

## Death Education: An Internationally Relevant Approach to Grief Counseling

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*In the 21<sup>st</sup> century, counselors are faced with the challenge of assessing age old issues through a modern lens. In particular, today's counselors provide grief related services to a growing number of global citizens each with their own "individual culture." The purpose of this article is to overview the use of an international perspective in training counselors to work with issues of grief and to highlight the importance of integrating death education into the counseling curriculum. A brief overview of adaptive grieving styles and an internationally relevant approach for bereavement counseling is presented.*

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Death is universal. However, the experience and expression of grief is individual, with both intrapersonal and interpersonal influences. Counselors and counselors-in-training will certainly work with clients dealing with issues of grief and loss, yet it is possible that many may never take a course that addresses current conceptualizations and strategies for working with these issues (Wass, 2004). In addition, counselors and counselors-in-training need to prepare for clients coming in with a global perspective and array of experiences affecting their perceptions of bereavement. Astramovich and Pehrsson (2009) stated that "The new face of counselor education is *international* counselor education, a profession devoted to training and supervising counselors around the world" (p. 2-3). The purpose of this article is to highlight the importance of death education and utilization of an international perspective in training counselor educators to work with issues of grief.

### Historical Overview of Grief Counseling

Mental health professionals have undergone an evolution of thought regarding grief and its expression. Beginning with Freud's (1917/1953)

notion of “grief work,” then moving to the development of phases and stages of grief, followed by a more individualized approach to grief therapy, the conceptualization of grief and its treatment is in a constant state of growth. To better comprehend current theories of grief it is important to understand the changes that have been made in the field of thanatology as well as in society’s beliefs about bereavement.

Freud’s (1917/1957) *Mourning and Melancholia* was one of the first works to address grief and distinguish it from depression. Freud coined the term “grief work,” believing that mourning was essentially a task in which the libido’s energy is taken away from the lost loved one and redirected to another area or person in life (Parkes, 2001; 2002). He believed people needed to sever ties with the deceased in order to achieve a healthy resolution to their grief (Freud, 1917/1953). It was believed that grief had a distinct ending point allowing the bereaved to put the past behind them and move forward with life without looking back (Rosenblatt, 1996). Additionally, he believed the bereaved must address each memory and expectation related to the deceased in order to resolve the loss. Essentially, “grief work” was seen as an emotional catharsis in which the griever must emotionally release her or his grief. If such efforts should fail, melancholia (depression) would develop (Weiss, 1998). Despite his contributions to conceptualizing grief, by the end of the century researchers suggested while many may benefit from emotional catharsis for dealing with grief it is not necessarily a useful strategy for everyone. Specifically, it has been shown that some bereaved individuals appear to be better served through the suppression of emotions or through employing methods of distraction (Bonanno, Keltner, Holen, & Horowitz, 1995). Doughty (2009) found that some experts support the idea that people use both affective and cognitive behavioral strategies to manage losses. Therefore, for individuals who use more cognitive/behavioral strategies, a traditional emphasis on emotionally cathartic grief work could complicate their natural grieving process rather than assist it.

The second major influence on grief conceptualization came in 1944 from Eric Lindemann redefining what would be considered normal and abnormal grief. He identified specific grief reactions as normal that had previously been considered abnormal. He stated deviations from the normal grieving patterns were a result of repressed grief; and therefore treatment for such abnormal grief reactions involved the counselor facilitating the client’s expression of his or her inner grief experience. While Lindemann’s work was very influential, one important aspect that needed revision was related to the length of grieving process. He greatly underestimated the amount of time necessary to work through issues of loss, believing 8 to 10 sessions was sufficient to resolve grief reactions. Lindemann’s work did not account for those individuals who we now describe as experiencing “chronic grief.” These are individuals who continue to experience intense grief reactions while showing no signs of repression (Parkes 2001; 2002).

A third influential movement in the conceptualization of grief took the form of phase and stage models such as those presented by Kubler-Ross (1969), Bowlby (1980), Rando (1984), and others (Sanders, 1989; Worden, 2002). These models provided counselors with specific tools for guiding the therapeutic process. Because grief is often taboo and can be scary for beginning counselors (Kirchberg & Neimeyer, 1991) these models provided structure to a nebulous construct. Additionally, these phases and stages gained public notoriety and broke down some of the stigma associated with death. Criticism of these models focuses on the implication of universality and logical progression that ignores the complexity and individuality of the grieving experience (Neimeyer, 1999; Weiss, 1998; Wortman & Silver, 1989). Similarly, it has been pointed out that within task models such as Worden's (2002) there is a suggestion that each task is completed or should continue to be addressed and emphasis is placed on outcome rather than process (Rando, 1993).

