Mourning and the Transformation of Object Relationships

Evidence for the Persistence of Internal Attachments

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Psychoanalysts from Freud up to the present have defined the goal of mourning as the detachment of libidinal ties from the deceased love object. The author reviewed recent clinical and empirical literature that casts doubt on this assumption by showing that a continuing internal relationship with the lost object is found in many bereaved individuals. These data suggest a need to reconceptualize the changes in object relationships that occur during the process of mourning. Mourning is seen as a process of inner transformation that affects both the images of the self and of the object in the mourner’s inner world. It involves not the breaking of an object tie, but the transformation of that attachment into a sustaining internal presence, which operates as an ongoing component in the individual’s internal world.

Mourning is a topic that has been addressed by a number of psychoanalysts, beginning with Sigmund Freud. In “Mourning and Melancholia,”
Freud (1917/1957) presented a clear and consistent theory of mourning. He stated that the mourner suffers because of his or her internal attachment to the person who has died and that the goal of mourning is to detach those feelings and attachments from the lost object. The result of the mourning process is that the ego becomes free of its former attachments and ready to attach to a new, living person. A review of recent papers on mourning (Dietrich & Shabad, 1989; Horowitz, 1990) indicated that on these points, most psychoanalytic thought remains consistent with Freud’s original theorizing.

The elegance and simplicity of Freud’s formulation, and its accuracy in describing many aspects of the mourning process, are undeniable. Nevertheless, there is both clinical and empirical evidence that calls into question the “detachment” aspect of the theory. Bowlby (1980), on the basis of his comprehensive review of research on attachment and loss, concluded that a continuing sense of the deceased individual’s presence after death can be found in many healthy individuals. Pincus (1974) and Silverman and Silverman (1979) provided case material that supports this view. Rubin (1984, 1985) described ways in which bereaved individuals maintain ongoing internal relationships with love objects after their death. He stated that “the relationship to the image of the deceased following mourning remains a circumscribed but ongoing experience involving recollection, imaging, and association at conscious and unconscious levels” (Rubin, 1984, p. 340). Several research studies have also produced supportive data (Klass, Silverman, & Nickman, 1996; Shuchter, 1986). Informally, many analysts will also admit that the detachment theory is not a complete or fully accurate description of how their patients mourn.

This article reviews theoretical issues and empirical findings that support the need to reconceptualize how changes occur in internal object relationships during the process of mourning. Freud’s theory of mourning is discussed first, as well as more recent psychoanalytic contributions. This is followed by a review of clinical and empirical literature that casts doubt on the detachment theory by showing that a continuing internal relationship to the lost object is found in bereaved individuals who otherwise appear to be adjusting well. This suggests the need to modify the psychoanalytic theory of mourning by proposing that an ongoing internal relationship to the image of the lost object is an important aspect of successful mourning. Mourning is therefore defined as a process of inner transformation of both self and object images. This results in both ego and superego identifications and in the consolidation of a persisting internal
relationship that serves as a sustaining presence for the bereaved individual.

It should be noted at the outset that this article refers only to the phenomena of mourning after the death of a love object. Mourning over other types of losses is also discussed in the psychoanalytic literature but is not a focus of this article.

Mourning and Melancholia

Freud wrote “Mourning and melancholia” at a time when he had not yet articulated his structural theory of the psyche. As he then conceived of mental life in terms of libidinal cathexes, he defined the work of mourning as follows: “Reality testing has shown that the loved object no longer exists, and it proceeds to demand that all libido shall be withdrawn from its attachments to that object” (Freud, 1917/1957, p. 244). Throughout, Freud emphasized the importance of reality testing as the impetus to mourning. Later in the work, he stated that “each single one of the memories and situations of expectancy . . . is met by the verdict of reality that the object no longer exists.” Also, because the satisfactions that come from being alive outweigh the satisfactions that come from the attachment to the deceased object, “the ego . . . is persuaded . . . to sever its attachment to the object that has been abolished” (Freud, 1917/1957, p. 255).

