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OMEGA

JOURNAL OF DEATH AND DYING

An Official Journal of the Association for Death Education and Counseling

Editor: Kenneth J. Doka, Ph.D.

Volume 64, Number 3 — 2011-2012

**“You are Weeping for That Which Has Been Your Delight”:
To Experience and Recover from Grief**

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**“YOU ARE WEEPING FOR THAT WHICH HAS
BEEN YOUR DELIGHT”: TO EXPERIENCE
AND RECOVER FROM GRIEF**

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ABSTRACT

To explore how people experience grief and what factors are perceived as facilitating successful grief work, a survey was distributed to people who had completed a grief recovery course. The results showed that emotions, cognitions, physical expressions, and behaviors all characterize grief, but that emotions are the most central component. The course brought relief and was regarded most favorably by those having at least 1 year between the grief trigger event and participation in the course. Writing a letter in which course participants express their feelings to the loss object was perceived as the most successful aspect of the course. The letter might help with grief recovery by bringing aspects that have not been dealt with into conscious awareness.

When you are sorrowful look again in your heart,
and you shall see that in truth you are weeping for
that which has been your delight. (Gibran, 2002)

Bad things happen, and as much as one may wish otherwise, most adults face at least one potentially traumatic event during their lives. The death of a family member or other significant other is one of the most stressful events in life. Such a loss causes profound grief and affects both physical and mental health (Ott, 2003). Death, however, is not the only cause of grief. Grief is a complex experience which can be caused by a multitude of losses and separations (Parkes, 1985) such as becoming unemployed or when a decision does not turn out as planned. Even positive changes such as getting married can cause grief (Reynolds, 1999). This article examines how people experience and recover from grief, as well as what factors are perceived as facilitating successful grief work.

EXPERIENCING GRIEF

According to Worden (2009), grief expresses itself as emotions, physical sensations, cognitions, and behaviors. Sadness is the most common emotion (Muller & Thompson, 2003). Anger, guilt, and anxiety are other emotions frequently experienced (see also Parkes, 1996). Worden noted that the most common physical sensations are hollowness in the stomach, tightness in the chest, oversensitivity to noise, and tightness in the throat. Among cognitions commonly experienced during grief are confusion, preoccupation (thoughts about how to recover the lost person) and hallucinations. Behaviors that are common during grieving are crying, sleep disturbances, appetite disturbances, and social withdrawal.

The experience of grief can be enduring. Carnelley, Wortman, Bolger, and Burke (2006) showed that widows continued to speak about, think about, and have feelings for their partner decades after the loss. Twenty years after the loss widows thought about their partner at least every other week, and had a conversation with the partner once a month. Dyregrov, Gjestad, Bie Wikander, and Vigerust (1999) found that the majority of adolescents in their sample experienced grief 9 months after the sudden death of a classmate. A large percentage of the participants expected that they might never recover from the grief, or that it would take several years.

Ringdal, Jordhøy, Ringdal, and Kaasa (2001) showed that women experience stronger grief reactions than men do (see also Boelen, van den Bout, & van den Hout, 2006; Dyregrov et al., 1999). Further, Ringdal et al. noted that grief reactions are independent of the relationship to the deceased.

RECOVERING FROM GRIEF

Worden (2009) divided grief recovery into four tasks: (a) accepting the reality of the loss; (b) working through the pain of grief; (c) adjusting to an environment without the lost person; and (d) emotionally relocating the lost person and moving on with life. Further, Worden distinguished between active and passive strategies. Active strategies, also known as problem-solving strategies,

involve the individual taking action to handle stressful circumstances. Passive strategies involve attempting to escape from the stressful circumstances, such as through alcohol or drug use. According to Worden, people who use active strategies tend to handle grief better than those using passive ones. However, passive strategies do not necessarily lead to worse outcomes, as Stroebe and Stroebe (1991) showed. Widows in their study who did not confront their grief did not differ in depression scores from those who took an active approach.

