



Existential Social Work in Coping with Death and Grief

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Abstract

This article delves into the use of existential social work in coping with death and grief. After defining death and grief, the article explores individuals' attitudes towards death and the theoretical perspectives related to death and grief. The article further examines the fundamental concept of existentialism within the context of coping with death and grief. The article then considers the theoretical basis of an existentialist approach to social work evaluation and intervention. It highlights the importance of an existentialist approach in the process of coping with death and grief, as it encourages individuals to confront the reality of death and find meaning in life. Ultimately, the article contributes to the field of social work by providing insights into the theoretical foundations of existential social work in the context of death and grief. In order to enhance understanding, this article includes a case example, contributing to a deeper understanding of the practical application of existential social work in dealing with death and grief.

Keywords Death · Grief · Existentialism · Existential Social Work

Facing The Mortality

Death is a complex and multifaceted concept that holds a significant place in the human experience. It is a universal phenomenon that transcends cultural, religious, and societal boundaries. Throughout history, humans have grappled with the meaning and implications of death, leading to various interpretations, beliefs, and rituals surrounding its occurrence. Defined by the Turkish Language Institution (TLI, 2023) as the complete and definitive end of life in humans, animals, or plants, death is an inevitable end for human beings. Grief, which individuals experience as a reaction to the loss of people they love and care about which also reminds them of their own death, is a multifaceted complex process with social, cultural and psychological aspects (Shear, 2012). Death and grief are universal experiences that have affected individual and community life in many cultures for ages (Granek & Peleg-Saggy, 2017). Grief includes emotional, cognitive, and behavioral dimensions. Emotional reactions include feelings of sadness, anger,

guilt, anxiety, and loneliness, while cognitive reactions may include difficulty concentrating, forgetfulness and confusion. Biological reactions include changes in sleep patterns, appetite, and energy levels (Stroebe et al., 2001).

As Bauman (1992) pointed out, few thoughts are as disturbing in the historical process as the realization of human existence's finite nature and the inevitability of death. Jung (2020) adds an intriguing dimension, suggesting that the fear of death often roots itself in a deeper fear of life. Paradoxically, those most apprehensive about death may be those who fear truly living. This emotional stance often arises during normal psychological development when the pursuit of life's purpose becomes entangled in past experiences or when individuals recoil from the inescapable threat of death (Jung, 2020). Hökelekli (1991) further elaborates on Jung's perspective, asserting that the fear of life is not a mere fabrication but rather a manifestation of the inability to fully adapt to life's unfolding processes. This fear, though typically unconscious, engenders profound anxiety as it results from projections onto one's existence. The irreversible loss of youth and the awareness that life's countdown has commenced only heighten this state of unease. Essentially, the human psyche's persistent retreat from reality represents a form of depression—a fear of not experiencing life authentically and a dread of impending death (Hökelekli, 1991).

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Death is not merely a biological event but also holds existential and philosophical significance. Existential philosophers, such as Søren Kierkegaard and Martin Heidegger, have explored the existential dimensions of death, emphasizing its role in shaping human existence and the search for meaning (Meister, 1993; Schneider, 2015). Death raises fundamental questions about the nature of life, the purpose of existence, and the limits of human knowledge and understanding (Meister, 1993).

In this article, the concepts of death and grief are explored from an existentialist perspective, offering a unique framework for exploring their existential dimensions while discussing a clinical social work case in the following pages. In addition, this paper seeks to provide social workers with a comprehensive framework for clinical interventions that emphasize existential concerns within the context of death and grief.

Existentialism

Death and grieving are deeply intertwined with human existence. Before exploring these concepts, it is essential to establish the existentialist framework that underpins our paper. Bezirci (2002) defines existentialism as a philosophical movement that later expanded into a broader discourse with various thinkers independently emphasizing common principles. This movement has significantly influenced a diversified philosophical literature, delving into concepts such as death, freedom, isolation, meaning, responsibility, and choice. Existentialism primarily focuses on ontological issues closely tied to human existence.

Yalom (2001) explores existentialism through his “ultimate concerns” framework, identifying death, freedom, meaning, and isolation as the four fundamental fears that shape human existence. Kierkegaard (2004) posits that individuals are perpetually faced with choices and possibilities, shaping their identities by selecting among these options. Jaspers (2018) defines existentialism through concepts like *dasein* (the abstract being existing beyond the physical dimension) and the transcendent (the divine being). The identity that answers the question “Who am I?” is at the center of existence (Taşdelen, 2004). According to Jaspers (2018), humans, existing concretely and abstractly beyond physical existence, seek to understand their existence by connecting with *dasein* and the divine. Arendt (2004) argues that, according to Heidegger, the question of being, which initially defined philosophy, has been forgotten, marking the history of philosophy as a forgetting of being. Heidegger (2008) asserts that existence, while the “I” remains constant, is not entirely independent from other “I”s and beings. The self, lacking independence, maintains a contextual unity

with other “I”s and beings, expressing the meaning of being in every situation.

Historically, Baert (2015) notes that existentialism, emerging in mid-twentieth-century France, is often considered a response to the context of World War II Nazi death camps and the nuclear bombings of Hiroshima and Nagasaki which created the conditions for what has been termed the existentialist moment, compelling a generation to grapple with the human condition and the unsettling realities of death, freedom, and meaninglessness (Aho, 2023). Similarly Krill (1978) states that modern existentialism was born amid the ruins, chaos, and general atmosphere of disillusionment in Europe during and following the World War II. Baring (2015) challenges the notion that existentialism was coined in 1945, highlighting its pre-existing use in several countries. This suggests that existentialism’s prominence was due to established international scholarly networks, with thinkers like Albert Camus, Gabriel Marcel, and Dostoyevsky already being considered existentialist authors.

