

## Post Traumatic Growth and Meaning Making in Prolonged Grief through Positive Psychology Interventions: A Pilot Study

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### **ABSTRACT**

*This study examines the effects of positive psychology interventions on meaning-making processes and post-loss growth among thirty-six individuals who have experienced prolonged grief for a minimum duration of six months. Participants were divided into three groups, namely an individual intervention group, a group-based intervention, and a no-intervention control group. Data were collected through structured interview schedules and analyzed using a qualitative thematic analysis approach. The intervention consisted of a ten-session positive psychotherapy program. The findings revealed a notable decrease in grief intensity, accompanied by improvements in meaning reconstruction and indicators of personal growth. Several key factors were identified as contributing to this psychological transformation, including an enhanced sense of self, acceptance of reality, expanded cognitive perspectives, the maintenance of continuing bonds with the deceased, and the development of a renewed sense of life purpose. Overall, the results suggest that positive psychology interventions are effective in supporting individuals in coping with prolonged grief and in facilitating the construction of meaningful interpretations of loss and subsequent personal development.*

**Keywords:** *Prolonged grief; post-traumatic growth; positive psychology; meaning-making.*

### **INTRODUCTION**

Grief and loss are considered fundamental aspects of human existence. Grief is commonly defined as an emotional and psychological response to loss. Contemporary understandings of grief and bereavement have shifted from the notion of detaching from the deceased toward the concept of maintaining continuing bonds with them (Klass, Silverman, and Nickman, 1996). Responses to loss are multidimensional,

encompassing not only emotional reactions but also physical, cognitive, behavioral, and spiritual manifestations.

The death of a loved one may disrupt an individual's sense of identity and worldview. Consequently, making sense of the loss and reconstructing meaning in its aftermath is recognized as a central process for bereaved individuals. Developing resilience in response to loss has also been associated with post-traumatic growth, which may lead to positive psychological transformation (Neimeyer, 2016).

Historically, Freud (1917) introduced the concept of "grief work," which emphasized the process of detaching emotional ties from the deceased. However, conceptualizations of the grieving process have evolved over time. Contemporary perspectives highlight key components such as releasing psychological dependence on the deceased, adapting to life without the loved one, and establishing new relational connections (Hall, 2014).

### **Adaptive Grieving**

The decision to implement interventions in cases of grief is typically determined by the level of psychological distress, functional impairment, and associated risk factors. Symptoms indicative of pathological grief may include social withdrawal, diminished sense of purpose, denial of the loss, persistent rumination, negative cognitive patterns, and existential questioning.

In contrast, adaptive grieving is characterized by the gradual integration of the loss into an individual's life narrative, while maintaining a continued sense of connection and attachment to the deceased. Such integration facilitates the acknowledgment of the reality of death, the regulation of complex or ambivalent emotions, the restructuring of mental representations of the deceased, and the redefinition of personal goals and social roles (Kosminsky & Jordan, 2016).

### **Growing through Grief**

Seligman (2000) sought to reorient the focus of mental health from psychopathology toward the enhancement of well-being, including constructs such as contentment, life satisfaction, hope, optimism, gratitude, and happiness. In recent years, grief research has increasingly been associated with processes of adjustment and psychological well-being.

Post-traumatic growth (PTG) is a concept within positive psychology that describes transformative growth experienced by some individuals following highly stressful or adverse life events (Blackie et al., 2016). Tedeschi and Calhoun (2004) conceptualized PTG as a form of psychological development facilitated through social connectedness, spirituality, and the re-evaluation of personal perspectives. These dimensions are closely linked to meaning in life, empowerment, hope, and recovery processes (Leamy et al., 2011).

Within the context of bereavement, individuals who are unable to reconcile their pre-loss assumptions about the world and the self with post-loss reality may develop symptoms associated with post-traumatic stress disorder. In contrast, individuals who are able to positively reconstruct their cognitive frameworks are more likely to experience post-traumatic growth (Joseph & Linley, 2005).

Growth may emerge from the experience of grief when individuals remain open to engaging with their suffering, enabling them to discover meaning even within emotional pain (Neimeyer et al., 2018). Frankl (2008) similarly emphasized that better psychological outcomes are associated with the ability to derive meaning from suffering. Bereaved individuals tend to construct more adaptive meanings of loss when they maintain a continuing bond with the deceased despite physical absence (Currier, Neimeyer, & Berman, 2008). In this regard, revising personal narratives surrounding loss by preserving continuity in identity and the relationship with the deceased plays a critical role (Neimeyer, 2006).

The present study aims to examine the impact of positive psychology interventions on post-traumatic growth, narrative reconstruction, positive affect, and meaning-making processes in the context of grief.

## **LITERATURE REVIEW**

Major research work in the subject of grief, post traumatic and positive psychology are presented below.

### **Grief and Adaptive Grieving**

The process of adjusting to the loss of a loved one is inherently challenging, as it involves a wide range of emotional responses. A recent study explored the needs and grieving processes of bereaved parents who had lost their children to cancer. The research involved five therapeutic groups to examine the effectiveness of an intervention developed by a psycho-oncology and bereavement specialist at the Aladina Foundation Psychological Care Center. Data were analyzed using qualitative content analysis.

The analysis identified five key themes, including emotional relief, coping strategies, legacy, and unfinished business. The loss of a child was associated with substantial emotional and cognitive distress, with sadness and fear emerging as the most prevalent emotional responses among parents. Mutual support and shared understanding among participants were found to be among the most effective mechanisms facilitating emotional healing. The process of making sense of the loss and achieving meaningful understanding often followed intense feelings of guilt and regret. The theme of unfinished business was identified as a particularly distressing aspect of the bereavement experience. Conversely, the notion of maintaining a continuing bond with the deceased child and preserving their legacy functioned as a protective factor, fostering positive emotional experiences such as love. Additionally, the desire to contribute to the lives of others and to rediscover meaning in alternative life domains emerged as an important developmental outcome following loss. However, a limitation of the study was that non-verbal elements of communication, such as tone, pauses, and emotional expressions, were not included in the analysis (Moriconi & Cantero-Garcia, 2022).

