CHAPTER SIX

Somatic Treatments

The somatic treatments described in the following pages are part of a Degriefer's "somatic tool kit." Due to space considerations, this book intends only to introduce the treatments, not explain them in full detail. Each treatment is a field of study in itself. Each is described in much greater detail in other library materials. Every health care practitioner who is considering integrating any of the somatic treatments mentioned in the following pages into their care programs is strongly encouraged to do additional research about each of them.

Note that in addition to the name of the treatment and its primary goal, the following listings include basic guidelines that may be useful for those searching for effective self-care techniques. Though any attempt to alleviate grief by employing safe and effective somatic treatments must be applauded, it is highly advised that a grieving individual develop a treatment regime under the supervision of a well-trained grief counselor, ideally, one who regularly practices somatic treatments. The somatic treatments listed can also be employed by health care practitioners, including grief counselors, who are experiencing bereavement overload and want to take steps to reduce their own grief-related stress responses, and reduce the risk of "burnout" or "compassion fatigue."

Using Diet

Before suggesting specific somatic treatments, it behooves the well-trained grief counselor to discuss diet, nutrition and food preferences with the client. Though the somatic treatments used in degriefing are mainly external (they work from the outside to affect the inside), the client's intake of food and other substances has a definite impact on the client's condition and their effects should be taken into account.

In essence, a grief counselor that practices somatic treatments is interested in regulating a client's biochemical reactions (using massage, breathing exercises, water treatments, etc.) in order to reestablish a harmonious

physical condition, which in turn promotes mental and emotional health. Since our diet has a direct influence on our biological condition, what we eat can be controlled, and when we eat can be controlled; a client's dietary intake should and can be optimized to best combat adverse grief reactions.

Obviously, good nutrition is essential in order for the human body to function properly. What we eat often influences how we feel and how our body acts. A client should be encouraged to maintain a healthy diet. Many times clients think that just because they do eat, they are taking care of that need. However, they are unaware that the stresses they are experiencing can affect the absorption of essential nutrients, that certain foods like fats and sugars can actually increase lethargy, or that certain food additives may cause unwanted psychological effects. The Degriefer may recommend employing the services of a professional nutritionist and/or consult the primary care physician for advice.

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Billie Jay Sahley, PhD., a board-certified Medical Psychotherapist/ Behavior Therapist, relates her experiences relating to grief and nutrition as Director of the Pain and Stress Center in San Antonio, Texas, "Grief will sap whatever nutrients are in the brain, so I'll look at a patient's means of controlling anxiety or mood swings to determine how to balance their brain chemistry. The number one neurotransmitter that's likely to become unbalanced is serotonin. If you don't have enough serotonin, the brain's neural network becomes dysfunctional and misfires. Because serotonin regulates states of mind, a deficiency can cause irrational behavior, mood swings, depression, and anger. You've got to get the serotonin up just to restore balance and rationality. Serotonin deficiency also causes constant carbohydrate craving. What people don't realize when they're after carbohydrates to make themselves feel better is that they are really trying to elevate their serotonin levels. If they tell me that they can't stop eating, I know that their serotonin level has bottomed out." Sahley also looks for signs of unbalanced levels of two other major neurotransmitters, GABA (gamma amino butyric acid) and dopamine. To restore optimal brain chemistry, she recommends the appropriate nutritional supplements to her clients. [Alternative Medicine, Issue 34, March 2000].

Common dietary problems reported by grieving individuals are lack of appetite or overeating. Severe eating disorders may indicate that the client is suffering from previous grief-related problems that may need to be addressed. (The grief counselor might recommend that the client eat a series of small, light meals with high nutritional content throughout the day, rather than two or three big meals.) Constipation, diarrhea and "nervous stomach" are also typical. (The grief counselor might remind the client to avoid those foods that agitate or adversely affect the system.) Eating well on a regular schedule in a calm environment is optimal for everyone, especially those experiencing grief.

In addition to their nutritional value, certain foods produce specific biological (and hence mental) effects. A grief counselor with such knowledge

may recommend these foods. And due to cultural influences or personal experiences, certain foods may induce emotional reactions. This is mainly due to olfactory cues that trigger specific memories. Certain foods might be recommended due to their comforting and grounding effects.

In addition to discussing the client's diet, the Degriefer should also discuss the effects of other ingested/inhaled/injected substances (including tobacco, alcohol, caffeine, prescribed medications, recreational drugs, hormones, vitamins, and herbs) in relation to how they will affect the client's overall condition and the client's reaction to a specific somatic treatment. Ideally, a grief stricken individual seeking counseling will be "substance free," but real world circumstances dictate that the Degriefer discuss the ramifications of using any psychoactive and/or physio-active materials that the client partakes of. A detailed intake form should include questions related to this topic that can be followed up in the initial client interview. The subject should be reviewed before somatic treatments commence.

