

**Reconstructing the Continuing Bond:
A Case Study in Grief Therapy**

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Over two decades since publication of the pioneering work on mourners' continuing bonds to the deceased (Klass, Silverman, & Nickman, 1996), contemporary bereavement theorists and practitioners have clearly embraced its relevance for grief therapy (Neimeyer, 2015b). But just how does attention to the relationship between the client and the deceased help direct the subtle give-and-take of the counseling process, as it unfolds in the intimate crucible of therapeutic dialogue? Our intent in the present chapter is to address this question by closely examining an actual session of grief therapy conducted along meaning reconstruction lines (Neimeyer, 2015a, 2001). We will begin by sketching a few of the cardinal themes of this perspective before introducing the detailed case study that will scaffold the chapter.

Loss and the Reconstruction of Meaning

Viewed through a constructivist lens, a central process in grieving is the attempt to reaffirm or reconstruct a world of meaning that has been challenged by loss (Neimeyer, 2006a). This does not imply that all experiences of bereavement entail a search for meaning, however, as we need not search for that which was not lost in the first place. Thus, when an important figure in our lives dies what we deem to be an "appropriate" death, one that fits comfortably enough into the narrative we hold of how life is or should be, it may pose minimal challenges to the practical patterns, relational scaffolding, and world assumptions that undergird our existence. But when that death is sudden, horrific, premature, or violent, or deprives us of a central figure on whom our sense of identity and security depends, we may be launched into an agonizing search for meaning in the loss and in our lives in its aftermath. The result, when we are unable to find meaning in what has befallen us, can be a grief that is perturbing, preoccupying and prolonged, and perhaps even life-threatening (Prigerson et al., 2009).

To date, a great deal of evidence converges to support the outlines of this meaning reconstruction model (Neimeyer, 2016a). For example, inability to make sense of the loss has been associated with intense grief symptomatology in families anticipating the death of a loved one in palliative care (Burke et al., 2015), bereaved young adults (Holland, Currier, & Neimeyer, 2006), parents who have lost children (Keesee, Currier, & Neimeyer, 2008; Lichtenthal, Currier, Neimeyer, & Keesee, 2010), and older widows and widowers, for whom it prospectively predicts difficult adjustment a full 18 to 48 months after the death (R. A. Coleman & Neimeyer, 2010). Moreover, a struggle to find meaning in loss has proven to be a potent mediator of the impact of suicide, homicide and fatal accident, where it accounts for nearly all of the difference between these forms of violent death and death from natural causes (Currier, Holland, & Neimeyer, 2006; Rozalski, Holland, & Neimeyer, 2016). Conversely, the ability to find meaning in the loss prospectively predicts well being and positive emotions over a period of four years (R. A. Coleman & Neimeyer, 2010), and moderates the impact of highly “central” or life-defining death events, substantially nullifying their deleterious impact (Bellet, Neimeyer, & Berman, 2016).

In light of the growing evidence base for the role of meaning-making in bereavement, adaptation in its wake has been theorized to entail two forms of narrative activity (Neimeyer & Thompson, 2014). The first of these is the need to *process the event story of the death itself*, and its implications for our lives in its aftermath. Making sense of the event story is particularly important when the loss is horrific and tragic, calling for a trauma-informed approach to integrating the narrative of the dying (Perlman, Wortman, Feuer, Farber, & Rando, 2014; Rynearson & Salloum, 2011). The second involves an effort to *access the back story of the relationship to the deceased*, in order to resolve unfinished business and restore a measure of attachment security.

Because this typically requires experientially vivid engagement with memories and images of the deceased, therapeutic work to reorganize the continuing bond requires an attachment-informed approach to grief therapy (Kosminsky & Jordan, 2016; Rubin, Malkinson, & Witztum, 2011). Either or both of these forms of narrative processing may be called for in a given case of grief therapy, giving rise to a great range of creative therapeutic techniques (Neimeyer, 2012b, 2016b; Thompson & Neimeyer, 2014).

The Present Case

Inge and Erik were a Flemish couple in their 40's living in Belgium with their two children, ages 4 and 7, when they sought relationship therapy at Context, the Center for Marital and Family Therapy at the University Hospital in Leuven. Both confessed to An Hooghe, their therapist, that they had grown apart over the 10 years of their relationship, a pattern linked to Inge's intense engagement in her work as an international business consultant. Across 8 sessions of earnest efforts in couple's therapy, both spouses stated that they had increased their mutual understanding, felt closer, made behavioral changes in their lives to permit more time together, and recommitted to their relationship. But in the course of exploring significant family relationships with each partner, Inge reported to An that she had lost her mother when she was 17 years old, a disclosure that was accompanied by an immense wave of sadness and tears. Of course, Erik knew this, but he had never met her mother, and Inge rarely spoke of her. Over the course of the sessions all noticed that Inge's grief for her mother remained a very sad and vulnerable place for her, one that continued tearfully to take her breath away each time the conversation of therapy touched on it. As the marital therapy came to a successful conclusion, Inge therefore approached An with a request for additional individual sessions to work on her prolonged and preoccupying grief, feeling that it would be too difficult to do so with her husband present. Both

partners readily consented to the plan, with the intention to then bring them back together and share the story once Inge herself had found words for a grief so deep and pervasive that it seemed to elude expression.

In the 10 sessions of grief therapy that followed, Inge remained very “stuck” in her grief, nearly unable to access memories of her childhood or of her time with her mother. Witnessing this striking disconnection from her own history, and Inge’s visible suffering with each mention of her mother’s death over 20 years before, An noted that “it was as if everything were put away in a very secure place, which made it possible for her to function in her job and daily life.” Working very slowly and with great caution, the two gradually began to access some memories of Inge’s mother, and as she became better able to “hold” them, invited Erik back in to share the story. It was at this point that Robert Neimeyer (Bob) visited Belgium to offer some days of professional training in grief therapy, opening the prospect of Inge having a single session of therapy with him to supplement An’s efforts, in view of Inge’s near-native proficiency in English. After discussing this possibility as a couple, Inge and Erik accepted the offer, choosing to have Inge meet with Bob individually but on camera, while Erik watched the session alongside An and 15 other therapists in another room, to relieve each of the partners of the immediate impulse to take care of or “rescue” the other. This then was the arrangement as Bob welcomed Inge and Erik, intentionally limiting the background provided him (learning only that she struggled with her grief following the death of her mother), so as to allow Inge to present the problem to him in her own terms, unconstrained by previous case conceptualization. By mutual agreement, Inge, Bob, Erik, An and the reflecting team of other therapists would then meet in a circle immediately afterward to share respectful questions about the therapy process before returning the couple to An’s care for additional processing of its implications. The text

that follows represents a verbatim transcription of the filmed interview, interspersed with Bob's first-person reflections on the work, which centered strongly on re-accessing and reorganizing Inge's continuing bond with her mother. The chapter then concludes with a summary of the subsequent couple's session, offering a window on the consultation's impact.

The Loss of Balance

Therapist (T; *speaking initially in Dutch*): Inge, dank je wel nog eens [Thank you once again].

I'm eager to learn something of your experience, and I wonder if we might begin with just asking you what kind of hopes or expectations might you have about this hour, about how it might be useful for you?

