GRIEF AND CHRONIC PAIN

Holding What Hurts: Neurobiology, Meaning, and Clinical Practice

Continuing Education Training for Counselors & Social Workers

Holding What Hurts:
Neurobiology, Meaning, and Clinical Practice

Rachel Zentner, LPC, MSE, SAS
Zentner Consulting LLC and U.S. Pain Foundation

Scope of Practice

Materials that are included in this course may include interventions and modalities that are beyond the authorized scope of practice for your profession. As a licensed professional, you are responsible for reviewing the scope of practice, including activities that are defined in law as beyond the boundaries of practice in accordance with and in compliance with your profession's standards.

Conflicts of Interest

As required by several accrediting boards, speaker and activity planning committee conflicts of interest (including financial relationships with ineligible organizations) were disclosed prior to the start of this activity. To view disclosure information, please see activity advertising.

Learning Objectives

By the end of this training, participants will be able to:

- Recognize the overlap between chronic pain and grief
- Understand shared neurobiological and stress mechanisms
- Identify signs of prolonged or disenfranchised grief in pain clients
- Strengthen therapeutic alliance with medically complex clients
- Integrate relational and meaning-centered interventions

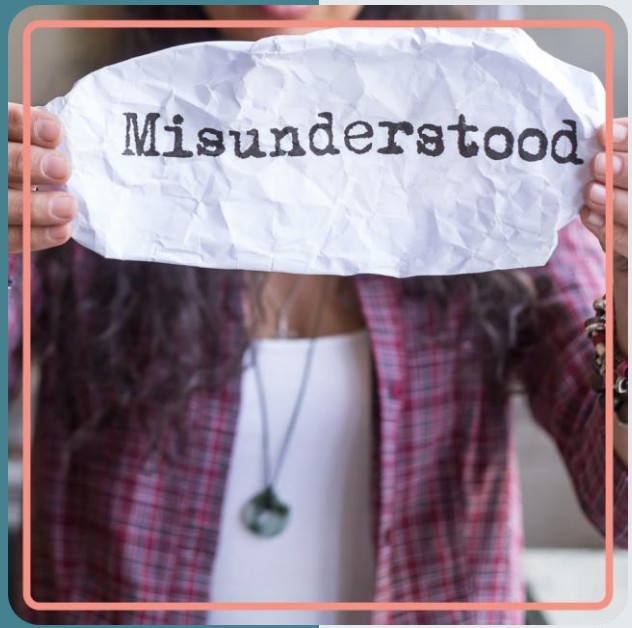
When Pain and Loss Intersect

The Clients We See

Many clients with chronic pain are also grieving:

- Death of a loved one
- Loss of health or functioning
- Identity shifts
- Relationship changes
- Occupational loss





The Invisibility Factor

Both grief and chronic pain:

- Are subjective experiences
- May lack clear medical findings
- Are vulnerable to minimization
- Can be mislabeled as “somatization”

The Brain, Stress, and Meaning

Shared Brain Pathways

Grief and physical pain both activate:



Anterior cingulate cortex
(emotional pain)



Insula
(body awareness)



Amygdala
(threat detection)



Prefrontal cortex
(regulation and meaning-making)

When Stress Becomes Embodied

Chronic grief stress can affect:

- Cortisol regulation
- Immune function
- Sleep patterns
- Pain sensitivity

Disenfranchised & Silenced Grief

Grief That Isn’t Recognized

Disenfranchised grief may involve:

- Ex-partners
- Miscarriage or infertility
- Non-death losses
- Caregiver role loss
- Culturally invalidated grief

Clinical Implications

When grief goes unspoken:

- Pain may intensify
- Clients feel isolated
- Medical utilization may increase
- Shame may deepen



Whole-Person Assessment

Moving Beyond Either/Or



Avoid:

- “It’s psychological.”
- “It’s purely medical.”



Instead consider:

- Attachment history
- Trauma exposure
- Cultural context
- Identity and meaning



Gentle Assessment Questions

- “What changed in your life around the time the pain began?”
- “What losses are you still carrying?”
- “How has this affected your sense of who you are?”

