

Shea Darian

One who does not grieve, hardly exists.

— Antonio Porchia

Some who know my work call me a “grief counselor.” I am not. I learned early in my spiritual direction practice that counseling grievers is like herding cats. Each one goes their own way.

When I became a certified spiritual director in 2008, I quickly discovered that grief is a mighty motivator for spiritual directees. Early on, they came to me grieving all kinds of losses—death, divorce, illness, injury, domestic abuse, trauma, loss of belief, identity, a job or home, safety or protection...the list goes on. Some even confided that they kept their grief undercover from their most intimate loved ones, and carried it silently for years, even decades, before sharing it with me.

The Covid-19 pandemic catapulted grief into the spotlight at the center of what many identified as the most challenging mental health crisis in U.S. history. It took something that pronounced for us to begin to talk about grief over morning coffee or hear about it as a lead story on the evening news. Today, awareness of grief is a new social cause, reminding us that it is as common as hope or love. Awareness of grief, however, and knowing how to heal the pain of it are two vastly different realities.

THE COMPLEXITIES OF GRIEVING INTO HEALING

Learning to grieve in ways that ease our related suffering is complicated. The human mind loves to simplify what is complex, so it is no wonder that many grief counselors propose a singular path to "recovery." Those of us in the throes of grief are prescribed a number of curative remedies: lists of stages, phases, tasks, emotions, spiritual or mental states, or specific behaviors that comprise assignments that a person is expected to check off one by one. Spiritual and mental healthcare providers tend to latch onto such cures for dear life. It can be comforting to have something—*anything*—to offer a griever even a little hope.

When I was a senior in high school, my best friend Sheri died in a car accident. At the time, I felt starkly alone as no adult in my life had explored grief well enough, or was courageous enough, to accompany me on my traumatic journey. Although I had parents, teachers, advisors, coaches, and ministers who cared a great deal about me and my healing, none of them knew how to help guide me.

The therapists and pastoral counselors I enlisted during graduate school (in the mid-1980's) prescribed Elizabeth Kubler-Ross' five-stage outline of the grieving process, including Denial, Anger, Bargaining, Depression, and Acceptance. However, my grieving responses after Sheri died did not follow the prescription: I did not deny it, get angry, bargain with God, or get depressed. I accepted it. I had to accept it. I had no choice. I was left to grieve and heal on my own. At 17, I stuffed my pain inside and

"dealt" with Sheri's death in ways that were acceptable, even admirable, to those around me. It took years for me to genuinely begin to heal from the suffering I carried.

Sheri's death was not my first significant grief-inducing loss, nor my last. Rather, it was the loss that allowed me to understand that my grieving path was mine alone to forge, even when I was lucky enough to journey alongside others who supported me in ways that helped me heal. It was also the loss that helped me to understand first-hand why the prescriptions for grief and grieving often handed out by those in helping professions were generally *unhelpful* to the directees I worked with as a spiritual director.

FINDING OUR WAY FROM GRIEVING TO HEALING

For generations, mental healthcare providers have encouraged grievers to do their "grief work" and express their pain in the weeks and months after a loss occurs. This "grief work" approach is supported by a popular belief that the only way out of grief-related suffering is to plow through it. Unfortunately, making one's way through the thick of the pain is not a cure-all. Telling and retelling stories of trauma may be re-traumatizing. Continually ruminating on a grief-inducing loss for weeks and months at a time may well lead to chronic depression.

Some care providers added insult to injury by putting a time limit on "grief work," saying that it ought to be accomplished in three months, six months, or even a year. Grievers were expected to burn through their pain

quickly to “get it done.” If it went on too long, a person’s grieving process might variously be labeled as “complicated,” “complex,” “prolonged,” or “maladaptive.” When a life-shifting loss pounds the human psyche and spirit, however, such a speedy recovery may not be warranted or possible. Some losses fuel grief that never goes away. Expectations that it should can cause more helplessness and hopelessness than ever.