Inge (I): Uhm, I don't have a lot of expectations and I'm not sure what to expect, but one thing that would help me is to find other ways of thinking about, uhm, thinking about (long silence) your *place* in the world among people, when there's a change in configuration, like when you lose someone, how you come back into your *balance*.

T: Yeah, yeah, because the loss of another throws us *off balance* (gestures with arms and torso like a tightrope walker), and we find ourselves having a hard time finding our footing in the world again, in the sense of a solid *place*. And the loss that you've had, I understand, is the loss of your mother? (Client nods, and immediately struggles with tears.) And just with the mention of her name the feeling rises in you. (Client begins to cry.) Yeah (gently). So what is that feeling (gesturing with hand at the level of his torso, like a rising fountain), if you were to describe it in words that were even partially adequate to the experience.... What would we call that, the feeling that comes now?

I: Uhm (sigh)... Being *overwhelmed* (T: Overwhelmed, yeah.). (Pause) And in a way re-living it a bit (crying).

T: Reliving it a bit. Re-living the experience of her dying?

I: (Nods yes, tearfully.)

T: So the overwhelming feeling is one of...?

I: Yeah. Just, uhm, the loss, the loss of balance, loss of, the whole way that you thought your universe was functioning. And to have that go, disappear and be changed, and feel that's out of your control.

In response to my invitation to articulate her expectations about how this hour might be helpful to her—a bid to foster client “agency” in co-constructing the therapy (R. A. Coleman & Neimeyer, 2014)—Inge pauses, and then in a slightly self-distancing, second-person voice, seeks a way to make sense of her “place” in the world in the wake of loss, to recover a sense of “balance.” Hearing these vocally emphasized *quality terms* that begin to shape an implicit metaphor of her existential position (Neimeyer, 2009), I echo the significant phrasing, lightly “performing” the image to give it more embodied presence in the room. A simple mention of her loss evokes strong emotion and tears, as we seek a preliminary verbal handle for the feeling, and spontaneously elaborate Inge’s position in a universe that loses balance and coherence in light of her mother’s death.

The Center of the Universe

T: Yeah. It’s a deeply, deeply unwelcome change in the structure of the world, and you’re left trying to relearn that world and relearn yourself because both are changed in this experience.... What position did your mother have in this world, in this universe of your childhood and young adulthood?

I: I was 17 when she died. (T: 17.) And she’d been ill on and off for a long time. But when she died it was still a surprise, because we didn’t talk a lot of those things and she was very much a pillar figure in our house. She was a very dominant person, but not in a bad way. But she was called “Mrs. Thatcher” in her workplace (T: Ah, Mrs. Thatcher, the Iron...) The Iron Lady! (smiling and slightly laughing). And she was, not in a bad way, but she got her way in everything, had control over everything, she *governed* everything. In a way, she knew exactly what she wanted, what to do... when to do that.

T: The structures were there, and she was the one who kind of helped build them and keep them in good order.

I: Right. And she did that for us children but she did that for other relatives, for my father. There wasn't a big balance there, so she was very much a governing person in every sense of the word.

T: So in a way she was almost like a center of gravity or something for this solar system of the family, right? (Client nods.) And it's almost like, how does the solar system reorganize when the sun is extinguished, right?

I: Right (long pause, crying silently).

Our exploration of her mother's "governing" position in the family leads Inge to offer an affectionate characterization of her as "Mrs. Thatcher," the United Kingdom's forceful Prime Minister during the 1980's, whose unbending political will inspired the moniker used by her admirers. With my suggestion of a modest extension of Inge's metaphor of her imbalanced universe following her mother's death, she moves into several moments of wordless weeping, leading ultimately to my gentle intervention.

Introducing the Loved One

T: I wonder if you would be comfortable doing something with me just a moment, and that is, I would invite you just to close your eyes with me for just a second (closing eyes as client follows). And allow us to concentrate our breathing... just to allow our lungs to fill and empty... fill and empty (speaking slowly, and opening eyes to follow client's nonverbal behavior), in a natural rhythm. Just feeling maybe with each breath just a little release of the overwhelming feeling, recognizing that it's always accessible... and that that feeling probably has something to tell us... and teach us about this woman who was your mother, and still is your mother, in an important sense. (Client opens eyes.) And as we sit here speaking to each other, and as we kind of invite her to join us for that conversation in the ways we can, our goal is mutually to learn something about who you are, what you need, but

also about who she is and what she would need, in seeing her daughter now, carrying this grief. (Client nods, silently.) So I wonder, would you be willing or be able to introduce her a little more, this Iron Lady (client laughs) who is the governor, and the center of this kind of universe. What was her name?

I: Yvette. (T: Yvette.) Uhm, she worked always very hard and she herself was an accident. At the time when she was born that was a big deal. (T: Ah.) But she had felt and we felt as children that she felt as an unwanted person for a large part of her life. (T: Wow.) And so that was something. She read a lot of books about it. She never talked to us about it but we could sense that she had that feeling in respect of her own parents.

T: And a real effort, it seems, across a period of years to make sense of that? Or to say, “Who am I and where do I fit in?”

I: Yes, and to get appreciation from her parents, which never really was to her satisfaction, and that was very frustrating. And I think that’s probably why she worked so hard. (T: Ah.) Because it was something she felt she needed to make up for. And so she was a kind of person who would make all her own vegetables in the garden, she made all of our clothes (T: Wow.). She worked as a teacher; she did a lot of things. Even the evening before she would go to the hospital, she would wash all her clothes, and she made sure all the food was in place and the laundry was done. She did it by hand, even if she was meant to be in the hospital the next day. So she was this kind of indestructible force (smiling).

In the presence of Inge’s strongly disregulating and isolating grief, I begin with a nearly meditative moment of mindful breathing, matching her respiration, and gradually slowing it in synchrony with my own. As her strong emotion softens in response and she spontaneously re-engages me, I invite Inge to “introduce her loved one,” to appreciatively conjure her mother for me to re-access a seemingly broken bond (Hedtke, 2012). What emerges is a proud but incipient narrative of her mother’s

relentless work ethic, rooted, Inge surmises, in her being an unplanned and unwanted child and her lifelong effort to compensate for that.

A Quest for Connection

T: Yeah, almost an indestructible force. And how strange that must have been for her as well for you to witness this force having to contend with the force of illness. (Client: Yeah). A cancer of some sort?

I: Yes, for years. And there were times, all through my high school period, she was ill on and off. And there were times when I was young and I would go to the hospital to visit her and I *liked* those times because she would sit still and not work. And I could talk to her (laughs with therapist)! And she would talk to me and so we had that special time together. So there were times when her illness was not a *threat* in that way....

T: Was almost a *friend* in that way?

I: Yes. It was something that was there.

T: And it opened a space for a special kind of mother-daughter conversation that with all of her busyness would otherwise be hard to find.

I: Right. And there were other times or times when she got really ill, and she asked me to read to her. She had a book that was by Siegel, Bernie Siegel. She read a lot of books about self-healing with thoughts about positive thinking. And she was in a lot of pain, in the end she was in a lot of pain, because the cancer had spread. And we read to her, and it was books in English (laughs). And she would say, "Is it okay for you to read so long to me in English?" (T: Wow.) And so we would sit with her, sometimes reading...