Degriefers who are not trained to know all the effects these various non-dietary substances have on their client should seek permission to contact the client's primary care physician for assistance, if necessary. Degriefers should be especially aware of what they are allowed to say (and allowed not to say) to a client regarding "taking" anything for any ailment. Always defer to a licensed practitioner whenever the need arises. It is also helpful to have contacts at local substance abuse counseling centers in case referrals need to be made.

Using Touch-related Therapies

Many scientific studies have been undertaken to determine the effects of appropriate touch on infants, children and adults. Research indicates that being touched at appropriate times and in appropriate ways promotes proper physical and emotional development and that it also maintains good health. It is apparent from investigating the topic that being touched (which includes being held, hugged and embraced, as well as getting therapeutic massage) is an essential ingredient of a healthy human life.

It may be useful for some readers to know some basic facts about the skin that may reinforce the notion that touch and massage are directed at one of a human's primary organs:

- The skin is the largest sense organ (measuring approximately 19,000 square centimeters in the adult male) and each square centimeter contains some 350 different varieties of cells.
- The skin contains approximately 5 million sensory cells.
- The epidermis (outer skin layer) houses the tactile system. Surface tactile points vary from 7 to 135 per square centimeter.
- The skin plays a major role in regulating blood pressure and body

temperature.

• The skin is not merely a passive barrier or shield from the environment; it is in fact an active, porous organ involved in the transport of gases, liquids and solids to and from our internal parts.

Therapeutic Touch

One of the most well known touch-related therapies among the healing professions is called Therapeutic Touch. Initially developed for nurses by Dolores Krieger, a professor at the New York University Graduate School of Nursing, the technique has been taught to tens of thousands of health care workers over the last 20 years. Krieger explains, "The touch in which I was interested was not simple physiological touch, but rather touch which conveyed an attempt to help or to heal." The laying on of hands with a definite intention to heal (i.e., the transfer of healing energies from one individual to another) may seem to be based on spiritual or religious beliefs, however, several scientific studies do report measurable physiological and psychological changes after a client undergoes treatment. Beneficial changes include reduced anxiety levels, improved immunological response and faster healing of wounds. Though ongoing research is not yet conclusive, the various positive effects reported by those treated has convinced many investigators that Therapeutic Touch deserves to be incorporated into modern health care. [Alternative Medicine, Issue 34, March 2000].

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Though no studies currently exist that specifically prove that touch therapies can definitely heal all the ailments grieving individuals suffer from, the physical and mental changes that "hands-on" treatments elicit seem expressly designed to address the problems of the grieving. Therefore, they are the primary somatic treatments used in the Degriefing process.

In general, Degriefing treatments that involve touch can be categorized according to their intensity and the site being treated. They range from conventional physical therapies to esoteric healing philosophies based on transfer of intangible healing energies. The Degriefing practitioner may concentrate on one specific area of the body (the neck and shoulders, for instance), but generally treatment involves the entire (non-sexual) body.

It is important to note that some grieving individuals may be uncomfortable about being touched in any way. Others may be unfamiliar with professional massage techniques. Still others may have been previously traumatized by inappropriate physical contact. It is imperative that the grief counselor explains, in a precise and detailed manner, each treatment being considered. Any apprehensions the client has (especially sexually related ones) should be thoroughly discussed before treatment begins. Generally, the Degriefer should start with mild treatments and work up to more intense ones as a trusting relationship is established. No matter what the treatment, the places on the body to start are the back, shoulders, neck and feet. Touching these areas is generally less invasive and less threatening to a client.

Compassionate Touch, Embracing Touch, Rocking and Self-Massage

The simplest touch related therapies are very effective—especially with clients that are in shock or beginning their Degriefing. These therapies include compassionate touch, embracing touch, rocking and self-massage. The first three can be can easily performed by either highly trained heath care practitioners or laypersons in a variety of settings, ranging from the hospital to the counselor's office to the bedside. Self-massage is another treatment technique that can be employed by grieving individuals in a variety of settings.

Compassionate touch. The intention of compassionate touch is to make contact on several "levels." It is about reassurance and connection to another human being as well as making physical contact. The primary intention is to provide a supportive presence. In this case, the hands are used as an extension of the heart.

