# **Growing Through Grief: Mourning Parental Loss During Adolescence**

by

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#### Introduction

The common idiom states that the only things of which we can be confident are death and taxes. I would add that experiencing grief, and mourning the loss of a loved one is just as promised, assuming one lives an even remotely typical life. Therefore, it is natural that much has been written on the subject of grief and the processes surrounding mourning. However, the vast majority of such writings have been oriented around mourning as an adult or as a child prior to full psychic development. Through the following paper, I hope to redistribute a bit of that attention to the specific type of grief that is undergone by adolescents when they lose one parent.

This is a personally resonant topic, for when I was 16 my father, both an exceptional person and an incredible parent, passed away. I quickly found the approaches to processing this grief offered by professionals to be lacking and usually impersonal. Larger group work was lackluster; required meetings with school professionals were intrusive and clerical; and the experience, obviously miserable on its own accord, was only made more isolating. This is not to universalize my experience, but rather to emphasize a lack of varying approaches to these scenarios or consistency in what might be considered beneficial. To some, these tactics may prove far more successful, however, the lack of consistency in their effectiveness draws several questions. Firstly, what exactly is going on for adolescents during this experience? How would a clearer understanding of these processes inform approaches to supporting these individuals? Can the current approaches be improved upon and made more universal? Finally, what is the best framework for looking at this situation?

I intend to unify psychoanalytic and psychosocial theories. The former can offer a more individual-focused understanding of psychic development, while the latter can be utilized to depict broader categories of growth phases. It is essential to not only gain an in-depth clarity as

to what psychic processes are occurring *because* of the grief, but also what natural occurrences are being disrupted *by* loss. The proper approach to support must take into account both of these aspects. Through the adoption of multiple perspectives, they can both be explored in greater depth. These frameworks will be supplemented with empirical studies focused on outcomes for teenagers who lose a parent; this addition will offer a way to track the tangible repercussions of not addressing grief as it occurs, providing an even stronger sense of urgency to this pursuit of finding better coping systems. Hopefully, through this multi-faceted approach, I can begin to answer the questions raised. Ultimately, this paper seeks to draw conclusions as to what constitutes effective measures that will properly support these young people during such a transitional and angst-ridden stage of life.

## **Preconditions of Healthy Mourning**

In pursuit of determining in what ways the mourning process for adolescents coping with parental loss is atypical, first the preconditions of healthy mourning must be defined and delineated. Through this undertaking, the detriments to these young people's current grief and consequentially their approaches to coping with later deaths can be more clearly seen. Martha Wolfenstein (1966) argues that proper mourning necessitates having fully gone through the process of being an adolescent. This "initiation into how to mourn" (Miller, 1971, p. 707) acts as a slow decathexis that equips the later adult with the skills needed to understand how to accept more permanent losses and even life developments in a healthier capacity. In short, learning how to accept a changing dynamic with parents – primary love objects – and realizing that such changes did not lead to devastation of self or of life allows the individual the chance to be more prepared to face future changes and other losses. The first major change sets the tone for

subsequent changes of any scale. This process is referred to as Trial Mourning. Simply put, it is the slow separation from parents, a gradual alteration in how they are perceived and how they are experienced, that replicates some of the aspects of mourning. Much like mourning, the adolescent is not going to be as fully integrated with the other person as they were in the past. Both are irreversible and catalyze other life changes. Trial Mourning allows for successful mourning, however it is not just a trial for future deaths, but for future changes that will not involve such finality, as the decathexis from parents is meant to be.

While there remains no consensus on whether children are capable of understanding death and responsively mourning, some theorize that they can undertake some comprehension of loss of unimportant objects (Mahon & Simpson, 1977), but not ones that are more critical to their lives. Some contend that children cannot mourn (Spitz, 1998; Wolfenstein, 1966), as they can only experience the loss as a non-specific trauma. While children are not the subject of this paper, adolescent mourning exists in the cross-section between such childhood mourning and full adult mourning. Therefore, many of the preconditions that allow the shift from this fragmented childhood understanding of grief to full grieving in adulthood are meant to take place in the time when the parental loss would occur.

Also noteworthy in looking at the successful completion of the preconditions of mourning is Anna Freud's (1958) description of the time of adolescence as being in a constant state of mourning. Particularly, this involves a "lower threshold for frustration…new weaknesses and immaturities of the ego structure" (Mishne, 2001, p. 64). This depiction of adolescence as being so fraught with internal angst works well in conjunction with the concept of Trial Mourning.

During Trial Mourning, not only are young people understanding how they make meaning out of changes, they are experiencing feelings associated with grief in a safer space – there is no threat

to anyone's life. There is no death. However, those feelings, unique to adolescents as opposed to adults or children, would be drastically heightened should the trigger for them be a real loss and not simply standard development. Essentially, the grief is compounded.

