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Special Issue on TA and Grief Work

Grief Rituals

By Elaine Childs-Gowell



Editor's Note

It seems a fitting conclusion to my tenure as Script *Editor to finish with a special issue on grief work, a subject much on the minds of many TA'ers at the last two conferences. We have many experts on this process in TA; some of them share their knowledge on the following pages.*

I have enjoyed being editor, and I am also enjoying passing on the job to Bill Krieger and welcoming him as the new editor. Yet with any letting go, there is a time to grieve the loss in order to let go thoroughly. It is only in saying our goodbyes completely that we open up space for the hellos we need.

- Pam Levin

As we move through life we experience many losses, some big, some small. The loss may be of a person, a job, a physical ability, or even a treasured fantasy. Each one requires that we grieve until we are completely clear of the archaic feelings and unfinished business we have in relation to the loss. Ultimately, this grief work requires that we forgive ourselves and anyone else connected with the loss. Healthy grieving is, in fact, a form of preventive medicine (Bozarth-Campbell, 1982), for without it, we inevitably suffer from psychosomatic symptoms as we try to deal subconsciously instead of openly with the stress associated with unexpressed grief (Simonton, 1980). It is also a pathway to higher consciousness, for dealing fully with our grief allows our spirit to shine through.

While most cultures have rituals to help individuals formally acknowledge their grief, we in the United States have historically denied or purposefully lost our ties to cultural rituals. This makes it all the more interesting to realize that much of the psychotherapeutic process our clients go through is analogous to the grief process, and that in the psychotherapy context we also need rituals to help us deal with grief.

In my work, I have developed a ritual which I call "Revenge Work." Euphemistically, the client and I sometimes refer to it as "taking out a contract" on someone. This gives the client's Child a sense of power, which is important since one of the major blocks to grieving is the need for revenge against the person for whom the client is grieving. Until the mourner has dealt with the outrage and wish to get even, he or she is unable to forgive the other person or himself or herself.

The grief process is based on attachment (Bowlby, 1969). Whether there was full attachment or failure of attachment, there is still a sense of loss and a reaction to that loss. The

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The Grief Process

A Personal Perspective



At the request of the Editor, Fanita English agreed to discuss how her ideas about the grieving process developed following the sudden death of her son, Brian, in October 1977. Brian died in a surfing accident in Hawaii one month after his thirty-first birthday and a month before he was to have been married.

Robin Fryer, *Script* Managing Editor - Fanita, during the years since Brian's death, what have been the most important realizations you've had about the grief process?

Fanita English - Well, first, that the process does not progress neatly through stages as I assumed it did before the tragedy. My early feelings were utter confusion alternating with lucid "competence" about matters unrelated to Brian's death. Then I berated myself for jumbling "pure" grief about Brian's death as a separate individual and my own narcissistic, selfish sorrow about *my* loss. Brian's death challenged my personal maternal pride ("look at the wonderful son I have presented to the world"), and it also cancelled my plans for my own future. These thoughts were entangled and generated more confusion. I kept reminding myself that it was Brian who died, not part of me; obviously much early symbiosis had been revived. I also found myself mourning the deaths of my father, my grandfather, and others (like Eric Berne and David Kupfer) almost as an "escape" from mourning Brian. (Or as penance for not having mourned them "properly" in the past? Memories returned of how, after my father's death when I was seventeen, relatives criticized me for "wrong" behavior, although I felt I was reacting the way my father would have wanted me to. Now this argument in my Parent was revived.)

When Brian died, I was in the process of moving to the San Francisco area near where he lived. He had helped me buy a condo there; as a lawyer he had negotiated a publishing contract for my half-finished book; we were playing with the idea of my baby-sitting the grandchildren that would follow his forthcoming marriage. Fantasy and reality were smiling before us. I was basking in the experience of new interdependence with my grown son.

In facing his sudden death, I kept going between feeling sorry for myself and the acute pain over what had happened to him, his life, his future, even his past. Regrets about lost opportunities for past connections kept surfacing: "Mother, come watch me at the next basketball game." "I don't have time, Brian." And then the self-reproaches got bigger. (Call it "internal dialogue with Parent," "racket program in Child," "reinforcement of old survival conclusions," or whatever.) Essentially, whatever I felt or thought at a given moment wasn't "right." Was I sad? Amused at a memory? Nostalgic? Regretful? Lonely? Empty? Confused? Headachy? Sleepy? Businesslike? Dreamy? That's wrong, Fanita. Then . . . what? Dunno. It's heavy, light, strange, funny, surprising, anyway: different. And who am I? Who is this woman who has lost her son? I don't know her. She doesn't resemble any of the images or constructs of my consciousness. Who is it that disappeared? A baby? A boy? A woman? An old man? No! A young man. Ah. What was he really like? You thought you knew him. No, you didn't, not at all. You didn't bother to find out when there was time. No way to find out now. Lost chance. The end.

There are situations where someone's death brings some relief, as in the death of an elderly sick parent or an abusive spouse. In such cases I imagine guilt feelings about the sense of relief combine with mourning. With Brian's death there was no relief; the loss was total, absolute. Yet even so, there were confusing emotions and memories to generate guilt.

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Grief Rituals (continued)

individual may deal with the loss in three ways: by ignoring (denying) the loss, by replaying the past in what we call "script scenes," or by resolving the loss and finding new meaning in the relationship to the object or person.

Many of us deny that we have unresolved grief issues, but I do not believe there is a person alive in Western culture who does not feel incomplete about some important experience or person. It is important to be complete with every negative or uncomfortable event, situation, or person we have encountered, no matter how far in our past. Otherwise the old grief will tear at you in some way, especially as your body gets old and is less resilient. Even more importantly, any effort you make to move to a higher spiritual plane will be encumbered by unfinished grief. These are, indeed, compelling reasons to get on with our grief work.

Nevertheless, there are still people who do not recognize that they, too, have unfinished feelings that require grief work. I find that their perceptions change after they do the following exercise:

The psychotherapeutic process . . . is analogous to the grief process.

Imagine sitting in front of a stage where everyone who has been important to you is on the left side. One by one, have them move stage right while you say "I forgive you, and I forgive myself" to that person. If the forgiveness comes from deep within and is congruent with your whole being, keep them on the right; otherwise have them remain on the left. Do this until you have examined your relationship with each person. If there is anyone remaining on the left, then you still have grief work to do.