One type of compassionate touch, a two-handed handshake, can be incorporated in the initial meeting. Sandwich the client's hand between your two hands for a moment while making direct eye contact and greeting them. Be gentle but firm—a limp, passive handshake does not communicate confidence. A brief, gentle touch on the shoulder also works.

Compassionate touch can be further employed throughout the Degriefing process. Sue Radosti, a Licensed Massage Therapist and certified Trauma Touch Therapist relates, "Compassionate touch is a powerful assessor of emotion, and for that very reason, care must be taken to maintain a firm, matter-of-fact quality of contact."

The Degriefer should first set a regular and slow breathing rhythm to establish a calming environment. The client will typically mimic this breathing pattern. If irregular breathing continues, encourage the client to match his or her breathing with you using words such as: "Breathe with me" or "Take slow and steady breaths." Encourage the client to breathe through the nose. Second, the Degriefer should make eye contact to establish a non-threatening situation. Approach the client in a deliberately slow and sensitive manner. Realize that you will "feel" each other before physical contact is actually made. Explain what you are going to do beforehand if the client is anxious. Reach out and touch the client with a fully open hand (or hands, depending on the situation). Hold the hands still for a moment or two until you feel the client release some tension. If two hands are being used, keep one still (the "mother" hand) while the other rubs or strokes the body in a circular motion. Avoid sudden movements.

Embracing Touch. Embracing is a more intimate form of compassionate touch. Though it involves hugging, it is meant to be a heart to heart contact without any hint of sexuality. A hug at the beginning or end of a session can set a tone of acceptance and/or completion.

First, ask the client if they would like a hug. Walk toward them slowly and wrap your arms around their upper body. Aim to connect sternum to sternum. Avoid body contact below the waist. Embrace gently, but firmly,

up to five seconds. In this context, the embrace is not intended to be a time for prolonged emotional release.

Encourage hugging among family members. It is an especially effec-

tive way to comfort children who are grieving.

Rocking. Rocking the body in various ways is a highly recommended Degriefing technique. This rhythmic body movement has both physiological and psychological benefits. According to professor Ashley Montagu, a renowned social scientist and author, "Rocking in both babies and adults increases cardiac output and is helpful to the circulation; it promotes respiration and discourages lung congestion; it stimulates muscle tone; and not least important, it maintains the feeling of relatedness."

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Montagu further states, "Rocking motion produces a gentle stimulation of almost every area of the skin with consequential beneficial physiological

effects of every kind."

As Montagu mentions, in addition to the positive physical effects it induces, rocking also promotes an emotional connection with others. Thus, it is universally performed to comfort individuals of all ages. For instance, infants are commonly rocked in their cradles in order to stop their crying and to put them to sleep. The elderly are commonly pictured rocking contentedly in their chairs.

Perhaps because rocking and swaying are some of the first movements we ever experience, it can be considered a primal somatic technique that elicits positive response. In the case of grieving individuals, it induces comfort and security. Self-rocking is a common behavior among those in emotional distress. Montagu concludes, "It is quite clearly a form of comforting behavior...". "(It) represents a kind of self-caressing, a selfcomforting, and as such is often observed in grief and mourning."

Degriefers can instruct the client to rock him- or herself, or can induce the desired movement. Self-rocking involves having the client curl up and rock face up, face down, on their side, or even sitting, depending upon what's most comfortable for them. Some clients may prefer to wrap their arms around their knees to mimic a fetal position. Clients can do this on a floor mat, on a massage table or in a chair. Have the client rock back and forth for up to several minutes. Each person will regulate the intensity and the speed of their rocking according to their own innate rhythm. Discourage rapid or violent rocking in favor of a slower, more nurturing motion.

To induce rocking, the Degriefer needs to gently push or pull certain parts of the client's body to provoke a rolling motion. Pretend that the client's body is a fragile container full of viscous liquid that needs to be nudged to get the liquid to gently swish around. If the client is lying face up or face down on the floor (or on a massage table), pushing the hip will start a side-to-side rock. When body naturally rolls back to the original resting position, push again. To rock a person "head-to toe," the Degriefer can simultaneously grasp both of the client's ankles and pull until their body weight shifts slightly forward. Release the pull and let the body

naturally shift back into place (while maintaining contact) Repeat. Rock for 2 - 3 minutes.

Self-massage. Watching a grieving individual massage the parts of the body that are painful can provide the Degriefer with valuable clues as to how best treat the client. Touching what hurts is an immediate and natural response to injury. In addition, by rubbing certain areas of their own bodies, clients may be able to supply the grief counselor with non-verbal information that is difficult to express otherwise. For instance, rubbing one's temples can indicate mental confusion as well as headaches. Repeatedly rubbing the back of the neck and/or shoulders can indicate the presence of deep stresses. Massaging the chest may indicate heartache. Rubbing the stomach can indicate emotional distress. In these cases and others, the Degriefer can rely on the human body's own healing processes to pinpoint problems that may require further intervention.

