

Grief Counseling Helpful or Harmful? A New Examination of the Evidence

In recent years, there has been considerable interest in the effectiveness of psychotherapies including grief counseling and therapy. With regard to the impact of mental health treatment for grief, some research appears to question the efficacy of grief counseling in certain circumstances and a claim has been put forward that some grief counseling may be more harmful than helpful. For the last five years, this finding has been cited with regularity in professional journals and has begun to appear in the popular media. The Association for Death Education and Counseling (ADEC) wishes to call attention to a new study that challenges this finding. (Lawson and Hoyt, 2007)

In the March 2007 issue of *Perspectives on Psychological Science*, psychologist Scott Lilienfeld developed a list of “Psychological Treatments that Cause Harm,” and placed grief counseling for individuals with normal bereavement reactions in the Level I “probably harmful” category. In a recent report in *Newsweek* (June 18, 2007: “Get shrunk at your own risk”), Sharon Begley reiterated Lilienfeld’s conclusions, claiming that “four in 10 people who entered grief therapy... would have been better off without treatment” (p. 49). These two examples, disconcerting as they are, are only the most recent references to the claim that grief counselors are causing harm to a large proportion of those they seek to help. Many scientists who do research in the area of grief counseling have unfortunately accepted the assumption that grief counseling is ineffective or even potentially detrimental—an assumption that is primarily based on the results of one report. ADEC members, including many who provide grief counseling, want to be guided by well established research findings and need to follow this important research question.

In a forthcoming article in *Professional Psychology: Research and Practice*, Larson and Hoyt (2007) examine the basis for the claim of treatment-induced deterioration effects (TIDE) in grief counseling. They note that those who reference this finding cite an influential paper (Neimeyer, 2000) which summarizes the findings of a dissertation conducted by Fortner (1999). Naturally, it would be preferable to cite Fortner, (1999), whose work provided the basis for the claim, rather than Neimeyer (2000), who only summarized the conclusions of Fortner’s study. Following this scholarly standard would appropriately credit Fortner, and would also encourage authors and readers to examine critically the evidence that grounds the TIDE claim.

The Fortner dissertation is a conventional meta-analysis of 23 studies of grief therapy. The TIDE finding is based on a subsidiary analysis of 10 of these studies, using a novel statistical technique attributed to an unpublished master’s thesis by A. S. Anderson (1998). Because of the considerable influence of the TIDE finding, and because neither the Fortner dissertation nor the Anderson master’s thesis (on which the finding relied) had ever been subjected to the peer review process, Gary R. VandenBos, American Psychological Association Publisher and managing editor of *American Psychologist*, subjected Fortner’s study to a post hoc blind peer review. The conclusion of the reviewers was unanimous: There is no empirical or statistical basis for the claims of “deterioration effects” made by Fortner, summarized by Neimeyer, and cited in more than 20 journal articles, and numerous stories in the popular press, since its entry into the literature in 2000 (Larson and Hoyt, 2007).

Larson and Hoyt also argue that other pessimistic claims concerning grief counseling now widely endorsed—that it is generally ineffective and that clients experiencing

“normal” grief are especially likely to be harmed by it—also lack a solid empirical foundation. Each of these claims is countered by Larson and Hoyt, who conclude that cautious optimism, rather than pessimism, is more consistent with extant empirical work. They call for more research in the area, citing a great need for more ecologically valid studies that focus on the bereaved populations typical of those seen in counseling practice. Such research, they aver, would help narrow the divide between research and practice and provide more definitive answers concerning the efficacy and potential harmfulness of grief counseling. So the “harmful grief therapy” assertion has no basis in fact, and the more evidence is needed on how well (and for whom) grief therapy helps. ADEC cautions researchers and counselors alike from accepting the conclusions of this one study without critically evaluating the findings and considering the need for future research. Certainly, ADEC members should not be deterred from providing appropriate grief counseling to those bereaved in need of our support.

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