

TRAGEDY ASSISTANCE PROGRAM FOR SURVIVORS

TAPS[®]

Comfort and Support Since 1994 **MAGAZINE**

FOR THE LOVED ONES OF THOSE WHO SERVED & DIED





Comfort and Support Since 1994 **MAGAZINE**

TAPS Magazine is dedicated to the brave men and women who died while serving in the Armed Forces, and to their survivors. The quarterly magazine is written by surviving family members, friends, and care-giving professionals for those who are grieving the loss of their loved ones. We hope that you will find comfort, support, information, inspiration, and a sense of connection within these pages.

In accordance with our goal of compassionate care, TAPS Magazine seeks articles that reflect the theme: Remember the love, Celebrate the life, Share the journey. We accept articles of interest and depth that are hopeful in tone, yet truthful in emotional content. Your experiences or expertise can help us bring hope and healing to other hurting hearts. To submit an article to TAPS Magazine, please write to editor@taps.org.



TAPS IS HERE FOR YOU

If You Need to Talk, Call Us at
800.959.TAPS
or Visit Us at
WWW.TAPS.ORG



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ABOUT TAPS

WHO WE ARE

Tragedy Assistance Program for Survivors (TAPS) is a national nonprofit 501 (c) 3 Veterans Service Organization providing compassionate care 24 hours a day, 7 days a week, since 1994.

MISSION

TAPS provides ongoing emotional help, hope, and healing to all who are grieving the death of a loved one in military service to America, regardless of relationship to the deceased, geography, or circumstance of death. TAPS meets its mission by providing peer-based support, crisis care, casualty casework assistance, and grief and trauma resources.



TAPS

SUPPORTS the bereaved survivor through a national network of trained volunteer Peer Mentors: those who have lost a loved one in the Armed Forces, and are now standing by to reach out and support others when a death occurs.

EDUCATES survivors, professionals, and members of the military about grief and the traumatic effects following the sudden death of a loved one. TAPS provides reading materials, the quarterly TAPS Magazine, training workshops, webinars, and an extensive website at www.taps.org with links to other helpful organizations.

SPONSORS regional Military Survivor Seminars & Good Grief Camps for Young Survivors in locations across America. These seminars give survivors the opportunity to learn, grow, share, and help each other heal.

OPERATES a national toll free help and information hotline, 24 hours a day, 7 days a week with support available from TAPS' Board of Advisors: leading experts in the field of grief and trauma. If you are hurting and need to talk to someone, call 800.959.TAPS (8277)

HOSTS the TAPS Online Community of survivors, providing secure chat rooms, a weekly message of encouragement, and general as well as relationship specific forums.

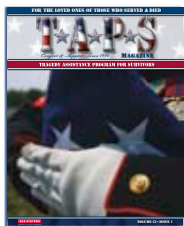


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COVER PHOTO BY
Gunnery Sgt. Mark Oliva

A folded national ensign is held carefully, prior to the burial of Major Douglas A. Zembiec, former commander of E Company, 2nd Battalion, 1st Marine Regiment. Doug was a team captain in the TAPS Armed Forces Eco-Challenge in 2001 and spoke at the TAPS Gala in 2002.



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Let Us Hear From You



Whether your loss was a son, daughter, husband, wife, sister, brother, mother, father, fiancé, fiancée, significant other, battle buddy, or friend

AND

regardless of whether the death you grieve was due to illness, accident, suicide, homicide or combat,

There is a place for you in our TAPS Family.

Please send us your thoughts, ideas, poems, journal entries, and articles.
Your family is waiting to hear from you!



Thanks for being there during the most difficult time of my life. TAPS will always have a special place in my heart.

Faye Crawford - Surviving mother of Sgt. Jay R. Gauthreaux, Cortland, NE

[As a Peer Mentor] I've come to realize how important and healing it is to connect with others who share our experience... While age and other circumstances may lead to varying needs, we also share the common experience of loss and of this journey we never wanted to take but find ourselves on. Thank you for the opportunity to be a part of TAPS.

Betsy Coffin - Surviving widow of IS&T Christopher D. Coffin, Alfred ME

I just wanted to let you know that your organization is a group of terrific people. I enjoy reading the magazine and hearing all of the various ways people have dealt with their own losses. Every one of those articles helps people to realize that they are not alone in their experiences.

Roger Meyer - Surviving father of PV2 Michael R. Meyer, Collinsville, OK

As we enter the new year, we hope to make *TAPS Magazine* more interactive with our readership. We are introducing a new mailbox for the magazine and would love to hear from you. Please send your comments and suggestions to:



editor@TAPS.org



Our goal is to make *TAPS Magazine* more effective, bringing comfort, connection, information, and inspiration to those who, in the words of Abraham Lincoln, have "laid so costly a sacrifice on the altar of freedom." *





T★A★P★S Care Groups

Debut in New Locations

TAPS Care Groups have been meeting across the country, allowing military survivors to come together locally and remember the love, celebrate the lives of our loved ones, and share the grief journey with those who truly understand.

Our Care Groups are informal gatherings of surviving military families, co-hosted by a TAPS Peer Mentor and a mental health professional. Grief can be very isolating, and TAPS Care Groups can help you find others who have gotten the knock on the door and received that folded flag. These groups are not therapy groups, but they bring help and comfort in a support group setting using the model of grief companionship. They meet at safe, easy-to-find locations with parking available.

TAPS Care Groups are open to all who are grieving the death of a loved one in the military, without regard to manner of death, relationship to deceased, or branch of military service. There is no charge to participants, and the meetings are set at a regular time and date that best accommodates those in attendance.

Consider joining a TAPS Care Group and share the journey of grief this year with those who truly understand.

If a TAPS Care Group isn't meeting near you and you'd like to start one, we can help you! Please contact Kyle@taps.org, for information on how you can become involved with TAPS Care Groups! ★

Care Group Locations

TAPS Care Groups have successfully met all over the country, including:

- ★ **Phoenix, AZ**
- ★ **Long Beach, CA**
- ★ **Washington DC Metro Area**
- ★ **Chicago, IL**
- ★ **Fort Campbell, KY**
- ★ **Boston, MA**
- ★ **Springfield, MA**
- ★ **Lathrup Village, MI**
- ★ **Bloomington, MN**
- ★ **Raleigh, NC**
- ★ **Philadelphia, PA**

TAPS Care Groups will be meeting in the next months in the following areas, with more locations to follow!

- ★ **Tampa, FL**
- ★ **Lexington, KY**
- ★ **New York, NY**
- ★ **Watertown, NY**
- ★ **Cleveland, OH**
- ★ **Fort Hood, TX**



To find a support group near you, visit www.taps.org and follow the link under Resources to “Find a Support Group Near You” or call 1-800-959-TAPS (8277).



Stop Look Listen

By Darcie D. Sims, Ph.D., CHT, CT, GMS

When was the last time you did nothing? Do you ever just sit anymore? Do you ever just lie on your back in new mown grass and watch the clouds dance by? Do you ever chase after butterflies, trying to give them a message to carry? Or dangle your toes in a pond or watch kids dash through a sprinkler?

Do you ever sit on a porch or patio and smell the grass, the flowers, the air? Do you even have a porch or patio and do you know what sitting means? Do you own a rocking chair and if so, when was the last time you sat in it? Have you read a book that wasn't non-fiction or technical in the last 10 years, 10 months, 10 days? Do you have magazine subscriptions that serve only to decorate your coffee table or have you actually read one of them, cover to cover, in the last year? Is there a clock in every room, more than 3 calendars in your life and how many watches do you own? Has the refrigerator become the

"Message Center" in your home? Do you have a cell phone, fax machine, pager, email and call waiting? Do you have a home office and an office you "go to"? Do you have your sprinklers on a water timer, your lights on a night timer and your life on a DayTimer?

Does everyone in your life have a computer? How many computers are in your home? Do you write Thank You Notes on email and when was the last time you actually spoke to your best friend? Do you have a checkbook and a time worn cookbook or recipe box or has your life become electronic? Is everything in your life computerized or supersized? When was the last time you let a popsicle melt inside your mouth or watch a caterpillar make its journey across the sidewalk? When was the last time you felt like soaking in a warm bath or standing in a steamy shower, mindless of the water bill? Are you on a fixed income both financially and emotionally? When did you stop dreaming and start running?

When did the world end and the nightmare begin? We're too busy or too tired or too hurt just to sit anymore. Sitting has become a lost art, cast aside

in the modern, fast food, quick stop, email, fax message world. Sitting has become a sin. Dogs sit. Birds sit (well, perch). Babies sit. Kids sit. Grownups DO. Even if you used to sit, you probably gave it up as you joined the bereaved world. Sitting just becomes too painful. Sitting leads to thinking. Thinking leads to remembering. Remembering leads, too often, to tears and who needs those?

Sometimes, in our grief, we try to escape the hurt and the horrible pain by picking up the speed of our existence. We add activities, places to go, things to do, as if keeping BUSY will keep the hurt away. We run faster and faster, trying to outdistance the memories, the pain, the very thoughts that keep us connected to the horror of our loved



one's death.
If we stop too long, if we sit, we might begin to remember and to feel again and what is there left to feel and remember except the hurt?

We become afraid of the dark, the daylight, the twilight and everything in between. We grow anxious for no particular reason. Our pulse quickens, our hands feel moist and our breath grows short. If only we could have a heart attack and die! But even that wish seems to elude us and we begin to realize we aren't going to die, but have to figure out how to live through all of this grief. It seems safer to keep moving. We're not the only ones running, however. The whole world seems to have speeded up lately. Is everyone running TO or FROM something? We seem to be chasing something or hiding from something.

Half the world seems to be too future-focused while the other half can't seem to let go of the past. IF ONLY and WHAT IF have become the watchwords of our culture. We find ourselves wallowing in self-pity and despair. We become caught in the web of grief and it seems too hard to break the threads of hurt. I sometimes think we are afraid to break those threads because we begin to fear that hurt is the only connection we still have with our loved one. We get too focused on what we've lost to ever inventory or treasure what we had and have. Sometimes we don't even look at the pictures because we only experience pain and renewed grief. Sometimes we miss WHAT IS because we only search for WHAT WAS.

Grow quiet. Be still. Learn to listen. Begin to hear. Somewhere deep inside us is the one voice we never listen to.

Somewhere deep within our beings are the answers to our fears, our prayers, our hopes. We spend so much time chasing after others' advice when right within ourselves lie the secrets of survival. Scientists call it instinct. Some call it faith. I call it truth. Each species KNOWS what it needs to survive and only when we can come to the quietness of ourselves, can we begin to hear.