#### **Constitution of Healthy Mourning**

To Freud (1917), the goal of mourning is to remove the investment of energy from the loved one – to decathect in order to have the energy available for investment in new objects. To Elisabeth Kübler-Ross (1969) mourning involves reaching a state of acceptance. To John Bowlby (1980) mourning is the process of going through emotions and emerging to reorganize one's own life. However, the common crux of the constitution of healthy mourning is simply finding a way to live with loss and live with balance. The deceased loved one should not be forgotten nor ignored, nor should they become the cornerstone of the surviving person's existence. Likewise, the death cannot be denied nor allowed to corrode the surviving person's active life. For the purposes of this paper, George Hagman's understanding of healthy mourning will be invoked, as it speaks not only to how to remove the energy invested in the lost other, but how to reintegrate it, celebrate their life, while still maintaining the surviving person's individual liveliness.

According to Hagman (1995, p. 17), the process of mourning involves five primary "demands" that must be met in order to process the loss well. Firstly, the mourner must comprehend the loss. This stage is often referred to as a form of reality-testing, in which the mourner works to recognize finality. This is a key element that draws young people, specifically younger children's, ability to mourn into question. The second demand of mourning is to express the emotionality of the situation – the more difficult it is for an individual to articulate their emotional state, the more of a struggle this becomes. The third stage is dealing with the tangible

social and external circumstances — is a person's financial situation impacted? What concrete changes occur with the loss? This is an improperly unrecognized factor in how one can cope with loss and what external resources they have or are lacking to cope with their internal concerns. The fourth stage is presented in direct contrast with Freud's (1917) goal of decathexis. Hagman asserts the need to not remove the libidinal energy, but rather to alter the way in which it is experienced. This is a "long-term process" (p. 18) that can continue beyond other stages of mourning and possibly with the aid of restorative retelling acting as a way to utilize language to transition the understanding of the relationship with the deceased(Neimeyer, 2016; Rynearson & Salloum, 2011).

The final demand of mourning is the mourner contextualizing herself based on her relationship to the deceased and understanding that positionality within her greater social network. This is an exceptionally poignant demand for teenagers and young people for whom their social ties beyond their immediate family are beginning to take prominence. For some young people who lost parents during their school years, social networks provided little support, rather bullying and branding from other young people occurred (LaFreniere & Cain, 2015). These types of extenuating circumstances add a nuanced complexity to the demands Hagman describes. However, they also succeed in emphasizing why it is so necessary to have a fuller understanding of what these adolescents go through, specifically, rather than generalizing their experiences with that of adults or young children. There are different, if not simply more, components that need to be taken into account in order to protect adolescents against falling into incomplete or unhealthy mourning.

Channing Lipson (1963) states that the inability to reach an end of the process of mourning is one detrimental form of unhealthy mourning, although it is not wholly uncommon.

Melanie Klein (1940; Miller 1971) saw the potential to idealize the deceased or to not be able to recognize the loss as some of the primary signs of unhealthy mourning. This idealization is misaligned with the goal of recognizing the parent as a full other, as such recognition necessitates seeing the parent as an individual who is not perfect. Idealization can lead to stagnation in regards to individuation, a natural adolescent process to be explored in detail later. Individuation requires finally seeing the parent as a flawed person, thereby catalyzing the desire for the adolescent to split off from them. If the parent is still perfect, especially in death, there is less sense in the young person individuating themselves from that image. Why consider leaving something that is so completely ideal? Denial can also take the form of over-identifying with the lost person as a method of keeping that person alive within oneself (Birtchnell, 1969; Miller, 1971). This can be an exceptionally concerning form of improper mourning if the living person feels that they are solely responsible for continuing on the life of the lost person. In extreme cases, they may even take on traits of the deceased's illness if that was the cause of death or other externally manifesting characteristics that very tangibly negatively impact quality of life (Bowlby, 1980).

The idealization of a deceased parent, as opposed to any other loved person who has passed, also has very real and different ramifications when it occurs during adolescence. The death of an individual parent tends to mean that there is now one parent who has to fulfill the roles of both parents. If the adolescent is now idealizing the deceased parent without regard to the impact on the surviving parent, this can easily cause strain and tension on that relationship as any negative feelings towards parental authority (as teenagers are notorious for experiencing) must be concentrated at the surviving parent (Mahon & Simpson, 1977). This splitting of Good Parent and Bad Parent is especially egregious in a time when the surviving parent would also be

experiencing grief and, ideally, be able to model some level of appropriate responses to death (Finklestein, 1988).

# Role of the Parent in Development and Individuation

The period of Separation-Individuation was originally proposed by Peter Blos (1967) as a phase in which young people must reject idealization of their parents. At the same time, they must decentralize their parents in their lives and create an identity for themselves – a concurrently daunting and invigorating task. The primary goal is to develop a balanced state in which the young person can stand apart from their parents, while concurrently maintaining a connection with them in a different, and perhaps less needy way (Levesque, 2011).

