

Mourning and Body Memory

A Sensory, Integrative Approach to Psychological Health and Healing

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A substantial body of empirical research has shown that mind-body practices, including Yoga and meditation, can decrease symptoms of depression, anxiety, negative mood, and fatigue. Given Yoga's adaptability to various human conditions, it can improve the physical and psychological health of our elders. When blended with clinical therapies, Yoga practices can gently ease the distress that arises from aging, natural decline, physical trauma, and loss. This article describes core practices of Transpersonal Integrative Therapy, a Yoga-based mind-body approach that has shown significant improvements in vitality and positive states, and improved satisfaction with life for those experiencing grief and mourning. **Key words:** elders, grief, loneliness, multimodal therapy, psychotherapy, transpersonal therapy, Yoga

It is self-evident that aging affects the body, mind, and emotions. As we advance in years, physical and cognitive functioning decline noticeably. Our bodies suffer the effects of time, illness, and physical trauma, and our ability to rebound fades more with each passing year. Psychomotor processes slow down. Memory and concentration become impaired, and quality of life is gradually compromised or diminished.

While most psychological therapies emphasize change, it is as McWilliams describes the unchangeable realities of aging, illness, irreversible effects of physical trauma, and death that call for therapies that effect adaptation, particularly when these realities become the central mission of a person's current life.¹ The therapeutic implications of mourning these fundamental losses are that a person emerges from denial, self-denigration, and magical wishes for transformation to adaptation and acceptance. Human psychological health depends on the ability to acknowledge and mourn not only loss but also past mistakes and transgressions as well as their consequences.¹

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CONSTRAINTS OF WESTERN APPROACHES TO MOURNING

Just as loss is a fundamental reality of human life, mourning and the bereavement process are fundamental human reactions. Indeed, mourning and adaptation may be viewed as the underlying aim of all depth-oriented therapies. Shame, demoralization, or despair mark loss of some kind—be it loss of a life-long friend, a body part, a country, or a self-identity that has changed because of life circumstances. All of these require recognition, mourning, and adaptation to move forward with integrity and hope. Yet, in contemporary Western culture, the behavior and experience of the bereaved are constrained in 2 ways. First is the view that there is a correct way to grieve, and that if a person does not grieve in this way, he or she will suffer negative psychological consequences. The second constraint is the cultural norm that prolonged public expression of grief is inappropriate. Many expect grief to be worked through quickly, in weeks or even days—not necessarily to help the mourner feel better, but to protect others from having to witness a distressing grief experience.² Without adequate support for their feelings, some people do not want to go through their pain alone. Many bereaving adults do not ask for help, hide their grief from others, and hold their symptoms inside. Many avoid facing their emotions and find themselves shutting down and withdrawing. This is often exacerbated as people enter late life and begin the developmental struggle of integrity versus despair, the process by which people try to make sense of their lives by reflecting on the events and experiences they have had over their lifetime.³ Whether a person reaches integrity depends on how self-affirming and self-accepting they are. Some fall into despair feeling bitter about their choices, blaming themselves or others for their misfortunes, seeing their lives as meaningless, and greatly fearing death. However, when older adults are assisted in remembering and reviewing their lives, and accepting the past, they show significant improvements in life satisfaction, positive feelings, and depressive symptoms.⁴

To address these constraints to mourning, Western models of support have focused on both facilitating the personal process of grieving and on providing a safe and comfortable environment for participants to share their experiences.⁵⁻⁷ Conventional group and individual therapies encourage people to mourn loss in their own way

and in their own time and allow them to express their thoughts and feelings in an environment of nonjudgmental listening.

The current trend in psychological therapies is toward integrative approaches, such as combining art therapy and behavior therapy⁸ or a family systems' approach that places the bereaved and the caregiver within the larger context of the family.⁹ This trend toward an integrative approach is positive; however, awareness of the mind-body relationship and, specifically, how to work with grief as it is experienced in the body remains absent from most of these approaches. This is evidenced both by lack of mention in the literature, as well as from the author's training and communication with leaders in the bereavement field. Yet, a substantial body of empirically based research suggests that mind-body practices, such as Yoga and meditation, can decrease symptoms of depression, anxiety, negative mood, and fatigue.^{10,11} Yoga, being a multimodal practice in itself, provides a natural doorway in to the body-mind system. When blended with transpersonal and depth-oriented clinical interventions, Yoga adds holistic and contemplative dimensions to self-investigation. Given Yoga's adaptability to various human conditions, it can serve with much value the physical, emotional, and psychological health of our aging population.