When suffering is overwhelming, grief may descend as an expansive, desolate “night of the soul” that causes us to lose all sense of direction. In John Greene’s novel, *Looking for Alaska*, the question was asked, “How do you get out of the labyrinth of suffering?” Those who walk the labyrinth know that you can’t really get lost in there, as there is only one way in and one way out. On the grieving journey, however, there are endless possible paths—some that lead to greater suffering and some to healing. As spiritual directors, we are obliged to know the vast and varied terrain of the grieving process, and to become familiar with each person’s unique journey through it, so that we can avoid encouraging someone to take a path that will only makes matters worse.

JOURNEYING TO THE HEART OF ADAPTIVE GRIEVING

The hard news is: there is no cure for grief. We grieve what, and who, we love and lose permanently. Grief is a given throughout the human life cycle from infancy to elderhood. At one time or another over a lifetime, grief is likely to become a spiritual or mental health

hazard, mostly because we know so little about it. Even our foremost “grief experts” cannot agree on what is involved, so how are the rest of us supposed to figure it out?

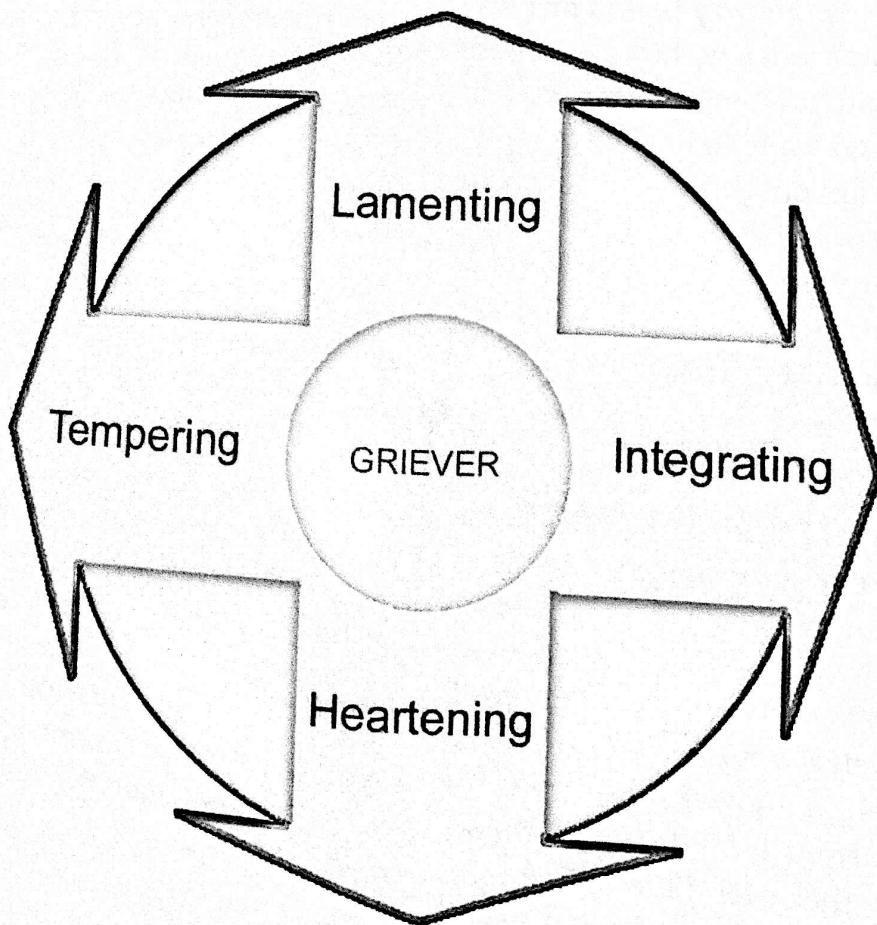
As a novice spiritual director, my awakening to the pervasiveness of grief motivated me to become a dedicated student of the condition. Despite having studied grief and bereavement in college and graduate school, I sensed that I had more, much more, to learn about these. So, I delved into mounting research data, influential theoretical concepts, and academic and popular literature on the subject, and discovered a few things. To wit:

- Myths and misunderstandings about the grieving process that thrive in popular culture, although discounted by a number of researchers, nevertheless continue to be supported and encouraged by many mental health practitioners, clergy, spiritual directors, healthcare providers, and grief counselors.
- Outdated therapeutic approaches, including stage, phase, or task models of the grieving process that promise “recovery,” “resolution,” or “acceptance” are irrelevant, incomplete, or ineffective for a majority of grievers.
- A popular therapeutic solution encouraging grievers to face their pain unrelentingly in the first weeks and months after a loss occurs—commonly through talk, *and more talk*, about their suffering and intensely expressed emotions—may be counterproductive, and more harmful than good.

- Grievers do better when they adapt to loss by engaging in a holistic grieving process that involves more than just experiencing, and expressing, pain and suffering.
- Healing grief-related suffering is not a time-limited endeavor; it is a skill that can be honed and utilized over the course of a lifetime.
- Despite mounting academic knowledge of grief and grieving, there is no common understanding of the adaptive processes involved, even among our most influential practitioners in the field. Therefore, widely relevant practical tools that offer a sense of direction in the grieving process are sorely lacking.

With this knowledge in hand, I combined key theoretical concepts and research outcomes to create a new compass for grievers and their spiritual and mental healthcare providers, called the Model of Adaptive Grieving Dynamics (MAGD). My article on the subject, entitled "A New Mourning: Synthesizing an Interactive Model of Adaptive Grieving Dynamics," was published in the academic journal, *Illness, Crisis & Loss*, no. 22(3) 2014.

The MAGD integrates four types of universal grieving responses, as experienced uniquely expressed by each griever, according to a person's tendencies and preferences, and specific needs for balance. These four responses are lamenting, heartening, tempering, and integrating:



Model of Adaptive Grieving Dynamics
©2014 by Charlene DeShea Bagbey Darian

Lamenting: Experiencing and expressing grief-related pain, distress, or disheartenment.

Heartening: Experiencing and expressing what is comforting, uplifting, or (even, surprisingly) pleasurable within the grieving process.

Tempering: Taking a break from grief – that is, suppressing grief-related suffering, or avoiding its distressing and overwhelming physical, emotional, mental and/or spiritual manifestations.

Integrating: Attending to the life-shifting changes brought on by grief , and incorporating these into everyday life.

Becoming more familiar with these four dynamics can help grievers, together with their spiritual care providers, explore and identify their strengths and growing edges as they adapt to loss, and to clarify the approaches to lamenting, heartening, tempering, and integrating that are most beneficial for them. As spiritual directors, when we listen, and respond more attentively, to an individual's unique relationship with grief and loss, we can bolster their best efforts to ease, tolerate, and transform their pain.

As a listening companion, the MAGD keeps me grounded in the knowledge that when it comes to adaptive grieving, every person embodies their own healing wisdom. I serve as a lighthouse keeper who reflects with each of them on the wisdom path that their unique grieving process reveals. With each listening encounter, I learn something new about the grieving process, particularly from their perspective. If I do not, I have little to offer someone grieving by way of reflection. Everyone who grieves is my teacher and my guide.

LAMENTING: GRIEF IS MORE THAN AN EMOTION

Grief is often defined as *emotional* pain and suffering. However, grief can be experienced in a person's whole being–body, mind, heart, and spirit. Grief may cause intense emotional suffering and it may also play havoc with mental capacities and thinking patterns, cause physical pain or illness, or disrupt a spiritual relationship with everything a person holds sacred.

Awareness of where and how grief-related suffering resides in every aspect of our being can help us tend to our lamenting more holistically. In my book, *Doing Grief in Real Life: A Soulful Guide to Navigate Loss, Death & Change*, I include a section entitled “Contemplation 4: Location, Location, Location,” where I prompts the bereft to reflect on how they experience grief in their bodies, emotional lives, thinking patterns, and spiritual perceptions and relationships. Knowing where and how grief-related suffering is experienced in one's body, heart, mind, and spirit helps people to focus their healing attention where it is most needed, and to identify grieving responses that may be especially useful to help them ease their suffering.