Freud noted that the libido resists withdrawing from the object, which may account for the intense pain that characterizes mourning. However, the completion of mourning involves the detachment of emotional bonds from the representation of the lost object, such that when all of these bonds are detached, they leave the person “free and uninhibited again” (Freud, 1917/1957, p. 245).

In this same work, Freud also described how some patients identify with the lost object, but he saw this as a pathological process found in melancholia. In melancholic loss, libido is withdrawn from the object but not displaced on to another object. Instead this libido served to establish an identification of the ego with the abandoned object. Thus the shadow of the object fell upon the ego, and the latter could henceforth be judged by a special agency, as though it were an object, the forsaken object. In this way an object loss was transformed into an ego loss. (Freud, 1917/1957, p. 249)

He appears to be describing identification as an abnormal process characteristic of melancholia, but not of normal mourning which leads to
"withdrawal of the libido from this object and a displacement of it on to a new one" (Freud, 1917/1957, p. 249)

The Process of Identification and Its Relevance to Mourning

Whereas in "Mourning and melancholia" identification was described as a pathological outcome of loss, in "The Ego and the Id," Freud (1923/1961) changed this view radically. He stated that although identification is seen in melancholia, it is also a "common and typical" reaction that leads to changes in the ego and ultimately to the formation of character. When a person has to give up a sexual object, "there quite often ensues an alteration of his ego which can only be described as a setting up of the object inside the ego, as it occurs in melancholia" (Freud, 1923/1961, p. 19). Freud even suggested that identification may be "the sole condition under which the id can give up its objects" (Freud, 1923/1961, p.19). He further posited this as a central process in the formation of the ego, stating that "the character of the ego is a precipitate of abandoned object cathexes and that it contains the history of those object-choices" (Freud, 1923/1961, p. 19).

This was a radical shift in his view on identification, a shift that corresponded with his development of the structural theory of the psyche and with his formulation of ego psychology. However, it seems Freud is writing about normal personality development here and not about bereavement per se. What type of identifications might occur after a death, and what would be considered normal or pathological in this area, were not addressed by Freud in these writings.

In subsequent years, however, there have been numerous analysts who have studied the process of identification in great detail, both as a general process and as an outgrowth of loss and mourning. The literature on identification is not reviewed herein except as it relates to the thesis of this article. The interested reader is directed to Loewald (1962) and Furman (1974) for reviews of the concept of identification and its relation to mourning, or to Meissner (1981) for a comprehensive discussion of the psychoanalytic theory of internalization.

The major trend in psychoanalytic theories of loss after Freud has been to study the process of identification in great detail but to direct less attention to the fate of the object representations after a death. When there has been a continuing attachment to the lost object, it has usually been viewed as a sign of unresolved mourning.
Other Psychoanalytic Contributions

Since Freud's seminal work on mourning, many analysts have written about the long-term effects of unresolved mourning during childhood. (Deutsch, 1937; Fleming & Altschul, 1963; Jacobson, 1971, chapter 7). Wolfenstein (1966, 1973) presented several cases of unresolved mourning in children, in which the children maintained persisting fantasies that their parent was still alive somewhere and would someday be returning to them. On the basis of these cases, Wolfenstein concluded that children are not able to mourn the loss of a parent until they have successfully separated from their parents during the adolescent period. (See Furman, 1974, for a positive view on children's ability to mourn.)

These seminal works on unresolved mourning have set the tone for subsequent psychoanalytic thinking. By describing the way that reunion fantasies are often found in individuals whose mourning is unresolved, they supported the broader conclusion that healthy mourning requires the giving up of all active internal fantasies about the deceased love object. As Bowlby (1980) has noted however, these observations about pathological mourning have been inappropriately generalized and applied to the context of healthy mourning and grief.