Through this process, they become defined by their own self, rather than as dependent extensions of their parents. In parallel to these developing dynamics, the young person tends to become separated from their parents in more strictly tangible forms - less reliant on them financially, maintaining greater physical distance, and spending less time together (Meeus, Iedema, Maassen, & Engles, 2005). The focus shifts from parents as a cornerstone of both life and identity to their being a single component of a greater social network and a piece of a mosaic of other more personal characteristics.

This concept is further explored by Erik Erikson (1968), a friend and collaborator to Blos, who developed a psychosocial theory which focused on outlining life stages, each involving two competing ideals and one value to acquire. Erikson maintained that during adolescence, the fifth stage--teenagers work to define their self and determine their identities. He elaborated that this time is particularly fraught with anxiety, as young people work to find some cause or ideology to which they can be loyal and express fidelity (Erikson, 1962). This is easily seen as a complement

to Blos; however, Erikson appears to de-emphasize the parental role and instead focus on what the individual must go through - not the external factors surrounding the process.

Corinne Masur (2007) takes the middle path between Erikson and Blos, explaining how it is through the gradual identification with the parents' specific abilities and traits, as opposed to their whole selves, that allows the young person this level of determination. By this process, the adolescent is able to hold on to the aspects of their parents that still provide support, internalize them, and individuate themselves without fear that these aspects will be lost. By having the parent as a present force during this time, the healthily developing adolescent does not experience a need to over-identify with all aspects of the parent as a form of preserving them as a whole. In order to individuate and separate from the parent, there needs to be a solid force from which to split – a tangible person to whom the adolescent can point and articulate 'this is them and I am me'. When that parent is not present or alive for this to occur, the individuation is concurrently too sudden and not fully completed. The former occurs as instead of a gradual deemphasis on the parental role, there is a total and sudden removal of the parent and the role they fulfill from the primary focus of the adolescent's life. The latter occurs as the adolescent is left without a person to whom they may draw contrasts in order to define themselves. They lose the natural progression and self-determined aspects of a usual individuation and separation process and, instead, must contend with a premature total separation and an exacerbation of identity confusion.

Rather than being able to take part in a slow internalization of aspects of the parent, the young person may try and protect the integrity of the whole of the deceased. In this way, they may internalize the entirety of the parent and identify with that instead of with their own self.

This would prevent them from delineating the functions of the parent. As they now must

redistribute those functions or fulfill them independently, this proves a great struggle. Without recognizing the specific roles the parent played, the adolescent cannot recognize what has been lost, cannot work to remedy the reaction to said loss, and cannot fully comprehend how to later develop a relationship with the deceased that allows for the continuation of a full life. At the same time, if the adolescent is centering this 'whole' of another rather than their own emotions or perceptions of self, they will have trouble identifying which feelings and perspectives are meant to be directed towards the deceased and what is directed towards the fragile self (Freud, 1917). Given the intensity and complexity of reactions to loss, the misattributed feelings would far succeed the standard level of adolescent angst towards oneself. This is along with the heightened level of ambivalence towards a parent who cannot remain in a parental role.

## **Complications in Adolescent Development and Short Term Impacts**

If a parent passes away during adolescence, the goals of this stage in life become difficult, if not nearly impossible to achieve in an ordinary timeline. As discussed above, properly separating from the parents becomes difficult, as is defining a unique identity in contrast. This type of inconsistent sense of self could lead to the increased sense of alienation from peers that some adolescents in this situation have experienced (LaFreniere & Cain, 2015). The ramifications of such tensions being added to peer relationships further complicates the ability to identify with peers and other individuals in a similar cohort, as they cannot relate to the experience or accompanying emotionality. Given the importance of such relations in this period, the adolescent is left with abnormal priorities or with an inclination towards identification with different sources that may be less suitable to development.

The lack of Trial Mourning and successful completion of it may prevent the creation of intimate intra-family relationships, as the adult cannot cope with changing dynamics as easily as one could after a successful Trial Mourning (Wolfenstein, 1966). Some suggest that Trial Mourning can be completed with a loved object that is considered less important than a person (a loved pet, for example) (Mahon & Simpson, 1977), but this is offered as an alternative or supplementary Trial Mourning before a literal death – not as a form of recoupment after the death of a parent makes the usual completion of Trial Mourning impossible. The consistent presence of parents during the Trial Mourning period is never meant to be replaced, only to be aided. It is therefore necessary to work to address how these complications in development affect the individual adolescent and how they can be brought through the process of individuation without the lost parent as the primary figure. In order to prevent adolescents from feeling developmentally stunted, it is key that they are able to undergo this process while concurrently grieving, rather than viewing grieving as a finite process that can be fully and properly completed before combatting additional ramifications.

