A Brief Theory of Bereavement Counselling

Bereavement is a process of grieving

Loss is the person or object

We are going through minor bereavements all the time
Beginnings and endings: Relationships, friendships, jobs, work projects, holidays, moving house.
Might sound trivial but the way we cope with minor bereavements shows how we cope with major ones.

Types of Loss

Actual loss: death from old age, illness, accidents.
Older the person is the more acceptable death becomes.
Deaths of babies and children seem more difficult for us to cope with.
Perceived loss: person’s view of loss

Bereavement Counselling can be time-limited (6-12 sessions) and concentrates solely on the bereavement.
Colin Murray- Parkes Psychiatrist at Royal London Hospital

Studied the effect of the loss of husbands on widows: but this can be used as a model to generally talk about bereavement. But we can include any type of loss that is experienced by people in a powerful way.

The Cost Of Commitment

Gain
Most of us invest in relationships: emotional, physical, perhaps financial. Enriches our lives and gives a sense of being loved and protected.

Cost
Risk of people who we have invested: they might die, leave us, or in the case of parents & carers leave us feeling damaged and unable to cope or not being what they want to be for us.

Process of bereavement might not start suddenly after loss and gradually fade away. In extreme cases it can remain repressed and undealt with so the process is not even allowed to begin. Or perhaps part of the process is allowed to start and other parts held back.
Bereavement is like a river: it flows back and forth through the stages
Stages of Bereavement Theory

1. Alarm

2. Searching

3. Mitigation – Lessening the Impact

4. Anger & Guilt

5. Disorganisation & Despair

6. Gaining a New Identity
1. **Alarm**

1. Alarm, tension, and a state of arousal

2. Restless movement

3. Preoccupation with thoughts of the lost person.

4. Development of perceptual set for that person

5. Loss of interest in personal appearance and other matters which normally occupy attention

6. Direction of attention towards those parts of the environment in which the lost person is likely to be.

7. Calling for the lost person.

The bereaved can go into a state of panic and shock. They cannot believe what has happened and in some cases they can shut down to avoid their feelings.

Example: Can become very stressed and sensitive to any type of disturbance: such as arguments, conflicts and noise.
2. Searching

The bereaved human being or animal feels like crying out for the loved one. Sobbing, tearfulness, and a feeling of loss and being lost dominate their behaviour.

The searching behaviour of the bereaved person is not aimless at all. It has the specific aim of finding the one who is gone. But bereaved people seldom admit to having so irrational an aim and their behaviour is therefore regarded by others, and usually by themselves as aimless. Their search for something to do is bound to fail because the things they can do are not, in fact, what they want to do at all. What they want to do is to find the lost person.

Babies cry when mother abandon them in the hope that this so punishing to the mother that it will not happen again.
3. Mitigation – Lessening the Impact of the Bereavement

**Components of grief work**

1. Pre-occupation with the thoughts of the lost person which come form an urge to find the person.
2. Painful, repeating recollection of the loss experience.
3. Making sense of the loss to fit into one sense of assumptions.

**Dreams**

Most commonly these dreams were happy dreams of interaction with the dead husband. Less frequently he was dying or going away, but even in the happy dreams there was usually something to indicate that all was not well.

**Pining / Avoidance of Pining**

A period of intense pining will alternate with a period of conscious or unconscious avoidance pining. The bereaved becomes afflicted with pangs of grief; lack of concentration on anything apart from the loss.

**Numbness**

This can become the first phase of bereavement: the state of numbness during which outbursts of extreme distress burst through. They forget the negative aspects of the person and form an idealized version.
4. Anger and Guilt
With these changes come the more active emotions of anger and guilt
The bereaved becomes angry and guilty and being separated from the loved one. The thing to notice here is that though the feelings of blame and anger might be misdirected, they are an expression of genuine feelings rather than a cover or avoidance of feelings.

Resistance
The impulse to resist the bearers of evil tidings is strong, and anyone the bereaved person meets is likely to make real the fact of the loss. Those who come to console the widow recognise her antipathy and are deterred by it. “What can one say?”

Blaming
One widow who was very angry with the hospital staff at the time of her bereavement later retracted her accusations and added ruefully “I was there was something I could blame”.

Self Blaming
I think “What could I have done?” I think to myself “Did I do right”. My friend said, “You couldn’t have done any more” “I wonder whether we could have done any more” “Is there anything I could have seen early on?”

Family Split

5. Disorganisation and Despair
A new set of expectations and role face the bereaved: there is a period of uncertainty and aimlessness. With time and acceptance this moves into re-organisation – a feeling of living not just existing.

The old model of the world that the bereaved clings to may not be perfect but if it is abandoned, there is a feeling of there being nothing else. They need people around them for support, security and protection who have been so affected by the loss: which will allow them bit by bit to take on the reality of what has happened.

The bereaved is faced with a new life and new roles, and must learn a new model of the world. Gaining a new identity is along and painful process and one that is never complete. The identification with the lost person is a way of avoiding the loss of that person
6. Gaining a New Identity

1. Preoccupation with thoughts of the lost person which derives from the search for that person.

2. Painful repetitious recollection of the loss experience to force acceptance that it is irrevocable.

3. Attempt to make sense of the loss to fit it into one set of assumptions of the world or to modify those assumptions.

Stigma

Deprivation

Psychological changes

Physiological Changes in the Body

Stress
Conclusions: Colin Murray Parkes

Traditional family

Good family support

Predictability of death

Practical tasks of funeral arrangements

Person making few demands

Networks

Mutual Self Help Groups

Bereavement Counselling

Support Groups – Group Counselling

Support for families.
Reactions to Loss

The Trauma Response

Alarm reaction: anxiety, restlessness, fear.
Angry, guilty outbursts towards acceptance of the loss.

Post Traumatic Distress Disorder

Grief Response
Psychosocial Response
Process of realization from Denial/Avoidance

Theory and Counselling Link
It would seem that the way we react to bereavement has a lot to do with the way we have dealt with or been taught how to deal with bereavements in the past.

Question: What determines how the Bereavement affects a person?
Key Determinants of the Affect of Bereavement

Before the Bereavement

Relationship to the Deceased
Type of Relationship

Strength of Attachment
Security of Attachment

Degree of reliance
Involvement Intensity of Ambivalence

Childhood Experiences
Later Bereavement Experiences

Previous mental Health
Life Crises prior to the Bereavement

Type of Death
Situation and Environment of the Bereaved

Age

Gender

Personality

Proneness to Grief

Inhibition of Feelings

Socio-economic Status (Social Status)    Nationality

Religion

Cultural Factors Influencing the Expression of Grief
After the Bereavement

Social Support

Isolation

Secondary Stress

Life Opportunities – Options open to Bereaved.

Give an example of a good bereavement process

Give an example of a poor bereavement process