A phenomenological study further examined the lived experiences of bereaved individuals to better understand the impact of loss on both physical and psychological health. Findings indicated that participants experienced profound emotional and somatic pain, alongside heightened spiritual awareness and an expanded understanding of life and death. The study also provided insights into appropriate forms of bereavement care, highlighting the effectiveness of support groups in fostering self-awareness and enhancing relational understanding. Such groups were also found to facilitate the reconfiguration of perceptions related to the loss, the self, and others (Douglas, 2004).

Another study investigated how individuals construct meanings and narratives associated with feeling “stuck” in the grieving process. The findings suggested that unresolved internal conflicts significantly contributed to experiences of prolonged grief stagnation. Additionally, persistent ambivalence following loss was identified as a key factor reinforcing psychological distress. The study also noted that therapeutic interventions failing to address underlying internal conflicts may contribute to sustained feelings of being stuck in grief, underscoring the importance of addressing these dynamics in clinical practice to support adaptive grieving processes and emotional integration (Poxon, 2013).

Adaptive grieving is understood as a process in which bereaved individuals gradually integrate the experience of death into their personal narrative while maintaining a sense of continuing attachment and emotional connection with the deceased (Kosminsky & Jordan, 2016).

### **Emotional disclosure and Grief**

A study was conducted to examine coping processes and emotional regulation through the use of optimistic emotional disclosure. Participants were divided into three groups and assigned different writing instructions. The first group was instructed to write

about their experience of loss; at a six-week follow-up, this group reported lower levels of active coping but higher levels of acceptance. The second group was asked to reflect on positive beliefs, future hopes, and personal strengths following the loss. This group demonstrated enhanced active coping and reduced maladaptive coping at the six-week follow-up assessment. The third group served as a control group and was instructed to write about a neutral event.

Overall, all three groups exhibited significant improvements across measures of grief experience, positive affect, general health, and coping ability (Gilrain, 2004).

### **Theories and Models of Grief**

Bowlby's attachment theory (1973) posits that early childhood experiences and the quality of bonds formed with primary caregivers play a central role in shaping individuals' capacity to form emotional attachments and their subsequent grief responses following loss. Attachment is conceptualized as a reciprocal relational bond between child and caregiver, with long-term implications for later adult relationships. While attachment relationships provide security and emotional comfort, disruption of these bonds results in significant distress and emotional dysregulation. Bowlby further identified four phases of mourning: (1) numbing; (2) yearning and searching for proximity to the lost figure; (3) disorganization accompanied by intense emotional distress; and (4) reorganization, during which individuals gradually adapt and reintegrate into new relational and life contexts (Bowlby, 1973).

Lindemann (1944) proposed early criteria distinguishing normal and pathological grief, focusing on variables such as duration, intensity, and functional impairment. He described five characteristic features of grief reactions: somatic disturbances, preoccupation with the image of the deceased, guilt related to pre-loss behavior, feelings of anger and hostility, and difficulties in maintaining everyday functioning (Wright & Hogan, 2008).

The stage model of grief, introduced by Kübler-Ross (1969), conceptualized bereavement as a sequential process consisting of five stages: denial and shock, anger (often accompanied by resentment and guilt), bargaining, depression, and acceptance. Although stage-based models provide a structured framework for understanding grief, they have been criticized for oversimplifying the grieving process and failing to capture its individual variability and complexity. In particular, such models often overlook the psychological, social, and spiritual dimensions that influence bereavement outcomes.

In response to these limitations, more comprehensive models of grief were developed to better account for the multidimensional and individualized nature of bereavement processes (Corr & Doka, 1994). One such framework is the Dual Process Model proposed by Stroebe and Schut (1999), which conceptualizes grief as an oscillation between loss-oriented and restoration-oriented coping. Loss-oriented coping involves confronting and processing emotions associated with bereavement, whereas restoration-oriented coping focuses on adapting to life changes and managing ongoing daily demands (Stroebe, 1993).

Similarly, Worden's Task-Based Model (2008) conceptualizes grieving as an active process involving four primary tasks: accepting the reality of the loss, processing the emotional pain of grief, adjusting to a world without the deceased, and maintaining a continuing but transformed connection with the deceased. Worden also identifies seven key determinants that influence the grieving experience, including the identity of the deceased, the nature of the attachment, circumstances of death, historical background, personality of the bereaved, social support systems, and concurrent stressors. These factors function as both risk and protective elements, with variables such as trauma exposure, violent death, and relational conflict significantly shaping the trajectory of bereavement.

### **Grief Interventions**

An essential component of grief therapy is adaptive grieving, which refers to the process through which bereaved individuals gradually integrate the experience of death into their personal narrative while maintaining a sense of continuing attachment to the deceased. This integrative process facilitates the acknowledgment of the reality of death, the regulation of complex or ambivalent emotions, the revision of mental representations of the deceased, and the redefinition of personal goals and social roles (Kosminsky & Jordan, 2016).

Another central element of grief therapy is meaning reconstruction, whereby individuals develop more adaptive interpretations of loss by maintaining an ongoing sense of connection with the deceased despite their physical absence. In this context, reauthoring one's narrative of loss through continuity in identity and relational bonds is considered crucial. The sharing of personal narratives in the presence of empathetic and responsive others further contributes significantly to the healing process (Neimeyer, 2006).

The process of integrating and making sense of loss becomes particularly challenging when the death is sudden, unexpected, or violent, as such circumstances may disrupt fundamental assumptions about a just, predictable, and controllable world (Schwartzberg & Janoff-Bulman, 1991).

