

FROM ATTACHED POST-IT NOTE:

"CLINT, THIS IS MOFO'S (MORRISON, FOSTER, ETC - A MAJOR SF LAW FIRM)
• BEREAVEMENT POLICY. HOPE IT HELPS - MIKE BORDEN

All such absences must be approved by the employee's supervisor. Time off granted may be with or without pay, as follows.

(1) Funeral or bereavement leave. When there is a death in the employee's immediate family, the firm allows an absence with pay of three days for funerals in the state where the employee works, and up to five days for funerals out of state. Family, in this context, includes spouse, children, parents, sisters, brothers, grandparents, and in-laws (sisters, brothers, mother, father, sons and daughters-in-law). Exceptions must be approved by the Personnel Manager. A bereaved employee may request his or her personal holiday or accrued vacation as additional time off during this period.

(2) Jury duty and court appearances. Employees who are selected for jury duty or summoned as court trial witnesses will receive time off with pay. They shall be paid the difference between their regular salary and any remuneration received from the court for this service. Copies of checks received in payment for jury duty must be sent to the Payroll office in San Francisco for salary adjustments.

Employees summoned for jury duty must keep their supervisors informed about absences required. Copies of the juror notice or subpoena must be sent as early as possible to the employee's supervisor so that job coverage may be arranged, and to the Payroll office in San Francisco so that attendance and salary records can be adjusted. If the court excuses an employee and there are two hours or more left in his or her normal working day, the employee must report back to work.

During jury duty service, participation in the firm's group insurance programs will continue and vacation and sick leave days will continue to accrue.

(3) Military reserve duty. Employees will receive two weeks off per year without pay for military reserve duty. Copies of orders to report for duty must be sent as early as possible to the employee's supervisor so that job coverage may be arranged, and to the Personnel Department so that attendance and salary records can be adjusted.

(4) Religious observances. The firm recognizes that the religious beliefs of some employees may require them to be absent from work during regularly scheduled work periods. The firm will attempt to accommodate such needs by rescheduling the employee's work week, or by granting time off without pay. An employee may request his or her personal

3. Definition of Sick Leave

A leave granted under this rule for the following reasons shall be known as "sick leave":

a. Sick Leave - Medical Reasons

- i) Absence because of illness, including alcoholism, or injury other than illness or injury arising out of and in the course of City and County employment. Absence due to illness or injury arising out of and in the course of employment is administered EITHER 1) under the rules of the Retirement Board and is referred to as "disability leave" and may be supplemented as provided elsewhere in this rule OR 2) under the provisions of this rule and the Administrative Code for those employees injured by battery ("leave due to battery").

- ii) Absence because of medical or dental appointment

b. Sick Leave -

Absence during
and declared
other authority

Legal
Subject
Bereavement
Policies

as established
Public Health or

c. Sick Leave - Bereavement

- i) Absence because of the death of an employee's parents, step parents, grandparents, parents-in-law, spouse, sibling, child, step child, adopted child, legal guardian or any person who is permanently residing in the household of the employee. Such leave shall not exceed three (3) working days and shall be taken within thirty (30) calendar days after the date of death; however, two (2) additional working days shall be granted in conjunction with the bereavement leave if travel outside the State of California is required as a result of the death.
- ii) Absence because of the death of other relatives. Leave shall be for not more than one (1) working day; however, two (2) additional working days shall be granted if travel outside the State of California is required as a result of the relative's death.

3. Definition of Sick Leave

A leave granted under this rule for one of the following reasons shall be known as "sick leave":

a. Sick Leave - Medical Reasons

- i) Absence because of illness, including alcoholism, or injury other than illness or injury arising out of and in the course of City and County employment. Absence due to illness or injury arising out of and in the course of employment is administered EITHER 1) under the rules of the Retirement Board and is referred to as "disability leave" and may be supplemented as provided elsewhere in this rule OR 2) under the provisions of this rule and the Administrative Code for those employees injured by battery ("leave due to battery").
- ii) Absence because of medical or dental appointments.

b. Sick Leave - Quarantine

Absence during a period of quarantine established and declared by the Department of Public Health or other authority.

c. Sick Leave - Bereavement

- i) Absence because of the death of an employee's parents, step parents, grandparents, parents-in-law, spouse, sibling, child, step child, adopted child, legal guardian or any person who is permanently residing in the household of the employee. Such leave shall not exceed three (3) working days and shall be taken within thirty (30) calendar days after the date of death; however, two (2) additional working days shall be granted in conjunction with the bereavement leave if travel outside the State of California is required as a result of the death.
- ii) Absence because of the death of other relatives. Leave shall be for not more than one (1) working day; however, two (2) additional working days shall be granted if travel outside the State of California is required as a result of the relative's death.

