



Real and symbolic grief in times of the COVID-19 pandemic from the perspective of psychoanalysis

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ABSTRACT

OBJECTIVE

This study presents reflections from a psychoanalytic point of view about real and symbolic grief in the context of the COVID-19 pandemic.

METHODS

A qualitative approach was adopted with an exploratory objective to review the literature, with the aim of updating the discussion in psychoanalytic studies about the phenomenon of grief in the pandemic period.

RESULTS

The publications found still present an embryonic view of the facts, however, despite this, it was possible for us to shed light on the psychic implications arising from absences, especially of funeral rituals, making difficult the libidinal disinvestment in a given object, so that the ego can seek other objects of desire.

CONCLUSION

The conclusion of this study points to the need for further research, considering that the implications of a psychic order will only be perceived and, probably, clarified in a few years' time. However, it is possible to anticipate that a significant part of the population, faced with losses and the impossibility of experiencing the farewell ritual, has been overwhelmed by discouragement. The risk is, then, in the death of desire.

DESCRIPTORS

Grief, Psychoanalysis, Pandemic.

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INTRODUCTION

The pandemic caused by the new Coronavirus (COVID-19) has caused thousands of deaths on the planet, leading to a state of grief in subjects of all nations, regardless of creed, ethnicity, social class, gender, age, or any other significant distinguishing feature. Death is present in the form of real grief for individuals who have lost a family member, friend, or other loved one, and who have had their own pain repressed as a result of poorly elaborated grief due to the restrictions imposed by quarantine. Among these restrictions, we highlight the impossibility of receiving physical condolences, reduced time for the wake, the impediment to perform farewell rites and funeral rituals, the limited number of people at the funeral, and even isolation due to social distancing.

From another perspective, there is grief with a symbolic dimension permeating the daily life of this isolated society, the result of the loss of freedom, postponed and/or canceled projects, lost jobs, and so many other losses. With this, the feeling of anguish has surfaced vehemently, triggering a certain negativity when considering the prospect of some improvement when faced with a situation that seems to perpetuate the state of confinement.

When analyzing grief based on the theorist Sigmund Freud, Cavalcanti, Samczuk and Bonfim¹ (2013) stated that the individual must return to the sheltered condition before the loss, as a way to start the libidinal disinvestment in what was seen as an object of desire. It is important to point out that the concept of grief for Freud goes beyond the relationship with death, it is also about the individual's confrontation with concrete losses, denominated actual grief, and with figurative losses, denominated pathological grief¹.

Given the reality experienced due to the pandemic caused by the new Coronavirus (COVID-19), it is necessary to discuss the implications of this phenomenon in the lives of subjects and in society. Thus, the current article is justified as it proposes to reflect on the process of elaboration of real and symbolic grief arising from the losses experienced in the current scenario. After all, these bereavements have accentuated the feeling of anguish and depressive traits, as well as the state of melancholy.

Through a qualitative approach with an exploratory objective to review the literature, discussions from psychoanalytic studies about the phenomenon of grief in this pandemic period were updated. In this sense, there is an attempt to name some emotional manifestations and their implications on individual and collective mental health, as a way to provide opportunities for the recognition of psychological distress and possible actions to cope with this suffering, thus combating a certain inertia faced with the pandemic.

METHODS

This study is a qualitative approach with an exploratory objective through bibliographical research on the theme of grief, considering the theoretical scope of psychoanalysis. The sources chosen to carry out the research were the databases of the Scielo and Pepsic portals, using specific criteria to collect the analyzed data. Thus, two searches were carried out in each portal: the first using filtering through the descriptors grief and psychoanalysis, while the second used COVID-19 and grief. Exclusion criteria included duplicated publications and those that, for some reason, after reading the respective abstracts, did not contemplate the objective of this study.

Only works carried out between the period from 2015 to 2020, in Portuguese, were included. Finally, the works were

read, selecting the articles that, in fact, pertinently address the proposed scope of the current work, ensuring the theoretical choice. Thus, publications that did not approach grief from a psychoanalytic approach, considering the current context of COVID-19, were discarded.

