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Grief, Bereavement, and Positive Psychology

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Abstract

What does positive psychology have to offer people who are grieving? We explore this question in depth and consider how viewing bereavement and grief through the lens of positive psychology can help to normalize the grieving process and encourage the use of effective coping approaches. We provide research evidence in support of narrative reconstruction, posttraumatic growth, positive emotions, and spirituality as means to help survivors of loss to adjust and even to gain a new sense of meaning. We provide practical suggestions for individuals who are grieving and for those who are in relationship with them.

*Keywords:* bereavement, grief, positive psychology, spirituality, posttraumatic growth, positive emotion, meaning making, counseling, psychotherapy
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Historically, researchers and clinicians in the fields of counseling and psychology have viewed many natural processes, including that of grief, through the lens of pathology. Approaches to research and therapy have focused primarily on what is wrong and on how it can be overcome instead of also looking at what is right and on how it can be enhanced. The 21st century has witnessed rapid growth in the field of positive psychology, which has shown respect for the traditional pathology-oriented approach to understanding human struggles while advocating a strengths-oriented approach to promoting well-being. Pioneers of positive psychology, Seligman & Csikszentmihalyi (2000), explain that before World War II, the field of psychology focused on curing mental illness, making the lives of all people more productive and fulfilling, and identifying and nurturing talent. Furthermore, they observe that following World War II, psychology focused more intently on healing, concentrating largely on repairing damage within a medical-disease model of human functioning, rather than focusing on ideas of wellness and thriving, and seemed to forget the latter two of its aforementioned goals. Because of this negative focus, Seligman & Csikszentmihalyi posit that “the field of psychology has developed a distorted view of what normal – and exceptional – human experience is like” (p.5). This negative focus has loomed large in the area of bereavement research where the emphasis has been on negative emotions associated with the experience of loss. Bonanno (2009) provides an excellent critique of this trend.

Seligman and Csikszentmihalyi (2000) state that the goal of positive psychology is to spark a transformation in the focus of psychology from a fixation on repairing the most negative things in life to acknowledging already existing positive qualities, and building new ones. In the same work, the authors state that “the field of positive psychology aims to shift the focus from
pathology to well-being, contentment, and satisfaction (in the past); hope and optimism (for the future); and flow and happiness (in the present)” (p.5). Positive psychology encourages a shift in emphasis from repairing what is “wrong” to helping clients to flourish, and from a disease-centered focus to strength and well-being in human development. In recent years, bereavement research has experienced a shift in the direction of studying positive psychological states that are associated with the process of bereavement and which have been found to enhance adjustment and wellbeing following loss (Bonanno, 2009; Calhoun, Tedeschi, Cann, & Hanks, 2010; Folkman, 2008).

With the ideas of positive psychology in mind, we consider historical perspectives of grief and explore the ideas of narrative reconstruction, posttraumatic growth, positive emotions, and spirituality as means to promote well-being in clients who have experienced the loss of a loved one. We believe that helping individuals to experience a sense of growth after a loss, helping them to find positive meaning in the midst of tragedy, and helping them to incorporate their losses into their life-stories in a positive way will promote a sense of well-being after experiencing the loss of a loved one and help clients to live more fulfilling lives.

**Historical Perspectives of Grief**

In better understanding grief through the lens of positive psychology, it is important to define grief and take a look at how perspectives of this ever-evolving topic have changed over the years. Granek (2010) defines grief as “the experience of a person who is responding to the death of another human being whom he, or she, has loved” (p.46), while Buglass (2010) defines grief as “a natural human response to separation, bereavement or loss, in particular the loss of a loved one” (p.44). The idea of grief as a topic of psychological interest came about in the early
20th century with Freud becoming one of the first writers devoted to exploring the phenomenon of grief, publishing his influential essay on mourning and melancholia in 1917 (Freud, 1957). Freud’s idea of “grief work” was examined and researchers claimed that grief is a pathology that should be included within the psychological domain of study, insisting on the need for psychological intervention in order for people to heal as quickly as possible (Granek, 2010).

Bonanno (2000) suggests that for most of the last half of the 20th century bereavement was viewed almost entirely from a psychiatric and clinical perspective. Because of this focus, writings on bereavement have largely emphasized chronic or pathological reactions as a result of loss. Bonanno further states that “when viewed through this lens, the healthy person works successfully toward resolution, whereas unhealthy or pathologically grieved individuals fail to achieve detachment and, consequently, fail to reach grief resolution” (p. 490). It comes as no surprise, and has become a cultural assumption that seriously grieved individuals should be advised to seek professional help. “The problem with this logic, unfortunately, is that, because most of us are confronted at different points in our lives with the deaths of close friends and relatives, and because most of us do grieve these losses, grief itself cannot be pathological” (Bonanno, 2000, p. 490). Similarly, Neimeyer (2004) suggests that as the field of grief and bereavement has grown, it has experienced a transformation, challenging long-standing assumptions about ideas related to the universality of grief, the prominence of grief work as a resolution, and the stages of adaptation in light of individual and cultural differences in styles of coping with loss.