The Therapeutic Relationship as Regulation

Alliance as Intervention

Research consistently shows:

- Empathy predicts outcomes
- Validation reduces distress
- Alliance matters more than modality



The Clients We See

Expect:

- Medical trauma
- Frustration with providers
- Hopelessness
- Fear of being labeled

Caring for Ourselves



Working with chronic pain and grief can evoke:

- Helplessness
- Secondary trauma
- Compassion fatigue



Protective practices include:

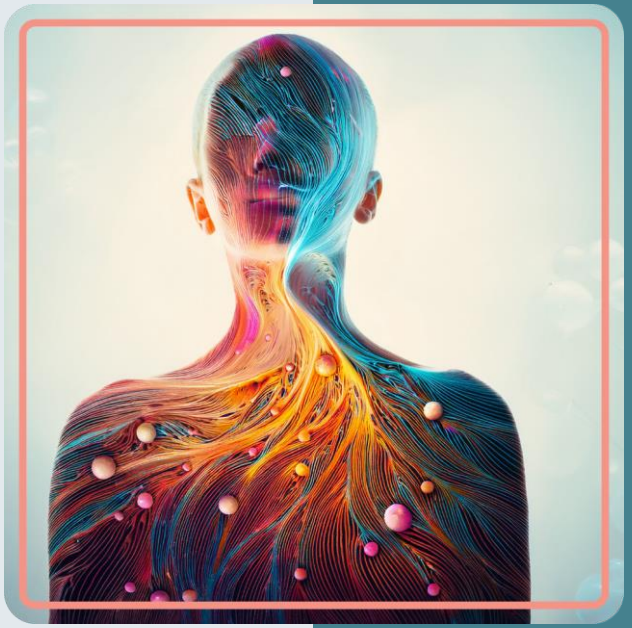
- Reflective supervision
- Peer consultation
- Clear boundaries
- Personal grief awareness

Integrative Interventions

Mind–Body Approaches

Evidence supports:

- Mindfulness-based interventions
- Acceptance & Commitment Therapy
- Values clarification
- Interoceptive awareness



Meaning & Narrative

Helpful modalities:



Narrative reconstruction



Legacy projects



Expressive writing



Identity rebuilding work

Communication as Clinical Skill



Trauma-Informed Stance

Core principles:

- Safety
- Collaboration
- Empowerment
- Cultural humility

Words Matter



Instead of:

- “Your tests are normal.”



Try:

- “Your pain is real, even if tests don’t explain it yet.”

Integration & Reflection

Clinical Takeaways

- Grief and pain are deeply interconnected
- The body carries loss
- Validation changes physiology
- Integrated care improves outcomes
- Your presence is powerful medicine

About U.S. Pain Foundation

Who We Are

The U.S. Pain Foundation is a 501(c)(3) national nonprofit and the leading patient organization for people living with pain. Our mission is to empower, education, connect, and advocate for individuals with chronic pain—as well as for their care partners and providers.

What We Do

Through peer support groups, advocacy efforts, and a wide range of educational programs and services, we work to improve quality of life and strengthen patient outcomes. We tackle access and affordability challenges, foster community connection, and increase public awareness and empathy for the realities of pain.

OUR PROGRAMS

- Federal & State Policy
- Advocacy Program
- Volunteer Network
- *INvisible Project*
- Peer Support Groups
- Pediatric Pain Program
- Medical Cannabis Advocacy
- MyPainPlan
- Living Well With Chronic Pain booklets
- Spanish materials
- Surveys
- Handouts/Infographics
- Building Your Toolbox
- Pain Awareness Month
- KNOWvember















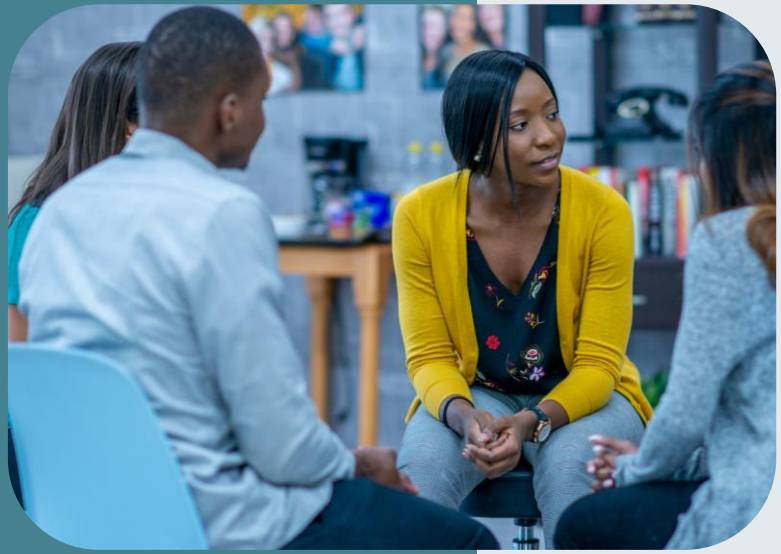
RESOURCES

U.S. Pain has infographics, handouts, booklets, guides, and a webinar library — all free to download



Download at:
uspainfoundation.org/resources

PAIN CONNECTION



National and Daily

Open to anyone with chronic pain; meetings center on a theme or topic.

State-based

Help individuals find and develop a local community of support.

Specialized & Affinity

Provide monthly groups for specific populations to connect.

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