The therapeutic process of processing loss is also strongly influenced by the quality of the therapeutic relationship. A collaborative, respectful, and appropriately directive therapeutic stance is essential in facilitating effective grief work. Providing a safe space for reflection, validation, and cognitive-emotional restructuring constitutes a core therapeutic goal in bereavement interventions. An additional important dimension involves recognizing the continued psychological presence of the deceased beyond physical absence, enabling individuals to maintain mental, emotional, and spiritual connections with the lost loved one (Currier, Neimeyer, & Berman, 2008).

A wide range of therapeutic techniques has been developed to support the processing of loss and facilitate meaning-making in bereavement (Neimeyer, 2012). Some of these techniques are:

1. Retelling the narrative of the Death. In this techniques, bereaved individuals review the story of the loss in slow motion in order to inculcate the sense of mastery and regulation over the loss than avoidance.
2. Chapter of our lives. This technique involves viewing the loss as a previous experience and associating the loss with new meanings
3. Virtual Dream Stories. Creative writing about the loss facilitates exploration of feelings and thoughts related to the loss. Self-awareness often leads to effective healing in the process of loss.
4. Directed Journaling. In this technique, individuals are directed to do diary work in order to make sense of the loss and find benefits around the loss.
5. Loss characterization. Encouraging the individuals to narrate the impact of loss on one's sense of self from the distanced perspective.
6. Rituals of transition. The rituals of transition involves ways in which the bereaved individual can validate one's life changes through symbolically connecting with the individual he has lost.

Retelling and reviewing the narrative of the death contributes to healing in the bereaved individuals. The narrative processes include; 1). External narrative - the factual

### **Post Grief Growth**

According to Harvey (2001), discovering one's learnings after the loss and can be valuable in coping through grief. Calhoun (2010) mentioned the five areas of positive change that can arise after experiencing grief which include perceiving oneself as stronger, enhanced relationships, discovering new roles and identity for oneself, appreciation of life and spiritual transformation.

Focusing and building on one's strengths amplifies therapeutic outcomes in grief therapy (Fluckiger & GrosseHoltforth, 2008). Tedeschi & Calhoun (2004) reported that bereaved individuals report increased confidence in their capacities to survive losses.

### **Continuing Bonds**

Klass, Silverman, and Nickman (1996) provides insights on the idea of continuing bonds with the deceased after the loss. The idea of grief moved from letting go of the deceased to maintaining the relationship with the deceased even after the loss. The expression of this evolving relationship with the grief can look like talking to their photos, relocating the deceased in heaven, or seeing them as reconnected with the family ancestors. Participating in rituals and visiting their grief are conscious ways of connecting with the deceased. Continuing bonds are symbolic ways to stay connected with the deceased that facilitates integration of the loss along with acceptance of the loss.

### **Positive Psychology and Grief**

A positive psychological approach in grief therapy supports individuals in deriving meaning from their loss and reconstructing their life narratives in a more adaptive and

constructive manner (Roberts, Thomas, & Morgan, 2016). At the core of positive psychology lies the assumption that individuals may develop a more engaged and meaningful life following experiences of loss and adversity (Seligman & Csikszentmihalyi, 2000).

Berzoff (2011) highlights that positive psychology-based approaches, including narratives of altruism and interpersonal engagement, may facilitate the development of new insights and positive psychological gains in the context of bereavement. Empirical evidence further indicates that individuals with higher levels of hope tend to maintain more positive cognitive appraisals during grief compared to those with lower levels of hope (Snyder et al., 1996).

In a study examining optimistic emotional disclosure in grief, participants who reflected on positive beliefs, future-oriented hopes, and personal strengths demonstrated significant improvements in grief-related outcomes, positive affect, overall health, and coping abilities (Gilrain, 2004). Similarly, therapists employing positive psychology interventions, particularly strength-based approaches, contribute to expanding clients' cognitive perspectives and fostering the construction of positive meaning in bereavement contexts (Scheel, Davis, & Henderson, 2012).

Further research involving bereaved individuals indicates that positive psychology interventions may facilitate psychological flourishing through four key domains: identification of personal strengths, enhancement of interpersonal relationships, discovery of life meaning, and recognition of new life possibilities (McDevitt, Phippen, Roebuck, & Wellman, 2000)

A pilot study investigating the effectiveness of a structured positive psychology program on depression, anxiety, and stress included both intervention and control groups over a six-week period. The intervention incorporated exercises such as strengths identification, goal setting, positive emotion enhancement and savoring practices, meaning-making activities, gratitude letter writing, and relationship-building exercises. Findings revealed significant reductions in depression, anxiety, and stress scores following the intervention. However, limitations were noted, including a small sample size, limited duration of sessions affecting reliability, and the absence of facilitators with formal training in positive psychology (Kotsoni, Kanellakis, & Stalikas, 2020).

### **Meaning Making in Grief**

The reconstruction of the worldview in order to incorporate the loss is a complex process. Our loved ones define and contribute to our worldview to a great extent. The way we look at ourselves, our relationships, and our goals is determined largely by our significant others. However, once these relationships are disrupted, coping with the new identity, new life demands, and new relationships are common experiences amongst the bereaved (Neimeyer, 2001). When the loss is expected and anticipated, coping is relatively easier in such cases. Finding meaning in other goals, other relationships, and spirituality can lead to a



smoother grieving process. Difficulty to find meaning can result in depression, anger, anxiety and other manifestations of complicated grief (Poxon, 2013).