T: So part of your remarkable English language competence was really born in the crucible of that connection with her and reading to her?

I: Probably.

T: Wow, so you were giving that to her as a kind of *gift*. But she also kind of gave that to *you* as kind of gift, that you bring forward to *me*, even.

I: (Smiling tearfully) She was an English teacher (tenderly).

T: Ahh. She was an *English* teacher (nodding).

I: So that's why they called her Mrs. Thatcher (smiling). English teacher with an iron hand!

(Both laugh.)

T: How perfect that is! I'm sorry to say I'm not Ronald Reagan. I can't exactly be the counterpart in the story of relationships across the sea! But it's a fascinating thing to meet her in this way. If you could picture her to convey what she looked like physically, what would I see in a picture of her?

Echoing but qualifying Inge's description of her mother as an "almost" indestructible force, I subtly open the door to the event story of her dying, having already begun accessing the back story of her personhood. What emerges is surprising: the periods of her mother's illness were more friendly than threatening, slowing her mother's otherwise intense activity to permit a special sort of mother-daughter bond. Significantly, this involved long exchanges in English as Inge read to her mother during her treatment, consolidating Inge's language competence at the same moment it consolidated the relationship. It is a short inferential step to formulate this as a legacy gift from her mother, as well as a reciprocal gift given to an ailing parent from a loving child. Connecting these dots to our own exchange in this same language completes the circle, and continues the work of invoking mother's presence as a third participant in the therapeutic triad (Rynearson, 2012).

Inviting Mom's Presence

I: I have pictures of her with me so I can show them!

T: Yes if you're willing to show her.

I: So I have a picture of her (shows the framed black and white photo).

T: Ah, yeah (enthusiastically).

I: She looks a bit Thatcher-like! (Both laugh.)

T: Now in this picture, right, where we see this sort of expression, almost like a slight smile, and the eyebrows are little arched, what do you see in this expression?

I: Uhm, her strength, I think (T: Yeah), because she was already fighting at this point, she was already ill. This photo is taken not long before, 6 months or so.

T: You wouldn't know that, would you? (Client begins to lay the photo flat on the small table between them, as the therapist gently takes the frame and lifts it to standing.) Could we place her here, because we're certainly inviting her to be with us in the conversation today (client assists in situating the framed picture), and, yeah, to maybe just lend us her sense of presence, lend *you* her sense of presence, as you do this difficult work of addressing the relationship and the pain that comes with her physical dying? (Client weeps, and therapist gently hands her a tissue.)

I: Thank you (wipes nose and eyes).

Making a literal "place" in the shared space of therapy for her mother, we position her as a potential support figure in Inge's therapy. Deeply moved, she accepts this positioning, as she acknowledges her grief.

A Frozen Grief

T: Yeah... What do you sense now that you need in the aftermath of her dying, all those years ago? There's something now about this, of course, that touches you so deeply. But what would help there, with that?

I: (Pause.) I have been wondering that for a long time too. Uhm, because it still feels like a very short time ago, to me at least. And it doesn't feel to me like the feeling changes between now and 5 years ago or 10 years ago. It stays too, uhm, *open*.

T: It stays too open. And when you say, "It doesn't feel like it changes, to me at least," is there a feeling that it *has* changed for others, even for others who knew her, or who know and love you, that somehow their grief or feeling about her dying has evolved in a different way?

I: Mainly I'm thinking in terms how it normally *should* be (T: Aha). You think that these things will pass a little bit, but I think my brother and sister, as far as I can tell, don't have the same

feeling, I think, but I'm not sure they would share it with me. I'm not sure. I was wondering, it should be, it should be something I should be able to talk about now without being overwhelmed.

T: "*Should*" ... Who would say this *should*? Is this an expectation voiced by people, or just present in the culture in some way, or...?

I: Yeah, I think (pause). Or maybe it's something that I would expect from *myself*, to think I should be able to move past.

T: So like, almost a part of you (raising right hand to represent that part) is saying, "Inge, you need to be able to move past this, you need to be able to speak of her without the tears." But there's another part (raising left hand) that is very tender and very hurt, very sad (client weeps, but maintains strong eye contact), that feels that the structure of the universe lost its balance, has shifted somehow. And *you* feel off balance.

I: It's *stayed* out of balance. (T: Stayed out of balance.) And I kind of assumed (pauses, weeping) that I would regain the balance, in some way, over time.

T: Yeah, that time would *heal* the wounds. (C: Yeah). We kind of have a cultural prescription about that, don't we? And it doesn't seem like that's happened for you.

In response to my attempt to discern the need implicit in Inge's grief, she immediately notes its "open," unchanging character as the years of her bereavement turn to decades. Probing gently for a possible contextual or familial discourse underpinning her expectation of her course of grieving, Inge suggests that her siblings are less haunted by the loss, and hints that she "should" be moving past it herself. I frame this compassionately as an inner dialogue in two voices, both to validate her own possible double positioning regarding her grieving, and to foster greater self-compassion rather than self-criticism.

The Loss of Safety in the Family

I: No. And the feeling I had had when she died was one that (long pause).... We didn't talk about this very much at home and so I think each of us had our own emotion and just took that and lived with it the best we could. So there wasn't a lot of conversation. I think the feeling that I had was that there was no... *safe place* anymore. There was no *protection* (T: No safe place.), because she had been kind of the pillar of our family.

T: The protector, the supporter, the structure of the family, and now it's like the pillar of the family has collapsed.

I: Right, and there was nothing that ever really substituted for that. So we just each stayed on the ground, each individually finding our way back.

T: So she was not only the pillar but also like the *floor* or *foundation* of the family, and each of you found your way of standing on that in relation to each other. (C nods). But with the collapse of that floor, each of you was kind of lost in your own world. (C: Right.). I see. (Pause) And you said something about finding your way back. Have you as a family, this is a brother, a sister, a father too?

I: A father too, who also died in the meantime.

As we continue to explore the meaning of this loss for Inge and its implications for her life now, she underscores in vivid metaphor the collapse of the secure base once provided by her attachment to her mother, and the resulting fragmentation of the family in the aftermath of her death.

A Silent Story

T: And did the three of you find your way back to connect again (C shakes head no), or...?

I: Not really. (T: Not really.) I think we get along, we see each other, we took care of my father when he passed. But we never talk about the experience. And we never shared that.

T: So there's a lot that's unsaid. A lot of silent stories that live within you, and that have no audience in the world.

I: Right (nodding repeatedly).

T: Have you been able to seek out and find others who can hear the stories that your family could not? About your mom, about her illness, about her dying, about life since that time?

I: I haven't, really. I spoke to some friends about it, to my husband a little bit but....

T: What kind of responses do you get?

I: What I expect.... listening, people listening. But it's such an overwhelming... I think because it's such an overwhelming feeling, I'm trying not to let it loose (gestures outward with her hands).

T: Ah, I see. So partly to not to overwhelm them you kind of, hold it in? Or not to overwhelm yourself?

I: Not to overwhelm myself. And putting me and them in a position... It would be awkward, I wouldn't know how to get out of it.

T: Yeah, yeah, yeah. How are you feeling now, in just this moment with me? You clearly experience and express in your tears, your face, and your words, some of this emotion.

