EMDR and Bereavement

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Aims and Objectives

- Review healthy grieving and mourning
- Examine risk factors for and aspects of complicated mourning
- Explore the use of EMDR in uncomplicated and complicated mourning – basic protocol and special applications
- Examine how EMDR can be combined with other methods

Learning Objectives

- List phases and processes of grief and mourning – the "grief work"
- State the risk factors for complicated mourning
- Describe the use of the basic EMDR protocol for excessive grief
- State special applications for complicated mourning
- List other methods and how they can be combined with EMDR during and between sessions

Bereavement

- Bereavement the objective situation of having lost someone significant
- Grief the emotional response to loss
- Mourning actions and manner of expressing grief (culturally determined)

Phases of Grief

- 1) Initial shock, disbelief and denial
- 2) Acute mourning period acute somatic and emotional discomfort and social withdrawal
- 3) Culminating period of restitution.
- Periods may overlap (cf the early models by Kuebler-Ross, Parkes)

Uncomplicated Grief and Mourning

- Tasks of Grief and Mourning:-
- 1) Accept the reality of the loss
- 2) Work through the pain of grief
- 3) Adjust to environment in which deceased is missing
- 4) Emotionally relocate the deceased and move on with life

EMDR Excessive Grief Protocol

Standard Protocol (use Float-back or Affect Scan, expect higher min. SUDs)

1) Past Memories

- Actual events, including deceased person's suffering/death
- Intrusive images
- Nightmare images

EMDR Excessive Grief Protocol

2) Present Triggers

- Triggers/stimuli associated with grief experience
- Issues of personal responsibility
- Safety/mortality self or others
- Previous unresolved losses

3) Future template

Case 1 – Male, early 20s

- RTA
- Driver and passenger (friend) killed
- Issues: guilt
- "I don't want to forget my mate."
- 5 sessions
- During EMDR created a picture of friend on the wall
- Outcome: abstract love for absent one (vs concrete love for one physically present)

Risk Factors of Complicated Mourning

- 1) Circumstances surrounding death:-
- Sudden, unexpected death
- Uncertain loss dead or alive?
- Death where no body is available
- Death through murder, suicide, self-neglect
- Death from overly lengthy illness
- Death seen by mourner as preventable
- Loss of child
- Disaster with multiple losses

Risk factors of Complicated Mourning

- 2) Relationship between bereaved and deceased:-
- Highly ambivalent
- Highly dependent
- Narcissistic relationship deceased seen as extension of self

Risk Factors of Complicated Mourning

- 3) Life History of Bereaved Person:-
- A history of complicated grief reactions
- Experienced several losses in a short span of time

Risk Factors of Complicated Mourning

4) Personality of bereaved person:-

- Avoid feelings of helplessness
- Perceive self as "strong" person

5) **Social Factors:-**

- (Perceived) lack of social support
- Death is socially unspeakable or negated conspiracy of silence

Types of Complicated Mourning

- Absent or Denied Mourning
- 2) Delayed or Postponed Mourning
- 3) Chronic Mourning
- 4) Distorted Mourning
- 5) Somatized Mourning
- 6) Traumatic Mourning

Features of Complicated Mourning

- Vulnerability to separation/loss
- High death anxiety (self/others)
- Extreme arousal, business
- Excessive/persistent overidealisation of deceased/relationship
- Rigid, compulsive behaviours
- Persistent obsessive thoughts or pre-occupation with the loss

Features of Complicated Mourning

- Self-destructive relationships, e.g. excessive care-giving
- Fear of intimacy/avoidance future loss
- Self-destructive behaviour/acting out
- Constricted affect
- Chronic numbness
- Chronic anger/depression

General Treatment Principles

- The bereaved person has attempted to deal/cope with loss, but in an unhealthy way:-
- 1) Hold on/avoid relinquishing the lost one
- Deny, repress, avoid aspects of loss, the pain and the realisation of the implications of the loss
- Complicated:- it has gone wrong, but can be corrected

General Treatment Principles

- Give recognition for the loss, give permission, be there
- Provide psycho-education
- Do not try to take away the pain
- Take a wider (family/system) view
- Confront the "myths" of mourning
- Teach self-help techniques/strategies

1) Absent or Denied Mourning:-

Issue: - To start grief

- Explore reasons (e.g. absent body)
- When will you know?
- Use of language "was" > "is"
- Work to allow reaction retelling, use visualisation, exposure to concrete memories (e.g. video)
- Farewell letter
- Hold session at the scene of event

Blocked Processing/Interweave: "What is it about what happened that you **need** to hold on to, and what do you **want** to let go of?
 (Steve Lazarove)

2) Delayed/Postponed Mourning

Issue: to start grief once time is there

- Explore reasons (lack of support, safety), preoccupation for welfare of others (e.g. children)
- Fear of losing control
- May need to install resources first

3) Chronic Mourning

Issue: to end the grief

- Provide psycho-education to counter myths
- Is there a grief competition?
- EMDR and skills coaching for new behaviours
- Explore the meaning of pain
- CI the balance of scales
- Give permission for mourning to end

4) Distorted Mourning

Issue: to get access to full spectrum of reactions

- Two types anger and guilt
- Get under the emotions
- EMDR and Gestalt for unfinished business
- Psycho-education on difference guilt and guilt feelings – if guilt, make reparation
- Performing a ritual may help

5) Somatized Mourning

Issue: translate symptoms to mourning reactions

- "The good and important reason"?
- If pain could talk, what would it say?
- Dialogue with pain/draw pain
- Breathe into/Healing Light
- NB Facsimile Illness as Masked Grief

6) Traumatized Mourning

Issue: to resolve the trauma and get on with the loss

- Intrusive images and thoughts EMDR, imagery techniques, thought stopping, distraction/control techniques
- Increased arousal EMDR, Safe Place, Hypnosis, Relaxation/breathing techniques

6) Traumatized Mourning (cont'd)

- Avoidance reactions Gradually approach the memories/thoughts
- Planned re-exposure of event, gravesite
- Imaginary exposure
- Rituals
- Other methods art, writing (letter, diary)

Case 2

- Female
- Husband died as result of RTA
- Emotions: guilt, anger towards husband, anger towards mother
- Skills coaching, psycho-education
- One-handed interweave with ritual
- Reparation

Other Methods of Grief Work

- Gestalt techniques (empty chair)
- Inner dialogue with deceased
- "Re-grief work" use of linking objects (e.g. picture of deceased)
- Writing assignments can be combined with other methods
- Can all usefully be combined with EMDR

Grief and Mourning in Children

- May blame themselves (magical thinking)
- Behavioural problems/acting out
- Young children: child/adult/carer tells biographical story/historical account with BS
- Older children: standard protocol

Grief and Mourning in Children

- Early interventions important:-
- Death through suicide/murder
- Child witnessed a death
- 3. Child was responsible for the death, or the dead person, or was with the person who died

(Dyregrov)

Grief, Mourning and Rituals

- Ritual specific action that expresses feelings and thoughts in a symbolic way
- Legitimate release of emotions
- Safety and containment
- Structure: beginning, middle, end
- Gives permission for closure
- Types:- Separation, Transition, Incorporation

Poems and Storytelling

- Storytelling provides explanations:-
- Causal
- Motivational
- 3. Justifying
- Potent myths, archetypes
- Individual or as group work

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