There are fewer analysts who have written about normal, nonpathological mourning processes (Pollock, 1978; Siggins, 1966). Horowitz (1990) has developed the most elaborate framework for studying the internal changes that occur following the death of a love object. Referring to self-representations as “self-schemas” and object relationships as “role-relationship models,” Horowitz described how after the death of a loved one, the mourner’s “schemas” about his or her important relationships come into conflict. The individual wants to hold onto the old schemas in which the beloved is alive, but he or she is also confronted by reality and its indications that the beloved is gone and is no longer available.

In Horowitz's (1990) model, mourning involves a “working through” process in which the individual’s schemas of self and other come into line with the demands of reality, and the individual is able to accept a new image of him- or herself that is an accurate view of his or her present situation. In addition, “a new, enduring role relationship model develops in which the self is related to the person in the past, but not in the present or future except through memories” (Horowitz, 1990, p. 317). Like most other psychoanalytic authors however, this view of mourning emphasizes the detachment of almost all emotional ties from the representa-
tion of the deceased individual. It does not describe any role for a continuing bond to the person who died.

Object Relations Theory

A different perspective on mourning can be found in the object relations theory of Melanie Klein (1940/1975b), who placed less emphasis on detachment from object ties during mourning. Klein conceived of mourning as a process of "reparation," in which the destructive fantasies unleashed by the loss are contained, and a positive internal relationship with the lost object is reestablished.

According to Klein (1935/1975a), the loss of an important love object in adulthood leads to a reactivation of the depressive position of infancy. This loss in the external world stimulates the individual’s fantasies that the good internal objects have been lost as well and that the bad internal objects are dominant in the inner world. This leads to intense, primitive feelings of guilt, persecution, and punishment on the one hand, and feelings of hatred toward the deceased object for having abandoned him or her, on the other. Internally, the mourner experiences a wish to restore and repair the lost and damaged “good object.” Through the process of reparation, the individual re-creates internally what was felt to be lost (Segal, 1974).

In Klein’s words, the “inner world, the one which [the individual] has built up from his earliest days onwards, in his phantasy was destroyed when the actual loss occurred. The rebuilding of this inner world characterizes the successful work of mourning” (Klein, 1940/1975b, p. 363). In this process, the person who died is reinstated in the mourner’s ego, along with other loved internal objects from childhood. In successful mourning, therefore, the individual is “recovering what he had already attained in childhood” (Klein, 1940/1975b, p. 362).

The result of the mourning process is more than a simple restoration of the previous state of internal equilibrium, however. In Klein’s (1940/1975b) view, the personality is enriched by gaining a better ability to appreciate other people and other experiences in their life. There also results “a deepening in the individual’s relation to his inner objects” which includes both an increased trust in those objects and a greater love for them because they survived and “proved to be good and helpful after all” (Klein, 1940/1975b, p. 360).

Klein was trying to describe some positive changes in the psyche that result from the successful mourning process. Her emphasis is not on
detaching from emotional ties to the deceased individual, but rather on preserving and restoring the internal object relationship in the mourner's personality. In her model, the bereaved individual strives to successfully hold on to something from the past, rather than striving to simply let it go. This concept provides the basis for a broader reconceptualization of object relationships after loss, which is elaborated in a later section of this article.

Attachment Theory and Related Developments

Another perspective on mourning comes from John Bowlby's study of maternal deprivation in young children, and of child and adult reactions to separation and loss. After reviewing the existing research on bereavement and mourning, Bowlby (1980) observed that adults as well as children show signs of continuing thoughts and fantasies about a deceased love object well after the death has occurred. He concluded that a continuing sense of the presence of the dead person is not pathological but is often compatible with a normal mourning process. "Failure to recognize that a continuing sense of the dead person's presence, either as a constant companion or in some specific and appropriate location, is a common feature of healthy mourning has led to much confused theorizing" (Bowlby, 1980, p. 100). Indeed, Bowlby (1980) went on to state the following:

For many widows and widowers it is precisely because they are willing for their feelings of attachment to the dead spouse to persist that their sense of identity is preserved and they become able to reorganize their lives along lines they find meaningful. (p. 98)

Bowlby (1980) observed that there are many cases of pathological mourning, but that they are not defined by the presence of an ongoing psychological involvement on the part of the bereaved. He defined two main variants of pathological mourning: chronic mourning and its opposite, a prolonged absence of conscious grieving. Chronic mourning is characterized by unusually intense and prolonged emotional reactions, in many cases with persistent anger or self-reproach, and with depression as a principal symptom though often combined with anxiety. This pathological reaction was not the same as the simple persistence of thoughts and feelings about the deceased, which was found to be relatively common in normal samples of bereaved adults (cf. Glick, Weiss, & Parkes, 1974).

Attachment theory has since opened up numerous lines of research on human personality and development, from Ainsworth's discovery of
different childhood response styles to separation (Ainsworth, Blehar, Waters, & Wall, 1978) to recent research on adult attachment (Hazan & Shaver, 1987; Sperling & Berman, 1994). Bowlby's concept of "internal working models," which are individuals' internal representations of their experience of attachment relationships, has provided the basis for a new method of studying adult attachment styles (Main, Kaplan, & Cassidy, 1985). Diamond and Blatt (1994) reviewed both theoretical and empirical literature on internal working models and compared these concepts to psychoanalytic theories of object-relations and separation-individuation processes.

Bowlby's study of attachment and loss has also led to a broader theoretical perspective that emphasizes the importance of intimate attachments throughout the course of life (Bowlby, 1988).

Attachment theory regards the propensity to make intimate emotional bonds to particular individuals as a basic component of human nature, already present in germinal form in the neonate and continuing through adult life into old age... The capacity to make intimate emotional bonds with other individuals, sometimes in the careseeking role and sometimes in the caregiving one, is regarded as a principal feature of effective personality functioning and mental health. (Bowlby, 1988, pp. 120–121)

The contributions of attachment theory to psychoanalytic theory as a whole have been reviewed by Mitchell (1988) and Osofsky (1995). Attachment theory thus provides a framework that is conducive to studying the persistence of attachments after loss, as well as a methodology that could be used to study internal attachments (or "working models").

Empirical Literature on the Internal Relationship

It should be noted that most psychoanalytic observers before Bowlby derived their ideas from clinical experience with child and adult patients in psychotherapy or psychoanalysis. They were much more likely to observe maladaptive reactions to loss and to base their ideas on those maladaptive reactions. The response of nonpatients to loss has received less attention in the psychoanalytic literature. The results from empirical studies of unselected groups of bereaved adults and children are summarized in this section. Among other things, these studies examine the intrapsychic legacy of mourning—How often do internalized relationships continue to exist after loss?

Shuchter (1986) and Zisook and Shuchter (1986) conducted a comprehensive study of 70 widows and widowers whom they followed for up
to 4 years after the death of their spouses. Besides asking widows and
widowers about their emotional and behavioral responses to the death, the
investigators asked about ways in which they continued their connection
to the deceased spouse. They found that a significant percentage of these
bereaved individuals developed ways to continue their ties to the spouse,
either through dreams and memories, by keeping some of their personal
possessions, by taking on some of the behaviors and traits of the deceased,
or by experiencing some type of continuing contact with the deceased
individual.

The experience of continuing contact included sensing the presence
of the deceased in some way. At times, the bereaved individuals would
describe incidents in which they felt the deceased was trying to commu-
nicate something to them or in which they felt that the person had
somehow intervened in their life in a positive and protective way. Others
would simply describe an inner feeling of the person’s presence.