We carry souvenirs of our hurts, each stored away until time to add them to the next hurt, thus piling up one hurt after another, all to be carried forever in our being. Each hurt adds a new layer to our outer shell and eventually we begin to resemble a rather large onion, made up of layer upon layer of hurt. These hurts leave scars, some big, some small, but all significant in their pain. Each scar must have a place in our being, so we become a carefully organized mass of layers, each with a symbol or with some "stuff" that represents it.

I'm not sure an onion is the perfect example of grief, however. After sitting for some time and thinking about all of this, I have decided that an artichoke is a better image of me. When you peel an onion down, removing every single layer (hurt), all you end up with are tears. An artichoke, on the other hand, has layers like an onion, except each leaf (layer) has a tiny picker on the end - just like life does. But when I peel an artichoke, removing each layer, when I finally get to the end, there's a heart. And that's right! No matter how hurried

I get, no matter how fast I run, or how far away from the inner me I get, there is still a heart. Whatever hurt we are carrying begins to weave itself into our very being and eventually becomes a part of our history - a part of us. It's in the heart that hurt is stored, but that is also where hope and healing begin.

So, sometime in your journey, take the time to just SIT. Turn on the answering machine and run away - to within. Dance in daisy fields; wade in icy streams and blow bubbles in the afternoon. Don't get lost in the hurry of today; don't get too busy with "stuff" to cherish what is within you. Nothing is lost. It is all there, waiting for you to retrieve it, hold it, experience it again and then, to let it place itself wherever it needs to, within you. We lose nothing, although some things seem far away.

You don't stop loving someone just because they died and we don't forget them just because we hurt a little less as healing begins to come. Finally, as we stop, look, listen and hear, the knowledge comes. *

Even though death comes, love never goes away. Grow quiet. Sit a spell and reconnect to the magic, the wonder, and the joy that dwells within. Trust me. You have it inside you. They loved us. We loved them. We still do.

Shhhh...

Love is trying to speak.

Bread Crumbs: Signposts Along The Way to Help Lead Us Out of the Forest

By Rich Edler

Bread crumbs are all we have. They are what is left behind after the death of our child. They are our memories and our mementos.

A bread crumb is the little answering machine cassette tape that says "Hi, it's me. Leave a message at the beep." We may be the only people with a cassette tape in our safe deposit box. It's not much, a few quick words, but it's his voice - a small crumb from the original.

A bread crumb is his favorite shirt that I still can't part with, so I wear it for good luck on special days. A bread crumb is the last Father's Day card he wrote in his own hand before he went off to college. *Thanks for everything Dad, especially the \$. My years at home were better than words can say and I never took anything for granted. I've had the best childhood anyone could have. Thank you for the ideas and opportunities I grew up with. I love you. Mark*

Bread Crumbs:

Disappointing pieces of the real thing.

I also think there is a second way of looking at this. Bread crumbs are a part of children's stories symbolizing signposts along the way to help lead us out of the forest - to find our way back to the land of the living, at least if the birds don't eat them

I like to think that the return from grief is like finding our own way out of the forest. The way is marked by great changes or signposts if we will only follow the bread crumbs. I think of them as gifts left behind by our children. They change us and they lead us out of the forest - but at a very different place than we first went in. Here are three I have found. Maybe you will find others.

Crumb One

We pick up a new sense of what is important and what is not. We suffer fools, superficial cocktail parties, and convenience friends poorly. We seem to develop an immediate impatience for the meaningless and the trivial. On the other hand, we pick up an incredible sensitivity to the world around us that we did not have before. We watch the news differently. We value people more than things. We live more in the moment and less in the future because we know that sometimes "tomorrow doesn't come."

Crumb Two

We find our real self on the road back. After the loss of a child and a period of emptiness, we do eventually come back. But we come back differently - and I believe better - than the person that entered that awful forest. With our new understanding of priorities, we listen again to "that still small voice" that we silenced in the race to climb



the career ladder or have the "perfect life" or do what our parents or teachers thought we "should" do. We find new courage to be the person we really are.

We begin living from the inside out instead of the other way around—from a sense of what is important, not what is expected. From a life of "what's in it for me?" to "how can I help you?" We discover new and compassionate friends, and sometimes drift away from old ones. We go from a thousand-name Rolodex of contacts to a handful of people we love.

We often also find our spiritual center and an inner peace. We become unafraid to die, at the same time we are beginning to live again.

Crumb Three

We pick up one more gift that I have noticed. We seem to get anointed with an ability to help someone else. You know what I mean. We didn't want it. We didn't ask for it. But we got it, anyway. It's almost like a giant invisible radar screen gets mounted on our head and we now pick up vibrations from other people in need. And we find that we really can help. People seek us out. People who don't know what to say when a child dies call us and ask: "Could you please go over?" We know we can and will, if only to listen.

I am reminded of the story of a little boy who arrived home late from school. "Where have you been?" his mother asked. "I was helping Timmy who broke his bike," the child answered. "But, Honey," the mother said. "You don't

even know how to fix a bike." "I know Mom," came the reply, "But I was just helping him cry."

Sometimes we can just help someone else cry, and that is enough. Unlike most other people, we can walk directly up to a bereaved parent or sibling, look them in the eye, and say, "I know how you feel." That is what TCF is all about. And in helping another person, we help ourselves heal too.

So, what do we do with these new gifts or bread crumbs left along the way for us?

★ *New priorities.* ★

★ *A new sense of self.* ★

★ *And the ability to help someone else.*

These are definitely good things. They did not come from the death of our child. Nothing good comes from the death of a child. As Rabbi Harold Kushner said in Seattle: "there is no silver lining." But there is change. These changes come after the death, when we recognize that we can't change what happened, but we can change what we do about it.

One day our surviving son, Rick, put his arms around us in a family hug and said: "Okay Mom and Dad, now that we are a family of three instead of four, we each have to live our lives one-third better." That, more than any other moment in our grief, marked our turning point.

My wife has a reoccurring dream. She is in Heaven many years from now and she greets our son. "Okay, Mom," Mark says, "So tell me everything you did after I died?" On that day she will be proud to answer: "I lived the rest of my life one-third better in your name."

I suspect most bereaved parents divide their lives into those two distinct stages of time: before and after the death. What we do in Stage Two we do in our child's name. And because we do it, the world after our child died is changed forever in some small way. And when the world in some small way is changed forever, then our child's life continues to make a difference.

And when our child's life continues to make a difference, he or she is never entirely gone. ★

Rich's son, Mark, died in 1992 and Rich's first book "If I Knew Then What I Know Now" is dedicated to him. His following book, "Into the Valley and Out Again" is the story of a father's grief after the loss of his son, and the changes in priorities and approaches to life that follow. Rich served on The Compassionate Friend's National Board of Directors for several years including as president of the board. He died in February of 2002.

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Death-Induced Mid-life Identity Crisis

By Betsy Beard *Surviving mom of SPC Bradley S. Beard who died on October 14, 2004 in Ar Ramadi, Iraq*

The unthinkable happened and life collapsed.

Life was simple when I was seven years old and people asked me what I wanted to be when I grew up. Of course I knew! The answer was easy: a princess or a movie star. From my egocentric and immature perspective, the choices were limitless because all I needed to do was magically choose a career path. Reality was no obstacle. There was no fear that my selection was impractical or impossible. The event was far in the future anyway and there was plenty of time to tend to the details.

At eighteen my answer was more hesitant. Who DID I want to be? How could I get there? Did I possess the necessary time, talent, and treasure? Life was uncertain, but like all the other high school seniors I had to come up with an answer before June. I had little knowledge and less experience. Nevertheless, I made a choice, attended college, settled into a job, married, and had children. Roles were precisely defined. I cook the dinner; you take out the trash. I bathe the children; you read them a story. I have this job; you have that. Life proceeded in a more or less sensible, stable direction. I was, after all, a grown-up.

And then the unthinkable happened. Our predictable, established life collapsed under the impact of the death of our son. Nothing made any sense. Nothing worked the way it should. Nothing brought immediate comfort or meaning or relief. I had the strange sensation that I was floating above myself and observing the activity that played itself out around our family. And then came the crashing feeling of falling helplessly, waiting for the jarring thud that would signify my arrival at rock bottom. Food tasted like cardboard. Relationships faltered. My job seemed meaningless, inconsequential, and trivial in the extreme. Confusion and despair were my persistent companions. I questioned my personhood. I questioned my role

in life. I wondered who I was and what I was supposed to do. I was already a grown-up and didn't know what I wanted to be anymore. I just knew that I didn't want to be me.

I had no answers to the questions that swirled in my head. My faith took an extended vacation. My life was shattered and could not (would not) ever be the same. My worldview crumbled.

Remember the images of September 11, 2001? Billows of smoke. Giant piles of rubble. Girders poking out in all directions. Blocks of concrete, tangles of wires, paper scattered like confetti, shards of broken glass. That's the kind of destruction I felt, right down to the panicked people running as fast as they could to get away.

The dust and debris were suffocating. For a long time I simply stared at the destruction, uncomprehending. My new job, although I didn't realize it at the time of Brad's death, would be to thoroughly sift through every component and building block of my life, picking and choosing which pieces would be used to make meaning of my "new" life. It would have been the worst folly to simply brush myself off and assume that I could carry on with business as usual in the middle of the wreckage. I had just witnessed complete destruction. I needed time to pick through the wreckage, sifting and discarding much of what I had thought was important. The process seemed to take all my attention, all my time, all my energy.



But until I examined the broken components of my life, until I determined what was worth salvaging, I could not begin to rebuild.

Much of the sifting required internal contemplation. Lonely work. Time-consuming work. Impatient friends departed. Other friends simply stood at a distance and watched the messy remodeling. A few amazing people, reminiscent of the brave firefighters of 9/11, actually moved toward my personal ground zero to bring help. Among them were my new friends at TAPS; people who knew first and the difficulty of the rebuilding process. I was also fortunate to have the help of a wise Vet Center grief counselor, who understood the process, asked the important questions, and afforded me the time it took to examine each piece of rubble and find some answers.

The last few years have been a time of groping blindly through the ashes and dust. Stumbling and sometimes falling. Using trial and error to try to find my way. Feeling uncertain and

awkward. Struggling with disorder and confusion as I participated in my own reconstruction and reinvention.

The monumental task of reevaluating priorities, realigning allegiances, re-negotiating principles, and forging a new identity still is not complete after four years. To be sure, some of the foundations for my new life are in place. Even though I am using some of the previous building materials, however, the structure is different. A profound and fundamental rethinking has touched every area of my life.

**A profound and fundamental rethinking
has touched every area of my life.**

Those who have been the most help are people who continued to simply be present in the disorder and confusion and mayhem of change. They didn't push. They didn't pull. They didn't theorize, or sermonize, or demonize. They simply accepted my condition and allowed me the time to adjust to the awful horror of burying my child. They gave me time to acknowledge

the loss and think through every aspect of the change brought about by my son's death. They patiently allowed me to make meaning of the random chaos.