Other theorists have asserted that the ability to construct meaningful interpretations aids in dealing with loss (Davis, Nolen-Hoeksema, & Larson, 1998; Frankl, 2006; Taylor, 1983); Davis et al. concluded that constructing meaning can be accomplished either by making sense of the event or by finding a "silver lining." Both of these means facilitate adjustment to loss. They found that making sense of the loss was associated with less distress 1 year after the loss, whereas benefit finding was most strongly associated with adjustment 13 and 18 months after the loss.

Some researchers have questioned the necessity and effectiveness of grief work (Stroebe, Schut, & Stroebe, 2005; Stroebe & Stroebe, 1991). Stroebe and Stroebe found that the depression scores of widows who avoided confronting their loss did not differ from those who worked on their grief. In contrast, widowers who worked actively on their grief were better adjusted than those who did not. Currier, Neimeyer, and Berman's (2008) meta-analysis showed that grief therapy can be effective for people who are having difficulty adjusting to their loss, but for people in general the benefits are small and short-term.

THE PRESENT RESEARCH

To investigate how people experience and recover from grief we chose a sample of people who have explicitly thought about and worked to recover from their grief. The study examined the perceptions of people who had completed a grief recovery course (The Grief Recovery Outreach Program) at the Swedish Institute of Grief Recovery (SIGR). The study raised the following questions: (a) how do people experience grief? and (b) what factors in one formal method of grief work are perceived as most effective?

THE GRIEF RECOVERY COURSE AT THE SWEDISH INSTITUTE FOR GRIEF RECOVERY (SIGR)

The SIGR employs a method for recovering from grief developed by James and Friedman (see James & Friedman, 1998). This method is based on the notion that grief consists of conflicting emotions that naturally arise in response to any type of loss or change in familiar patterns of behavior. James and Friedman (2003) argued that unprocessed grief almost always involves feelings that have

not been expressed. Through this method the participants learn to communicate their feelings and complete the emotional relationship to the grieved.

There are three types of courses offered by the SIGR. The *workshop course* is intended for people who are grieving. The course is 3 days long and has a limit of 18 participants. The course is comprised of lectures about grief and the causes of unresolved grief, as well as grief work in small groups of three or four people. Participants are expected to do homework the first two evenings after the course. The *12-week course* has the exact same content as the workshop, but instead of 3 full days the course meets for a few hours once a week during a 12-week period. Finally, the *certification course* is designed for those who work with people who are grieving and want to help them get their lives back in order. The course meets 5 full days and has a limit of 18 participants. The course content is similar to the other courses but is broader and leads to certification to lead one's own courses.

The course participants begin by examining their lives and all the losses they have experienced in a loss diagram. Examples of loss are deaths, moves, changing schools, marriage, divorce, and becoming a parent. The diagram is essentially a timeline of when the losses occurred with an indication of the degree each loss affected the participants. They then choose a loss they have experienced and begin to work on it. When the loss involves a person, they place all of the important memories of the person in a relationship diagram. These memories are placed in one of the categories *excuses*, *forgiveness*, or *significant emotional expressions*. Under "apologies" they list things they want to apologize to the person for, under "forgiveness" come the things they want to forgive, and unexpressed emotional messages that do not fit in the above categories are placed under "significant emotional expressions." At this point they write a letter to the person for whom they are grieving. In the letter, the participants express their emotions, apologize, and express other significant emotions. They read the letter out loud (verbalizing) to be heard by another human being and end with a farewell (James & Friedman, 1998). The farewell does not mean forgetting the person but instead letting go of the pain caused by the grief. The letter completes the healing process (James & Friedman, 2009). To provide a sense of what the relationship diagram and letter entail, a fictitious example of each is provided in Appendix A.

