**Academic/Research Article** 

# Death and types of grief A guide to the intricate and universal path of grief

By Hamza Mahoney



**T**his article gives an insight into various theoretical frameworks of grief, such as the Dual Process Theory, the Biopsychosocial Model (Two-Track Model) of Grief, Grief Attachment Theory, the Task Model of Grief, the Continuing Bonds Theory, and the Meaning Making Theory, and also demonstrates the importance of understanding grief. An interesting insight into the different types of grief, including acute, integrated, and complicated grief, and underlines the importance of signposting for counsellors and therapists.

#### Introduction

Grief, a profoundly painful experience, is a universal journey of loss, which encompasses physical, emotional, cognitive, behavioural, and spiritual aspects (Hall, 2014). It is a journey most individuals inevitably embark on, facing the death of a close friend or relative at various points in their lives (Bonanno & Kaltman, 2001). The circumstances of the loss, the nature of the relationship, and individual coping mechanisms can influence the manifestation of the grieving process in various ways. Ultimately, grief is the price we pay for love (Hall, 2014), a shared experience that binds us all.

According to Supiano (2018), theory is vital in grief and grief therapy as it provides a systematic framework for understanding and addressing bereavement's complex processes. It aids researchers and practitioners in making sense of grieving individuals' experiences, guiding the development of tailored interventions. Theories offer explanations and predictions about grief reactions, allowing professionals to meet bereaved individuals' specific needs. Additionally, theory underpins research by identifying mechanisms that facilitate growth in grief and dismantling intervention effects to determine what contributes to therapeutic change, for whom, and under what circumstances treatment works best.

This article delves into various theoretical frameworks, offering practical insights into how individuals cope with grief. These frameworks, including the Dual Process Theory, the Biopsychosocial Model (Two-Track Model) of Grief, the Attachment Theory, the Task Models of Grief, the Continuing Bonds Theory, and the Meaning Making Theory, are not just academic concepts. When



understood and applied, they are powerful tools that can significantly enhance the support counsellors and therapists provide to clients coping with grief and loss.

Furthermore, this article explores different types of grief, including acute, integrated, complicated and pet grief, and the role of death education. It concludes by exploring the importance of signposting for counsellors and therapists and highlighting some available supports in Ireland.

Navigating grief and loss is a deeply personal and often challenging journey that individuals face at various points in their lives. Several theoretical frameworks offer insights into how bereaved individuals could cope with these experiences.

# Acute, integrated and complicated grief

Deep sorrow, distress, and disbelief characterise acute grief, the initial response to loss (Hall, 2014). This often includes a range of emotional, cognitive, and physical symptoms such as anxiety, confusion, fatigue, physical pain and sadness. The intensity and duration of these symptoms can vary depending on a variety of factors contributing to the impact of the loss and the grieving process, including the type of death, background, relationship to the deceased, individual coping styles, and social community supports (Neimeyer, 2019).

Integrated grief marks the enduring response that follows successful adaptation to loss, rekindling a sense of contentment in one's ongoing life (Shear et al., 2013). Specific individuals may not follow this trajectory and develop complicated grief, also known as prolonged grief disorder, impacting between 10% and 15% of bereaved individuals, especially those affected by unexpected, violent, suicidal or untimely deaths (Hall, 2014). Early identification for complicated grief are not just important; they are essential, as research has shown that specially designed grief therapy supports bereaved individuals with complicated grief

(Shear et al., 2013)

The concept of complicated grief, a severe response to loss, is included in the World Health Organisation's International Classification of Diseases, 11<sup>th</sup> Revision (ICD-11) and the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5) and continues to evolve (Dodd et al., 2022). It is a disorder (Shear et al., 2013) that significantly impacts a variety of areas for the bereaved individual, including family relationships, social functioning, purposelessness and continuing to struggle with the reality of the loss for a year or more following the bereavement. The time since the loss and the ability to function are crucial components in identifying complicated grief (Bonanno, 2009). Early identification and intervention for complicated grief are not just important: they are essential, as research has shown that specially designed grief therapy supports bereaved individuals with complicated grief (Shear et al., 2013).

In complicated grief treatment, the agenda for the 16 weekly sessions is structured in four phases: getting started, core revisiting sequence, mid-course review, and closing sequence. Tools used in complicated grief treatment include a grief monitoring diary for the client to identify grief triggers and patterns and observe their daily intensity experiences with grief. The counsellor or therapist would suggest that clients invite a close friend or family member to join a session to rebuild connections. In later sessions, clients explore memories and hold an imaginal conversation with the deceased (Shear & Gribbin Bloom, 2017).