What do I want to be when I grow up? I'm figuring it out. What do you want to be when you grow up? It will take a great deal of your time and energy to find out. It will require courage. Be patient with yourself. Allow yourself to ask all the questions you can think of. Try out different activities and attitudes to see if they fit.

If you are discouraged in your efforts of contemplating your future, making decisions about your direction, and figuring

out who you are now, consider getting help from TAPS or the Vet Centers of the Department of Veterans Affairs. Call TAPS to find out about Peer Mentors, National and Regional Military Survivor Seminars, and the TAPS Online Community. Look into the prospect of Bereavement Counseling at a Vet Center near you. *

Vet Center Grief Counseling

Bereavement counseling is assistance and support for people with emotional stress following the death of a loved one. It can include a broad range of transition services, including outreach, counseling, and referral services. The Department of Veteran Affairs (VA) offers bereavement counseling to parents, siblings, spouses, and children of Armed Forces personnel who died in service to our country, including family members of Reservists and National Guardsmen who died while serving on federally activated duty.

The VA's bereavement counseling is provided by the VA Vet Center program, which operates a system of 232 community based counseling centers. These Vet Centers are staffed by small multi-disciplinary teams of dedicated providers, many of whom are combat veterans themselves. There is no cost for VA bereavement counseling.

Services are obtained by contacting Readjustment Counseling Service at 202-273-9116 or by email, both of which are specific to this specialized service. RCS staff will assist families in contacting the nearest Vet Center. Often counseling can be made available in the family's home or where the family feels most comfortable.



Phone: 202-273-9116
www.vetcenter.va.gov

Free Stuff, Trips, Scholarships

How to Evaluate Opportunities and Not Feel Like You're Losing Your Soul or Your Mind

By Ami Neiberger-Miller

College scholarships, gift items, free trips, and financial aid for surviving families are offered by a number of organizations. There are many trustworthy organizations and honorable people trying to help families and make their lives easier and better.

Often these organizations will want to publicize the gift they've made to the family of a fallen hero. It's normal to state that you are grateful for the gift and to write a thank you note to the organization for it. Some organizations do not do any publicity at all about the gifts they make to families - they just want to help.

If you are comfortable with media attention, you might also consent to having your name in a news release that you read beforehand, or to appear at an event to accept a check. It's reasonable for these things to occur. You may have such a positive experience with the organization that you want to tell others about it. So you gladly appear in the media for the organization, talk to others about it, and allow them to use your photo in publicity.

Sometimes though, we hear horror stories about families being required to do publicity, as a condition of receiving help. In one case - a family needing immediate financial help was told by a "charitable" fund that the money could not be given to them before the bill was due, because the "charity" needed time to schedule a television interview. The "charity" refused to help the family unless they agreed to appear in the interview and to turn over family photographs to the "charity" for use in publicity before the check was cut.

Unfortunately, there are some organizations and individuals that exploit surviving families for their own ends, either because they want to raise additional money or they want to showcase their own good deeds. If you don't hand over your family photos, consent to a television spot, agree to your child being filmed or recorded, or allow the use of your picture in that



Consider offers that factor your well-being and grief journey in mind.

organization's fundraising materials, there won't be a check for that new roof, college scholarship, or plane ticket.

The organizations and individuals who make publicity a condition of helping a family are exploiting surviving families. Agreeing to publicity is an opportunity, but it should not be a requirement. An organization that demands a family give them a photo in exchange for a check may not be ethical, honest, or have your best interests at heart. Don't

trust anyone who makes agreeing to publicity a condition of receiving help. Here are a few tips to help you sort out the bad from the good:

Keep private things private. NEVER share your DD1300 form with any nonprofit organization or individual. Carefully consider any requests from the organization to share financial information. Ask how the information is used, and how confidentiality and privacy are protected.

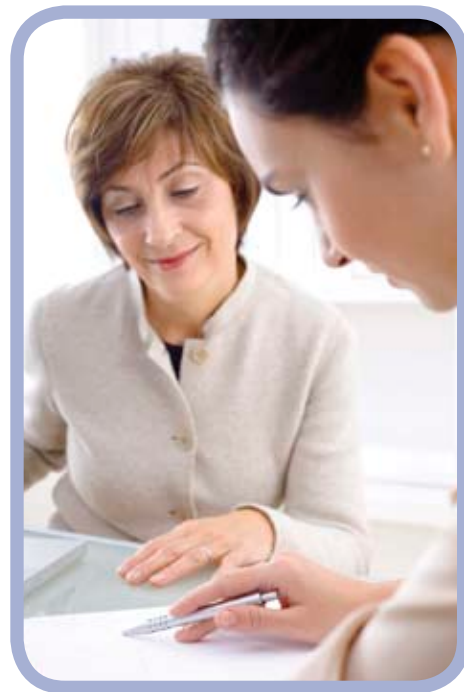
& Financial Aid

Communicate: Talk with the organization about any publicity planned. Find out how the organization would like to publicize the gift. They may want to list your child's name on a news release and share his or her college plans. They might want to share a photo with their board of directors or in their Annual Report to demonstrate how funds are being used to help real families. They may ask if you are comfortable talking with the media about how the organization has helped you, but talking with the media should not be a condition of the gift.

Express Concerns: You should be able to say if you are not comfortable with something the organization has proposed. An organization that has your best interests at heart and sincerely wants to help surviving families, will not seek to put you in a position that makes you feel uncomfortable or exploited. Here the attitude and communication lines are critical. If you can't tell them you're not comfortable, or feel forced, you should not be involved with the organization.

Ask Questions: Ask how photos and images of your family will be used. Find out how the organization intends to use pictures of your family. Will they be placed on their website? Will they send them to the media? Will they use them in fundraising materials, in a report to their Board of Directors, or their annual report? Will you be able to see how the images are used ahead of time, or will you be basically giving them all-rights for all time, so that this image could appear five years from now on their materials? Review carefully any documentation you are asked to sign about the use of your image and likeness, or the image and likeness of your children.

Consider Offers: Consider offers that factor your well-being and grief journey in mind. The nature of traumatic grief is such that the family that is comfortable talking with the media one day, may not be comfortable the next. That's why at TAPS, when we talk with a family about a media opportunity, we always give them the option to say no. We don't want to ask you to do something you are not comfortable with or up to. An organization that wants the best for you and your family, will feel the same way. *



Questions to Ask

Before Agreeing to Publicity About a Gift

- ★ What level of publicity am I, my child, or other relatives comfortable with being exposed to?
- ★ How will this organization seek to portray my family in the media? What do they hope to gain from media coverage?
- ★ Has the organization made agreeing to publicity a condition of receiving the gift?
- ★ Will the organization respect my wishes about publicity surrounding my family and this gift? Do I feel that I can say "no" to something I am not comfortable with?
- ★ Who will be my point of contact at the organization about how publicity is handled?
- ★ If the organization is holding a public event to present the gift to me, will I know ahead of time what they plan to say about my family? Will I be able to offer feedback about intended remarks?
- ★ Will my family be presented in a dignified and appropriate manner that I am comfortable with?
- ★ Will I be able to see a news release and offer feedback or edits before it is issued?
- ★ Will the organization get clips for me showing the news coverage about my family?
- ★ If something inaccurate or inappropriate is printed or broadcast about my family, will the organization contact the media to try to correct it?
- ★ Am I comfortable sharing family photos with this organization?

Explaining Suicide to Children

By SAVE (Suicide Awareness Voices of Education)



Suicide is a difficult topic to discuss. In addition to the deep pain of loss, there is still social stigma. Guiding your children in discussions of suicide will help to normalize the event and bring their feelings to light. If you are uneasy about dealing with the topic, or unsure of your child's ability to process the information, we encourage you to seek help from a mental health professional, chaplain, or trusted family friend.

~Your Family at TAPS~

The article below gives some suggestions and you can find more information online from many sources.

Often, our first reaction when trying to explain suicide to children is to hide the truth because we may think that it will be easier for the child to deal with. In fact, it is best to tell a child as soon as possible and to tell the truth.

HERE ARE A FEW TIPS TO MAKE THIS PROCESS EASIER:

- Make sure they are in a place they feel comfortable, safe, and secure.
- In addition to making the physical environment comfortable, it is best to have a comforting and reassuring tone, to be a responsive listener and make sure to give your support by both listening and giving affection.
- It is best for you to be honest and straightforward when initially talking to your child. Reassure them that they can come to you anytime to talk openly about his/her feelings.
- If you are honest and open, you are allowing them to trust you. They need to understand that their feelings will

be acknowledged and accepted and they need to know they can come to someone to receive support. It is important to have an open discussion about suicide because this minimizes stigma and educates them about alternative options to suicide and problem solving skills.

Children will have many questions and you should answer them in a truthful way. Answer the questions they may have in a way that fits the child's developmental stage and concept of death. For example, when explaining suicide to a younger child less than 10 years of age; discuss that their loved one died of an illness - a brain illness. You could say, "(name) had something like a heart attack," but then explain the idea of a brain illness or mental illness. Explain to the child that people die in different ways, whether from cancer, heart attacks, car accidents and that suicide is where the person did it to him or herself. Some possible explanations could be, "(Dad) had an illness called depression

which led to (his) death," or to explain that suicide is something that happens when pain exceeds any type of resources for coping with that pain.

It is important to understand that children will go through the experiences of grief like any adult would. Because it is a suicide, there are specific experiences that are different than in other types of grief. Children are especially vulnerable to feelings of guilt and abandonment. It is important to reiterate that the suicide was not their fault and that they will have someone to take care of them. They will not be alone.

More common experiences of grief for any loss are: denial, anger, bargaining, depression, and acceptance. Additional feelings and experiences after a suicide, especially in children might be:

Abandonment - they may feel that the person that died didn't love them

Guilt - they feel that the death is their fault or that they should have loved the person more, or behaved differently

Confused - they don't quite understand why this would have happened to someone they love

Fear - that they will die too or die by suicide

Anger - they are mad at the person who died, at God, or at everyone

Numb - they feel like they can feel nothing

Embarrassment - they are scared to see other people or to go back to school after the funeral

Worry - that someone else they love will die, or worry about who will now take care of them

Denial - pretending like nothing has happened

SOME EXAMPLES OF EXPLAINING WHY SUICIDE HAPPENS:

"He had an illness in his brain (or mind) and he died."

"His brain got very sick and he died."

"The brain is an organ of the body just like the heart, liver and kidneys. Sometimes it can get sick, just like other organs."

"She had an illness called depression and it caused her to die."

If the child or someone the child knows is being treated for depression, it is critical to stress that only some people die as a result of untreated or incorrectly treated depression.