Many of the widows and widowers would also attempt to commu-
nicate with the deceased in a variety of ways. Sometimes these were inner
dialogues that were reminiscent of actual conversations they might have
had with the spouse while he or she were alive. They might recount the
day-to-day events of their lives, especially those events that the person
who died would have been most interested in. Other dialogues were
devoted to problem solving; it seemed helpful for them to imagine what
the spouse would have said in talking over a complicated or problematic
situation. At still other times they might communicate a need for help and
protection, especially when they were facing potentially dangerous situ-
ations such as illness or surgery.

Shuchter (1986) concluded from these data that the “task” of mourn-
ing is not the decathexis of the dead spouse but “the establishment of a
form of continuing relationship that both satisfies the emotional need of
the bereaved to maintain their ties and allows for grieving and living to
proceed” (p. 319). Because this requires “reworking” many issues in the
marriage relationship, Shuchter suggested that the process will occur over
a period of many years. He did not suggest how to determine whether this
continuing relationship is an adaptive one or an indication of pathology.

A systematic longitudinal study of bereaved children has been done
by Silverman and Worden (1992). They interviewed 125 children, ages 6
to 17, who had experienced the death of one of their parents. The children
were interviewed 4 months after the parent’s death and again a year after
the death. The investigators took a particular interest in the child’s ways
of remaining connected to the parent who died (Silverman, Nickman, &
Worden, 1992). Most of the children maintained a connection to the deceased parent through dreams, waking memories, and by keeping personal objects that had belonged to the parent.

A large majority of the children (81%) felt as if the deceased parent was watching them from heaven, although this was a source of some anxiety for the children due to fear of the parent’s disapproval. Silverman et al. (1992) found that slightly more than half of the children engaged in mental conversations with the deceased parent. These could range from a simple greeting to giving an account of the day’s events, including accomplishments that the child felt proud of.

Silverman et al. (1992) suggested that it is adaptive for bereaved children to maintain an internal connection to the parent who died. They refer to the child as constructing this inner representation of the parent rather than simply recording their memories of the parent when he or she was alive. They found that the internal representations of the parent are more dynamic and interactive than previous observers have suggested, that they are active constructions that change over time and that also reflect the influence of other figures in the child’s social environment, especially the surviving parent.

In a subsequent work, Normand, Silverman, and Nickman (1996) reported a further analysis of these data and extended it to include a 2-year follow-up of the children. They studied the question of whether internal relationships were sustained over the 2 years that the children were studied and whether they changed over time. They described four types of continuing internal bonds: (a) the dead person as a ghost, whose presence was frightening, unpredictable, and out of the child’s control; (b) memories of the deceased as simple reminiscences but with no sense of emotional communication with the person; (c) maintaining an “interactive” relationship with the deceased through a sense of talking with them, sharing feelings and events, and praying to them; and (d) becoming a living legacy through internalizing the parent’s values, goals, or characteristic behaviors as a way of remaining connected to them. Normand et al. found a trend for the children to move toward the latter two types of internal bonds by the end of the 2-year study.

An ethnographic study of bereaved parents was carried out over several years by Klass (1988, 1996), who interviewed members of a large self-help group of bereaved parents. He found that continuing internal relationships with the dead child were common in these parents and that they frequently provided comfort and solace to the parent even after the most painful period of grieving had passed. Although identifications with
the deceased child were also found in these parents, these did not replace the active internal memories which continued as solace-giving introjections. The self-help group served to support and make real the parents’ internal ties to the deceased children, as well as to give parents the opportunity to feel successful in a quasi-parental role through giving to other parents in the group.

Marwit and Klass (1996) collected written responses from 71 university students who had experienced a loss and examined their answers to a series of questions about how the death had changed their lives and what role the deceased had played—and continued to play—in their lives. Respondents ranged in age from late teens through middle age, and most had lost a grandparent or peer, although a few had lost a parent or spouse. An analysis of their responses identified four types of roles that the deceased individual was seen as playing in the lives of these students: (a) as a role model with whom to identify; (b) as a source of situation-specific guidance in solving current life problems; (c) for clarification of values, especially values the deceased person believed in that could be either accepted or rejected by the bereaved; and (d) as a remembrance or reminiscence that brought feelings of comfort or happiness to the individual.