RECEIVED

AUG 17 1987

RECEIVED

AUG 17 1987

HELLER, EHRMAN, WHITE & McAULIFFE

ATTORNEYS

A PARTNERSHIP INCLUDING PROFESSIONAL CORPORATIONS

333 BUSH STREET • SAN FRANCISCO, CALIFORNIA 94104-2878

TELEPHONE (415) 772-6000

TO: Mr. Clint Hockenberry
FROM: Kevin James, Esq.
DATE: September 3, 1987
RE: Bereavement Policy

Enclosed per your request is a c
bereavement policy.

ENCLOSURE MEMO

Re: Project, Commissions
CA, NY, MA, CN, NT

→ call AIDS Foundation
re: AIDS in the Workplace
→ corporate sponsors
→ Xerox Corporation
→ Bereavement Policy
→ which corps have AIDS policies

6/2a called Tom White
864-4376
ext. 2018

Materials
861-3397

Bob Davis
will call back
called 6/30
- asked to call back

Pam Luddat Levi Strauss
Kitsy Scheon 861-8705

HELLER, EHRMAN, WHITE & McAULIFFE

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333 BUSH STREET • SAN FRANCISCO, CALIFORNIA 94104-2878

TELEPHONE (415) 772-6000

TO: Mr. Clint Hockenberry
FROM: Kevin James, Esq.
DATE: September 3, 1987
RE: Bereavement Policy

RECEIVED

SEP 4 1987

Enclosed per your request is a copy of this firm's
bereavement policy.

ENCLOSURE MEMO

Chuck Calk
Bank of America Bereavement Policy
Personnel 953-7450
will call:

- 3 days for immediate family
- 5 days if travel time needed
- no specific reference to "significant other" or "spouse equivalent." However the policy stresses maximum flexibility.

2.26 BEREAVEMENT LEAVE

A bereavement leave when a member of an employee's immediate family is understood parents, brothers and sisters, in-law, or a member of the employee with the employee.

If a leave of absence longer than three days is required, the circumstances involved should be discussed with the Personnel Manager.

843-2293

Chevron's Bereavement Policy:

upto a maximum of three days
off with pay for the ~~first~~
funeral of an immediate
family member, if other than
up to the discretion of the
supervisor

main office 894-7700
human resources 894-1535

2.26 BEREAVEMENT LEAVE

A bereavement leave
when a member of an employee's
immediate family is understood
parents, brothers and sisters,
in-law, or a member of the emp
with the employee.

If a leave of absence longer than three days is
required, the circumstances involved should be discussed with
the Personnel Manager.

843-2293

2.26 BEREAVEMENT LEAVE

A bereavement leave of up to three days may be taken when a member of an employee's immediate family dies. The immediate family is understood to include spouse, children, parents, brothers and sisters, grandparents, mother and father-in-law, or a member of the employee's family currently residing with the employee.

If a leave of absence longer than three days is required, the circumstances involved should be discussed with the Personnel Manager.

843-2293



BANCROFT-
WHITNEY CO.

Law Publishers

3250 Van Ness Avenue
P.O. Box 7005
San Francisco, CA 94120-7005
415-929-3500

April 20

Dear Clint -

I'm sorry I didn't get the opportunity to meet you at Saturday's AIDS Paul training. I'm looking forward with enthusiasm to my experiences as a participant.

Enclosed is a copy of our new affirmative action and bereavement policies. Yes, we were successful in securing major recognition of gay rights in the workplace.

