

Podcast 345 Payne Transcript

Karen Wyatt: Today, I'm so happy to welcome my guest Emma Payne. Emma is a seasoned technology entrepreneur, a graduate of M. I. T. And she is the founder and CEO of a company called Grief Coach that supports those in need. Grief Coach combines her passion for mobile technology and engagement with her deep commitment to giving people the confidence and tools they need to support each other through grief. And we're going to be talking all about Grief Coach. You can learn more at the website <http://grief.coach>. So Emma, welcome and thank you for joining me today.

Emma Payne: Thanks for having me, Karen, nice to be here.

Karen Wyatt: Well I am at this current time a user of Grief Coach, so I'm really excited to talk to you about it and I can share my experience with it later on. But I wondered a bit about your own story. I know you've said you've probably told this a lot but, about what inspired you to create grief coach because I know you've been involved in all sorts of projects and technology innovations in the past.

Emma Payne: Yeah, I think you know, like most people that work in bereavement, there's a sad story at the beginning, but for me really it was. So my friend died in 2015 and it was the first time I've been with someone when they died, and it had been a difficult six month terminal diagnosis. And during that time he had asked me if I would speak at his funeral. And I of course said yes, of course, anything you want. But after he died, it was a daunting ask because he was the best friend and also a second cousin of my husband who had died a decade prior by suicide. So essentially what I agreed to do was fly across the country and see hundreds of people, many of whom I hadn't heard from in a long time. But in the end I really do think of it as a final gift from my friend.

From the moment I sat down in my pew in the church, the woman to my right was like, you know, what's your name and how did you know the family? And I said, oh I'm Emma and she starts crying, "Oh are you Barry's widow?" "Yes, I am." And she said, "Oh well I'm his Aunt." And I said "Yes, I know." And she said, "I'm so sorry, we didn't reach out, we didn't know what to say, it was really shocking. We didn't know anyone who died by suicide before. We did worry about you. Then so much time passed, and then we felt embarrassed."

And I essentially heard a version of that story probably 100 times over the course of the funeral and the pub night and everything that weekend. So by the time I got on my plane ride home to Seattle, I just thought, this is crazy. I had a couple of decades' experience building web and mobile tools at that point for everything from suicide prevention to youth voter registration. And I just thought I spent 10 years not hearing from people and inventing all kinds of reasons in my mind for why that might be – particularly because my husband died by suicide. So, you know, were people angry with me or who knows? But equally, 100 people spent that same 10 years feeling genuinely bad, ashamed of

themselves, guilty, upset. What was an opportunity for connection had in fact, had just been an absence of connection.

So I used my plane ride home to map out what basically became Grief Coach. And I fully assumed that, by the time I taxied into SeaTac and got on wifi, I would see that it existed already. But it didn't, so I started working on the plan in 2016, sold my house trying to build a prototype and went live in February of 2019 with of course, no idea what was around the corner for us all at that point.

Karen Wyatt: Yeah, definitely. Well, I resonate with your story so much because I don't know if you know, but my father died of suicide a long time ago. But I had an experience very similar to yours of not hearing from people that I cared about, that mattered to me, and not understanding why. And it was many years later when I got feedback from quite a few of those people that, oh, I wanted to reach out, I didn't know what to do. I didn't know what to say.

Emma Payne: That's the exact pain point that sits at the heart of Grief Coach. That's why I do what I do every day because of that exact experience which is sadly very, very common.

Karen Wyatt: Yeah, definitely. That lack of connectivity between all of these various grievers. And I didn't realize how many people were grieving my dad's death who, I mean I was his daughter, but people who were grieving in their own ways, who knew him differently than I did, who were going through grief. I had no idea. And it seems like we could have been a community supporting one another through that time instead of all isolated by ourselves dealing with all this pain alone.

Emma Payne: Yeah, I told the story often about this young woman whose first child was stillborn and she was of course devastated because her baby died. But I described her as being preoccupied with how alone she felt. Her husband wouldn't even talk about the baby. Her best friend had flown in to help with the baby but left two days later saying, I don't know how to talk to you about this. I don't know how to be with you right now. And I think that what could be community and sharing is often a very isolating lonely experience for many grievers. Yeah.

Karen Wyatt: And partly because we're, as a society, so uneducated about grief, we have so little experience about how to grieve together and how to support one another. And it is daunting to know what to say or what to do for someone, especially if it's something you haven't experienced yourself. So I understand and I have compassion for all those people who didn't show up.