**Good from Grief**

Is it possible for good to come from such a painful experience as that of losing a loved one? The loss of a loved one is an experience that leaves many people feeling paralyzed,
helpless, empty, and robbed. Despite the negative effects that individuals experience from loss, Frankl (1959) says that humans still possess the potential for accomplishment and contribution to others even under the most desperate and degrading conditions. Such losses may lead to negative experiences such as self-hate and to lowered self-esteem, but Berzoff (2011) proposes that the process of grieving the loss of a loved one may also lead to new ideals, new capacities, and even new relationships with the dead. If helping professionals could help their clients to focus on recognizing these new ideals, capacities, and relationships, then clients would be able to rebuild their story in a positive way that helps them to find meaning in the midst of their loss.

**Narrative Reconstruction**

When we experience loss, our lives change forever. These changes require us to incorporate our losses into our story, or life-narrative, often challenging our long-standing thoughts and ideas, and forcing us to reconsider the things we have always believed. If we reconstruct these ideas in a negative way, our lives may become less fulfilling, and we may view the world more pessimistically. However, developing positive meanings from our losses can lead to enhanced well-being, increased engagement with others, and a greater sense of purpose (Calhoun et al., 2010). This possibility of living a more engaged and meaningful life lies at the heart of positive psychology (Seligman & Csikszentmihalyi, 2000). Berzoff (2011) suggests that narratives which include acts of altruism and increased engagement with others can help the bereaved to begin to view themselves in a new light and to discover new sources of meaning. Similarly, Gillies and Niemeyer (2006) suggest that bereaved individuals engage in meaning making activities in an effort to make sense of their experience. These meaning making activities include sense making, benefit finding, and identity change. Through this process, the bereaved
come to view the world from a new perspective, which can help to ease their pain and discover new purpose in living.

Our experiences with grief are multidimensional and are dependent on several factors, including: a) meaning that is created from the loss; b) ways the bereaved integrates this loss; and c) ways in which grief may transform the bereaved. (Berzoff, 2011). According to Harvey (2001), working on individual perceptions of the meanings of losses and learning to give back to others based on those lessons of loss may yield valuable strategies for coping with grief, which may promote posttraumatic growth.

**Posttraumatic Growth**

Some individuals may integrate into their lives lessons learned from the losses they have survived, leading to an experience of posttraumatic growth, which is another idea that has drawn the interest of those in the field of positive psychology. Posttraumatic growth involves positive personal growth changes that an individual experiences after having survived a traumatic event. These changes may include, but are not limited to: increased spirituality and appreciation of life, improved relationships, and finding new possibilities in life (Boyraz, Horne, & Sayger, 2010). Tedeschi and Calhoun (2004) stress that it is imperative for individuals to have a clear understanding that the traumatic events experienced cause the survivors to engage their coping mechanisms, and that the struggle that takes place after the trauma, not the trauma itself, produces the posttraumatic growth.

Tedeschi and Calhoun (2004) further explain a basic paradox experienced by those who have survived the death of a loved one: Losses produce something of value, but they also increase a sense of vulnerability. Additionally, Calhoun and colleagues found that individuals
who survived the death of a loved one often report increased confidence in their capacities to survive and prevail after a traumatic life experience, including loss. Helping the bereaved to recognize these capacities can build self-confidence and provide hope for their ability to cope with current and future losses and other traumatic events (Calhoun and Tedeschi, 1999; Calhoun, Tedeschi, Cann, & Hanks, 2010).

Calhoun et al. (2010) describe how posttraumatic growth can be experienced in five areas following loss: a) self-perception where bereaved individuals may come to view themselves paradoxically as “more vulnerable, yet stronger” (p. 127), b) changed relationships in which bereaved persons may experience negative changes but often report positive changes, c) new possibilities whereby those who are grieving may develop new roles and new relationships, d) appreciation of life where bereaved individuals are able to live more fully in the present, and e) existential elements, which can include religious and spiritual transformation and renewal. Calhoun and colleagues note that these five areas are not meant to be all inclusive but are often present in individuals who demonstrate posttraumatic growth following loss.