Of these four types, remembrance was the most commonly reported way that the deceased played a continuing role in the bereaved person’s life. There was no correlation between the type of internalization and the respondent’s subjective sense of having resolved his or her feelings about the person’s death. Thus, more active types of internal relationships, such as mental conversations with the deceased, were not indicative of unresolved mourning in this sample.

The Normal Range of Mourning and the Question of Pathology

Having found that persisting relationships with the deceased are found frequently in studies of both adults and children, several questions then arise. Why is it that a significant number of individuals—over half in Shuchter’s (1986) study—report signs of a continuing internal relationship, whereas others do not? Empirical studies to date have not studied the difference between these two groups of individuals. It is likely that both groups fall within the range of normality but include some individuals whose grief is dysfunctional. Among individuals who maintain an internal connection, it appears that many find this to be a comforting and sustaining experience as they cope with life after bereavement. There may be a
smaller group, however, whose preoccupation with the deceased is excessive, and who are working to maintain a sense of connection out of a depressive sense of emptiness and abandonment. Similarly, some individuals who do not maintain an active inner connection may react this way because of a generalized defensive style of emotional avoidance (Bonanno, Keltner, Holen, & Horowitz, 1995) and a preference for an action-oriented coping style. Again, however, there will be others for whom this style is a way of warding off depressive affect and avoiding the internal processing that would allow them to acknowledge the depth of their loss and their feelings of depression and abandonment.

Another question has to do with whether individuals use different ways of maintaining internal connections with the deceased. It is not clear from the studies summarized earlier as to how much overlap there is among the different types of connections. In general, it seems apparent that the quality of the internalized relationship after loss should reflect the nature of the bereaved’s attachment to the deceased prior to the death. For example, a marriage that is strongly based on admiration or idealization of the spouse, should lead the bereaved to model themselves after the deceased in both conscious and unconscious ways as a way of preserving an internal connection to the spouse. A marriage that is based largely on friendship and companionship might lead the bereaved spouse to maintain an inner dialogue with the deceased about everyday matters and problems to be solved. This question needs to be addressed specifically in future studies of bereavement.

It is likely that there are distinct developmental differences between the types of internalizations seen in adults as opposed to children. The child’s internalized object relationship after death should differ not only because of developmental differences in ego capacities, but also because the child’s actual dependence on a lost parental object is of a more profound nature than that of an adult (Baker, Sedney, & Gross, 1992). First, the parent’s love and acceptance are especially important to the child, and the memory and image of those feelings is a key aspect of the child’s ability to love and value him- or herself. These should be found universally in bereaved children, and their absence is a sign either of a truly unsatisfactory relationship with that parent before death or of a disturbed grief process. Second, children universally turn to their parents as identification figures, so that a wish to model oneself after the deceased should be found in a high percentage of healthy bereaved children.

Another important question relates to the question of normality and pathology. What might distinguish a more healthy internal relationship
after loss from a more disturbed and pathological one? In addressing this question, one must first acknowledge that there are numerous variations of grieving that fall within the normal range. This article does not propose that there is one correct way to grieve. There will be numerous variants based on the mourner's character structure, which will color the ways in which the bereaved individual has access to his or her memories and fantasies about the person who died.

Having allowed for a broad range of normality, the first dimension that is useful in assessing the inner representations during grief is a quantitative one: the degree to which the bereaved individual is preoccupied with images and memories of the deceased. The mourner, at least after the initial period of 6–12 months, should neither be constantly preoccupied with memories and fantasies about the deceased nor have no contact at all with those internal images. Being overly preoccupied by such memories can greatly interfere with the ability to adapt to the necessities of everyday living and coping. By the same token, an inability to access those memories and a need to avoid them totally in order to maintain emotional equilibrium could also be considered unhealthy. This dimension parallels Bowlby's (1980) distinction between chronic and absent mourning.

