

ECHO IDAHO

Behavioral Health in Primary Care

Grief and Bereavement: Psychological Interventions

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Learning Objectives

- Understand difference between grief and bereavement
- Understand therapeutic models underlying types of interventions
- Understand typical therapeutic approaches
- Understand when grief can become a disorder
- Resources

Grief vs. Bereavement

- Grief is the response to any type of loss that may include emotional, physiological, or psychological reactions.
- Bereavement is the response to a death related loss that often includes a state of mourning, a period of adjustment to the absence for the role held by the deceased, and integrating/accepting resulting changes to identity.
 - Attig's theory of the Shattered Assumptive World suggests a need to relearn the world after the death of a loved one, including our place within a new and "foreign" world
- Responses to both could include:
 - Sadness, anger, surprise, confusion, guilt, disappointment, resentment, etc.
 - Sleep and appetite disturbances, suppressed immune system, cardiovascular problems, digestive distress, headaches, and other stress-related concerns.
- Grief therapy is warranted when there is a breakdown in an individual's ability to reregulate through experiencing these typical responses, adapt to the changes in life's structure, and/or accept the new reality by finding an enduring connection through continuing bonds.

Therapeutic Models

- Worden's Task Model:
 - Process emotional pain, define and adjust to new life, accept
- Rando's Six "R's" Model:
 - Recognize, react, recollect, relinquish, readjust, reinvest
- Stroebe & Schut's Dual Process Model:
 - Reduce loss orientation which includes rumination and hyperfocus on the death experience, and develop restoration orientation which includes acceptance of new roles and loss of old ones as well as creating a new life
- Dana's Polyvagal Model:
 - Recognize autonomic state, respect survival response and reduce avoidance, learn to regulate without activating sympathetic nervous system (enter ventral vagal state), "Re-story" or reduce tendencies for connecting to loss through guilt
- Wolfelt's Companionship:
 - Bear witness to the suffering of another, simply being present within another's pain without trying to take it away, being curious about the journey and walking with instead of approaching through expertise
- Neimeyer's Meaning Reconstruction:
 - Reconstruct or redefine the world after a loss, which includes understanding both the new self as well as how that new self engages with the world. Restorative retelling, avoiding a disorganized narrative in an attempt to understand loss through imposing blame and guilt (Guilt is easier than grief)

Therapeutic Approaches

- Narrative Therapy
 - Assist in developing healing and resilience through discussing the specifics of the loss experience, and connect to the loss and subsequent grief in a meaningful and authentic way.
- Acceptance and Commitment Therapy (ACT)
 - Assist in recognizing and embracing emotional responses to loss, align with values and take action in pursuit of these values, and reengage in meaningful life with intention and acceptance.
- Cognitive Behavioral Therapy (CBT)
 - Address maladaptive thinking, challenge negative beliefs about loss, reduce self blame and guilt.
 - Reduce avoidance and instead develop healthy coping mechanisms.
 - Often used in prolonged and complicated grief
- Motivational Interviewing
 - Create a safe space to foster compassionate dialogue to explore vulnerable feelings, identify and resolve ambivalence and avoidance, and build upon internal motivation to move forward with life despite pain of loss.
- Meaning Making
 - Understand how loss impacts aspects of self such as purpose and core identity, integrate resulting changes, and develop new meaning for life while fostering healing and acceptance.
- Restorative Retelling
 - Similar to Cognitive Processing Therapy (CPT) investigating the way a griever reduces the ambiguity of loss by “storytelling”, or filling in the gaps of the loss with stories that are often based on internalized guilt
 - Reduce attempts to make sense of the “what-ifs” through self-blame

