

# 'GOOD' GRIEF

TEARS, PRAYER AND THERAPY:  
RETHINKING HOW WE PROCESS  
THE LOSS OF A LOVED ONE

BY MARISSA CHARLES

**M**elissa Chataigne holds out her right arm and points to the tattoo just below the inside of her elbow. It's a Picasso dove with the initials JLC on the tip of one of the wings. She got it in September 2010, two weeks after her 21-year-old sister committed suicide.

"I got it for Jenny because Jennifer Leslie Chataigne was my right arm," says the 33-year-old personal stylist. "When you lose your right arm, you don't know how to function."

Chataigne tried her best to get back to normal. Two weeks after her sister died she was back in L.A. "in work mode" and planning her best friend's birthday party. By October she was right back in her parents' home in Bartlett, Illinois, unable to get out of bed.

"I was just sleeping, not showering, my hair was a mess," she says. "My mom was like, 'I'm not going to lose another daughter. So we got to do something about it.'"

For many African-American women, Melissa's story of grief is a familiar one. We shove our own feelings to the side while we focus on working, being strong and taking care of others. We maintain the facade that everything's okay when really, it's not.

"The way my family is, even when we're stressed, we're like, 'Everything's fine,'" says Chataigne. And, like many, they're a "don't put your business out there" household.

According to a 2008 University of Memphis study, *African Americans in Bereavement*, 46 percent of the Black people surveyed said they spent less than two hours talking about their loss. Only 3.8 percent of Blacks surveyed said they had sought professional help.

These figures are no surprise to Ronald Barrett, Ph.D., professor of psychology at Loyola Marymount University in Los Angeles. He has been studying African-Americans and grief for 20 years and finds that, as a group, we "tend to underutilize health resources" to support our physical and mental health after a traumatic loss.



"One of the more predominant and immediate theories is that African-Americans have a very long history that supports their mistrust of a White establishment," he says. The Tuskegee Syphilis Experiment, which used hundreds of Black men as medical guinea pigs, cast a long shadow in our collective minds—and that spills over into our reluctance to seek counseling.

What are we doing instead? According to the 2008 study, we rely on prayer or turn to friends or extended family for support. Or we just bury our pain and carry on.

Karla F.C. Holloway, Ph.D., a Duke University professor and author of *Passed On: African-American Mourning Stories, A Memorial*, thinks that is the worst thing we can do. She says that burying our grief is "not healthy and attributes to other kinds of health disparities you find in African-American women," including stress, high blood pressure and diabetes. In other words, when we don't attend to our emotional needs, the pain can manifest itself physically.

Addressing our sorrow head-on—taking the time and space to walk through it—is a much healthier approach. Holloway believes bereavement therapy is good, partly because "it acknowledges that you're grieving."

Maude Harrison-Hudson, a bereavement counselor at Montgomery Hospice in Rockville, Maryland, agrees. "It's necessary to talk about your feelings," she says. "It is



talking about and telling the story that healing occurs. Grief is a process and it's necessary to walk through the pain." Harrison-Hudson says that process may include writing and journaling about your feelings.

Recognizing the need, many funeral homes and mortuaries now offer an "aftercare" service that provides free grief support to family members. Your local hospice center may also be able to direct you to community or faith-based support programs. If you are having real difficulty coming to terms with your loss, professional mental-health counseling may be in order to keep normal grief from hardening into a chronic depression.

For Chataigne, investing \$50 a week for counseling was worth it, even when funds were tight. Although she had briefly seen social workers and gone to suicide-survivors' support groups, almost

two years after her sister's death, she was still floundering.

"I felt like I was on the breaking point myself," she says. "I felt like I was ready to die. I was like Jenny in that depressed state...but I was masking it really well."

Seeing the therapist changed things. Over the course of a year, he provided Chataigne with the tools to process her grief and encouraged her to work out and look after herself. But it was the way that he talked about her sister that touched her heart.

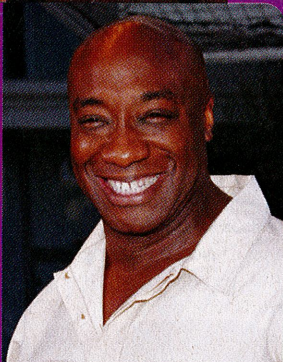
"No one really talked about her like she was a person," she says. "He gave her a name, let her have a personality in my story and let me cherish her that way."

Melissa will always miss Jenny, but therapy taught her how to celebrate her sister and find happiness. "There is a difference between surviving and thriving," she says. "The past year, I've been thriving." □

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After losing her fiancé, Michael Clarke Duncan (right), Omarosa Manigault discovered solace in working with children.



## The Reality of Grief: How Omarosa Found Consolation After Loss

**W**hen actor Michael Clarke Duncan died in 2012, his fiancée, Omarosa Manigault, went from planning a wedding to arranging a memorial service.

"It's like going 100 miles per hour forward in a car and immediately hitting the brakes, pressing reverse and then going 150 miles per hour in reverse," she says. "It was a shocking, jerking feeling."

The former *Apprentice* star stayed strong as thousands of fans and celebrities paid their respects at Duncan's funeral and memorial service. Afterward, she was left immobilized by grief.

"I was in bed for about six or seven weeks and I didn't leave the house," she says. "I'd get up, barely eat, shower and go back to bed.... I had a really dark period where my friends and family were very concerned about me and my well-being."

Manigault's family intervened, contacting the Beverly Hills therapist she and Duncan had been seeing for premarital counseling.

At first Manigault was reluctant to go. "There was nothing in my mind that could have helped me

feel better," she says. But her therapist encouraged Manigault, now an ordained Baptist minister, to reengage with the world—by going to church, or even just grocery shopping.

Ultimately it was her desire to work with children that helped bring new purpose to Manigault's life. "We brainstormed and thought about substitute teaching because I could do it once or twice a week if I wanted to," she recalls. "If it became too much I could pull back." She took a 40-hour course and now works as a special-education substitute teacher in L.A.

"Working with the children, it's incredible," she says. "It gives you so much energy and it puts things into perspective.... It's impossible to be unhappy around children."

Manigault credits counseling with helping her accept "what life looks like without Michael."

"We [the Black community] tend to think you can pray yourself through any situation," she says. "Prayer does work, but sometimes you've got to go beyond prayer and put faith into action." —M.C.