I: I think now it's okay, I'm not overwhelmed anymore, at this moment. Because I'm trying to describe it, uhm, as opposed to experience it. I'm trying to do my best to not sit in it. So I guess it's a little better.

Although the narration of loss naturally occurs on every level from the intimately individual to the intricately social (Neimeyer, Klass, & Dennis, 2014), in Inge's case her grief has become a silent story, one that finds no audience in the world of others (Neimeyer, 2006b). In large part, this arises from a kind of self-censorship whose purpose is to avoid arousing overwhelming feelings in oneself or another, as is often observed in families going through a mutually devastating loss (Hooghe, Neimeyer, & Rober, 2012). However, in this case experiential avoidance of the core pain of grief seems only to have prolonged vulnerability to it, estranging Inge from family members, from herself, and in some sense from her mother. What seems called for, then, is a safe

and supportive exploration of this grief in the crucible of a trusting relationship, in a way that takes into account its substantially wordless nature.

Analogical Listening

T: Yeah. Let me ask you this and see if this makes sense to you, to see if it's worth doing, but with no attempt to press this. How would it be if we were to almost accept that invitation to try to describe it, some of how you carry this grief about your mom, without having you be swallowed up in that? If we were to do a kind of inner scan and visualization of how you carry the grief (gesturing with a slow wave over his torso, with eyes closed), allow it to speak to you from a place close to but not within it (gesturing to suggest this proximity to an inner shape). Would that be a welcome thing to be able to give it words, but not to be overwhelmed (making a wave-like gesture washing toward client) by those words?

I: Yeah. I don't know if I would be able to do it but I would like to try it.

T: Would you?

I: I think it would help because it's just what I experience, not intentionally, but that's what I'm experiencing right now. I'm trying to make this useful, to describe it to you, as opposed to just being overwhelmed. I think when I'm talking to a friend I'm just more overwhelmed, but now I really want to try and explain it, and so I think that is a better way.

T: Right. So here's my invitation, a little bit like we did a few minutes ago, just kind of to allow ourselves (slowing voice and closing his eyes) to close our eyes, and enter this place of quiet breathing, just kind of allowing our chest to rise and fall in a naturally deep rhythm (opening eyes to track client's nonverbal signals), emptying fully, and filling fully. As we just try to clear a space, a space between and around us, to invite this feeling to come (pause) in a way that gives it perhaps form and voice. Kind of a respectful invitation to a visitor, without having the visitor move in permanently. And what I would invite, if this feels okay to you, with your eyes closed, is to just do a kind of scan (gestures with hand slowly raising and lowering in front of his torso) through your body, allowing your awareness to maybe turn in and down (gesturing with his hand to suggest this movement), and into the space of

your body, your torso, or wherever it might be drawn, as you just ask yourself the question: “Where in me do I carry this grief for my mother now?” (pause) And just wait for it to speak, and you might gesture toward it (touches chest lightly with fingers) to show the place where you feel its presence.

I: (Sighs, wipes her eyes, and places hand on her belly while weeping softly.)

T: Yeah. Kind of in your abdomen, almost, a deep place within your body, right? Just kind of retaining the privacy of closed eyes (closes his own, with hand on his abdomen, as client then does the same), just ask yourself in this place (speaking very slowly), this physical location that holds the grief: if the grief had a form or a shape, what might it be?

I: (Pause) Something like a blotch, something very changeable and expandable (gestures in and out with fingers).

T: A blotch. Changeable and expandable (mimicking and enlarging client’s gesture). And with your fingers you kind of make the shape of expansion and contraction?

I: Right.

T: Does that have a color to it, as you just attend to it? (Closes eyes, as client then does the same.) (Pause) If it had a color what might the color or colors be?

I: Something reddish and purplish.

T: Reddish and purplish. (Pause) Kind of a constant color or changing color?

I: Changing.

T: Changing. Describe that change for me. What would it be looking like, changing from and to?

I: Like waves.

T: Waves. Like waves in the sea or... (making wave-like gestures with his hand)?

I: That rise up and that calm down again.

T: Ah. Rising up and calming down. That’s that kind of expansion and contraction (making these gestures with his hand). Is that a good word for it?

I: Yeah.

T: Yeah (closing eyes, as client then does same). Is there a feeling associated with that image, that rising up and calming down? A bodily feeling or an emotional feeling?

I: A tightness, a muscle tightness.

T: A muscle tightness, like in your abdomen? (C: Right.) Right, yeah. I wonder if you can focus your attention in those abdominal muscles now. And just tighten them almost like you're doing sit-ups or something, like an exercise. Can you feel the tightening?

I: Yes.

T: As you do does that shape or image or color change in any way?

I: (Pause) It is a little more stable (laughs).

T: More stable, less fluctuation.

I: Yeah.

T: And If you just release that muscle tension... with me for a moment, and maybe just take a deep abdominal, diaphragmatic kind of breath, what happens with the image then?

I: (Pause) It becomes a little more, how to say that, less of a (smiling, making smoothing motions with her hands)... more calmer, laid out, like it's lying down.

T: Oooh, like it's lying down (smiling).

I: Like instead of the waves, it's more ...

T: Less a tumultuous (C: Right.) raising up and falling but more of a calming. Calmer waters?

I: Right (pause).

Responding to my invitation to cultivate an unhurried, internal awareness through the breath-focused procedures of analogical listening (Neimeyer, 2012a), Inge quickly feels and visualizes where she holds the pain—in a reddish purple blotch (almost like a bruise) sensed in her abdomen. As we explore its sensory qualities of a wave-like expansion and contraction, Inge accepts my encouragement to consciously exaggerate the latter tension, and finds (perhaps surprisingly) greater “stability” in doing so. Releasing the tension at my invitation, she then notices a “calming” or “lying

down” of the feeling, suggesting that she has some control over her terms of engagement with it, making further exploration of her relation to the abdominally held grief sufficiently safe to be feasible.

An Internal Dialogue

T: That’s interesting (whispered). Just placing your attention near but not in that kind of watery expansive place, not drowning in it, but just sort of standing on the shore, I wonder if you would be willing to listen to it? Listening to anything that has to tell you. If it had a voice how would it speak? What would its vocal quality be like? (Client sighs.) Do that again (blowing softly out, as client does the same). How do you imagine it would speak, with what kind of voice?

I: I can’t imagine it having a voice.

T: How would it communicate what it has to tell us or teach us?

I: (Pause.) I see it more as something that is not something communicative, but more something that is there to deal with and *carry*.

T: To deal with and carry.

I: Rather than it being communicative or....

T: Uh huh, uh huh.... So I wonder if, from that place is near but not in it, I wonder if you can just try some words like these, and see if they feel true to you? And if not, change them to make them so. Something like, “I’m willing to carry you.” (Long pause) How would you need to change those words to make them fit for you? (Client begins to cry.) What’s the feeling that comes to you with that?

I (weeping): I was going to say, “I’m having a hard time carrying you.”

T: I’m having a hard time carrying you.

I: (nods yes)

T: I’m having a hard time carrying you. Then use those words: “I’m having a hard time carrying you.” Tell her or it or him what it is that is hard about that. (Long pause.) What would you

say about the difficulty carrying that dark, expansive and contractive, sometimes tranquil, and sometimes more turbulent space?