Please feel free to pass the word. A number of us here, myself included, would be happy to consult with others on these issues. Warmly,
Katherine Mann

3.8

BEREAVEMENT LEAVE

An employee who suffers the death of a member of his or her immediate family [parents, including in-laws; child, including step and adopted; siblings; spouse and spousal equivalent/significant other (if permanently residing in the same household as employee)] will be granted leave, with pay, for three consecutive days beginning with the date of death. If there is a death of a family member outside the immediate family (sister-, brother-, son-, or daughter-in-law; grandparent; grandchild), the employee may be granted a one-day paid leave to attend the funeral. In the event of the death of a fellow employee, an employee may be granted up to four hours with pay to attend the funeral.

Please check with your supervisor or manager about the exact terms of the Bereavement Leave Policy as it regards pay rates, vacation, and holidays.

3.9

COURT APPEARANCES

Bancroft-Whitney cooperates with employees in the performance of their civic duties. If you are called to be in court as a juror, for jury selection, or as a Company witness, you will be granted a leave of absence with pay for the period of time designated by the court. This time is not charged against your sick leave or vacation time. You will be paid your regular salary during the service and may keep any fee you receive from the court.

2. EMPLOYMENT

2.1 AFFIRMATIVE ACTION POLICY

Bancroft-Whitney is an Equal Opportunity Employer. Accordingly, all programs, benefits, and actions related to employment are administered without regard to race, creed, color, religion, sex, age, national origin, disability, marital status, handicap, veteran status, or sexual orientation in a workplace that is free from conduct that could constitute harassment.

The Company's Affirmative Action Plan is administered by the Employee Relations Specialist in the Personnel Department and is available for inspection by any employee. If you feel that your employment with Bancroft-Whitney is being interfered with on the basis of any of the above-listed conditions, you should contact the Employee Relations Specialist in Personnel. That person will conduct a thorough and confidential complaint and investigation process in order to resolve any difference.

2.2 WORK HOURS

We have a 37.5 hour work week; working hours are Monday through Friday, from 8:15 a.m. to 4:30 p.m.

A 45-minute lunch break begins at either 11:45 or 12:15; please arrange with our supervisor or manager which lunch break you will observe.

There is a morning coffee break from 10:00 to 10:15 a.m. and one in the afternoon from 3:00 to 3:15 p.m.

2.3 TIME REPORTS

State and Federal laws require accurate, detailed records of employees' hours worked and absences. Each week you will record on a time card the hours you worked, as well as any exception hours; for example, illness or vacation. This card initiates your paycheck and enables accurate records to be kept for each employee. Your supervisor or manager will answer questions you may have about completing the card. Instructions for filling out your weekly time card are given to you on your first day of work. Extra copies are available in the Personnel Department.

**AIDS IN THE WORKPLACE:
SUGGESTED GUIDELINES FOR THE BUSINESS COMMUNITY**

Epidemics of disease present enormous dilemmas to our society, straining our human, financial and health resources. Like smallpox, cancer and polio before it, Acquired Immune Deficiency Syndrome (AIDS) and its related conditions are approaching pandemic proportions.

The impact of AIDS is and will continue to be devastating. According to the Surgeon General of the United States:

By the end of 1991, an estimated 270,000 cases of AIDS will have occurred with 179,000 deaths within the decade since the disease was first recognized. In the year 1991, an estimated 145,000 patients with AIDS will need health and supportive services at a total cost between \$8 billion and \$16 billion. However, AIDS is preventable. It is the responsibility of every citizen to be informed about AIDS and to exercise the appropriate prevention measures.

If we are to overcome the obstacles presented by AIDS and its related conditions, it is imperative that we respond immediately as a unified society. A comprehensive and effective approach toward combatting the epidemic only can be realized through a national effort with the full support, understanding and informed decision-making of the business community.

Any sensible and humane response to the epidemic must be based on accurate information, not irrational fear and discrimination. There is an alarming tendency to label people as belonging to AIDS "risk groups." This is not only misleading, it is dangerous. AIDS is not confined to any single community. It is not caused by life-style or sexual orientation. It is caused by a virus--a virus that can be transmitted to anyone who engages in high risk activity. Fortunately, by modifying these high risk behaviors, we can stop virus transmission. Unlike many other life threatening illnesses, AIDS can be prevented.