For example, if grief-related suffering is experienced as physical pain, physical expressions of lamenting may be useful. Someone might choose to construct a physical memorial for a de-

ceased loved one, sing the blues, or engage in full-body expressions of lamenting through wailing, sighing, sobbing, moaning, or yelling in the presence of a trusted listening companion, or alone.

If grief-related suffering involves spiritual pain that causes us to rage at God or experience a sense of meaninglessness or soulful desolation, lamenting expressions might include writing, speaking, or singing prayers, or creating visual or performance art that expresses our rage, sense of emptiness, lack of meaning, or profound loneliness. These lamenting responses may naturally provide heartening balance as we express and release grief-related pain.

In listening encounters, some pour forth lamenting responses in the moment, others tell stories about ways they lament in their daily life and relationships, and still others describe their distress and disheartenment from a more objective point of view, as they calmly self-reflect. Many engage in all of these equally valid expressions of lamenting in our time together. A person doesn't necessarily need to cry or emote to engage in lamenting in ways that clear a healing path. I attune my listening presence to all of it, not just the tears, gulp in the throat, or angry tirade. I listen, beyond emotions, to their whole being.

Deep listening to someone grieving includes listening for the pain and suffering that lives in a person's body, heart, mind, and spirit.

HEARTENING: SUFFERING WITH GRIEF IS OVERRATED

Those who grieve are expected to suffer. If they appear to adjust easily to a loss, they may be judged by others as being uncaring, in denial, or suffering a delayed reaction to a loss experience. But not everyone experiences prolonged suffering or intense depression after a loss occurs, as Dr. Camille Wortman and Dr. Roxanne Silver established in their groundbreaking article, "The Myths of Coping with Loss."

Some may naturally be drawn to whatever they consider to be uplifting or comforting in the grieving process, such as providing care for the ill or dying, sharing support with others who are mourning, laughing, storytelling, physically comforting, remembering, finding meaning in their loss, or experiencing personal growth. Uplifting aspects of the grieving process may reside at the center of the loss experience even while fully acknowledging its painful difficulties.

Heartening may be more prevalent with losses that were expected or welcomed, such as the death of a loved one who endured a prolonged, painful illness. However, even with sudden or traumatic losses, some tend to focus on the aspects of a loss experience that provides buoyancy. Doing so does not indicate that they are not fully engaged in the grieving process.

Heartening can provide balance to lamenting responses, by energizing us to integrate a loss more fully, or by allowing us to see some enjoyable and captivating aspects that serve to temper our pain. Heartening responses may include soothing gestures of self-care: receiving

hugs or massages, conversing with a trusted listener, rocking, hiking in nature, taking a warm bath, plunging into a cool body of water, curling up in a blanket or prayer shawl, or engaging in physical release through exercise. They may also include sighing, laughter, improvisational dance or movement, or rituals that involve a symbol of release, such as clearing out unwanted physical objects or transforming a deceased loved one's bedroom into a meditation or prayer space. It can be helpful to write a list of every heartening response that helps to ease and heal our suffering, so when heartening balance is needed we can refer to a list of possibilities and choose one that provides balance, relief, and self-healing at a given moment.

During each listening encounter, I mentally take note of heartening responses, even if they are buried deep in the crevices of brokenness. When someone expresses a need for heartening balance, I recall with them the heartening responses that are rooted in their firsthand experience. Becoming more aware of "go to" heartening responses can inspire us to make good use of them whenever heartening is needed most.

In a grief context, we listen deeply to what brings joy, comfort, meaning, laughter, or personal growth, as well as to our suffering.

TEMPERING: DENIAL IS NOT A DIRTY WORD

At one time, denial was thought to be an unhealthy response to loss and grief. Today, however, we've been given affirmation from grief researchers who tell us that denying the

reality of a loss during brief interludes (through avoidance, suppression, comfort-seeking, etc.) can be like taking a "mini-vacation" from grief.