Emma Payne: In fact that's where we work very hard. I have a pet peeve now about the, you know, "top seven things never to say to someone who's grieving." We are firmly on the side of the supporter that isn't sure what to say, that loves their person and wants to help. In our experience, most of us are lucky to have at least one or two people that want to help and just don't know how, no one's taught us. There's no point shaming the

supporter and making them feel worried that they might say the wrong thing because that's what leads people to stay away, which is the worst possible outcome.

Karen Wyatt: Yeah, that's interesting because what I felt exactly was, I don't care if you say the wrong thing. If you're here, if you show up, if you brought me a pot of soup, it won't matter to me as much what you say. It's that you came and that you cared.

Emma Payne: Yeah, absolutely. This is precisely the space that we're operating in and it's so heartwarming and amazing to see that people do want to help. And with a little tiny bit of coaching and suggestions and reminders sent to their phones, they can lean in and do the things that, as grievers, we want them to do: the pot of soup or whatever it might be.

Karen Wyatt: Yeah, so tell our listeners how Grief Coach works because I get to be on the inside since I use it myself. Let's tell everyone what it is and how it works.

Emma Payne: Yeah, I'm so proud of it. So Grief Coach is a text messaging service. We are not an app, there is nothing to download. It is very very very simple to use. You sign up online, it takes about five minutes, and you share as much as you're comfortable sharing about the person that you've lost. So if you want to just give us their name, that's okay. But if you want to share holidays that are important to you, cause of death, the anniversary of the death, we will then send you texts for a whole year at least twice a week with expert personalized practical suggestions, resources, tips for your grief journey. And then my favorite part is that you have the option of adding it up to four friends and family who want to help and might not be sure how. And if you do that, we will also text them date reminders. "Hey, tomorrow would have been Karen's dad's birthday. Why don't you reach out?" "Here's a one minute video about how to support someone after a stillbirth." And the griever has the experience of a few people that are important to them knowing that they're supporting them. And the supporters are frankly relieved, right? The husband is like, thank you so much. She was crying all the time. I didn't know what to do. I really appreciate you letting me know that tomorrow was her dad's birthday or suggesting that I make a reservation at her dad's favorite restaurant or whatever.

The supporters are relieved because they want to help and they're not sure how, and the griever now has that experience of, it's not up to them to try - in the midst of their grief - to educate other people about how to support them. We're doing it, we're doing that work for them. So it's a full year of text support for grievers and their supporters - personalized, based on a whole bunch of things: dates, age, cause of death, relationship, and so on.

Karen Wyatt: And I have to say, my experience as a griever... I signed up and entered in information about my mother's death, which happened more recently than my father's. And I had sort of forgotten that I signed up for it. And then on the anniversary of her death, there came a text message that was so lovely and so supportive. And I realized that I honestly didn't have anyone that I would call and talk to about my mom's death that day that I felt like, well who else will care about this like I care? But this text message came that was like, well now I have someone, it's a text message. But it's as if there's a person,

there's someone reaching out who knows that this is the anniversary of my mom's death and who cares about that. And so it was like this lovely surprise I had kind of forgotten to expect that would come. So, the messages have been wonderful.

And then also, as a supporter to other people grieving, I know I myself have found that it's really hard to keep in mind all of the dates that might be special to someone who is grieving: the birthdays and anniversaries or special holidays. It's very hard to stay aware of those things and remember to reach out as much as you want to, and want to be there at the right times. It's just, in our busy lives, sometimes it is impossible and things slip by us.

Emma Payne: Of course, yeah. Then there's only so many things you can have in your calendar and, you know, I think that's exactly right. Thanks for sharing. Our content team works very, very hard. We have, at this point, over 100 different expert contributors. So we focus on making sure that everything we send out is empathetic, practical, personal, but it's also evidence-based, and trying hard to make sure that we're lining up with things that can be helpful in our grief.

Karen Wyatt: And I wanted to say, the messages have been right on point for me - exactly the right tone, but also, I mean, my mom was older. She died at the age of 89, but the messages also reflect upon that - about losing an older parent and what that experience is like. So I really like how personalized the messages are to the type of loss that one has.

Emma Payne: I'm really glad. Thank you. Yeah, we personalize messages based on a timeline in a couple of different ways. So for the user, it's very simple. You sign up and you get texts. And as you said, hopefully we're on point mostly. But on the back end, we do have all kinds of personalization work happening. And we look at the timeline in two different ways. We look at the time since the death and also the time since the subscription began.

