six-year-old daughter and sixty-one-year-old mother are killed by a drunk driver while all three of them were walking on a sidewalk.

These and many similar stories of loss are far too common, and affect the lives of many people, often in profound ways. The emotional turmoil and grief are intense, changing lives forever. Statistics and data can never convey the pain and



suffering of families who lose loved ones, especially at young ages.

Death from drug overdoses, accidents, suicides, homicides, and medical complications of diseases caused or worsened by substance use and addictions are rampant in the US. In addition to those with an addiction who die, many innocent victims also die, as evident in the aforementioned examples.

The opioid epidemic has created immeasurable suffering for those addicted to drugs, their families, and others. This epidemic has led to a huge increase in deaths from drug overdoses as a result of:

- Physicians prescribing opioids because they were advised to treat pain aggressively and were led to believe that even the more potent opioids had very low rates of addiction
- The transfer of addiction from prescription opioids to an affordable, cheaper, and more potent form of street heroin
- The diluting of heroin with powerful drugs such as fentanyl
- Ingesting opioids with benzodiazepines, which raises the risk of overdose

In addition to the opioid epidemic, there are high rates of alcohol, cocaine, and other substance problems leading to serious adverse outcomes for affected individuals and their families. Death, destruction, and family pain have no preference for the drugs used.

### Vigil of Hope

I attended three annual Vigil of Hope events sponsored by Bridge-to-Hope, a local mutual support program for families. This includes music, prayer, brief talks by professionals or family members in recovery, and a vigil in which candles are lit in memory of people lost to addiction. This is followed by a reception where people give and receive support. I have heard hundreds verbalize their grief from losing one, two or three family members to an addiction. The most powerful was a young boy, about nine years old, who stated, "I light this candle for my dad, who died when I was three." This boy and all the

others attending these vigils need to be remembered and supported as they learn to live with grief. They represent the ugly aftermath of death from addiction.

### Losses Due to Addiction

With an addiction, two types of losses are common. The first is the loss of loved ones during the active phase of addiction when they are controlled by drugs and unable to function as responsible family members. Since addiction hijacks their brains and influences behaviors, families miss out and never have them fully present because they focus only on getting and using drugs. During active addiction, family members worry, feel angry, depressed, anxious or despondent.

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The second loss is when loved ones die. This often hits family members like a ton of bricks, even if they knew this could happen. Family members feel a range of intense emotions and their health, relationships, and ability to function are affected. Sadness, depression, and despair are common. When one mother found out her son died from an overdose, she said,

*I felt as if I was having an out-of-body experience. This could not be happening to me. I immediately fell to the floor in so much pain, disbelief, shock, sadness, and enough anxiety to kill me. My panic was off the charts—I felt like a hummingbird was in my chest. I was unable to settle myself. My grief was so deep I really just wanted to die also.*

Another parent said, "I was very angry with God. Very. I felt darkness around me for the first two years, maybe longer. Such anger. How could this happen to such a sweet boy?"

Losing adolescent or young adult children shatters parents' worlds, changes their perspective, and affects their emotional stability, relationships, and how they function. Losing siblings is also difficult and painful for brothers or sisters left behind. I also know of cases in which family members cut all ties with their addicted loved ones due to the pain experienced over many years.

The majority of family members I know did many things to try to help their loved ones during active addiction. Yet, many feel guilty and wonder if they could have done more to prevent their early death.

### Other Losses Associated with Addiction

Death is one type of loss associated with addiction. Other losses that hurt families include loss of family stability, loss of family cohesion, loss of the feeling of safety due to violent or unpredictable behavior, loss of trust, loss of a parent who cannot function as a responsible adult or loss of a sibling who cannot be counted on. The loss of a parent is tragic for children who do not get the consistency, love, nurturing, and mentoring needed to cope with the demands of life. Many family members said they felt cheated, ashamed, guilty, anxious, depressed or angry. The emotional burden is overwhelming. Additionally, the financial burden creates feelings of insecurity or puts families deeply in debt. I know parents who borrowed large sums of money, took out second mortgages or withdrew money from retirement accounts to pay for rehabilitation programs for their sons or daughters.

### Grief Has No Expiration Date

All phases of grief present difficulties, but the early period is especially troubling. Many experience grief for years. Even as they heal, they always feel their loss and remember vividly what happened to their loved ones. They learn to "live with" grief, rather than "get over it" completely. Emotions are especially strong during family holidays, birthdays, and anniversaries. One parent said, "People think after a certain amount of time, you are better," which implies they think healing has a time

limit. As another parent stated, "Grief has no expiration date; it hurts all the time." Another felt "horror, madness, searing, excruciating pain" for a long time. Isolating from friends and family is common. One mother said,

*When I did leave my house, I felt a need to come home after a short period of time. I went from periods of panic to being so quiet I wondered if I would ever be able to speak again. I could not deal with the world outside of my home. I had no social life outside of friends who were experiencing the same life as me. I was now from a different planet. People of this earth could not understand me.*

Her comments show that she felt different, misunderstood, and that she seldom socialized with others who had not lost a loved one.

These intense and persistent emotions affect physical as well as mental health. A range of emotions are experienced as people try to understand and make sense of what happened and why. One mother stated, "I was sad, angry, in denial, depressed, crazy, panic stricken . . . any or all of these feelings in one day, sometimes in one hour, one minute." Many had difficulty sleeping, lost their appetite, had to force themselves to get out of bed, and had to push themselves to take care of other children or go to work. Some even sometimes felt so despondent that they wished they would die.

Despite the pain and traumatic grief experienced, family members learn to live with grief. In the second part of this column, I will discuss what family members and others do to cope with their grief. Many show resilience despite the difficulties faced in adjusting to the significant loss of loved ones. **C**

#### About the Author

Dennis C. Daley, PhD, served for fourteen years as the chief of Addiction Medicine Services (AMS) at Western Psychiatric Institute and Clinic (WPIC) of the University of Pittsburgh School of Medicine. Dr. Daley has been with WPIC since 1986 and previously served as director of Family Studies and Social Work. He is currently involved in clinical care, teaching, and research.



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actress, who alleges that Cosby drugged and raped her. According to an article in *Rolling Stone* magazine,

*"I have been trying to be heard since 2006," Phoenix artist Bowman said. "We have a culture that revictimizes the victims. It is the most shameful, scary, intimidating, filthy place to live. It is a place of shame and darkness and fear. When people ask, 'why didn't you tell anyone?' Well, I did tell someone."*

*. . . "He is going to go down," she says. "I believe he will go down as this generation's most prolific serial rapist. We are gathering a lot of details. I am not in a position to reveal things I have learned. I have heard from men and women, from people with information. And I think the public's mind will be blown" (Burleigh, 2014).*

What is lacking is the truth. Either Bill Cosby is a sexual predator who systematically seduced and sexually assaulted women who believed that he could help their careers, or Cosby himself was victimized by a conspiracy of female predators who preyed upon his good intentions. Cosby has repeatedly denied all accusations.

Then, out of sixty unproven victims, Cosby admitted to a single incidence of rape. Only one? They say "Where there's smoke, there's fire," but Bill Cosby remains innocent until proven guilty. The American court system will ultimately determine his fate. Whatever the verdict, the presence of Quaaludes, a drug many thought had been eradicated, will play a central part in the trial. **C**

#### About the Author

Maxim W. Furek, MA, CADC, ICADC, is an avid researcher and lecturer on contemporary drug trends. His rich background includes aspects of psychology, addictions, mental health, and music journalism. His latest book, *Sheppton: The Myth, Miracle, & Music*, explores the psychological trauma of being trapped underground and is available at Amazon.com.



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