

# The culture of grief

Grief is a common human experience that often results from the loss of someone closely related. On the one hand grief is a universal human phenomenon, and may even be a defining trait of humanity, but on the other hand it is also a form of expression that varies across historical epochs and different cultures. Furthermore, within a given cultural context, there is a considerable variation in the way people experience and express grief. Thus, grief is a significant human phenomenon, which deserves to be studied in its own right. But at the same time, it is relevant to analyse our understandings and ways of handling grief in order to throw light on the present development of a culture that is seemingly less and less willing to accept distress as a part of life. Today, a huge "happiness industry" has arisen comprising psychologists, therapists and other practitioners (Davis, 2015), who are intent to relieve us from our distress and make us happy. Some even argue that happiness has become a profound duty (Bruckner, 2011). Presumably no other culture has ever had such an evident happiness imperative as today's Western culture and been so intent to eliminate distress. But how does that related to the painful phenomenon of grief?

In this research centre, we will specifically examine grief experiences, but also the cultural setting and conception of happiness and distress within which grief is situated in our time. The focus on grief will lead the way for a wider analysis of the human condition in our culture, and the research on grief will simultaneously gain from the reflection on the embedding of grief in the cultural setting.

In recent years, more and more types of human suffering have undergone a medical treatment and there is an increasing emergence of new psychiatric diagnoses. Critics have emphasized the risk of a pathologization of common human experiences and reactions. According to new research from Aalborg University (e.g. Brinkmann, 2016), one can argue that we have witnessed the emergence of a "diagnostic culture" where psychiatric diagnoses are utilized for more and more purposes. Also, grief is now more frequently viewed as a medical phenomenon, and several psychiatric diagnoses on grief have been proposed including "Complicated grief disorder" and "persistent complex bereavement disorder", which is now included in the latest version of DSM-5 (in the section "Conditions for further study"). In Denmark, the system of diagnoses utilized is the WHO diagnostic system (also called ICD) which is currently being revised (the new version ICD-11 is to be published in 2018), and, according to WHO, a new diagnosis will be "prolonged grief disorder" (#7B22)<sup>1</sup>. It is to be expected that the Danish Health Authorities will shift to the ICD-11 and thereby implement the coming grief diagnosis, but even if this does not happen, it will still be relevant to study the changing conceptions of grief, suffering and happiness – comprising a medicalisation of grief – that occur during these years.

The implementation of a new diagnostic grief category will provide a unique opportunity for studying the ongoing changes in the human conception on grief specifically, and suffering and happiness more generally. How can the current cultural conception of grief be comprehended? What does it mean to introduce a new diagnosis? How will the conception of grief evolve during the following years?

## **The research perspectives of the project**

The ambition is to use the coming grief diagnosis as a launch pad for establishing an internationally leading research environment regarding research on grief concerning all of the most substantial psychological, cultural and clinical aspects of grief. The goal is to establish a research centre that is globally significant in the following three fields: (I) grief research as such, (II) research on the psychological and sociological influence of psychiatric diagnoses specifically regarding the coming grief diagnosis, and (III) cultural analysis committed to analyses of types of human

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<sup>1</sup> View the draft for the new list of diagnoses by WHO on the link:  
<http://apps.who.int/classifications/icd11/browse/l-m/en>

suffering, a tradition deriving from Durkheim, Freud and the critical theory of Horkheimer, Adorno and Honneth among others, where experiences of suffering (notably grief) is used to open up for a comprehension of the cultural situation as such. We believe that the centre will be able to integrate these three fields in an original way, which also represents a synthesis of the research interests of the primary applicants.

As grief is an existential and procedural phenomenon with various aspects; each research project will be unfolded with regard to three fundamental dimensions:

(1) *The personal and existential dimensions of grief*

The central themes will here concern the phenomenology of grief (meaning the immediate experience of bereavement and grief), grief in a life-course perspective (lifelong consequences of early loss experiences), the experience of the grieving on diagnosed grief (with the focus on the dilemma between admission to help and pathologization) and differences in the course of grief (among other things, through the development of a method elucidating the "affective logic" of grief, see sub-project 1c).

