

# Finding new languages for loss

How can we help clients express the inexpressible in this time of coronavirus? By **Sasha Bates**

I can feel a familiar physical tightening in my chest, and a similarly familiar emotional fluttering making itself felt in the same region, only deeper. Flickering at the edge of my consciousness is a thought swimming its way to the surface. It takes a few seconds to get there; then I realise - I've been here before. This is grief, once again assailing me, and evoking the same overwhelming and seemingly inexpressible feelings I had when my husband, Bill, died. Like coronavirus, that cataclysmic event also came out of nowhere and devastated the world I knew.

The traditional 'stages' of grief can be discerned among the ever-swirling vortex of emotions overwhelming many of us right now: denial, anger, depression, bargaining - maybe not yet acceptance. But I can also spot what I prefer to call the shapes or states or sensations of grief as I identify them in my book, *Languages of Loss*, written in the wake of Bill's death. During those unbearable early months, I realised how inadequate words are when grief plunges us into a visceral, whole-body, whole-lifestyle, whole-existential identity crisis. I was not unaware of the irony that my twin professions of journalism and psychotherapy rely so heavily on the use of

language - something that was now eluding me. I felt embarrassed to think of all the grieving clients I'd seen over the years whom I'd misguidedly tried to help with such an inadequate tool as language at my disposal.

As therapists, we are going to be seeing clients for whom loss figures hugely in the coming months, if not years. How are we to help them express something so inexpressible, particularly when we are ourselves gripped by our own losses? We don't have to have lost a person to coronavirus - although many of us will have - to nevertheless be experiencing grief for the loss of our lifestyles, certainty, freedoms, friends, favourite coffee shops and restaurants and so much more - losses big and small. Many of us are even grieving the loss of our physical health, fitness and appearance,

and possibly even a sturdy grasp on our mental health, alongside the more concrete losses. We need to find ways to express this grief to ourselves before we can help our clients express their own.

Because, of course, as therapists, we know only too well that grief does need to be expressed, allowed, given voice to, if it is not to fester and go underground, hidden deep beneath our usual defences - defences that coronavirus may well now be fortifying. But, given the inadequacies of language, given that we are now alongside our clients as never before in terms of feeling their pain, how can we address this? How can we help ourselves to express what we are feeling, and how then can we help them?

## Expressing grief

In writing *Languages of Loss*, I realised that words are only one form of language. There are many others and in grief we need access to them all. There is the language of the body, of music, of art, of spirituality, of dreams. There is also the manipulation of language itself in order to communicate differently and more indirectly - manifesting as poetry, storytelling, visualisation, imagery, myth and metaphor. ►

**'Words are only one form of language... in grief we need access to them all'**

SHUTTERSTOCK



*Languages of Loss* became my way of making sense of senseless loss and expressing inexpressible emotions, although I didn't realise it at the time. Looking back, it seems almost Kleinian in inception - a projectile vomiting out of the primeval, nameless, unbearable dread inside. I just had to get the 'poison' out at all costs and as quickly as possible and doing so onto a page was more acceptable than onto a person. A calmer way of saying this was that I was using the research-proved, useful grieving strategy of journalling to clarify my thoughts. Which is also true, but only with the benefit of hindsight. In the moment it definitely felt more like vomiting, with the bulimic desire to purge and so bring about the blessed relief of emptiness - the blank page my toilet bowl.

To torture this metaphor further, you may well have to be that toilet bowl for your clients, if they are able to use you in such a way. But many can't, so you can also offer them a blank canvas (literal, not Freudian, for once) if they are artistic; toys, playdough or sand if they are regressed; instruments if they are musical; movement if they tend more to the physical. Better still, offer all these together and more. I am not saying that we all have to turn ourselves - even if we could - into art or music or movement therapists, but what we can do is encourage clients to explore which modality, which 'language', best enables them to creatively express their grief. Words may not be their thing.

For me, words actually are my thing, but they often eluded me in my moments of deep crisis. I turned to the grief theories for help - for a blueprint, a guideline, a map for to how to 'cope'. But there I was met with a barrage of unhelpful words. Words that felt cold, clinical, far removed from what I was feeling. Words like stage, task, journey, getting over, path,

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acceptance, resolution. These landed on stony ground.

And then the ground itself came to my rescue. I started walking in nature - another tried-and-tested therapeutic suggestion that really did help - and from out of these twin pillars of support, the journalling and the nature walks, a different form of language started to emerge. Before training as a therapist, I was a film maker. My visually creative side had gone underground since my change of career, but I found it resurfacing. My swirling feelings started to take on a visual shape. I started to 'see' my grief in filmic, almost hallucinatory images. Taking refuge in symbolism and imagery, I was better able to express and therefore get a grip on the turbulence of my unruly feelings. 'Stages' and 'tasks' were replaced with more amorphous, unpindownable words like 'shape' and 'state'. I used an ongoing visualisation of being tumbled in an ocean to convey the different states through which I continued to circle. This oceanic visualisation formed the backbone of my narrative and provided the chapter headings for the book - implosion, scattering, flailing, floating, balancing, sailing and swimming.

Of course, it would have been neater to end that sequence with 'landing', but for me that suggested too much closure. I don't think we do ever land. Apart from the initial unchangeable fact of Bill's death - the implosion of chapter one - all my chapter headings are verbs. Grief is not static, not fixed like a noun. Grief is dynamic, constantly shifting, verb-like and alive and, like the ocean, never still. Once grief has upended our world and we have seen how laughable our attempts at control or certainty are, we never again reach dry land. We never regain a solid base. If we are lucky, we can create another nice big ship in which to take refuge, offering the sensation that life is safe again, but beneath us the ocean continues to churn. Life remains a balancing act, and we acknowledge the constant recalibration required to accommodate the ebb and flow of the swell beneath us.