INTEGRATING APPROACHES TO HEALING

Transpersonal therapies assist patients in moving into deep internal exploration of thoughts, emotions, and the physical body. This process of exploration leads to increased self-awareness and understanding and a sense of deeper personal integration and wholeness.¹² The role of the transpersonal caregiver is to facilitate this process without interfering and to provide an empathic presence, not to fix the patient.

The 8-limbed path of Yoga describes a similar process of exploration by which consciousness becomes unencumbered from its identity of a limited self. Likewise, psychodynamic-oriented depth therapy holds as one of its main objectives bringing irrational wishes and beliefs into consciousness so that they can be recognized, explored, and replaced with more satisfying and attainable goals. The conscious shift from attachment to a limited idea of self and to futile future goals allows patients to expend more energy on what is realistically attainable and fulfilling in the context of their current life situation.

A transpersonal approach encompasses many of the principles of these paths. For example, transpersonal therapy encourages the Yoga practices of *svadhyaya*, self-understanding, as well as *aparigraha*, nonattachment to ego and to possessions that reinforce the egoic personality. The transpersonal approach to therapy is consistent with both contemporary psychodynamic-oriented psychotherapy and modern approaches to Yoga therapy that empha-

size empowering the patient through awareness, rather than fixing the patient or "doing to" the patient. Creating psychological safety that invites relaxation into deep inner work is common to both psychodynamic-oriented therapy and Yoga practices through attention to the maintenance of a safe environment, sometimes referred to in Yoga as sacred space.

Because mourning is experienced physically as well as mentally and emotionally, a therapeutic protocol that includes the body allows more of what is experienced in grief to find healthy expression. Transpersonal Integrative Therapy is an approach that arose from the author's training in transpersonal and clinical psychology, psychodynamic oriented depth psychotherapy, and grief counseling, as well as 20 years' experience as a Yoga and meditation teacher. Transpersonal Integrative Therapy was designed to facilitate personal integration through combining several Yogic and clinical modalities, all within the context of a psychologically safe and supportive environment.

TRANSPERSONAL INTEGRATIVE THERAPY

Transpersonal Integrative Therapy addresses the effects of mourning on body, mind, and emotions. Sessions follow a sequence of exploratory practices beginning with the body: Yoga *asana* (physical poses), *pranayama* (breathing exercises), guided relaxation, inspirational literary readings, Yoga *nidra* (deep relaxation), journal writing or creative expression, meditation, and voluntary sharing and witnessing. Carefully selected music played discriminately throughout sessions helps facilitate the entire process by calming the nervous system while stimulating deeply held emotions and other associations.

The practices may be modified to meet the needs and limitations of each patient or groups of patients that participate in this type of therapy. The principles and practices of the Transpersonal Integrative Therapy approach for self-exploration are meant to illustrate possibilities and not provide a strict protocol for others to follow. However, one study has shown that following the prescribed sequence of practices within safe containment leads to significant improvements in vitality and positive states and a trend toward improved satisfaction with life.¹³

Let us consider each of these practices, presented in a way such that experienced health care providers can adapt them with aging patients who may be challenged by physical or cognitive limitations.

THE PRINCIPLE OF AHIMSA

Abimsa is a guiding ethical principle in the Yogic tradition that informs all Yoga practices. By definition, *abimsa* means "nonviolence." The moral imperative is to do no harm or allow no circumstances that may be harmful in the practice and teaching of Yoga. The proactive application of *abimsa* is teaching patients to have compassion

for themselves, their bodies, and their limitations. By modeling and actively teaching self-care skills and natural methods for regulating mood, the principle of *abimsa* becomes a life changing means of bringing the concept of nonviolence from an abstract principle to an active practice of self-care. This means approaching one's own practice and the guiding of others with kindness, friendliness, and thoughtful consideration for the fragility and inherent value of life.

In the context of psychotherapy, the therapeutic frame is essential for creating a genuine relationship between the patient and therapist. Establishing consistent conditions for therapy through open and transparent communication and negotiation with the patient creates safety and security. The therapeutic frame includes arrangements pertaining to meeting times and fees and other decisions regarding boundaries between patient and therapist. For many psychotherapists, the frame not only establishes the conditions of therapy, it is the starting point of therapy, and where a working alliance becomes established between the patient and therapist.