Self-massage can be effective outside the grief counseling session, as well. Most people have forgotten how nurturing touch can be, even from one's own self. For example, a self-induced foot massage can relieve muscle tension and stimulate circulation nearly (or equally) as well as one performed by someone else. (Giving oneself a foot massage in a quiet setting is one of the best home "remedies" available to the grief stricken.) In fact, since many people are uncomfortable being touched by strangers, performing self-massage can alleviate the fears that would otherwise deter treatment. In addition, once a person realizes that he or she can provide a reliable degree of self-comfort, they gain a measure of control over their own healing process.

To encourage a client to perform regular self-massage, send him or her home with some massage oils that they find pleasant. If the client is intimidated by the thought of massaging themselves, suggest that they wash with a loofa and/or dry-off rather vigorously after bathing using a big, fluffy towel. A dry skin brush is especially stimulating when used on the palms of the hands and on the soles of the feet. Suggest that they prolong the self-massage experience, rather than rush through it.

Swedish, Deep Tissue, and Lymphatic Massage

In contrast to the four preceding touch-related treatments, the following three massage treatments should only be employed by trained and skilled practitioners as they involve direct touch massage and muscle, tissue and organ manipulation.

Massage is one of the most effective somatic treatments available to healers. As summed up by massage practitioner/instructor Christine Rosche, MPH, CBT, "Studies have documented benefits (of massage therapy) in cases of amputation, arthritis, cerebal palsy, cerebral vascular accident, fibrositis syndrome, menstrual cramps, paraplegia, scoliosis, acute and chronic pain, acute and chronic inflammation, chronic lymphedema,

nausea, muscle spasm, soft tissue dysfunctions, grand mal epileptic seizures, anxiety, depression, insomnia, and psychoemotional distress."

Roche reviewed extensive amounts of clinical data in order to provide evidence to insurance companies that massage therapy has proven beneficial effects. She cites three books that provided important information for her research, "The American Holistic Health Association Complete Guide to Alternative Medicine", by William Collinge, MPH, PhD., (Warner Books, 1996), "Alternative Medicine: What works – A Comprehensive, Easy-to-read Review of the Scientific Evidence, Pro and Con", by Adriane Fugh-Berman (1996) and "A Physician's Guide to Therapeutic Massage (Massage Therapist's Association). She strongly recommends that those interested in the clinical research relating to "medical" massage also review the collection of literature compiled by the Bodywork Research Institute in Frederick, Maryland. [Massage and Body Work, Spring 1998].

One of the primary reasons that Degriefers be professionally trained in both grief counseling and bodywork is that the latter can evoke "bad" feelings as well as induce positive changes. As stated previously in this book, many people have been traumatized to some degree in their lives and it is becoming recognized that the body "holds" the trauma in various ways. Being touched or massaged may trigger the stored trauma in some people. This is, in fact, a basis of Degriefing theory.

These involuntary negative feelings are most often temporary compared to the positive effects that are intended to be long-lasting, but it can be disconcerting for an unprepared bodyworker to witness them surface. For instance, many patients cry when they are touched or massaged. This can be due to the fact that they find the touch extremely nurturing, or it could be that they find it threatening. Being touched or held may remind them of a loving relationship. Or, in contrast, the fact that they are partially unclothed and lying down on a table (helpless) may remind them of a previously experienced assault.

In addition to tears, some clients release their held trauma in more severe and unpredictable ways. A Degriefer practicing touch related somatic therapies should be on the lookout for excessive sweating, rapid breathing, rapid heartbeat and trembling. Some clients report flashbacks to unpleasant events. Other clients may completely disassociate from their bodies, becoming numb in a sense. It seems they are re-experiencing the shock reaction. A trained Degriefer will recognize the signs of distress and proceed accordingly. It may be appropriate to immediately cease the massage and begin verbal counseling or to switch to a somatic treatment that will be gentler on the client's system. Other times, it may be helpful to let the negative emotions flow as the trauma is released. Many times clients who feel safe to express themselves will find it healing to do so. Clearly, touch-related therapies, and especially massage, can be beneficial to those

who have been traumatized as long as the somatic practitioner is aware of, and anticipates, both the positive and adverse effects of treatment.