In the analysis of the collected material, convergent contents were sought from the perspective of the studied authors, as a way of updating what is being thought, discussed, and reflected on with regard to the phenomenon of the COVID-19 pandemic. In addition, we sought to establish the possible implications for the mental health of the individual and society in light of the reality experienced.

RESULTS

Of the thirty-three articles found, only eight met the proposal of this work. Two books on the topic of grief were also used, as well as an excerpt from a video by Joel Birman presenting important updates on the pandemic context. The table below presents the material used for analysis.

Table 1. Demonstration of the material used for analysis in this study.

Base/year	Type of publication	Original title	Authors
Youtube, 2020	Video	Panel: Will the marks of the COVID-19 pandemic be permanent in the population?	Birman, Joel.
Scielo, 2020	Article	Effects of suppression of funeral rituals during the COVID-19 pandemic on bereaved family members.	Cardoso, Érika Arantes de Oliveira; Almeida, Breno César Almeida da; Santos, Jorge Henrique; Lotério, Lucas dos Santos; Accoroni, Aline Guerrieri; Santos, Manoel Antônio dos.
Scielo, 2020	Article	Terminality, death, and grief in the COVID-19 pandemic: emerging psychological demands and practical implications.	Crepaldi, Maria Beatriz; Schmidt, Beatriz; Noal, Debora da Silva; Bolze, Simone Dill Azeredo; Gabarra, Leticia Macedo.
Imago, 1996	Book	The History of the Psychoanalytic Movement, Papers on Metapsychology and other works (1914-1916).	Freud, Sigmund.
Martins Fontes, 2008	Book	On death and dying.	Kübler-Ross, Elisabeth.
Scielo, 2020	Article	Psycho-emotional Care in Neonatal Units during the COVID-19 Pandemic.	Morsch, Denise Streit; Custodio, Zaira Aparecida de Oliveira; Lamy, Zeni Carvalho.
Scielo, 2020	Article	The necropolitics of the COVID-19 pandemic in Brazil: Who can die? Who is dying? Who was born to be let to die?	Navarro, Joel Hirtz do Nascimento Navarro; Silva, Mayara Ciciliotti da; Siqueira, Luziane de Assis Ruela; Andrade, Maria Angélica Carvalho.
Scielo, 2020	Article	Grief and non-violence in times of pandemic: precariousness, mental health and other ways of living.	Rente, Maria Angelica de Melo; Merhy, Emerson Elias.
Scielo, 2020	Article	Renal palliative care and the COVID-19 pandemic.	Santos, Cassia Gomes da Silveira; Tavares, Alze Pereira dos Santos; Tzanno-Martins, Carmen; Neto, José Barros; Misael da Silva, Ana Maria; Lotaif, Leda; Souza, Jonathan Vinícius Lourenço.
Scielo, 2020	Article	Mental Health and Psychological Interventions in the New Coronavirus Pandemic.	Schmidt, Beatriz; Crepaldi, Maria Beatriz; Bolze, Simone Dill Azeredo; Neiva-Silva, Lucas; Demenech, Lauro Miranda.
Scielo, 2020	Article	Catástrofe, grief and hope: psychoanalytic work in the COVID-19 pandemic.	Vertzman Julio; Romão-Dias, Daniela.

DISCUSSION

Freud² (1915) described grief as a process brought about by the loss of the beloved object, making a libidinal disinvestment of all links with this object necessary. This loss is characterized by the actual death of a loved one, or it may take a more subjective form as an idea, value, or other imaginary dimension. The root of grief lies in the opposition to abandoning

the libidinal position, deviating from reality and generating an attachment permeated with desire in relation to the object. According to the author, people do not easily abandon a libidinal position and this generates a very large expenditure of time and psychic energy. Although grief has pathological contours, it should not be seen as a disease, since it is the natural way of elaborating losses. Grief, despite being slow and painful, is overcome after a certain time, at which point the ego will once again be free to make other libidinal investments².