A MORE DETAILED EXPLANATION MIGHT BE

"Our thoughts and feelings come from our brain, and sometimes a person's brain can get very sick. The sickness can cause a person to feel very bad inside. It also makes a person's thoughts get all jumbled up, so they can't think clearly. Some people can't think of any other way of stopping the hurt they feel inside. They don't understand that they don't have to feel that way, that they can get help."

Children need to know that the person who died loved them. Because of the illness, the person may have been unable to tell them that, or think about how the children would feel after his or her death. It is important to realize that these are normal feelings and thoughts associated with grief, especially after a suicide. Although this remains true, one must help to alleviate some of the stresses and emotions that come with coping. This can be done by what was mentioned previously, to talk to them right after the suicide and to continue an open conversation, for however long, to help with the grieving process.

In addition to telling the truth and having an open and supportive conversation, it is important to explain to the child that only some people die from depression and that not everyone who has depression has suicidal thoughts or dies by suicide. In some cases, the child could have depression themselves or develop some symptoms after the loss. It is important to explain that not all people with depression die by suicide

and that there is help for those that need it. Also, it is important to note that although an individual, perhaps their loved one, is receiving help for depression or other mental illnesses they can still die by suicide. You can explain this by stating that with other physical illnesses like cancer, a patient will receive the best care possible but cannot survive. Suicide can happen when the pain exceeds the amount of help one is receiving or when the best treatment hasn't yet been found.

After asking about suicide, a child may ask if suicide is good or bad. It is best to steer away from this conversation. Suicide is neither good nor bad/immoral; again it is where the pain is too much to deal with anymore. For example, some people or faiths may believe that suicide is a sin or an immoral act. It is important to explain that suicide is not a sin and that this kind of interpretation is incorrect.

Whatever approach is taken when explaining suicide to children, they need to know they can talk about it and ask questions whenever they feel the need, to know that there are people there who will listen. They need to know that they won't always feel the way they do now, that things will get better, and that they will be loved and taken care of no matter what. *

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SAVE (Suicide Awareness Voices of Education) was one of the nation's first organizations dedicated to the prevention of suicide and was a co-founding member of the National Council for Suicide Prevention.

The SAVE mission is to prevent suicide through public awareness and education, reduce stigma, and serve as a resource for those touched by suicide.

www.save.org





Dating After Being Widowed

By Margot Carmichael Lester



When your partner dies suddenly, all kinds of irrational fears rear their ugly heads. One of the most common is a belief that the next person you get involved with will meet a similar fate.

This is particularly true for folks who are dating again later in life ... and it can keep them from getting involved again. "There is a very real fear of winding up alone again, and that fear is absolutely normal," consoles Carole Brody Fleet, author of *Widows Wear Stilettos*. "However, were we to let fear rule our lives, we would never get into a car, get onto an airplane or let our children out of our sight regardless of their age."

Despite the overwhelming nature of these fears, they must be overcome. "While the fear of loss is normal, you nonetheless cannot let fear stand in the way of a future with a new love," Fleet notes. "You cannot let the fear of a possible repeat of the widowhood experience paralyze you. Instead, marvel at your strength and your open spirit to new love. Celebrate the fact that you are ready and willing to open your heart to new love, new experiences and the creation of new memories." How exactly, you ask? Here's advice.

♥ Get support

One of the best ways to get over your fears is to get support from friends, family, or even a bereavement group. "It's important to have someone grab your hand and lead you, pull you and push you—lovingly, of course," explains Sam Glenn, an author of *A Kick in the Attitude*. "For instance, my first experience on a roller-coaster, I had so much fear and the only thing I could do to overcome this fear was have friends and family lead me, encourage me, push me ... Uncle Bob may have even carried

me at one point. Needless to say, I gave them permission to be accountable to me to overcome this fear. When I wanted to run, they said no... and I am grateful they did. I would have missed out on a ride filled with so much joy."

You're going to have a lot of ups and downs on your way to new love. Surrounding yourself with people who want to see you succeed – and be happily coupled – is key to achieving your goal. Listen to them, and let them help you take risks.

♥ Make the right choices

Changing your mindset is also important. The best way to do that is to vow to make constructive choices. "You may not get to choose whether or not you go to work, pay the bills or sit in the traffic – but you do have a choice in how you are going to face every day – and ultimately, how you are going to face your life," Fleet says.

"Choose to refuse. Refuse to let fear, grief or suffering become the cornerstone of your existence. Choose to focus on the good things, starting with the fact that you are ready for or have found love again. Love is meant to be celebrated; not something of which to be afraid."

♥ Change your focus

You can also get relief from your fear by focusing on attracting love, instead of worrying about losing it. "It's not so much about meeting the right person, as it is about becoming the right person," Glenn notes. "I prayed for God to work on me so that I would be a gift to someone special. I worked on my character, my health, my finances, any issues that blocked me from being my best.

"I realized something special and this perception changed my heart. Life gets better when we get better and the starting point is our attitude."

Fear is a part of life, but left unchecked it can keep us from living—and loving.

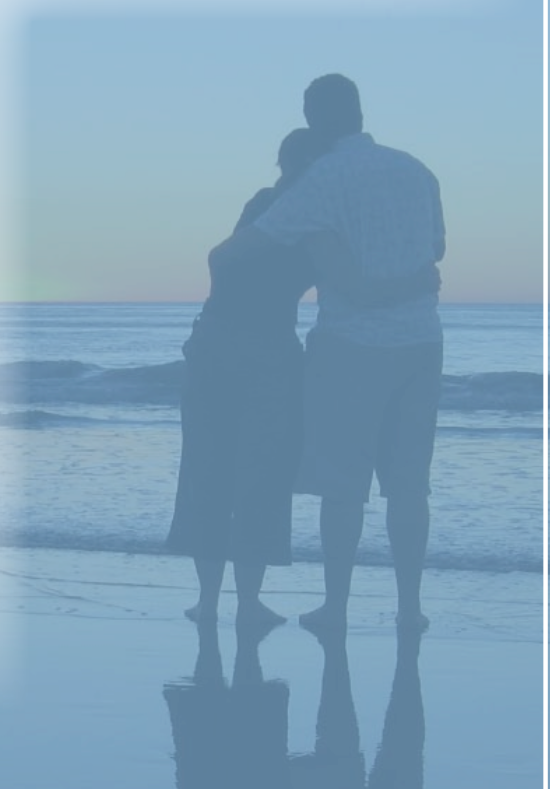
"Our attitude either gets in the way or creates a way,"

Glenn concludes. "So don't let the wrong attitude keep you from happiness and finding another love." *

Margot Carmichael Lester

A freelance writer based in Carrboro, NC. She also writes for *Monster.com* and *Go* magazine. Provided courtesy of *Happen* magazine.

 www.HappenMag.com





15th Annual
NATIONAL MILITARY SURVIVOR SEMINAR
&
GOOD GRIEF CAMP FOR YOUNG SURVIVORS



Memorial Day Weekend

May 22 to 25, 2009

Washington, DC

*Remember the Love,
Celebrate the Life, Share the Journey*



Memorial Day... a time of remembrance for the nation to honor those who have served and died... a difficult "holiday" for military survivors. Please join us in the nation's capital as we bring together survivors from across the country and leading professionals in the grief and trauma field, to share a weekend of understanding, hope, courage, and love. An atmosphere of care and support await you in a safe and supportive environment. This weekend is for you and your family. Meet other survivors, share your journey, and honor your loved ones.



NATIONAL MILITARY SURVIVOR SEMINAR

Memorial Day Weekend 2009

FREE AIRLINE TICKETS!

TAPS is proud to sponsor air travel for those who need assistance in attending the 2009 TAPS National Survivor Seminar & Good Grief Camp! For more information, please visit www.taps.org today. Space is limited and available on a first come, first booked basis. Register today!

Logistics

For anyone faced with the traumatic loss of someone who served in the military, TAPS provides a supportive atmosphere that offers comfort and nurtures healing. At the seminar, you can connect with others in similar situations, learn coping strategies to help, and hear how others find the strength to live again.

★ All events and workshops take place in the world-class Gaylord National Resort and Convention Center. The Gaylord National covers 41.7 acres along the banks of the Potomac River in Prince George's County, Maryland just south of Washington, DC.

★ The Gaylord National boasts four restaurants, two lounges, and a coffee bar, in addition to a spa, fitness room, and pool. Amenities include TV, high-speed Internet access, in-room safe, two telephones, refrigerator, AM FM/CD clock radio, and coffee maker.

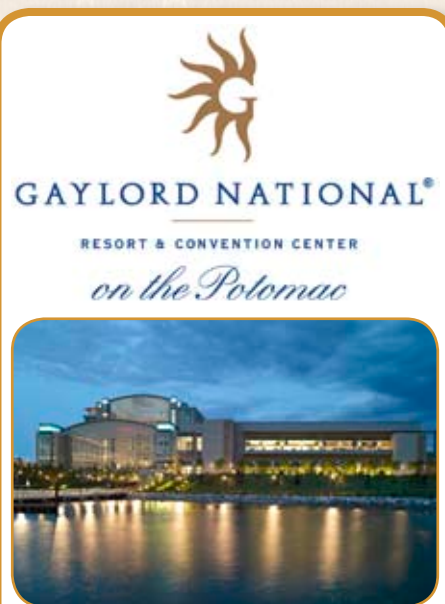
★ Gaylord National is a 15-minute drive from Reagan National Airport and within a 45-minute drive from Dulles and Baltimore Washington International Airports.

★ The seminar registration fee of \$185 includes seven meals, workshop materials, ground transportation to all special events, and a TAPS t-shirt. The registration fee of \$50.00 for each child attending the Good Grief Camp for Young Survivors covers meals, transportation, two Good Grief Camp t-shirts, a TAPS backpack, and other camp materials.

★ A limited number of scholarships are available if you are facing financial challenges. Please call TAPS for more information at 800-959-TAPS.

★ To make your reservation, sign up as soon as possible by visiting www.taps.org and clicking on "Gaylord National" to get our special conference rate of \$139 per day (If you have any problems or you find the room block is full, call us at 800-959-TAPS)

★ Events start with registration on Friday morning, so you should plan to arrive either on Thursday or early on Friday.



*Friendship is born at that moment
when one person says to another:*

"What! You, too? Thought I was the only one."

- C.S. Lewis

& GOOD GRIEF CAMP FOR YOUNG SURVIVORS

Memorial Day Weekend 2009

Events

If you have been affected by the death of someone in the military, whether it was a family member, friend, or fellow service member, you are warmly invited and encouraged to attend. Our seminar is also essential for all those who work directly with military survivors and who desire the very best information on military survivor issues from America's leading grief and trauma experts.

Workshops for Survivors

TAPS provides workshops that are designed to help you heal and cope with life after a loss. Our carefully chosen topics include understanding complicated grief in the military, coping with new family dynamics, special issues facing children, parents, and significant others when a death occurs, and recognizing post traumatic stress. We will also have gentle, supportive discussions offering a chance to share with others who are facing similar experiences.