Today, within the fourth and current movement in the conceptualization of grief, counselors recognize the complex and highly individualized nature of this process. It is believed that individuals are influenced by a number of factors including culture, experience, and personality and each affects the way bereaved individuals experience and express their grief (Doka & Davidson, 1998; Doughty, 2009; Irish, Lundquist, & Nelson, 1993; Rosenblatt, 2001; Shapiro, 2001). Emphasis is placed on the notion that there are a variety of healthy responses to loss, based on these individual differences. From this perspective it becomes imperative for counselors and counselors-in-training to conceptualize their clients from a socio-cultural, globally sensitive, and intra-personal perspective.

A current trend in grief work involves continuing bonds with the deceased. The literature emphasizes that for many people continuing bonds with the deceased is a normal part of healthy adaptation (Klass & Walter, 2001; Klass, Silverman, & Nickman, 1996; Wortman & Silver, 2001). These bonds are seen as a natural part of the grieving process and an attempt to maintain an ongoing relationship with the deceased, albeit a changed relationship. Depending on the cultural context this new philosophy of a continued relationship with the deceased may be either validating or problematic. For example, while many Asian traditions discourage outward emotional expressions, rituals are seen as an appropriate way of working through grief. Often elaborate, these rituals emphasize continuing bonds as well as honoring ancestors and are a way of showing respect to the deceased. Sometimes the rituals are carried out for years following the death (Bonanno, Papa, Lalande, Zhang, & Noll, 2005; Klass & Goss, 1998). Conversely, if an individual's culture emphasizes the need for "closure" and "moving on" the bereaved may feel pressure to try and forget the deceased.

Mental health professionals tend to work within clients' cultural value systems and try to be sensitive to their unique needs and traditions (Bucher, 2004; Sue & Sue, 2003). This approach is also seen within the field of grief.

Each society has traditions and rituals that provide structure to the bereavement experience and outline expected behaviors. There is wide variation between and within cultures regarding what is appropriate following a death (Doka & Davidson, 1998; Irish, Lindquist, & Nelsen, 1993, Shimabukuro & D'Andrea, 1999). Within some cultures open displays of emotion are encouraged as a sign of respect for the deceased. In other cultures such displays represent weakness and may be seen as inappropriate. Many cultures have rituals which delineate specific tasks helpful to the bereaved in their grieving. Some of these involve public expressions while others are more personal.

In addition, it is important to recognize elements of culture will most certainly overlap for many people in today's global society. With increased travel, acceptance of diversity, and exposure to new ways of life, a complex "*individual culture*" emerges. This *individual culture* is the layering of various cultural influences and experiences combined with one's personhood. These components shape the way individuals experience and express their grief. At times, an *individual culture* may create unique challenges for the griever as differing expectations and norms collide. Perceived rules and roles of each element of one's culture (e.g., ethnicity, gender, geographic location) can be powerful agents in shaping thoughts, feelings, and behaviors during a time of grief. In today's international society it would not be uncommon for competing influences to complicate individual needs.

### **Current Praxis in Grief Counseling**

Current trends in grief counseling emphasize the need for understanding clients' culture and its impact on the grieving process. Unlike more universal models of the past, today grief counselors need to recognize the unique nature of an individual's grief is shaped, in part, by their cultural influences. It is important for counselor educators to be aware of this and other current trends in the field of grief in order to fully prepare counselors to work with these common, yet complex issues.

Reflecting current thought in the field of bereavement, Martin and Doka's (2000) *adaptive grieving styles* recognize the unique and complex nature of the grieving process and are not specific to "Western thought" practitioners or clients. Instead, an individual's adaptive grieving style is a reflection of her/his distinctive use of cognitive, behavioral, and affective strategies to cope with loss. This unique style is influenced by multiple variables including personality, experience, and culture. Martin and Doka's model is appropriate with individuals around the world as the model attempts to explain the natural and unique experience of grievers within their individual cultural context. Counselors-in-training who receive death education particular to this model would have an entry level tool to work with a multitude of clients around the world.

Adaptive grieving styles can be conceptualized as falling on a continuum spanning from *intuitive style* on one end, the *instrumental style* on the other end, and the *blended style* in the middle. These styles are distinguished by the internal experience of loss and outward expression relating to the loss.

### ***Intuitive Grieving***

Intuitive grievers naturally experience and express their grief primarily through affect. They have a heightened experience and expression of emotion following the loss. Coupled with an intense affective response is the desire to share with others in an attempt to work through their pain. Intuitive grievers are characterized through emotional displays that mirror their inner experience. It is helpful for individuals with this style to focus energy on things related to the loss and common for them to continue to express strong emotion long after the death of a significant other. This expression is a natural and helpful way for these individuals to adapt to their loss (Martin & Doka, 2000).