Of course, the adolescent has already begun the separation aspect of individuation from their parent prior to the death. However, in order to stop such a loss from resonating as "uncommonly permanent" (Masur 2007) in such a manner that creates a failure to mourn, the adolescent needs to still be able to feel connected to the deceased parent, still be allowed to recognize the loss and emotions surrounding it, while not allowing it to subsume the entirety of her life. In short, the loss needs to not feel quite so permanent because even though it is final, there is still a connectivity to the functions that that loved person provided. A conscious recognition of the functions that parents played while concurrently recognizing the reality of their loss may allow for an unnaturally intentional progression from dependent to individuated. The mechanical

application of such a goal will be further explored later on, but it is essential to recognize briefly in this context how the complications in adolescent grief further impact the particulars of their developmental goals.

Another, less discussed, complicating element of such grief is the level of reliance that a young person has with their parents. There is a nuanced difference between the loss of a person whom you love and desperately want to be alive, and a person whom you love, but also physically need. This is by no means meant to diminish the impact of any other type of loss, but rather to emphasize the practical manner of these types of deaths. Not only must you re-invent the self psychically, but you must work to re-invent the self in psychical life structures – how you pay for things, what you do, where you live, etc. In the majority of cases, the adolescent would not be able to have a great deal of impact in how these structures are altered. Rather, she would be affected by the physical changes to her life with little ability to act. The positive element of this is that she has less personal responsibility to react to changes. The less optimal aspect is having no personal power, no ability to respond constructively. She is not as helpless as a child, not as useful as an adult. Not as unaware as a child, not as able to articulate her feelings or stances as an adult. Frustrating in a normal circumstance, this state is highly detrimental in this context. Naturally, there is a varying level of dependence in each family; however, it is highly likely that this complication would affect almost all adolescents. This particular aspect speaks to the importance of community support and community- maintained holding spaces for grief and recognition of loss (Slochower, 1993). Such situations necessitate external support in order to find physical and practical ways to redistribute, so to speak, the needs of the adolescent to living resources.

## **Long Term Effects**

The adolescent period of life is indisputably an important time for an individual's development, both in terms of internality and external social structures. If a successful transition from childhood to adulthood is achieved then, ideally, the individual will have a stronger sense of identity and affixation of fidelity based on her values. The process of individuating from her two surviving parents will also allow her to understand how to cope with changing dynamics, as she practiced during that time. She will not experience such changes as final, as she had such a poignant example of change not being an end. Additionally, she will be able to later deal with final and total loss without letting it wreak havoc on her self. Given the great scale of what is occurring during this stage, the implications of a less ideal development due to deep loss can be seen as potentially being quite drastic later in life.

On the interpersonal scale, difficulty with later close and intimate relationships is a primary concern for adolescents who lose a parent. Høeg et al. (2018) found that the median length of a relationship is 2 years shorter for men and women who had suffered parental loss than those who had not, relationships being 4 and 6 years respectively. Separation rates were also 13% higher for men who had lost a parent and 9% higher for women who had lost a parent. While discouraging statistics at face value, they can be understood through acknowledgement of the blows suffered by the psyche during adolescence.

The loss of a love object meant to be reliable and stable could be the catalyst for an irregular level of trust in the fact that close or intimate relationships will prove permanent. In simplest terms, it may be more difficult to develop deep relationships or marriage if there is an expectation that a reliable person or a person on whom one is meant to depend (a parent or a spouse) will be unable to stay in one's life. Whether that would lead to attempting to prevent

another person from filling a primary role, and therefore refusing a close relationship, or lead to mistrust within an already close relationship could be up to individual nuance. One study (Hepworth, Ryder & Dreyer, 1984) additionally found that adolescents who had recently lost a parent were more likely to either enter a fully committed relationship or not date at all rather than pursue casual relationships. Placing these two studies in conversations seems to support the notion that rather than finding the balance that a healthy grieving process is meant to support where one can remember the lost one and also live a full life, unhealthy mourning may lead to either rejecting the notion of another close relationship or pursuing one with uncommon fervor, perhaps in an attempt to reclaim that lost investment.

These types of long term effects can also be seen as the result of the Trial Mourning being final, rather than an example of changing dynamics as it is meant to be. This may lead to difficulties accepting smaller changes in dynamics later in life, both positive and negative. All alterations are seen as final, rather than natural progressions. If they are final then they will lead to a total devastating loss or, in the context of relationship, a rejection. A resistance to these types of changes would naturally make the maintaining of such close relationships more difficult, as developments are both necessary and common. This, too, may explain why relationships appear statistically rushed – skipping to a more committed stage means there is less development to arrive there – or avoided, altogether.

On the individual scale, there are conflicting studies as to what the effects may be. Some studies have shown much higher rates of alcoholism, higher rates of depression, higher rates of schizophrenia, and higher rates of manic depression in adults who lost a parent when they were young (Finklestein, 1988). One explanation of these heightened levels of neuroses and displeasure is that such people are more vulnerable to greater periods of depression. They would

be especially sensitive to loss as a trigger for any grief that was not properly resolved when they were young (Osterweis, Solomon & Green, 1984). This very strongly articulates the importance of dealing with grief around the time when it is first catalyzed by loss. The effects of waiting to cope until the next loss or great life event may only confound the effects or cause greater upheaval to an adult life where the individual feels they cannot form connections as easily as others. In this way, coping with grief as an adolescent is key in meeting half of Freud's maxim as to what one should be able to do: love and work. (Erikson, 1950).