We are fighting a disease, not people. The business community in America can and must play a major role in creating policies and disseminating accurate information about AIDS and its related conditions.

Any employee with a life threatening and/or catastrophic illness such as AIDS, cancer or multiple sclerosis should be treated in conjunction with the principles outlined below. It is our desire that every business in America adopt and/or incorporate these principles into personnel policies and adhere to the content and spirit of the principles.

1. Employees with any life threatening illness should be offered the right to continue working so long as they are able to continue to perform their job satisfactorily and so long as the best available medical evidence indicates that their continual employment does not present a health or safety threat to themselves or others.

2. Employers and co-workers should treat all medical information obtained from employees with strict confidentiality. In the case of an employee with a life threatening illness, confidentiality of employee medical records in accordance with existing legal, medical, ethical and management practices should be maintained.
3. Employees who are affected by any life threatening illness should be treated with compassion and understanding in their personal crisis. Reasonable efforts should be made to accommodate seriously ill patients by providing flexible work areas, hours and assignments whenever possible or appropriate.
4. Employees should be asked to be sensitive to the needs of critically ill colleagues, and to recognize that continual employment for an employee with a life threatening illness is often life sustaining and can be both physically and mentally beneficial.
5. In regard to the life threatening disease of AIDS and its related conditions, a person carrying the AIDS virus is not a threat to co-workers since AIDS is not spread by common everyday contact. For this reason, the AIDS antibody and/or AIDS virus status of an employee is not relevant information in regard to the health and safety of his/her co-workers. Therefore, the AIDS antibody test and/or AIDS virus test should not be used as a prerequisite for employment or a condition for continued employment. Knowledge or presumed knowledge of AIDS antibody and/or AIDS virus status should not be used to discriminate against an employee for any reason.
6. Given the irrational fear that AIDS, cancer and other life threatening diseases often inspire, the most effective way to avoid unnecessary disruptions in the workplace is to prepare and educate both management and employees before any employee is affected by a life threatening disease. To this end, employers should implement educational programs based on the best available medical knowledge to understand the disease; what services are locally available to help employees with any medical, psychological or financial hardships caused by the disease; and what policies the company has in place to cover employees with a life threatening illness.

JUNE 1987

Brovanna Lookay AIDS Hospice

Kotzy Shoon

Bereavement Policy. - discrimination ✓

3 days doesn't cut it ✓

People who are grieving
Samaritans will follow

HIV testing

if someone receives (-) on
1/you

grieving process begins
at HIV

→ quickly gets to job
rash/deerzours

↳ preoccupied
physically, spiritual
wellbeing
self involved
(not in place)

- don't want to continue

→ some don't others to know.

next wave of

Bram St

Syntax

→ discrimination can
hinder with AIDS + APC

→ large corp don't want rise

→ kept in general of disability

Positive side effects of limited work
schedule

EAPs, ammunition / go get beyond Hemispheres

Grief: multiple losses

don't deal when that happens — energy level goes

↳ creativity art goes the loss
crypts in physical sickness
loss productivity

to advantage to assist in
grief process → (Work place not
work pl counseling) Training session

for management — order to be

healing
counseling referral referral
GRIEF

Grieving / Limited work schedule

More Generic → losses from others
→ own vulnerability

grief: new jargon, new ideas,
↳ touch

non-functioning
one question

I do not know what to say.

Choose to say nothing
people then assume that
they will have to be 100%
once they opened up → take on
all that grief

Cannot fix grief

- simple ways to support people

Mr Martinez - if I come to you in your grief
I will have to deal with me

TRANS
MANAGEMENT

talk around the subject
encourage employer

Don't find time whether they need it or not

✓ negotiation → to work or
not
negotiates →

encourage in progress

✓ atmosphere comes from the top.
↳ that's not clear + punctuous

if loss is supported to any degree

+ followed grieving time

Productivity up + LOYALTY.

Workplace →

cover
diff
areas
gives education
attorneys
advise

Employee
assistance
Program

EAP

to
v
c
a
+
i
o
n

Social Worker

when diagnosis

Social Workers geared to get
rid of everything → geared to
no funds.