METHOD

Participants

Questionnaires were sent to 513 people who had completed a course at the SIGR. Of these, 308 (48 men and 260 women) returned completed questionnaires. Of these, 112 had attended the workshop course, 82 the 12-week course, and 114 the certification course. Their participation was voluntary and they were not

compensated in any way for their participation. Their ages ranged between 20 and 72 years ($Md = 49.00$). The median time since the grief trigger event occurred was 4 years, but there was considerable variability as these scores ranged from less than 1 year to 45 years. Ninety participants did not provide information about when the trigger event occurred. Because the time elapsed between the trigger event and course participation may have affected participants' responses, we created a new variable we refer to as "time interval" for the 218 participants who indicated the year of the event and the course they attended. First, a difference score was computed between the year they attended the course and the year the trigger event occurred. Next, participants were split into groups at the 33.33rd and 66.67th percentiles for these difference scores. This resulted in three approximately equal groups comprised of those with 1 year or less (short interval, $n = 78$), between 1 and 9 years (moderate interval, $n = 67$), and more than 9 years (long interval, $n = 73$) elapsed between the event that triggered their grief and their participation in the course. The time elapsed between completing the course and completing the questionnaire ranged from around 1 month to 3 years, with a mean of approximately 1 year. The data were positively skewed such that 50.9% completed the questionnaire within 6 months of the course, 15.9% between 6 months and 1 year, 21.5% between 1 and 2 years, and 11.7% between 2 and 3 years.

Material

In addition to background items concerning sex, age, and when they took the course, the questionnaire contained a number of questions related to which loss they worked on and their perceptions of the course and its effects. A course evaluation index was computed from the questions "how did you experience the course?" and "to what extent do you think the course gave you an effective tool for recovering from your grief?" (Cronbach's $\alpha = .89$). These ratings are interpreted on a scale from 1 (negative experience with the course) to 7 (positive experience with the course).

Procedure

Contact was established with the SIGR and an agreement was reached to distribute the questionnaires for research purposes. The questionnaires were sent with a cover letter and a postage-paid return envelope. The letter explained the purpose of the study, that participation was voluntary, and that the information would be treated confidentially and used only for research purposes. A follow-up letter was sent to remind participants of the study. This letter emphasized the importance of participation for the reliability of the study, and it also reminded them that participation was voluntary.

RESULTS

The most common relationships to deceased entities which the participants chose to work on were parents (46%) and partners (37%). Other choices were children (4%), other relatives (9%), friends (1%), pets (less than 1%), and other relationships (3%). There was less variability for the type of loss than for the relationship to the object of grief. Most participants (35%) stated that death was the cause of their grief, followed by separation (30%), estranged relationship to a parent (25%), illness (3%), and other loss (8%).

Overview of the Statistical Analyses

Hypothesis testing was conducted using chi-square goodness of fit tests and analysis of variance. Unless otherwise specified, significance was assessed at the .05-level and post hoc analyses were conducted using the Tukey-HSD test. All analyses involving within-subjects factors were computed using the Huynh-Feldt correction due to violations of the sphericity assumption. For sake of brevity, we have collapsed the results presented here across course type. When course type was included as a factor, the general findings were basically the same with the exception that the participants in the 12-week course tended to be less satisfied with the course and some of its aspects.

How is Grief Experienced?

An analysis of respondents' descriptions of how grief was expressed before the course identified four distinguishing features of grief. These were emotions (e.g., sadness, anger), behaviors (e.g., crying, dwelling on the loss), cognitions (e.g., unanswered questions, thoughts of suicide), and physical expressions (e.g., loss of energy, illness). To assess whether there were differences in the frequency with which these expressions of grief were evident in participants' responses and, if so, whether this was related to the time elapsed between the grief trigger events and when the course was taken, the data were submitted to a 3×4 mixed-factorial ANOVA. Time interval (short, moderate, long) was the between-subjects factor and expression of grief (emotions, behaviors, cognitions, physical expressions) was the within-subjects factor. The dependent variable was whether or not each of these expressions was evident in the participants' responses, and the means represent the percentage of participants who mentioned them. A significant main effect showed differences in the frequency with which these effects were evident in the responses, $F(3, 645) = 102.14, p < .0005, \eta^2 = .320$. Post hoc analyses showed that the percentage of participants who mentioned "emotions" (67%) was significantly larger than those who mentioned any of the other categories. Next was "behaviors," expressed by 23% of participants, which was a significantly larger percentage than expressed "physical expressions"

(9%) but not “cognitions” (14%), which did not differ from each other.¹ No other effects were significant.