Existential Social Work

According to Krill (1996), Existential Social Work was initially introduced into the field in a modest manner during the 1960 and 1970s. The influence of existentialist philosophy on psychotherapy has been recognized, leading to the establishment of existential therapy. However, the integration of existentialism into social work remains less evident and lacks conceptual cohesion (Thompson, 2017). Existentialism, with its emphasis on individual freedom within societal constraints, aligns with the complexities of social and political engagement. Lyska and Vyšniauskytė-Rimkienė (2015) assert that social work, which engages existential reflections on the meaning of life, should acknowledge clients’ unique perspectives. This approach, which focuses on clients’ contemplations about existence, values individual uniqueness and facilitates personal growth by addressing existential questions (Lyska & Vyšniauskytė-Rimkienė, 2015).

According to Krill (1978), the existential model emerged from the humanistic psychology movement, distinguishing itself from psychodynamic and behavioral schools. While psychodynamics focused on diagnosis and theory, behaviorists emphasized research and techniques. The humanistic approach, considered the third force, prioritized the therapeutic relationship, emphasizing transparency, authenticity, and spontaneity, principles adopted by social work. Nilsson (2018) notes the absence of a clear definition of existential social work, reflective of the diverse nature of existentialism itself. Conversely, Krill (1996) argues that social work incorporated existential themes through various strength-based therapeutic approaches, encompassing disenchantment, finding meaning in suffering, embracing

freedom of choice, valuing dialogue, and committing to a particular path (Krill, 1969). Globally, social work shares a common interest in studying human beings within a social context, emphasizing fundamental and existential aspects of existence (Guttman, 1996). Existential social work, adaptable across diverse cultural contexts, enhances well-being through spiritually sensitive modalities (Canda et al., 2004). Spirituality and existentialism, though used interchangeably (Canda, 1988; Walsh, 2013; Krill, 1995), convey distinct concepts. Existentialist-guided interventions encourage clients' engagement in constructive activities, seeking external solutions, and caring beyond the self (Walsh, 2013). In grief, existential social work focuses on helping individuals find purpose amid loss, accepting mortality, and continuing life after a loved one's death. Active listening and empathy, vital skills in existential social work, facilitate understanding clients' unique experiences and emotions, crucial when addressing death and grief (Canda & Furman, 2010).

Bereavement, Mourning, and Grief

Generally, it is seen that there are three different concepts that define the loss of a loved one and the subsequent process or any loss or separation as individual, social and situation specific (Stroebe & Schut, 1999). These concepts, which are bereavement, mourning, and grief can often be used interchangeably, although they refer to different situations (Malkinson, 2013). The following section provides commonly used definitions of these constructs.

Bereavement

Bereavement is related to the loss of a loved one. It describes the objective situation of the individual experiencing the loss (Gizir, 2006). It includes social and external components of loss (Malkinson, 2013).

Mourning

Mourning refers to the process and sorrow experienced after death (Malkinson, 2013). This process, which includes stages such as the sadness felt after the deceased person, the effort to reach the deceased person again and restructuring, also represents the cultural dimension of mourning and includes many cultural behavior patterns. Behavioral patterns and durations may vary according to cultural and religious differences (Harrison et al., 2018).

Grief

Grief is the subjective reaction of the person to the loss and represents an adaptive response to death-related loss.

Grief reactions can manifest as a variety of physical, emotional, cognitive and behavioral responses. Grief includes unfulfilled plans, desires, dreams and fantasies about the deceased. What these concepts share in common is that grief is a subjective reaction of the individual (Malkinson, 2001; Malkinson, 2013).

Attitudes Towards Death

Attitudes toward death extend on a spectrum from acceptance to avoidance, fear, and denial (Wong et al., 2015). While acceptance embraces death as a natural facet of life, avoidance perceives death as a looming threat. The advent of technology, as discussed by Kübler-Ross (1997), introduces new possibilities but also instills a deep fear of death. In contemporary society, characterized by technological advancement and improved living standards, death has become a cultural taboo, confined to institutional settings (John, 1990; Kastenbaum & Moreman, 2018). Despite growing anxiety, individuals deploy psychological defenses that temporarily deny their mortality. This unconscious perception of immortality crumbles when confronted with the deaths of others, triggering the coping mechanism: 'someone else, not me' (Kübler-Ross, 1997; Worden, 2018).

Recent discourse underscores the heightened significance of grief process discussions, with the Dual Process Model of Coping with Grief, introduced in 1999 by Stroebe and Schut, emerging as a prominent theoretical framework (Stroebe & Schut, 1999). This model aims to elucidate the dynamics inherent in adapting to loss. It posits two concurrent coping processes: loss-oriented and restoration-oriented. The former entails confronting emotional pain and grief, while the latter focuses on adapting to practical and functional changes resulting from the loss (Stroebe & Schut, 2010). Emphasizing the non-sequential nature of the grief process, this model recognizes that individuals may undergo different stages at varying times (Stroebe & Schut, 1999).

Another salient theory explicating the grief process is Worden's (2018) tasks of grief model, offering a framework delineating four fundamental tasks during grieving (Maddocks, 2003). These tasks furnish a contextual foundation for comprehending and navigating cognitive and emotional experiences associated with grief. Worden (2018) outlines the following tasks:

Accepting the Reality of the Loss

Acknowledging the loss is the initial task. Failure to accept it may lead to denial and maladaptive coping mechanisms, impeding the grieving process and hindering psychological recovery. Recognizing the occurrence of loss is crucial (Worden, 2018).

Expressing the Emotional Experience of the Loss

The second task entails allowing individuals time and space to identify and express feelings of pain, anger, and sorrow associated with the loss (Worden, 2018).

Adjusting to an Environment Without the Deceased

The third task involves the development of a new identity, necessitating individuals to redefine themselves and navigate life post-loss. Adaptation encompasses external, internal, and spiritual dimensions (Worden, 2018).

Reconstructing the Meaning of the Loss

The fourth task involves comprehending the meaning and impact of the loss, finding new purpose, and redirecting emotional energy toward new connections. This task facilitates emotional well-being and a healthy path to healing (Worden, 2018). These tasks play a pivotal role in guiding individuals through the grief process, fostering emotional well-being, and facilitating a constructive journey towards healing. Worden's Grief Task Model stands as a valuable scholarly framework for comprehending the intricate nature of grief (Maddocks, 2003). This last task is the most amenable to integration with Existential Theory.