Resolving a loss requires dedication and hard work. I suggest the following process:

1. Agree to do "grief work" for a limited amount of time daily for two to three weeks. Make it time-limited so it does not spill out into the rest of your life.
2. Sit in a quiet place and do one of these each time you work:
   a. **Write lists of mads/sads/scares/glads** about the loss: I am mad you went away, I am mad I am alone, I am mad I have no control over it, etc.
   b. **Write letters in your journal** in which you "let it all hang out." Write (don't send) the letter to the primary person in the grief experience in order to acknowledge your vengeful thoughts and your feelings of being "wronged." Another good way to deal with these feelings is to do a North American Indian ritual in which you go to a private place and dig a hole at the base of a tree. Pour all your feelings into that hole. When you are satisfied you have emptied your spirit of the foul stuff, cover the hole and thank the tree for listening and our Mother Earth for receiving your grief.
   c. **Create Affirmations.** The indications are that if the affirmation is congruent with a deep inner goal, it will be successful.
      (1) Write the affirmation fifty times or more.
      (2) On the right side of the page write all the negative internal discounts that pop into your mind.
      (3) Keep going until the "negative self talk" ends.
   d. **Create a new affirmation** from the discounts you have written.

	Affirmation	Discount
Example:	I am now an outstanding artist	Only Dad is
	I am now an outstanding artist	Mom wouldn't like it
	I am now an outstanding artist	How could I?

New Affirmation: My Mom and Dad now support me in being an outstanding artist.

Forgiveness. Write until you are clear and congruent:
I forgive_____for_____.
I forgive myself for _____ .

When you are doing the lists of feelings, the letters, and the affirmations, and you feel energy in your body like you want to cry, scream, shout, etc., do it in a safe place in a safe way. There are many ways to express the feelings, from

Ultimately, this grief work requires that we forgive ourselves and anyone else connected with the loss.

pounding a pillow to going for a long run to singing a song; find a way that feels right for you. You can do it in your own home, with a friend, or with a therapist. Most importantly, stop suffering about how you have been wronged. Suffering is one way people avoid working through their feelings and can become a racket; the difference is that when one expresses a real feeling there is a genuine feeling of relief involved (Erskine & Zalcman, 1979).

Grief work is very demanding and meticulous work, but it is the path to health and serenity. We must say what was left unsaid, and we must let ourselves hear what was not heard by those involved in the original experience. They do not have to be present for us to do the grieving and the forgiving. It is our privilege to become clear within our own inner selves and, in the process, to transform our own lives.

Elaine Childs-Gowell, PhD, is a Certified Clinical Member of ITAA who lives and works in Seattle, Washington, USA.

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Life and Death in Mexican Culture



By Emilio Said and Gloria Noriega

We received the request to write this article about death and dying practices in our culture just two days after the terrible September 19, 1986, earthquake which caused so much devastation and loss of life in Mexico. While the timing could not have been more ironic, we are actually glad to have the chance to share some of our experiences with *Script* readers.

The emotional impact of the quake and its aftermath has been intense. We are suffering together with many others in Mexico who have been less fortunate than we and who are still struggling to recover. In the midst of this catastrophe, most Mexicans have shared much intimacy between themselves as well as with foreigners from around the world who have come to offer valuable aid. In the most difficult moments we have helped and understood each other by showing signs of heroism, tenderness, support, collaboration, and, above all, solidarity.

We Mexicans know that this capacity for intimacy is our biggest strength as a nation. Nevertheless, in a metropolis as big as Mexico City, it is easy to forget this and to lose one's sense of humanity. Being in contact with tragedy, destruction, and death has helped us be more open to those who are strangers as well as to those we know, to be ourselves, and to recover the faith, fellowship, love, and nationalism many of us had lost. This has been like rediscovering the best parts in ourselves as well as in others. It allows us to carry on as a nation with more optimism and trust in our ability to solve problems effectively. Knowing this, we can affirm that whenever something is lost something is also won.

We Mexicans know that this capacity for intimacy is our biggest strength as a nation.

Mexico is a land of costumes and traditions. Among these is a special ceremony of worship to death which is held each November. Mexicans have had, until now, a special attitude toward death, living in the past in many ways and turning it into a cult. Even before the Spanish arrived, the Aztecs had among their deities Coatlicoe, the Goddess of Death. Many popular Mexican songs talk about the bitterness of unreciprocated love and the honor of a violent death. For example, one song says, in part: "Worthless is life, life is worthless; it begins always by crying and so by crying it ends. That is why in this world life is worthless."

The cultural script, as you can see, is nihilistic. The Mexican has a black sense of humor: Amid the worst tragedies, someone will produce jokes and make fun of the pain. This is widely seen throughout our history, which is full of betrayals that have prepared Mexicans to expect and accept the worst. Official heroes from Cuauhtemoc to Zapata have invariably been murdered, and the ideals manifested in laws and constitutions as well as confidence entrusted to the government have been betrayed endless times.

Famous Mexican painters such as Diego Rivera, Siqueiros, and Orozco, present death in different ways, both through tragic portrayals of national history and through praise and satire. Likewise, the famous painter Jose Guadalupe Posadas is known for engraving skulls of rich and poor people.

Death is also made fun of through popular art. Every year in November, while celebrating the Day of Death, Mexicans visit cemeteries to offer flowers, food, and beverages at the tombs of their ancestors. On this occasion, some families arrange a colorful home altar in homage to death with offerings of food and drink, including a sweet bread called "Bread of Death," a pumpkin dessert, and skulls made of sugar that bear the name of the person who receives them as a gift. In addition, skeletons and coffins are created by street vendors who sell them as children's toys. While this may seem mournful or even morbid, for Mexicans it represents a wish to keep the past alive and often the belief that past times were better.

Nowadays our country is a young country; the majority of the population is young people who respect their past and their ancestors, but who fortunately also give life its real meaning and worth. During the earthquake crisis much of the voluntary aid in the most difficult and painful tasks was performed by our young people. These are the youths with moral values who are full of optimism and life, and in whose hands we entrust the future of our nation. We remember the old popular songs as part of our culture and history, but we move now into living in the present, enjoying life, and making plans to reconstruct a better Mexico.