#### **Comparisons Between Loss in Childhood and Adolescence**

While it remains true that the bulk of literature surrounding the grieving process for non-adults is focused specifically on children, it is essential to differentiate specifically between children and adolescents in the context of the mourning process. The following section is, of course, to be understood to contain varying truth values based on the particularities of each family and their individual dynamics. However, it is important to generalize.

The first key difference between the child and adolescent experience is their positionality within their family and social sphere. It is more likely that a child would still be treated as a child, as they are much more clearly dependent on the adults around them and experience less stigma for showing that grief than an older young person might. The child is typically only seen as the receiver of care and therefore would have fewer, if any, expectations for facilitating the coping process of anyone other than themselves. The child has specifically lost a caretaker equally tragic, but clearly different from the adolescent who has lost not only a caretaker but a person who they have begun to see as an individual.

Additionally, the adolescent tends to have increasing responsibilities within the family unit. There may be equal expectation that they give and receive care. Further still, unlike a child

who is less aware of the interiority of other individuals, the adolescent is more inclined to be aware of the suffering outside of their own. This could potentially lead to a dual traumatizing. The adolescent has to experience their own grief and the heightened grief of those close to them who were also, typically, close to the deceased.

Beyond their less progressed stages in development, a key characteristic that specifically unites both children and adolescents is their focus on receiving help with coping from people outside of their household. The majority of both children and teenagers expressed receiving empathetic support from their peers following a death (LaFreniere & Cain, 2015). Both children and teenagers also shared a desire to seem normal to their peers and would potentially avoid peer interaction in pursuit of this - emphasizing the importance of external recognition, even at the cost of potential outlets of support. Another example of seeking such support involves a group of young children attempting to cope with the death of a class pet. That process was said to only be possible through the care and attention of a teacher acting as an "auxiliary ego" (Mahon & Simpson, 1977, pp. 288). Much like the teacher acting to guide this process, adolescents can be seen to adjust their personal affect to coincide with the group in which they are found (Federici-Nebbiosi, 2003). In both cases, an exterior person, or group, was able to act in a way that altered or aided in the emotionality of the individual. This may suggest that the peer group could act for the adolescent as the teacher did for the young children. Peer groups could form an auxiliary space in which the adolescents could process grief without feeling isolated from the social contexts to which they naturally gravitate.

#### **Techniques for Coping**

As has been described within this paper, the main detriments that need to be recognized in therapeutic process with adolescents coping with parental loss are the lack of facilitation of separation/individuation, inability to undergo proper Trial Mourning that may prove disruptive to later relationships, disjointed or unhealthy mourning, and alienation from peers. Gaining an empathic understanding for the processes that are being disrupted as well as their impact on the day to day life of the adolescent is the first step in curbing some of the long lasting negative impacts. However, directed attention is necessary to address each of the main detriments, as well. When speaking to the lack of opportunity to individuate from the parents after a slow separation, the role of the surviving parent is key. The living parent can act to maintain their role as someone who was idealized in order to aid in the separation process. However, the process of recognizing that parent as an individual, not only a caretaker, may be harried by seeing them undergo such extreme stress and emotional pain. It is important the surviving parent does not turn away from the grieving child at this time as they now have the unique ability to act in this role (Fallon, 2007).

Alternatively, it could be highly beneficial to have individuals (such as family friends, other relatives, even a sibling) that were present in childhood still be actively present throughout this transitional period. This serves to fulfill the function of becoming comfortable with changing dynamics with people who have been present through multiple life phases. This is certainly different from the nuances of the parent fulfilling this role as it does not start from the same level of dependence, and therefore does not cover the same extent of development, nor is there the same natural identification with this individual as with a parent. Nonetheless, emphasizing these relationships can still act to exemplify relationship evolution, thereby rebuilding some of the trust in the permanence of relationships.

The additional three detriments listed are all explicitly linked to the death itself, and the resulting realities one has to negotiate. In coping with the grief specifically, adolescents must be allowed to exist both in a loss state and restoration-oriented manner, as described by the Dual Process Model (Neimeyer, 2016), as well as be allowed to move fluidly between the two. This is possible with the existence of a holding space – a "safe relational 'container'" (Neimeyer, 2016, p. xxvii; Salloum & Rynearson, 2003) in which the individual can explore their feelings towards the death, as well as allow for them to be present in their real, personal lives. The most natural course of action, here, is to contextualize in this framework the location in which the majority of adolescents spend most of the time, experience most of their upheaval, and interact with most of their social network: the school.