What Effects did the Participants Attribute to the Method Used by the SIGR?

Three of the items from the questionnaire were used to measure the effects of the course. A chi-square goodness of fit test revealed that a clear majority of participants felt that there was a difference ($n = 266$) as opposed to no difference ($n = 30$) after the course, $\chi^2(1, N = 296) = 188.16, p < .0005$. Further, an overwhelming majority responded yes ($n = 277$) as opposed to no ($n = 16$) to the question “do you think that the course had a positive impact on you” $\chi^2(1, N = 293) = 232.50, p < .0005$. Those who responded that the course had a positive impact were asked to check each of the following positive effects they thought the course had achieved (a sense of relief, less fear, more present-oriented, less stress, and/or other result). To assess whether there were differences in the frequency with which these positive effects of the course were reported, and if so whether this was related to the time elapsed between the grief trigger event and when the course was taken, the data were submitted to a 3×4 mixed-factorial ANOVA. Time interval (short, moderate, long) was the between-subjects factor and type of positive effects (sense of relief, less fear, more present-oriented, less stress) was the within-subjects factor.² The dependent variable was whether or not each of these effects was experienced and the means represent the percentage of participants who experienced each of the effects. A significant main effect showed differences in the frequency with which these effects were experienced, $F(3, 600) = 65.93, p < .0005, \eta^2 = .241$. Post hoc analyses showed that “sense of relief,” expressed by 70% of the participants, was cited significantly more often than any of the other categories. Next came “more present-oriented” cited by 45% of participants, which was a significantly larger percentage than named both “less fear” (20%) and “less stress” (26%), which did not differ from each other.³

¹ A one-way within-subjects ANOVA was conducted on the type of positive effects variable for the 90 participants who did not provide the information needed to compute the time interval. The pattern of results and significance decisions were identical to those obtained in the main effect in the Time Interval \times Type of Positive Effects analysis.

² Approximately 31% of participants checked the category “other result” and provided the other result in response to an open question. Because there was a wide range of responses to this question with no general agreement about what the other result was this category was excluded from this analysis.

³ A one-way within-subjects ANOVA was conducted on the type of positive effects variable for the 90 participants who did not provide the information needed to compute the time interval. The pattern of results was identical to that obtained in the main effect in the Time Interval \times Type of Positive Effects analysis, although sense of relief did not significantly differ from more present-oriented.

There was also a marginally significant main effect of time interval, $F(2, 200) = 2.99, p = .053, \eta^2 = .029$. Post hoc analyses revealed that a smaller percentage of participants with the short interval between the grief trigger event and course participation (35%) experienced the positive effects as compared to participants with the moderate level of time interval (47%). The percentage of participants with the longest time interval (39%) did not significantly differ from the other time interval categories.

These effects were qualified by a significant Time Interval \times Type of Positive Effects interaction, $F(6, 600) = 4.04, p < .01, \eta^2 = .030$. Analyses of simple effects of time interval were conducted separately for each of the positive effects. The effect of time interval was significant for feelings of relief, $F(2, 200) = 11.19, p < .0005, \eta^2 = .101$. Post hoc analyses indicated that a significantly smaller percentage of participants with the short time interval (51%) experienced feelings of relief than those with the moderate (81%) and long (81%) time intervals, which did not significantly differ from each other. There was no significant effect of time interval for less fear, $F(2, 200) = 1.50, p > .05, \eta^2 = .015$, more present-oriented, $F(2, 200) < 1, ns, \eta^2 = .004$, nor for less stress, $F(2, 200) = 2.33, p > .05, \eta^2 = .023$.

Though a clear minority, several participants responded yes ($n = 16$) as opposed to no ($n = 284$), to the question "do you think that the course had a negative impact on you" $\chi^2(1, N = 300) = 239.41, p < .0005$. Examples of negative impacts were that the course gave a false sense of hope for eliminating grief, or made one aware of how much grief work was left before feeling one's best again.