Although *chronic* denial may intensify suffering, and compromise our spiritual and mental health, periodically ignoring, suppressing, and diverting ourselves from grief-related suffering is an essential part of the process. Tempering allows us to take a break from our pain by putting our mental and energetic focus elsewhere. This provides a reprieve that helps to renew our inner resources towards lamenting, heartening, and integrating throughout the grieving process.

We can also engage in tempering responses such as throwing ourselves into play, engaging in a pleasurable fantasy, sleeping, or immersing ourselves in demanding physical or mental activities, such as an absorbing craft, creative writing, brainteasers, word games, surfing, skiing, competitive sports, etc. Tempering may be experienced in engaging social interactions, or while enjoying a performance (concert, play, improv show, poetry jam, author reading, etc.). We may also find tempering reprieves in our spiritual direction encounters, when our focus turns toward a caring, trusted relationship. Additionally, we can engage in intentional speaking and listening practices, and sacred rituals, such as lighting candles, tracing finger labyrinths, choosing a prayer stone, or writing a self-blessing, among many others. Such activities can lift our grieving psyches and soul away from throbbing pain, even if momentarily.

We should listen deeply for how grievers seek healing by way of diversion, relief, and release from their suffering.

INTEGRATING: GRIEVERS AS CHANGE-AGENTS

All of us experience change continually. When change is caused by a grief-inducing loss, the change is written into our biographies forever. We may not be able to change the reality of a loss, but we can change our relationship to it. For example,

- Widows honor the love they shared with a spouse who died, even as they engage in a meaningful relationship with a new partner.
- Despite a divorce, ex-spouses can create a harmonious shared parenting plan.
- A birth parent creates a ceremony of blessing on the birthdate of a child who was given up for adoption.
- An athlete chooses to re-engage in a favorite sport after the amputation of a limb.
- A cancer survivor makes the most of breast implants after a full mastectomy.

Integrating with intention can be empowering. It can inspire us to reframe a loss-related change as an opportunity for self-healing. It can lift us from the ashes of death, illness, injury, victimization, betrayal, abuse, and trauma. Integrating allows us to rewrite our grief story and to recast ourselves (at least periodically) as people who survive and thrive, rather than seeing ourselves only as losers or victims.

Deep listening to those who are grieving includes discerning the intentional choices they make to be their own best change agents for healing.

GETTING OUR BEARINGS IN THE GRIEVING PROCESS

At a given moment, we may find that one type of grieving response is all we need to ease our pain. However, setting up camp in only one type of response can increase our suffering in the long run. The dynamic interplay among the four types of grieving responses is how holistic healing happens, and keeps happening.

In my sessions, I listen for grieving responses that are expressed in the moment, and those that are recalled from daily life. Between sessions, I offer resources for grievers to self-assess their preferences, tendencies, and needs for balance in the grieving process, and specific ways they engage in each type of response, whether physical, emotional, mental, or spiritual.

In the bibliography to this article, there are links for self-inventories grievers can use to assess their tendencies and preferences for lamenting, heartening, tempering, and integrating, and to reflect on strengths, growing edges, and needs for balance in the grieving process. It can be helpful for spiritual care providers to use this self-assessment tool as well, to explore our own relationship with grief, so as to provide an important reference point on our sessions with those actively grieving.

Although I make space for those grieving to express what they want, I also try to provide opportunities for them to find adaptive balance during our sessions. Sometimes, they may create such a balance for themselves, while at other times, they may need more guidance. If one

type of adaptive response dominates a griever's daily life and is given plenty of room to breathe in a listening encounter, I may encourage those in the midst of grief to seek adaptive balance by:

Inviting a silent pause: Encouraging them to pause silently to breathe or quietly reflect on what they have shared (or what still needs to be voiced) can create openings for mindful clarification, balancing emotions, and releasing tensions. Quiet pauses can help clear space, and allow other responses to come to the fore.

Acknowledging a grievers balancing responses: When a particular type of grieving response predominates, acknowledging contrasting or complementary responses can help grievers gain balance. For example, if a person who is heavily laden with the pain of grief reveals something that makes them laugh, enjoying the moment with them can help them to make the most of their heartening reprieve. Honing in on the balancing responses of grievers during a sessions can help them reinforce their efforts to seek balance in their daily lives and relationships. Word choices, descriptive phrases, stories, anecdotes, images, emotions, or behavior, can help reveal these opportunities. Make sure to highlight these balancing responses as you share your reflections with grievers.