Rather than grief therapy circles, the school is a general holding space that is content neutral – not specifically oriented around grief or any particular trauma. This removes the very common fear of being labeled or othered by peers (LaFreniere & Cain, 2015). In addition, given the stormy nature of adolescent emotionality (Freud, 1958), it seems almost illogical to suggest that adolescents should internally hold their grief and focus its expression into a particular time and with a particular group, rather than saying they can utilize their schooling experience. Further still, many grieving young people have shown a concern of distressing their peers with expressions of negative emotionality and will isolate themselves as a result, referred to as empathetic avoidance (LaFreniere & Caine, 2015). In order to avoid this course of action, it is pertinent to develop a larger space that is not specifically oriented towards grief, but rather provides openness for expression of any emotion by any young person, whether that be caused by death or simply by existing in a transitory phase. The school needs to recognize its role in helping young people navigate their tumultuous emotionality and design infrastructure to support

this. This is further made important by how chaotic the emotions surrounding grief can be – you do not want to place an expectation that grief will manifest in tears and fragility any more than you want to require a mourner to return to an outdated normalcy immediately. Emotions must be allowed to exist as they are.

Given the general emotionality that is surrounding almost all adolescents at this time, it seems practical to frame the High School or schooling that occurs during this stage much in the same way group therapy sessions for young people are presented. This is not to say that a structured gathering of young people undergoing a specified trauma is needed within school. On the contrary, the natural groupings that form at this age provide a similar function as group therapy, but without the requirement that the adolescents contain their sharing of emotions to that time nor with people that they may not otherwise associate. This negates a large setback that comes along with adolescent group grief therapy – adolescents often adapt to the group affect in response to the shared trauma, rather than being able to come to their own (Federici- Nebbiosi, 2003).

Such grief-oriented intentionally structured groups single out the grieving adolescent. Likewise, they will be made to redefine their self without their normal social structure, directly contrasting with Hagman's (1995) fifth goal of grieving – recontextualizing oneself in their social units. They offer a space for grief, but not a way to re-position oneself or integrate that process with life, placing it at odds with the ultimate goals of mourning. In looking at these naturally occurring social circles, it seems the most natural way to aid in a healthy grieving process is to allow for these extended groups to play the part of 'auxiliary ego' (Mahon & Simpson, 1977) and to provide the core of the support. Focusing support systems on strengthening already existing social ties rather than alienating the mourning additionally aligns

with Hagman's second and third goal for mourning – expressing emotions and dealing with tangible ramifications in the life of the mourner. Furthermore, the process of reintegration is made far more simple. Adolescents tend to be fully scheduled in schools, creating routine interaction that one can re-enter with more ease than during other life stages.

In order to heal, adolescents must be allowed to be adolescents. There is no real 'return to normalcy' after a loss at this time. This is partially true because normalcy has been lost with the death of the parent. However, normalcy is not typically stagnant in such a transitional period and such an event only causes more changes. Therefore, adolescents must be allowed to create new normalcy in social groups that, ordinarily, would be their new center of self. Of course, utilizing peer groups as a primary form of support does necessitate having peers capable of providing that emotional support. It is important to clarify, though, that the support upon which such aid relies is not deeply strategic or complex. Many adolescents report simply wanting peers to be there and to see validate the reality that they have gone through something, "in this manner, they communicate, in one way or another, the paramount support message: 'I care'" (LaFreniere & Caine, 2015, pg. 114). Recognition that they do not understand a real loss or the real ramifications of it to the person is important as it further solidifies the notion of that individual as an individual with a subjective *experience that is different*, but does not render their *whole self different* from their peers.

The fourth goal presented by Hagman is, by far, the most difficult to address; that is, how does one alter the relationship with the deceased, but not fully withdraw the libidinal investment (Hagman, 1995; Freud, 1917)? As mentioned, one must guard against idealization and over-identification. However, it is incredibly important to remember and discuss the deceased parent. On one level, this allows the individual to remember them and to recognize themselves in that

parent, the way one might get to recognize themselves in a surviving parent and see who they do or do not want to be. On another level, it validates the emotionality – grief does not fully go away, it just changes. The process of mourning, true mourning, is learning how to accept that change without resistance or rejection. Grief must be felt. It must be experienced, but it does not need to command nor define a life. Integrating a recognition of death and all it brings into life is an unending pursuit, but one that allows life to be lived more fully.

One strategy in support of this integration is the utilization of language for the purpose of giving structure to the abstract feelings of grief. Writing out feelings, or symbolization, can allow for the adolescent to better understand themselves, as they are forced to figure out how to articulate that which they do know about themselves into a more tangible form. In the pursuit of creating something understandable, they may uncover connections between their emotions that they would not have otherwise (Hagman, 1996). This also requires bringing their emotions to the external world, rather than keeping them internalized and possibly isolated from their reality. Through the process of bringing them to life, to making them logical and real, the adolescent has to contextualize them within the new reality, thereby integrating their grief with the situation in which they must cope and progress. To the same end, discussions with a supportive peer, adult, or therapist could fulfill this function, provided the griever is allowed to freely associate at will.

