We are sad to announce that Donald Muccigrosso, who worked at the OAAP from 1982 until he retired in 1999, passed away on April 4, 2012. Don founded the alcohol and chemical dependency assistance program for Oregon lawyers by persuading the Oregon State Bar Board of Governors to allow him to start a support group for recovering lawyers. The group initially met at a local restaurant. Within a short period of time, the Professional Liability Fund’s first CEO, Lester Rawls, hired Don to provide assistance to lawyers as part of the PLF’s loss prevention efforts. The program flourished and became known as the Oregon Attorney Assistance Program.

Don worked for the OAAP for over 17 years, during which time he helped hundreds of lawyers into recovery, often saving the lives, careers, and families of those he assisted. In addition, Don was a powerful advocate for lawyer assistance programs around the nation, serving on the American Bar Association Commission on Lawyer Assistance Programs from 1991 to 1994, and continuing thereafter to work as an advisor for the Commission. In 1997, he was honored by the Commission with the Award of Merit. When Don retired and moved to Montana, his dedication to the cause of recovery did not stop, and he continued his work spreading the message of recovery.

We are forever grateful for Don’s extensive contributions and for all the help he has given to those who suffer from alcoholism. He leaves a huge legacy that we are honored to continue at the Oregon Attorney Assistance Program. He will be greatly missed and not forgotten.

THE DONALD MUCCIGROSSO MEMORIAL GRANT FOR TREATMENT OF ALCOHOLISM

In honor of the vast contribution Donald Muccigrosso made to the legal profession and the recovery community, the Oregon Lawyer Assistance Foundation (OLAF) has established a grant in Don’s memory. The Donald Muccigrosso Memorial Grant will provide funds for treatment to lawyers who otherwise would not be able to obtain the addiction treatment they need.

OLAF is a 501(c)(3) corporation. For more information, contact David Culpepper, 503-416-6146, or Barbara Fishleder, 503-684-7425, barbaraf@oaap.org, or go to www.oaap.org and click on OLAF.
UNDERSTANDING THE GRIEF PROCESS

Grief is a journey of the mind and the heart. It is a process, not an event. While grief is commonly associated with the death of a loved one, it also is present with other types of losses — such as job loss, divorce or loss of a significant relationship, pet loss, relocation, children leaving home, aging — or due to unfulfilled hopes, dreams, and expectations in life. Grief is a normal human experience that is frequently overlooked and undervalued by Western culture. It is often labeled as depression. While depression describes one portion of the grief process, there are, in fact, many physical, mental, emotional, and spiritual dimensions to grief. This article will focus on the death of a loved one, although the descriptions and processes also generally apply to the wider array of losses.

Simply stated, grief is the emotional reaction that occurs when someone important to you dies, and mourning is the process of learning to live without that person being physically present in your life. From early infancy, we begin to form strong emotional bonds (attachments) with the significant people in our lives. This fundamental need to attach to others continues throughout life, leading people to seek love, friendship, comfort, and companionship. When someone we love dies, that physical and emotional attachment is abruptly cut off — the love and caring that would have been extended to and received from that person are gone forever.

Common Grief Reactions

While grief reactions are diverse and unique to each individual, the following are some of the most common responses:

Shock and disorientation. The loss of a significant person in one’s life can create shock, disorientation, and disbelief that the person is actually gone. Attachment-seeking behaviors — such as waiting by the phone for the person to call, watching for him or her to drive up the driveway, calling out to him or her, or seeing someone who looks similar on the street and thinking it is the deceased — continue for a period. The desire for the loved one’s return can be strong, and full acceptance of the loss usually does not happen immediately.

Deep sadness. This is the most common feature of grief. It may or may not be expressed with tears depending on gender, personality, cultural influences, and the nature of the loss.

Anger. There may be anger at oneself for not doing enough to keep the person alive or for not seeing him or her more often, or anger at the deceased for dying. The anger also may be directed toward God, doctors, family members, or friends. Anger can be confusing to those trying to comfort the bereaved, so know that it is a common, normal grief response.

Guilt. The person grieving may feel guilt over things said or unsaid or missed opportunities to enhance the relationship when the person was alive.

Anxiety. Anxiety can be mild or result in panic attacks. There may be concern about another loved
one dying in a similar way. With sudden, unexpected death, assumptions about the predictability of life are shattered, creating apprehension about the future.

**Physical, behavioral, and cognitive dysfunction.** Those experiencing grief may find it difficult to sleep, or they may sleep all the time. They are likely to be very fatigued, unmotivated, and uninterested in activities they formerly enjoyed. Eating habits may change, and the usual self-care may be put on hold. Inability to concentrate, some memory loss, and general confusion are also common.