Following the practices of *abimsa*, and the psychodynamic concept of the consistent and safe therapeutic frame, one of the central principles of Transpersonal Integrative Therapy is creating psychological safety that invites relaxation into deep inner work. This sense of safety can be established in many ways, including the caregiver's appearance, body language, mood, and attitude toward the patient. Each of these things should be carefully considered to set an initial impression of safety, warmth, and acceptance. The practitioner's quality of voice, eye contact, sensitivity, and honesty are key to creating a learning environment that is safe, sacred, and psychologically well-contained.

The physical setting of the session is equally important. Patients do best when they understand what will be happening and what is expected of them. They appreciate structure and the psychological safety it gives them, particularly if they are regressed or vulnerable which are common reactions to grief. Treat each session as a time for deep and meaningful work. Prepare the space thoughtfully so that patients can transition smoothly from one activity to the next. This means having any necessary props, writing and drawing tools, and seating placed within easy access.

ASANA

In Yoga, *asana* practice serves as a means of easing the body of muscle tension, bringing elasticity to the spine, and fluidity to the joints. Standing, sitting, forward bending, back-bending, and side-bending exercises can be practiced gently, yet dynamically (coordinating breath with movement) and statically, held for longer periods. Simple stretches can be modified as necessary to meet the physical limitations of the patient.

When patients are led through a series of dynamic movements, *asana* practice also becomes a means for reducing cognitive distraction. Dynamic movement helps patients sustain focus on the present moment of their experience and elicits a form of meditation in motion. When individual exercises are sustained for longer periods of time such as through 2 or 3 breath cycles, more focused awareness on the physical sensations of the body—areas that feel tight, open, uncomfortable, or restricted—are brought to awareness adding to one's ability to concentrate.

Asana practice also serves as a portal in to the mind-body system. Participants draw their attention to bodily sensation and begin to notice thoughts, images, and emotions that may arise during the *asana* practice. These thoughts, images, associations, and emotions become material for further exploration as described later.

PRANAYAMA

Pranayama, or breathing exercises, are used in Yoga for 3 main reasons. First, they enhance greater mind-body connection and awareness for synchronizing physical movements with breathing rhythms. Second, they are used as tools to enhance focus and attention during meditation and Yoga *asana* practice. Third, they serve to slow down heart rate and lower body temperature to induce calm states of mind. *Pranayama* practices have been shown to reduce sympathetic nervous system activity and shift the autonomic balance toward parasympathetic dominance.¹⁴ When this shift happens, especially in a supportive environment, patients become more resilient to stress.¹⁵

Abdominal breathing, *dirgha* (also known as the complete breath, or 3-part Yogic breathing), and *ujjayi* (the ocean breath) are 3 commonly used *pranayama* exercises that help induce calm and cultivate concentration and awareness. These gentle breathing practices are described in more detail later because they are readily useable and do not require extensive training in Yoga to use them with patients.

Abdominal breathing

The most basic breathing exercise of all, abdominal breathing, can be done sitting, standing, or lying down. Patients may begin by placing their hands on their lower abdomen and bringing their attention to their breathing. Each inhalation is directed "into the belly" allowing the abdomen to gently expand with the inhalation, and release back toward the spine on the exhalation. In this way, patients learn to activate and tone diaphragmatic muscles and free tension from the abdominal area. This promotes deeper breathing and longer breaths. Abdominal breathing can be coupled with meditation practice by becoming the focal point of attention. Patients learn to focus their attention on the simple expansion and contraction of the belly with each breath cycle.

The complete breath

Building on abdominal breathing, *dirgha* (the complete breath, or 3-part Yogic breathing) helps to expand lung capacity as well as intercostal muscles of the rib cage. In this breathing exercise, patients begin by inhaling and sending the same breath into the lower belly, then into the middle torso, and finally into the upper chest, “lifting the collar bones.” Each exhalation follows a pattern of release from the upper chest first “releasing the collarbones,” then the midsection, and lastly the abdomen. In this way, one full cycle of breath reaches from the lowest part of the lungs to the highest on the inhalation, expanding the torso, followed by a release of breath completely from the top of the lungs to the bottom on the exhalation. *Dirgha pranayama* is known to slow heart rate, lower blood pressure, induce the relaxation response, and alleviate stress.¹⁶ This breathing exercise is used in guided relaxation and meditation and, with practice, can be used anytime to bring focus back to the present moment and to relax the entire body-mind system.