Participants were also asked to indicate whether they would recommend this course to others who are grieving. A chi-square goodness of fit test revealed that an overwhelming majority of participants would ($n = 273$) or might ($n = 10$) recommend the course to others as opposed to not recommend the course ($n = 22$), $\chi^2(1, N = 305) = 223.35, p < .0005$.

A one-way ANOVA was conducted with time interval (short, moderate, long) as a between-subjects factor and the course evaluation index as the dependent variable. This analysis revealed a significant effect of time interval, $F(2, 211) = 12.87, p < .0005, \eta^2 = .109$. Post hoc analyses showed that participants with the long time interval were significantly more satisfied with the course ($M = 6.36, SD = 1.00$) than were those with the moderate time interval ($M = 5.85, SD = 1.28$) who in turn were more satisfied than those with the short time interval ($M = 5.32, SD = 1.42$).

A final measure of satisfaction with the course was whether or not participants sought additional help for their grief elsewhere after the course. A chi-square goodness of fit test showed that the majority of participants ($n = 259$) did not do so, although a sizeable minority ($n = 42$) did, $\chi^2(1, N = 301) = 156.44, p < .0005$. Further chi-square goodness of fit tests were conducted to determine whether, and if so how, the time elapsed between the grief trigger event and course attendance was related to whether additional help was sought elsewhere. The first of these showed that the longer the time interval, the fewer the participants who sought additional help elsewhere, $\chi^2(2, N = 42) = 16.19, p < .0005$. To identify

which of the time interval groups differed, three more tests were conducted with significance assessed at the .0167 level to control for cumulative Type 1 error. Significantly more participants in the short interval group ($n = 21$) than in both the moderate interval group ($n = 8$), $\chi^2(1, N = 29) = 5.83, p < .05$, and the long interval group ($n = 3$), $\chi^2(1, N = 24) = 13.50, p < .0005$, sought additional help elsewhere. There was no significant difference between the moderate and long interval groups, $\chi^2(1, N = 11) = 2.27, p > .05$.

What Aspects of the SIGR's Method are Perceived to be Most Successful?

The analysis showed that there were five factors which the participants regarded as facilitating the program's success. The method itself was mentioned by 78% of participants, which was considerably more often than the other factors. The other factors and the percentage of participants who mentioned them were the participants' own efforts (16%), the group format (16%), the course leader (10%), and the climate (8%).

After finding that the method itself was cited more than four times as often as any other factor as facilitating the program's success, a further qualitative analysis was conducted to determine what aspects of the method were perceived as most meaningful. This analysis showed that the most frequently mentioned aspects were the letter in which course participants express their feelings to the loss object, the loss and relationship diagrams, knowledge about grief, and the overall concept. To assess whether there were differences with which these aspects of the course were reported, and if so whether this was related to the time elapsed between the grief trigger event and when the course was taken, the data were submitted to a 3×4 mixed-factorial ANOVA. Time interval (short, moderate, long) was the between-subjects factor and course aspect (letter, diagram, knowledge about grief, overall concept) was the within-subjects factor. The dependent variable was whether or not each of these aspects was evident in the participants' responses, and the means represent the percentage of participants who mentioned them. A significant main effect showed differences in the frequency with which these aspects were mentioned, $F(3, 645) = 30.22, p < .0005, \eta^2 = .122$. Post hoc analyses revealed that the letter was mentioned by a significantly larger percentage of participants (39%) than any of the other aspects. The diagrams were mentioned by a larger percentage of participants (16%) than knowledge about grief (6%), but did not differ from the overall concept (15%). The percentage of participants who mentioned knowledge about grief did not differ from those who mentioned overall concept.⁴ There was a

⁴ A one-way within-subjects ANOVA was conducted on the course aspect variable for the 90 participants who did not provide the information needed to compute the time interval. The pattern of results was similar to that obtained in the main effect in the Time Interval x Type of Positive Effects analysis with the exception that the overall concept was cited by a slightly larger percentage (22%) than cited the diagram (17%).

significant main effect of time interval, $F(2, 215) = 3.77, p < .05, \eta^2 = .035$. Post hoc analyses revealed that the short interval group had lower overall ratings of the course aspects ($M = 0.14, SD = 0.17$) than did the long interval group ($M = 0.22, SD = 0.18$). Neither of these groups significantly differed from the moderate interval group ($M = 0.21, SD = 0.19$). There was no Time Interval \times Course Aspect interaction, $F(6, 645) < 1, ns, \eta^2 = .008$.