I: (Long pause). I guess it's difficult to carry because I sometimes feel like it's too overwhelming, it's too much and that it swallows me. And it feels like it's something I have to stay ahead of.

As we search for a way to dialogue with the image, we learn that it is less "communicative" than it is something to "carry," though at great emotional cost. Even with repeated efforts to establish a safe nearness to the feeling to explore the relationship to it, Inge is easily swallowed by the sea of grief, and seems at risk of drowning in it. What seems required, then, is a greater degree of separation that would make exposure to the feeling possible, but at greater distance.

Externalizing the Felt Sense

T: Something you have to stay ahead of? What if you could speak those words directly to the kind of feeling? And I wonder if we were to offer that image a place here with us, but a place a little bit outside you, would that be okay? (T places a third empty chair facing C, forming a triangle.) So if we offer a kind of comfortable chair here where it can repose, so it doesn't have to be lodged in your abdomen in this moment, I wonder if you can just return to those words, speak them to this sensed feeling, right? (Gesturing with both hands toward the empty chair.) "Sometimes it's overwhelming to carry you." What would you say to it about that?

I: Sometimes it's overwhelming to carry you (weeping). And it seems like it is never getting easier. It seems that it should get easier over time. Or that I should get better. It feels that I always have to be on my toes to not let it swallow me.

T: Say this and see if it feels like it fits: "It's like I have to be vigilant, or guard myself in some way." What's the "staying on my toes" feeling? What would you say about that?

I: It's also this feeling that I lost my place and universe a little bit. And so I have no safe position from within to carry you.

T: So you have no safe position?

I: No position of strength.

T: No position of strength to carry you.

I: And I have to do my best all the time.

T: Yeah, yeah. What would that position of strength look like if it had a physical shape, or structure?

I: (Pause). Something very upright, like a rectangle, something very square.

Speaking to the now externalized feeling, Inge voices the essence of her struggle: deprived of the secure base provided by her mother, she has “no safe position from within to carry [her grief].” Turning her inner gaze from the visualized pain to the strength needed to carry it, she sketches briefly what it would look like: upright and rectangular. The geometry of her language and gesture suggests the next move.

Standing Up to the Feeling

T: Shall we stand? Let’s stand up and see how that is. (T and C stand up, as C chuckles.) So here we are, kind of rectangular (standing almost at attention, like a soldier). So how does it feel relating to this same image (gesturing downward, toward chair)? Is it still a quiet form or is it more turbulent? What is it?

I: It’s turbulent.

T: It’s turbulent?

I: Yeah

T: How does it feel to just regard it (gesturing toward it) from this position of standing up (lifting hands to body) to it? Is there a difference between that and the kind of sitting with it? (As T speaks the word “sitting,” he slowly sits down again, and client follows.)

I: No, it feels the same. Whatever shape it has or whatever shape I have, it can overpower anything. (T: I see.) So that’s why I try to contain it in a *box* (C forms box with hands at level

of her abdomen) (T: Oh, contain it in a box.) to make sure it doesn't get out of certain boundaries.

T: Oh, I see. That's the kind of almost abdominal tightness (forms tight box with hands), that's the boxing up of this? (C: Yeah). (Pause) And if it kind of leaks out of the box or spills over (gesturing to suggest these actions) then it feels more overwhelming?

I: (nods yes)

Inner strength, it seems, is not enough: soon enough the grief leaks out or over the embodied box that contains it. Something more is needed.

Consulting with Mom

T: Who or what might help you carry that sense, that feeling?

I: I thought a lot about that, and I don't know. (Pause) I don't know (crying).

T: I wonder, if you were to meet your mother eyes in this moment of clear pain, what might she have to tell you about how pain can be carried, from a position of strength? (turns photo toward client, and gazes at mother) What message would she have for us about that?

I: I remember she would read me from those books that she kept reading about thinking positive.

T: The Bernie Siegel kinds of books. (C: Right.) So what kind of model or message might she have for you?

I: She was a strong person, she would say that I should shut up and move on.

T: Shut up and move on?

I: Yeah, she would have just said that, "Deal with it."

T: And she was able to somehow do that even in the midst of her cancer? (Client nods.) Were there times that it was even too hard for her?

I: I think there were times that were hard for her, but she showed those very rarely.

T: She had that kind of strength to contain the turbulence, the pain, in her own way (C: Yeah, yeah)... not wanting you to see that. (long pause as client gazes at mother). What difference does it make if any to invite her into this conversation about the pain, about the grief? To

have this very inner grief, right, this kind of reddish, purplish, swimming, elastic kind of form (gesturing to suggest wavy, expanding and contracting shape at level of his abdomen), and then to bring mom's kind of structure, and centering, and strength (making a vertical, upright gesture at abdominal level, melding to circle, and then to two closed fists, in synchrony with each description) to bear on that?

I (crying): It's hard because she *caused* it.

T: Because she caused it? I see.... So how does it make that hard that she caused it by dying?

I: So sometimes thinking about her is good and gives strength, but sometimes thinking about her causes a feeling to be more overwhelming. So thinking about her is not a *safe place*.

T: It's not a safe place, I see.... So sometimes you need a little distance from her just as you need the distance from this feeling?

I: Yeah. I use to spend—I told someone who was surprised about that—up until about a year or two ago, I spoke with her almost daily. Not explicitly, not in spoken words, but in thoughts.

T: In your mind? Did you ever write those down? Like in a letter to her, or...?

I: No.

T: Did you ever sense her speaking back to you, and kind of making it into a dialogue rather than a monologue?

I: Sometimes, when things would happen... for example, today is her birthday (smiling).

T: Today is her birthday?

I: Today is her birthday! (T: Ahh [warmly]). And so I felt this was a very odd setting. And my second son was born on her birthday too. I remember I had a conversation with her at the time: "I don't want him to be born on Friday the 13th or on Sunday, because there was no doctor in the hospital, and so he was born on her birthday three days later. So there are ways, and these are probably in my mind, there are ways in which I sometimes feel like there is some part of a conversation.

T: Yeah, yeah. And when you feel that conversation like really including her and that she's responsive to it, what does that do to the kind of reddish, purplish ...?

I: It calms it, it's a nice feeling, because it's a presence, I guess it's more I feel her presence rather than her absence.

T: You feel her presence rather than her absence.

I: (Nods yes.) And sometimes when I think about it I only feel her absence.

T: Yeah, so I'm wondering, would it feel right to offer your mom this chair (pulling the chair in a little closer), instead of the grief. (Client: Right.) We can allow the grief to go wherever it needs to go, whether it's back into you or to just take a place in the hall for now. (Client smiles and chuckles: Right.) As we kind of invite your mother's presence there in that chair. I don't know if we should sing her Happy Birthday or not...

I: (laughing) Probably not!

T: Probably not, but we could wish her that in some way (Looking at mother's photo, which he has placed in the chair)... She looks like she's amused in this picture now to me, with that little smile.

I (smiling and gazing at the photo): Right... yeah.