Elliot Greene, former president of the American Massage Therapy Association, points out one benefit of massage that relates to the grief-stricken: "My clients often say that their massage is like a 'mental vacation'.... Massage helps you to leave your thoughts for a while." Clearly, many grieving individuals could benefit from some time away from their painful thoughts. Once a grieving person experiences even a temporary respite from their suffering, they are then able to admit to themselves (and their grief counselor) that longer-lasting relief might be possible. This realization plants the seeds of personal optimism, a feeling that is commonly in very short supply among the grieving. Acknowledging that their immense suffering might indeed one day fade is an important step in the healing process.

Swedish Massage. Typically, when people say they are going to get a massage, they are often referring to a Swedish massage. It is performed while the client is lying down, preferably on a specially designed massage table. Clients are encouraged to remove as much clothing as they feel comfortable removing. Towels and sheets can be used for draping.

Swedish massage involves skin-to-skin touch. In fact, it is the hand on skin contact between the practitioner and the client that is sought. In this instance, the hands are again an extension of the heart, the skin-to-skin contact is especially nurturing for the grief-stricken individual. The intention of the Degriefer is to release the body's held tension and induce a state of relaxation and receptivity. Contact is characterized by effleurage (long, sweeping strokes). The masseuse uses flat palmed, finger kneading movements. Massage creams or oils are always incorporated. The practitioner's touch is continuous, connected and intentional. The skin and underlying tissues are pushed and pulled. Techniques range from a light, superficial touch to an invigorating rub-down. Sessions last 60 – 90 minutes. The aim is to stimulate the client's nervous and circulatory systems in order to alleviate pain and induce auto-immune responses that have been stymied by grief. It is intended to promote an overall sense of well-being.

It is perhaps the most versatile arena for incorporating other somatic therapies. Many other Degriefing treatments such as aromatherapy, vibrational therapy, Polarity, Reiki, etc. can easily be incorporated in a Swedish massage session. Swedish massage typically evokes profound emotional responses. The Degriefer may be the first person to wholeheartedly touch the grieving individual since their loss. Many grieving people miss the touch of a loved one and react by crying, or experiencing sorrow. The Degriefer should be prepared for these spontaneous expressions of grief.

Deep Tissue Massage. Deep tissue massage is similar to Swedish massage, but it is more intense and reaches "below" the body surface. Its

intention is deep muscular release and fascial re-alignment. The practitioner employs a more pointed approach – employing thumbs and elbows to reach underlying muscle fibers. The massage must utilize rhythmic breathing; deep strokes require slow deep breaths.

As muscles contract to protect the body against harm or as a reaction to shocking news, they may get "stuck;" full and easy movement may be impaired. Typically, shoulders arch, the spine curves, hands and jaws clench, and limbs stiffen. Prolonged contractions (spasms) are painful. Deep tissue massage can physically "unlock" or open tight muscles that were "frozen" by trauma. This alleviates pain.

Lymphatic Massage. Our lymphatic system is a liquid one yet the system has no pump. Its circulation is dependent on physical activity. At times of profound grief, when people are feeling lethargic and thus become inactive, the lymphatic system tends to stagnate. Without proper drainage, toxins accumulate, which further impairs the system. The intention of lymphatic massage is to stimulate the lymphatic system, thereby restoring proper bodily functioning.

Lymphatic massage is best performed on a massage table with the client lying face up. Lymphatic massage targets the lymph nodes that lie just beneath the skin. The practitioner gently stimulates the lymphatic nodes in a sequence that best promotes drainage and circulation. The client's skin is contacted with the pads of the fingertips. A light rhythmic touch, without excessive pressure, "pushes" the fluid toward the lymphatic ducts. The massage is intended to be soothing, sedating and centering. The light touch is mesmerizing. Massage of the visceral organs can also be included in a lymphatic session. A complete treatment will include some work on the client's back regions, too. (A recommended complementary activity is bouncing up and down on a trampoline, a technique which uses gravity and force to naturally move bodily fluids.)

Other Touch-related Therapies

The following somatic treatments are less intimate than massage. They don't require that the client undress. They don't involve the use of massage creams or oils. Therefore, they are useful to use with clients that need their physical condition addressed, but are not ready, willing or able to disrobe. Since they are based on non-Western concepts of energy or life force, they are best practiced on clients who already believe in, or are willing to consider, alternative paradigms regarding healing. They are, in fact, ancient healing modalities still practiced by certain societies. Those familiar with Eastern philosophies and non-traditional medicine will generally be more

receptive to undergoing these treatments. In spite of the fact that many Westerners deem them unscientific, it has been recognized that they instigate healing in many cases and therefore deserve full consideration in an integrative health care plan.