This can be similarly adapted as a way to revive and reestablish the relationship with the deceased parent. Writing out memories with the parent, descriptions of the relationship, or any other form of memorializing the dynamic allows for the adolescent to register that experience as separate from the lost parent (Hagman, 1995b). This encourages the internalization of either a distilled component of that parent's function or a characteristic of the parent without making the adolescent feel as though the component or characteristic is at risk of being lost as the parent

was. This prevents the instinct to internalize the entirety of the parent without consideration or take other defensive measures against continuous loss. Through the act of recording and memorializing, the adolescent is promising a level of longevity that cannot be severed. There is a level of expectation for young people that their parents will remain present through their adolescent phase. While in this instance, that expectation was shattered, this process allows the individual to regain some semblance of control over creating something with a longer presence in the world. It acts as a concrete way to provide the adolescent with something stable and separate from the fragility of life; a promise of a substantial parental presence, as interpreted by the adolescent grieving.

Encouraging the continuation of this recognition helps with not only the particulars of the loss, but in the general acceptance of the nature of loss, itself. By keeping the ability to discuss the deceased parent alive, the adolescent is allowed to continue to have feelings on the subject. As shown, like many other life events, these types of losses can impact later years and it is vital to allow the adolescent to continue to have fluid and changing views on the loss later in life. Continuous awareness and understanding of the ramifications of loss may provide later clarity on approaches to relationships, as well.

Finally, while keeping close guard against denial of a loss, remembering the lost parent is a way to recognize loss, while not requiring the adolescent to commit to the idea of finality. That is to say, preserving some type of different, personal connection with the deceased parent allows the adolescent to reject the concept that their emotionality with this person, their experiences, and, their care for this individual must stay within the finite confines of the time they had with them. The *loss* is of a continuing life with the deceased, they are not fully *lost* as a person as their impact remains in existence. By allowing the memory to continue, the natural fluidity of their

perceptions is encouraged and supported. In this way, the restoration of a self that maintains the loss as a fixed point without taking away from experiences prior with the parent or life after without the parent living is catalyzed.

A different way to conceptualize this goal is the reintegration of the functions of the lost parent into the self, such that the relationship is no longer fragile or reliant on the physicality of the parent. This is not the life of the parent being subsumed by the child fully; it is the adolescent recognizing how they can grow to meet their own needs and what those needs are. This is similar in many ways to the typical process of growing up, although the timing is ill-conceived, and the needs may have been altered by the presence of such impactful trauma. By coming to recognize the importance of the parent through being cognizant of the loss, through being allowed to express reactionary emotions and responses to the repercussions of not having that person around, and by attempting to put the emotionality into words the adolescent can better articulate to themselves or to others what it is that they need to accomplish in order to feel whole as an independent person. Through recognizing what was once external, the adolescent can bring some aspects of that relationship into their own subjective and thereby protect it from unexpected, untimely, or otherwise unwanted endings. This reestablishes in the grieving adolescent a sense of centeredness and power that may have been lost or fragmented after having such important parts of a young identity and stability lost. By way of this new structuring, the young person continues to have a relationship with the deceased parent, albeit one that is more greatly shaped by their own independent pursuits of fulfilment for the role lost.

#### **Personal Reflections**

As mentioned at the start of this paper, this is a topic with great personal weight and value. In undergoing this research and in processing the many perspectives I found, I naturally interpreted

it with my own experience of such loss in mind. While a few years have passed since that event and I would no longer consider myself clearly defined as an adolescent, my memories of how I felt during that stage have not faded and neither has my desire to remember it. In that way, this paper acted as a time for personal reflection as to how to make sense out of what I and loved ones were going through as well as indulge my continual insistence that there must be superior alternatives to the approaches I experienced. I feel as though the crux of this paper holds true for my circumstances. The best memories I have of that time are when I was able to recognize the death and talk about my dad with my friends, with relatives, with anyone who would let me describe him in overly excited detail. I was able to remain in my peer group and act as a fractured version of myself around people who could recognize the difference but still allowed me to display it, as they could not understand the grief, but could understand that I was changed. The combination of recognizing the loss and what was missing, while having the reminder that I was still physically present in my new form of life made all the difference. This paper almost provides the same function of recognizing the loss of my dad, but contextualizing it in what I am doing in my life, now. My life is not separate from the loss of my dad nor from my dad's wonderful life, but rather an integration of all of it. Memory is living. However, you cannot get lost in simply memorializing the dead or the past, rather it must be used to create life.

