Handout 6.4—Finding Life After Loss

Grief is an instinctual reaction to loss. A significant death triggers a response similar to what children do when separated from their mothers: they (1) protest and try to return to them; (2) despair of reuniting but remain preoccupied with them; (3) lose interest and emotionally detach. In theory, adults are like young ones seeking reunion with the deceased person. Any loss or change can cause a similar reaction, including:

- Death of a loved one or a pet, or a miscarriage
- Loss of health (your own or a friend’s), a job, financial stability, a cherished dream, a friendship, safety after a trauma, a relationship due to a breakup
- Change in status due to graduating, retiring, leaving home

Responses to Loss and Change

If grief is based on the attachment instinct, why do individuals express the passing of a loved one so differently? As people mature, relationships become interwoven with connections to family, careers, religious traditions, and even to your innermost Self. People with many associations may recover faster from traumatic loss. Your attachment bond with your original caretaker will also affect how you grieve:

<table>
<thead>
<tr>
<th>Original Attachment Bond</th>
<th>Secure</th>
<th>Mixed</th>
<th>Avoidant</th>
<th>Disjointed</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Children are comforted by parents but can separate. Adults may grieve intensely and then move on.</td>
<td>Children experience separation anxiety, but are hard to comfort. As adults, people are hard to comfort when a relationship ends.</td>
<td>Children do not seek comfort or contact. As adults, people experience little distress when a relationship ends.</td>
<td>Children are both frightened and comforted by caretakers. Stormy adult relationships. Dramatic endings and grieving.</td>
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Finding a New Normal

If grief is simply an instinctual reaction to the loss of attachment, its purpose would be to rebuild the self-governing individual who can leave a lost loved one and find alternative connections. The survivor is brought to a new normal in a changed world. Other theorists believe that grief is a process of creating meaning and fostering bonds with the deceased.

- **Finding meaning.** Whether people realize it or not, they are constantly constructing and revising autobiographies to find meaning in their existence. There is a pull to believe life is predictable and unchanging, but a great loss forces people to write a new story. Questions must be asked to make sense of death, or it will be nonsense: *What does life mean? Why did death come at this time? What did this person mean to me? What was my role in the event? Was this death God’s will or a tragic mistake? Is there free will or should God intervene?*

- **Fostering internal bonds.** Important people we have lost become permanent fixtures in our inner conversation. Mourners may be unaware of subtle connections, as suggested by the comment: *I never do that because my (no longer living) mother would be disappointed.* History gives precedent for persistent communion with the dead, rather than severing of all ties—surnames, memorials to war dead, and adopting causes of fallen martyrs. Perhaps the goal of grief is to reestablish a secure attachment to the deceased on a spiritual level.

The Dance of Grief

In 1969, psychiatrist Elisabeth Kübler-Ross described five stages of grief based on studies of patients facing terminal illnesses. Contrary to popular belief, you do not have to go through each phase in
order to heal. Many people resolve grief without going through any of these stages or do not experience them in sequential order. However, it can be helpful to know what could happen:

- **Denial**: This can’t be happening to me.
- **Anger**: This shouldn’t have happened! Who is to blame?
- **Bargaining**: Make this not happen, and in return I will …
- **Depression**: I’m too sad to do anything.
- **Acceptance**: I’m at peace with what happened.

Usually, grieving is like a roller coaster. In the beginning, the lows are steep and long, but later become less intense and shorter. Even years after a loss, special life events can trigger sadness.

**Accelerated Information Processing**

There is a type of therapy that is especially effective in speeding recovery.¹ People focus on thoughts, images, and body sensations that intensify feelings while using eye movements that both compel relaxation and assist reprocessing of information. The following script from a partial session demonstrates the interplay of disturbing thoughts and easing of emotions. The mother’s comments and thoughts are shown in bold or italicized fonts. They are elicited by the therapist’s questions (TQ) or by tracking the counselor’s hand to make eye movements (EMs):

A mother focuses on the image of her 14-year-old son’s dead body in the hospital. He died 2 years previously when a car struck him. (TQ) → I failed; I should have acted on my premonition that something bad was going to happen to him. … I feel devastated and tense all over. (EMs) →

I feel nauseous. (EMs) → I’m feeling a little calmer. (EMs) → I’m feeling a little calmer. (TQ): I still feel some distress. (TQ) → My son is not here. (EMs) → I blocked it. The therapist asks her to focus on the thought that her son is not here during the next EM set.

The mother begins sobbing. Her therapist taps her shoulders (since she is crying too hard to move her eyes) and encourages her to make noise and breathe. I’m angry … I feel it in my chest. (EMs) → It shouldn’t have happened. (EMs) → He took the wrong kid. … Other kids are abused. … He was happy. … He did well in school. … He was getting along better than his older brothers. …

The therapist asks her to go back to the thought, He took the wrong kid. (EMs) → He took the right kid. (EMs) → He’s saying, ‘I’m okay Mom.’ The therapist asks, “What does he mean?” I’m afraid to ask. The therapist suggests, “Focus on the thought; I’m afraid to ask you about being okay.” (EM) → He is saying everything is going to be alright.

(TQ) → I’m feeling completely calm. The therapist asks her to look at the original image of her son, DOA, in the hospital. (TQ) → I feel calm … peaceful. She looks entirely serene.

Boldface and italics are used in the case study to distinguish mothers spoken comments from thoughts that emerge during processing.

This case story is an excellent example of recreating a healing bond with the deceased. You learn from all your relationships, even bad ones. A difficult breakup can make it hard to find meaning or foster internal connection with a lost love. The next case just focuses on the thoughts that people commonly experience when they grieve. As the acceleration of information proceeds, negative thoughts begin to alternate with positive ideas:

A young woman pictures her ex-lover and thinks: I cannot do anything to get him back. → It’s a picture, not a person. → It just captures a moment in time. → Who he was, wasn’t what I wanted. → I miss him. → I don’t want to completely forget him. → Holding on is safer than moving on. → What is the point of loving if I’m going to lose? → You can’t go through life without experiencing things. → You love tea, but some blends don’t taste just right. → Future relationships are a risk you’ll have to take.

Underline italics and regular italics are used in the case study to show how negative thoughts alternate with positive thoughts.

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¹EMDR: The Breakthrough Therapy for Overcoming Anxiety, Stress, and Trauma, by F. Shapiro and M. S. Forrest, 1997, New York: Basic Books, has a chapter that shows how this powerful therapeutic tool can be used to lay grief to rest.