

Culinary Grief Therapy: Cooking for One Series

Presented by: Dr Danielle Lewis, Family Medicine, PGY2

March 20, 2017

Authors: Heather L. Nickrand, MA, LPC, NCC₁ and Cara M. Brock, PharmD, CGP₂

Abstract: Background: Although loss of loved ones is a universal experience, individuals who experience this loss grieve in different ways. Complicated grief involves the development of trauma symptoms, such as flashbacks, anxiety, and fear associated with daily activities after a death that disrupts the healthy grieving process. Daily activities such as eating, meal planning, grocery shopping, managing finances, and household maintenance can become painful and isolating for those experiencing complicated grief. Cognitive behavioural therapy is used to address irrational beliefs, feelings of depression or anger, and avoidance or numbing behaviours with a goal of leading the individual to adapting to a life, which no longer includes the lost loved one.

Objective: As part of the bereavement counselling program in a hospice, a need was identified in individuals who had lost loved ones and were having difficulty with adjusting to meal planning, grocery shopping, and cooking for one. To address this need for grief counselling centered on meal planning, grocery shopping, meal preparations, and eating meals alone, “Culinary Grief Therapy: Cooking for One Series” was developed with a local Culinary Arts Program.

Design: Partnering with a local community college culinary arts program, the Cooking for One Series provides an interactive venue for cognitive behavioural therapy centered on meal planning and meal times. Along with demonstrations and hands-on experiences, participants are engaged in bereavement counselling with hospice staff.

Results: Initial reactions to Culinary Grief Therapy have been positive. Many attendees have participated in multiple workshops, and the number of participants grows for each offering.

Conclusions: Culinary Grief Therapy is a novel approach to the needs of those experiencing the loss of a loved one and may reduce or prevent complicated grief associated with meal planning, grocery shopping, and cooking for one.

JOURNAL OF PALLIATIVE MEDICINE Volume 20, Number 2, 2017 Pg. 181

Strengths: The study involved an interdisciplinary team including bereavement counsellors, chaplains and social workers. The study addresses a relevant need in palliative care for grief counselling centred on meal planning, grocery shopping, meal preparations, and eating. Throughout the demonstration, the Bereavement Coordinator discussed tips and coping strategies including an element of cognitive behavioural therapy.

Weaknesses: Culinary Grief Therapy is in its infancy, by time of publication only 4 workshops had been held with 138 participants (although some of those are returnees). This series was conducted in one hospice in the USA, unclear what the applicability would be in different countries. More data is needed to truly quantify the effects of these sessions such as positive coping mechanisms etc.

Relevance to palliative care: Culinary Grief Therapy was born in a hospice setting, thus making it very applicable to palliative care, and is an interesting approach to help people process their complicated grief with tangible, hands on sessions.