Posing a question or offering a prompt: I often begin spiritual direction sessions with grievers by contemplating the questions they carry with them. After a quiet pause, I invite them to speak their questions aloud, which helps to guide our session, and which can provide useful prompts for contemplation later on. As we reflect on these questions, and the stories and experiences that underlie them, I may ask questions of my own, or repeat questions they previously asked, as well as recall a turn of phrase, intention, or image they shared that provides needed balance. For example:

Encounter 1: A griever tends to focus on heartening responses, "bucking up" under the weight of grief, and making light of their loss experience, often effectively saying, "so many others have it much worse than I do." Recalling something they shared that acknowledges their pain, and/or posing a question that sits at the center of their painful experiences may invite them to express their lamenting responses more freely. For instance, I might note: "Earlier, you said: 'I feel like I'm dying inside.' I invite you to take a quiet moment to reflect on this inner death experience," and then pause to reflect silently. If needed, I might then follow up with: "What do you imagine is dying within you?"

Encounter 2: A griever is struggling with depression and a sense of hopelessness. After their pain has been fully expressed and reflected upon, it may be helpful to acknowledge an intention or hope they shared , or to gently pose a related question such as: "You said earlier that you plan to go visit your sister next month. What are your hopes for your visit?" Or: "In the midst of these dark times for you, is there anything, *anything at all*, that brings you even a little hope or a glimmer of light?" If they *cannot think of anything in that moment*, I would encourage them to pay attention to such moments in their daily lives, and bring a list to their next session. Finally, I might share a passage, prayer, poem, image or song to contemplate. Meaningful artistic messages, whether written passages, songs, paintings, or photographs, relevant to the grieving expe-

rience and need for balance can provide inspiration for grievers in ways our conversational offerings do not. Those in the midst of griefs should be encouraged to pay attention to these art forms, and to seek out such balancing gifts for themselves.

LISTENING WITH BEGINNER'S MIND

Everyone has a grief story to tell, but grief stories do not make any of us experts on grief, and neither does listening to the grief-laden stories of others. Only once we learn the entire grieving cycle, and its underpinnings, can we then cast a circle that is large enough to include everyone—even the outliers we sometimes refer to as “complex,” “disordered,” “maladaptive,” “in denial,” or “not as resilient” as the rest of us. Only then will we be able to truly cherish each griever’s story as a unique expression.

As spiritual directors, we are obliged to receive each and every tale of mourning as if it were the first grief story ever told. When we are finally able to do this, we can hope to create sacred spaces for those in the midst of grief, so that listening may breed enlightenment, and enlightenment may breed healing.

It takes courage to venture into unknown territory with a grieving souls. Take heart, deep listeners: our grief journeys invites us in through silence, laughter, transformation and weeping. *

REFERENCES

DARIAN, C. D. B. "A New Mourning: Synthesizing an Interactive Model of Adaptive Grieving Dynamics." *Illness, Crisis & Loss*, no. 22(3) (2014): 195–235.

DARIAN, SHEA. *Doing Grief in Real Life: A Soulful Guide to Navigate Loss, Death & Change*. Gilead Press, 2022.

DARIAN, SHEA. "Contemplation 8: Grieving In Style: Doing It Your Way." checklist. Accessed July 7, 2023. <https://doinggrief.com/checklist-contemplation-8/>

DARIAN, SHEA. (April 13, 2022) "Healing the Whole Griever" audio contemplation. <https://doinggrief.com/healing-the-whole-griever/>

KUBLER-ROSS, ELISABETH, AND DAVID KESSLER. *On Grief and Grieving*. Simon & Schuster Ltd, 2014.

WORTMAN CB, SILVER RC. "The myths of coping with loss." *Journal of Consulting and Clinical Psychology*, no. 57(3) (1989):349-57.