(2) *The cultural dimensions of grief*

Here, the research questions include the cultural transformation of grief from religious and moral perspectives to psychological and medical positions, grief as a ritualized practice (studying contemporary cultural conventions regarding the practice of grief – and eventually the lack of rituals), grief as a public and collective practice, as in online forums (e.g. social media) and memorials, changed institutional practices in continuation of the new grief diagnosis, and grief as a predictor of a general societal direction (what can be learned about the human condition and suffering from the way grief is perceived and handled today?).

(3) *The natural perspective of grief*

Here, the fundamental questions comprise the natural expression and function of grief: Is there a natural core way to grieve (across cultures)? Can grief by any means be understood as a mental disorder? Does grief have an evolutionary function? Is grief at all to be understood in evolutionary terms? Grief, suffering and death: How is it possible to accept and make room for grief in a time when people avoid relating to death and instead seek to eliminate all types of distress?

The ambition is to grasp the many facets of grief, both in order to achieve a thorough comprehension of the phenomenon, but also in terms of being able to take a qualified position of the diagnosis and treatment of grief in order to improve community services to people in grief. With a new grief diagnosis, the discussion concerning over- and under-treatment becomes crucial for avoiding unnecessary pathologization on the one hand and to offer support for people in actual need on the other.

### **The progress of research on grief and prevailing questions**

The modern research on grief began with the ground-breaking work of Freud around 100 years ago. With Freud's work the former idealisation of grief during Romanticism was replaced by an increasing problematizing and taboo, and people in grief were encouraged to put their grief away and focus their energy on the future. With terms such as "grief work" and "detachment", Freud paved the way for the psychological approach to grief of the 20<sup>th</sup> century. Following the basis of the Freudian theories of grief as a detachment task, a range of Freudian grief models has emerged, describing grief as a job comprising several more or less defined tasks. Such a model can be seen in the American psychologist Worden's (1982) working model of mourning, identifying four tasks of mourning: (1) to accept the reality of the loss, (2) to work on the pain of grief, (3) adjusting to a world without the deceased and (4) to withdraw the energy of the deceased and reinvest it in other relations. In a Danish context, this type of working model is known with the book *Den nødvendige smerte (The necessary pain)* (Davidsen-Nielsen & Leick 1987). Since the

first edition in 1987, the book has been published in further editions and numerous printings and it has been groundbreaking for the understandings and handling of grief in both clinical environments and the everyday population at home.

Another widespread comprehension of grief derives from the so-called *phase or stage models*, which at first was developed by the psychologists Robertson and Bowlby (1952) as a description of the behavioural repertoire of toddlers, presumably evolved through evolution by the detachment from their mothers. Robertson and Bowlby categorised the children's reactions of detachment in three phases. The first phase described the child as 'angry and searching' followed by 'depression and despair', which finally leads to 'detachment'. Bowlby and Parkes (1970) further developed this model to describe the adult's reactions to a loss, adding "numbness" as the first phase. The Swiss-American psychiatrist Kübler-Ross' development of a similar model describing the reactions of the terminally ill and later the grieving, also had a huge impact on the understanding of grief in clinical and popular psychology of the 20<sup>th</sup> century (Kübler-Ross 1970; Kübler-Ross & Kessler 2005). The well-known task and phase-models formed the basis for a number of intervention strategies and therapeutic practices, as well as becoming landmarks on how grief is comprehended, experienced and handled in the Western culture during the 20<sup>th</sup> century and until today.

However, the task and phase-models have been met with increasing criticism from both quantitative oriented research as well as anthropological studies, clinical research and practice. Especially, the notion that the process of grief must lead to complete emotional detachment from the deceased has been heavily criticized. As an alternative to the rigid division and one-sided emphasis on detachment of most phase models, both researchers and clinicians now often emphasize continuing bonds to the deceased as not just a normal phenomenon, but also as something helpful for the grieving (Klass, Silverman & Nickman 1996; White 1998). Furthermore, the idea that grief is only to be understood as an *emotional process* has been challenged by the Dutch psychologists Stroebe and Schut, among others, in their so-called Dual process model of coping with bereavement (Stroebe & Schut 1999). It describes a continuous oscillation between confrontation with and avoidance of the loss. The loss-oriented process comprises the emotional processing of the loss and relocating bonds to the deceased. The avoidance of the loss is in the model described as the restoration-orientation in which one attends to the changes and challenges caused by the loss in the present and future: capability of doing new things; acquire new roles, and distraction from grief. There is no priority of either process in the model, and the oscillation between the processes is described as an individual and time wise undefined process. In addition to the dual process model, the narrative approach has become prominent in recent decades (Walter, 2000). The narrative approaches focus on the meaning of the stories about the deceased from the surviving relatives. Surviving relatives not only need to process emotions, but also process the stories they have about the deceased as well as their relationship with the deceased. The narrative perspective emphasizes that the surviving relatives must find a way to integrate the life-story of the deceased into their own life-story.