While Worden (2018) proposes viewing grief as a process not confined to specific phases but comprising essential tasks for adapting to loss, exploring Elisabeth Kübler-Ross's (1997) stages of grief, as delineated in "On Death and Dying," offers valuable insights. Although some critics contend that the application of the term "stages" in a rigid and linear manner is controversial (Peña-Vargas et al., 2021; Avis et al., 2021), Tyrrell et al. (2023) posit that Kubler-Ross intended to delineate a spectrum of behaviors and emotions in individuals, rather than presenting rigid and linear stages. Her objective was to enhance understanding for both patients and caregivers by elucidating these experiences. Clark and Kaufer (2018) stress that the "stage theory" is explicitly presented as a heuristic device and are artificial categories isolated and separately described to facilitate a clearer and simpler discussion of each experience. Moreover she also pioneered the concept of being aware and listening, while also emphasized the importance of care giving, advocating and the use of hope with the clients (Clark & Kaufer, 2018; Carter & Nicolaidis, 2023). Kübler Ross (1997) argues five stages as followed below:

Denial and Isolation

The initial stage, is a reluctance to accept imminent death—a temporary defense mechanism helping individuals cope

with overwhelming emotions tied to acknowledging mortality (Kübler-Ross, 1997). Faced with reminders of their mortality, people may instinctively reject the reality, expressing sentiments like "This can't be true" Though often brief, denial may persist until partial acceptance emerges, leading individuals to refuse belief in impending demise or loss, avoiding thoughts and discussions about death (Volkan, 2018; Kübler-Ross, 1997).

Anger

In the second stage, anger surfaces as frustration, resentment, or jealousy directed at others, including loved ones, caregivers, or health. Questioning the fairness of their suffering, individuals may ponder "why me?" professionals (Kübler-Ross, 1997; Worden, 2018). While the inevitability of death isn't within individuals' control, those experiencing loss may harbor anger, feeling abandoned by the departed. If managed appropriately, moderate anger can facilitate the acceptance process positively (Volkan, 2018).

Negotiation

In the third stage, individuals may negotiate, seeking to bargain with a higher power or destiny to avert death or loss (Worden, 2018). Kübler-Ross (1997) likens this phase to children adopting an imperious and angry demeanor before resorting to a conciliatory approach with adults. Self-accusatory expressions like "if only" become prevalent post-loss, reflecting feelings of guilt (Volkan, 2018).

Depression

The fourth stage sees the transition from apathy, stoicism, and anger to a profound sense of loss. Here, individuals may grapple with feelings of sadness, hopelessness, and helplessness (Kübler-Ross, 1997). As acceptance of the loss takes hold, internal distress intensifies, paving the way for mental anguish (Volkan, 2018).

Acceptance

In the final stage, individuals embark on accepting their impending death or loss, finding a semblance of peace and closure (Kübler-Ross, 1997). Post-acceptance, a need arises to review and reorganize one's relationship with the loss, considering the continued emotional presence of the deceased in the minds of survivors. Kübler-Ross (1997) cautions against viewing the acceptance stage as a euphoric conclusion; rather, it resembles a state of near numbness, signifying the cessation of pain, the end of struggle, and a respite before a prolonged journey. For this reason, the

person must first realize what the deceased person means to them and then place them somewhere in their experiences as a memory (Volkan, 2018). This meaning making is where Existential Theory is most useful.

Normal Grief-Pathological Grief-Traumatic Grief

While it is not our intention to stigmatize individuals' experiences, understanding the psychological nature of grief can be profoundly helpful. This knowledge can enable social workers to identify when and where interventions may be required for their clients. In the DSM 5, grief is classified in various ways. Normal grief is not a diagnosis in itself, but a healing process. But Prolonged Grief Disorder can have significant and prolonged symptoms that may be similar to the acuity of Major Depressive Disorder. People with pre-existing/co-occurring dysthymia, MDD, Bipolar DO, SUD Recovery or PTSD might have their original condition exacerbated with the added stress of grief. According to American Psychological Association (APA, 2013) grief includes findings that can be confused with major depression. It is necessary to determine whether the person's condition is the result of the loss or the symptoms of depression with the history taken from the person. Compared to depression, the feelings that are seen intensely in the person in mourning need more space and room. Compared to depression, the feelings that are more intense in the grieving person are more feelings of emptiness and loss. Anaclitic depression is also experienced as emptiness and fear of abandonment (APA, 2013; Zhang et al., 2006).

Normal grief is a common response to loss that includes a spectrum of emotional, behavioral, and physical symptoms that can include robust psychological responses such as fear, anger, and shock (De Stefano et al., 2021). Worden (2018) outlines four tasks in the normal grief process as mentioned earlier: Acknowledging the reality of the loss, experiencing the pain of grief, adjusting to life without the lost entity, and making a connection to the loss while continuing to live. This gradual process unfolds at an individual pace and takes more or less time for each person. Bonanno (2004) identifies two response patterns in normal grief: healing, which refers to a gradual return to pre-loss functioning, and resilience, which refers to the ability to adapt and cope without prolonged or severe grief symptoms. Resilience, in this context, is an individual's ability to manage emotional distress in a stable manner (Volkan, 2018).

Pathological Grief is characterized by the gradual deterioration of an individual's functionality in social, personal, and professional domains, persisting at least six months after the loss (Zhang et al., 2006). In this form of grief, the individual may struggle to navigate the normal grief process and become stuck in a particular phase, leading to prolonged

and unresolved reactions. Terms such as chronic grief, masked grief, and unresolved grief are used interchangeably to describe this phenomenon (Bonanno & Kaltman, 2001).

Traumatic Grief, on the other hand, arises from the sudden, violent, and unexpected loss of a loved one, disrupting the individual's functionality (Parkes, 2001). While grief is a natural reaction to loss, the traumatic nature of the event in traumatic grief can hinder the normal grieving process, potentially posing risks for mental and physical health issues (Jacobs et al., 2000). Traumatic loss profoundly influences coping mechanisms, worldview, and expectations, often prolonging the resolution of grief reactions. In severe cases, individuals may develop post-traumatic stress disorder based on the experienced trauma (Aker et al., 2007).