During grief, some or all of these responses may occur and reoccur. Think of them as a spiral with lessening degrees of intensity, rather than as discrete, linear stages. People often grieve in small doses; they may work at their jobs during the day and spend evenings at home, or with a friend, in tears. This gradual process allows the healing to run a natural course.

**Grief Recovery**

The ultimate goal of grief recovery is to come to terms with the permanence of the death and to learn how to live without the loved one. Recovery is not about giving up memories or ignoring or denying the importance of the relationship that has been lost; rather, it is about finding a different way to hold on to the loved one, not to let go. The deceased will be held in one’s heart and mind forever; the task of mourning is relocating the physical presence of the deceased to a new space in one’s emotional life.

People often ask how long the grief process will take. The appropriate response is as long as necessary. Grief has no timeline. Once the initial acute reactions subside, the grieving person experiences an ongoing adjustment in day-to-day life without the other person present. Special occasions, holidays, vacations, and other shared rituals can trigger new waves of sadness.

While many cultures have prescribed rituals for mourning, American culture generally lacks such normative behaviors and has grown increasingly uncomfortable with expressed sadness. There is a tendency to encourage people to get over their grief and move on. Sadness may create discomfort for others, so, unfortunately, many experiencing emotional pain tend to isolate themselves. Grief, however, is best handled in community; it should not be a solitary process. Having another present when one is in despair can be grounding, comforting, and an essential part of the recovery process. Grief support groups and community resources provide a valuable means of being with others who have experienced similar losses.

**Helping Others in Their Grief**

The following are some suggestions for reaching out to someone who is grieving:

- **Contact.** Take the time to call, e-mail, or write a note and let the grieving person know you are thinking about him or her.

- **Be practical.** If you can do something practical to help, just do it. The bereaved may not have the mental focus or energy to know what he or she needs at that moment.

- **Be a good listener.** Listen to stories about the loved one as many times as they may need to be told. Exercise patience, acceptance, and caring.

- **Encourage self-care.** When the person is ready, invite him or her to join you on outings or other activities. If the person declines, respect his or her wishes without trying to convince the person otherwise. The offer is meaningful, and there will likely come a time when the invitation will be accepted.

- **Avoid clichés.** Comments such as “He is better off now,” “She is happy in heaven,” “You need to get on with your life,” or “You should feel relieved that her suffering is over” are generally not helpful and are better left unsaid. Those grieving want their loved one alive and with them; their grieving is a process for them of trying to make sense of their life without their loved one.

**One Person’s Story**

About six years ago, a young woman came to my office and began her grief process. She had experienced the traumatic, tragic loss of a close friend. The
following sessions were painful, sad, and filled with tears and despair. Mementos from her friend had been tucked away in a box that she opened each month on the anniversary of his death. It would have been far too painful for her at that time to have any daily reminders of him in her home.

As time passed, the healing process progressed. She felt herself adjusting as she became able to visit his grave and again as she found she began to cry less during our sessions. Eventually, she placed a framed picture of her friend on a table in her home and was able to embrace the positive things he brought to her life. Eventually, she could remember him without deep sadness. In time, she found a place for him in her emotional being. Eventually, she left my office feeling positive about where she was in life.

Recently, she once again found herself sitting across from me, facing another significant loss. She did not want to be in this grieving place again. I asked her how I could support her, and she responded without hesitation, “I want you to tell me it will be okay.” And deep down she knows she will be okay. She knows she will mourn her loss, she knows the grief will pass, and she knows she will find her bearings once again.

Conclusion

Grief is a normal and natural healing process that allows people to relocate a deceased loved one to a new place in their own emotional lives. It is a process of coming to terms with life as it is, of acceptance of mortality, and of once again experiencing the fullness of life. Grief generally does not happen without significant pain and sadness, but it is a restorative process and a necessary journey.

KATHY B. QUERIN
MA, MFT, LPC, CADC I

Kathy Querin is a Portland therapist in private practice. She can be reached at kathy@kathyquerin.com or by phone at 503-620-4000.