Shiatsu (Acupressure) – Shiatsu is an Oriental treatment that is based on applying pressure to specific points on the body. These points are located on 12 designated energy lines, called meridians. The pressure is used to remove blockages that inhibit the natural flow of life forces.

The client lies comfortably clothed on a lowered massage table or floor mat. The practitioner pushes on specific points on the body with thumbs, fingers, elbows and knees.

Reflexology – Reflexology targets specific "reflex" referral points on the hands and feet. These points correspond to specific body parts. Clients remove their shoes and socks. The practitioner applies pressure in various ways and intensities. Benefits include increased relaxation and improved circulation.

Polarity Therapy - Polarity therapy is an "energy balancing" technique that addresses the negative and positive electromagnetic fields of the body. During treatment the client lies comfortably clothed on the massage table. The practitioner rebalances the client's system using gentle holds and other non-invasive touching.

Reiki – Reiki is an "energy transfering" technique. During treatment, the client lies fully clothed on the massage table. The practitioner gently lays hands over the client's chakras and major organs while channeling positive healing energy to the client's body. The energy is intended to fill up a body devoid of it and is used to remove blockages that inhibit the natural flow of life forces.

Though the treatment may seem nonsensical, as the transferred energy is not observable, individuals that that have been treated by intuitive and trained practitioners report that Reiki treatments are effective. In fact, it has been reported that the treatment, like prayer, can be transmitted long distance.

TABLE 1. Touch-related Therapies Used in the Degriefing Process		
Treatment	Primary Goal(s)	Practical Information
Compassionate touch	To provide comfort.	Receive gentle physical contact from friends, family or caregivers.
Embracing (non-sexual)	To provide comfort.	Receive hugs and gentle embraces from friends, family or caregivers. Hugs with rocking motion are especially comforting.
Self-rocking (in fetal position)	To provide comfort. To stimulate circulatory and lymphatic systems.	Curl into fetal position and allow body to rock back and forth.
Rocking (in prone or supine position)	To provide comfort. To provide physical movement of body with relaxed limbs.	Lie prone or supine on floor or bed. Arms and legs slightly apart. Keep jaw unclenched and loose. Have helper gently rock body (push sideways with open palms and allow body to roll back). Repeat rhythmically for 5 mins. Hips, shoulders and legs are easiest to rock.
Self-massage	To identify, contact and soothe painful areas.	Gently rub sore body parts using a small amount of body lotion, cream or massage oil. The feet are especially receptive.

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Treatment	Primary Goal(s)	Practical Information
Massage (Swedish and deep tissue)	To create an overall sense of well-being.	Seek the services of a well-trained therapeutic massage practitioner. It is helpful to explain the source of your somatic discomfort to him or her. Regular (weekly) sessions are recommended.
	To produce physical relaxation (reduce heart rate and blood pressure.)	
	To provide tactile comfort.	
	To release muscle tension and postural holding.	recommended.
	To stimulate beneficial biological processes (especially the circulation of blood and related detoxifying/ waste removal systems).	
	To stimulate beneficial biochemical changes.	
	To enhance mind/body integration.	
Reiki	Said to promote beneficial physical changes through the transfer of "healing energies" from healer to client.	Seek the services of a well-trained Reiki practitioner.
Polarity Therapy	Said to promote beneficial physical changes through the rebalancing of the body's electromagnetic fields.	Placement of hands on the positive and negative poles of the body.

Treatment	Primary Goal(s)	Practical Information
Reflexology	Said to promote healing through the stimulation of specific points on the feet that are believed to have a corresponding relationship to certain internal organs and body parts.	Seek the services of a well-trained Reflexology practitioner.
Shiatsu and Acupressure	Said to promote healing through the stimulation of specific points on the body corresponding to lines of energy called "meridians."	Seek the services of a well-trained Shiatsu or Acupressure practitioner.
Lymphatic Massage	To create movement of the lymphatic system in order to drain and cleanse system.	Intentional feather-like touch directly on lymph nodes and ducts in systematic manner.
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Using Water-related Therapies

Grieving people are often so overwhelmed with their loss that they avoid tending to the body's basic needs. Good health depends on keeping the body well hydrated. Water replenishes and cleans the body best. Drinking ample amounts of clean water is essential for persons under physical and mental stress. (Note: When grief inhibits an individual's hunger, try to substitute soups and broths. Avoid drinks that have a stimulating or depressant effect.) A Degriefer will always have a supply of water readily available in his or her treatment facility. In addition to drinking it, humans have found water promotes good health in other ways. Washing the body in clean water inhibits infection and the onset of illness. Showers massage tense muscles. Baths induce relaxation. Prolonged soaks in treated water can detoxify the body.