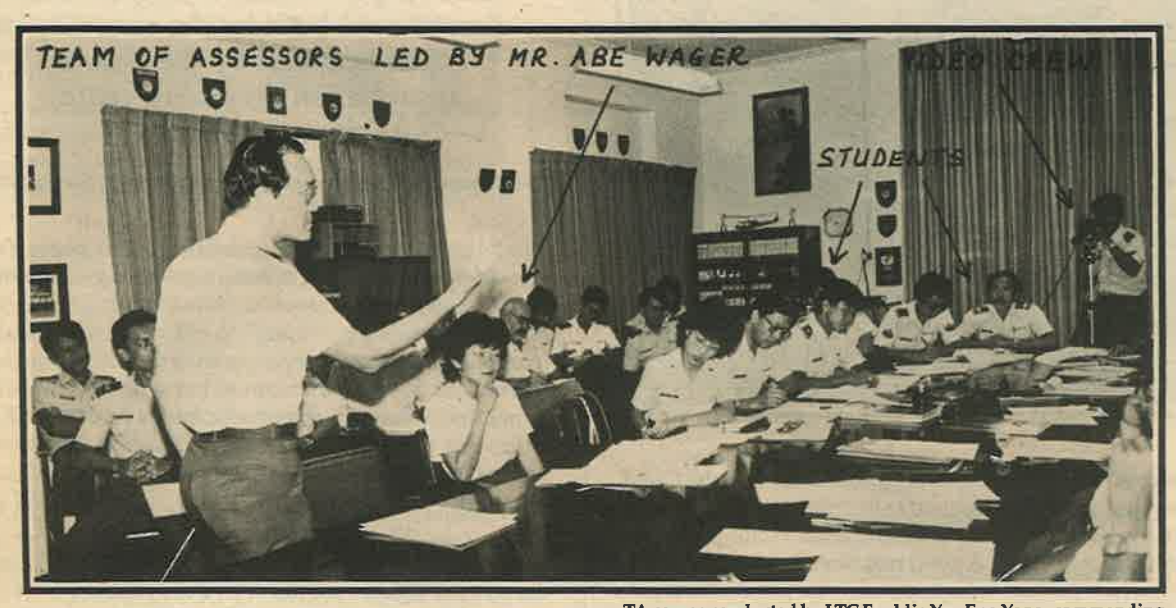
Mexicans have had a special attitude toward death, living in the past in many ways and turning it into a cult.

Emilio Said, MD, CTM, and Gloria Noriega, CTM, direct the Instituto de Psicoterapia y TA in Mexico City and serve as Co-Chairs of the ITAA International Relations Committee.

KEEPING IN TOUCH

Region I *(Pacific)*

TA Enters the Singapore Military - Abe Wagner has been working with the Ministry of Defense in Singapore teaching TA to the army, navy, and air force. They are also currently producing their own books on TA as it applies to the military.



TA course conducted by LTC Freddie Yap Eng Yong, commanding officer at the Air Engineering Training Institute in Singapore. The course assessors were Abe Wagner and eleven other TA instructors.



Jeff and Maggie White with 202 participants at Blake's home in Hong Kong.

Christine Blake reports that two 202 seminars have been launched in Hong Kong. To cut costs, the Blakes hosted the meetings at their home, Woodland — a rare setting under the trees in Kowloon Tong. Christine says, "We need more spice and energy for the 202's." Happily, this was provided in January when Jeff and Maggie White held an all-day 202 on "Defusing Games and Rackets." With the Singapore Congress only months away and Christine on the Program Committee, Hong Kong will be an exciting area for developments in TA. Kung Hei Fat Choi (Happy New Year) from all in Hong Kong!

Region III *(Europe - Liaison: Ian Stewart*

Graham Barnes has been appointed Visiting Professor by the Professional Board of the Zagreb University Department for Neurology, Psychiatry, Alcoholism and Other Dependencies at the Dr. Stojanovic University Hospital in Yugoslavia. He will lead a week-long bimonthly seminar on "The Application of TA Behavior in the Therapeutic Programs of Clubs of Treated Alcoholics and Other Self-help and Self-protection Groups."

Graham published "Epistemology of Alcoholism" in *Alcoholism* (Vol. XXI, 1985), the Journal of the Center for the Study and Control of Alcoholism and Addictions, Zagreb, and the International Council on Alcohol and Addictions in Lousanne. He also recently gave an invited lecture on "Beyond Tragedy in Mental Health Protection Through a Cybernetic Ontology and Epistemology" at a plenary session of the 13th International Congress of Psychotherapy in Opatija, Yugoslavia.

Norbert Nagel, Convenor of the TA Applications Network in West Germany, reports that in November 1985 there was a meeting of people interested in using TA in education. In addition, there are now convenors for those interested in TA applications in various areas, including religious welfare, education, social work, health care, law, and organizations. For the names of these convenors and a list of individuals interested in TA and education, contact Norbert Nagel, Institut fur Integrative Padagogik, Dreikreuzweg 78, 6903 Neckagemund, W. Germany.

"East Meets West" at the

SINGAPORE CONGRESS

January 22-25, 1987

Pre-Congress Institutes and Activities January 20-21

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The doors to Asia open on this warm tropical island nation, 1° north of the equator. Singapore features the second busiest port in the world and a vast array of sights and sounds blending Eastern and Western cultures. **A full educational program** is planned with TA experts from around the world.

Lodging at the Raffles City Stamford Plaza Hotel, including room, continental breakfast, and airport transfer, will only be $155 (four nights, per person double occupancy) to $260 (seven nights, per person double occupancy). **Singapore Airlines promises group fare packages** to participants from San Francisco or Los Angeles, with post-conference stop-offs possible.



Alicia Michelle Lankton

Region V *(USA: Liaison - Bill Krieger)*

Congratulations to Carol and Steve Lankton on the birth of their beautiful daughter, Alicia Michelle, on December 30, 1985. The Lanktons report that the birth was natural and gentle, that Alicia has a serene and tranquil temperament, and that Shawn has easily made the transition to being "big brother." They said it was a great way to celebrate the New Year!