The novel approaches represent a break with the one-sided phase and task-models, including their focus on emotional processing as a chronologically well-defined process. Moreover, the dual process model and especially the narrative approach put more emphasis on the social aspects in which grief takes place by accentuating the importance of social relations. The confrontation with the phase-theories involves a critique of the idea of grief as a well-defined phenomenon with its final closing comprising emotional detachment from the deceased.

From a sociological perspective, Walter (1999) argues that our present understandings of death and grief may be an indication of both late-modern and post-modern tendencies. The late-modern tendencies comprise how the individual in one's own lifestyle inevitably implicate interpretative repertoires provided by institutionalised expert systems. In late-modern society, the personal narrative is inextricably linked to knowledge on humans provided by science, especially psychology and psychiatry – most recently with the coming grief diagnosis. The post-modern tendencies are conversely characterized by an explicit scepticism regarding universal theories and authoritative expert systems in favour of a focus on the authentic, personalized and specific dimensions. In the post-modern view,

the individual is the highest authority in relation to one's own life, thus also in relation to one's own grief. Alongside late-modern expert knowledge on grief and crises, a new flourishing market has arisen, comprising self-help groups, books and webpages about and for individuals sharing their personal experiences with loss.

Hence, the development of research on grief has since the time of Freud moved from ideas of grief-work following certain phases to more complex models, and to the present schism between grief comprehended as a common psychological phenomenon to be handled with expert systems – most recently in psychiatry – and grief comprehended as a uniquely personal experience. Now we need knowledge on how this schism plays out in peoples' lives today; about how grief is conceived culturally, and not only personally and socially; about what role the institutional agents have concerning peoples' understanding of grief; and finally, about what happens with the perception of grief as a result of medicalisation processes and the coming grief diagnosis. This project will explore the above-mentioned questions in parallel with the implementation of a diagnosis for grief into the Danish treatment system; and the unique possibility to study the phenomenon before, during and after the implementation of the diagnosis.

### **Objectives**

The primary objective of the project is to understand the current status and experience of grief and follow its development in an age of medicalisation and implementation of new diagnoses. The secondary objective is to utilize grief, and the development of this phenomenon, as a historical seismograph to understand the more comprehensive development of the cultural conceptions of suffering and happiness. It is universal for people to experience distress during their lives, but the opportunity to ascribe meaning to distress varies across cultures and epochs. We will examine the existence of meaningful resources currently available in our culture regarding distressful phenomena such as grief. From an empirical perspective the projects will imply a focus on *grief following the loss of a parent* (sub-projects 1a & 1b), *Grief following loss of a child* (sub-project 2a) and *grief following the loss of a spouse* (sub-project 3a).

Thus, the aim of the projects is to fulfil the following objectives:

- (1) Provide a general psychological understanding of grief, both in the present cultural context and prospectively following the development in a 5-year period as the new diagnosis is introduced
- (2) Devise a thorough critical analysis of the latest research and theory development regarding grief in general and complicated grief specifically
- (3) Identify issues related to grief amongst doctors, psychologists, teachers and NGOs with a view to improve their opportunity to act adequately in a time when the perception of grief may change drastically because of the expected implementation of the diagnosis for grief
- (4) Initiate a qualified societal debate on informed basis regarding conceptions of grief, suffering and human expectations for a happy life
- (5) Distribute the research findings in a wide sense reaching both colleagues as well as laypersons and thereby contribute to greater understandings of grief as a cultural phenomenon as well as the influence of psychiatric diagnoses on peoples' sense of self in modern times

### **Research questions and work packages**

The objectives will be fulfilled through three work packages comprising subordinate sub-projects:

#### **Work package 1: The personal and existential dimensions of grief**

Grief in its essence is a personal experience, where the loss of a close relation involves intense distress, changed existential ways of relating to life and ultimately changes to one's self-conception. There is a risk of developing psychiatric disorders such as depression, anxiety and complex grief. But there is also an increasing cultural and scientific awareness on personal growth as a possible consequence of a grief process (e.g. concerning maturity,

increased appreciation of life etc.). The projects in work package 1 study the loss of a parent from an existential phenomenological and cultural psychological perspective, both prospectively (1a) and retrospectively (1b), and the informants are recruited through cooperation with the organisation Child, Adolescents and Grief (Danish: Børn, Unge og Sorg).

1a): Ditte Winther-Lindqvist (associate professor, AU): Parent loss among adolescents

The project is existential phenomenological and investigates how the experience of loss influences adolescents that lose a parent. According to research, there is an acute and severe strain following the loss of a parent and the loss often has lifelong consequences for the bereaved. Among known factors influencing the long-term effects of a loss are the quality of the relationship with the deceased parent, social network and presence of additional stressors (Stroebe & Schut 2001). The research will examine the relationship between acute reactions and the first-year adjustments to live with the loss of a parent in adolescence. There will be drawn upon a new existential model of the personal self as a bodily historical developmental process, with a view to develop a vocabulary covering bodily and pre-verbal experiences with loss (Køster & Winther-Lindqvist, forthcoming). Semi-structured interviews will be conducted with 20 adolescents who have lost a parent within 6 months, and 10 of the same adolescents will be followed prospectively with yearly follow up interviews during the coming 4 years. The design makes it possible to engage in critical dialogue with the phase models and the novel dual process model of coping with bereavement, given that both the acute loss experience and the following transition is examined with a view to cover the process and its consequences with regard to distress, complicated grief and/or personal growth.

1b): Allan Køster (Ph.D., post. doc.): Loss-experience in a long-term perspective

This sub-project studies the long-term effects of the loss of a parent during childhood/adolescence on the basis of the same theoretical foundation as sub-project 1a, but with informants examined retrospectively. 30 informants (15 having lost a parent before turning 10 years of age and 15 having lost a parent after turning 15 years of age) are being interviewed after they themselves have become adults (between 30-45 years of age). The analytical strategy is utilising the novel existential model to clarify how the loss settles as a bodily anchored constituting part of the person, and e.g. reactivated in later life events (e.g. when the person becomes a parent, marries and settles down). The informants will be asked the same questions regarding their experience at the time of the loss – how the loss influenced them back then and now (the current situation, personal relations and occupational duties). The questions are designed to cover both the pre-reflective bodily experience and the more reflective experiences and the material are to be analysed both phenomenologically and narratively. This design enables coverage of long-term effects of the loss of a parent and a theoretical discussion between existential phenomenology and narrative traditions with a view to cover the relationship between bodily experiences and how they surpass and reshapes in to narrative self-stories.

1c) Luca Tateo (associate professor, AAU): The affective logic of grief

The third sub-project works in the intersection between personal experience of grief and its cultural history (Valsiner, 2014). The process of grief comprises a certain relation with the world, which in cultural psychological terms is referred to as "affective logic" (Ciompi, 1997, Lennon, 2010). Through rituals and practices, cultural contexts invite people into certain affective contexts while simultaneously inhibiting others. The individual path through these affective contexts is rich on ambivalence, and on the one side being particular while on the other side drawing on general cultural repertoires on ways of thinking, feeling and taking acting in the form of discourses on grief as well as typical narrative scripts on the course of grief. These repertoires are normative and indicate culturally accepted ways one "should" grieve and express grief. But from which "affective logic" is the normativity of grief organized? The objective of this project is to answer that question. In the first phase by developing a qualitative research method to detect the affective logic. The method will be tested on approximately 100 students. In the second phase, the method will be utilized on two groups of adolescents of whom they respectively imply both normal and problematic reactions from grief based on valid diagnostic criteria. The second phase will comprise repeating in-depth interviews

(in collaboration with a research assistant) with 6-10 participants with regard to obtaining an in-depth understanding of the affective logic.