It is reasonable to assume that grief experienced in the pandemic context, due to its extraordinary condition, causes great suffering to the individual, either because of the restrictions that prevent real contact with the deceased (sealed coffins), or the impossibility of having contact with and gathering family members at the wake, as well as other difficulties associated with the impracticality of funeral rituals. Also because, for this movement of abandoning the libidinal position and egoic detachment, it is necessary to experience the farewell ritual.

From a psychoanalytic perspective, it is possible to infer that isolation and the pandemic also affect symbolic grief. In this context, the subject has to deal with the loss of their freedom, their routine, short and medium-term projects, contact with the people who are important to them, social activities that provided pleasure, and even the possibility of losing their job and/or livelihood. The problem, as in real grief, is that libidinal positions are not easily abandoned.

Regarding melancholy and pathological grief from the Freudian perspective in the current pandemic, we will use the speech of Joel Birman (2020), a psychiatrist and psychoanalyst, in a video entitled "Panel: Will the marks of the COVID-19 pandemic be permanent in the population?" which brings together professionals to have a discussion about changes in society and its future marks in this context.

Birman³ (2020) begins his digression explaining that the virus represents a great danger to the psyche, as it is an unknown pathology, lacking effective health protocols, in addition to being invisible thanks to its nature; so, a threat we can't name, and what is not named cannot be anticipated, generating the possibility of experiencing a phenomenon of two dimensions: helplessness and despondency. The first is explained by the possibility of appealing to a higher authority; while the population can count on their rulers to mediate the pandemic situation, there is still some hope. In despondency, there is no one to appeal to, leading, as Birman rightly puts it, to the "bleeding of anguish" or a despondent position.

Birman³ (2020) sees scenarios that are occurring and that will probably cause permanent marks for the current society affected by the pandemic. Among these are the cases of people who are not infected, but because they carry distressing feelings (anxiety neurosis) they end up having episodes of panic syndrome. There is also an increase in the number of individuals who will develop a hypochondriac condition to the invisible threat, in the number of obsessive cleaning rituals, in domestic violence and femicide, in addition to the increase in the use of legal and illegal drugs. This points to the frightening number of dead people buried indignantly, without the possibility of funeral rituals, whose melancholy effect causes the precariousness of grief, eliciting pathological grief, with the feeling of guilt for the death of a loved one. Remember the depression, which, potentiated by the high unemployment rate, generates the libidinal emptying that turns into the melancholy observed by the high suicide rates.

There is still another reflection associated with the political choices that the individual may eventually judge as having been wrong, even if unconsciously, in view of the current government's conduct during the pandemic. These choices are expressed not only by the discouraged and hopeless position that causes melancholia, but also by a possible guilt that would

translate to pathologizing grief, as this individual feels responsible not only for their own suffering, but for the suffering all around them, since they are co-responsible for the political direction of the country.

As well as Rente and Merhy⁴ (2020), Cardoso, Silva, Santos, Lotério, Accoroni AG and Santos⁵ (2020) state that the COVID-19 pandemic affected the experiences of terminality and death, as well as funeral rites. The impossibility of farewell rites to the body complicates the psychic realization of the absence of the person who no longer exists, because the impression that remains is that a phase has begun, but has not ended.

Morsch, Custodio and Lamy⁶ (2020) ratify that when losses are not properly understood, grief tends to take the form of an existential emptiness that generates great psychic suffering and traumas that may arouse depressive disorders, anxiety, post-traumatic stress, and pathological grief. In this unfavorable context, it is possible to notice the construction of intervention suggestions mediated by the use of technologies, in order to alleviate the anguish.

According to Crepaldi, Schmidt, Noal, Bolze and Gabarra⁷ (2020), even with no real losses during the pandemic, it is clear that the subjects experience pain and suffering out of respect and understanding of the pain of the other. Therefore, they understand that the psychological consequences caused by COVID-19 can be more severe and lasting than the aggressive action of the disease itself, denoting the importance of psychological mediations during and after the duration of the pandemic, considering the needs related to the processes of terminality, death, and grief.