# **Dual Process Model**

Stroebe and Schut (1999) developed the Dual Process Model of coping with bereavement, which outlines a divided approach to comprehending how individuals navigate the challenging experience of grief. This model comprises two primary dimensions: loss orientation and restoration orientation.

Loss orientation pertains to emotional engagement with grief, encompassing feelings such as yearning, sorrow, and enduring attachment to the deceased. During the initial phases, negative emotions are predominant; however, positive affect gradually emerges as time progresses. This orientation underscores the fluctuating focus between the bereavement experience and other life stressors. It highlights the necessity of oscillating between confronting the emotional pain of the loss and overcoming any resistance to change (Corr et al., 2019).

On the other hand, restoration orientation involves problemsolving, re-establishing routines, and seeking new roles and activities, contributing to a renewed sense of purpose. It addresses the practical and instrumental challenges the bereaved individual faces (Corr et al., 2019). This component emphasises balancing grief work with efforts to restore a functional and meaningful life and adapt to the new world for bereaved persons.



In later research, Stroebe and Schut (2016) addressed that these stressors can accumulate and become overwhelming for an individual journeying through grief. Overload in the context of bereavement can manifest as multiple losses, conflicting demands, financial difficulties, and work-related stressors. These accumulating stressors can overwhelm bereaved individuals, significantly impacting their ability to cope effectively.

The Dual Process Model posits that effective coping with bereavement is dynamic, requiring a balance between emotional processing and active engagement in life-rebuilding activities (Neimeyer, 2016). By integrating loss and restoration orientations, this model offers a holistic framework that captures the multifaceted nature of coping with grief. It acknowledges that bereaved individuals need to process the emotional impact of their loss while also managing the practical exigencies that arise.

#### **The Two-Track Model**

The Two-Track Model, proposed by Rubin (1999), offers a bifocal perspective on responding to interpersonal loss. This model integrates biopsychosocial functioning and the ongoing relational bond with the deceased across the life cycle. It demonstrates an understanding of how loss affects an individual's overall functioning and the nature of their relationship with the deceased.

### Track one

Biopsychosocial functioning focuses on bereavement's biopsychosocial impact. It examines how the death of a significant other affects biological, behavioural, cognitive, emotional, intrapersonal, and interpersonal aspects of the bereaved individual's **R**elational bond underscores the continuing bond's significance and strongly emphasises the bereaved individual's relationship with the deceased

(Malkinson et al., 2006)

life. This track evaluates negative and positive functioning changes, similar to assessments for other major life stressors, including levels of anxiety and depression, the ability to invest in life, the use of social supports, and general markers of functioning. The primary aim is to support the bereaved individual function and manage the new reality without the deceased (Malkinson et al., 2006).

#### Track two

Relational bond underscores the continuing bond's significance and strongly emphasises the bereaved individual's relationship with the deceased (Malkinson et al., 2006). It investigates how this relationship evolves post-loss and how the bereaved maintains bonds with the deceased. This track emphasises the importance of understanding the psychological organisation of the pre-loss tie and how it changes after death.

#### **Grief Attachment Theory**

John Bowlby's (1982) model of grief is rooted in attachment theory, and these attachment bonds shape an individual's emotional grief experience with the deceased. Bowlby (1982) asserts that grief is a typical reaction to loss and separation, characterised by a variety of feelings and actions as an individual comes to terms with the deceased's absence.

The theory categorises

individuals into different attachment styles, including anxious-ambivalent, avoidant, disorganised, or secure, based on their early caregiving experiences, which influence how they cope with grief later in life (Bowlby, 2005). In grief, the perceived attachment signal activates the behavioural system, resonating with the individual's attachment style. These attachment styles shape affective, behavioural, and cognitive responses and coping strategies (Neimeyer, 2016), and they contribute to understanding love and loss (Machin, 2009), similar to maintaining a continuing bond with the lost object through these internal representations.

Klass (1988) stated that while Bowlby's model addresses the initial stages of grief and the process of detachment from the deceased, it does not fully account for the ongoing relationship with the internal representation of the lost object. However, this ongoing relationship is a significant aspect of the grieving process, reassuring individuals about the continued significance of their loved ones in their lives.

# **Task Models of Grief**

William Worden (2010) posits that mourning necessitates the completion of four essential tasks to avoid impeding further growth and development. Worden's Task Model of Grief outlines specific actions individuals must take to cope with loss successfully (Humphrey & Zimpfer, 2008). These tasks include accepting the reality of the loss, processing the pain of grief, adjusting to life without the deceased, and finding an enduring connection with the deceased while moving forward. Worden's model provides a structured yet flexible framework for counsellors and therapists to support bereaved individuals.