Ocean breath

The Ocean breath, or *ujjayi pranayama*, increases concentration by using the sound of the breath as a focal point. It induces meditation as the mind becomes absorbed into the sound of the breath, promotes greater control of the breath, and opens the alveoli in the lungs, allowing more complete absorption of oxygen.¹⁶

The Ocean breath is practiced by taking long, slow, deep breaths in through the nostrils while slightly contracting the back of the throat in the area of the glottis. This muscular contraction creates a subtle, smooth, and continuous sound in the back of the throat that mimics the rising and falling of the ocean tide, or the hissing sound one might hear while holding a conch shell to the ear. With practice, each inhalation and exhalation becomes lengthened as much as possible without creating tension anywhere in the body. Once mastered, *ujjayi pranayama* can be a powerful means of sharpening concentration and inducing deep states of tranquility.

Ujjayi breathing can be done in a comfortable seated position with the spine erect or while lying on the back. Common functional imagery used to teach Ocean breath includes fogging a mirror and creating the “ahhh” sound.

Imagine exhaling slowly through the mouth to fog a hand mirror. Notice the sound that naturally comes from the throat. Then try making the same sound on the inhalation. After repeating this several times, try “fogging up” the mirror with your mouth closed, exhaling through the nostrils. Hear the sound in the back of your throat; notice the contraction at the back of the throat. Continue to practice making the fogging sound with your mouth closed, allowing your breaths to become slower, softer, and more refined.

Another way to practice the Ocean breath is to take in a deep breath and exhale through the mouth while whispering the sound “ahhh.” Then try again while whispering “ahhh” with the mouth closed. Continue to make the sound, breathing in and out through the nostrils, and allow it to become more subtle and refined. The contraction in the back of the throat should be accessible through these 2 techniques.¹⁶

MEDITATION

In a Transpersonal therapeutic approach to meditation, participants learn to step back from the mind’s activity and witness it as a stream of thoughts that arise and fall away and need not direct or dominate one’s life. Through practice, patients become aware of how their mental processes (including ruminations) may influence the quality of their present experiences. As they learn to disidentify, or at least to nonjudgmentally observe their mental activity, patients begin to appreciate the control they can have over their own mood through changing their relationship to their thoughts. Disidentifying with mental activity means developing the capacity to be a dispassionate witness or bystander to what passes through the mind. When this is understood through direct experience and practice, and any degree of disidentification is experienced, patients find their grief and anxiety more manageable and less overwhelming. Through guided focused attention, they begin to realize deep contentment, mental calmness, and composure. The painful habit of being fixed in grief, anxiety, or ruminative states is then gradually replaced with a balanced range of thoughts, emotions, and behaviors.

A simple means of introducing meditation practice is to guide patients through a 5-minute routine following a few minutes of abdominal breathing to connect with the breath and draw attention inward. A beginning level technique then is focusing on the breath as a stable, foreground object. With this focus, patients are then taught to witness the mind’s activity as an impermanent and background flow of thoughts and images. With regular practice and guidance, they learn to develop skills of concentration and more objective awareness, and are able to return to the stable foreground of the breathing when background thoughts pull them away or cause them to get “lost in thought.”

While meditation is traditionally practiced in a seated position, patients may recline or practice walking meditation by focusing on each footstep. In this practice from the Buddhist traditions, one walks slowly and deliberately for about 10 steps, then turns and walks back, repeating the slow walk again and again. The practitioner tries to focus on thoughtfully lifting, placing, lifting and placing each foot while walking. This “slow motion” walking practice helps develop concentration while the eyes are open and the body is in motion. The practice

further challenges the mind to cultivate stillness even when pleasant environmental distractions may tempt the mind to wander.