Meaning making involves two concepts: 1) Making sense of the loss as per the religious, spiritual, or other perspectives of the bereaved, 2) Benefit finding in the loss such growth in grief and strengthened relationships. These two psychological processes encompass meaning making in the loss making the journey of bereavement enriching and comprehensive (Davis, Nolen-Hoeksema, & Larson, 1998). Finding meaning in other goals, other relationships, and spirituality can lead to a smoother grieving process. Difficulty to find meaning can result in depression, anger, anxiety and other manifestations of complicated grief (Poxon, 2013).

Meaning oriented approach to resilience and transformation is aimed at discovering inner strengths through meaning reconstruction (Chan, Chan & Ng, 2006). Gillies and Niemeyer (2006) suggests that bereaved individuals engage in meaning making after loss to make sense of their experiences. These meaning making activities most often include positive psychology interventions such as benefit finding, sense making, and identity change.

### **The present study**

According to the existing pool of research, there has been extensive research done on post traumatic growth. Post traumatic growth indicates positive personal changes that individuals experience after a traumatic loss. Some individuals may integrate lessons learned from the losses into their lives which promotes post traumatic growth (Roberts, Thomas, & Morgan, 2016). Although the concept of post traumatic growth is drawn towards the field of positive psychology and it is recognized as a sign of healing through any traumatic incident, there are few studies exploring the interventions or therapeutic approaches or pathways that could eventually lead one to achieve post traumatic growth. This means that it is known how one looks if healed through trauma; however, the pathway to reach there is still needed to be explored. Therefore, the current study aims to build a positive psychology module in order to test its effectiveness on individuals going through prolonged grief and the contribution of positive psychology interventions towards post traumatic growth as well as meaning making.

Although, certain researches indicate that growth happens through the struggle that takes place after the trauma (Roberts, Thomas, & Morgan, 2016), the objective of the current study aims to create a more peaceful and positive journey towards post grief growth.

### **METHODOLOGY**

A mixed-methods approach was employed for data analysis, combining both quantitative and qualitative methodologies. The quantitative data were analyzed using statistical techniques, whereas the qualitative data obtained from interview schedules were examined through thematic analysis. This approach enabled an in-

depth exploration of emerging themes related to coping strategies, personal development, and the reconstruction of meaning within the context of grief.

## Result and Discussion

The analysis of the data involved a mixed quantitative and qualitative analysis. The findings are presented below.

### Quantitative Results

Statistical Analysis was conducted in order to assess the scores obtained on Inventory of Complicated Grief, Meaning Making in Grief Scale, and Post Traumatic Growth Inventory. The analysis facilitated comparison of pre and post therapy scores in order to assess the effectiveness of positive psychology interventions on grief, meaning, and growth.

**Table 1. Paired Samples T-test on Inventory of Complicated Grief, Meaning Making in Grief Scale, and Post Traumatic Growth**

		Mean	Std. Deviation	Std. Error	95% Confidence Interval of the Difference		T	Df	Sig. (2-tailed)
					Lower	Upper			
Pair 1	Pre Grief Score - Post Grief Score	6.182	9.662	2.913	-.310	12.673	2.122	36	.060
Pair 2	Pre Meaning Score - Post Meaning Score	12.545	11.361	3.425	-20.178	-4.913	-3.662	36	.004
Pair 3	Pre Growth Score - Post Growth Score	11.000	18.379	5.542	-23.347	1.347	-1.985	36	.075

Table 1 represents the difference of scores obtained in the extent of grief, discovery of meaning in grief, and post traumatic growth experienced by the participants between pre therapy condition and post therapy condition. The mean scores differences obtained on Inventory of Complicated Grief, Meaning Making in Grief Scale and Post Traumatic Growth inventory between pre therapy condition and post therapy condition are significantly different (Pre-Post Grief Score- M= 6.1, SD= 9.6; Pre-Post Meaning Score-M=12.5, SD=11.4; Pre-Post Growth- M=11, SD=18.3). According to the findings obtained, there was a significant reduction in the intensity of grief experienced by the participants following the implementation of positive psychotherapy. Alongside, there was a significant improvement in the extent of

meaning and growth experienced by the participants following the implementation of positive psychotherapy.

**Table 2. Comparison of Mean and Standard Deviation between Individual Intervention, Group Intervention, and Control Group Condition**

Groups		Pre Grief Score	Post Grief Score	Pre Meaning Score	Post Meaning Score	Pre Growth Score	Post Growth Score
Control	Mean	<b>41.33</b>	<b>41.00</b>	<b>77.67</b>	<b>96.67</b>	<b>70.33</b>	<b>73.00</b>
	N	<b>12</b>	<b>12</b>	<b>12</b>	<b>12</b>	<b>12</b>	<b>12</b>
	Std. Deviation	<b>24.987</b>	<b>18.358</b>	<b>8.505</b>	<b>7.638</b>	<b>24.846</b>	<b>21.703</b>
Individual	Mean	<b>42.50</b>	<b>35.25</b>	<b>89.00</b>	<b>96.00</b>	<b>63.25</b>	<b>84.00</b>
	N	<b>12</b>	<b>12</b>	<b>12</b>	<b>12</b>	<b>12</b>	<b>12</b>
	Std. Deviation	<b>16.381</b>	<b>19.103</b>	<b>10.132</b>	<b>6.733</b>	<b>4.646</b>	<b>16.990</b>
Group	Mean	<b>34.25</b>	<b>24.75</b>	<b>75.50</b>	<b>88.75</b>	<b>64.50</b>	<b>72.00</b>
	N	<b>12</b>	<b>12</b>	<b>12</b>	<b>12</b>	<b>12</b>	<b>12</b>
	Std. Deviation	<b>11.701</b>	<b>14.104</b>	<b>22.956</b>	<b>11.325</b>	<b>15.460</b>	<b>20.607</b>
Total	Mean	<b>39.18</b>	<b>33.00</b>	<b>81.00</b>	<b>93.55</b>	<b>65.64</b>	<b>76.64</b>
	N	<b>36</b>	<b>36</b>	<b>36</b>	<b>36</b>	<b>36</b>	<b>36</b>
	Std. Deviation	<b>16.185</b>	<b>16.882</b>	<b>15.633</b>	<b>8.847</b>	<b>14.528</b>	<b>18.506</b>

Table 2 presents a comparison of scores across participants in the individual intervention, group intervention, and control conditions. The assessment instruments included the Inventory of Complicated Grief, the Meaning Making in Grief Scale, and the Post-Traumatic Growth Inventory, which were used to measure grief intensity, meaning reconstruction, and post-traumatic growth, respectively.