According to the DSM-5 criteria, intense and distressing experiences of at least four of eight symptoms several times a day characterize problematic grief. Symptoms include difficulty accepting the death, distrust of others, excessive anger, reluctance to move forward, emotional numbness, a sense that life without the deceased is meaningless, hopelessness about the future, and a tense and anxious mood (APA, 2013). It's critical to differentiate grief from major depression, emphasizing a minimum observation period of six months to minimize the risk of misclassification (Zhang et al., 2006).

Existentialism and the Concept of Death

According to Heidegger (2008) there are two kinds of existence in the world: forgetting to exist and thinking to exist. For those immersed in forgetting to exist, life revolves around mundane pursuits, consumed by the ordinary and overshadowed by concerns about the trajectory of events. In contrast, individuals who contemplate existence focus not on the progression of events but on the essence of things, maintaining constant awareness of being (Heidegger, 2008). Yalom (2001) who a psychiatrist renowned for integrating Existential Theory into his practice, expands on these existence types, linking them to the responsibility for one's own existence. Ontological existence empowers humans to relate to their creation and effect self-change, a sentiment echoed by Heidegger (2008) who posits that awareness of death propels individuals towards a higher form of existence.

Delving into the human psyche, Yalom (2001) explores the pervasive fear of death, a dark apprehension that murmurs persistently. The looming thought of death instigates various defense mechanisms rooted in denial, often leading to maladaptive coping. Such maladaptation can give rise to undesirable syndromes, forming a breeding ground for psychopathology when inappropriate methods are employed to confront the fear of death (Yalom, 2001). For instance, establishing a close bond with one's mother as a defense

strategy against the fear of death, while initially successful, may eventually become a source of anxiety, hindering social development and autonomy (Yalom, 2001).

Grief, as a reaction to death, encompasses multiple facets, including absolute loss, dual emotions, guilt, and the disruption of life plans. Each element demands careful handling in the grieving process. Importantly, the death of another individual brings individuals closer to confronting their own mortality, a facet often overlooked in grief work (Yalom, 2001; Worden, 2018). Heidegger views death as the ultimate final anxiety (Heidegger, 2008), while Yalom identifies four ultimate existential concerns, delving into the intricate interplay between existentialism and the concept of death (Yalom, 2001). These concerns, including death anxiety, underscore the existential perspective on death and grief, emphasizing the pursuit of meaning and purpose in the face of mortality. Becker (1973) asserts that death anxiety is inherent in the human condition, prompting diverse coping strategies—individual, communal, religious, or through social relationships. Grief encompasses accepting death and attributing meaning to loss; Neimeyer (2001) suggests those with a robust life purpose navigate grief more adeptly, finding alternative paths forward.

Anticipating death enables an examination of how social norms and expectations impact individuals, prompting a reclamation of individuality and authenticity. Wong (2010) contends that existential psychotherapy serves as a tool for scrutinizing life's profound questions, encompassing the purpose of existence and how individuals confront the inevitability of death. Chan and Tin (2012) characterize death work as any supportive, therapeutic, or healing effort in responding to death or death-related issues, highlighting its relevance in social work. Recognizing grief as a common occurrence of significant importance, Kramer (1998) underscores its integration into the social work curriculum, particularly in courses such as "Human Behavior and the Social Environment" and gerontology courses. Understanding death and related concepts is imperative for formulating effective clinical social work evaluations and interventions (Kramer, 1998). The anticipation of death prompts a reflection on how individuals grapple with life's profound inquiries, guiding therapeutic approaches. In this context, existential psychotherapy emerges as a valuable framework for exploring existential concerns, while death work remains a critical aspect of social work, underscoring the importance of integrating death-related topics into the educational curriculum.

The Cultural Context of Death and Grief Among Turkish People

Although it has been mentioned that death and grief are universal experiences, it's important to note that the way individuals and communities experience and cope with them may vary across cultures. Distinctive cultural rituals, burial ceremonies, and mourning attitudes underscore the profound impact of cultural contexts on perceptions of death and grief. Clinical social workers must grasp this cultural diversity to offer effective, culturally sensitive support during challenging life events. In Turkish culture, deeply rooted in Islam and traditional beliefs, cultural practices hold immense significance. Collective mourning and communal support are paramount, with funerals drawing large attendance, showcasing the community's commitment to providing emotional and practical aid to bereaved families (Zorlu et al., 2022).

In traditional Turkish society, in times of serious illness or loss, a robust communal support system comes into play. Relatives, neighbors, and friends actively engage, particularly in the initial crisis days. They offer continuous presence and assistance to the bereaved family, attending to funeral arrangements, preparing meals, and aiding with household chores during the initial three days and beyond. Following Islamic traditions post-burial, religious rituals are conducted, prayers are recited, and food is prepared and distributed in honor of the deceased. The distribution of the deceased's personal belongings to the poor, retaining some as mementos, is a practice that reflects the values and beliefs of Turkish society (Zorlu et al., 2022). In Türkiye, diverse perspectives exist on death, with the majority viewing it as a transition to a permanent realm, while others perceive it as a separation, encapsulated in the poetic proverb: "Death is Allah's command, if there were no separation." The prevailing belief in predetermined destiny extends to moments of death and marriage, reinforcing the idea that individuals have no control over these events. In Turkish culture, pregnancy and childbirth are regarded as blessings, with society providing understanding and support to women experiencing the loss of a loved one. Women, finding solace in their beliefs and societal support, navigate their grief more easily, drawing strength from cultural perspectives (Gözüyeşil et al., 2022).

Discussing gender and the grieving process, Tancıoğlu-Aydın and Baker (2022) note that men and women may manifest and cope with grief differently. Traditionally, women are perceived as support-receivers, while men are cast in the role of support-givers. Gender's impact on grief starts with attitudes toward death: Women are commonly expected to display emotional responses, including crying and wailing, while men are anticipated to approach death

with composure, refraining from overt displays of emotion to appear strong (Örnek, 1971; Gündüz, 2012).