Congratulations to Charles and Jane Vorkorper on the birth of their son, Phillip Rowe, on July 29, 1985! In addition to becoming a father, Charles has been busy giving presentations on suicide and therapy groups at the Southwestern Group Psychotherapy Society and the Texas Chapter of the National Association of Social Workers (NASW); giving another presentation on working with persons with criminal personalities at the NASW meeting; doing training for the Office on Aging in Carrollton, Texas and for CONTACT-Dallas; and writing a series on preventing teenage suicide for the *Carrollton Chronicle*. Finally, Charles was pleased to be selected as a new Faculty Member of the Southwestern Group Psychotherapy Society, a stroke which he enjoys as peer recognition for his skill in leading groups.

All Regions

Education Committee Note: Does anyone know of a research program designed to test the effectiveness of basing an elementary school on TA? Nancy Robbin of Medellin, Colombia, is planning such a school and is looking for a research design. If you have or know of one, please send it to Education Committee Chair Jean Clarke (16535 9th Ave. N., Plymouth, MN, USA 55447); she will make it available to Nancy and any others who request similar information.

The World Congress of Victimology will be held July 9-13, 1986 at Walt Disney World Village, Lake Buena Vista, Florida. The theme of the Conference is "Victims and the Professions: New Directions and Services." For more information, contact Victimology, Inc., 2333 No. Vernon St., Arlington, VA, USA 22207 or phone 703-528-8872.

The Association for the Study of Dreams announces its third annual convention, June 26-29, 1986, at Carleton University, Ottawa, Canada. The call for papers is available from Dr. Roy D. Salley, Psychology Service, 652/116B, McGuire VA Medical Center, Richmond, Virginia, USA 23249. Conference registration information is available from Dr. Alan Moffitt, Department of Psychology, Carleton University, Ottawa, Canada, K1S 5B6.

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Crisis Counseling Through TA

By Oswald Summerton

In February 1985 Central Railways invited me to give a crisis counseling course for those working with victims of the Bhopal, India, gas tragedy. The helpers were demoralized and demotivated both by the enormity of their task and by the lack of appreciation they were getting for their efforts.

Forty men and one cow turned up for the first session; the cow soon left. I began the course by showing participants how Kubler-Ross's stages of dying — fear, denial and isolation, anger, bargaining, depression, and acceptance — apply to other crises as well. Then I showed how TA can help them decide how to respond to people in various stages.

Almost everyone said their initial reaction to the creeping killer gas was fear.

Almost everyone in the course said their initial reaction to the creeping killer gas was fear. They described watching people run frantically into the streets, using up their oxygen supply, and die or be run over by trucks and cars. By the time of the course, however, fear was no longer predominant. The second stage, denial, was evident in the descriptions by several participants of how, on the fatal night, they decided there was nothing wrong and if they waited, the trouble caused by the gas would go away. Many victims of the gassing are still in the third stage and are very angry. While I was speaking, a man began to shout, "When is someone going to blow up Union Carbide?"

Generally, at the time of the course, the majority of victims were in the fourth, or bargaining, stage of crisis. Participants reported many examples of people bargaining to get something; the helpers found themselves frustrated by the insistence of some expert bargainers and by the realization that many of those who needed help were not coming forward to claim it. Helpers also reported not knowing how to help those who had gone into stage five, depression.

Finally, there were some reports of victims who had reached the stage of acceptance. These people, though injured, were ready to negotiate a change of job or residence, or to take up new functions in place of their old work.

Having identified how people's reactions to the gas crisis corresponded to the six stages, I then presented the following structural diagrams of individuals in each stage:

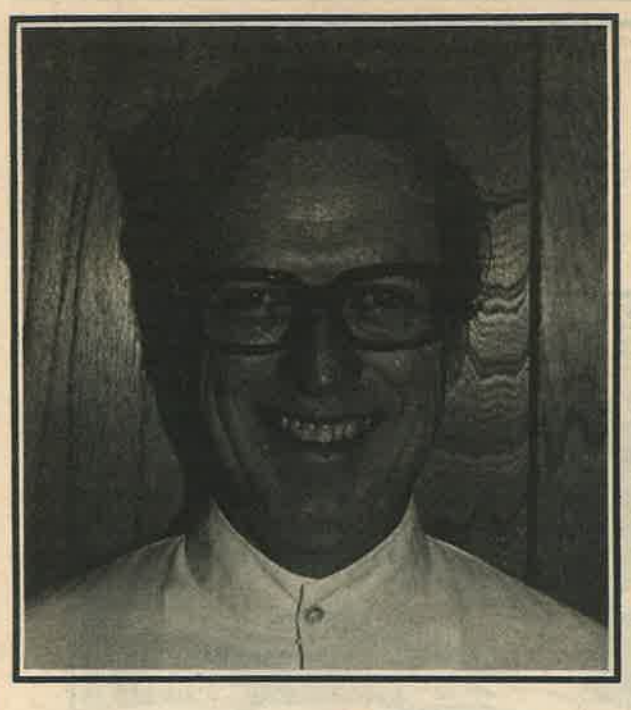


Fear Denial Anger Bargaining Depression Acceptance

Fear - The person is locked into the Child ego state as if it was excluded or cut off from the rest of the personality. With such a person, a strong Parent ego state response is needed to give potent protection (positive Controlling Parent) against the fear situation and reassurance (positive Nurturing Parent) that steps are being taken or that someone is with the victim. (Note: this response applies to fear in relation to stages of crisis, not fear in every case, e.g., rackety fear.)

Denial - This stage involves the Parent reacting to the Child's discomfort without checking out what is going on in the Child; it is diagrammed as an exclusion. The counselor needs to show Nurturing Parent through presence, comforting words and silence, and availability. (Note: also not applied to denial in general as noted above with fear.)

Anger - The Parent is ready to act angrily, to fight, destroy, and do damage; this is diagrammed with the communication vector directed toward someone else's Child. A good response to someone in this stage is to give protection to the victim and others from the Controlling Parent and permission and support to be angry in a safe and non-harmful way from the Nurturing Parent. When victims use anger to manipulate, they may need to be confronted, presented with the facts, and invited to move out of the angry Parent to see what can be done for them.



Bargaining - The person shifts cathexis back to the Child, where the Little Professor works to get as much as possible out of the situation. The communication vector points upward to "grown-ups." A good response is from Nurturing Parent which permits and encourages the person to bargain and supports him or her in getting as much as possible without harming others. It is also useful to respond from the Combining Adult by giving realistic feedback and useful information, or from the creative Free Child.