IMPROPER TO give up!

not the

kind of chemical

Social Workers deal with AFFLUENT people
who are going to die
to make them indigent

PARENTS

→ cannot discuss death of child
because can't discuss lifestyle

Resource avenues → stay generic / depending on area

Pam Rudd

- assistant: "Brown Bag Lunches"

Prey
AIDS

EXP - caregiver - not taking on
too much

Kitsy Schoen - phone # 861-8705

Charge of Bereavement / Hospice of SF

Major Concern → not doing grief counseling

[in house counseling]

understanding dynamics

Physical Fun

Variety of needs

Tuesday

July 19th

on Hospicework

The American

Documentary

Thru D

Feb 19th

Original ① Business Leadership Task Force
of SFBay Area 1985

Levi Strauss

Pac Bell

Merrill Lynch

B & A

Wells Fargo

ATT

Shaveron

DeBeers

② Updated in 1987

Not BLTF

✚ PG&E

Morrison

Blue ~~Co~~ Shield

Fireman's Fund

Cooking
Giovanna Centay AIDS Hospice
Kitty Sheehan

367-5547
5447



AFTER THE LOSS

Tia,

Good Luck on
your research.
The need for this
kind of program
is so important.
JoVanne

This booklet provides information and lists services for individuals who are grieving a loss. The experience of grief is discussed, and suggestions are offered both for those who are grieving and those who wish to help a grieving loved one. A special section addresses grief and AIDS.

INTRODUCTION

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INTRODUCTION

Grief is a normal and natural response to loss. Because a loved one is now gone, it throws us virtually off balance; our emotions, our bodies, our spirits — every aspect of our lives is affected. We are often unfamiliar with the grieving process and, therefore, frightened and perplexed by our feelings. Understanding grief can help us recognize that what we are feeling is not “crazy”, but the normal experience after a loss. It can help us begin the healing process that takes place as we face our losses and allow ourselves to grieve.

Grief is a complex process, filled with physical and emotional experiences that are always changing. Grief may include physical experiences such as exhaustion, tension, sleepiness, sleeplessness, or a loss of appetite. Some bereaved have an empty feeling in the stomach, are short of breath, or describe the sensation of not being quite real. Listlessness and lethargy are also common experiences.

Emotionally, grief involves a range of feelings, often experienced simultaneously and repeatedly, in cycles. The mixture of feelings may include sorrow, anguish, regret, guilt, longing, loneliness, anger, anxiety, depression, confusion, fear and relief. At first, there may also be a lack of feelings, a sensation of shock or numbness, and denial that the death has really occurred.

It takes time and patience to grieve. During the months of mourning after a death, we learn to face the reality and pain of the loss, to say goodbye to the dead loved one, to restore ourselves, and to reinvest in life once again. To grieve fully and to recover is not easy. Unfortunately, our culture does much to discourage grieving. Fearful of embarrassment, of appearing "crazy" to others, or of frightening away friends with "neediness", many bereaved persons hide their true feelings and are thus deprived of the chance to work through their grief. Many of us have been taught that life's crises should be faced with a "stiff upper lip". But grief is not a sign of weakness; it is an inevitable and fitting reaction — a tribute to the loss of someone very precious and loved.

WHAT WE NEED DURING GRIEF

TIME. Time alone; and time with others whom you trust and who will listen when you need to talk. Months and sometimes years of time to feel and understand the feelings that go along with loss.

CARING. Try to allow yourself to accept the expressions of caring from others even though they may be uneasy and awkward. Helping a friend or relative also suffering the same loss may bring a feeling of closeness with that person.

REST, RELAXATION, EXERCISE, NOURISHMENT, DIVERSION. You may need extra amounts of things you needed before. Hot baths, afternoon naps, a trip, a project or "cause" to work for to help others — any of these may give you a lift. Grief is an emotionally and physically exhausting process. You need to replenish yourself. Follow what feels healing to you and what connects you to the people you love.