Case Example

Social work cases are frequently complex and multidimensional. To enhance clarity and understanding, I will now present a case example that I encountered during case supervision meetings with my colleague and in which I was actively involved since I am also a native speaker of Arabic, besides Turkish. Ali (pseudonym) is a 29-year-old male refugee from Syria who has been living in Türkiye for the last five years. He fled his country Syria after the outbreak of the civil war, leaving behind his wife and two children whom he has not seen since. Ali suffers from post-traumatic stress disorder (PTSD) as a result of his war experiences, along with drug addiction, which he describes as a false coping strategy he has developed to deal with the hardships he has experienced. Ali, who does not have a regular job, was trying to take care of his own life and the care of his wife and two children in Syria by working in uninsured and casual jobs, when he was diagnosed with lung cancer in the hospital where he applied due to health problems. Ali had difficulty accepting this diagnosis and continued to smoke and use drugs when he applied to a local social service organization.

In the context of clinical social work, Ali's narrative unfolds to illustrate the complex interplay of existential challenges, familial concerns, and the broader implications of facing mortality. Diagnosed with lung cancer, Ali initially grappled with fear, uncertainty, and a reluctance to acknowledge the reality of his impending death. His emotional turmoil extended beyond personal apprehension, encompassing worries about the well-being of his surviving family members. Ali, initially resistant to counseling, exhibited a demeanor characterized by denial and anger. However, through sustained engagement with the social worker, a transformative process unfolded. The social worker's attitude played a pivotal role, not only in addressing Ali's individual fears but also in recognizing and alleviating the multifaceted complexities arising from his substance abuse, refugee status, and health crisis. The social worker's approach extended beyond conventional clinical perspectives. Ali's therapeutic treatment required addressing emotional and practical facets related to death and familial concerns (including international attempts to bring his family to Türkiye), all within the broader framework of his refugee background and addiction issues. This holistic perspective underscored the intersectionality of Ali's challenges, necessitating an advocacy-driven and clinically sound intervention.

Key aspects prioritized during the counseling process included addressing confrontation, fostering acceptance, and navigating Ali's unique experiences as a refugee with a history of substance abuse. As Ali sought to derive meaning from his impending death, the counseling process facilitated the realization of his desire to find a meaningful context amid adversity. Participation in refugee support groups and the endorsement of harm reduction approaches to substance use disorders were integrated into the intervention. These measures not only addressed Ali's subjective and unique situation but also provided crucial support in mitigating the isolation inherent in existential thought.

The social worker adopted a person-centered approach throughout the engagement, recognizing Ali's resilience and emphasizing individual strengths. This facilitative therapeutic process aimed at meaningful transformation and growth, transcending conventional clinical boundaries. Ali's refugee status, with its attendant challenges of cultural differences, language barriers, and adjustment difficulties, became integral to the therapeutic dialogue. The social worker actively engaged Ali in an open discourse about these challenges, providing emotional and psychosocial support to navigate the complexities of his refugee experience while simultaneously supporting his adjustment to the new environment. Recognizing the profound impact of Ali's lung cancer diagnosis, refugee status, and substance abuse on his fundamental freedom, the collaborative counseling process aimed to address these limitations. The overarching goal was to empower Ali, restoring a deep sense of freedom and self-governance. Specialized interventions were implemented to facilitate Ali's encounter with a profound sense of liberty, enabling him to navigate the challenges in his life and assume accountability for his own existence. Although the therapeutic process was taking shape and having progress, it had to be terminated before as it was planned, as Ali expressed his desire to return to Syria, citing challenges in bringing his family to Türkiye.

In essence, Ali's case embodies the integrative and transformative potential of clinical social work, where a commitment to embracing diverse perspectives, and fostering inclusive practices is aligned with a nuanced understanding of existential concerns. This narrative illustrates how advocacy and clinical work synergize, offering a coherent and comprehensive approach to individuals like Ali, navigating the complexities of death, grief, and existential struggles within the broader social context.

As the previous example with Ali illustrates, existential social work empowers individuals to explore their perspectives about death, life purpose, freedom, values, choices and relationships. It provides a framework for individuals to assess the integrity of their lives, connect with the past, shape their futures, and discover meaning. Existential social

work offers several concepts to support individuals in coping with death and grief. Some of these basic concepts are as follows:

Integrity

Heidegger's concept posits death as a lens through which individuals perceive the wholeness of their lives (Kominkiewicz, 2006). Social workers, drawing on this, assist those confronting death or loss in comprehending the totality of their lives, fostering recognition of life's value and discovering new goals amid experienced loss.

Existential Loneliness

Existential loneliness, a feeling of isolation and separation (Yalom, 2001), can lead to depression or disruptions in social relationships. Social workers, in therapeutic processes, help individuals facing death or loss understand and cope with existential loneliness.

Avoidance

Heidegger contends that avoidance arises when individuals distract themselves from existential issues by immersing in daily activities (Kominkiewicz, 2006). Social workers assist those dealing with death or loss in identifying avoidance habits and understanding their underlying causes, preventing delays or suppression of the grieving process.

Existential Empowerment

Existential empowerment, the individual's ability to direct and make sense of their own life (Canda & Furman, 2010), involves three dimensions: personal, interpersonal, and socio-political (Thompson, 2020). Empowerment, as per Thompson (2020) entails providing individuals with resources, knowledge, and skills to control their lives, fostering self-esteem, autonomy, and agency. It asserts that individuals are the experts of their lives and should actively participate in decisions affecting them.

Death of Another and Existential Awareness

Existentialist philosophy posits human existence as meaningless and mortal (Heidegger, 2008; Sartre, 2021). The death of another reminds individuals of their mortality, prompting them to question life's meaning and value (Yalom, 2001). Mourning, from an existential standpoint, involves completing deficiencies related to loss and preparing for one's own death.

Milestones

Encounters with death and milestones can deeply impact an individual's life, fostering processes of personal transformation. Confronting death prompts reevaluation of priorities and values, unveiling the meaning of life (Gropper et al., 2020). For example, the loss of a loved one may prompt reflection on life's importance and the cultivation of more meaningful relationships (Kubler-Ross & Kessler, 2005). Retirement, a significant milestone, allows individuals to redefine personal identity and navigate a new life stage (Osborne, 2017).