In a structured interview study of bereaved individuals conducted by students in a grief counseling course at the State University of New York at Buffalo, Frantz, Trolley, and Farrell (1998) found that:

- 31% reported that the loss had brought their family closer together, improved their communication, and strengthened relationships with family and friends;
- More than one-third of individuals interviewed reported that they learned from the death to tell people they love them and live in the moment;
• 33% reported that they were more mature, self-confident, independent, and stronger as a result of the death;
• 17% reported that they became closer to their family as a result of the death;
• 37% of those who participated in the study reported that others helped by listening and allowing them to talk;
• 29% reported that others accepted their grief, weren’t judgmental, let the griever cry, and didn’t deny the grief of the individual.

These statistics tell us that the most helpful things we can do are listen to the grieving individual with non-judgmental ears, allow them to talk and cry, and accept the grief of the individual as it is. We see many examples of posttraumatic growth in these percentages through reports that individuals became closer to family and friends as a result of their loss, and they also gained a new-found understanding of mortality.

The findings of the Frantz et al. (1998) study are consistent with the expert companionship helping model developed by Calhoun and colleagues (Calhoun et al., 2010; Tedeschi & Calhoun, 2004; 2006). This model includes the following components: a) humility and respect, not platitudes; b) constancy on the part of the helper who is a consistent source of support; c) tolerance of the strange, non-rational, and ambiguous; d) courage to hear, and e) appreciation of paradox (e.g., vulnerability leading to strength, doubtful questioning leading to new insights, need for support leading to greater independence). The authors point out that their model, which provides a supportive context in which posttraumatic growth may occur, is not a new form of therapy. Rather, the model provides a perspective that is compatible with various approaches to therapy.
Positive Emotions

Freud’s aforementioned essay, “Mourning and Melancholia,” and Kubler-Ross’s (1969) publication of *On Death and Dying* a half-century later, together exerted a strong influence on the emphasis on negative emotions associated with the grieving process. While Freud explored the intrapsychic dynamics associated with the grieving process, Kubler-Ross developed a stage theory to explain psychological processes experienced by dying individuals. More recently a number of researchers have shed considerable light on the importance of positive emotions in the grieving process (Bonanno, 2009; Bonanno & Keltner, 1997; Calhoun et al., 2010; Folkman, 2008; Folkman & Moskowitz, 2000; Moskowitz, Folkman, & Acree, 2003).

Researchers in this area now appreciate how bereaved individuals oscillate between negative and positive emotional states and how positive emotional states can help the bereaved person to cope more effectively with loss. In a well-known study of conjugal bereavement, Bonanno and Keltner (1997) found that those individuals who expressed positive emotion in their facial expressions demonstrated better adjustment over a 25-month period following loss of a spouse than individuals who primarily demonstrated facial expressions of negative emotion, especially anger. Similarly, in a longitudinal study of men who took care of their partners with AIDS, Folkman (1997) found that caregivers experienced both negative and positive emotional states during caregiving and following the loss of their partner.

Folkman’s research on positive emotional states and severe stress, including bereavement, led her to modify a well-known model of stress and coping developed by Lazarus and Folkman (1984). According to this model, when individuals experience stressful situations, they initially make a primary appraisal of harm, threat, and challenge, followed by secondary appraisal when they consider their resources and burdens for coping with their situation.
Eventually, they engage in tertiary appraisal when they decide on a course of action that often involves engaging in problem-focused or emotion-focused coping. As a result of her research on the important role played by positive emotion in the coping process, Folkman (1997) modified her model to include a third type of coping, meaning-focused coping, which leads to positive emotional states that help to sustain the coping process and restore resources. Folkman’s modified model of stress and coping is consistent with Frederickson’s (2001) broaden and build theory of positive emotions, which has stimulated considerable research in the field of positive psychology. According to Frederickson, negative emotions constrict our thinking and actions while positive emotions have the opposite effect, helping us to consider expanded ways of thinking and acting. In addition, positive emotions can help to counteract negative emotions and can build resources, both within the person and in their environment.

In his book, *The Other Side of Sadness*, Bonanno (2009) makes a strong argument for the importance of positive emotions in the grieving process and demonstrates how positive emotions are an important component of the resilience demonstrated by many bereaved individuals. Bonanno explains how positive emotions and laughter help the bereaved person to feel better, if only briefly, and to reconnect with others, both of which promote healthy coping. Bonanno has found in his research that resilient people who are grieving are better able to switch back and forth between negative and positive emotional states, which also enhances coping.

**Spirituality**

Death represents a boundary condition, a turning point that highlights issues basic to our existence (Smith, 1968). Early Celtic Christians referred to such situations as “thin places,” locations or experiences where the natural world and the supernatural world meet (Gomes, 2002). As Pargament and Mahoney (2005) point out, such occurrences represent times when
“heaven meets earth” and the sacred is likely to be experienced (p. 196). Therefore, spirituality may become a strong influence in the lives of bereaved individuals. Tedeschi and Calhoun (2004) found that trauma survivors, including survivors of the death of a loved one, often come to more fully appreciate their own and other’s mortality, and they may be more likely to entertain questions of a fundamental-existential nature surrounding death and the purpose of life. These authors also make the point that issues of mortality that are confronted due to traumatic experiences, including death of a loved one, can produce changes within religious and spiritual aspects of survivors’ lives.