GOALS. For a while, it will seem that much of life is without meaning. At times like these, small goals are helpful. Something to look forward to, like playing tennis with a friend next week, a movie tomorrow night, a trip next month helps you get through the time in the immediate future. Living one day at a time is a rule of thumb. At first, don't be surprised if your enjoyment of these things isn't the same — this is normal. As time passes, you may want to work on longer range goals to give some structure and direction to your life; guidance or counseling can be helpful.

SECURITY. Try to reduce or find help for financial or other stresses in your life. Allow yourself to be close to those you trust. Getting back into a routine helps. Do things at your own pace.

PERMISSION TO BACKSLIDE. Sometimes after a period of feeling good, we find ourselves back in the old feelings of extreme sadness, despair, or anger. This is the nature of grief, up and down, and it may happen over and over for a time. It happens because, as humans, we cannot take in all of the pain and the meaning of death at once. So we let it in a little at a time.

HOPE. You may find hope and comfort from those who have experienced a similar loss. Knowing what helped them, and realizing that they have recovered and that time does help, may give you hope that sometime in the future your grief will be less raw and painful.

SMALL PLEASURES. Do not underestimate the healing effects of small pleasures. Sunsets, a walk in the woods, a favorite food — all are small steps toward regaining your pleasure in life itself.

BE AWARE OF DRUG AND ALCOHOL USE. The use of drugs, alcohol, and even prescription medications may prolong and delay the necessary process of grieving. We cannot prevent or cure grief. The only way out is through the grief process.

PERMISSION TO CHANGE YOUR MIND. Grieving can shake you up inside. You may find yourself having trouble concentrating, constantly reevaluating your priorities, or never being quite sure what you want. Let people know in advance that you may decide to change your plans.

"What We Need During Grief" was adapted from Self Help Correspondence for the Bereaved: A manual for Hospice Programs, Judith Herr, MS, Hilltop Hospice, Grand Junction, CO.

WHAT YOU CAN DO FOR A GRIEVING PERSON

HERE ARE SOME WAYS
YOU CAN HELP, ESPECIALLY
DURING THE EARLY STAGES
OF GRIEF.

OFFER EMOTIONAL SUPPORT

BE PRESENT IF YOU CAN

Often, just having someone near can be a tremendous help. Don't be afraid to show your care by giving the person a hug or holding his or her hand. And if you can't be present — write, phone or send flowers to show your concern.

BE A GOOD LISTENER

A good friend who's a sympathetic listener can be a great comfort to a grieving person.

ENCOURAGE INDEPENDENCE

A grieving person may need an occasional and gentle reminder that he or she can handle the responsibilities of a new way of life.

BE PATIENT

Keep in mind that it takes time for someone who is suffering to accept his or her loss and to deal with the changes it has caused.

OFFER REASSURANCE

After the initial shock has passed, you can help him or her to recognize that the pain eventually will lessen. You can do this by sharing your feelings and talking about any similar experiences you've had. Tell the person that you understand what he or she is going through, but avoid using the phrase "I know just how you feel". "Time heals all wounds", is another phrase to avoid, since the grieving person often cannot yet imagine being healed. ►

PROVIDE PRACTICAL ASSISTANCE

HELP WITH EVERYDAY CHORES

Relieve the person of some of the routine chores such as grocery shopping, laundry and housework.

LEND A HAND WITH MEALS

Bring something you've made to the person's home, or extend an invitation for dinner at your home.

ANSWER THE TELEPHONE

Offer to screen phone calls and take messages. Remember — recovery takes time. People often need the most help after the initial shock of a loss wears off. Continue to provide support for as long as it's needed.

NOTES FOR MYSELF

GRIEF AND AIDS

AIDS has brought bereavement home to many who might have expected to postpone their encounter with it. Suddenly, the dying are the child you thought would outlive you, your closest friend, your neighbor, co-worker and loved one who shares your life. Many people have lost several friends, acquaintances and loved ones.

The pain and difficulties in the AIDS crisis is compounded by other considerations. Family members, who may lack information about AIDS transmission, are sometimes fearful of contagion. Partners may worry about contracting AIDS as a result of the relationship.

Many partners and friends may already be diagnosed with AIDS or ARC. Others are living one day at a time as the "worried well". This adds to the feelings of loss, anxiety and disorientation already brought by grief.