Exploring Beliefs and Values

Existential social work involves assisting individuals in identifying and connecting with their values and purposes, particularly after the loss of a loved one. Another important aspect of existential social work is helping individuals find new ways to integrate their experiences of death and bereavement into their lives (Hoffman et al., 2015). This includes exploring how beliefs and values may be influenced by grief and helping individuals discover new avenues for meaning and purpose in volunteering, community engagement, or spiritual activities. It also encompasses integrating experiences of death and bereavement into life, establishing new traditions, rituals, and finding joy despite uncertainty and ambiguity.

Existential Psychotherapy

Existential psychotherapy aids individuals in confronting and overcoming existential problems (Heidenreich et al., 2021). This therapeutic approach facilitates acceptance of death, fosters a sense of freedom and responsibility, evaluates life choices, and seeks the meaning of life (Yalom, 2001). Existential psychotherapy acknowledges the loss of dignity and demoralization individuals may face in challenging circumstances, emphasizing the importance of valuing an individual's life story and reflecting on sources of personal meaning to counter feelings of worthlessness and shame caused by physical or social limitations (Vehling & Mehnert, 2014). Existential psychotherapy also provides a framework to explore and work on anxieties and concerns of an existential nature (Terao & Satoh, 2022). It stands as a valuable tool for working with individuals navigating the complexities of existential challenges and facilitates a holistic approach to understanding and supporting those facing death.

Discussion and Conclusion

Coping with death and grief is an intricate challenge requiring psychological, social, and emotional support. Social workers play an important role in this process and the existential social work approach is an effective method in this respect. This approach centers on individual autonomy, the pursuit of self-realization, and the inherent contradictions of human existence. It empowers individuals to navigate existential challenges during bereavement, encouraging the open expression of emotions and honoring diverse experiences. In the context of social work literature, grief extends beyond internal processes to encompass biopsychosocial and spiritual dimensions. This study explores the existentialist perspective on grief, emphasizing social work practices that assist individuals in managing this process. The existential approach proves indispensable in both assessment and intervention phases, offering nuanced insights into clients' needs and internal experiences.

This article underscores the significance of employing the existential social work approach in coping with death and grief. By emphasizing individual agency, the quest for self-actualization, and the innate contradictions of human nature, this approach facilitates coping mechanisms. Its advantages lie in respecting individual experiences, facilitating the discovery of inner resources, and providing avenues for individuals to derive meaning in their lives. The existentialist lens views grief and loss as transformative shifts in an individual's meaning world, inducing existential anxiety when confronting mortality. The loss of a loved one prompts individuals to grapple with their own mortality, challenging the constructed meaning world. Death, a concept encountered daily, assumes profound significance when intertwined with personal loss, prompting a reconsideration of the meaning constructed to sustain one's existence. A convergence between the existentialist approach and social work perspectives emerges, especially in addressing the mourning process comprehensively. Social work, inherently focused on the biopsychosocial aspects of individuals, resonates with the existential approach, extending to spiritual considerations. This perspective enriches the understanding of individuals within a holistic context, contributing valuable dimensions of meaning, death, isolation, and freedom.

In therapeutic interactions, social workers, leveraging the existential approach, engage in attentive listening, comprehend emotional states, and aid individuals in discovering the purpose and meaning of their lives. This involves supporting individuals in identifying values and purposes crucial to them, facilitating the exploration of meaningful events, and fostering an environment where clients discover their unique paths through the grieving process.

The existential social work approach contends that individuals, through their free will, are architects of their lives, with social workers assuming a supportive role in this creative endeavor. By focusing on the discovery of meaning and purpose, this paradigm empowers individuals to chart their own courses through grief, allowing social workers to guide them toward a purposeful and self-created existence.

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References

- Aho, K. (2023). Existentialism. In E. N. Zalta & U. Nodelman (Eds.), *Encyclopedia of Philosophy* (Summer 2023 Edition ed.): Metaphysics Research Lab, Stanford University.
- Aker, A. T., Hamzaoglu, O., & Boşgelmez, Ş. (2007). Validity of Kocaeli short screening scale for psychological trauma. *Düşünen Adam*, 20(4), 172–178.
- Arendt, H., & Heidegger, M. (2004). *Letters, 1925–1975* (1st U.S. ed.). Harcourt. Contributor.
- Association, A. P. (2013). *Diagnostic and statistical manual of mental disorders, fifth edition (DSM-5®)*. American Psychiatric Publishing.
- Avis, K. A., Stroebe, M., & Schut, H. (2021). Stages of grief portrayed on the internet: A systematic analysis and critical appraisal. *Frontiers in Psychology*, 12, 772696.
- Baert, P. (2015). *The existentialist moment: The rise of Sartre as a public intellectual*. Polity Press.
- Baring, E. (2015). Anxiety in translation: Naming existentialism before Sartre. *History of European Ideas*, 41(4), 470–488. <https://doi.org/10.1080/01916599.2014.926658>.
- Bauman, Z. (1992). *Mortality, immortality, and other life strategies*. Polity Press.
- Becker, E., & Ralph Ellison Collection (Library of Congress). (1973). *The denial of death*. Free Press.
- Bonanno, G. A. (2004). Loss, trauma, and human resilience: Have we underestimated the human capacity to thrive after extremely aversive events? *Psychological Trauma: Theory Research Practice and Policy*, (1), 101–113. <https://doi.org/10.1037/1942-9681.S.1.101>.
- Bonanno, G. A., & Kaltman, S. (2001). The varieties of grief experience. *Clinical Psychology Review*, 21(5), 705–734. [https://doi.org/10.1016/S0272-7358\(00\)00062-3](https://doi.org/10.1016/S0272-7358(00)00062-3).
- Canda, E. R. (1988). Spirituality, religious diversity, and social work practice. *Social Casework*, 69(4), 238–247. <https://doi.org/10.1177/104438948806900406>.