### ***Case Example***

Three years following the death of her youngest child, Juanita's friends believe she has become obsessed with her loss. Juanita continues to talk about her daughter, Lin, in casual conversation and often cries as she recounts stories from the time before the accident. Juanita seeks counseling with the hope of no longer being "so emotional" about the death of her daughter. She tells her counselor she tries very hard not to bring up Lin but feels it helps her to talk about her loss. She says she knows her tears often make others uncomfortable but she sees this expression as cathartic and can't seem to help becoming tearful when she thinks about Lin.

Juanita's counselor listens intently to the language used when describing her grief experience relating to Lin as well as previous losses. It becomes clear that Juanita is a more intuitive griever who may be better helped through more traditional forms of grief therapy. Her counselor teaches her about adaptive grieving styles and helps her to understand that, while her friends are well meaning, their expectations for her process may be due to differing styles. She learns about what it means to be an intuitive griever and agrees to attend a weekly grief group and individual sessions two times a month. She quickly reports she has found a new sense of family in the group and looks forward to being able to share and express her feelings with the other members. In addition, she says having the freedom to talk about Lin feels like a weight has been lifted from her life.

### ***Instrumental Grieving***

The instrumental style is marked by a more cognitive, behavioral, problem-solving approach. These individuals tend to manage emotions rather than express them openly. It is theorized that the emotional experience may be less intense than for intuitive grievers. Their natural experience and expression of grief comes through strategizing, problem solving, and thinking about the loss. They are not helped by focusing on the pain associated with their grief and may have a more future orientation. Instrumental grievers may perceive the grief experience as more of a challenge than a threat and seek to master their environment. While the instrumental griever's lack of emotional expression can appear to others as cold and unfeeling, this can be a healthy, natural response for someone with an instrumental pattern of adaptation. While these individuals may seek out social support from others they are unlikely to spend this time sharing their feelings. If their loss is discussed with others it is more likely the focus will be problems associated with the loss (e.g., financial concerns, additional responsibilities) or stories related to the deceased rather than their emotional well-being (Martin & Doka, 2000).

### ***Case Example***

Liam has come to counseling six months following the death of his wife. He tells his counselor he does not believe he has a problem but his friends and family fear he is in denial about his loss. Liam explains he has not cried since his wife's death and was happy to return to work following the funeral. He describes conceptualizing his grief process as a challenge and something he has had to really think through in order to figure out a way to carry on. He is quick to say that he loved his wife very much and misses her daily but he doesn't seem to have the emotional intensity others expect from him. He admits sometimes this concerns him but he knows how much he cherished his relationship.

When asked about his grief experience he tells his counselor it was very important to him to learn about the surgical procedure during which his wife died. He explains he has done a lot of research about the different steps taken during the procedure and examined his wife's medical records in detail. During his research he discovered an advocacy group organized to help patients understand the risks associated with certain surgeries. He has recently begun to volunteer his time to this organization on a monthly basis.

After paying close attention to the way he described his experience and how he has dealt with previous losses, Liam's counselor talks with him about adaptive grieving styles. His counselor believes he may be more of an instrumental griever and talks about how each grief process is uniquely individual. Because instrumental grievers are less helped through emotional expression Liam's counselor encourages him to continue his advocacy and

helps him recognize how his research and volunteer work are ways he is able to actively grieve his wife.

### ***Blended Grieving***

The more prevalent adaptive grieving style is the *blended style*. Blended grievers naturally experience and express their grief in both cognitive and affective ways, usually with one style more dominant than the other. It would be rare to find an individual with a completely balanced mix of styles yet most people use strategies associated with both intuitive and instrumental patterns. It is important to recognize that no one style is preferred. Rather, each style is a reflection of an individual's unique experience and expression of grief (Martin & Doka, 2000).

### ***Case Example***

Since that time she has decided to seek counseling because, in her words, she feels as if she's going crazy. She describes her process as going from one extreme to another. She explains some days all she wants to do is cry with her girlfriends and talk about Juliet and other times she would rather do anything than focus on her loss. She says on these days she still thinks about Juliet but feels "all cried out" and is more likely to go for a long hike on their favorite trail. She tells her counselor she can be feeling just fine, not thinking of Juliet specifically, and then out of the blue she has an overwhelming wave of sadness that seems to cripple her in the moment. Then, an hour later, she is laughing and finds peace in considering her sister died on her own terms following a painful illness.