Regarding the Inventory of Complicated Grief scores, the findings indicate that participants in both the individual and group intervention conditions demonstrated a reduction in grief intensity, suggesting therapeutic progress, whereas no meaningful changes were observed in the control group. Between the two intervention groups, greater improvement was observed in the individual therapy condition (mean score difference = 7.2) compared to the group therapy condition (mean score difference = 9.5).

Similarly, results from the Meaning Making in Grief Scale indicate that participants in both intervention groups experienced enhanced meaning-making capacities, while the control group showed no significant change. In this regard, the individual therapy group demonstrated greater improvement (mean score difference = 7) compared to the group therapy group (mean score difference = 13.5). Specifically, participants in the individual intervention condition showed higher gains on the “being in the present” subscale, reflecting an increased ability to disengage from past-oriented rumination and engage more fully in present experiences to reconstruct meaning following loss. In contrast, participants in the group therapy condition exhibited greater improvement on the “significant others” subscale, suggesting that shared experiences of trauma within a group setting facilitated interpersonal disclosure and social support processes.

In terms of post-traumatic growth, all three groups demonstrated improvement; however, the highest levels of growth were observed in the group therapy condition, while the lowest scores were found in the control group. Within the individual intervention condition, higher gains were observed in the domains of relationships, spirituality, and appreciation of life. Conversely, participants in the group therapy condition showed greater improvements in spirituality and the identification of new possibilities.

### **Qualitative Results**

Thematic Analysis was conducted in order to identify the themes that emerged in relevance to growing through grief and finding meaning in grief. The global, organizational, and subthemes emerged in the qualitative analysis are presented below.

## **Description of the emerged themes**

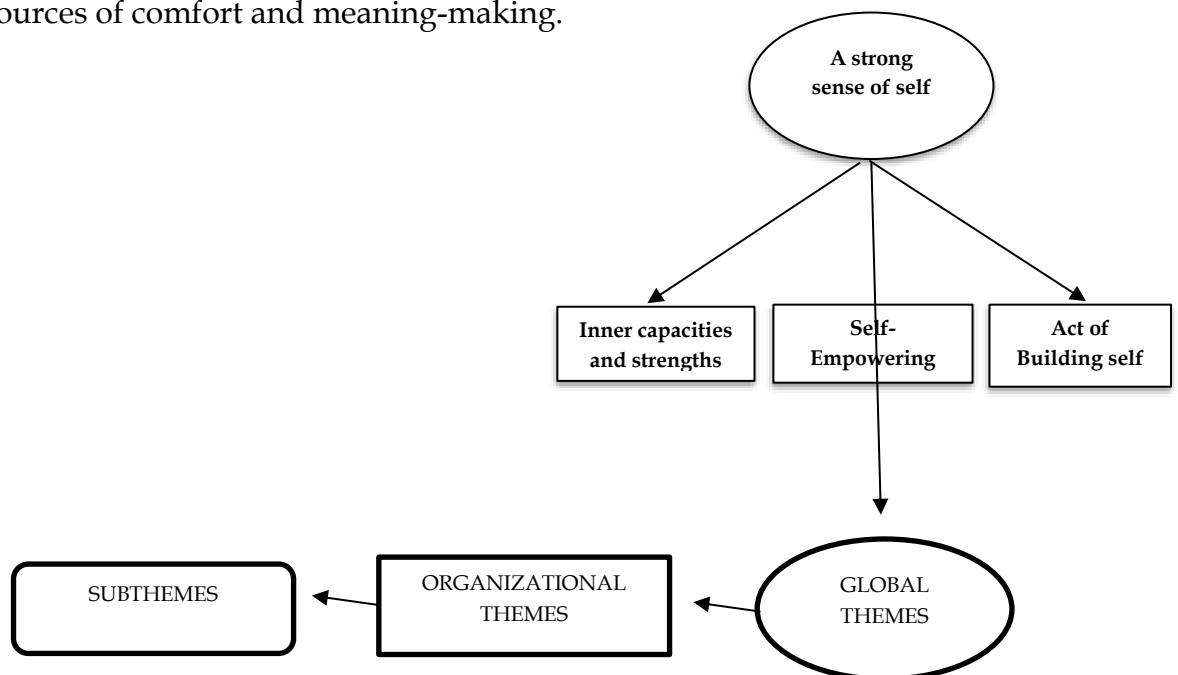
Based on the thematic map, four global themes emerged from the data: Barriers to Growth, A Strong Sense of Self, Growing Through Grief, and Discovering a Sense of Meaning. The theme of Barriers to Growth highlights the factors present prior to the implementation of positive psychotherapy that inhibited the process of growth through bereavement. In contrast, the themes of A Strong Sense of Self, Growing Through Grief, and Discovering a Sense of Meaning reflect the experiences of psychological growth and meaning reconstruction following the intervention. Collectively, these themes illustrate a clear transition from the pre-therapy condition to the post-therapy condition among participants.