A second dimension of healthy mourning relates to the affective quality of the internal images and representations. In the normal range of mourning, the representation of the deceased should have a realistic mixture of both positive and negative qualities, reflecting in part the real person who has died. This is not to say that the memory or representation should be an exact duplicate of the love object in life; any representation is a selective construction based on the individual's emotional experiences with the person. With that in mind, however, it can be considered a pathological sign if an individual's memories are either exclusively positive (idealized) or exclusively negative (devalued; Rubin, 1984).

A third proposed dimension has to do with the individual's way of experiencing memories of the deceased. If memories continue to intrude in a sudden and dysphoric way into the consciousness of the mourner beyond the early period, this may be a sign of pathological mourning. As Rubin (1984) noted, memories of the deceased should be available casually and not repressed or warded off habitually and should evoke a sense of well-being rather than dysphoria or threat. The mourner should have some degree of voluntary control over his or her access to memories. A final aspect of healthy mourning is that memories of the deceased should be open to change and not isolated or rigidified in some way (Rubin, 1984).
Because normal personality development throughout the life span involves adaptation and change, the internal relationship to the deceased should also be expected to change gradually over time while nevertheless retaining many of its core characteristics.

This is a brief and speculative review of possible characteristics of healthy mourning, but it is based only on an assessment of the individual’s internal representations of the deceased love object. It should be noted that there are other aspects of the bereaved’s experience and behavior that could indicate a dysfunctional mourning process, as found in recent articles proposing a diagnosis of “complicated grief” (Horowitz et al., 1997; Prigerson et al., 1996.)

The Transformation of Object Relationships in Mourning

The intent of this article is to conceptualize mourning not as a detachment process but as a process of transformation. The process of inner transformation affects the images both of the self and of the object in the mourning individual’s inner world. One of the results of the mourning process is the creation of an internal relationship that allows the bereaved to maintain some tie with the inner representation of the love object but that also leaves room for investment in new relationships and new activities (Shuchter, 1986). The outcome is one of balanced relating to inner and outer objects.

Internal object relationships are complex; they consist of an image of the object, an image of the self relating to the object, and an affective valence reflecting the experienced relationship between these images of the self and other (Horowitz, 1987, 1988; Kernberg, 1966). In the language of ego psychology, these images would be referred to as self-representations and object representations (Jacobson, 1964; Beres & Joseph, 1970). The transformation of object relationships in mourning requires an internal separation-individuation process in which certain aspects of the self are no longer tied to the object image.

There are several different outcomes of this process. The self-image usually changes through identification with certain qualities of the deceased individual. These are internalized as superego or ego-ideal identifications (see Loewald, 1962; Meissner, 1981; Schafer, 1968). The other result of this process is a transformed inner relationship with the deceased love object. The psychic relationship with a living person must be transformed into an ongoing, internal relationship to the memory or representation of the love object. This is a durable internal relationship that
becomes, in effect, a new type of sustaining presence for the bereaved individual (Baker et al., 1992; Shapiro, 1994).

This transformed inner relationship is not identical to the previously existing object relationship for two reasons. First, the beloved individual is physically gone and is no longer available to provide the real-world assistance that he or she could have provided while alive. Second, the inner representations of a relationship with a living person are constantly in flux, reflecting ongoing changes in the outer relationship (Stierlin, 1970). After a death, the bereaved must reevaluate both his or her own role in the relationship as well as that of the partner or love object (Horowitz, 1990). This reevaluation should lead to a sorting-out process in which certain aspects of experience are assigned to the self and some to the other in a way that would not have been possible during the person’s lifetime.