Parents and family members may choose not to disclose the diagnoses to their friends and others in the family because of fear that they will be judgmental, unsupportive, or afraid. Partners may not wish to disclose the cause of death to employers and their own families, because to do so is to "come out" and to risk prejudice and fearful reactions. Both parents and partners can thus lose an important avenue for recovery — talking openly about the loved one, the loss, and their grief in their daily lives.

Partners may be denied their rightful place in rituals such as funerals and services. Lovers and friends may not be recognized or included when families take charge after a death. There may be disputes over wills, life insurance and the possessions of the person who died. Parents and family members may be facing their child's homosexuality or drug use for the first time, grappling with their ambivalent feelings at the same time as they are grieving their child's death.

Family, partners and friends of individuals who became infected with AIDS through blood transfusion or blood products may feel angry at the medical system which instead of "saving" their loved ones, has allowed them to contract and die from a life-threatening virus.

Finally, both partners and family members may be exhausted from their care-giving during the illness, and be left with a low level of physical and emotional reserve after the death. A long and costly illness may leave the griever financially depleted as well.

SUGGESTIONS FOR COPING

TALK ABOUT THE LOSS.

Tell as many people as you (comfortably) can about your loss. Include at least one individual who is not part of your immediate family or support system — someone who can listen and be caring of you without being as affected by the loss themselves.

CREATE RECOGNITION

Create recognition for the relationship. Rituals and remembrances at birthdays, anniversaries, and holidays will help you continue to recognize the significance and importance of your relationship.

SHARE YOUR EXPERIENCE WITH OTHERS IN SIMILAR CIRCUMSTANCES.

Parents may benefit from talking with others who have lost a child to AIDS. Partners often find it valuable and healing to share their grief with others whom they know can understand their feelings. Family and partners of hemophiliacs and blood transfusion recipients may appreciate the support of others with similar experiences.

MAINTAIN CONTACT WITH OTHERS WHO WERE CLOSE TO YOUR LOVED ONE.

Remember your child, lover, or friend; share memories with those who also loved him or her. Grieve with people who share your grief.

FOR PARENTS

Talk with people who can help you understand your child's homosexuality or drug use. Seek out someone who is knowledgeable and sensitive about gay people or drug addiction to help you understand and accept your feelings and your child.

FOR PARTNERS

Take care of your health. If you are concerned about your own health after your partner's death, see a physician regularly, especially since the physical manifestations of grief can be quite similar to some of the classic symptoms of AIDS or ARC. Do the best you can to take care of yourself; rest, sleep, a good diet and exercise are important.

NOTES FOR MYSELF

HOW THE HOSPICE PROGRAMS CAN HELP

FOLLOW-UP VISITS

Follow-up visits by the Hospice nurse, social worker and volunteer who have worked with the patient and family.

SUPPORT GROUPS

Support groups led by trained professionals, in which you can meet and learn from others who are grieving. In addition to general bereavement groups, a variety of special groups are also offered, including: a support group for families of persons with AIDS or ARC, a bereavement group specifically for partners of persons with AIDS or ARC, and a group for those in the later stages of grief.

SOCIAL GATHERINGS

Social gatherings which offer an opportunity to be with others who have lost a loved one, and share experiences in a pleasant, safe environment.

SOCIAL FORUM ON GRIEF AND AIDS

These social gatherings provide opportunities to meet with others who have lost someone to AIDS or ARC and share insights about living with loss as individuals and as a community.

INDIVIDUAL COUNSELING

Individual counseling by trained bereavement volunteers, offering family and friends a chance to talk about their experiences and feelings.

REFERRAL TO COMMUNITY RESOURCES

Referral to community resources such as health care services and support groups. ►

FOR MORE INFORMATION

If you would like to discuss any of these services, or if you have questions and needs not answered in this pamphlet, please feel free to contact the Bereavement Coordinator. We are available to answer your questions and provide an opportunity to talk, even if you do not wish to participate in the bereavement program services at this time. Please call us at (415) 861-8705.

Visiting Nurses and Hospice of San Francisco
Hospice Programs
1390 Market Street, Suite 510
San Francisco, California 94102
(415) 861-8705