**Staying afloat**

We can focus on the wonderful joys that being on the ship has to offer, or we can focus on the storm always brewing, with its potential to dump us right back in the swirling darkness at

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any point. Or we can keep both those truths alive simultaneously. We can enjoy the current stability of the ship while being aware that it is still just a ship and therefore only as strong as the next tempest. As therapists, we help our clients to juggle both perspectives and describe the view along the way.

This will feel like second nature to most of you. Whatever the presenting issue and whatever your modality, I'm sure you are well used to holding two contrasting truths in mind, conveying that and more to your clients, and to using different approaches and languages to help them through. But I also know how all my clinical experience with clients and all my cognitive therapeutic knowledge fell short in preparing me for my own collision with grief, so I wanted to share how being more expansive and less literal in my ways of communicating helped me relate better to my grief, and to others.

I am writing this during what I hope will be the final weeks of lockdown. With my sister and great-nephew currently in hospital, I imagine I'm not alone in feeling the ground snatched from beneath me by another series of powerful waves of grief right now. They still have the power to knock the wind out of me and render me shaky.

I'm not currently practising as a therapist. I feel for those of you who have had to manage your own search for balance and perspective while being buffeted, all while seeing clients similarly agitated, and doing it all via video conferencing. Just keeping your own ship afloat is probably exhausting you. Exhaustion is, of course, another symptom of grief and one that fogs the brain, making vocabulary even harder to grasp. So, if creativity is eluding you right now, perhaps I can tell you about some other, less exhausting 'languages' that helped me navigate my grief. You may or may not find some of these

useful, either in themselves or because they spark ideas for other ways you can escape the tyranny of literal words.

**New languages**

First, the language of silence. Again, I'm going back to basics, but sometimes it's worth reiterating because it was definitely what I needed more than anything, particularly in the early days. Not talking, and definitely not being talked to. Just sobbing, being heard and witnessed in my pain and having a companion in my sorrow. I wasn't in therapy when Bill died, and initially I didn't think that mattered. Many of my friends are trained therapists, so it wasn't as if I didn't have great support, but even so I felt the need to protect them, that there was a time limit on how much wailing I could do, how often I could go over the same old ground, how messy I could be. I ended up having 10 weeks of therapy with a previously unknown therapist I found online, which surprised me by its usefulness. There really is a place for just being alongside someone as they fall apart. Not trying to put them back together, not trying to analyse or interpret or offer psychoeducation. Just being there and saying out loud, or by your presence, 'I see you, I see your pain.'

Second - use other people's languages. Whether that be poetry, works of art, pieces of music, what you will. Offer your clients a way to tap into the creativity of others to help them express the pain they can't yet form into thought themselves. I spent a lot of time wandering around art galleries, listening to music as I walked, responding viscerally to the things that somehow articulated something I couldn't grasp intellectually. Clients may want to bring into the session the art, poetry, stories and music that has spoken to them in their grief. Or you could offer them something you may have yourself as a jumping off point. I keep a box of postcards and I often just upend it and spread the contents out on the floor for clients to see what they are drawn to.

Third - movement. Again, research proves how useful this is for shifting stuck patterns and for addressing trauma, but I also found it useful as a means for expression - for representing pain in a way that words couldn't do. Like art and music therapy, movement therapy is of course a specialised skill in itself, so I'm not suggesting

you attempt something you are not trained in. However, offering the client the option to explore that part of themselves, possibly outside your relationship, may be what they need right now.

**Finding healing**

Having said all this, I do not underestimate the power of your ongoing relationships with long-term clients. We all know it is the relationship that heals, and your knowledge of your clients and your ability to provide them with the secure base they need right now, is of course invaluable. So, don't take any of this as a suggestion to not do what you do best. But maybe you could explore your own grief and see what unusual things unfold. It might provide a way of understanding that your clients may also need something a bit different right now.

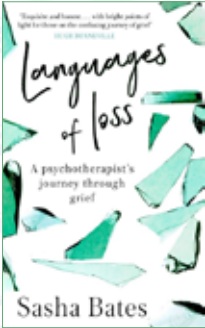
I do not undervalue the wonderful grief theories out there. Dual process and continuing bonds theories were particularly resonant with me and reassured me that I was not going completely mad during the times when I really felt I was. And as for Kübler-Ross, she repeatedly said that she didn't intend her stages to be either linear or prescriptive, as they are often now understood. The tyranny of the publishing world and our innate need for a rulebook turned her words into a cause for controversy. Having just had my own book published, I can relate to that - books are by their nature linear and need both a narrative and an end point that is not too downbeat. So, I empathise and am not in any way criticising her ground-breaking work.

I experienced all her five stages at times - they exist and, like millions of other griever before me, it was comforting to know that I was not alone in feeling any of this. But in other ways her theory, whether she intended it or not, felt limiting - a far cry from the enormity of what I was going through. It barely touched the surface.

**'Do not underestimate the power of your ongoing relationships with long-term clients'**

I needed to find my own language of loss and interpret my experience via other means. Writing my book, taking walks, doing yoga, looking at art, listening to music, spending time with friends, and engaging cognitively with the theories at times as well, all became my means of expression, and I encourage everyone to find their own. If you can feel into the grief your current situation has evoked, you may find a new language or medium that works for you, and that may inform how you help your clients find theirs. ■

*Languages of Loss* (Yellow Kite) by **Sasha Bates** is available now in hardback, e-book and audio.



About the author

**Sasha Bates** is a psychotherapist, journalist and former documentary filmmaker. After 18 years in the television industry, she retrained as an integrative psychotherapist at the Minster Centre, then worked in the NHS and higher education before setting up in private practice.