INTEGRATION PRACTICES

Integration experiences such as guided relaxation, reflection, expression, and sharing and witnessing encourage patients to journey a path of exploration and discovery with freedom from expectation and judgment. Integration practices give patients a variety of options to put their thoughts, images and memories in symbolic form, a process that has been shown to improve both physical and emotional well-being by being a significant catalyst for healing and self-integration.^{13,17, 18}

The practices presented below are integral to Transpersonal Integrative Therapy. Each one may be adapted to suit the individual conditions and circumstances of the health care provider and her patient. However, Transpersonal Integrative Therapy was designed to be a 2-hour session of seamless and progressive integration from one modality to the next.¹³

Relaxation

The classic relaxation pose in Yoga is *savasana*, or corpse pose. From this humble supine posture, we relinquish all control with the intention of slipping into deep states of repose. There are many ways to guide patients into deep rest while in *savasana*. To guide effectively, it is important to stay present with the patient's experience and to continue to hold the frame of sacred space. In a transpersonal integrative therapeutic program, the purpose of relaxation practices is to relax the body-mind system enough to allow images, memories, dreams, and experiences to emerge under the microscope of still awareness, making them ready for deeper examination by the patient.

One typical practice is conscious relaxation in which the patient participates in calming sequential parts of the body (legs, feet, hands, arms, neck, face, and back of the body) by voluntarily contracting muscles tightly, and then releasing them. Another guided relaxation practice is the visualization of imagining the breath having the qualities of light and warmth. Each inhalation is free to move throughout the body-mind system, illuminating areas perceived as dark or scary, and infusing them with warm, glowing energy. Each exhalation is imagined as a release of all that is dark, scary, or past. Another example is the Chinese *qi gong* practice of "smiling into the organs." In this guided relaxation, participants hold in mind pleasant images and project feelings associated with them into internal organs or other areas of concern in the body.

The deeper form of relaxation and meditation is *Yoga nidra*, or Yogic sleep. Releasing into *Yoga nidra* allows more subtle, even unconscious, layers of tension in the mental and emotional body-mind system to surface and be

safely examined.^{19,21} *Yoga nidra* is best facilitated by an experienced Yoga teacher.

Once participants are deeply relaxed, short, selected literary and spiritual works with themes appropriate to the patient's situation may be read aloud. Hearing such works while deeply relaxed has been shown to help individuals experience and process images, memories, and deeply felt emotions that are often repressed during daily life activities.^{17,18}

To give patients time to reflect on and express thoughts and emotions that come up during relaxation and reading periods, they may then spend time journal writing or in another form of creative expression, such as drawing with colored pencils and markers.

Journaling

Journaling is an effective way to give patients the opportunity to reflect on and express thoughts and emotions that come up during relaxation or during their breathing or movement work in *pranayama* and *asana* practice. The process of journaling or creative drawing with colored pencils or markers in response to Yoga practices can be a significant catalyst for healing and self-integration. It also helps patients integrate and process feelings and thoughts, while developing the emotional resilience to deal creatively with what cannot be changed in their lives.²²

Oftentimes, patients readily delve into writing, but sometimes people find it hard to get started. A simple method of initiating a writing process is giving an open-ended statement to complete. Through offering carefully crafted completion statements, patients may be guided to explore their experiences a little further. Supportive sample completion statements are, "At this moment I am feeling..." or, "Right now when I think about my loss, I feel..." or, "As I listen closely to what is in my heart right now, I can see that..." If patients prefer creative expression through drawing, they can work from similar completion statements with the obvious understanding that they will respond using images or a combination of images and written words.

It is important to give patients ample space and time to journal or draw. Have patients draw or write in silence for at least 30 to 40 minutes. As they write, it is time for the caregiver to give space for their process and to try not to intervene. Often, this is a time when patients release emotions by crying or becoming very quiet as they write and focus within. Interrupting the patients' process to fix or soothe may make the process more comfortable for the caregiver, but would derail the patients' journey of discovery. Patients become more resilient and independent by working through their own emotions. In other words, it is by way of grieving that patients are able to relinquish defenses, accept reality as it is, come to terms with it, and move forward in life.

Sharing and witnessing

The brave acts of telling what has happened to us, and being received and heard with empathy are powerful therapeutic interventions. As caregivers and caretakers, when we listen carefully, we enter into a patient's internal experience. If we are accurately attuned, then the patient feels safe and invited to delve and report more deeply. After patients have finished their writing, invite them to share, if they so choose, by reading aloud excerpts from their journal or showing their creative expression pieces. Simply reading aloud what they have written is powerful for them, as well as for the other participants who witness them.