Depression - The person has low energy, is in the Child ego state, and almost unable to cathect Adult. The communication vector points down to suggest the hopelessness of the person's attitude and the draining out of energy. At this point the victim realizes that life will never be the same, and he or she does not know which way to go next. During this stage the person needs Nurturing Parent that provides healthy reassurance, support for accepting the depression and working through it, presence so the victim does not have to be alone in the depression, and hopefulness that he or she will be able to come out of it and then see what to do about the future.

Acceptance - In this stage the victim has enough energy to cathect Adult and thus to negotiate with the counselor about what can be done. The counselor can respond from the Adult, keeping a Nurturing Parent at hand to support the victim's Child if necessary.

The helpers were demoralized and demotivated both by the enormity of their task and by the lack of appreciation they were getting for their efforts.

In the course participants found that the six stages Kubler-Ross identified in patients who were dying could also be seen in crises of lesser gravity. They also found that victims do not necessarily go through the stages in order and may return to stages previously experienced. And for the railway workers in Bhopal, the course brought some relief and hopefulness because they had a better understanding of both what the victims were going through and how best to respond to those suffering from the tragedy.

Os Summerton is a Clinical Teaching Member of ITAA who lives and works in New Delhi, India. Our thanks to the author for permission to summarize this article, originally published in the January-March 1985 issue of ***TASI DARSHAN****, a bulletin of TA news and views around India published by the Transactional Analysis Society of India.*

The Zen of Giving Money: When Mite Equals Might

As a boy, I remember responding to a radio request for people willing to solicit funds for a humanitarian cause. The radio encouraged those who were interested in making donations to turn on their porch lights so canvassers like myself would know which houses to approach. Of course some people just turned on their porch lights because it was evening, and so it happened that I came to one really grand home and knocked on the door, collection can in hand. I was greeted by a well-dressed gentleman who was, nevertheless, ignorant of the cause for which I was soliciting. My explanation was insufficient to enlighten him, or let's say, to release his giving sphincter; he refused my request and closed the door. However, in the brief time we talked, I could easily observe much abundance in his home, and my quick judgment was that he was rich and holding.

My next stop was diagonally across the street at a very tiny house which also had the porch light on. The door was opened by an elderly woman whom I recognized as a New Mennonite from her long dress and headcap. There was no sophisticated background noise as there had been at the other house, and I imagined that she lived alone. When I made my request she said, "Oh yes, I have it ready." She took a cup from the sideboard and returned to hand me several dollars, saying, "I wish it could be more." It was clear that she had planned her gift, although she never knew that hers was the only donation that hadn't clinked on the bottom of the can.

I was struck even then, as I trust you are, by the contrast between the man at the first house and the New Mennonite woman. Some folks find it hard to give; others find it easy. And the difference between them is not just measured in available wealth. Where do people find permission to give?

We could assume, as I did at the time, that the New Mennonite lady had a giving approach to life because of her religion. However, having been around religious people for many years, I know nothing is automatic. Maybe she was just older and wiser.

In any event, I wish that whatever she understood about giving could be shared by all of us as we get underway with the Eric Berne Fund for the Future. We have a good cause, and the requests are coming along. I had a letter this week from a group in South America that is working to start a high school "where TA is taught and used with students and parents."

That letter will go into the hopper with others to be reviewed by the Advisory Panel and the Fund Distribution Committee in preparing for recommending action to the Board of Trustees. The machinery is ready, the gears are set. All we need now is the power, and I have the clear idea that permission has been granted. What say you?

Tom Nissley
Chairman, Fund Distribution Committee
ITAA Board of Trustees

Grief Process (continued)

Over the four years preceding his death, Brian had become an ideal son. However, while he was growing up he was often very difficult to deal with, particularly as a teenager and into his mid-twenties. His independent spirit expressed itself all too frequently as direct rebellion, stimulating fights, or worse, ingenious Games that left me, his father, his teachers, and his sister totally frustrated. From being a brilliant student, he set himself up to risk being thrown out of the university and drafted precisely at the time of the Viet Nam war. There were occasions when I screamed, "Well, it'll just serve you right to be sent to the jungle and shot!" Now, with him actually dead, I was haunted with the thought that now it serves *me* right for this to happen. Of course my Adult knew that it's "normal" to explode verbally at times of frustration, that it's an expression of the Child ego state playing "peek-a-boo" with the assumed grandiose power to kill and bring a loved one back to life. Still, I kept feeling that Heaven, Fate, or whatever, was now punishing me for my past reactions, and allowing Brian's death to happen precisely when everything was great between Brian and me. Now I'd have to deal with the reality of his death rather than with the (yes!) playful fantasy.

And what about script? In written work long preceding Brian's death, I expressed my strong disagreement with what used to be standard TA theory: namely, that a destructive injunction from the Child of a parent can operate like an electrode to determine the tragic end of an individual's life. Now I wondered whether there was some truth to this simplistic theory. Had I magically implanted such a determinant into Brian's Child, and it was finally activated when he went surfing in Hawaii? (I don't believe this with my Adult; the point is that my vulnerable Child was ready to pick up any theory, even the power of voodoo.)

Later I recognized in myself how the grieving process is affected by individual personality and character. I have written about what I call Type I and Type II people: Type I is what I call Undersure and comes from a position of "I'm Not OK, You're OK"; Type II is what I call Oversure and comes from a position of "I'm OK, You're Not OK." Both are defensive positions at times of stress against "I'm Not OK, You're Not OK."

I am a Type II person; when I am under pressure I head for the defensive Oversure position. "I can help myself better on my own than by getting help from others." Type II people under stress start out with "Be Strong" as a first step. Then, if the pressure and self-established isolation get greater, there follows, eventually, a crash into utter hopelessness and despair. Thus, such persons are candidates for later suicide, though not at the time of the initial crisis.

For example, after Brian's death, I acted "stronger." I didn't want my friends to be inconvenienced or upset. I didn't want flowers or sympathy. I did take time off from work, but got just as busy meeting Brian's many friends and supporting them in their grief, supporting my former husband and my mother with their feelings, and dealing with paperwork. My main interest was in retracing Brian's life and relationships: I was walling off my own pain.