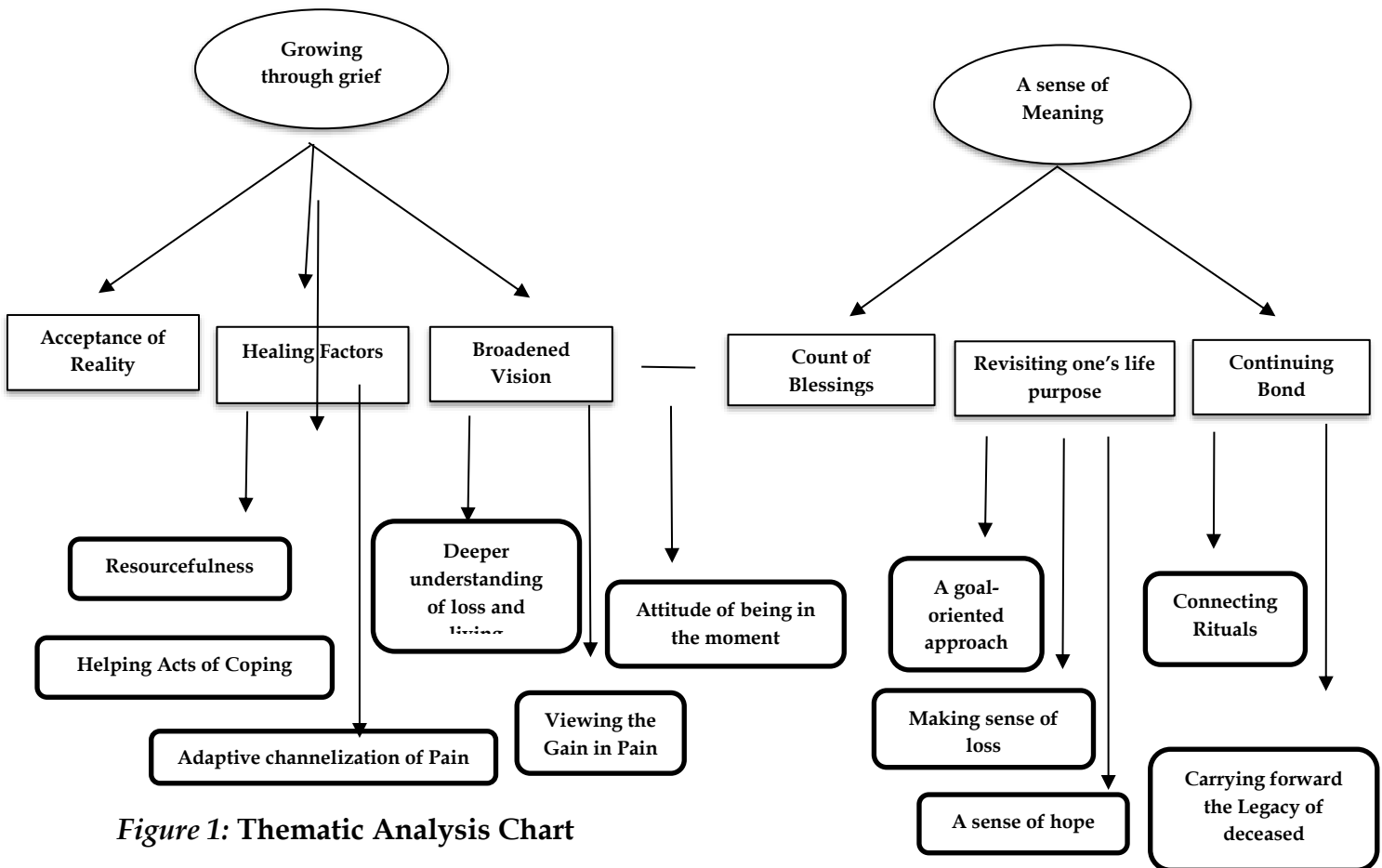
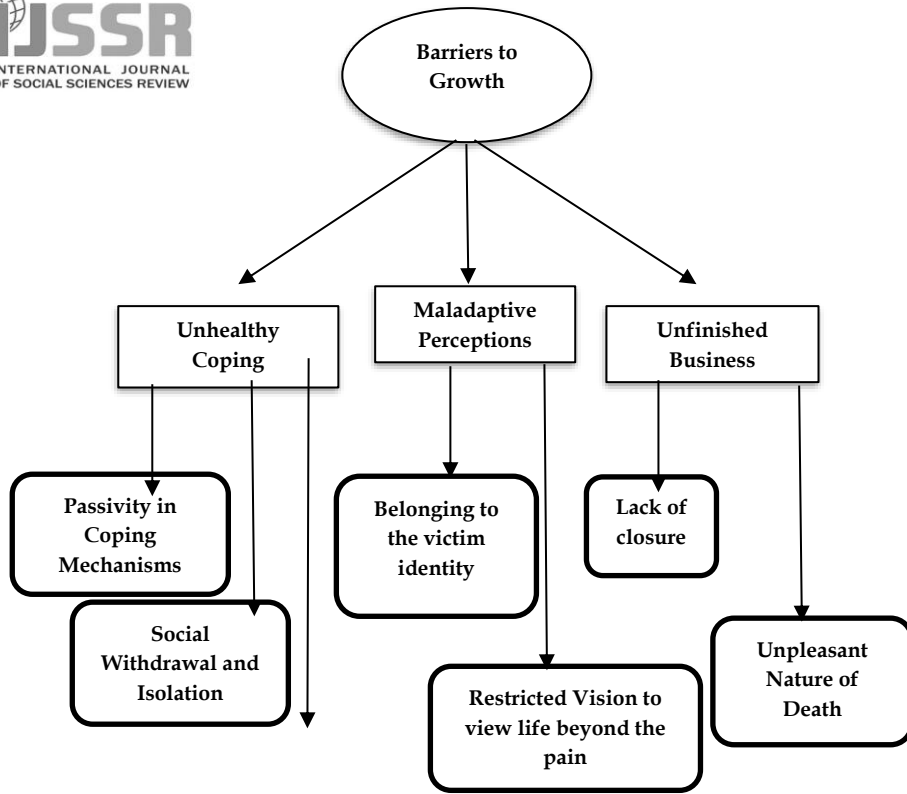
The first global theme, Barriers to Growth, captures the obstacles that hindered participants' adaptive processing of grief. This theme comprises three organizational categories: Unhealthy Coping Mechanisms, Maladaptive Perceptions, and Unfinished Business. Under Unhealthy Coping Mechanisms, subthemes include passivity in coping, social withdrawal, and difficulty in processing emotional pain. Avoidance-based strategies such as denial, withdrawal, and isolation were identified as maladaptive responses that prevented emotional integration and prolonged unresolved grief experiences. The theme of Maladaptive Perceptions reflects dysfunctional and negative belief systems surrounding the loss, which complicated acceptance and adaptation. Its subthemes include identification with a victim identity and a restricted cognitive outlook that limited the ability to envision life beyond suffering. Meanwhile, Unfinished Business encompasses unresolved relational or emotional aspects of the loss, including lack of closure and the distressing circumstances of death. Absence of final communication, unresolved interpersonal conflicts, and sudden or traumatic loss experiences contributed to difficulties in adaptive grieving.