This is not a time for the patient to go off on tangents or to editorialize. Some explaining may be necessary for creative expression pieces, but encourage keeping this to a minimum. If patients depart from what they have written and attempt to explain or editorialize, they move out of their internal experience. For the same reason, during sharing, other participants listen as witnesses only. No comments or discussion follow the sharing. This helps maintain the psychological safety of the space, as well as protect and honor

each participant's private experience within the communal group. If you are working individually with a patient, refrain from commenting. Unlike in many social situations, or in conventional groups, when working with these transpersonal therapeutic techniques, there is no pressure on the patient to justify or explain their feelings, or to receive and respond to gestures of sympathy or advice. When a patient is in pain, she does not want to understand; she does not seek to be understood; she wants empathic recognition of her pain. The caregiver and witnesses create psychological safety and continuity that invites deep inner work by conveying warmth and acceptance and being good listeners.

Keep in mind that your patients are adults and are capable of handling their own experiences and emotions. Again, refrain from acting on impulses to fix or soothe, as this will only interfere with the patient's process. The heartfelt grief of a person who feels his or her pain deeply is a healthy response to disappointment and to loss. When we provide a protective holding environment, we give the patient an experience of uninterrupted continuity for working through disillusionment and loss.

TABLE Representative Reported Changes From Postintervention Qualitative Questionnaires (N = 16)

Body	Cognitive	Mood/Emotions
Sleeping has improved	More productive	Less anxious
Wake up only 1 time each night	Setting priorities	
Much more aware of my body	More focused	Doing more inner work
More in tune with my body and how it integrates with mind	More tendency to explore my unresolved grief	Much calmer
I allow myself to cry	I realize I am not alone in my grief	Less judgmental
Stomach feels lighter now	Decided to seek out more group support	I am more accepting
My physical posture creates emotional strength	I realize it is not bad to look at grief and walk through it	I feel safer
My core is stronger	More able to write out thoughts, feelings, experiences	Feeling my edge better
Taking better care of myself	Better balance between focusing on myself and reaching out to others	Feel more kindness
More open and strong in my posture, psychology, and approach to the world and life	Realized my anger and that I do not want it anymore	Feel more like being who I am
	Easier to make decisions	Not feeling as guilty
	Tuned in that all is as it is supposed to be	Feel more normal
	More open to the unknown	More present to emotions and my process
	Tuned in to beauty	Feel stronger
	Opening to a new relationship	More centered
		Feel less burdensome to others

Source: Author

Music

Music is well-known to aid in physical comfort, reduce anxiety, and give rise to deeper states of consciousness.^{23,24} When working with transpersonal methods, music may be played selectively during sessions with patients. Music that soothes the nervous system yet stimulates deeply held emotions can be played during *asana* and *pranayama* practices, during journaling, and/or during deep relaxation. Music helps to evoke images and memories and also provides a sensory-emotional experience of being held and nurtured. Since patients may come from different generational or cultural backgrounds, the caregiver might ask patients what music they find soothing. From there, the caregiver can make further selections that would coincide with their patients' music preferences.

EFFECTIVENESS OF TRANSPERSONAL INTEGRATIVE THERAPY

Transpersonal Integrative Therapy was first applied as a protocol for people suffering grief and bereavement over the loss of loved ones. A study, conducted in 2007, measured participants' vitality, positive states, satisfaction with life, bodily symptoms, cognitive functioning, and mood after 6 weekly 2-hour sessions. Participants' vitality and positive states increased significantly.¹³ Their high levels of satisfaction with the intervention, and the positive changes reported in open-ended questionnaires and interviews, may be interpreted as further support for this therapeutic approach. As shown in the Table, when participants spoke of their experiences, they reported feeling improvements in their mood, body, or emotional state.

The burden of living with grief is common. It is fundamentally human to feel sorrow for loss of any kind. It is also a fundamental aim of caring for aging patients to help them acknowledge, adapt, and accept the wounds, transgressions, mistakes, and their consequences that may haunt them. When we provide a protective holding environment of kindness and empathy, we give patients a life-changing opportunity for working through disillusionment and loss. It is by way of grieving that patients are able to lower their defenses, accept reality on new terms, and move forward in life with greater resiliency and independence. Yoga practices blended with transpersonal and depth-oriented clinical interventions offer a natural doorway in to mind-body healing and forgiveness.

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