You know, when I first started Grief Coach, I naively thought that people would sign up for subscriptions when someone died. Well, that is not necessarily the case. Sometimes it's a year later, two years later, five years later. And now therapists tell me that this is quite common. You know, sometimes in the first year we expect to feel sad. But if we're still feeling deeply sad or stuck in grief a few years later, that might be the time that we reach out. So we're trying to look at the timeline in different ways. We try to look at age in different ways: an older parent who's died versus a child who has lost a parent; we have a teen series - so there, we often get loss of a parent at a younger age; for widows and widowers. Again, the age does make a difference, right? Widowed at 30 versus widowed at 60, let's say. So I'll pass your feedback along to our content team because they worked really hard on the messages.

Karen Wyatt: Yeah. Well, and I've noticed there's a variety. Sometimes it's a little poem. Sometimes it's a link to a short video to watch. So it isn't just constantly messages of

comfort directed to me, but there are other resources available and that's really nice as well.

Emma Payne: Yeah. We've been working with more and more expert contributors who are so... I mean, here's the thing. We're not waiting for somebody to invent a vaccine or discover the best way to support grieving people. There are centuries of wisdom and expertise. The world is full of people with an incredible depth and range of expertise when it comes to how to support someone who is grieving. So for us, we don't need to make this stuff up. The wisdom is there, and what we've built is a very efficient, practical - I think - way of delivering the wisdom at the right time, right into people's hands. Each time we start working with a new expert contributor... We did a new series working with a pediatric ICU nurse named Hui-wen Sato, and her work is with grieving parents, ICU, and also working with grieving clinicians and what it's like to work with people who are dying in a clinical setting. So then we created a body of texts with Hui-wen, and those go out to the people that we've tagged for that. And the messages made me cry.

We just finished a new series for people who have lost a child, a young child. Again the expertise is there. So we just try to find people with the words and experience, do our best to edit it down which - we're talking text, so short and digestible - which I think is also really good when we're grieving. I couldn't read a book for years after my husband died. It needed to be short and just for me. And I think at the beginning, I chose text because I thought that would be the most scalable and affordable and accessible. My hope is that no one ever has to grieve alone. So I was thinking, what is the most efficient way to support as many people as possible at a really low cost? But we've been delivering texts for over three years now, and I've come to realize that it's not just that it's scalable and accessible and affordable. It's also really nice to get support by text; it's private and personal, and we think of text that way. So we hear from people who say, "I haven't deleted any of your texts. I saved them for after third period. That's when I read back and think about my mom." I think that text is actually under-utilized as a support because it is really simple. You don't need to remember to open an app or download something. You don't have to have a video connection. We just text you things and you look at them when you're ready.

Karen Wyatt: I think that's a good point technology-wise. Text messages are pretty accessible to most people who have a smartphone. They're used to getting texts as a way of communicating with people.

Emma Payne: Yeah, I think... we don't even really think of it as "tech" technology in a way. I mean, we're getting a lot of subscribers in rural areas. For example, we have one woman who renewed a couple times already, so she's into her third year. When I chatted with her, she's in rural Pennsylvania. Her dad was a funeral director. She grew up living on top of a funeral home. Her mom was a hospice nurse. She lived in the small town, and she felt that she had grown up knowing exactly what kinds of grief support were available in her small town. And then her sister died. And she found Grief Coach, I think on Instagram, and we started sending her podcasts that she hadn't heard of relating to loss of a sibling in your 20's. And she was saying in some ways, the more inaccessible other

kinds of support might be, if you're in a rural area where there aren't the support groups and other things available, then the more appreciated the text was. We were texting her resources that she didn't know about.

Karen Wyatt: And I would think particularly during Covid, it was fortuitous that Grief Coach was available for these past two years because grief support groups haven't been able to get together as easily. And I think people have felt more fragmented and more isolated in their grief during these past two years. Did you see any upswing in the use of Grief Coach during Covid?

Emma Payne: It's hard to say because we were so young. So we launched in February 2019. March of 2020, we had to sort of pause everything and add a whole cause of death to the system, which was something I had never imagined doing. We worked with Virginia Mason to try and start looking at the particular kinds of support we want to provide to people after a Covid death, right? You weren't with your person at the end, all the things that that population is experiencing. So in 2020, I think we had the same experience that any two year old company would have had, honestly, which is everyone was freaking out. No one was really investing in new technologies. Even if the technology was something that could meet a need right then and there. What did happen though is that grief was getting talked about in a way that it never used to be. So one of our expert contributors who I had worked with on our drug and alcohol death series said, you know, I've been doing bereavement work for 30 years, and even my friends don't really know what I do. And now all of a sudden she's being interviewed by Rolling Stone. So there was an elevation. We got quite a lot of...we had a big NBC piece, New York Times. So I think the grief conversation as a whole was elevated, which is a good thing. As you said at the very beginning here, we're in such a sort of grief-illiterate, fearful world where we're not good at talking about it. So I think that 2020 did provide some value and that the conversation was happening more on the policy front. We're doing quite a lot of work helping to advocate for a White House office of bereavement care, the CDC started measuring bereavement for the first time. But really it wasn't until 2021 that I would say, as a business, people started to think, oh wait, this is a way that we can support more people. And by 2021, the numbers were so out of hand that there was no keeping up with it. Every single person we ever talked to: hospices, grief organizations, children's hospitals, anybody who was trying to support people through bereavement was unable to keep up.