Good Grief Camp for Youth

TAPS Good Grief Camp is the nation's only event that connects military children of all ages who have lost someone they love in the Armed Forces. At camp, the children learn coping skills, and develop their own peer network among new friends: kids who understand because they are facing a similar loss. The Good Grief Camp is full of fun and hard work. For children who are experiencing difficulty in dealing with the death of a parent, sibling, or other loved one, this is a wonderful time for them to begin to heal.

Special Events

The Seminar will take place near Washington, DC and we will be attending the special ceremonies at the Marine Barracks, the U.S. Capitol, and Arlington National Cemetery. There is also plenty of free time for relaxing and visiting with your newfound friends. Just let us know how we can make your weekend better!

Workshops for the Professional

If you work directly with military survivors, TAPS offers cutting edge professional training and workshops with the best grief and trauma specialists in the U.S. This is the only training opportunity of its kind in America for chaplains, casualty and mortuary staffs, family support groups, commanders and their spouses, military mental health personnel, medical staffs, and therapists.

Peer Mentor Training

For those who are at least one year beyond their own loss, and are ready to be there for others and offer support, we have a day of training on the Thursday prior to the Seminar. You will learn more about grief and trauma, gain basic helping skills, and become part of our TAPS Peer Mentor Team! *

TAPS Seminar Offers Survivors Comfort and Support ★ ★ ★ ★ ★ ★ ★ ★ ★ ★ ★ ★ ★ ★ ★

"When Maria, the love of my life was in killed in Iraq, I was alone. I had no direction, no ambition, no new memories and no life. Life stood still and nothing mattered anymore. I learned about TAPS through a fellow widower. I registered, attended my first seminar and was embraced and welcomed into a family of friends. I found a family of caring people who understood my pain and loss. I found people who would not allow me to walk the path of grief alone. Through TAPS, I've met many families who have lost a love one as I have. These families have accepted me as a friend who they can relate to in their time of grief. We have shared memories of pain and laughter in our loved one's honor. These memories would have stayed hidden if not for TAPS embracing me and others like me into a family of friends. At present, I receive or make a call to someone that I have met at TAPS on a daily basis. TAPS reached out to me with compassion and love in my time of need. Thank you for embracing me and allowing to be part of that family. Maria's spirit, love and memories live on through me. I'M NOT ALONE ANYMORE!!!"



The Myth of the Stages of

By Russell Friedman and John W. James

In 1969 the psychiatrist Elizabeth Kubler-Ross wrote one of the most influential books in the history of psychology, *On Death and Dying*. It exposed the heartless treatment of terminally ill patients prevalent at the time. On the positive side, it altered the care and treatment of dying people. On the negative side, it postulated the now infamous five *stages of dying*—Denial, Anger, Bargaining, Depression, and Acceptance (DABDA), so annealed in culture that most people can recite them by heart.

The stages allegedly represent what a dying person might experience upon learning he or she had a terminal illness. “Might” is the operative word, because Kübler-Ross repeatedly stipulated that a dying person might *not* go through all five stages, nor would they necessarily go through them in sequence. It would be reasonable to ask: if these conditions are this arbitrary, can they truly be called stages?

Many people have contested the validity of the stages of dying, but here we are more concerned with the supposed *stages of grief*, which derived from the stages of dying. As professional grief recovery specialists, we contend that the theory of the stages of grief has done more harm than good to grieving people. Having co-authored three books on the impact of death, divorce, and other losses, and having worked directly with over 100,000 grieving people during the past 30 years, our reasons for disputing the stages of grief theory are predicated on the horror stories we’ve heard from thousands of grieving people who’ve told us how they’d been harmed by them.

From Dying to Grief

Elizabeth Kübler-Ross was a fearless pioneer who openly took the medical profession to task for its callous disregard for the feelings of dying people. Somehow, over the years, the real virtues inspired by her work have been subordinated to the inaccurately named, largely imaginary stages.

During the 1970s, the DABDA model of *stages of dying* morphed into *stages of grief*, mostly because of their prominence in college-level sociology and psychology courses. The fact that Kübler-Ross’ theory of stages was specific to dying became obscured. Students who eventually became therapists, social workers, or doctors carried what they learned about the stages into their careers. The media also played a role in disseminating the idea that specific, inexorable stages of grief exist. When a tragedy makes the news, newscasters and alleged experts recite the DABDA model of grieving. Medical and mental health professionals and the general public accepted the theory without ever investigating its provenance or validity.

Refuting The Alleged Stages

1. Denial

In our interactions with grieving people we have never found one person who was in denial that a loss had occurred. We ask, “What happened?” They say, “My mother died.” There’s no denial that someone died. We’ve had a few people tell us someone died and then say, “I’m in denial.” We ask, “Do you mean the person isn’t dead?” They say, “No, but I’ve heard ‘denial’ is the first stage of grief.”



Potential Harm. Time can’t heal emotional wounds, but the word “stage” implies that time is a component. The suggestion to grievors that they’re in a stage of denial or disbelief can freeze them into inaction. They bury their feelings waiting for time to make that stage pass. Later they’re liable to be diagnosed with “complicated bereavement” and put on psychotropic drugs, which make it difficult or impossible for them to access the emotions they’ve buried.

Professionally Induced Harm. Many grievors tell us that a mental or medical health professional “strongly suggested” they were in the denial stage, when all they’d said was that they were having some difficulty since Mom died. Even after reiterating they were clear that Mom had died, the therapist insisted they were in denial, which created a breach of trust and safety. The grievors terminated therapy after one or two ineffective sessions, and left their grief unattended. We believe those professionals overlooked a cardinal rule of helping grievors, which is: “Hear what your client is telling you, as opposed to having your own agenda.”

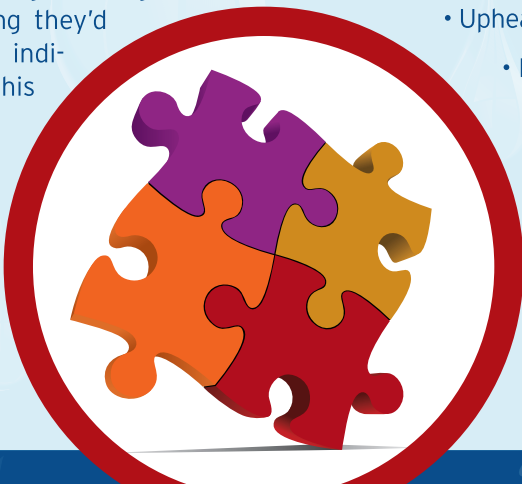
Dying, Death and Grief

2. Anger

When an elderly loved one dies at the end of a long-term illness, there's usually no anger in those left behind. Along with feelings of sadness, there may be a sense of relief that the suffering is over. Things do happen relevant to a death that can make us angry: anger at a disease or God; anger at doctors or hospitals or the drunk driver who killed our loved one; even anger at loved ones who didn't take good care of themselves, or who took their own lives. But anger is not a universal feeling when someone important to us dies, and therefore is not a stage.

Potential Harm. When anger is perceived as a stage, there are no actions the griever can take to end it. They must stay angry as long it lasts or as long as they're alive. As we said, stages imply that time is an element, so when time fails to end that stage, people re-create and re-live anger for years. Staying angry can have dangerous consequences, causing people to damage relationships, lose jobs, and worse, affect their health or restrict their will to live.

Professionally Induced Harm. Grievers repeatedly tell us the same scenario about *anger* as about *denial*. They report that a mental or medical health professional "planted" the idea they were in a stage of anger, when nothing they'd said would indicate that this was true.



3. Bargaining

Kübler-Ross' *bargaining* stage may make sense for someone diagnosed with a terminal illness. "If you'll just give me another chance, I'll take better care of myself," is a plea someone might make to whichever deity they believe in. But, it doesn't relate to the grief people feel when someone important to them has died.

Potential Harm. The death of a long-term spouse creates an incalculable amount of emotional energy. Those feelings are often accompanied by an overwhelming sense of missing the person and wanting the familiarity of their presence back. Missing someone who has been a constant part of your life for decades is normal and to be expected. Again, calling it a stage suggests a time frame, causing them to wait for that stage to end, which adds exponentially to their grief.

4. Depression

We're going to address *depression* in greater detail than the other alleged stages because it carries with it a great deal of confusion and potential danger for grieving people. Here is a list of reactions common to grievers that are also symptoms of clinical depression:

- Inability to concentrate,
- Disturbance of sleeping patterns,
- Upheaval of eating patterns,
- Roller coaster of emotions,
- Lack of energy.

One list fits both, and that's the problem. Are grievers clinically depressed? With very few exceptions, the answer is "no," and in those few cases only if they were clinically depressed before the death that affected them. Grief is the normal reaction to loss, but clinical depression is abnormal and requires different treatment. The line between *grief-related depression* and *clinical depression* has become hopelessly blurred, in part because the medical and mental health professions have adopted the non-existent stages of grief.

Potential Harm. It is normal for grievers to experience a lowered level of emotional and physical energy, which is neither clinical depression nor a stage. But when people believe depression is a stage that defines their sad feelings, they become trapped by the belief that after the passage of some time the stage will magically end. While waiting for the depression to lift, they take no actions that might help them. If and when they seek professional help, they use the self-diagnosis of depression to describe themselves.

Professionally Induced Harm. When medical or psychological professionals hear grievers diagnose themselves as depressed, they often reflexively confirm that diagnosis and prescribe treatment with psychotropic drugs. The question of drug treatment for grief was addressed in the *National Comorbidity Survey* (published in the *Archives of General Psychiatry*, Vol. 64, April, 2007). The survey's results revealed that as many as 25% of grieving people diagnosed as depressed and placed on antidepressant drugs, are *not* clinically depressed.



The fact is, no study has ever established that stages of grief actually exist, and what are defined as such can't be called stages. Grief is the normal and natural emotional response to loss.

The study indicated they would benefit far more from supportive therapies that could keep them from developing full-blown depression.

5. Acceptance

Acceptance, as it relates to psychology or emotions, is a vague term. Since there is almost never denial that a death occurred, the concept of acceptance is confusing, if not moot.

Potential Harm. One definition of stages cannot fit all people, or all relationships—in fact we don't think they fit anybody. For example, an 85-year old woman whose spouse of 62 years has died reports a different emotional picture about her life and response to that death, than does a 62-year old woman whose 85-year old father has died. Both involve 62-year relationships, but the idea that there could be a stage of acceptance applicable to both is illogical.

Another Non-Stage: Not Guilty As Charged

Of all the incorrect ideas and feelings that are defined as stages of grief, *guilt* is undoubtedly the most unhelpful. We've seen it in dozens of books and heard it in hundreds of lectures. As those authors and speakers define it, *guilt* more accurately represents things the griever wishes had been different, better, or more in relation to the person who died; rather than a sense of having done something with intent to harm the person who died, for which the idea of *guilt* might make sense.