When Grief Becomes a Disorder

- Prolonged Grief Disorder (PGD)
 - Specifically bereavement related and involves symptoms lasting for a over a year such as intense yearning, preoccupation with the deceased, and difficulty accepting the loss which becomes a barrier to healing.
 - May benefit from trauma focused interventions.
 - EMDR can be utilized to target specific memories causing emotional distress, and foster adaptive healing through resolution of “stuck” memories leading to acceptance.
- Major Depressive Disorder (MDD)
 - Differs from PGD in the intensity of pervasive sadness and not simply death-related, loss of interest activities and typical roles in life (occupation, social, family, etc), and overall hopelessness which may or may not include suicidal thoughts.
 - Can co-occur with PGD especially if symptoms present prior to the loss
- Personality Disorders
 - Borderline Personality Disorder can develop when emotional dysregulation becomes so pervasive that it causes an escalation in feelings of abandonment, engaging in impulsive behaviors to minimize discomfort, and creating instability in relationships.
 - Avoidant Personality Disorder after extreme social withdrawal to avoid feeling rejected or judged.
 - Dependent Personality Disorder after relying excessively on others for emotional support, when that support recedes the individual may develop learned helplessness or martyr syndrome.

Assessments

- Bereavement Risk Assessment
 - Often used to assess for complicated or prolonged grief.
- Grief Experience Questionnaire
 - Assesses emotional and somatic reactions, guilt and shame, and bereavement survivor beliefs that may be causing more severe emotional distress
- Grief Impairment Scale
 - Designed to identify when grief is causing clinically significant emotional impairment
- Inventory of Complicated Grief
 - Attempts to differentiate between typical grief responses and the potential for a current or forming complication to grieving.
- Prolonged Grief Disorder-13
 - A tool to help with assessing for the potential of the presence of criteria that meet this formal diagnosis.
- Texas Revised Inventory of Grief
 - Measures current grief reactions to determine potential presence of pathology, and tracks severity over time.

Key Considerations – Potential Barriers

- Children
 - Age appropriate interventions, explanations of concepts, assistance with emotional expression, and providing genuine empathy
- Identity and roles
 - The ability to express self in the world and define roles in that same world may be impacted by fear of judgment, rejection, or even repercussion
- Traumatic Loss
 - Victims/survivors of traumatic loss such as war and violence, acts of God such as the fires in California, murder or suicide, etc. will likely require more specialized trauma-focused debriefing and interventions.
- Faith and Spirituality
 - It is very important to understand the griever's relationship with faith and spirituality to address potential interventions as well as complications based on these beliefs.
- Cost
 - Most insurance companies do not pay for treatment for grief, some even deny coverage for PGD. Cost can become a barrier.
- Culture
 - Allow for differences in aspects of race and ethnicity, collectivism vs. individualism, traditions and norms, etc.
- Disenfranchised grief and marginalized populations
 - LGBTQIA+, refugees, or any minority group considered to be “outside the norm” or “othered” may experience further marginalization in grief due to lack of empathy or even allowing for safe expressions of grief.

Resources

- Bestfriends.org – Support for pet loss
- Compassionatefriends.org – support for bereaved parents
- Good-grief.org - Resources for grieving children and families
- Griefincommon.com – Links grievers to individuals and groups who have experienced a similar loss
- Griefshare.org – Coordinates all manner of support groups internationally
- Missingpiecesgrief.org – Supports families and communities experiencing an infant, child, or young adult loss
- Mygriefconnection.org – Resources for coping with loss of all kinds
- Nationalshare.org – pregnancy and infant loss support
- Nacg.org – National Alliance for Children's Grief
- Prolongedgrief.Columbia.edu – Premier research center for prolonged grief disorder, offers education and resources
- Save.org – Support and resources for survivors of suicide loss
- Taps.org – Support for families experiencing a military loss
- Whatsyourgrief.com – Resources for grievers, their families, and grief professionals

Key Points

- There is a difference between grief and bereavement, in that bereavement is specifically related to a death. However, providing support or interventions may look similar.
- There are several psychological models which define potential healthy outcomes for grief treatment.
- Therapeutic approaches build on these models, applying techniques for emotional healing and acceptance.
- Not all people who grieve will require psychological intervention, however if avoidance or guilt become problematic, the lack of treatment when necessary can lead to an actual disorder.
- There are numerous assessments available both privately and in the public domain, to assist practitioners in determining the severity of emotional distress from a grief experience.
- It is important to consider there are many facets such as culture, age, and identity that could impact a grief experience; as well as an individual's ability to cope with resulting emotional distress.

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