- Canda, E. R., & Furman, L. D. (2010). *Spiritual diversity in social work practice the heart of helping* (2nd ed.). Oxford Univ. Press.
- Canda, E. R., Nakashima, M., & Furman, L. D. (2004). Ethical considerations about spirituality in social work: Insights from a national qualitative survey. *Families in Society: The Journal of Contemporary Social Services*, 85(1), 27–35. <https://doi.org/10.1606/1044-3894.256>.
- Carter, P. L., & Nicolaides, A. (2023). Transformative learning: An emotional (r)evolution. *New Directions for Adult and Continuing Education*, 2023(177), 25–36. <https://doi.org/10.1002/ace.20476>.
- Clark, E. J., & Kaufer, S. D. (2018). The profession of social work and the legacy of Kubler-Ross. *Families in Society*, 99(4), 369–377. <https://doi.org/10.1177/1044389418802158>.
- De Stefano, R., Muscatello, M. R. A., Bruno, A., Cedro, C., Mento, C., Zoccali, R. A., & Pandolfo, G. (2021). Complicated grief: A systematic review of the last 20 years. *International Journal of Social Psychiatry*, 67(5), 492–499. <https://doi.org/10.1177/0020764020960202>.
- Gizir, C. A. (2006). A grief counseling model for university students experiencing difficulties after a loss [Bir Kayıp Sonrasında Zorluklar Yaşayan Üniversite Öğrencilerine Yönelik Bir Yas Danışmanlığı Modeli]. *Mersin University Journal of Faculty of Education*, 2(2), 195–213. <https://doi.org/10.17860/efd.36859>.
- Gözüyeşil, E., Manav, A. I., Yesilot, S. B., & Sucu, M. (2022). Grief and ruminative thought after perinatal loss among Turkish women: One-year cohort study. *Sao Paulo Medical Journal*, 140(2), 188–198. <https://doi.org/10.1590/1516-3180.2021.0148.r1.09062021>.
- Granek, L., & Peleg-Sagy, T. (2017). The use of pathological grief outcomes in bereavement studies on African americans. *Transcultural Psychiatry*, 54(3), 384–399. <https://doi.org/10.1177/1363461517708121>.
- Gropper, H., John, J. M., Sudeck, G., & Thiel, A. (2020). The impact of life events and transitions on physical activity: A scoping review. *PLoS One*, 15(6), e0234794. <https://doi.org/10.1371/journal.pone.0234794>.
- Gündüz, S. (2012). Mourning traditions in Reşadiye region. *Electronic Turkish Studies*, 7(4), 1905–1916.
- Guttman, D. (1996). *Logotherapy for the helping professional: Meaningful social work*. Springer Publishing Co.
- Harrison, P. J., Cowen, P., Burns, T., & Fazel, M. (2018). *Shorter Oxford textbook of psychiatry*. Oxford university press.
- Heidegger, M. (2008). *Being and time*. Agora Library. K. H. Ökten.
- Heidenreich, T., Noyon, A., Worrell, M., & Menzies, R. (2021). Existential approaches and cognitive behavior therapy: Challenges and potential. *International Journal of Cognitive Therapy*, 14, 209–234.
- Ho Chan, W. C., & Tin, A. F. (2012). Beyond knowledge and skills: Self-competence in working with death, dying, and bereavement. *Death Studies*, 36(10), 899–913.
- Hoffman, L., Vallejos, L., Cleare-Hoffman, H. P., & Rubin, S. (2015). Emotion, relationship, and meaning as core existential practice: Evidence-based foundations. *Journal of Contemporary Psychotherapy*, 45, 11–20.
- Hökelekli, H. (1991). The psychology of death and the afterlife. *Journal of Uludağ University Faculty of Theology*, 3(3), 151–165.
- Jacobs, S., Mazure, C., & Prigerson, H. (2000). Diagnostic criteria for traumatic grief. *Death Studies*, 24(3), 185.
- Jaspers, K. (2018). *Philosophy talks: Introduction to philosophy*. Pinhan Publishing. A. Aliy.
- John, H. (1990). The changing sociology of death. *Erciyes University Journal of Faculty of Theology*, 8(7), 235–250.
- Jung, C. G., & Yates, J. (2020). *Jung on death and immortality*. Princeton University Press.
- Kastenbaum, R. (2018). *Death, society, and human experience*. Routledge. <https://doi.org/10.4324/9781315232058>.
- Kierkegaard, S. (2004). *Either/or: A fragment of life*. Penguin UK.
- Kominkiewicz, F. B. (2006). Heideggerian existentialism and social work practice with death and survivor bereavement. *The Social Science Journal*, 43(1), 47–54.
- Kramer, B. J. (1998). Preparing social workers for the inevitable: A preliminary investigation of a course on grief, death, and loss. *Journal of Social Work Education*, 34(2), 211–227.
- Krill, D. F. (1969). Existential psychotherapy and the problem of anomie. *Social Work*, 14(2), 33–49.
- Krill, D. (1978). *Existential social work*. Free Press.
- Krill, D. F. (1995). My spiritual sojourn into existential social work. *Reflections: Narratives of Professional Helping*, 1(4), 57–64.
- Krill, D. F. (1996). In F. J. Turner (Ed.), *Existential social work* (5 ed.). Oxford University Press.
- Kubler-Ross, E., & Kessler, D. (2005). *On grief and grieving: Finding the meaning of grief through the five stages of loss*. Simon and Schuster.
- Kübler-Ross, E. (1997). *On death and dying* (1st Scribner Classics ed.). Scribner Classics.
- Lyska, V., & Vyšniauskytė-Rimkienė, J. (2015). Life is like aspiration, like motion: Adolescent's existential themes. *Social Work: Experience and Methods*, 15(1), 33–44. <https://doi.org/10.7220/2029-5820.15.1.2>.
- Maddocks, I. (2003). Grief and bereavement. *Medical Journal of Australia*, 179(S6). <https://doi.org/10.5694/j.1326-5377.2003.tb05566.x>. 6-S7.
- Malkinson, R. (2001). Cognitive-behavioral therapy of grief: A review and application. *Research on Social Work Practice*, 11(6), 671–698. <https://doi.org/10.1177/104973150101100603>.
- Malkinson, R. (2013). *Cognitive grief therapy: Reconstructing the meaning of life after bereavement* (S. K. Akbaş, Trans.). Hekimler Birliği Publications.
- Meister, R. K. (1993). The existential concept of death. *American Psychologist*, 48(3), 296–296. <https://doi.org/10.1037/0003-066X.48.3.296.a>.
- Neimeyer, R. A. (2001). *Meaning reconstruction and the experience of loss*. American Psychological Association Washington, DC.
- Nilsson, H. (2018). Existential social work and the quest for existential meaning and well-being: A conceptual framework. *Journal of Religion & Spirituality in Social Work: Social Thought*, 37(1), 64–76. <https://doi.org/10.1080/15426432.2017.1382428>.
- Örnek, S. V. (1971). *Death in Anatolian folklore*. Ankara University.
- Osborne, J. W. (2017). An existential perspective on death anxiety, retirement, and related research problems. *Canadian Journal on Aging / La Revue Canadienne Du Vieillessement*, 36(2), 246–255. <https://doi.org/10.1017/S0714980816000465>.
- Parkes, C. M. (2001). A historical overview of the scientific study of bereavement. In *Handbook of bereavement research: Consequences, coping, and care* (pp. 25–45). American Psychological Association. <https://doi.org/10.1037/10436-001>.
- Peña-Vargas, C., Armaiz-Peña, G., & Castro-Figueroa, E. (2021). A biopsychosocial approach to grief, depression, and the role of emotional regulation. *Behavioral Sciences*, 11(8), 110. <https://doi.org/10.3390/bs11080110>.
- Sartre, J. P. (2002). *Existentialism (Foreword)*. Say Publications. A. Bezirci.
- Sartre, J. P. (2021). *Being and nothing*. İthaki Publications. T. Ilgaz & G. Ç. Eksen
- Schneider, K. J. (2015). My journey with Kierkegaard: From the paradoxical self to the polarized mind. *Journal of Humanistic Psychology*, 55(4), 404–411. <https://doi.org/10.1177/0022167814537889>.
- Shear, M. K. (2012). Getting straight about grief. *Depression and Anxiety*, 29(6), 461–464. <https://doi.org/10.1002/da.21963>.
- Stroebe, M. S., & Blinks, E. (2001). *Handbook of bereavement research and practice advances in theory and intervention* (1–1st

