

# Grief's paradox: Approach and avoidance behaviour in prolonged grief

Published: 03-06-2021

Last updated: 08-04-2024

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<b>Ethical review</b>	Approved WMO
<b>Status</b>	Pending
<b>Health condition type</b>	Other condition
<b>Study type</b>	Observational non invasive

## Summary

### ID

NL-OMON50972

### Source

ToetsingOnline

### Brief title

Grief's paradox

### Condition

- Other condition

### Synonym

complicated grief, disturbed grief, prolonged grief

### Health condition

langdurige rouw

### Research involving

Human

## Sponsors and support

**Primary sponsor:** Rijksuniversiteit Groningen

**Source(s) of monetary or material Support:** VENI

## Intervention

**Keyword:** Approach, Approach avoidance task, Avoidance, Eye-tracking, Grief

## Outcome measures

### Primary outcome

Task 1A: Average total gaze time, average fixation time for lost-person stimuli and loss-reality stimuli in a free-viewing eye-tracking task and average total gaze time for these stimuli in a reaction time task.

Task 1B: Differences in median reaction times between approach and avoidance trials for lost-person stimuli and for loss-reality stimuli in an approach-avoidance task

### Secondary outcome

Questionnaire measures

The following constructs will be measured with questionnaires:

Rumination

Yearning

Proximity-seeking behavior

Desired (continued) attachment with the deceased

Loss avoidance

Experiential avoidance

# Study description

## Background summary

Approximately 10% of bereaved persons develop severe, disabling and persistent grief, termed Prolonged Grief Disorder (PGD), included in the 11th International Classification of Diseases\* (ICD-11) in 2018. A similarly named disorder is expected to be included in an upcoming revision of the Diagnostic and Statistical Manual of Mental Disorders 5 (DSM-5, American Psychiatric Association, 2020).

Approach of lost-person reminders is assumed to be a central mechanism perpetuating PGD and laboratory research indeed demonstrates persons with PGD show heightened approach of lost-person reminders. Yet, grief theorists also near-universally assume that avoidance of lost-person reminders perpetuates PGD and countering such avoidance is a critical ingredient of PGD treatment. This yields what we term grief's paradox: approach and avoidance of lost-person reminders are both assumed to sustain PGD.

Current theories and empirical studies fail to explain grief's paradox, for three reasons. First, prior studies have often overlooked the fact that cognitive-behavioural theories do not presume persons with PGD avoid lost-person cues per se, but rather those cues that signal the permanence of separation with the deceased (loss-reality). Second, pioneering research has shown multiple lost person approach behaviors (e.g., rumination, yearning) sustaining PGD may in fact serve to avoid this loss-reality. Third, such behaviors are self-perpetuating not only because they avoid the loss-reality (and related distress) but also because they are intrinsically rewarding (e.g. because they increase feelings of loyalty and connectedness with the deceased).

Therefore, we will test the new Approach-avoidance Processing Hypothesis (APH), which holds that PGD is characterized by multiple, self-perpetuating, repetitive behaviors that seem to reflect approach of the lost person, yet may paradoxically serve as loss-reality avoidance. This study provides the first test of APH in a study using behavioural measures to clarify which approach and avoidance mechanisms underlie PGD. APH's clinical translational implication could be that effective exposure treatment for PGD reduces avoidance of reminders of the loss-reality and thereby approach of the deceased.

## Study objective

The primary objective of this study is to test APH.

Study 1A will test the hypothesis that bereaved individuals with PGD (vs. non-PGD), show heightened approach of lost-person cues and heightened avoidance of loss-reality cues.

Study 1B will test the pervasiveness of these processes, by testing the hypothesis that these group (PGD vs non-PGD) differences are mirrored in automatic approach and avoidance tendencies for lost-person and loss-reality

cues

## **Study design**

Observational study

## **Study burden and risks**

During the study people will be interviewed, and will fill out questionnaires on loss-related characteristics, feelings and cognitions. The interview and the questionnaires have been validated previously in bereaved samples and used repeatedly in prior research and generally elicit no or limited amounts of negative emotions among participants. During two subsequent behavioral tasks, participants will also be requested to repeatedly look at pictures of the deceased, combined with loss-related words. The use of loss-related (or trauma-related) cues in grief (and trauma) research is also common and generally elicits negligible participant burden. This is also in line with our experience from two prior similar studies.

## **Contacts**

### **Public**

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## **Trial sites**

### **Listed location countries**

Netherlands

## Eligibility criteria

### Age

Adults (18-64 years)

Elderly (65 years and older)

### Inclusion criteria

- adult (>18 year)
- experienced the death of a loved one
- probable prolonged grief disorder ( $n \leq 64$ )
- no probable prolonged grief disorder ( $n \leq 64$ )

### Exclusion criteria

- Non-adult (17 years or younger)
- Has experienced another type of loss than the death of a relative (e.g., death of a pet, missing relative)
- Is mentally retarded (i.e., primary school or less as highest education level)
- Currently experiences or has experienced a psychosis in the past
- Currently experiences suicidal ideation or has suicide plans

## Study design

### Design

Study type:	Observational non invasive
Intervention model:	Other
Allocation:	Non-randomized controlled trial
Masking:	Open (masking not used)
Control:	Active
Primary purpose:	Other

### Recruitment

NL	
Recruitment status:	Pending
Start date (anticipated):	01-06-2021

Enrollment: 128  
Type: Anticipated

## Ethics review

Approved WMO  
Date: 03-06-2021  
Application type: First submission  
Review commission: METC Universitair Medisch Centrum Groningen (Groningen)

## Study registrations

### Followed up by the following (possibly more current) registration

No registrations found.

### Other (possibly less up-to-date) registrations in this register

No registrations found.

### In other registers

Register	ID
CCMO	NL75661.042.20