Grief and Loss – Additional Resources

- The Dougy Center – [www.dougy.org](http://www.dougy.org) – grief support for children, teens, and young adults
- The Compassionate Friends – [www.compassionatefriends.org](http://www.compassionatefriends.org) – grief support following the loss of a child
- A Journey Through Grief: Gentle, Specific Help to Get You Through the Most Difficult Stages of Grieving, Alla Renee Bozarth (Hazelden, 1994)
- The Journey Through Grief and Loss: Helping Yourself and Your Child When Grief Is Shared, Robert Zucker (St. Martin’s Griffin, 2009)
- Tear Soup, Pat Schweibert and Chuck DeKlyen (Grief Watch, 2005)
- A Decembered Grief: Living with Loss While Others Are Celebrating, Harold Ivan Smith (Beacon Hill Press, 2011)
A LAW STUDENT’S JOURNEY TO RECOVERY

My grandmother’s best friend gave me my first drink when I was 13 years old: a shot of whiskey to ease the pain of my menstrual cramps. I remember the warmth it sent down my throat and the buzz it jolted to my brain, taking away all my pain. I chased that buzz for 17 years. I had my last drink at age 30, on June 6, 2008.

I am an alcoholic. I am also a law student, a sister, a daughter, an art lover, a sailor, and a world traveler. My alcoholism does not define me, but my unwillingness to accept it until that June day in 2008 wreaked havoc on my life and on those people who love me.

The American Medical Association (AMA) defines alcoholism as a chronic disease. That means it never goes away. The disease, which is often progressive and fatal, is characterized by impaired control over drinking. For me, this meant that I could not permanently stop drinking when I “quit” or, on various occasions (although not every time), when I set out to drink a certain number of drinks, I was unable to adhere to my predetermined “limit.”

The AMA further defines the alcoholic as someone who is preoccupied with alcohol. For me, this meant that I spent large amounts of time planning my next drink or coming up with ways to try to drink safely. For instance, I drank beer only, created elaborate schemes to count my drinks, aimed never to drink alone, tried never having alcohol in the house and drinking only at restaurants or parties, tried drinking only at home, drank only white wine or clear-colored liquor, went to therapy, and went to church. Because I am an alcoholic, none of these efforts to keep alcohol in my life worked. The only solution is never to drink again.

In addition, an alcoholic uses alcohol despite adverse consequences. For me, this meant that I continued to drink despite the terrible hangovers, the lack of direction in my life, the broken relationships with friends and family, the harmful romantic relationships, the mounting depression, and the growing void I felt inside myself. Because denial is a primary component of the disease, I continued to justify my drinking (something that law students and lawyers are very good at) and tricked myself into thinking that somehow, someday, I would be able to control and enjoy my drinking. That is the great obsession of every alcoholic – that she or he will find a way to beat the game.

Looking back, I can see that all the signs of alcoholism were present long before my last drink. After that shot of whiskey at age 13, I did not drink again until age 16. It started off looking “social,” but it never was. I drank to get drunk. I drank to avoid feelings of anxiety. I drank to change my personality. I drank to feel like I fit in. Alcohol quickly became my magic elixir. The quantity and frequency of my alcohol intake went up and down over the years, but the feelings remained the same.

Although I had already experienced blackouts and driven drunk numerous times, I did not suffer any “outside” consequences from my drinking until age

Continued on page 6

Building Resilience and Preventing Compassion Fatigue in the Practice of Law

The Oregon Attorney Assistance Program (OAAP) and the Oregon Criminal Defense Lawyers Association (OCDLA) are cosponsoring compassion fatigue prevention trainings in the following communities:

- July 31, 2012 Coos Bay
- August 1, 2012 Grants Pass
- August 2, 2012 Medford
- August 3, 2012 Klamath Falls

Both OAAP and OCDLA are advertising these programs to the lawyers and judges in these communities by broadcast e-mail.
19. I continued to get top grades in high school and went to an Ivy League university. But at age 19, I had a terrible breakup with my boyfriend as a result of my drinking. That led to my first “swearing off,” followed by a return to drinking a few months later because I did not accept that I was an alcoholic or that I could never drink again. I spent the next 11 years trying to figure out a way to drink. I graduated from college in the top 10 percent of my class, got two very competitive jobs in the first two years after graduation, and went to law school for the first time in 2001.

Alcohol controlled me and took priority over school. I nearly flunked out after the first semester, and my parents forced me to withdraw. I was pleased to do so – that meant I could drink more. I moved from town to town, job to job, and boyfriend to boyfriend for the next six and a half years. I was unsatisfied, often listless, and got more and more depressed as the years wore on.

Nothing disastrous ever happened as a result of my drinking: I never got a DUI, never got fired from a job because of my drinking, never got into a car accident drunk, and never lost my home. Even the law school that I attended in 2001 urged me to stay in school. What happened is that I began to lose the desire to try. My 20s had been one false start after the next, and I simply did not have the energy to keep doing what I was doing.