Karen Wyatt: Mm hmm.

Emma Payne: Not just because of Covid, right? We had Covid deaths but we also had increasing death rates in other ways. Our overdoses were skyrocketing. Hospice, bereavement teams were being asked to do more in the community, and that was things like suicides and drug and alcohol related deaths, homicides. And on top of that, a lot of the normal supports weren't available. The support groups were shut down. So I think there were more deaths, less traditional support and longer wait lists. And I think probably also that necessity is the mother of invention. Like we might not think that text messages are the most awesome. A hospital CEO, for example, might not think that text

is the best. But if it's what we can do right now because everything else is shut down, then we'll try it. And then what happened is we started getting pretty incredible feedback and discovering that, actually, texts can be pretty awesome because it's for you and the people around you. And it's all year long, and it remembers the key dates - as you're saying with the anniversary of your mom's death. There is no bereavement coordinator that could do that for 1000 grieving families in the course of a year. So the Covid journey has been weird for everyone. And it was also personally challenging for me with my kid's dad in another country and closed borders and whatever. So I think like everybody else, it was difficult.

Karen Wyatt: Yeah, a very challenging time and we have not yet even seen, I think, the full extent of what's going to come from this time.

Emma Payne: There is early data coming right now and it seems to be coming quite quickly all of a sudden. And it's about increased death rates from things like cancer and heart disease because of low early detection during Covid. People didn't go in for screenings, and now we're unfortunately seeing spikes in whole other areas. So it's just been a heartbreaking time.

Karen Wyatt: Yeah, definitely. Well, I wanted to go back to a while ago... You mentioned something about text-based support for clinicians. And I am really interested in that because I've been concerned for a long time about, you know - as a medical provider myself - having little support for or even acknowledgement of the grief that medical providers experience when their patients die. And particularly during Covid now, I think we have acknowledgement because we've seen doctors and nurses really suffering through the horrendous numbers of deaths that they've dealt with during these couple of years. But I've often wondered how we can help clinicians with their grief because, in some ways, it feels like disenfranchised grief. Like no one expects you to show up at a funeral. And you're not really part of any of the traditional methods of grieving with other people and yet, much of the time you still feel it, you still carry it within that loss. So anyway, tell me more about that. I'm interested in that.

Emma Payne: Yeah, I would love to hear more of your thoughts about it. So the messages that we have for clinicians are, to me... They educated me about what that experience is that you're describing, right? As we worked with our expert contributors and craft of the text, I just realized, these are things that I hadn't thought of either about what it is to walk with families in a clinical setting and see this amount of loss. And of course they bring it home. I mean, we learned that doctors are not even trained in death at all. I've never done this before or since, but we entered this like "health hackathon competition" with a company called Olive and we won the grand prize. And our rollout is actually embedded into their system which sits in something like 30% of US hospitals. So that when a doctor or a nurse enters the words say, like deceased, or patients died or does certain behaviors on the computer, our suggestions and tips come in right away for that doctor, for that nurse: you're gonna walk back into the room with the family. Here are some things that you can say. And then offering ongoing support to them after the fact. So, how to support the family in the moment because they're not trained in how to do

that. And the way that a family hears their loved ones spoken about at that time when they died matters. It sets the stage for what comes next. We hear this all the time. So it's like supporting the clinician in the moment so that they feel supported themselves. Okay, someone's gonna help me know what to do now because this is quite possibly the most emotional moment in the lives of the people in that room over there. I'm going to go in with no training and try and support them, and I don't feel supported. And I've been caring for this person, and I also watched them die. And that's on top of all these other deaths that I've been witnessing. So we work with Megan Devine who does an incredible amount of work with clinicians to actually craft the messages that go out in that hospital system with all of what I just mentioned. And then adding in additional experts like Hui-wen Sato who focuses on pediatric ICU work and clinician grief.