A few months after Brian's death I went to Europe to do workshops in accordance with previous contracts. Almost no one there knew of his death, and I chose not to refer to it. My first stop was Paris, where I arrived a few days early, expecting to do some sightseeing. Instead, I spent most of the time in bed in my hotel room, lacking energy to move, and this surprised me. However, I pulled myself together well enough to do the workshop.

Then, on an afternoon break, I walked past the famous "Sainte Chapelle," which is so often closed that I had been unable to see it on previous trips to Paris. This time it happened to be open, so I walked in. As I gazed at the gorgeous blue stained-glass windows I thought, "How lucky that I finally got in!" Immediately I chided myself, "Lucky? You still think you're lucky after what happened to Brian?" Yet, for a moment my Child had experienced a sense of triumph.

From Paris I went on to Germany for additional workshops. The first one went well. However, right after that I suddenly felt I could not continue working. I told Michael Paula, the organizer of the next workshop and a friend, that he had to cancel it. Michael knew of Brian's death and he also knew me well. He reacted in just the right way for my kind of personality. He didn't argue with me, try to bolster me up, or encourage me. He simply told me he would do the workshop himself, and that I was welcome to participate or not according to how I felt at the time. Sure enough, I did join him for the workshop, and from then on I had no further difficulty doing them on my own at other locations.

In fact, it seemed to me that I had "recovered" and achieved some acceptance of Brian's death. I became very involved with work, and was active on the ITAA Board during a time of conflict in ITAA. In January, 1979, more than a year after Brian's death, I received the Eric Berne Memorial Scientific Award, and I invested a lot of energy in writing my acceptance speech. However, I was also experiencing waves of suicidal wishes and started making concrete plans about how to kill myself. I had very much wanted the Award, but when I did get it I left the plaque behind on a chair in the conference room without realizing it.

I have noticed that Type II persons such as myself may seem fine and "back to normal" for a long time after a tragic event. They may put a lot of energy into various projects and seem to overcome grief so well that it is hidden even from their own consciousness. Then, bang, they become obsessed with suicidal feelings. They don't let on, but engage their contaminated Adult in planning the execution. Unless someone intuits what's going on from seemingly small clues (such as my forgetting the award and not bothering to look for it), the suicide follows as an automatic sequence to a careful plan.

Under the impact of someone's death or other intense grief, our whole view of what's public and what's private gets scrambled. It's as if we don't want to reveal things to our friends and loved ones and yet we'll reveal things to strangers.

I was fortunate that a good friend who happened to be at the conference did catch on to my plans and took it upon himself to question me very carefully about my future plans. Finally I admitted I had decided to kill myself the following week and had figured out how. At that point he got very active with me, and after about a week I was OK. However, a year later on the anniversary, not of Brian's death, but of the suicidal plan, I was suicidal again. It is important to realize that someone may reverse a suicidal plan relatively quickly, but then have a "repeat" reaction a long time later.

RF - How do Type I people handle grief differently from Type II people?

FE - I believe Type I people often have quicker access to their feelings at times of crisis. They express them faster and are able to gain support faster, so they may go through grief better. Type II people do not get the support they need because of their own characters, not because it isn't available. But I don't know how Type I people come through when there is not enough actual support available in the environment.

As you know, Elizabeth Kubler-Ross refers to several stages of mourning. She isn't wrong, but the application of this concept has often been too pat. I believe whether we talk of Type I or Type II persons, the early stage is primarily confusion, as I illustrated about myself. Also, reactions to grief do not go in well-ordered stages; they can alternate rapidly in any sequence. However, each individual may tend to exhibit more of one pattern than another at a given time, and it seems that Type is an important determinant in many instances. My case amply illustrates denial and not sufficient clear access to grief. Perhaps a Type I person might demonstrate more incapacitating grief initially and/or more anger at the dead person for leaving.

I'd like to warn therapists against thinking of these stages too rigidly. For instance, a therapist I worked with after I cancelled my suicide plans pushed hard to get me to experience anger at Brian, on the theory that the suicidal feelings were anger at Brian turned against the self. Nice theory, but inaccurate in my case at the time, although the approach might have fit someone else or me at another time. What I needed was to "unblock" shame, to experience grief which I felt ashamed to show or experience due to a "survival conclusion" in my Child connected to my dog's death at age two and my grandfather's death when I was nine. I don't believe everyone must go through feeling angry at the dead person. Sure, one can always find reasons to feel or express anger, because that's one way to ventilate blocked energy, but it's not necessarily the path or stage for re-balancing the self following the disorientation that results from loss.

RF - I wonder if many people get angry at the dead person in a blaming way rather than feeling angry over the loss of their future dreams.

FE - Yes, or rather than simply acknowledging their disappointment. Often anger seems more socially acceptable than "feeling sorry for yourself." I was ashamed of my disappointment. If we can help people acknowledge their own narcissistic, personal, selfish disappointment, then they won't need to feel angry at the person for dying (and guilty about such feelings or ashamed of whatever it is they're feeling).

RF - As a result of your experiences, what thoughts do you have about how to approach someone who is grieving?

FE - Well, I recommend the very simplest approach. A short factual statement such as, "I heard. It's awful." Then wait a moment for a clue from the bereaved one. What follows can be quite intense or very casual. It's hard to predict; allow for the capriciousness of many moods in the same person, moods related to the particular moment, how they feel about you, or what they project onto you. With Brian's friends I wanted to talk at length, to hear of past episodes and funny pranks, perhaps as a way of imagining him still alive. With people who had not known him, even my own friends, usually I wanted to change the subject as fast as possible. Don't feel obliged to put on a funeral director's phony mourning face; be as natural as possible. Don't worry about saying or doing something wrong, but don't load your problems onto the mourner in the guise of condolence. For instance, one woman started telling me of her son's drug addiction to "console" me, another of her nephew's death. Neither was helpful.

RF - Certainly if you are approached by someone who acts tentative or scared, it isn't likely to make you feel like talking or expressing your feelings. On the other hand, someone who is direct and simple will show they can handle whatever you're feeling.