The second global theme, A Strong Sense of Self, explores personal attributes, cognitive frameworks, and behavioral patterns that facilitated adaptive growth following bereavement. This theme includes three organizational dimensions: Inner Capacities and Strengths, Self-Empowering Beliefs, and Acts of Building Sense of Self. Participants identified personal qualities such as resilience, maturity, kindness, self-confidence, and openness to change as facilitating growth-oriented coping. Engagement in prosocial behaviors, social connectedness, and goal-directed activities further supported adaptive adjustment. In addition, self-empowering cognitions such as "I am capable of growing and reconnecting" and "I must design my own journey" reflected internalized beliefs that reinforced psychological resilience and post-loss reconstruction.

The third global theme, *Growing Through Grief*, focuses on adaptive processes that facilitated coping and psychological adjustment. This theme comprises the organizational categories of *Acceptance of Reality*, *Healing Factors*, and *Broadened Vision*. *Acceptance of the reality of loss* emerged as a foundational element enabling emotional integration and meaning reconstruction. Participants who acknowledged the permanence of loss reported greater psychological peace and an enhanced ability to appreciate the positive legacy of the deceased. *Healing Factors* include resource-based coping mechanisms such as gratitude, spirituality, kindness, social support, shared emotional expression, awareness, and cognitive-emotional readjustment. The *Broadened Vision* theme reflects an expanded cognitive perspective that enabled participants to move beyond immediate suffering toward a more comprehensive understanding of life and loss. Subthemes include deeper understanding of life experiences, recognition of positive outcomes emerging from adversity, and present-focused awareness. Participants reported discovering new opportunities, increased independence, compassion, and a renewed sense of direction following the loss.

The fourth global theme, *Discovering a Sense of Meaning*, examines how participants reconstructed meaning, redefined life priorities, and reoriented their purpose following bereavement. This theme includes the organizational categories of *Counting on Blessings*, *Revisiting One’s Life Purpose*, and *Continuing Bonds*. The first reflects increased appreciation of positive aspects of life, which supported adaptive coping and emotional resilience. The second involves the redefinition of personal goals, reconstruction of meaning, and development of hope for the future. The third emphasizes the maintenance of ongoing emotional and symbolic connections with the deceased through rituals and the continuation of their legacy, both of which served as important sources of comfort and meaning-making.





**Figure 1: Thematic Analysis Chart**

**Table 3 Differences and Similarities in Individual and Group Therapy**

<b>Individual Therapy</b>	<b>Group Therapy</b>
Reliance on Internal resources	Reliance on External Resources
Goal Oriented	Relationship Oriented
Self as a priority	Chose others as a priority

According to the study findings, participants in group therapy tended to perceive bereavement as a process that strengthened their connections with other interpersonal relationships, whereas participants in individual therapy tended to interpret death as an opportunity for self-realization, goal reorientation, and the construction of a future-oriented life pathway grounded in personal strengths. In group therapy, decision-making and meaning-making processes were more influenced by the perspectives of others, including reflections related to the deceased, whereas in individual therapy, greater emphasis was placed on personal beliefs, self-reflection, and individual agency in shaping one's life trajectory.

Despite these differences, several similarities were observed between the two intervention conditions. Participants in both group and individual therapy demonstrated hopefulness regarding the future and engaged in efforts to maintain emotional and psychological connections with the deceased. Additionally, both groups showed tendencies toward resolving unfinished business, expanding cognitive and emotional perspectives to identify positive aspects within suffering, and developing an increased appreciation for life through the recognition of personal blessings.

**Table 4 Comparison of therapy and Control Group**

<b>Therapy Group</b>	<b>Control Group</b>
Processed Emotions	Unprocessed Emotions
Broadened Vision	Preoccupied with pain
Discovered a sense of meaning	Focused on Karmic Connections
Active Coping Mechanisms	Passive Coping Mechanisms
New insights with regards to self and future	No change of insights
High Acceptance	Low Acceptance

According to the study findings, participants in both the individual and group therapy conditions were able to access supportive pathways that facilitated emotional expression and processing. In contrast, although participants in the control group



demonstrated some awareness of the need to process emotional pain and reported a reduction in emotional intensity, they did not develop clear strategies or avenues for effective emotional processing.

Participants in the intervention groups were able to attribute positive meanings to the experience of loss, including viewing bereavement as an opportunity to strengthen connections with others, develop a sense of protection or continued bond with the deceased, and foster independence and personal empowerment. Conversely, participants in the control group did not explicitly construct such adaptive meanings and tended to rely more on spiritual or karmic interpretations as a primary framework for understanding their loss. Additionally, individuals in the control condition demonstrated limited ability to recognize personal strengths, available resources, or positive aspects of their experiences.