Task 1: Accepting the reality of the loss (Yousuf-Abramson, 2020). This task requires both intellectual and emotional acceptance of the fact that the loved one has passed away. Intellectual acceptance entails acknowledging the loss, such as attending the deceased's funeral and burial. On the other hand, emotional acceptance involves coming to terms with the emotional impact of the loss, which can be more challenging.

Task 2: Processing the pain of grief. This task involves dealing with the pain that comes with the loss of a loved one. Worden (2010) acknowledges that the levels of pain experienced can vary from person to person but emphasises that feelings of discomfort are inevitable in the grieving process.

Task 3: Adjusting to a world without the deceased (Yousuf-Abramson, 2020). This task entails accepting the practical and emotional changes and navigating through them after a loved one's departure. Adjusting to a world without the deceased can involve various challenges, such as redefining roles and responsibilities, adapting to changes in daily routines, and finding ways to cope with the emotional void left by the loss.

Task 4: Finding an enduring connection with the deceased while embarking on the journey of life (Yousuf-Abramson, 2020). This task involves finding healthy ways to remember the deceased while embarking on a new life. This task focuses on creating an enduring connection with the deceased and integrating their memory into one's ongoing life.

# **Continuing Bonds Theory**

The Continuing Bonds Theory (Klass et al., 1996) refers to the

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ongoing emotional connection and relationship that individuals maintain with a deceased loved one after their passing. This theory validates bereaved individuals' desire to honour and remember their loved ones, offering a compassionate approach to grief counselling. It views continuing bonds as a natural and healthy part of the grieving process.

Continuing bonds influence how the bereaved individual appraises the loss and finds meaning after it, potentially aiding their coping process. This theory suggests that bereaved individuals can continue to feel connected to their loved ones through tangible actions and symbolic representations, including celebrating their loved one's birthday, visiting their grave, or keeping their belongings to maintain a connection (Boelen et al., 2006).

These factors highlight the complexity of continuing bonds in grief and demonstrate the positive or negative influence towards the bereaved individual's adjustment to the loss (Root & Exline, 2013). For example, how the bereaved individual perceives the continuing bond with the deceased, whether positive or negative, can impact their coping mechanisms and adjustment to the loss. The quality of the bereaved individual's relationship with the deceased before their passing can influence how they engage with continuing bonds and how it affects their grieving process.

Bereaved individuals' beliefs about the afterlife and the continuation of existence after death can shape their experience of continuing bonds and their coping strategies. The specificity of the expressions of continuing bonds, ranging from vague feelings of connection to more concrete manifestations like seeing visions of the deceased, can impact the effectiveness of the bond in helping the bereaved individual adapt to the loss.

# Meaning Reconstruction

Niemeyer's meaning reconstruction is a framework underlying the concept of continuing a bond with a loved one who has passed away. It emphasises two key themes: first, the importance of making sense of the loss by the bereaved individual; second, finding meaning and integrating the experience of loss into one's own self-narrative (Thompson & Neimeyer, 2014).

Niemeyer emphasises the importance of allowing individuals in high-safety and low-avoidance environments to tell their story, recounting the event of the death and exploring the history of the relationship with the deceased using restorative retelling, imaginal conversations, memory boxes, and life imprints (Neimeyer, 2019).

Restorative retelling involves the bereaved client unpacking and discussing details of the dying process over multiple sessions, exploring the external, internal, and reflexive narratives. Imaginal conversations with the deceased are a therapeutic technique involving imagining the deceased as a helper in therapy. The aim, in a symbolic way, is to confirm a secure attachment to the deceased. Memory boxes and life imprints support reflecting on the deceased's ongoing impact on the individual's sense of self. Techniques include using family photos to stimulate recollections, exploring the deceased's unique qualities, stories, and strengths, and using memory boxes to hold mementoes. This storytelling process enables individuals to make sense of the loss's impact and significance by integrating it into their ongoing life story (Neimeyer, 2019). These techniques aim to help bereaved individuals process their grief, find meaning in the loss, and rework their attachment to the deceased in a way that promotes healing and adaptation.