Personal Danger. Grieving parents who have had a troubled child commit suicide after years of therapy and drug and alcohol rehab, are often told, "You shouldn't feel guilty, you did everything possible." The problem is that they weren't feeling *guilty*; they were probably feeling devastated and

overwhelmed, among other feelings. Planting the word *guilt* on them, like planting any of the stage words, induces them to feel what others suggest. Tragically, those ideas keep them stuck and limit their access to more helpful ideas about dealing with their broken hearts.

Conclusion

We understand that people engulfed in the aftermath of loss want to know what to expect and how long it will last. Such questions can never be satisfactorily answered. Since every griever is unique, there are no pat answers about grief. As much effort as we've put in to refuting the stages, Kübler-Ross herself rebuts them better than we can in the opening paragraph of *On Grief and Grieving*: "The stages have evolved since their introduction, and they have been very misunderstood over the past three decades. They were never meant to help tuck messy emotions into neat packages. They are responses to loss that many people have, but there is not a typical response to loss, as there is no typical loss. Our grief is as individual as our lives. Not everyone goes through all of them or goes in a prescribed order."

If there are no typical responses to loss and no typical losses, and not everyone goes through them or in order, how can there possibly be stages that universally represent people's reactions to loss?

The fact is, no study has ever established that stages of grief actually exist, and what are defined as such can't be called stages. Grief is the normal and natural emotional response to loss.

Stage theories put grieving people in conflict with their emotional reactions to losses that affect them. No matter how much people want to create simple, iron clad guidelines for the human emotions of grief, there are no stages of grief that fit every person or relationship. *



John W. James **Russell Friedman**

John W. James is the founder of the Grief Recovery Institute and co-author of The Grief Recovery Handbook, When Children Grieve, and Moving On. John did not wake up one morning 30 years ago and say "Grief, what a concept, I think I'll devote my life to helping people deal with it." John was propelled into this arena by the death of his three-day-old son, which caused him to question his desire to stay alive. At latest count, in excess of 1,000,000 people have benefited from the actions John developed to help himself deal with that death.

Russell Friedman is Executive Director of the Grief Recovery Institute in Sherman Oaks, California, and co-author of The Grief Recovery Handbook, When Children Grieve, and Moving On. He has written more than 100 grief recovery articles, which can be accessed at www.grief.net. Along with Institute founder, John W. James, Russell pioneered the establishment of 2500 Grief Recovery Outreach Program groups throughout the United States and Canada.

Excerpt from Skeptic Magazine, Volume 14 Issue 2, 2008 reprinted with permission. The full document can be found at www.grief.net. This article was written in response to the publishing of the Yale Bereavement Study (YBS): An Empirical Examination of the Stage Theory of Grief by the Journal of the American Medical Assn., in February 2007.



My Blanket of Grace

By Donna Ashley



*My pillow is wet with tears spilled in anguish.
My eyes are red and tired from crying.
As I lay here in total exhaustion
My lips part and I once again
find myself sighing.*

*I've watched his video again
And I miss him more than just an hour ago.
I can't get his laugh out of my mind.
I remember his eyes with that mischievous glow.*

*I see his hand raised in the "peace" sign
And in his other hand he holds his gun.
Just a quirk of a smile on his lips
As if to say, "I am ready to have some fun."*

*I hear "American Soldier" by Toby Keith
And Trace Atkins singing "Arlington"
And I hear his voice as he sings with them.
He loved his country so much, my Son.*

*Bagpipes playing "Amazing Grace"
Twenty-one gun salute; taps; folded flag...
Everything is as clear as if it was yesterday
And sometimes I am even more blue and sad.*

*When I think I am extremely strong
I am reminded I am very weak.
My mind looks for a place to hide
So I don't have to face the empty and bleak.*



*I cry out for help and God is so good
He picks me up and covers me with His grace.
Even though the pain is still there
Under His blanket I find my safe place.*

*So, I cry because of my loss
And I am comforted by my memories.
In my weakness I find my strength with head bowed,
Reaching out to the Father on bended knees. **

DRA

7/22/08

Donna is the surviving mom of CPL Benjamin Ashley who died May 24, 2007 in Balad, Iraq



G is for Grief

TAPS Partners with Sesame Street to Help Young Military Survivors

**TAPS is partnering
with Sesame Workshop!**



talk,

listen,

connect™

For years, Elmo and his furry friends have been teaching children from all over the world their ABC's, 123's and many other of life's important lessons. Now, with the help of some of his most lovable friends, the creative team at Sesame Workshop (the non-profit organization behind Sesame Street), and TAPS, Elmo will reach out to our nation's youngest military survivors.

Sesame Workshop developed their Talk, Listen, Connect series in 2006. It is a multimedia outreach program providing resources and emotional support to military families and their children. Two years, two projects, and a live outreach tour later, Sesame Workshop is embarking on Phase III of Talk, Listen, Connect: Coping with the Death of an Immediate Family Member.

The folks at Sesame Workshop hope that this project will be helpful in processing the anxiety, sadness, and confusion children experience following the death of a father, mother, or close family member. The multimedia kit, which will include a DVD, print materials, and online interactions, will give families the tools to support and comfort children through the traumatic grief process, reassuring them that they are loved and safe, and that together with their families they can learn ways of being there for one another and of having hope for the future. *



Join the T★A★P★S Good Grief Camp Mentor Team

Grieving children need to feel that they are being heard and understood... [when they] experience grief and trauma. They need caring adults to create an oasis of safety to explore these sensitive experiences (Linda Goldman, Common Signs of Grief, TAPS Magazine, Volume 13, Issue 3).

Each year members of the military step up to volunteer to spend Memorial Day Weekend with the children of America's fallen heroes at the TAPS National Good Grief Camp for Young Survivors in Washington, D.C. These volunteers receive a day of training to become mentors and learn about helping children cope with traumatic loss. Each mentor is then paired with a grieving child for the activities of the entire weekend.

"Having the chance to be with a teen survivor, who shares what it has been like for them since they lost their loved one, has been one of the most rewarding and humbling experiences of my life. It is an honor to spend time with the young survivors, some of the bravest individuals I've ever met." - Chad Weikel

If you are a member of the Armed Forces and would like to become part of an amazing weekend of care and comfort for these deserving children, TAPS can offer you an experience you will never forget.

For more information visit us online at www.TAPS.org, email Heather (Heather@taps.org), or call us at 800-959-TAPS. *

"I have been a TAPS mentor now for 2 years. During my tenure in Spec Ops we had casualties due to OEF and OIF. I saw TAPS as a way to give something back to the families that were left behind, hoping that the same support system would be in place for my children [if I were to die]. The families that I have encountered in TAPS have had an enormous impact on my life. They have allowed me to take a step back and put everything into perspective. I really enjoy mentoring the children and creating new friendships with all of them. They will never truly know how much the mentors actually learn from them! TAPS has been a life-changing experience for me."

- James Baird





Department of Veterans Affairs: Benefits for Survivors

The Department of Veterans Affairs (VA) has a variety of programs to assist the survivors of military personnel who die on active duty. Most of these provisions apply equally to those serving on active duty inside or outside a combat theater. Please contact the VA directly to determine potential eligibility in specific cases, and for current benefit rates. VA Office of Survivors Assistance, 202-461-7336



SUMMARY OF BENEFITS

Survivors receive certain payments or benefits regardless of whether the in-service death is due to combat, accident or disease, including:

- Burial benefits for the deceased service member, which include a grave site in any VA national cemetery with available space, perpetual care of the grave at no cost to the family, a government headstone or marker, Presidential Memorial Certificate, and a U.S. burial flag.

- Dependency and Indemnity Compensation for a surviving spouse, with additional benefits for dependent children.

- Life insurance, which most military members carry at the highest level, \$400,000.

More information about how VA services apply in individual cases is available from VA representatives at 1-800-827-1000.

CASUALTY ASSISTANCE

VA has a Casualty Assistance Program to give personal attention to surviving family members after in-service deaths, and to help them with benefit information and applications. A casualty assistance officer is designated at each of VA's 57 regional offices. These VA

officers work closely with military casualty officers to ensure timely assistance to beneficiaries.

RESERVISTS AND NATIONAL GUARD ELIGIBILITY

When a member of the Reserves or National Guard dies while federally activated or on inactive duty for training, the death is considered service-connected for VA death benefits. Activation of a National Guard unit by a governor alone in support of current security operations does not qualify unit members for these VA benefits, except life insurance.

MONTHLY PAYMENTS FOR SPOUSE AND CHILDREN

When a service member dies while on active duty, the death is considered service-connected unless it was due to willful misconduct. VA pays Dependency and Indemnity Compensation (DIC) to surviving spouses. In most cases, survivors' claims are processed within 48 hours of receiving all necessary paperwork.

In some cases VA can pay a benefit for each dependent child who is unmarried and under age 18, or up to age 23 if studying at a VA-approved school. Also, for a surviving spouse who has one or more dependent children below age 18, an additional amount is added to the monthly DIC from the date DIC entitlement begins. This additional amount is removed at the end of two years following the date DIC entitlement began or earlier if all the dependent children attain age 18.

Payments are increased if the surviving spouse is housebound or needs a home aide. The basic rate for survivors is adjusted annually and payments continue generally until the death of the spouse or remarriage before age 57.

Remarriage after age 57 does not affect benefits. Additional information about benefits for family members, to include low-income parents of the veteran, is available at:

www.vba.va.gov/bln/dependents/

LIFE INSURANCE

Most servicemembers and reservists take VA's life insurance coverage, Servicemembers' Group Life Insurance, although a few decline coverage. Most choose coverage at the highest levels and their designated beneficiary receives a payment of \$400,000. VA also offers beneficiaries free, personalized financial planning through a financial services company. More information about insurance benefits is available at: www.insurance.va.gov

BURIAL IN A VA NATIONAL CEMETERY

Members of the armed forces and veterans, their spouses and dependent children may be buried in any of VA's national cemeteries with available space. There currently are 125 national cemeteries across the nation and 86 have available grave space. More information is available at: www.cem.va.gov

BURIAL IN A NON-VA CEMETERY

Deaths of active-duty members are not covered by VA's financial burial allowance benefits, since the military services assist survivors with funeral expenses and the cost of burial in private cemeteries. If a family wishes to arrange burial in a non-VA cemetery, VA will provide a headstone or marker for the grave, Presidential Memorial Certificate, and a U.S. burial flag.

BURIAL IN A STATE VETERANS CEMETERY

Although not a benefit provided by VA, burial in a state veterans cemetery is an option available in many states for those who die on active duty. Some states have residency requirements and may impose additional limitations.