- (Online-ausg.) ed.). American Psychological Association Washington, D.C.
- Stroebe, M., & Schut, H. (1999). The dual process model of coping with bereavement: Rationale and description. *Death Studies*, 23(3), 197–224. <https://doi.org/10.1080/074811899201046>.
- Stroebe, M., & Schut, H. (2010). The dual process model of coping with bereavement: A decade on. *OMEGA - Journal of Death and Dying*, 61(4), 273–289. <https://doi.org/10.2190/OM.61.4.b>.
- Tanacioğlu-Aydın, B., & Erdur-Baker, Ö. (2022). Pregnancy loss experiences of couples in a phenomenological study: Gender differences within the Turkish sociocultural context. *Death Studies*, 46(9), 2237–2246. <https://doi.org/10.1080/07481187.2021.1922542>.
- Taşdelen, V. (2004). *The self and existence in kierkegaard*. Hece Publications.
- Terao, T., & Satoh, M. (2022). The present state of existential interventions within palliative care. *Frontiers in Psychiatry*, 12. <https://doi.org/10.3389/fpsy.2021.811612>.
- Thompson, N. (2017). *Existentialism and social work*. Routledge.
- Thompson, N. (2020). *Understanding Social Work preparing for practice* (5th ed.). Macmillan Education UK.
- Turkish Language Institution. In (2023). *Turkish Language Association Dictionaries* Retrieved 20.02.2023, from <https://sozluk.gov.tr/>.
- Tyrrell, P., Harberger, S., Schoo, C., & Siddiqui, W. (2023). Kubler-Ross stages of dying and subsequent models of grief. In *StatPearls*. <https://www.ncbi.nlm.nih.gov/pubmed/29939662>.
- Vehling, S., & Mehnert, A. (2014). Symptom burden, loss of dignity, and demoralization in patients with cancer: A mediation model. *Psychooncology*, 23(3), 283–290. <https://doi.org/10.1002/pon.3417>.
- Volkan, V. D., & Zintly, E. (2018). *Life after loss: 'complicated grief and its treatment'* (2.ed.). Pusula Publishing.
- Walsh, J. (2013). Direct social work practice. In: NASW Press and Oxford University Press.
- Wong, P. T. (2010). What is existential positive psychology. *International Journal of Existential Psychology and Psychotherapy*, 3(1).
- Wong, P. T., Reker, G. T., & Gesser, G. (2015). Death attitude Profile—Revised: A multidimensional measure of attitudes toward death. In R. A. Neimeyer (Ed.), *Death anxiety handbook: Research, instrumentation, and application* (pp. 121–148). Taylor & Francis.
- Worden, J. W. (2018). *Grief counseling and grief therapy: a handbook for the mental health practitioner* (Fifth edition ed.). Springer Publishing Company, LLC New York, NY.
- Yalom, I. D. (2001). *Existential psychotherapy* (Z. Babayiğit-İyidoğan, Trans). Kabalcı Publishing.
- Zhang, B., El-Jawahri, A., & Prigerson, H. G. (2006). Update on Bereavement Research: Evidence-based guidelines for the diagnosis and treatment of complicated bereavement. *Journal of Palliative Medicine*, 9(5), 1188–1203. <https://doi.org/10.1089/jpm.2006.9.1188>.
- Zorlu, S., Memis, A., & Yumusak, M. (2022). Religious and Cultural Practices of Muslims Living in Central Anatolia on Death and mourning: A qualitative study from Turkey. *Journal of Religion and Health*, 61(6), 4934–4958. <https://doi.org/10.1007/s10943-022-01607-4>.

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