Sarah's counselor considers the differences in her grieving process; sometimes she describes more intuitive reactions and other times more instrumental. Sarah seems to be more of a blended griever, using both affective and cognitive/behavioral strategies to adapt to her grief. Her counselor normalizes the blended style and helps Sarah see the strengths associated with each aspect while being sure to help her understand that one style is not preferable to another. After several sessions she is able to value all sides of her process and allow for whatever natural experience and expression comes through in the moment. From time to time she attends an open grief group to share with others and connect emotionally to her loss. Other times she returns to the trails where she and Juliet spent so many hours together. She reports that during these hikes she sometimes thinks of her sister and other times she just enjoys the nature around her.

### ***Dissonance***

This model asserts that difficulties arise when an individual uses an adaptive grieving style that is counter to his or her natural adaptive style, creating "dissonance" in the grieving process. Martin and Doka (2000)

identify three types of dissonant responses: suppressing feelings, image management, and penitence. In each dissonant response the griever believes his or her natural adaptive style is not desirable and attempts to adopt the style he or she deems more attractive. In doing so, bereaved individuals may become “stuck” in their grieving process and develop complications. A person’s adaptive grieving style is a reflection of a natural experience and expression of grief and if this natural process is interrupted through dissonance, so will his/her natural grieving process.

Dissonant responses can be created by social roles, cultural norms, traditions, rituals, and how the griever witnesses family members and significant others respond to death. Practitioners need to avoid the colonial “myth of the Western expert” (Chung, 2005) which can heighten dissonance when a counselor inadvertently layers on her/his own beliefs about appropriate grieving that may not be natural for the griever. In addition, counselors should be careful not to conceptualize clients solely from their dominant culture. Instead practitioners should explore individual belief systems and how they do or do not match with their dominant culture. Additionally it is then important to discuss how clients’ individual grieving styles fit (or don’t) with their cultural influences.

As mentioned earlier, adaptive grieving styles are influenced by multiple factors including personality and *individual culture*. At first glance these styles may appear to fall along gender lines with females being more intuitive and males more instrumental. It is important to remember that while gender may influence style, it does not determine it. Gender roles and expectations within a grieving individual’s culture may impact style and may also be an impetus for dissonance if a person’s natural style conflicts with expected gender roles.

In the same way gender impacts adaptive grieving style, other aspects of *individual culture* influence style and may contribute to grievers attempting to reject their natural style (dissonance). For example, in rural Brazil there is an expectation from mothers that some of their children may die. Within this society it is understood these women will avoid emotional bonding with their children until they have reached a point in their development where they are expected to live. When a child does die, little emotional expression is expected from the mother and the deceased children are seen as “Angel Babies.” While the lack of emotional expression following the loss of a child may seem dysfunctional in the United States, it is, in fact a normal and healthy response for the woman in this region (Ellis, 1998). Counselors or counselors-in-training may attempt to change this ultra instrumental response by focusing on the mother’s loss, trying to elicit feelings to bring about a more intuitive style. In this case, it is possible for well meaning professionals or professionals-in-training to create dissonance in therapy. It is also possible that despite the cultural norms of this region, a mother with a more intuitive style may be experiencing dissonance by trying to adapt to the instrumental cultural expectation. It is important for

counselors and counselors-in-training to recognize clients' natural adaptive styles and how they may or may not fit into cultural expectations.

### *Case Example*

Tuhin moved to the United States 15 years ago. He converted to Christianity, entered a seminary and now takes great pride in being the pastor at a small local church. Following the death of his son, Jayanta, he felt great pressure to be a model for his congregation. His religious beliefs dictate his son is most certainly with God in heaven, which he believes is the end goal of life. After Jayanta's death, however, his experience of grief did not match his faith related expectations. Tuhin believed he should be thankful Jayanta was in the heavenly kingdom and now felt no pain or temptation from worldly things. Instead, he felt angry with God and devastated by his loss.

Tuhin was troubled by his internal experience and tried his best to act in a way his family and congregation would be proud. He found himself trying to meet the expectations of his family in the United States as well as his dominant culture back in India. He held back tears and instead spoke of God's divine plan and his pride that Jayanta was now with Him. As months went by, Tuhin began to be more and more troubled by nightmares and overwhelming sadness at his loss. He did not share his real feelings and began to feel chest pains on occasion. His doctor could not find any physical reason for his symptoms and referred him to a counselor. Through counseling, Tuhin was able to recognize his more intuitive adaptive grieving style need not be viewed as a lapse of faith or contradiction to his individual culture, but rather a healthy response to loss. Being able to talk about his inner experience was healing and began to allow his natural expression to match his experience. Soon his physical symptoms dissipated. While he will always feel the loss of his son, he believes he is dealing with his grief in a healthier way.