MILITARY FUNERAL HONORS

Upon request, the Department of Defense will provide military funeral honors. This arrangement typically is made by the funeral director. At least two uniformed servicemembers fold and present the flag and play "Taps" by a recording or a bugler. Additional information about funeral honors is available at:

www.militaryfuneralhonors.osd.mil

MILITARY BURIAL FLAGS

In the case of in-service deaths, the Defense Department provides a U.S. flag to drape the casket or to be presented at a memorial service. After the service, the flag is given to the next of kin.

HEALTH CARE

Health care benefits for the survivors of servicemembers killed in action in Operations Iraqi Freedom or Enduring Freedom are provided by the military. For more information visit:

www.tricare.osd.mil

EDUCATIONAL ASSISTANCE

When a servicemember dies on active duty, VA's Survivors' and Dependents' Educational Assistance Program generally provides up to 45 months of education benefits to the un-remarried surviving spouse, which must be used within 20 years of the date of death, or for children aged 18 to 26. This benefit may be used to pursue secondary school programs; associate, bachelor or graduate degrees; technical or vocational training; apprenticeships; and other types of training, including work-study programs. More information is available at:

www.gibill.va.gov/education/C35pam.htm

Refund of Servicemember's Unused GI Bill Contribution

If the deceased servicemember had contributed to the Montgomery GI Bill education program, the designated life insurance beneficiary or surviving spouse is entitled to a refund of

the money that was collected through payroll deduction but was not awarded in education benefits during the servicemember's lifetime. Most active-duty military members participate in this educational benefit program, which deducts \$1,200 from their pay at \$100 monthly during their first year of service.

HOME LOANS

Surviving spouses of military members who died on active duty or died from a service-related disability may be eligible for a VA-guaranteed home loan from a private lender. The loan may be used to purchase, construct, or improve a home, to refinance an existing mortgage or for certain other purposes. As with the program for veterans, VA guarantees part of the total loan, permitting the purchaser in many cases to obtain a no-down payment mortgage with a competitive interest rate. For more information on the VA home loan program visit:

www.homeloans.va.gov

PRESIDENTIAL MEMORIAL CERTIFICATE PROGRAM

The servicemember's next of kin receives a Presidential Memorial Certificate. Additional certificates are available for other loved ones upon request to VA. The gold embossed parchment-style paper is inscribed with the servicemember's name and bears the president's signature. It expresses the nation's gratitude for the deceased person's military service. *

Excerpted from the Department of Veterans Affairs, April 2008 VA Fact Sheet, VA Benefits for Survivors of Military Personnel Involved in Operations Enduring Freedom and Iraqi Freedom. For more information go to:

www.vba.va.gov/survivors



Peer Mentor Profile

The heart of TAPS is the Peer Mentor Support network— survivors who have been trained and are willing to offer support to other survivors who are more recently bereaved. At TAPS we strive to match survivors with Peer Mentors whose losses are similar, although ultimately wounded hearts find solace with each other, even when circumstances differ. TAPS is grateful to its Peer Mentors— those special people who are able to reach through their own pain to help others cope with theirs.

★ ★ ★ ★ Joseph Baddick ★ ★ ★ ★

Joseph M. Baddick joined the ranks of the TAPS family on September 29, 2003 when his son, Sgt. Andrew Joseph (A.J.) Baddick, died in Iraq. The humvee ahead of A.J.'s went into a canal at night with four soldiers in it. Two of the soldiers made it out on their own, and another was in imminent danger of drowning, but A.J. grabbed him and swam him to safety. When the driver of the humvee was swept into a culvert under a bridge, A.J. went in after him and both drowned. A.J. was awarded the Bronze Star for bravery and the Soldier's Medal for saving another soldier's life.

It wasn't until a year later that Joe and his wife heard of TAPS and began to receive the TAPS Magazine. As Joe was reading he became interested in an article about Peer Mentoring. The decision to take the training and become a Peer Mentor was made with encouragement from Joe's wife, Sheila, and daughter, Elizabeth. Sheila said she thought Joe would be good at it. Joe mentioned it to Elizabeth who told him, "Dad, you are the perfect person for that." In addition, Joe felt that A.J. would approve.

Joe's first face-to-face experience with the TAPS family was the TAPS Peer Mentor training in Washington in May 2007. He never had a peer mentor before becoming one himself. According to Joe, the best part of mentoring is

Sheila and Joe Baddick



"meeting others with the same unique set of circumstances from other parts of the country... just being available to talk to other fathers that are going through what I had already been through and letting them know that life goes on and that it will get better."

Part of Joe's healing came from returning to work shortly after his son's death, although it took much longer to get back to some semblance of normalcy. Joe felt it would help to stay busy, and he figured his son would not want him to let his life slide away. He admits he is an exception to the rule, moving forward with life in such a short time, "But I know my son died doing what he loved and he died a hero and that means a lot to me and it helped." Joe is now a retired Lieutenant for the Pennsylvania Department of Corrections.

Joe also concedes that he never really felt any anger, abandonment, "and not much depression either." Even so, mentoring takes its toll emotionally. "Some of the stories from other fathers can be hard to listen to because it sometimes can take me back to my son's tragedy. I spoke to another father whose son also drowned, so it kind of hit home for me. I guess my son would be glad I am doing this because he was always willing to reach out and help others. Through him I am doing just that." ★

★ ★ ★ ★ ★ ★ ★ ★ ★ ★

"I guess my son would be glad I am doing this because he was always willing to reach out and help others. Through him I am doing just that."

★ ★ ★ ★ ★ ★ ★ ★ ★ ★

Thank You, Joe!



Peer Mentor Program

Are You Ready To Reach Out to Others?

Do you remember your first encounter with someone who identified with your grief and loss? How it made you feel to finally be speaking with someone who understood and didn't turn away from your pain and your tears? Are you at a point where you feel you are ready to take on that role and be that beacon of hope for new survivors?

“Dare to reach out your hand into the darkness, to pull another hand into the light.”

~Norman B. Rice

If you are a military survivor with a heart for the TAPS mission and a willingness to reach out to others, TAPS invites you become a Peer Mentor. On May 21, 2009, in conjunction with the TAPS National Military Survivor Seminar in Washington, D.C. a one-day training will be held for those wishing to become a part of the hope and healing that TAPS offers to those who need the comfort and support of someone who has walked the road of grief. If you are at least one year beyond the death of your loved one, we encourage you to join us!

What is a Peer Mentor?

Webster's Dictionary defines a peer as one who is of equal standing with another, especially one belonging to the same societal group based on age, grade, or status; a companion. Mentoring is a role that many of us already fill on a daily basis, through work, family, school, church, or other social outlets. Mentoring involves sharing with others in an area in which we have knowledge. Being a peer means we walk alongside, neither pulling nor pushing.

Why does TAPS have Peer Mentors?

Peer Mentors are the heart of TAPS. Through our Peer Mentoring program we are able to reach out and individually touch many whose lives have been shattered by the loss of a loved one serving in the military. Although each of our Peer Mentors has lived through a distinct and separate tragedy, all of them share one quality that is essential in any helping organization. They all want to use their experience and compassion to help others walk the road of grief and healing.

How can you tell if you are ready to become a TAPS Peer Mentor?

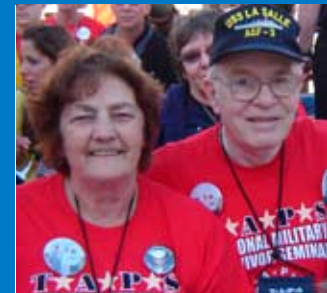
Ask yourself the following questions:

1. Do I have a desire to help others?
2. Am I emotionally prepared to listen to another person's story without reopening my own wounds to the extent of becoming debilitated?
3. Have I reached a point in my own healing where being present for others would further my own healing and give me a sense of fulfillment?

Giving our time, listening with an open heart, sharing our stories, and simply being there for another person gives purpose to our lives. It is a way in which we can honor our loved ones and keep their memories alive. In sharing our hearts with new survivors, we not only assist them, but help ourselves as well. *

“We cannot hold a torch to light another's path without brightening our own.”

~Ben Sweetland



Each Peer Mentor comes to TAPS in his or her own time. Let your heart guide your decision. If you feel you are ready to help others who are traveling a similar grief road, write to info@TAPS.org for further information.



Exercise Can Help Your Grieving Heart

By Jackie Syverson, BSN, RN

Jackie Syverson is the surviving spouse of MAJ Paul R. Syverson. Last year, she taught Zumba at the TAPS National Military Survivor Seminar as well as the Good Grief Camp in Washington, DC.

Have you ever heard of the “runner’s high”? Ever wonder why people who exercise regularly seem to be in a good mood and have an extra bounce in their step? That they never seem to get sick? Is it just that these people have such amazing lives that they feel motivated to exercise and keep in shape? How can we possibly ever hope to achieve that status when we have suffered such an incredible loss?

The loss of a loved one is a shattering experience. Losing someone to an unexpected military tragedy compounds the effect because it is such a public loss. Suddenly you have lost one of the most important people in your life. Along with the emotional effects of the loss, grief also affects the body physically. The stress of the grief is a continuing process and the body can “forget” to operate the way it should.

In addition to lack of sleep and poor eating patterns due to the loss, the

body begins to produce increased amounts of cortisone which affect the thymus gland, leading to a decreased functioning of the immune system. This makes the grieving person more susceptible to illness. It is common to suffer minor infections and illnesses during times of bereavement. Lack of sleep, loss of appetite, and a general sense of feeling ill are common responses to grief and loss. There are many ways to help deal with the symptoms of grief and loss. Trained therapists, support groups, and medications are all good methods to help deal with the loss. But perhaps one of the most commonly overlooked ways to help with the loss of a loved one is physical activity.

The “runner’s high” is not merely the pleasant feeling that one gets after a good workout. It is an actual physical response that occurs during exercise due to endorphin release. Endorphins are hormones released into the bloodstream from the pituitary gland. These hormones attach themselves to receptors in the brain that affect our perception of well being. The main purpose of endorphins is to help the body withstand and overcome mild to severe exertion. Endorphin release can also help with other physiological functions like appetite suppression, increased immune activity, mood elevation, increased memory retention and learning, and regulation of sleep patterns. Added to this is increased cerebral blood flow and improved muscle relaxation that accompanies physical fitness. Recent research has shown that exercise can be just as effective as antidepressant use, and this

effect tends to actually increase over time with regular activity!

Now you may be asking yourself how on earth you are expected to exercise when you can barely get out of bed in the morning. The last thing in the world you want to do is go running or join a fitness class. Just as there is no right or wrong way to grieve, there is no one-size-fits-all exercise program. We must each walk along our own path to move forward and continue on in our personal journeys. The important thing is that you choose an activity that works for you and start with a small goal in mind. Confucius said, “A journey of a thousand miles begins with a single step.” The purpose of this article is to encourage you to take that first step.