DISCUSSION

The most common relationship described by the participants was the relation to a parent, followed closely by the relation to a partner. Earlier studies (Bowlby, 1998) have shown that relations to a parent, a partner, or a child are those that are most commonly described when people are asked to render an account of a time they experienced grief. Death was the most common cause of grief described, but both separations and relationships with parents were close runners-up.

How Grief is Experienced

Consistent with Worden (2009) and Bonanno and Kaltman (2001), the participants' experience of grief was characterized by emotions, cognitions, and behaviors. Participants also described physical expressions of grief. Emotions were more prevalent than the other aspects, and sadness was the most common emotion, which Muller and Thomson (2003) also found. Crying was the most frequent behavior, and unanswered questions the most frequent thoughts described in connection with grief. Loss of energy was the most common physical expression of grief. The finding that emotions, cognitions, behaviors, and physical expressions distinguish the experience of grief is consistent with Parkes (1996).

The Effect of the Method Used at SIGR

An overwhelming majority of the participants reported that the method used by SIGR had a positive impact on them. Approximately 1 in 5 participants stated they had less fear and nearly 1 in 4 that they had less stress after participating in the course. Nearly half the participants felt they were more present-oriented and more than half stated they had feelings of relief. We thought the evaluations of the course may be influenced by how much time had elapsed between experiencing the grief trigger event and taking the course. An interaction effect showed that the most prevalent positive effect of the course was feelings of relief, but this was most pronounced among participants who had more than 1 year between the time they experienced the grief and attended the course. Analyses of responses on the course evaluation index revealed that participants with the short time interval (less than 1 year) were less satisfied with the course than those with the long time interval (9 years or more). Participants with the moderate time interval (between 1 and 9 years) did not differ from either of the

other groups. It is possible that people can first benefit from the course after having had time to absorb the loss. This notion is consistent with Cullberg's (2003) four phase model of grief recovery in which the processing phase begins approximately 6 months after the grief trigger event. Research on memory and emotions suggests another possible explanation. Perhaps the participants with the short interval experienced more intense grief that was more resistant to grief work. Walker, Vogl, and Thompson (1997) showed that emotions are strongest directly after an event occurs, and fade with time. In a similar vein, Eklund, Hansen, Hallén, Galante Stockman, and Stocks (2011) showed that perceived compassion fatigue fades with time.

Although a minority, a number of participants indicated that the course had a negative impact on them, such as the realization that there was much work ahead to fully recover from the grief. Further, a sizeable minority of the participants sought additional help for their grief elsewhere after the course which suggests less than complete satisfaction with the results of the course. Among these participants, those with 1 year or less elapsed time between the grief trigger event and course attendance were over-represented. Perhaps time is needed to come to terms with grief before the benefits of grief work can be achieved.

What Makes Grief Work Successful?

Since the SIGR's method per se was most frequently cited as critical to the course's success we attempted to identify which elements of the course were perceived to be most effective. The letter was the most frequently named aspect of the course, followed most closely by the loss and relationship diagrams as important components of the course's success. This is consistent with James and Friedman's (1998) claim that the letter based on the diagrams is what finally heals. The letter writing might serve the same function as verbalization in therapy, bringing aspects that have not been dealt with into conscious awareness. However, these results should be regarded with caution. The diagrams and letter are reminiscent of methods of catharsis like those suggested by Bradshaw (as cited in Seligman, 1994) such as asking one's inner child for forgiveness or expressing rage at one's parents long after their death. Seligman cautions that self-reports of how much people enjoy doing catharsis are often highly favorable, but there is a lack of documented evidence that it has long-lasting positive effects. Similarly, the fact that participants regarded the letter as the most effective element in the course does not prove its effectiveness.