And I love the messages. I wish that every doctor, nurse, social worker could receive them because to me, they're just so... they acknowledge the journey - what it is to be part of a continuum of care where you have one thing happening here and another patient over there that has a different thing. You know, how difficult it is to be part of that hand off and to feel that it might be unprofessional, even, to cry or to feel anything when in fact the opposite is true. It's okay to bring your heart to work and look for ways to manage that as opposed to pushing it down. And this is, you know, we're seeing all kinds of negative health outcomes with our clinicians in terms of anxiety and depression and suicidal behaviors. We're even seeing this huge amount of attrition, right? 25% of nurses are leaving their jobs. We have to acknowledge the pain and loss and suffering that our clinicians face every day if we want them to keep going and doing that so that they can find strength in it. So I think it's really important work. It's quite new. We just started about six months ago, but I agree with you, I think it's overlooked. And it is really important.

Karen Wyatt: Wow, that's beautiful. I have goose bumps because I've long thought that we have to find a way to help clinicians in the moment when they're experiencing the loss and when they're trying to figure out what to do next. And I thought it wouldn't matter how many workshops I taught to doctors, they would have received that information at one time, but it's not going to be top of mind when they're caring for a patient in the ICU. It won't necessarily be there for them.

Emma Payne: Yeah, this is what Megan says as well - Megan Devine, who does all these workshops with clinicians. I mean, first of all, you can only reach so many people that way, and it's not at the exact moment that they need it. So I'm hopeful that this new piece of work that we're doing with Olive actually comes into the hospital systems and will help. We'll see, again, that's a new roll out. But I think again, text is pretty good this way because it's just to you, a couple times a week, specific to your loss. And we talked about, if there's one patient that was special to you and the story is one that you always carry with you and remember the dates of... There was one nurse we were talking about who worked with a tissue bank and remembers that a donor was a teenager who had died. And the donation experience, and staying in touch with the family that way. And this becomes the fabric of their contributions, not just at work, but in the world.

Karen Wyatt: Wow, I'm really thrilled to hear this and so happy that you have this project underway. I would love to do anything I could to support you in that.

Emma Payne: Oh thank you. Yeah I'd love to talk about that more, for sure. That'd be great.

Karen Wyatt: Yeah, I feel like that is so needed and so very important. But in addition to that, I know that you've also been working with hospices. So I'm really curious to know what you're doing there, what you're offering and how that's going.

Emma Payne: Yeah, I mean five years ago, I had never met a hospice bereavement coordinator and now we work with hundreds of them. In fact, two of the people that I've hired onto my small team here at Grief Coach are themselves hospice bereavement coordinators who are now working with us, and it's a really important part of our work. And for anyone who hasn't heard of hospice bereavement coordinators, I'm telling you these people are the most amazing people on the planet. It is incredible the work that they're doing, and it's the same thing with people that do donor support at tissue banks and organ procurement. You know, there are people that spend all day every day supporting grieving people. And this matters not just because it's a nice thing to do, but because grief is a time where we have all kinds of negative outcomes, right? More depression, anxiety, substance use, sleep issues. The more supported that we are in our grief and the more we understand that what we're experiencing is normal and that there are things that we can do, the less we see of these behaviors. There's still not a recognition that bereavement care is health care, but it is. We know that grieving people experience all these things, but we don't yet, as a nation, recognize bereavement care as a part of the healthcare system. The patient dies and then what? Then the patient is not in the system anymore. So yeah, the hospital bereavement coordinators usually come to us with a version of the same story, which is you know, we had 2000 deaths last year. I'm the only bereavement coordinator. I'm supposed to be supporting all these families, and I really want to, I'm passionate about this work. I have the knowledge and the wisdom and the care, but there's no way that I can keep up with this volume. And hospices traditionally have been sending out mailers so, one month form letter, another one at three months. But they have no idea if they're opened. They don't know, who knows if the family opened it, or if they're grieving and probably not going through their mail in that way. So about two years ago we started working... We developed a hospice program. Hospices are required in the U.S. to provide 13 months of bereavement support. So we have a 13-month product that we then sell in packages to hospices so that they can, in addition to mailers and support groups, also offer text-based support to their grieving families. And it's been a really big part of the work that we're doing at Grief Coach. And for me, definitely some of the most rewarding. So in September, we ran a survey for Hospice of the Western Reserve, which is a large hospice in Ohio. And one of the very first hospices that we started working with. So they had family members who had been receiving our texts for that full 13 months and they agreed to let us survey them. And I was, I mean, I was fairly confident we would get positive feedback because anecdotally we've been hearing from people. But this was our first time running a full survey, and 96% of the griever said these texts have helped me with my grief journey. 96% gave us a

four or five out of five, and 4%, 3 out of five, which is still okay. And I was like, that's incredible.