On the first day of the rest of my life when our commander and chaplain showed up at our door to notify me of my husband Paul’s death, I was a 28-year-old mother with a 7 week old daughter and a 7 year old son. In those first few weeks, people were everywhere. I remember being tough and strong all day long until they would leave and I could retreat into my room and cry for hours. But I woke up one morning and realized I just couldn’t face another day with people all waiting for me to break down. So I told everyone I was going for a walk. They were shocked that I wanted to go alone, and had a very hard time allowing me to leave. Even so, I knew I needed some time to myself, so I opened the door and stepped outside. I cried the whole way, but by the time I got home, I was actually beginning to feel better. It was the first time I had experienced a glimmer of hope in weeks.





I began getting up every morning to go for a walk. Usually I would cry, but I was walking too, so I was getting some exercise. In my 'other life' before Paul died, I had been an avid runner. Paul used to train with me and cheer me on during races. I loved crossing the finish line and having him and our son waiting there to hug me. The first day I actually ran, I missed my running partner dearly, but gained a little bit of strength discovering that I could still run even after such a loss. I did what a lot of widows do, and decided to run a marathon. I trained hard and when I crossed the finish line, I experienced

the euphoria of my accomplishment and the intense depth of my loss all at the same time. It was a huge turning point for me and I realized I could do anything. I didn't have to 'get over' Paul's death. I could move forward and accomplish goals without Paul, yet still have a part of him with me in everything I did.

This set me free to try new things. I took a fitness class called Zumba and was hooked. Something about the music, the dancing, and the happy atmosphere of the class spoke to me. Running was great, but I had never felt the joy I felt after taking a Zumba class. I decided to get certified in group fitness and Zumba and begin to share it with others. For me, Zumba is a stress reliever. I can have a

horrible day, but as soon as the music starts, my troubles fade away, at least for an hour!

So does exercise work for everyone? Although running and dancing work well for me, many people find the calming effects of yoga or the core strengthening results of Pilates to be beneficial. Just getting out and walking can work wonders for your mental and physical well being. If you are thinking about beginning an exercise routine, consult with your doctor about the best options for you. Each grief journey is different and each of us has to navigate our own way along the path, but a few minutes of walking, running, or even dancing, can help to make it a little easier to get down that road. *



Thank You

THE IRAQ AFGHANISTAN DEPLOYMENT IMPACT FUND

TAPS wishes to acknowledge the support from The Iraq Afghanistan Deployment Impact Fund, which was established to address the unmet needs of men, women and families affected by deployment to Iraq and Afghanistan, and is administered by the California Community Foundation.

We are grateful for your support!



T★A★P★S Families Attend Presidential Inaugural Events



Hundreds of families of those who have served and died attended official events for the presidential inauguration—including the “We are the Future” concert for children, the swearing-in ceremony, and the Commander-in-Chief’s Ball. Among the families of the fallen attending official presidential inaugural events were widows, parents, children, siblings, and fiancés. ★ ★ ★ ★ ★

First Lady Michelle Obama and President Barack Obama dance at the Commander-in-Chief’s Ball. Photo taken by Eric Herzberg, father of US Marine Corps Lance Corporal Eric Herzberg.

One of ten official inaugural balls, the Commander-in-Chief’s Ball honored our country’s active duty and reserve military, as well as the families of our fallen heroes and wounded warriors. It continues a tradition begun by President George W. Bush in 2005.

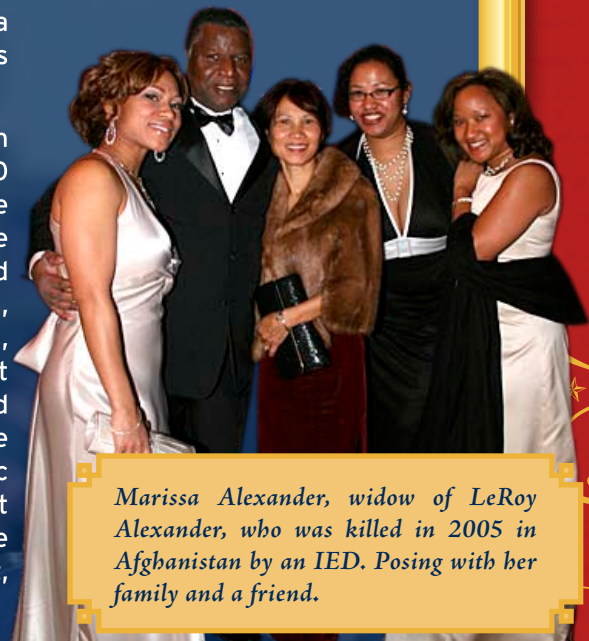
During his remarks at the ball, President Obama said, “I also want to take a moment to honor the families of the fallen, who are here with us tonight. You have given so much to this country. I know that your loved one’s sacrifice has been your sacrifice as well. Please know that you are in our thoughts and prayers - today, everyday, forever.”

For three families the day was especially bittersweet. Their loved ones died exactly two years before. “The swearing in of the first

African-American president on the anniversary of my husband’s death gives this day new meaning. My children will be able to remember this anniversary as a tribute to the courageous actions of their dad and so many others who put their lives on the line.” said Linda Lake, widow of Sergeant First Class Floyd Lake.

For others, connecting with service members and the 300 wounded warriors in attendance was important. “There were heroes everywhere we looked - Medal of Honor recipients, Gold Star family members, wounded warriors, and current members of our military,” said Eric Herzberg, father of the late Marine Lance Corporal Eric Herzberg. “Being part of an event like Tuesday night helped me to forget, for at least one night,

how much I have lost personally and focus instead on what a great nation we are. I miss my son terribly but I’m very proud that he is now forever a part of our country’s heritage and legacy.”



Marissa Alexander, widow of LeRoy Alexander, who was killed in 2005 in Afghanistan by an IED. Posing with her family and a friend.



Hero Ball organizers and beneficiaries (from left: Elaine Rogers of the USO, Chris Larsin of Citizens Helping Heroes, Bonnie Carroll of TAPS, Chris Thompson of Citizens Helping Heroes).

© Citizens Helping Heroes, Inc.



TAPS Supporter Gary Morris performs at the Hero Ball for TAPS.

© Citizens Helping Heroes, Inc.

Brooke Nyren with George Lopez at the Commander-in-Chief's Ball. Brooke is the daughter of US Army Staff Sgt. Nathaniel Nyren, who was killed in Iraq in 2004 when a civilian vehicle struck the one he was riding in.



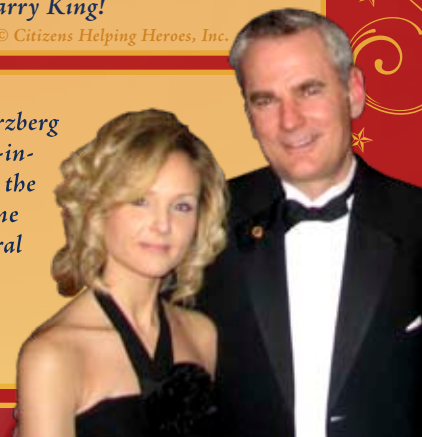
Chairman and Mrs. Mullen backstage at the Hero Ball with Larry King!

© Citizens Helping Heroes, Inc.



Linda Lake, spouse of US Army Sergeant First Class Floyd E. Lake, with family members Sherice Germain and Petra George-Clement at the Commander-in-Chief's Ball, which coincided with the two-year marker of her husband's death in Iraq. Three families who lost their loved ones in the same incident in Iraq on January 20, 2007 when a helicopter was shot down were in attendance at the ball that night, including the families of Staff Sergeant Darryl Booker, and the family of Col. Paul Kelly.

Wendi and Eric Herzberg at the Commander-in-Chief's Ball. Eric is the father of US Marine Corps Lance Corporal Eric Herzberg.





The Tragedy Assistance Program for Survivors is blessed to have friends who are generous in their support and untiring in their devotion. They come alongside us as partners in meeting the mission of comforting and supporting those who grieve. We are honored to call them Friends of TAPS, and are grateful for their assistance.



Thank You to our friends at BAE Systems!

BAE Systems, a premier global defense and aerospace company, is providing support to TAPS to help us in our mission of comforting and supporting those grieving the death of a loved one in military service. We greatly appreciate not only the generous financial gift, but also the personal heartwarming touch provided by BAE Systems employee involvement. In addition to the corporate donation, we are pleased to accept hands-on help in TAPS National Headquarters from BAE Systems employees.

"This personal touch is much appreciated," notes TAPS founder and chairman, Bonnie Carroll. "We welcome the help and support offered by BAE Systems," she said. "Their generous gift and hands-on support will enable us to fully fund our quarterly publication, provide support for our programs to help grieving families, and offer comfort and care during difficult times." BAE Systems' donation will help support TAPS programs including the upcoming National Military Survivor Seminar and

Good Grief Camp for Young Survivors in Washington, DC over Memorial Day Weekend, and will also fund the publication of TAPS Magazine for a full year.

"BAE Systems is humbled by the service of our men and women in uniform, and by their families who also serve," said Walt Havenstein, President and CEO of BAE Systems, Inc. "We are honored to support TAPS in its mission to meet the needs of military families surviving the loss of fallen heroes." *



Walt Havenstein

Walt Havenstein is a graduate of the U.S. Naval Academy and the Naval Postgraduate School. He served on active duty in the U.S. Marine Corps from 1971 to 1983, specializing in tactical communications and systems acquisition management, and completed his career in the Marine Corps Reserve in 2001. He is a member of the Marine Corps Association, Navy League, and the Armed Forces Communications and Electronics Association. He is also a member of the Defense Advisory Board for Employee Support of the Guard and Reserve.

Instrumental in improving safety for frontline troops, BAE Systems designed and developed a more effective body armor vest that was chosen as the standard-issue body armor for the U.S. Army. BAE Systems designed and delivered more than 5,000 Mine Resistant Ambush Protected (MRAP) vehicles in 22 months to better protect troops in battle, among them more than 100 modified MRAP ambulances which are now on the roads in Afghanistan for transporting wounded troops. Thanks to improvements made by BAE Systems engineers, these MRAP ambulances make it safer and easier to get wounded servicemembers to medical care.

"The need to care for those left behind when someone dies in service to America is great," said Carroll. "Traumatic loss and grief cannot be dealt with overnight. The effects can last for years as a military death re-shapes the lives of those left behind."

Thanks to the support of BAE Systems, more survivors will know that they don't walk alone."



Thank You

Our Sponsors



*Ben Stein
and Alexandra Denman*



**Dolphin Management
III, LLC**



**HUMANA MILITARY
HEALTHCARE SERVICES**
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