FE - Yes. Under the impact of someone's death or other intense grief, our whole view of what's public and what's private gets scrambled. It's almost as if we don't want to reveal things to our friends and loved ones, and yet we'll reveal things to strangers. I think that corresponds to Type II, although I'm not sure. By talking with strangers we can control it better. For me it was that then I didn't have to deal with their reactions to me. If I began to feel their reactions didn't fit exactly what I wanted, I could drop them, something I couldn't do with friends. And also, one of the conflicts around getting sympathy or support was an inner feeling that I didn't deserve it. Why should I get strokes because Brian died?

RF - How can TA help us work with people who are grieving?

FE - We know that people think and feel through different ego states, so we can help them accept their sometimes incongruous, spontaneous, but mutually contradictory reactions to loss. We can use our knowledge of "typical" children's reactions at different stages of development to understand the reactions of a mourner's Child. We can support and help disentangle different strands of shifting reactions which may occur in quick alternation to one another, often within minutes. And we can help free the mourner of an additional superstructure of internal self-abuse for being "irrational," "wrong," "insensitive," "overly dramatic," "contrary," or whatever. We can say, with professional authority: "Hey, whatever your feelings, even if they seem shocking to another part of you, they are perfectly normal. We know them in children, and so you have them in your Child. But they aren't the whole story. You are not a freak." (The loss of a loved one, I believe, shatters self-esteem even in the most autonomous, self-confident person.)

Conflictual, irrational, incongruous feelings are a powerful part of grief. Also, old "survival conclusions," long ago seemingly cancelled or overcome as archaic, are likely to surface with new power at such times, gnawing away at a person's need to mourn with love and honesty for the person who died, and such "survival conclusions" may need to be confronted.

For instance, on the day Brian died in Hawaii, I was in Canada. Before getting the news of the accident I walked in the beautiful autumn woods, thinking of how everything seemed to be working out well in my life and feeling particularly happy. Even to this day it is difficult for me to throw off the superstitious feeling that I was too smug and self-satisfied that day. Did I bring on the "evil eye" which, as I heard as a child in Turkey, brings on disaster to those who are too lucky unless they deny it and wear a special blue amulet to ward off the danger? Until the day before he died, Brian was one of the lucky ones in this world: handsome, smart, athletic, charming, successful, loyal, healthy, loved by many. But on that one day he entered the surf without protection, and it engulfed him.

RF - Thank you for telling us so frankly of your thoughts and feelings following Brian's death.

FE - Robin, thank *you* for being such an empathetic listener and participant in helping me express them.

EXAM CALENDAR

Exam	Exam Date	Location	Application Deadline
Level I (CM/SFM) Exams	May 1986 July 6, 1986 August 13, 1986	Perth, Australia Noordwijkerhout, Netherlands San Francisco, CA, USA	April 1, 1986 May 1, 1986 May 9, 1986
Level II (CTM/SFTM) Exams	August 13, 1986	San Francisco, CA, USA	
Level I (CM/SFM) Written Exam	July 11 or 12, 1986 November 7 or 8, 1986	To be announced To be announced	April 11, 1986 August 8, 1986
Training Endorsement Workshops*	July 13-16, 1986 August 17-20, 1986	Noordwijkerhout, Netherlands San Francisco, CA, USA	May 13, 1986 June 17, 1986

** Please contact Jackie Ward-Flaggs at the ITAA headquarters for more information.*

All fees due by application deadline. All exam fees are non-refundable, but will be credited to your account (except oral application fees paid each time applying for oral exam) if at least 30 days written notice is given for cancellation. Otherwise fee is forfeited. Fees: written exam - $90 US/Canada ($10 administrative fee deducted for cancellations received prior to 30 days deadline); all other countries pay $15 written exam recording fee to BOC and $35 to reader/scorer. Orals applications: $75, non-transferable. Oral exam - $50. Contract filing fee: $30. All fees must be paid in US funds.

Examiners Needed

Level I Exams (CM & Ed/Org): July 6, 1986, Noordwijkerhout, Netherlands, and August 13, 1986, San Francisco, California
Level II Exams (TM): August 13, 1986, San Francisco, California

We need qualified examiners, someone who has or will complete the Board of Certification examiner training workshop before exams, for Level I (CM & Ed/Org) and Level II (TM).oral examinations. Please complete this form and return to Jackie Ward-Flaggs, PO Box 3932, San Francisco, CA 94119 by June 2, 1986, if you can help. We also need CMs, Ed/Orgs, and PTMs to act as supervisees for the supervision section of the Level II (TM) examinations. Please indicate if you can help.

_____ Yes, I will serve as an examiner for the Level I (CM/Ed/Org) oral exams on Sunday, July 6, 1986, in The Netherlands and will attend the Saturday afternoon Examiners' meeting.

_____ Yes, I will serve as an examiner for the Level I I (CM/Ed/Org) oral exams on Wednesday, Aug. 13, 1986, in San Francisco and will attend the Tuesday afternoon Examiners' meeting at 3pm.

_____ Yes, I will serve as an examiner for the Level II (TM) exams on Wednesday, Aug. 13, 1986, in San Francisco and will attend the Tuesday afternoon TM Examiners' meeting at 3pm.

_____ I would like to serve as a supervisee in the supervision section of the TM examination.

_____ I would like to serve as an exam board Chairperson; I have done so _____ times.

_____ Yes, my room at the hotel may be used for exams. I took the BOC Examiners' Training Workshop at _____.

_____ I will take the Examiners' Training Workshop in San Francisco, California on Aug. 12th at 3:30 pm.

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Name and Membership Status (Please Print)

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Training Standards Committee Note: The TSC is now preparing standards for training advanced members with a specialty in education. If you have ideas to share, please send them to TSC member Jean Clarke, 16535 9th Ave. N., Plymouth, MN, USA 55447.

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Special thanks to the following people for devoting their time, energy, and skills to the Level I and Level II exams in Heidelberg, W. Germany; Perth, Australia; and Orlando, Florida. The BOC looks forward to working with them again.

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TA 101 Calendar

April 17-18, 1986 - St. Cloud Minnesota, USA. Cost: $60. Leaders: Jean Clarke, EPTM, and Russ Osnes, CTM. Contact: Jean Clarke, 16535 9th Ave. N., Plymouth, MN, USA 55447; phone 612-473-1840.