Different water temperatures produce different physical and mental effects. Warm temperatures dilate blood vessels and induce relaxation. Cold temperatures constrict blood vessels and provide stimulation. A Degriefer might employ either, as needed.

Baths and showers also offer a person a small period of uninterrupted personal time to escape the stresses of the day. To enhance the aquatic experience, pleasant fragrances or bubbles can be added to bathwater. Soothing music, fragrances and dim lighting create a calming environment.

TABLE 2. Water-related Therapies Used in The Degriefing Process		
Treatment	Primary Goal(s)	Practical Information
Drinking water	Replenishment of bodily fluids. Detoxification.	Drink 6-8 glasses of water a day.
Hot baths	To produce a state of overall relaxation.	Immerse your body in a bathtub filled with moderately hot water. You can include 1 cup Epson salt, sea salt or 3 drops essential oil.
Hot showers	To produce a state of overall relaxation. To release tension in specific muscles.	Shower under moderately hard spray in moderately hot water. To further release muscle tension, gently rotate head. Gently stretch arms up to ceiling, then, bending toward floor, touch toes.
Hot springs/hot tubs	To produce a state of overall relaxation. To release tension in specific muscles. To stimulate circulation. Detoxification.	Immerse your body gradually in hot water (up to 104 degrees maximum). Stretch out and float if possible. Whirlpool jets can provide massage. Mineral springs and baths can be detoxifying. (Note Soaking for prolonged periods can be weakening. It is advisable to rest for 10 minutes following a long bath.)

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Treatment	Primary Goal(s)	Practical Information
Cold soaks (for the feet and hands)	To immediately release nervous energy.	Fill a sink or bath with freezing cold water. Immerse hands and/or feet for 15 - 30 second periods.
Cold compresses (applied to forehead)	To reduce anxiety.	Put a cold wash cloth or icepack on the back of the neck or on the forehead.

Using Breathing Exercises

Proper breathing is another one of the essential ingredients for a healthy life. A grieving individual can gain immediate calm and strength from various breathing exercises, which is extremely useful in times of physical discomfort and emotional distress.

Unfortunately, many people in modern society habitually practice poor breathing techniques due to a sedentary lifestyle, poor posture, or constant sitting. Proper breathing techniques that optimize this basic human function can be taught.

It is highly advised that basic Yoga breathing techniques are incorporated into the daily healing program. Some, like alternate nostril breathing, may seem silly to perform, but hundreds, if not thousands, of years of human experiences demonstrate the beneficial effects of these Yogic practices.

TABLE 3. Breathing Exercises Used in The Degriefing Process		
Treatment	Primary Goal(s)	Practical Information
Inhaling through the nose/exhaling out the mouth	To reduce hysteria. To reduce neck and throat tension.	Breathe slowly and fully. Use the "Lion posture" (exhale with mouth wide open in a "soundless roar," tongue fully extended).
Inhaling through the nose/exhaling out the nose	To calm all systems.	Breathe slowly and fully. Focus on the sensation of air moving through nasal passages.
Inhaling through the mouth/exhaling out the mouth	To stimulate systems. To encourage cathartic release.	Breathe moderately fast.
Abdominal/ diaphragmatic breathing	To restore mind/body connection. To oxygenate system. To release tension in the stomach.	Breathe slowly and fully. Focus on rise and fall of belly.

Treatment	Primary Goal(s)	Practical Information
Advanced Yogic breathing	To restore mind/body/spirit connection. To rekindle "prana" life force. To increase physical energy and mental clarity.	Best to practice under supervision of a well-trained Yoga instructor. One exercise is rapid-fire breathing: repeatedly and rapidly contract stomach muscles to force breath out through nose.
Rebirthing	To restore connection. mind/body/spirit connection. To rekindle "prana" life force. To increase physical energy and mental clarity.	A one- to two-hour breathing exercise that "connects" in and out breaths. Can be performed while immersed in hot water. Best to practice under supervision of a well-trained rebirther.

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Using Postural Exercises and Yoga

Yoga is a blend of mental, emotional, and spiritual practices that are intended to create a harmonious balance in life. Hatha Yoga is the branch of this ancient holistic practice that is directed at the physical self. Hatha Yoga combines physical postures (asana) and breathing techniques (pranayama) to promote the healthy functioning of all bodily systems, including the circulatory, muscular, skeletal, nervous, digestive and lymphatic. Not only does the practice of Hatha Yoga relieve a variety of physical stresses, it is widely reported to release emotional blockages and improve mental clarity, as well. Many adherents realize positive and long-lasting spiritual transformations.