### **Work package 2: The cultural dimensions of grief**

Experiences with loss and death are fundamental existential conditions during human life, exceeding historical, geographical and cultural boundaries. At the same time, the meaning attributed to experiences of loss are different in different cultural contexts, which also implies rituals and practices regarding death and grief (Walter, 1999; Stroebe, Gergen, Gergen & Stroebe, 1992). The projects in work package 2 will by different means examine the present cultural context for grief and distress in Denmark and follow the changes concurrently with the expected implementation of the diagnosis for grief.

#### 2a) Ester Holte Kofod (post. doc): Medicalisation of grief: the consequences of the coming diagnosis

Historically speaking, religious frames of interpretation have provided people with significant rituals and practices of handling grief (Durkheim, 1915; Malinowski, 1948). However, in the late-modern time, grief has increasingly become the object of medical and psychological intervention and now more than often understood in a health and risk-perspective (Stroebe, Schut, & Stroebe, 2007; Walter, 2006). The coming grief diagnosis is expected to entail various consequences both for the individual and the society, and research indicates that between 10 and 20 % of all bereaved will meet the criteria for complicated grief (Shear, 2010). This project will examine the different historical, sociocultural, discursive and material conditions, which shape the present practices of grief, how these practices change with and during implementation of the diagnosis for grief and how individuals actively utilise and co-create these practices and understandings of grief. The empirical data will be manifold, including historical documents, diagnostic manuals, psychometric tests, professional and biographical stories of grief, online-materials and field observations of supportive groups for the bereaved, among other things. Furthermore, over a 2-3 year period repeated in-depth interviews will be conducted with approximately ten persons, who have lost a child during the past year, and according to the literature, are in high risk of developing complicated and prolonged grief reactions. The objective is to understand how the phenomenological experiences and biographical stories of the individual relate to the contemporary medicalised understandings of grief.

#### 2b) Brady Wagoner (professor, AAU) & Ignacio Brescó (associate professor, AAU): Socio-material practices of public grief and collective memory

Socio-material practices of grief in public contexts have traditionally been connected with the collective memory and identity of a group. From a reconstructive (Wagoner, 2017) and a context-based (Brescó & Wagoner, 2016) approach to memory, researchers have studied monuments and memorials among other things, in the wake of the world wars, Holocaust and the Vietnam war (Young, 1993). These studies have examined the mediating role of rituals, material artefacts and public contexts in relation to experiences of mutual loss. This sub-project will focus on the various socio-material practices, which currently mediate the public of expressions of grief, and how the lost object is socially negotiated, becomes meaningful and remembered differently from various cultural positions. Three empirical paths will be followed: (a) public grief expressed through online memorials (Harju, 2015), studied through online ethnography research, also called "netnography" (Kosinets, 2010); (b) public grief expressed through official memorials, which will be studied through the utilisation of the "Dialogical Accompaniment Interactive Group Method" (Espinoza & Piper, 2014), whereby the participants are invited to walk around a memorial and express their impressions followed by a focus group interview; and (c) public grief expressed through temporary memorials, which are studied just as in (b) but with special focus on performative and ritual elements characterising such places (e.g. one minute of silence, praying, flower lay down, cards, poems etc.). The project is expected to proceed over a 5 year period, which enables coverage of the ongoing cultural transformations of grief's socio-material practices.

#### 2c) Anders Petersen (associate professor, AAU): Grief as diagnosed suffering: the socio-structural transformations behind the grief diagnosis

To an increasing extent, grief is contemplated as a form of suffering, which is amenable to being treated. It thereby becomes enrolled in the same category as depression, anxiety and attention deficits. On this basis, urgent sociological questions arise: Which socio-structural transformations permitted this development? In parallel with the increasing prevalence of depression diagnosis (Ehrenberg 2010; Petersen 2016), this sub-project claims the impossibility of comprehending grief being transformed into the category of a diagnosis just by looking at psychiatry as a discipline (which develops manuals on diagnosis) or at the medical industry, which has an interest in creating yet another treatment for a form of distress. It is also necessary to examine the changed social rules and norms, which have permitted the journey of grief going from the everyday sociocultural world into the diagnostic, medical sphere. This sociological sub-project raises the question of what is supporting this development in late-modern society. Empirically speaking, this will be examined utilising document-analysis of historical documents (Duedahl & Jacobsen 2010; Lynggaard 2010) – anything from socio-medical scientific literature covering trivial and popular literature to internet materials – where the history of development regarding grief can be linked to the societal developmental trends. In regard of the above, primarily contemporary sociological diagnoses will be utilised seeking to determine the nature of the society we live in. In addition to the focus on the socio structural transformations, this sub-project will follow an institutional path and ethnographically examine how different institutional practices change with the implementation of a new grief diagnosis (Agar 2008). This will be examined in collaboration with a Ph.D.-student and there will be a selection of two to three institutional contexts.