#### References

- Birtchnell, J. (1969). The possible consequences of early parent death. *British Journal of Medical Psychology*, 42(1), 1-12
- Blos, P. (1967). The second individuation process of adolescence. *The Psychoanalytic Study of the Child*, 22(1), 162-186
- Bowlby, J. (1980). Loss, sadness and depression. New York, NY: The Travistock Institute of Human Relations
- Erikson, E. (1950). Childhood and society. New York, NY: W. W. Noroton & Company
- Erikson, E. (1962). Youth: fidelity and diversity. Daedalus, 91(1), 5-27
- Erikson, E. (1968). Identity, youth and crisis. New York, NY: W. W. Noroton & Company
- Fallon, T. (2007). Interrupted mourning. In S. Akhtar (ed.), *Three faces of mourning* (pp. 185 199) Rowman & Littlefield Publishers, Inc.
- Federici-Nebbiosi, S. (2003). "With a little help from my friends": affect regulation and emergence of group experience in treatment of young adolescents. *Psychoanalytic Inquiry*, 23(5), 713-733
- Finkelstein, H. (1988). The long-term effects of early parent death: A review. *Journal of Clinical Psychology*, 44(1), 3-9
- Freud, A. (1958). Adolescence. Psychoanalytic Study of the Child, 13, 255-278
- Freud, S. (1917). Mourning and melancholia. The standard edition of the complete psychological works of Sigmund Freud, Volume XIV (1914-1916): On the history of the Psycho Analytic movement, papers on metapsychology and other works. Institute of Psycho Analysis
- Hagman, G. (1995). Mourning: a review and reconsideration. In G Hagman (ed.), New models of

- bereavement theory and treatment (pp. 1-23) Routledge
- Hagman, G. (1995). Self experience in mourning. In G Hagman (ed.), New models of bereavement theory and treatment (pp. 115-129) Routledge
- Hagman, G. (1996). The role of the other in mourning. In G Hagman (ed.), New models of bereavement theory and treatment (pp. 85 102) Routledge
- Hepworth, J., Ryder, R. G., & Dreyer, A. S. (1984). The effects of parental loss on the formation of intimate relationships. *Journal of Marital and Family Therapy*, 10(1), 73-82
- Høeg, B. L., Johansen, C., Christensen, J., Frederiksen, K., Dalton, S. O., Dyregrov, A., Bøge,
  P., Dencker, A., & Bidstrup, P. E. (2018). Early parental loss and intimate relationships in adulthood: A nationwide study. *Developmental Psychology*, 54(5), 963-974
- Klein, M. (1940). Mourning and its relation to manic-depressive states. *The International Journal of Psychoanalysis*, 21, 125-153
- Kübler-Ross, E. (1969). On death and dying. New York, NY: The Macmillan Company
- LaFreniere, L., & Cain, A. (2015). Peer interactions of parentally bereaved children and adolescents: a qualitative study. *OMEGA Journal of Death and Dying*, 72(2), 91–118.
- Levesque, R. J. R. (2011). Separation-individuation. In Levesque, R. J. R. (ed.) *Encyclopedia* of adolescence. Springer, New York, NY
- Lipson, C. (1936). Denial and mourning. *International Journal of Psycho-Analysis*, 44, 104-107
- Mahon, E., & Simpson, E. (1977). The painted guinea pig. *Psychoanalytic Study of the Child*, 32(1)
- Masur, C. (2007). Can women mourn their mothers? In S. Akhtar (ed.), *Three faces of mourning* (pp. 33-47) Rowman & Littlefield Publishers, Inc.
- Meeus, W., Iedema, J., Maassen, G., & Engels, R. (2005) Separation-individuation revisited: on

- the interplay of parent-adolescent relations, identity and emotional adjustment in adolescence. *J Adolesc*, 28(1), 89–106
- Miller, J. B. M. (1971). Reactions to the death of a parent: A review of the psychoanalytic literature. *Journal of the American Psychoanalytic Association*, 19(4), 697-719
- Mishne, J. M. (2001). Psychological trauma in adolescence: familial disillusionment and loss of personal identity. *American Journal of Psychoanalysis*, 61(1), 63-83
- Neimeyer, R. A. (2016). Meaning reconstruction in the wake of loss: Evolution of a research program. *Behavior Chance*, 33(2), 65-79
- Osterweis, M., Solomon, Fredric., & Green, M. (1984) Bereavement: reactions, consequences, and care. Washington, DC: National Academy Press
- Rynearson, E. K., & Salloum, A. (2011) Restorative retelling: Revisiting the narrative of violent death. In R. A. Neimeyer, D. Harris, H. Winokuer & G. Thornton (eds.), *Grief and bereavement in contemporary society: Bridging research and practice* (pp. 177-188).

  Routledge
- Salloum, A., & Rynearson, E. K. (2003) Family resilience after a violent death. In E. K.
- Rynearson (ed.), *Psychosocial stress series. Violent death: Resilience and intervention beyond*the crisis (pp. 47-63). Routledge/Taylor & Francis Group
- Slochower, J. (1993). Mourning and the holding function of shiva. *Contemporary Psychoanalysis*, 29(2), 352-367
- Spitz, E. H. (1998) Martha Wolfenstein: toward the severance of memory from hope.

  \*Psychoanalytic Review, 85(1), 105-115
- Wolfenstein, M. (1966). How is mourning possible? *Psychoanalytic Study of the Child*, 21(1), 93-123