Schmidt, Crepaldi, Bolze, Neiva-Silva and Demenech⁸ (2020) observe that the fear of being infected by a potentially fatal virus, which is extremely contagious, and with little information about its origin and the development of the disease, directly impacts the psyche of the subject. Added to this are symptoms of depression, anxiety, and stress in the general population, with a high prevalence in health professionals. Among these, the increased risk of contagion and death, professional and emotional overload, exacerbated exposure to large-scale death, together with the frustration of not avoiding it, lead to an increase in these symptoms.

Another factor to be highlighted is the one presented by Navarro, Silva, Siqueira and Andrade⁹ (2020). These authors propose a reflection on which lives are subject to death by COVID-19, focusing on the issue of social inequalities thinking of Foucault's biopolitics, understood as the authority that orders the policies of life, that is, the strategies that control which people should live and which are insignificant. This pandemic makes us think about the vulnerability and existence of a population that also needs to be recognized and respected in their emergencies.

Undeniably, the grieving process needs to be elaborated. In this sense, Kübler-Ross¹⁰ talk about five stages. In the first, "denial and isolation", the author explains that in the face of imminent death, most patients react with indignation, denying this possibility. Here, we can make a correlation with the subjects who deny the seriousness of the pandemic, putting at risk not only their health, but also that of their families and society as a whole.

The second stage of grief, "anger", occurs when the patient cannot remain in the stage of denial, switching to negative feelings that translate into a question: "Why me?". Thus, the subject attacks everyone around them for no apparent reason¹⁰. It is possible to draw a parallel with the grief of the pandemic, arousing the feeling of anger when many individuals do not respect the minimum conditions and rules of social isolation.

Bargaining is the third stage, when the subject tries to act with more caution, especially in relation to divine help, when making promises¹⁰. Thus, it seems natural that bargaining is

part of the grief process we are currently experiencing due to COVID-19, since subjects turn to divine help in times of despair, in order to redeem themselves in a situation of chaos. This phenomenon is even more evident when the authorities, despite the restrictions imposed on all services that are not considered essential, liberate religious activities on the grounds that these practices are essential for the population, despite the agglomerations that could actively contribute to worsen the general situation of the pandemic.

Depression, stage four, occurs when the subject is overwhelmed by a great sense of loss. There is no longer any way to deny. The fifth and final stage of grief, on the other hand, "acceptance", allows the patient to express their feelings and reveal their envy for the health of others¹⁰.

Faced with so many uncertainties and the need for elaboration, Verztman and Romão-Dias¹¹ (2020) state that the pandemic confronts us with four death anxieties: physical, social, psychic, and collective. We all suffer some loss, which makes it fundamental, here also considering Santos, Tavares, Tzanno-Martins, Neto, Silva and Lotai¹² (2020), referring to carers, the welcoming of health professionals by the bereaved family, remembering that they also need to be welcomed.

It is reasonable to assume, therefore, that any process that arouses insecurity when experienced in the psychic sphere, because it is unknown, is also a process that causes great anguish. Here it is worth remembering the designation given by Birman³ (2020) as the "bleeding anguish", culminating in a melancholy effect on the individual, including the professional psychologist. There will certainly be a price to be paid.

CONCLUSION

The grieving process requires work of a psychic order. The libidinal disinvestment in the lost object is what will allow the reinvestment of that libido in another object of desire. In this sense, it is essential to experience the process of grieving in the real and the symbolic dimensions, seeking to deal with losses in a healthier way, given the inherent uncertainties of the invisible threat: the virus.

In the Covid-19 pandemic, the population has been experiencing economic uncertainties, loss of freedom, physical distancing that undermines affection, and the whole issue of interrupted funeral rituals: sealed coffins, the impossibility of holding funerals, in addition to family gatherings in the search of comfort. In the triggering of psychological distress, melancholy was listed in the works presented, being constantly associated with the chaotic scenario due to the excess of anxieties that present themselves at this moment. Health professionals need to deal with death on a daily basis, especially the real one, but also the symbolic grief, such as the distance from the family, the fear of contagion and of infecting loved ones, the loss of the setting, especially in the case of professionals from psychology, the uncertainties for the future, and all the wear and tear associated with this process.