As we consider what would help Inge carry her grief, we turn naturally toward her original secure base: her mother, visibly present in the room in the form of her picture. However, initial barriers must be acknowledged and overcome—mom's stern gruffness, and more significantly, perhaps, the fusion of memories of mom with painful images of her dying. Seeking a way to soften, even a little playfully, into to the relationship, and to begin to differentiate between the mother Inge still needs and the grief over her death, I shift grief out of the chair and invite mom to occupy it. Inge's expectant gaze suggests that more steps toward renewing the bond are now feasible.

Renegotiating Attachment

T: You know one of the hard things about grief, I think, is that in some ways we're having to negotiate a change between losing what we had (reaching out with both hands toward the photo, as client returns gaze to it), and then attempting to have what we have we've lost

(pulling hands inward, toward abdomen, as if taking the photo into himself, as client follows the gesture with her eyes), but without the material presence of the other to anchor and structure that (client nods). Almost like we have to find a way to take that secure base and structure (gesturing to suggest the upright structure), and find a place for it inside us (drawing the gesture in, covering his heart).

I: Yes.... (spoken softly and evocatively).

T: So we can carry some of what we need with us (leans in, as if moving forward). (Client: Yeah.) And sometimes hearing the voice of the other or inviting that voice is a part of that. It's like the echoes of the conversation remain accessible, right? Do you ever sense that yourself?

I: Yeah, yeah.

T: What would you hear her saying to you at those times?

I: Umm, for example, there are times that I hear her say things, when I'm travelling in foreign cities, and I would say: 'Look, mom, where I am now', especially when I was younger and on my first trips for work and I could hear her say: 'Wow that's great!' (T: Ahh!) 'Like you're doing all this travelling and all of these things that I never got a chance to do.' (T: Ahh...) So those are conversations that were nice to have.

T: She would be sort of cheering you on, and really celebrating your living large.

I: Yeah, that's encouraging.

T: Encouraging. Like your moving out into a bigger world was not an abandonment of her. She was in a way going right along with you, and commenting on the experiences too.

I (smiling): Right. Sometimes I do feel that, like when we are decorating our Christmas tree and I used all the old ornaments (shaping her hand into an ornament with a hook), and I show my kids and I see her and I put the music on that we had too, I put on those old records that she used to put on. And she made us decorate the tree together, even when we were older and didn't want to do that together. And now I'm doing this with my kids and then I sense that she would probably be a looking on in some way.

T: Sure, sure. That's a lovely image. I mean, I have the sense of your being a *link* (holds up right hand) between her (reaching higher up), and these kids (reaching down, as if to the next generation), even to a point where they're being a little reluctant now, they're getting a little *big* for this (voice suggesting a joking tone). But it's part of the family culture (voice slowing, becoming serious) and you're transmitting in some way something precious and unique, probably stories of her with the little ornaments that you're hanging in the tree. You're hanging a memory or connection.

I begin by sketching, in experience-near language and gestures, a brief rationale for our work: grieving is partly a matter of importing a portable secure base derived from our ongoing relationship to the deceased into our ongoing lives, at a heartfelt level. Inge strongly resonates to this, and produces two vivid examples, in the form of her proud inner conversations with mom as she began living large in the world, fulfilling mother's dreams, and the sweet commemoration of mother, her music and her stories, during the holidays. Each ornament hung with her children on the tree is a link to mom, as Inge is herself a link in a transgenerational story.

Holding the Feeling

I: Yeah. So there are things that *most* of the time, I should say, when I'm thinking of her it makes me positive. It's more the feeling that comes when I don't invite it to (wipes eye).

T: Ah, yeah, yeah (glancing up thoughtfully and shaking head slowly). So sometimes those feelings will come uninvited. And of course even if they're born of love, they carry strong feelings of loss. And I wonder if at those times it would be possible to find ways to invite mom's presence alongside them, almost to help you *carry* them, you know (extends open hands, as if carrying something). (Client nods.) When you describe this kind of box (makes box shape with hands at the level of his abdomen) that you kind of contain the feelings in, what did you say it is made of?

I: I don't know, something metal or very strong.

T: Like iron?

I: Yeah!

T: And what did you call her?

I: Oh! The Iron Lady!

T: The Iron Lady. Maybe she's in a very good position to help you with this. Maybe she specializes in some of the strength that you now need as you carry this feeling and share it with others who are willing to stand in it, for even a short time. It needn't be something you're alone with.

I: Yeah (nods).

As she begins rewriting the terms of attachment to mom, Inge confesses a problem: the invited memories may bring joy, but the uninvited ones can still bring pain. I then weave back to the metaphor of finding help carrying the grief, and associate to the container Inge and I co-constructed earlier: it, like mom, is strong as iron. Completing this surprising connection, Inge brightens, and I feel a rush of emotion and admiration for Inge and the deep reconstruction of relation she is opening to after decades of impasse.

Re-engaging with Mom

T (spoken emotionally): And that can be a loving gift that you allow your mother to give you, still, right? (Pause while client cries and nods, choked with emotion.) Do you have any mementos of her that you keep close to you?

I: I have a lot of things; I have her jewelry, I have her diaries, that I have not read. I started to read but I thought they were too personal and not meant for her children (laughs) so after reading a little bit...

T (jokingly): Maybe some stories that we're not ready to hear! (Both laugh.)

I: So I have a lot of things of her. I put her *engagement ring* on (pointing to it, proudly). I never put it on but I thought today...

T: Can I see? (Inge begins to take the ring off.) No, leave it on... it's quite beautiful (leaning in, touching it appreciatively).

I: So today I put it on because I thought...

T: Yeah it's a large diamond, right? And is it surrounded by other stones, or is that a beautiful setting?

I: I think it's just a setting. And I never carried it. It's just in a box in my bathroom.

T: An *engagement* ring. And you *are* still engaged with her, aren't you? You're engaging with her right now.

I: Right.

T (spoken with emotion): And this is a kind of present she gave you. (Pause, as client cries softly and nods.) The *present of presence*. And she *is* here with us in a way. In this moment and this action. (Long pause, as client nods, gazes at the ring and exhales audibly). Maybe this spontaneous action on your part, right (handing client a tissue to replace the one she has used), bringing this ring and wearing it as you have--it's almost like an intuitive recognition that this is what you need a little more of. It's not her *absence* but her *presence*, invited in this concrete way. And you bring her here to be with me (looking and gesturing to mother's photo in the chair), you invite others to hear the story. You kind of listen and look, for opportunities to speak something of the beauty and the sadness of her life to those who are willing to hear the story. And there *are* some others (client nods, looking at therapist intently), if we seek them out carefully.

In deep and substantially shared emotion, Inge and I discover in her impromptu decision to wear her mother's engagement ring for the first time on this, her birthday, a remarkable linking object that helps cement their "re-engagement" with one another, after decades of disconnection. This "present of presence," given originally by mother to daughter and reciprocated by Inge's proudly wearing the ring to her session with me, now fully invokes mom's presence in our therapy, and more importantly, in Inge's

ongoing life. Reorienting in my remarks to this broader social world—with Erik in particular watching with An and others in another room—I suggest that she has already taken strong steps toward the reopening of her mother’s story to appreciative others, hinting at a social as well as personal reconstruction of the meaning of their shared lives in a way that calls forward mother’s presence.