There are several important characteristics of this newly created internal object relationship with the deceased individual. First and perhaps most important is the loving and caring qualities of the object relationship. The bereaved individual could, at times of stress, turn in fantasy to that inner object representation and experience some of the same emotional nurturance and reassurance that the object would have provided were he or she still alive (Klass, 1988, p. 52). A second characteristic of the continuing internal object representation is the problem-solving aspect of the relationship between the mourner and the deceased. Widowed adults report that it helps them considerably to “talk out” a problem or situation in their own mind, imagining the part that would be played by the deceased (Shuchter, 1986). This problem-solving aspect of the relationship could be preserved internally in a way that supports the ego functioning of the bereaved and is not simply defensive. A third characteristic is the identity-maintaining qualities of the relationship. Widows or widowers who review the events of the day in their imagination with the person who died are using the internal relationship not just to decrease their feelings of loneliness, but also to sort out their own thoughts and to define their own wishes, needs, and feelings. They are using the internal relationship to define and maintain their sense of self-identity.

All of these characteristics would be described by Stierlin (1970) as autonomy-furthering qualities of the inner object relationship. They allow the individual to fall back on himself by “relating to some part within him. They constitute inner resources, and facilitate an inner dialogue” (p. 323). In normal child development, internalized objects allow children to function independently from their caretaking figures. In mourning they allow
individuals to function more successfully on their own despite the permanent physical absence of the person who has died.

In healthy mourning, some of the functions of the internal object are gradually taken over by new relationships with new objects in the external world. Yet there are aspects of the internal relationship with the deceased that remain unique. The self is never again the same as it was in that relationship, and the object too is found to be unique in ways that cannot be fully replaced. It is this core of individuality, of uniqueness of the self- and object representations, that characterizes a continuing, healthy "introject" in the personality of the bereaved individual. Freud stated the following in a letter to a colleague, Leonard Binswanger, who had lost a child:

"Although we know that after such a loss the acute state of mourning will subside, we also know that we shall remain inconsolable and will never find a substitute [for the person who died]. No matter what may fill the gap, even if it be filled completely, it nevertheless remains something else. (E. L. Freud, 1960, p. 386)"

A continuing internal relationship can coexist with the development of new object relationships, which in turn enrich the inner world in their own unique ways. It is this coexistence of inner attachments in the mourning individual, even long after the death of the love object, that needs to be recognized and better understood.

A Note on Countertransference and Values

A view of mourning that includes a persisting attachment to the deceased love object has several implications for the conduct of psychotherapy and psychoanalysis. Although most of them cannot be elaborated herein, it should be noted that this perspective can help the analyst avoid countertransference difficulties in working with bereaved patients. The analyst who bases interpretations on a narrow understanding of the detachment model of mourning may have difficulty empathizing with the patient's need to preserve internal stability through rebuilding the internal attachment to the deceased love object. If the patient senses that the analyst views inner attachments as pathological and regressive, the patient may attempt to comply with the analyst's view by repressing his or her awareness of these internal attachments, thus removing them from active psychoanalytic work. Ultimately this would greatly interfere with the analytic work that is necessary to transform the inner attachment to a new form that can coexist more easily with new attachments.
Beyond this issue is the question of values as its relates to the emotional attachments of the bereaved individual. Stroebe, Gergen, Gergen, and Stroebe (1992) described and compared (a) the “modernist” emphasis on achieving autonomy by breaking off emotional bonds with a deceased love object with (b) the “romanticist” emphasis on preserving such bonds as essential aspects of identity and personal meaning. Each patient, and each analyst as well, will relate to these two contradictory values in an individualized way. Analysts who value internal attachments may have difficulty helping patients whose values are more consistent with a modernist value orientation. Conversely, the analyst who values autonomy very highly, may have difficulty empathizing with the patient who places greater value on preserving emotional ties. This is an additional dimension that arises when mourning is seen as a process of balanced object relating and not simply one of detachment.

References