Incorporating these particular physical exercises in a somatic treatment regime has the added benefit of making the client a more active participant in his or her own healing. The practice develops personal intention, personal discipline and personal responsibility. Due to the wide range of benefits it induces, Hatha Yoga is very effective in alleviating many grief-related ailments.

Yoga is one of the primary somatic treatments incorporated in the Degriefing process for other, more practical considerations. It is a somatic treatment that is easily adapted to different levels of physical competence and endurance. There are appropriate exercises for people of all ages, shapes, and conditions. It requires a minimum of physical space and no equipment other than comfortable clothing and a floor mat (or towel).

On the surface, Hatha Yoga exercises seemed primarily designed to increase muscular flexibility: i.e., to help people "loosen up." This description is applicable in more ways than one. These exercises do seem to loosen grief's tight hold on the bereaved. As internal organs are stimulated to cleanse themselves, so are less tangible internal systems. Practicing Hatha Yoga can help a person clean out unwanted emotional baggage. Stretching and elongating the body can also help improve a person's selfimage. Experiencing a "bigger," taller feeling promotes self-confidence and self-assurance. Negative feelings of fear and anxiety are reduced. As mentioned previously, the breathing exercises that accompany the Yoga postures relax and energize. This further reduces a grieving individual's feelings of anxiety and apathy. Lastly, it is important to mention that during the practice of Hatha Yoga, an individual is ideally centered "in the moment." Being fully present in the moment and fully focused on the experience at hand (rather than being trapped in the past or worrying about the future) is a very useful skill for the grief-stricken to learn.

Karin Stephan, a Yoga instructor and counselor with over 30 years teaching experience, comments on how she sees grief affect the body and how Yoga can help, "In people close to me and in myself I saw many manifestations of grief express themselves through confusion, irritability, getting angry at the wrong person, self blame (that's the worst), tremendous fatigue, lack of will/energy, and deep, abiding depression."

"In addition, grief can have a major affect on our alignment and posture, since it is an emotion associated in Chinese Medicine with the lungs. I work a great deal with the five-element theory grounded in basic principles of Chinese thought, whereby each organs are paired, and each organ pair has a series of emotions related to that pair, be they negative or positive. As such, the lungs go with the large intestines, and while the large intestines are related primarily to depression in their negative states, the lungs are related to grief and sorrow. When we work with body alignment, posture and physical asymmetry, we are constantly affecting the way the upper body (where the lungs are housed) holds itself. So one of the ways to think about working with grief is to work on lung openers, lying over bolsters (stiff pillows, a tightly rolled towel, etc.) and twisting poses.

She continues, "During my mother's dying process, and for an entire year after she passed away, Yoga sustained me in a unbelievable fashion so as to not get too shattered by her loss. It kept my nervous system strong, it enabled me to have energy at those times where I might not have had the will to carry on, it kept me going in my teaching (which is about bringing other people up and out of their pain and sorrow) and it kept me having a positive attitude. I've seen the same thing happen with some of my students who have suffered a serious loss. Other students have had to stop Yoga for a while, so it all depends on the person."

Stephan elaborates, "Each person expresses grief differently and as such needs a different Yoga program. Some need more active poses to get them out of their lethargy and inability to move, some need quieting movements which help them not think too much."

She further observes that Yoga can elicit more than just physical reactions. "Grief takes many forms. It can be assuaged by certain Yoga poses and can be triggered by others. It depends on how acute the grief is, where the person is in their grieving process and how willing they are to bear with memories that may occur while practicing the Yoga poses. I've had students who, when they begin backbends and open their chests, have memories of deep grieving triggered unexpectedly."

Noted Yoga psychologist Antonio Sausys has combined his knowledge of body-oriented psychology and Yoga to sequence specific exercises such as "the reed" and "windmill" to deal with grief. "Yoga has proven to be a valuable and powerful tool to help clients move consciously through the many phases of the grieving process. The Yogic principle of posture and counter-posture helps our body/mind system recognize its relationship to change, and encourages us to seek inward for resolution."

Degriefers may choose to facilitate the Yoga postures by adjusting or supporting a client's limbs while they hold a pose. This obviously involves touching a client's body — most often an arm, foot, shoulder or torso. If the client allows it, it is an innocuous way to begin hands-on treatment for clients that are not comfortable being massaged. Once the client is comfortable with some human contact, and as they develop an increased level of body-awareness, they are more likely to be receptive to trying more intense touch-related treatments.