Closing Reflections

T (Continuing emotionally): As we come into our final minutes of this session, Inge, I just want to acknowledge that I’m touched by your story. I’m touched by the love that you carry beyond the grave, giving it a place in you as you carry it with you through a life that continues to be touched by her absence but also by her strength (client nods). And it feels like an offering to her that you don’t only reserve only for her birthday. But in some important way she’s with you year round (client cries and smiles). (Pause). And I wonder if you have any thoughts or questions or concerns for me in these last minutes of our session, to anything we have spoken about, or where you would like to go with this?

I: I think I have realized through hearing this that I have tried to keep *her* in a box and keep the *feeling* very much in a box. But for me (spoken slowly, reflectively), I would feel better not putting it in a box, but having her help me through it.

T (summarizing, emotion in voice): “Maybe I would feel better not putting her in a box, but having her help me through it.” I don’t think anyone could say it any better than that (both teary).

I: Cause I saw it as a negative thing, and maybe it’s not a negative thing.

T: Maybe it’s not a negative thing, right? Maybe that kind of silent sea can also become something other than just a threatening space, like it could become something *not* negative?

I: Yeah (nodding). And I have had this feeling when she died, because I was so close to her, I think, that I was somewhat *uninvited* after her life.

T: That you were *uninvited* after her life?

I (weeping): That there was something there that I knew I had to do my best to still be...

T: Like *she* was requiring that of you, or...?

I: No, that she had been a *safe* place and with her gone I would have to fend for myself and prove my own worth without a safe place....

T: Just as she did.

I: Right.

T: Just as she did. To work hard to prove your worth? (Client nods yes). But you also phrase that in the past tense, almost with an implication that maybe it doesn't have to *stay* that way? Maybe there's a *different* way to find security or...?

I (nodding): I realized, when I was younger I thought I would just feel better once I had worked hard and earned a spot. And then I realized because I turned 40 this year, and I thought this feeling hasn't really changed, so it's not about getting better at things, because I could get better and better in many things but the feeling is not going to change.

T: Maybe this is a lesson of her life? (Client nods repeatedly.) And so what would be (spoken slowly) needed then, rather than more hard work? Is there a second message of her life that would give us a hint about that? Another way?

I: (long pause) I don't know.

T: ...There *seemed* to be something, right, that you glimpsed, in that idea of not just having to grimly carry it yourself in this contained fashion, but having her help you with it (client nods). It seemed almost as if that would be a shared weight to carry. I was just trying to imagine ways of inviting her in. Maybe this (gesturing to suggest the ring), the ring of *engagement*, is a way of inviting her in. But maybe there are other ways too?

I: Right (nodding), right.

Summarizing the key themes of the session, and validating Inge's impressive if incipient reconstruction of her relationship with her mother, I invite her thoughts on where she is now. She responds with the articulation of new awareness: she has struggled for decades to box up both her grief and her mother, creating a prolonged,

complicated grief that has changed minimally in 23 years. Her solution to this grief and the loss of the “safe place” her mother provided was, by identification with mom, unremitting hard work to “prove” herself and earn a place in the world. Now, however, she realizes that no amount of success can achieve this, and she glimpses the radical possibility that inviting her mother’s greater presence in her life might help restore the strength and safety she requires. In our closing minutes, we add further fuel to this bright flame of possibility.

Future Steps

T: What would be some? I guess you’re inviting her in, in this conversation, right, with me.

(Client: Yes.) This is one step. Would there be another step in the same direction?

I (pause): That’s hard to say. Because it’s been such a long time and the world where I am in now is very different.

T: Yeah. The world has changed and you’re still trying to learn it. But it seems like you’re also still trying to find a world that is safe for your *mother*, right?

I: Yes.

T: How would it be to keep your mother’s stories *alive*, in this world? And who might join you sometimes, in that? Just like at the Christmas tree. But not having to wait for Kerstfeest [Christmas] to do it, right?

I: Yeah (laughs). My family, my children. It’s hard with them because I feel I have to do my best.

T: Sure. But maybe the definition of what is the *best* can be (gesturing fluidly with hands) flexible, and not quite so... (gesturing to form the box), you know?

I: Yeah.

T (looking up and nodding slowly): I had an idea... that your mom kept a journal, she obviously wrote about things that were personal and important and emotional to her. And my guess is that *you* are personal and important and emotional for her. And I wonder if in the way that you might have the conversations with mom and maybe can even imagine writing a letter to

mom, if you could imagine *her* writing a letter back to *you*, right? (Picking up pad and pen.)

What would she say? And did she call you Inge?

I: Yes.

T: And so if you would write a “Dear Mom” letter, what would the “Dear Inge” letter look like?

(Pause.) It might be something to experiment with, to almost give her your pen (extending pen toward client) and your hand (pantomiming writing). Because I take it you *do* hold her inside of you (gestures toward heart) some ways. She’s with you in a lot of ways (gesturing to suggest engagement ring). And maybe she could have some voice. (Client: Yeah, yeah.) That could be her birthday gift. (Client nodding repeatedly: Yeah, yeah.) A birthday letter to Inge. Now are you currently seeing a therapist?

I: I saw An, I’m seeing An, so yes.

T: Yeah, you’re seeing An. So I wonder if we were to, if I were help to share this crazy idea with

An about a kind of correspondence with mom, just as something to try out to invite her in a bit more, would that be of interest to you?

I: Yeah.

T: You think you could do that?

I: Yeah (nodding repeatedly).

T: So what I’ll do, I’ll look for a couple of moments to talk with An and just share this and brainstorm with her, and then maybe you and she could just try it out and see how it is for you, with no obligation to continue with it.

I: Yeah. That’s a nice idea, yeah.

T: It’s a nice idea. Well, you’re a nice daughter (client laughs softly, moved). And I think you are giving her the gift of your love *still*, on this birthday. (Client maintains strong eye contact through tears, as therapist leans in and shakes her hand firmly.) Thank you so much.

The session concludes with tears not of grief, but of hope, with the prospect that mom’s stories might find broader circulation in the world, and that a daughter’s outreach to a mother she still needs, might be imaginatively reciprocated with the

assistance of her therapist. A handshake concludes a session that honors not only the day of her mother's birth, but also a day that symbolizes the re-birth of their relationship in continuing love.

Therapeutic Postscript

Viewing the live session by video feed in another room, An later noted that "Erik (and I) cried most of the session, being grateful to witness this from a distance, and to hear many of Inge's stories about her mother (which, as he said afterwards, he had never heard before). After the session he said he hoped this would stimulate more stories for them to share (about her mother and her grief), because this felt like something very connecting in an open and authentic way." Indeed, this hope was richly fulfilled in the days following the session, as documented in An's summary of their next marital therapy appointment a few days later, written immediately on its conclusion by drawing on notes that she, Inge and Erik decided to take in the session. Forwarded to Bob "as a gift coming from a feeling of gratitude," it read:

I just had a session with Inge and Erik, and of course we looked back on the session last week. This is what they told me:

About the grief that moved from a box to an externalized but reachable place:

Inge was very surprised at having a "different feeling" towards her mother since the session. Working with TWO chairs, one for her grief and overwhelming sadness, and one for her mother, was amazingly important to her, as she could now, for the first time in her grief process (!!), separate these two externalized 'others'. Importantly, she could now see and think about her mother in a way that was not only about an intense grief ("because that one was in the other chair"). Since Wednesday she has been able to connect with the memories of her mother, think about her, and recall all kinds of memories, without the grief interfering with them. She now was able to access a wide recollection of childhood memories with her mother in many situations (when they were at home during the weekends, when mom was working or

preparing dinner, when they went for a trip with the family,...). She realized that she had captured her mother in a box of sadness for years, so that she could not reach her mother anymore without the overwhelming sadness.