### **Work package 3: The nature of grief and its dimensions**

The three sub-projects in work package 3 are interconnected and are meant to work in an integrative way with the above-mentioned work packages and sub-projects.

#### 3a) Svend Brinkmann (Professor AAU): Grief between happiness and suffering

The first sub-project examines grief in a field of tension between the contemporary ideals about the happy life and suffering. Sometimes, grief is said to be the price of love, i.e., the price one must pay in order to love someone. In this perspective, grief is a distressing phenomenon though it is also meaningful and existentially universal. From our contemporary understanding of grief, what can we learn about our understandings of happiness and suffering? Is the happy life also a life without distress? If not – how do people make room for grief and suffering in a “happiness culture” (Davis, 2015), characterised by “forced happiness” (Cederström, 2016)? Are there differences in generations in this regard – and how do people’s reactions to grief, happiness and distress evolve years after a loss (and in the light of a new diagnosis)? The project is empirical and involves interviews with approximately 30 subjects, who within the last year have experienced the loss of a spouse (distributed between 3 identical groups, respectively in their 30ies, 50ies and 70ies). Utilising phenomenological and narrative analyses, the object is to cover the subjects’ experiences of grieving in a culture requiring happiness, efficiency and performance. The project is longitudinal and the subjects will be interviewed regularly 3 times over a 5-year period. The project is conducted in collaboration with a Ph.D.-student.

#### 3b) Svend Brinkmann (Professor AAU): Grief as a mental disorder

This sub-project is theoretical and philosophical and asks the question: what is a mental disorder? Based on the theory of mental disorders as “harmful dysfunctions” by Jerome Wakefield (1992) it will be examined how “dysfunctions” can be involved in grief, comprising complicated reactions to grief. Wakefield’s theory is based on the idea of natural, evolutionary developed mental modules, which can sustain injury and thereby cause harm. Recent theories (e.g. Ingold, 2011; Lock & Nguyen, 2010 et al.) have questioned the distinction between the naturally developed and the cultural, and the question is what this implies for the authoritative theory of mental disorders (which among others forms the basis of the latest developments in the diagnostic system)? Furthermore, the challenge of grief regarding the theory of mental disorders concerns the fact that there might not be any adaptive function connected with grief. In this sense, grief can be contemplated as a kind of “existential protest” against the fact that everything has to be “useful” in evolutionary terms. This project builds on the general theory of mental

disorders developed during the past years (Brinkmann, 2016), but is here utilised specifically for the purpose of an analysis of grief.

3c) Svend Brinkmann (Professor, AAU): Grief between nature and culture

The third sub-project continues this topic and asks the question: why do people grieve at all? Does grief have an evolutionary function or is it a mere "random" by-product of our capacities to form relations and have emotional life? This question represents a challenge to evolutionary psychology and its understanding of psychological processes developed in response to evolutionary pressure. It has been difficult to conceptualise an evolutionary function of grief. The question will be clarified through comparative study of the differences and similarities between humans and higher primate's ways of grieving. The sub-project will also comprise an empirical study of the normativity of grief, that is differences in "how much" and "how" one "should" grieve, depending on the relationship with the deceased. The study will utilise artistic paintings (e.g. paintings of grieving people in different epochs) and literary stories (stories about grief through the ages, peaking with the coming grief diagnosis) with the assumption that the differences in "correct" grieving as interpreted in different epochs, may tell us something about the relationship between the cultural normativity and the natural causality. This project will among other things be based on the theory by the hermeneutic philosopher Charles Taylor (e.g. 1989), understanding grief as functioning within a meaningful horizon or context, which is capable of undergoing historical and cultural transformation.