A notable difference was observed in the development of self-concept, with participants in the therapy groups exhibiting a stronger sense of self compared to those in the control group. Intervention participants predominantly employed active coping strategies, including mobilization of social support, self-care practices, gratitude, and prosocial behaviors such as helping others. In contrast, the control group relied more heavily on spirituality and religious beliefs as their primary coping mechanisms.

Furthermore, participants in the therapy conditions demonstrated a deeper understanding and acceptance of the reality of loss, which facilitated emotional integration and adaptive processing. In comparison, while participants in the control group achieved a certain level of acceptance, the absence of deeper cognitive and emotional integration made it more difficult for them to fully process their grief over time. Individuals in the intervention groups also reported gaining new insights, values, perspectives, and life opportunities following the therapeutic process, whereas such developments were less evident among participants in the control condition.

In the control group, meaning-making was predominantly framed through karmic, spiritual, and religious interpretations, whereas participants in the therapy groups emphasized active responsibility, goal reorientation, cognitive reframing, and the mobilization of personal resources as essential components of adaptive grieving.

Despite these differences, several similarities were observed across both conditions. Memories of the deceased served as an emotional anchor for maintaining a continuing bond. Additionally, participants across all groups reported efforts to

refocus on life goals and address unresolved emotional or relational issues, particularly in relation to unfinished business.

### **Discussion**

According to the study results, participants demonstrated a reduction in grief intensity alongside increased psychological growth and meaning reconstruction following the implementation of positive psychotherapy.

The analysis identified four global themes, namely Barriers to Growth, A Strong Sense of Self, Growing Through Grief, and Discovering a Sense of Meaning. The findings indicate that participants who underwent positive psychotherapy exhibited greater emotional processing, cognitive broadening, enhanced meaning-making, increased engagement in active coping strategies, acquisition of new insights, improved resource mobilization, and higher levels of acceptance of reality compared to participants in the control group. Within the intervention conditions, individuals in the individual therapy group tended to emphasize internal strengths and the development of a stronger sense of self, whereas participants in the group therapy condition placed greater emphasis on external resources and social connectedness as key facilitators of growth through grief.

The literature further supports that healing in bereavement is facilitated by meaning-making processes, emotional expression, and social acknowledgment of loss, all of which address the psychosocial dimensions of grief (Tikka, Garg, & Dubey, 2020). However, the process of integrating loss becomes particularly challenging when the death is sudden, unexpected, or violent, as such circumstances may disrupt fundamental assumptions about the world and its predictability (Schwartzberg & Janoff-Bulman, 1991).

Social support and a sense of belonging are recognized as critical factors in facilitating adaptive grieving processes (Gentry, Baranowski, & Rhoton, 2017). Another central component of grief therapy involves meaning reconstruction, whereby individuals develop more adaptive interpretations of loss by maintaining a continuing sense of connection with the deceased (Davis, Nolen-Hoeksema, & Larson, 1998). In this regard, Klass, Silverman, and Nickman (2014) emphasize the concept of continuing bonds, which reflects a shift from the notion of detachment from the deceased toward maintaining an ongoing symbolic relationship that supports integration and acceptance of loss.

Maintaining an internal connection with the deceased—whether at a mental, emotional, or spiritual level—has been identified as an important element in the adaptive processing of grief (Currier, Neimeyer, & Berman, 2008). In addition, the provision of online psychotherapy and counseling services has been shown to support individuals in gaining new perspectives, reconstructing meaning, adapting life goals, and making sense of bereavement experiences (Naylor, 2020). Encouraging bereaved individuals to recall, share, and write positive memories of the deceased may further promote emotional upliftment and psychological resilience (Parkes, 2014).

Rituals of transition also play an important role in validating life changes, as they allow bereaved individuals to symbolically maintain a connection with the deceased (Gillies & Neimeyer, 2006). In the Indian cultural context, religious beliefs, faith systems, and customary practices are particularly significant, and cultural sensitivity emerges as a key healing factor in the grieving process, as reflected in the study findings.

Overall, the findings of this research highlight pathways toward post-traumatic growth by identifying both barriers and facilitators of adaptive grieving. The results are consistent with existing empirical literature, thereby providing further support for the psychological mechanisms involved in growth through grief. The demonstrated effectiveness of positive psychology interventions has important implications for clinical practice, particularly for mental health professionals working to facilitate adaptive adjustment and growth among bereaved individuals.

## **CONCLUSION**

The present study aimed to examine the effectiveness of positive psychology interventions in facilitating coping processes, personal growth, and meaning-making in the context of loss and bereavement. The findings indicated a significant increase in psychological growth and sense of meaning following the implementation of positive psychology-based interventions.

The results suggest that growth through grief is facilitated by several key factors, including internal capacities, personal strengths, self-empowering beliefs, and the development of a coherent sense of self. Adaptive grieving is characterized by acceptance of reality, effective mobilization of personal resources, constructive channeling of emotional pain, utilization of healthy coping strategies, deeper cognitive and emotional processing of loss, the ability to identify positive aspects within adversity, and a present-focused orientation.

Meaning-making in bereavement was further associated with gratitude and acknowledgment of personal blessings, reassessment and revision of life goals, cognitive efforts to make sense of the loss experience, the development of hope, and the maintenance of continuing bonds with the deceased.

Overall, the findings of the study provide empirical support for pathways leading to post-traumatic growth. These pathways hold important clinical implications, particularly in the context of prolonged or complicated grief. Positive psychology, as an emerging field within mental health, demonstrates promising therapeutic value, and its applicability in grief-related interventions further extends its relevance in clinical practice for bereaved individuals.

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