Working with the two chairs has really helped her to separate the two, combined with your saying that "We need the dead person to help us in our grief, and be able to connect with them again."

About her realization of the importance of mothers

Another thing happening in the days following the session was her new understanding of the enormous importance of mothers for their children. Inge and Erik have 2 kids, and she has now started to think about her own importance as a mother to them and what she wants to be for them. This really touched me a lot, as this too was something she was struggling with, to find her significance as a mother to her kids. Wow!!

About the gift for her mother

We made the connection that these new/old memories of her mother are also a gift for her deceased mother as well (what mothers would like NOT to be remembered because all their memories evoke is pain and sadness?!). As mothers (or parents) we want to be remembered by our kids with a smile on their faces :-). You can guess I was very emotionally touched by this!!

About Erik's presence

Erik added that he was very thankful to join her and witness this session from another room. He stressed the fact that it was very important that he got the opportunity not to be next to her but instead to watch this session from a place in which he was not drawn to help or comfort her. Now he was able to listen more carefully to what his wife told you. Inge agreed: if Erik would have been in the same room she would attune with him, talking care of him, or being afraid to burden him, and being burdened by him. Being there on her own, with Bob, gave her "at least some sense of control".

Now that he witnessed this session he felt he had the possibility or space to ask questions about her mother during this weekend, like “What did you do with your mother during the weekends when you were a kid?”

About the importance of the reflecting team

They both stressed the importance of the opportunity they had to hear us reflect on this session. For them this created an opportunity to go over the session again and look at it from a more outside perspective, "making it more normal and objective in some way, being less 'abnormal.'"

Bob, for me this has been a very important training in grief therapy, in which (to note only one of many impacts) I am now very motivated to work with chairs to externalize feelings and the deceased. Thank you Bob!! And as an immediate 'proof': the next session, after Inge and Erik, I worked with several chairs... It was fascinating!!! --*Warmly, An*

Conclusion

The advent of contemporary scholarship concerning the continuing bond, amply documented in the present volume, has made clinical as well as conceptual contributions to many approaches to grief therapy. In this chapter we have explored this contribution in the context of a model of grieving as meaning reconstruction (Neimeyer, 2016a), which helps the client to identify, symbolize, articulate and re-negotiate a world of passionate meanings that have been challenged by loss. Although this orientation to grief work can, and indeed has been expressed in a structured treatment protocol incorporating specific modules and techniques (Neimeyer & Alves, 2016), we have emphasized here the high degree of tailoring and improvisation of interventions characteristic of responsive psychotherapy of any kind, which are particularly close to the heart of constructivist practice (Neimeyer, 2009; Neimeyer & Mahoney, 1995). In this view, the conversation of therapy unfolds as a collaborative co-construction, as the therapist “leads from one step behind” to deepen and direct the

client's engagement with implicit questions, significant emotion, and experiential impasses that arise in the course of grieving. The result commonly is the generation of a series of "innovative moments" (IMs) in the process of therapy, in which client and therapist alike discover fresh meaning in the form of novel reflections, actions, and emerging reconceptualization of the "dominant narrative" of the client's prolonged and intense mourning (Alves, Mendes, Gonçalves, & Neimeyer, 2012). Indeed, close process analysis of sessions of master therapists working in constructivist, existential and person-centered therapies with bereaved clients clearly documents the link between the sustained cultivation of IMs in grief therapy and improved outcome over the course of treatment (Piazza-Bonin, Neimeyer, Alves, Smigelsky, & Crunk, 2016; Piazza-Bonin, Neimeyer, Alves, & Smigelsky, 2016). As illustrated in the work with Inge, when the therapist is sufficiently attuned to the growing edge of the client's meaning making, the outcome can be a rapid reconstruction of how the client holds her grief, and equally important, how she holds the relationship to the deceased.

Given the prominence of cognitive behavioral formulations in contemporary psychotherapy, it could be tempting to construe such meaning reconstruction in highly cognitive terms, viewing therapy as a process of testing and revising the client's misinterpretations or dysfunctional beliefs in the context of bereavement (Malkinson, 2007). But without denying the utility of this perspective, we find the approach to grief work exemplified in this and other cases (Neimeyer, 2004, 2008) to bear greater similarity to emotion-focused (Greenberg, 2010), coherence oriented (Ecker, 2012) and narrative therapies (Hedtke & Winslade, 2016), all of which share a constructivist or social constructionist epistemology. Like these kindred models, meaning reconstruction encourages the client to "follow the affect trail" to identify the client's implicit *need* and *readiness* to address it in each conversational turn of therapy.

Therapeutic conversation itself is understood as a nuanced engagement with meaning only partially conveyed in explicit language, and at least equally resident in the language of gesture, expression and embodiment on the part of both participants. Less evident in a typescript than in video recording, even spoken language is taken as a multidimensional resource, conveying meaning in the prosodic rhythms and emphases of speech and in poetic and metaphoric exchanges as much as in denotative descriptions or directions (Mair, 2014; Neimeyer, 2009). Like two jazz musicians or improvisational actors, therapist and client each respond to the “offer” of the other in a way that moves therapy artfully in directions that neither could have predicted.

Finally, although our focus on a session of individual therapy risks suggesting that we view therapy, and indeed grieving itself, as a highly individualized, psychological process, in fact we strongly believe that *all grief therapy is family therapy in absentia* (Hooghe & Neimeyer, 2012). This proposition holds at at least two levels. Most obviously, just as a continuing bonds perspective implies, grief therapy is inherently about the *relationship* between the living and the dead, so that therapy sessions like the one with Inge conjure and utilize the presence of the deceased as a key component in treatment. But equally important, work done in even the most private of therapies carries active implications for the client’s field of significant others, changing conversations, realigning relationships, and inviting integration of the event story of the loss or the back story of the bond with the deceased into the family’s shared narrative. In Inge’s case this was deliberately orchestrated in collaboration with her and her husband, Erik, who viewed the session in another room, thereby offering the couple both a desired buffer and bridge at the same moment. The subsequent processing of the experience in couples therapy and in their family life completed the circle, and stimulated the ongoing performance of change initiated in the individual consultation.

Therapists fostering reconstruction of meaning with a given client therefore require attunement to relevant family, social and cultural discourses that both support and constrain these efforts, and that are subtly or substantially altered by them in turn.

In summary, grief therapy informed by a conceptualization of the continuing bond consists of far more than bereavement support for troubling feelings in the wake of loss—although it is that, too. More fundamentally, such therapy seeks to surmount complications entailed in pervasive and prolonged grieving by helping mourners (a) process the sometimes tragic story of the death, while also (b) accessing the back story of their relationship to the deceased, resolving issues in it, and often restoring a measure of attachment security that was shattered by loss. We hope the illustration of this process in the re-engagement of Inge with her mother helps de-mystify this dimension of grief therapy for those colleagues who join us in this work, whatever their theoretical orientation.

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