#### Pets

Grieving a pet loss highlights differences and similarities in the loss experience between a person and a pet. Society often places more value on and provides more significant support for human grief than pet loss, leading to potential feelings of disenfranchised grief for pet owners (Thompson & Cox, 2017). Additionally, pet owners may experience anticipatory grief before an impending loss due to pets' shorter lifespans, knowing that they will likely outlive their animal companions, which can impact the grieving process. The decision-making process around euthanasia is a unique aspect of pet loss (Barnard-Nguyen, 2016), where owners may have to make the difficult choice to end their pet's life, a situation not typically encountered in human loss experiences. Despite these differences, the emotional impact of losing a person or a pet can evoke similarly intense feelings of grief, sadness, and loss, highlighting the depth

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of the emotional connection between humans and their animal companions.

Individuals may maintain a sense of connection and bond with deceased loved ones and pets through memories, rituals, and dreams, demonstrating the enduring impact of these relationships on the grieving process. Human and pet loss scenarios share similar coping mechanisms, such as seeking social support and exploring ways to remember and cherish the relationship.

#### **Death education**

Death education is an essential component of training for professionals and aims to provide knowledge and skills to understand and support individuals with death, dying, and bereavement. Normalising discussions about death helps reduce the stigma associated with it and manage emotional responses to loss and death, ultimately fostering a healthier approach to grief and loss.

# Signposting

Natural support, including family, friends, and others in the community, aids against psychological morbidity (Aoun et al., 2018) and is sufficient for most bereaved individuals (Shear et al., 2013). As research has demonstrated, parents who have lost children or individuals who have been bereaved by suicide or homicide are prone towards developing complicated grief Neimeyer, (2019).

Counsellors and therapists should recognise that their expertise and capacity for work are limited, and they should take responsibility for referring clients as appropriate to ensure the best service (IACP Ethics Committee, 2018). Therefore, effective signposting regarding emotional, practical and informational support is required. Within Ireland, there are a variety of appropriate services and resources, including grief counsellors and therapists, support groups, online resources, and community organisations specialising in bereavement support.

### Conclusion

Grief is an intrinsic part of the human experience, embodying loss's profound pain and complexity. Understanding and addressing grief is essential for individuals and professionals, encompassing many emotional, cognitive, physical, and spiritual responses. The theories and models discussed provide crucial frameworks for comprehending and supporting the grieving process.

Acute and prolonged grief highlights the spectrum of responses to loss, from the intense initial reactions to the potential for a long-term disruption in daily functioning. These insights emphasise the importance of tailored interventions to support those struggling with grief, acknowledging the unique circumstances and relationships that shape each individual experience.

Understanding grief helps counsellors and therapists provide emotional comfort, practical help, and information on coping



strategies. These are essential components of comprehensive support systems to assist bereaved individuals in navigating the multifaceted grief journey. Most importantly, promoting the counsellor's and therapists' selfcare as working with bereaved individuals is emotionally challenging (Shear & Gribbin Bloom, 2017).

In essence, grief symbolises the profound depth of our connections and attachments, portraying it as the inevitable cost of love. By embracing a compassionate, well-informed, and multifaceted approach to grief and loss, counsellors and therapists can promote and support bereaved The quality of the bereaved individual's relationship with the deceased before their passing can influence how they engage with continuing bonds and how it affects their grieving process

individuals in finding ways to move forward. This holistic understanding of grief underscores the importance of continual learning and empathy in supporting those who face the inevitable reality of loss. **O** 

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#### REFERENCES

- Aoun, S. M., Breen, L. J., White, I., Rumbold, B., & Kellehear, A. (2018). What sources of bereavement support are perceived helpful by bereaved people and why? Empirical evidence for the Compassionate Communities Approach. Palliative Medicine, 32(8), 1378–1388. https://doi.org/10.1177/0269216318774995
- Barnard-Nguyen, S., Breit, M., Anderson, K. A., & Nielsen, J. (2016). Pet loss and grief: Identifying at-risk pet owners during the euthanasia process. *Anthrozoös*, 29(3), 421-430. https://doi.org/10. 1080/08927936.2016.1181362
- Boelen, P. A., Stroebe, M. S., Schut, H. A., & Zijerveld, A. M. (2006). Continuing bonds and grief: A prospective analysis. *Death Studies*, 30(8), 767-776. https:// doi.org/10.1080/07481180600852936
- Bonanno, G. A., & Kaltman, S. (2001). The varieties of grief experience. *Clinical Psychology* Review, 21(5), 705–734. https://doi.org/10.1016/s0272-7358(00)00062-3
- Bonanno, G. A. (2009). The other side of sadness: What the new science of bereavement tells us about life after loss. Basic Books.
- Bowlby, J. (1982). Attachment and loss. Volume 3 Loss: Sadness and depression (2nd ed.). Basic Books.
- Bowlby, J. (2005). A secure base: Clinical applications of attachment theory (Vol. 393). Taylor & Francis.
- Corr, C. A., Corr, D. M., & Doka, K. J. (2019). Death and dying, life and living (8th ed.). Cengage Learning, Inc.
- Corey, G. (2009). Theory and practice of counseling and psychotherapy (8th ed.). Thomson Brooks/Cole.
- Dodd, A., Guerin, S., Delaney, S., & Dodd, P. (2022). How can we know what we don't know? An exploration of professionals' engagement with complicated grief. Patient Education and Counseling, 105(5), 1329–1337. https://doi.org/10.1016/j. pec.2021.09.014