Karen Wyatt: Wow, that's amazing.

Emma Payne: Right. And yeah, incredible. So now we are starting to be able to roll out those same questions to our hospice families. So the bereavement coordinators often, like, we've had a couple situations where the bereavement coordinator is like, I don't know what this text is, I don't know if that's what people will want. I'm working in rural Wisconsin, I don't know if people will want it. Then they roll it out, and they're I think even themselves surprised by how well received it is because people are like, oh well now we don't have to drive for two hours to get to the support group or thanks for remembering my dad's birthday. The one hospice coordinator in Wisconsin is not gonna remember like, the birthdays of everyone who died, but instead the text messages come from the hospice, right? Hospice of the Western Reserve is pleased to provide you with the support. We know tomorrow would have been your dad's birthday. Thank you for letting us care for him. Now we want to care for you.

Karen Wyatt: Wow.

Emma Payne: So it's beautiful work. I'm very proud of it.

Karen Wyatt: It's amazing. That's really a breakthrough. Like, as you describe, a bereavement coordinator trying to manage 2000 families and to offer them the right support and what they need at the right time - that's impossible to even consider.

Emma Payne: Impossible. And they're being asked to do more and more in the communities. We were talking to one senior briefing manager a few weeks ago and the hospice is getting inbound requests from school districts. Can you come? And this is often suicides of teenagers where the school is reaching out to a hospice bereavement team. Can you please come and help us? We don't know what to do. Well, hospices, in a traditional sense, wouldn't be seeing suicides, right? They're caring for people whose loved one died in hospice. So not only is the volume untenable, but they're being asked to do essentially crisis response and other causes of death. And how much can one bereavement coordinator do in their community? So that's a larger question. But in the meantime, I'm glad that we can help because at least then the student's family or the friends are getting something specific to suicide right away and it lets the bereavement coordinator actually have peace of mind that everyone's getting something instead of going home every day stressed because you know, that there's a bunch of people you didn't have time for.

Karen Wyatt: And it's such a sign of, I guess, the lack of grief information and support in our communities that hospice has become the de facto bereavement coordinator for the entire area because we don't have enough of that happening in our communities in general.

Emma Payne: We've been hearing it more. I mean, I don't think it's true - some hospices are not doing community work, but I would say that we're hearing it usually now. But there's just an increased need, not just because of an increased number of deaths in hospice, but because they're being asked to do more above and beyond. And then we're still talking about now a certain segment of the population that is more likely to have received hospice care and is more likely to reach out for grief support. So there's on top of that, an accessibility issue around which populations are receiving support and how. So we also work very, very hard at Grief Coach to have a lot of support for our BIPOC griever, we're offering support in multiple languages now, which is great. I think we're up to 10 or so languages because that one briefing coordinator, even if they had all the time in the world is probably not multilingual and providing ongoing support based on certain types of populations. They might not know what would be helpful around Ramadan, for example.

Karen Wyatt: And so do you have the texts offered in different languages and various cultures and religions?

Emma Payne: Yeah.

Karen Wyatt: That's amazing.

Emma Payne: We've got different languages. We're working really hard on this piece. We've launched a new series for LGBTQ griever, which I'm really proud of because there's a lot of disenfranchised grief if your partner dies but was never recognized by your family and so on. And I think that it's hard to try to... I always talk about feeling proud of Grief Coach, and I think it's because I need to balance out the other side of my head, which is like it's not enough. The need is so huge. How are we ever going to help everybody? It feels a little despairing sometimes because the need is just so great. You know, I mean, like a black 10 year old in the US is something like three times more likely to have lost their dad, twice as likely to have lost their mom, infinitely less likely to have received any support at all. But we know that with grief, we see not only negative health outcomes, but also often negative financial outcomes. If your dad is shot, if you lose your dad to gun violence, what are the things now that we can statistically say are more likely for you? But that kid is less likely to get support. They're less likely to have a hospice death and to have been invited to go to a summer camp for three days for grieving kids. Right? So the need is enormous. And I do think that, as a business, we're doing a good job of trying to make sure that everything is expert and quality support. But at the same time, understand we have an opportunity to provide nuanced specialized support in different situations. So what if you are a teenager whose dad was shot, right? What do you say to that kid? And most of us don't know, and how would we? So we try to help the people around that child know what to say, which helps their outcomes. It reduces the chance that they themselves will have negative outcomes, right?