Positive psychologists have shown a keen interest in studying the contributions of spirituality to well-being, including during times of loss and bereavement (Snyder, Lopez, & Pedrotti, 2015). People are constantly searching for meaning and purpose in life, and spirituality offers a pathway to a deeper understanding of our existence in relation to sacred objects and beings (Pargament, 1997). Trauma and loss can be a catalyst for existential and spiritual doubts and suffering. Finding purpose during the loss of a loved one can be a difficult process to overcome, and spirituality can help answer existential questions and increase understanding of the meaning of loss (Tedeschi & Calhoun, 2006). Using spirituality as a coping mechanism through times of intense struggle has been associated with higher levels of hope, optimism, and positive life outcomes (Snyder et al., 2015). Peterson and Seligman (2004) actively encourage others to discover their personal strengths and live accordingly. They believe spirituality is the “universal strength of transcendence” (p. 262), a state of being open to anyone that offers the opportunity to connect with something greater than the self. In times of grief, people long for a connection to the lost loved one that transcends this life, and spirituality and the belief in life after death can fulfill that desire.
Following a death, a bereaved person will suffer much more than the loss itself. The loss can begin a process of rumination on the meaning of life and death and evaluation of the self; having an active spiritual life can help disrupt the downward spiral that can result. Spirituality can aid in personal development and enhanced coping skills during a loss, and it can aid in understanding meaning and purpose after a loss (Bray, 2013). Bereaved individuals have a need to make sense of what has happened in light of their worldview before they can even attempt to move on and be happy again. According to Chapple, Swift, & Ziebland (2011), “death threatens people’s sense of ontological security” (p. 2). Death is the realization that someone who once was no longer is, and that breakdown of balance and serenity in life can disrupt a person’s understanding of the order and meaning of life. Death puts life into perspective by showing us the fragility and importance of life; this reinterpretation of perspective is shaped by what the grieved person believes about life, death, and the afterlife (Chapple et al., 2011).

According to Chapple et al. (2011), spirituality can aid in the grief process by: a) providing comfort in making sense of the loss, b) maintaining a bond with the person who has died, and c) serving as a source of practical healing. Bereaved persons can be comforted by the meaning gained through their relationship with the sacred; they can maintain a bond with the person who has died by believing in an afterlife; and spirituality can serve as a source of practical healing by teaching that there is nobility in suffering, which, while temporarily painful, often leads to positive life outcomes (Currier, Mallot, Martinez, & Neimeyer, 2013).

In her qualitative analysis of bereavement narratives of caregiving partners of men with AIDS, Folkman (1997) found that spiritual experiences were described in the majority of narratives and involved three areas: beliefs, experiences, and rituals. Of particular significance was the belief held by many caregivers that their partner was in a better place, the experience of
communicating with their partner, and feeling like they were part of a “higher intelligence, purpose, or order” (p. 1214). Folkman also found that spiritually-oriented caregivers used more positive reappraisal and more problem-focused and emotion-focused coping.

Conclusion

Grief itself is not pathological, but instead is a natural process of emotions that occurs after experiencing the loss of a loved one. However, it is important to acknowledge that individuals can experience complicated grief due to the circumstances surrounding the death of a loved one, or due to a lack of ability to cope, among other factors. Complicated grief can lead to a lower level of well-being and may bring to the surface other issues that demand the attention of helping professionals.

For many years the mental health profession has attempted to fix that which cannot be fixed. It is time that we acknowledge grief itself as a natural process rather than as a pathological condition, help our clients to find meaning and hope in the midst of tragedy, promote growth after trauma, and walk alongside our clients as they experience life without those they love. It is time to validate the pain of the client and normalize the emotions, both negative and positive, that come naturally rather than trying to find a way around them.

A positive psychological approach to therapy with those who are grieving begs many questions: Rather than treating grief as a pathology, what if therapists sat with their clients in their grief rather than trying to “fix” it? What if counselors helped clients find meaning in the midst of their grief and helped them to reconstruct their life narratives in a positive way, rather than treating and attempting to repair a natural process? What if those in the helping professions sat with clients in their questions and allowed grief to take its natural course rather than trying to
give or find answers to the unanswerable? What if clinicians were able to provide a safe place for the bereaved to express both negative and positive emotions, to laugh, and to explore spiritual aspects of their loss? Informed by research findings on bereavement through the lens of positive psychology, clinicians will be better prepared to make a positive difference in the lives of their clients as they accompany them on their journey through grief.
References