The frequency with which factors the participants regarded as facilitating the program's success was related to how much time had elapsed between experiencing the grief trigger event and taking the course. Participants with the short time interval mentioned fewer aspects of the course as facilitating success than did those with a long time interval, and neither of these groups differed from the moderate time interval group. This pattern of results was identical to that

obtained for the findings for course evaluation ratings. Since the short interval group tended to be less satisfied with the course, it is not surprising that they found fewer aspects of the course to be beneficial.

Concluding Remarks

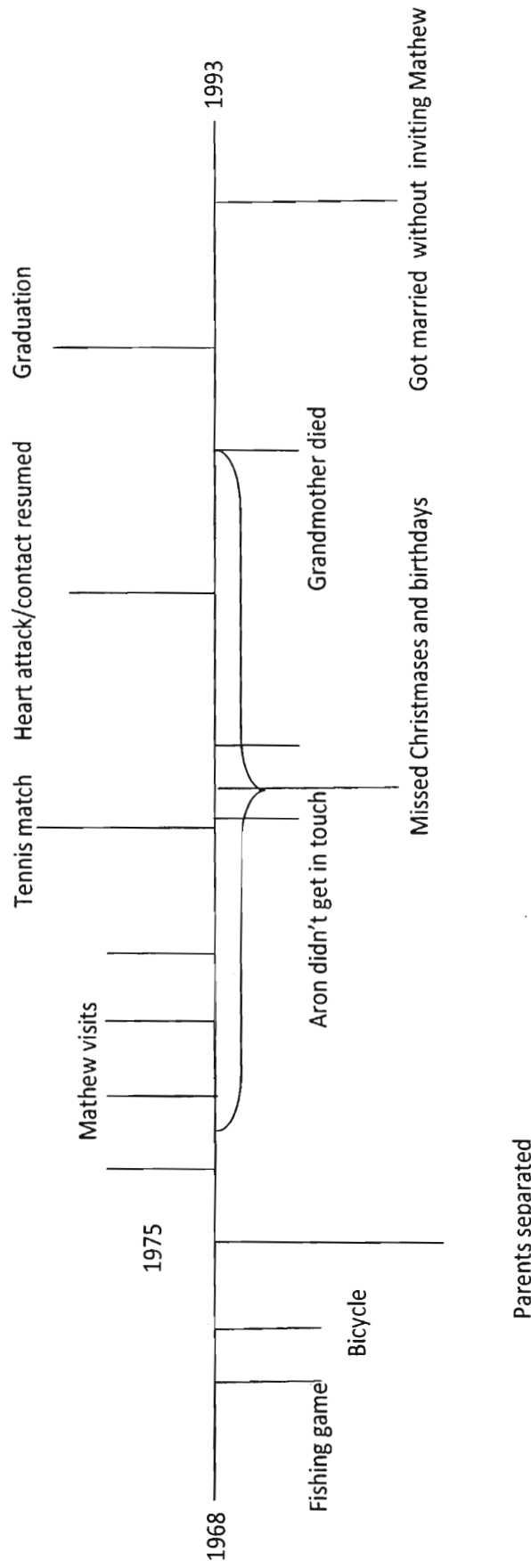
These results suggest that the method employed by the SIGR, particularly the writing of the letter and drawing of the diagrams, may help people recover from grief, but a period of at least 1 year between the grief trigger event and attendance of the course may be advisable. The purpose of the study was not to determine whether or not the SIGR's method is effective, but rather to identify which factors are perceived as most helpful in grief recovery.

Caution should be exercised in interpreting the results concerning the effectiveness of the SIGR's method, since no guarantee can be made that the participants who volunteered to participate are representative of all people who attend courses at the SIGR. Further, these results are based on participants' self-reports of the courses' impact rather than on more objective measures of psychological adjustment (cf. Stroebe & Stroebe, 1991). Although our results suggest that the SIGR's method can be helpful for working on grief, further research using appropriate control groups and more objective measures of psychological adjustment (cf. Stroebe & Stroebe, 1991) should be conducted. Future research needs to test the effectiveness of this and other grief recovery methods and should employ objective measures of psychological adjustment and non-treatment control groups.