Karen Wyatt: It's so important because you're acknowledging that grief is such a unique experience for each person, depending on who died and how the death occurred and

when and all of those factors. And so it's almost impossible for any one of us to be prepared on our own to be a supporter for anyone else's grief.

Emma Payne: And I mean that's what brings us full circle to what you said about your dad's suicide and people's ability to respond to that. And what I was saying about Barry's, my husband. I mean, we cannot all know what to say in these really, really difficult situations and expecting that we would makes us feel guilty. Then we stay away. Then we don't do anything because we feel we're somehow failing. It's just hard.

Karen Wyatt: It's almost mind blowing to me to think the task for you and your staff and your contributors of actually sitting down and thinking through all of these scenarios, and what would be the right thing to say, and what are the right messages to send?

Emma Payne: It's getting more and more nuanced and more and more beautiful. Honestly, we added a new series about seven or eight months ago for caregivers, for people who were a caregiver to the person who died. And those messages uniformly get a positive response because I think, you know, the woman who was caring for her husband for three years before he died, having that experience acknowledged back to her and the different feelings that can come there - sometimes relief, and that's okay. It's okay to take care of yourself even though you haven't been able to do that for all of these years that you were caring for him. So, and there's, I mean, there's so much more to do. We're working hard at the moment on our violent death work. None of those situations are the same. So in a homicide it could have been a spouse. It could have been, there's all kinds of questions that come next. So it's like, yeah, we're doing lots and there's lots more to do.

Karen Wyatt: Yes. Yes. You just mentioned caregivers, and I was thinking that's a group of people that could really use supportive texts even for their anticipatory grief before their accounts.

Emma Payne: So we didn't prep this, but that was an excellent segue because that's exactly where we're focused right now. We're actually submitting some research proposals next week to expand into anticipatory grief and really be able to, because obviously grief begins long before the person stops breathing. And so far, all of our three years of texts have been focused on people after death and we want to be moving to anticipatory grief for sure.

Karen Wyatt: Oh so you mentioned three years. So it's possible to sign on for three year's time to get the grief support?

Emma Payne: We have people renewing. Yeah we do. We have the woman I was talking about in Pennsylvania who grew up on top of the funeral home. She was one of our very first subscribers and she keeps being the first to renew. So she's into her fourth year of texts which is awesome. Yeah. But usually people do a year. I mean sometimes they... we'll see because we're not an old enough company to see yet. But a lot of our hospices do offer free renewals. They're happy for the person to renew and keep getting support if they're finding the texts helpful. Sometimes we get messages. We have one with one of

my favorites, a woman whose husband died in hospice and she said, I'm not going to renew. But that's because I feel ready to take the training wheels off. Thank you for helping me get to this point. I feel so different than I did 13 months ago and I'm ready. And I know that if I need you, you'll be there and I can start again. But for now I'm gonna not. So sometimes not renewing makes us feel pretty good about what we're doing.

Karen Wyatt: Definitely! And am I correct? Is it possible to give Grief Coach as a gift to another person?

Emma Payne: We have gift subscriptions which work very simply. You basically buy the subscription, put their email address, and then they will get a note which you can customize if you want. But we give you suggested language letting you know, Karen's brought this gift for you. No rush to sign up. We know you might not be ready now. But when you are...

Karen Wyatt: Oh I see. So they don't just automatically start receiving the messages. They indicate that they're ready.

Emma Payne: Yeah. The gift subscriptions have been happening more and more. We didn't originally offer them. But it makes sense. We have people now saying, oh now I've bought it as a gift. It's my go-to sympathy gift. I would rather spend \$99 on a full year of support for my friend than send a bouquet of flowers for the same amount of money. This feels practical and useful. One guy says, for him, he's like I just want to do a practical thing that's also thoughtful. So this is a gift that says I understand that grief is a long experience, and it takes time. And I want to give you something truly supportive.

Karen Wyatt: And I can say, it's a gift you can trust in; that the messages that people receive are so thoughtful and caring and gentle in a way that you don't have to worry that there will be some message that you wouldn't feel good about the person receiving that you're caring about, if you give it as a gift.

Emma Payne: Thanks for saying so. Yeah I think again, we work hard on that part, applying all the different lenses: is it empathetic? Are we using careful enough language but also friendly and warm, and at the right time?

Karen Wyatt: So this is an odd question, but if I wanted to sign up just as a supporter for someone who... the griever has not signed up for whatever reason. But if I just wanted the reminders as a supporter, is that possible to sign up?