### **Death Education**

The profession of counseling continues to grow and expand to meet the needs of current society. Key areas of professional identity and counselor education fostered by researchers have included social justice, advocacy, multiculturalism, and human growth and development (American Counseling Association, 2008; Gale & Austin, 2003). Many within the field of counseling recognize the emerging need for current death education, training and research. Death is a universal occurrence often central to individuals' development. However, while all individuals encounter death, each will have a unique experience and expression of their grief. Within counseling, advocating for the right of individuals to grieve as they are naturally inclined despite social or cultural pressures can become a core issue. While overall there is a paucity of death education research specifically addressing the

counseling profession, studies have shown beginning counselors are less comfortable discussing issues surrounding death and dying than other issues (Kirchberg & Neimeyer, 1991; Kirchberg, Neimeyer, & James, 1998). In addition, Wass (2004) points out that less than 20% of students in health professions take a death education course. As grief and loss continues to be misunderstood or avoided either because of the stigma associated with death or lack of knowledge surrounding the topic, educating helping professionals about a multicultural and trans-culturally sensitive model for bereavement counseling as presented in this article can be powerful.

### ***Recommended Death Education Implementation***

Due to the lack of training and dearth of bereavement education consistently available, the following recommendations are offered: inclusion of internationally relevant death education in counseling curriculum and renewed support from national and international professional organizations for bereavement training.

Professional counselors, counselor educators and their respective international organizations are hearing the call and beginning to recognize the need for quality international counseling activities and education (Chung, 2005; Savickas, 2003; International Association for Counseling, 2008) regarding universal (yet intra or interpersonally different) issues. New counselor education programs are being created globally (Schweiger, Henderson, Clawson, Collins, & Nuckolls, 2007) and relevant curriculum is being developed. Two influential organizations that have made concerted efforts to providing support for international counseling is the National Board for Certified Counselors (NBCC) and, The Council for Accreditation of Counseling and Related Educational Programs (CACREP) who developed the International Registry of Counsellor Education Programs (IRCEP).

According to Hoskins and Thompson (2009) “a primary goal for establishing an internationally grounded counselor identity is to help establish a comprehensive counselor education curriculum...” and to “...emphasize multicultural and trans-cultural competencies, increasing global awareness, and ways globalization influences counseling practice” (p. 2). Unfortunately, globally sensitive death education is not a common component in counselor preparation programs. Currently, CACREP curriculum requirements do not specifically include grief and loss and therefore have not been consistently offered in counseling programs. It is additionally important to recognize that, as new advances in the field of thanatology have been made, it appears this new knowledge has not permeated counseling curriculum (Watts, 2004). This implies there is a possibility that the limited instruction counselors-in-training receive in this area may be outdated. As bereavement is a universal occurrence and grief a central counseling issue, counseling programs need to consider incorporating death education into their curriculum.

The inclusion of current global approaches to bereavement counseling is needed in counselor education. This could be done through the addition of a stand-alone course, infusing the material throughout coursework (i.e., theories, developmental, & clinical courses), or through required opportunities for discussion such as guest lectures, seminars or webinars. The key is to build a foundation for death education with formal consistency surrounding a current and culturally sound curriculum.

In addition to formal counselor education, support by major counseling professional organizations can be offered through workshops and conference proceedings specific to death education. When national and internationally recognized organizations such as IAC, NBCC International, and IRCEP set standards of practice, learning institutes, or conference themes on a specific topic, an influential buzz is often created and the issue becomes salient throughout the profession. By providing current information and showing the need for death education, counselor educators and counseling professionals can provide counselors-in-training with an understanding for the importance of competent grief counseling.

### **Conclusion**

As counselors and counselor educators we are in the business of change and with all change there is an element of loss. It seems instinctive that counselor educators would inherently recognize the importance of training future counselors to appropriately deal with clients' grief issues. It seems equally perceptive to recognize the international implications of such training. Yet it appears that many counselors-in-training are lacking the most current information related to working with this universal issue. While the authors acknowledge an already over-crowded curriculum, we believe an issue of this importance should not go overlooked. Whether through a stand-alone course or an infusion throughout the curriculum, death education from an individual culture perspective is vital for the training of well rounded counselors. With the influence of national and international organizations and a directed focus on training counselors to work in a global society, counselors can become better prepared to deal with issues of grief and loss. Addressing issues of grief and loss within the classroom, at conferences, within professional organizations and accreditation standards can only serve to enhance the profession as a whole and inevitably help us better serve our students and clients.

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