Hall, C. (2014). Bereavement theory: Recent developments

in our understanding of grief and bereavement. Bereavement Care, 33(1), 7-12. https://doi.org /10.1080/02682621.2014.902610

- IACP Ethics Committee. (2018, January 1). IACP code of ethics and practice for counsellors/psychotherapists. The Irish Association Code of Ethics. https://www. iacp.ie/iacp-code-of-ethics
- Humphrey, G. M., & Zimpfer, D. G. (2008). Counselling for grief and bereavement (2nd ed.). SAGE Publications Ltd.
- Klass, D. (1988). John Bowlby's model of grief and the problem of identification. *OMEGA - Journal* of Death and Dying, 18(1), 13–32. https://doi. org/10.2190/63PM-GEF7-3P13-473D
- Klass, D., Silverman, P. R., & Nickman, S. L. (1996). Continuing bonds: New understandings of grief. Taylor & Francis.
- Klass, D., & Steffen, E. (2018). Continuing bonds in bereavement: New directions for research and practice. Routledge.
- Machin, L. (2009). Working with loss and grief: A new model for practitioners. Sage.
- Malkinson, R., Rubin, S. S., & Witztum, E. (2006). Therapeutic issues and the relationship to the deceased: Working clinically with the two-track model of bereavement. *Death Studies*, 30(9), 797-815. https://doi.org/10.1080/07481180600884723
- Nagoski, E., & Nagoski, A. (2020). Burnout: The secret to unlocking the stress cycle. Ballantine Books.
- Neimeyer, R. A. (2016). *Techniques of grief therapy:* Assessment and intervention. Routledge.
- Neimeyer, R. A. (2019). Meaning reconstruction in bereavement: Development of a research program. Death Studies, 43(2), 79–91. https://doi.org/10. 1080/07481187.2018.1456620
- Root, B. L., & Exline, J. J. (2013). The role of continuing bonds in coping with grief: Overview and future directions. *Death Studies*, 38(1), 1-8. https://doi. org/10.1080/07481187.2012.712608

- Rubin, S. S. (1999). The two-track model of bereavement: Overview, retrospect, and prospect. *Death Studies*, 23(8), 681–714. https://doi. org/10.1080/074811899200731
- Shear, M. K., Ghesquiere, A., & Glickman, K. (2013). Bereavement and complicated grief. *Current Psychiatry Reports*, 15(11). https://doi.org/10.1007/ s11920-013-0406-z
- Shear, M. K., & Gribbin Bloom, C. (2017). Complicated grief treatment: An evidence-based approach to grief therapy. Journal of Rational-Emotive & Cognitive-Behavior Therapy, 35(1), 6–25. https:// doi.org/10.1007/s10942-016-0242-2
- Stroebe, M., & Schut, H. (1999). The dual process model of coping with bereavement: Rationale and description. *Death Studies*, 23(3), 197-224. https:// doi.org/10.1080/074811899201046
- Stroebe, M., & Schut, H. (2016). Overload. OMEGA - Journal of Death and Dying, 74(1), 96-109. https://doi.org/10.1177/0030222816666540
- Supiano, K. P. (2018). The role of theory in understanding grief. Death Studies, 43(2), 75-78. https://doi.org /10.1080/07481187.2018.1456678
- The Irish Hospice Foundation. (2020). Adult Bereavement Care Pyramid: A national framework. The Irish Hospice Foundation.
- Thompson, B. E., & Neimeyer, R. A. (2014). Grief and the expressive arts: Practices for creating meaning. Routledge.
- Thompson, N., & Cox, G. R. (2017). Handbook of the sociology of death, grief, and bereavement: A guide to theory and practice. Routledge.
- Worden, J. W. (2010). Grief counselling and grief therapy: A handbook for the mental health practitioner. Routledge.
- Yousuf-Abramson, S. (2020). Worden's tasks of mourning through a social work lens. *Journal of Social Work Practice*, 35(4), 367-379. https://doi.org/10.108 0/02650533.2020.1843146