Real or symbolic, what is irreparable would be (and there is a risk of it being) the population or a large part of it being infected by discouragement, imprinting on the subject the mark of non-being, which would lead to the death of desire. After all, in the absence of rituals, life becomes frayed.

REFERENCES

1. Cavalcanti AKS, Samczuk ML, Bonfim TE. O Conceito Psicanalítico do Luto: uma perspectiva a partir de Freud e Klein. *Psicol inf.* [Internet]. 2013 [Acesso 15 aug. 2020];v.17, n.17, p.87-105. Disponível em: http://pepsic.bvsalud.org/scielo.php?script=sci_arttext&pid=S1415-88092013000200007&lng=pt&nrm=iso
2. Freud S. Luto e Melancolia (1917 [1915]). In: _____. *A história do Movimento Psicanalítico, Artigos sobre a Metapsicologia e outros trabalhos (1914-1916)*. Edição Standard Brasileira das Obras Psicológicas Completas de Sigmund Freud. Vol. XIV, Rio de Janeiro: Imago; 1996. p. 245-263.
3. TV Abrasco. Home [YouTube Canal]. [2020]. Disponível em: <https://www.youtube.com/watch?v=qaVwFLDbsHQ&t=778s>
4. Rente MAM; Merhy EE. Luto e não-violência em tempos de pandemia: precariedade, saúde mental e modos outros de viver. *Psicol. Soc.* 2020 Sept;32:e020007. <https://doi.org/10.1590/1807-0310/2020v32240329>
5. Cardoso EAO, Silva BCA, Santos JH, Lotério LS, Accoroni AG, Santos MA. Efeitos da supressão de rituais fúnebres durante a pandemia de COVID-19 em familiares enlutados. *Rev. Latino-Am. Enfermagem.* 2020 Feb;28:e3361. <https://doi.org/10.1590/1518-8345.4519.3361>
6. Morsch DS; Custodio ZAO; Lamy ZC. Cuidados Psicoafetivos em Unidade Neonatal diante da Pandemia de COVID-19. *Rev. paul. pediatr.* 2020 May;38:e2020119. <https://doi.org/10.1590/1984-0462/2020/38/2020119>
7. Crepaldi MA, Schmidt B, Noal DS, Bolze SDA, Gabarra LM. Terminalidade, morte e luto na pandemia de COVID-19: demandas psicológicas emergentes e implicações práticas. *Estud. psicol. (Campinas)*. 2020 Jun;37:e200090. <https://doi.org/10.1590/1982-0275202037e200090>
8. Schmidt B, Crepaldi MA, Bolze SDA, Neiva-Silva L, Demenech LM. Saúde Mental e Intervenções Psicológicas diante da Pandemia do Novo Coronavírus (COVID-19). *SciELO.br*. 2020 Apr. doi: <https://doi.org/10.1590/1982-0275202037e200063>
9. Navarro JHN, Silva MC, Siqueira LAR, Andrade MAC. Necropolítica da pandemia pela Covid-19 no Brasil: quem pode morrer? quem está morrendo? quem já nasceu para ser deixado morrer? [Internet]. 2020 [Acesso 10 oct 2020]. Disponível em: <https://preprints.scielo.org/index.php/scielo/preprint/view/901/1262>
10. Kübler-Ross E. *Sobre a Morte e o Morrer*. Tradução: Paulo Menezes. 9ª. ed. São Paulo: Ed. WMF Martins Fontes; 2008.
11. Verztman J, Romão-Dias D. Catástrofe, luto e esperança: o trabalho psicanalítico na pandemia de COVID-19. *Rev. latinoam. psicopatol. fundam.* 2020 June;23(2):269-290. doi: <https://doi.org/10.1590/1415-4714.2020v23n2p269.7>
12. Santos CGS, Tavares APS, Tzanno-Martins C, Neto JB, Silva AMM, Lotai L. Cuidado paliativo renal e a pandemia de Covid-19. *J. Bras. Nephrol.* 2020 Aug;42(2,supl.1):44-46. doi: <https://doi.org/10.1590/2175-8239-JBN-2020-S111>