My last drink was nothing spectacular, just another night when I promised myself I wouldn’t drink but ended up doing so. The next day, feeling shame and regret, I surrendered. I really am an alcoholic, and I can never drink again.

I cannot stay sober alone, however, and I am an active member of a 12-step group. I have taken the 12 steps and go to four or five meetings a week. The meetings I attend are full of people in their 20s and 30s (many of them students), all walking the path of recovery. Working a program of recovery saved my life, and the fellowship I discovered there continues to offer an amazing community where I have made many great friends.

By getting sober, I was able to return to law school; rebuild rotting relationships (including with myself); form new, fulfilling friendships; and become a happy, productive member of society.

This article originally appeared via a link in the Massachusetts Lawyers Concerned for Lawyers (LCL) blog on March 22, 2012, and a link in the Boston University's Law Student Affairs blog on March 21, 2012. Reprinted with permission.
FIFTH ANNUAL
WOMEN’S
WELLNESS
RETREAT FOR
LAWYERS

The OAAP/OWLS Annual Women’s Wellness Retreat for Lawyers has become a tradition, held this fifth year at the Resort at the Mountain in Welches, Oregon. This year’s theme was “Renewing Your Dreams,” and the enthusiastic responses of the participants testified that minds and bodies were refreshed and renewed, as well as dreams and aspirations.

Beginning with lunch on Friday, participants were welcomed by OAAP Assistant Director Shari Gregory and OAAP Attorney Counselor Meloney Crawford, who announced the icebreaker: a “human scavenger hunt” that proved so popular last year. The same format was repeated with different questions, and the room buzzed as women searched to complete a grid of “Fascinating Women Attorneys” – who have written books, lived in the country and the city, played a musical instrument, or want to get a tattoo.

Programming began with lawyer and Life Transition Coach Kirsten Meneghello, who talked about discovering passion and purpose in your career, expanding a spark of enthusiasm into a passionate fire.

A break followed, allowing free time for hikes, naps, or spa treatments, followed by dinner. Later that evening, Heather Decker, JD and certified Yoga Fit® instructor, conducted a brief meditation session, followed by restorative yoga poses, which assured that the participants enjoyed a calm evening and a good night’s sleep. A handout on relaxation breathing techniques allowed participants to continue these practices later.

On Saturday morning, Heather led a group in the vinyasa, or flowing, style of yoga, for an energetic start to the day. A buffet breakfast accommodated both early and late risers, and the room buzzed with lively chatter. Nancie Potter, JD, MFT, a former trial lawyer and now a marriage and family therapist, presented on how heeding our heart – following our innermost desires – is linked to a spiritual connection, whether it is to an ultimate reality, to others, or to nature.

Virginia Terhaar, PhD, LPC, who has presented at every Women’s Wellness Retreat since 2008, discussed how to develop relationships that help us pursue our dreams, making our heart’s desire into reality.

Finally, Jillayne Sorensen, PsyD, a licensed psychologist who specializes in mindfulness and mindful movement practices for healthy stress reduction, conducted an exercise on mindful movement, allowing the participants an opportunity to embody their dreams by being fully present in the moment. Gathering in a closing circle, each participant shared a word describing her experience – sharing, renewal, inspiration, and connection were a few of the descriptions used. By midday on Saturday, we were on our way home with a sense of renewal, as well as the knowledge that we had participated in a continuing tradition for years to come.

Meloney C. Crawford
OAAP Attorney Counselor

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LAWYERS IN TRANSITION
CALENDAR

Lawyers in Transition is a networking, educational, and support group for lawyers and judges making job or career transitions. The group meets on Thursdays at noon in the OAAP offices at 520 SW Yamhill, Suite 1050, Portland. If you are interested in attending, please contact Shari R. Gregory, 503-226-1057, ext. 14, or Mike Long, ext. 11. A guest speaker for Lawyers in Transition is featured on the first Thursday of each month. These meetings are open for anyone to attend. See the calendar below for scheduled speakers.

The OAAP also occasionally presents career workshops to assist lawyers, judges, and law students in identifying satisfying job and career opportunities. These workshops typically meet one evening per week from 5:30 to 8:00 p.m. for six consecutive weeks. If you would like additional information about the OAAP career workshops, call Shari R. Gregory or Mike Long at 503-226-1057 or 1-800-321-6227.

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<tr>
<td>June 7, 2012</td>
<td>Sarah Krick</td>
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<td>July &amp; Aug. 2012</td>
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<td>Sept. 6, 2012</td>
<td>Angela Johnson</td>
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