Emma Payne: Yeah we had some really...um, one of the first we had, one of the first times that happened was a couple of years ago, and it was a group of girlfriends whose friend's daughter had died by suicide. So the mom was not even getting out of bed, they didn't even tell her about it, but the girlfriends all signed up and they were all getting text reminder suggestions. How do we help this dear friend of ours who is really, really suffering?

Karen Wyatt: Because I can imagine situations like that when the griever, for whatever reason, just may not be ready or able in the moment to sign up for this.

Emma Payne: You can also change your mind. As a subscriber, you can go ahead, buy a subscription and get messages just for you with suggestions for how to support your person. And later, if you want to add the person in, you can. And then they'll start getting messages a few months later, so it's very flexible. You can change it as you will. So there were these two sisters whose dad had died. He was in his 80's, their mom was in her 80's. So they signed up to get tips and suggestions for them. How do we support our mom who's grieving and she's 3000 miles away? We're in the middle of a pandemic. So they were getting those suggestions, and after a month or so they mentioned it to their mom. And the mom was like, well I don't know, maybe I would try that, I know how to get texts. So they added their mom in and then they said that this had actually become a really important part of their year because the mom would get a text and then she would call one of her daughters and say, oh I just got this text from Grief Coach, it's talking about "this." And because in her generation there wasn't language for it or a way to talk about grief for her, the texts were an invitation to a conversation that she could then actually pick the phone up and talk about. So that was kind of cool because it started off with the supporters, then they added in the griever, and then the griever used the text as a tool for actually talking to people in the real world, you know, just kind of nice.

Karen Wyatt: Yeah, I really like that. I just love how versatile it is in the moment of need. It has potential for everyone considered to offer what people need in the moment.

Emma Payne: Naively at the very beginning, back to when I was on the airplane coming up with the idea in the first place, I actually thought that might be the use case. That supporters would use that to get tips and suggestions for how to help if they didn't know how, so... And we do get that, but more often it's the griever who signs up.

Karen Wyatt: Yeah. And then I wanted to mention for anyone out there who might be doing grief counseling or support professionally, I've signed up as an affiliate, which means I have a special code. And if people sign up for it, the people who sign up get a \$10 discount on the subscription for a year. And so that opportunity to be an affiliate is really nice as well, to know that people will get a discount and you as an affiliate will get a \$10 payment, I guess.

Emma Payne: Yeah. I love our affiliate program. I think it's amazing. It makes the subscription a little bit cheaper for the grieving person, which in the end is what we're trying to do, to make it as accessible as we can. But it's better coming from the therapist, the hospice, the grief expert than from us because the griever doesn't know us, right? We're the deliverer of the support, but it's so much nicer when it's recommended by your therapist, your hospice, the organization that you're already receiving support from and that you trust.

Karen Wyatt: Yeah, definitely. So I think if you're a provider of some sort for people who are grieving, you should at least check it out. So go to <http://grief.coach>. That's the website and you can learn everything you need to know there about how things work.

Emma Payne: I don't know, we got into it here with this conversation for lots of deeper insights as well. So that was fun. But they can also email me Emma@grief.coach. I'm happy to chat with people who are interested.

Karen Wyatt: And then Shelby Forsythia is helping with the affiliate program if anybody wants to sign up there.

Emma Payne: Shelby@grief.coach. She's awesome.

Karen Wyatt: She is, she's amazing.

Emma Payne: She began as an affiliate herself. That's how we met her because she has written some books about grief and has a beautiful podcast. So originally we were working with her that way and then she's, yeah, she's now our marketing manager here at Grief Coach and helping us to build our affiliate program. And I mean ultimately, the goal is that people wouldn't have to pay for these subscriptions at all. The Grief Coach is designed to be as affordable as we could possibly think of as a way to give people a full year or sometimes 13 months of support. So the reason that we're doing the research and trying to get the data is because then we could go to insurance companies and payers and say, hey look, you can, you know, for this small amount of money, make it less likely that a person will experience depression or anxiety or substance use or have an increase in hospital visits or all the things that happened during bereavement. So we're working to make the cost vanish eventually for the user.

Karen Wyatt: Yeah, well I'm so impressed with what you've done and I'm a true fan, I will say. And so I've been impressed just for myself, just for what those messages have meant to me. But knowing what you're doing and all of the, all the people you're reaching, it's really phenomenal. And then the potential for so much more growth and so much more support for people. It's beautiful.

Emma Payne: Thank you very much. That means a lot coming from you with your depth and breadth of expertise in this space as well, so I really appreciate that.

Karen Wyatt: Well, I wish you the best of luck with everything going forward and I can't wait to see where you go next and what comes of this. Thanks for joining me today, Emma.

Emma Payne: Thanks for having me. Pleasure