Our hope is that we have empirically, as a complement to earlier conceptual analyses, illustrated the essence of grief, and shown that one active approach to grief recovery may be expressing one's emotions toward the person who once brought joy.

APPENDIX A

Sample relationship diagram: Positive events are placed above horizontal line and negative events below it. The length of the vertical lines indicates the degree to which each of the events was perceived as negative or positive.



1968 Aron was born.

Aron's first memory is from when he was 4 or 5 years old and pretended to fish with his brother using a jump rope on the steps where they lived. His father Mathew got mad at the boys for disturbing him and he chased them through the house.

When Aron was 7 his parents separated and he lived with his mother and lost nearly all contact with his father.

Through the years Mathew came to visit.

Mathew came and watched one of Aron's tennis matches.

When Mathew had his first heart attack he got in touch with Aron and said he wanted to resume contact with him. Aron refused.

Aron was disappointed about all of the Christmases and birthdays his father had missed.

Mathew went to Aron's graduation.

When Aron's grandmother died Mathew contacted him the day before the funeral was to be held and Aron was unable to attend, even though he wanted to.

1991 Aron got married, but did not invite his father to the wedding.

1993 Mathew died of a second heart attack.

After drawing the diagram, the various events are placed under their respective headings. Each event is placed under one of the headings.

The headings are:

- Apologies: Things I wish I hadn't done or things I wish I had done.
- Forgiveness: Things I wish the person one is grieving for hadn't done or things I wish he or she had done.
- Significant Emotional Statements:
 - negative emotional expressions (anger, hurt, violated, abandoned, etc.)
 - positive emotional expressions (love, gratitude, longing, trust, etc.)
 - broken dreams, hopes and expectations

With help of the three headings and their contents a letter is written. It is important that the letter be directed to the person one is grieving for, ends with a farewell, and is read out loud to another person. It is usually not recommended that the person who listens is the one for whom one is grieving.

Apologies	Forgiveness	Significant Emotional Statements
I didn't take the opportunity to resume contact after your first heart attack	You got angry during the fishing game	All the birthdays and Christmases you missed
I didn't invite you to my wedding	You let go of my bike when I wasn't ready for it	The tennis match
	Sporadic contact after you separated from Mom	Graduation
	Missing Grandma's funeral	The first heart attack

Dear Dad,

I have examined our relationship and have discovered some things I want to tell you.

Dad, I apologize for not taking the opportunity to resume contact that you gave me when you had your first heart attack. Dad, I apologize for not inviting you to my wedding.

Dad, I forgive you for getting mad when we were playing the fishing game on the stairs. Dad, I forgive you for letting go of the bike when I was learning to ride it. Dad, I forgive you for missing Christmas celebrations, my birthdays and other days that were important to me. Dad, I forgive you for not coming the Christmas when I had bought a present for you. Dad, I forgive you for seeing me only sporadically after you and Mom separated. Dad, I also forgive you for telling me about Grandma's death so late, so there was time for me to arrange to be at the funeral.

Dad, I want you to know that I am grateful that you tried to reestablish contact with me after your first heart attack. Dad, I also want you to know that I was glad when you came to my tennis match and to my graduation.

Dad, I love you! Farewell Dad!

ACKNOWLEDGMENTS

Appreciation goes to Linda Måhlén and Stefan Bölin for their comments on earlier versions of this manuscript.

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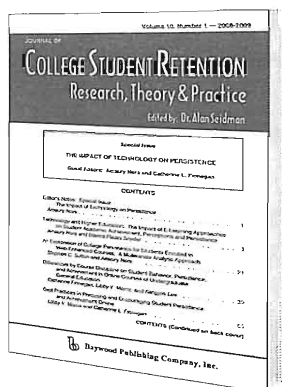
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The *Journal of College Student Retention: Research, Theory & Practice* is intended to provide the educational community, federal and state government officials, and the general public with the latest findings regarding the retention of students in higher education. Although access to higher education is virtually universally available, many students who

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