April 25-27, 1986 - Arbuckle Mountains, Oklahoma, USA (2 hrs. north of Dallas, one hr. south of Oklahoma City). Cost: $150/weekend, includes room and board. Leader: Laura Boyd, PhD, CTM. Contact: Laura Boyd, 2416 Tee Circle, Norman, OK, USA 73069; phone 405-364-5406.

May 16-17, 1986 - Richmond, Virginia, USA. Cost: $75 ($30 deposit due 5/9/86). Leader: Valerie Batts, PhD, CTM. Contact: Valerie Batts, Visions, 2nd and Franklin, Suite 701, Richmond, VA, USA 23219; phone 804-788-1493.

Certified Teaching Members and Certified Provisional Teaching Members of ITAA are invited to list free of charge information about TA 101s they are presenting. To be listed, please send the following information to ITAA Publications Coordinator, 1772 Vallejo St., San Francisco, CA, USA 94123: dates of TA 101, location, cost, leaders' names, and how to get more information. Deadline: first of the month prior to the month of publication. Note: we cannot accept tentative or open dates; please be specific.

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Grief Rituals (continued)

The Tasks of Dying

By Marye O'Reilly-Knapp

individual may deal with th
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Anne, who was lying in bed when I arrived, indicated she had something important to ask me. Calmly she said, "Help me to die." I told her I would help her live until she died. "No, I want you to help me die. Not by giving me anything or killing me, but by helping me let go." And so I began to look at how people let go and die, a process much easier for some than for others.

The purpose of bringing death to the foreground is to see it as an integral and inevitable part of life — as natural and

The purpose of bringing death to the foreground is to see it as an integral and inevitable part of life.

predictable as living. Yalom and others explain that to focus on death, not as a morbid obsession, but as part of living, makes life richer. "Death reminds us existence cannot be postponed, and there is still time for life" (Yalom, 1980, p. 162). Another reason to focus on death is to educate people, an area in which Kubler-Ross (1975) has made a major contribution. It is also increasingly important to talk about death and dying because medical advances are supporting people in living longer. As a result, more people live with disabilities that remind them, and us, of our own mortality. Finally, more people today die outside hospitals or at home; we as therapists must expect to have more contact with them and their families.

Through my work, I have identified the seven tasks of dying outlined below. People may engage in more than one step at a time and move through them in various order. However, the more each task is completed, the easier it is for a person to let go of life.

1. **Meeting Physical Needs and Limitations** - Considerations related to this task include relief of pain and discomfort, relaxation techniques, physical exercise, nutritional needs, elimination, sleep patterns, and time structure.

2. **Reviewing and Evaluating One's Life** - This task reminds me of Erikson's stage of ego integrity versus despair. "Ego integrity is the acceptance of one's one and only life as something that had to be" (Erickson, 1963, p. 268). In this stage, the therapist helps the person to integrate life experiences, mourn the loss of what was or could have been, and look at accomplishments. When this integration is missing, fear of death results.

3. **Completing Unfinished Business** - This requires making decisions about goals and what has to be done. For example, in structuring the end of his life, Carl Jung told someone who wanted to work with him that he was not taking any additional patients, that he was preparing to die. He died a year later.

4. **Getting on the "Path"** - This task is a continuation of completing unfinished business. It involves a decision to live in the now with acceptance of where one is in the life cycle. Freud finished *The Outline of Psychoanalysis* even though severely restricted by his pain from cancer.

5. **Preparing for the Funeral and Burial** - While work on this task may take place long before a person is dying, the arrangements may need to be reviewed. For example, someone may have originally wished to be buried, but later decide to be cremated. My own mother, a week before her death, went over with me in detail what she wanted when she died. Until that point, she had refused to discuss her death, telling us only that she would cross that bridge when she came to it.

6. **Saying Goodbye** - This task revolves around saying what has not been said and letting go. For some this takes place over weeks; for others it occurs during the last days of consciousness.

7. **Disengaging** - The final task is the departure of the life force from the body. St. Francis of Assisi told of a revelation about death and said he was full of joy. He died with a smile on his face while the songs of larks filled the air. In my own work I have often been with someone who died with a smile.

The more each task is completed, the easier it is for a person to let go of life.

Death, like meditation and sleep, is a form of letting go. If we can surrender to some of the daily events in our lives, we will be better prepared for death. The tasks I have identified are important in this process. For therapists, they provide a useful framework for working with people who are dying and with their families.

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References

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Brief Mention

TA is Useful for Helping Bereaved

By JoAnn McKay

As a psychiatric nurse, I find that, particularly in relation to grief, we have little permission to feel our feelings. Without that permission, we often hold in our pain, which can result in physical symptoms such as fatigue, back pain, confusion, loss of appetite, insomnia, and ultimately, even tissue damaging problems like ulcers, accidents, or heart disease.

As TA therapists, we need to give our clients permission to talk about their losses from a broader perspective, to see that the process involves a beginning, a middle, an end, and a new beginning. Many of us find this process difficult because friends and relatives encourage us to be strong, and we often see grieving as a sign of weakness. However, it is easier for us to go through it once we realize that grieving is a natural, normal feeling, and if we receive support from someone who understands its value.

TA can be a good framework to use when helping those who are grieving. It is important, for instance, to provide safety for the Parent, information for the Adult, and nurturing for the Child. A TA therapist can give new Parent messages that indicate it is OK to feel the way we feel and that give permission to grieve. He or she can also serve as a firm presence, someone we can push against without pushing away. Information for the Adult is also necessary in order to help the grieving person tell his or her whole story. Finally, the Child needs to feel nurtured and welcomed with an open heart.

We all go through the grieving process in our own unique way, but it is essential to begin by sorting out our losses. There are many types of loss, and they are cumulative. Once we separate them, we are ready to experience three stages toward recovery: experiencing grief in the face of the loss, letting go of the attachment, and recovering and reinvesting in our lives. By fully experiencing our grief, we can see it as a dynamic process involving movement through different experiences. Letting go of the attachment does not mean we stop caring for the person we have lost, but that we will not allow the loss to rule our lives. Once we experience letting go, we can start reinvesting in our lives as we begin the journey to recovery.

This article summarizes material presented by JoAnn McKay, a psychiatric nurse from Oakland, California, USA, during a workshop on Death and Dying. Our thanks to ITAA Publications Assistant Joanne Hathaway for her help in preparing the summary.

"He/She/Us: TA Looks at Gender Issues"

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