A WORKPLACE CARE USA WHITE PAPER | ORIGINAL CONCEPTUAL FRAMEWORK

TRANSCENDENCE GRIEF CARE MODEL™

A Gentle Framework for Learning to Breathe After Loss

A grief-care framework for renewed meaning, connection, agency, and continued becoming

> ***Transcendence is not getting over grief. It is learning to carry loss in a way that preserves love, deepens wisdom, and makes room for life again.***

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For grieving people, families, caregivers, chaplains, faith communities, support groups, and workplaces

EXECUTIVE SUMMARY

Grief does not need to disappear for life to become possible again

Grief care is often caught between two inadequate responses: hurry people toward closure or treat every expression of sorrow as a problem to correct. The Transcendence Grief Care Model™ offers a third posture. It makes room for grief as a human response to what mattered while supporting renewed capacity for meaning, relationship, choice, and life.

The model is Esther Agbenu Ochoga's original conceptual and practice framework. It is not a ladder, a clinical formula, or a promise that grief will disappear. It is a companion for moving from raw pain toward integrated living. The movement is not straight. A person may revisit the same memory, question, or ache many times. What changes is not necessarily the presence of sorrow, but the way sorrow is carried.

> **CENTRAL DEFINITION** Transcendence is not getting over grief. It is learning to carry loss in a way that preserves love, deepens wisdom, and makes room for life again.

The model at a glance

Three sacred movements—Naming the Grief We Carry, Honoring the Sacredness of Grief, and Moving Toward Transcendence—hold the journey. Within the third movement, five dimensions describe what integrated living can involve: Integration, Embodied Wisdom, Spiritual Expansion, Purposeful Presence, and Legacy. The BREATH Practice™ turns those ideas into a gentle, repeatable way of returning to life.

Three commitments

- Name before redirecting. Care begins by recognizing what has actually been lost—including identity, health, trust, belonging, a dream, or the life a person expected.
- Honor without imprisoning. Love and memory can remain present without requiring permanent suffering as proof that the loss mattered.
- Support life without forcing growth. Wisdom, purpose, or legacy may emerge, but none is a moral requirement or a timetable imposed on the grieving person.

> **SCOPE** This is an original care framework—not a validated assessment, diagnosis, psychotherapy, crisis protocol, or substitute for clinical, pastoral, legal, or organizational support. Use it with consent, cultural humility, and attention to scope.

1 | WHY ANOTHER GRIEF MODEL?

The problem is not only pain. It is what people are told to do with it.

Some losses are public and immediately recognized. Others remain socially invisible: the end of a marriage, a changed body, a diagnosis, infertility, estrangement, migration, a damaged trust, a lost role, a disrupted faith, or the future someone thought would arrive. When a loss is unnamed, support can miss the wound entirely. The person may be expected to function while carrying an experience that no one around them has learned to acknowledge.

Stage language has helped many people understand grief, but it is often misused as a fixed sequence or a deadline. Contemporary bereavement scholarship offers a more dynamic picture. The Dual Process Model describes oscillation between attending to the loss and adapting to changed life; meaning-reconstruction research examines the work of sense-making and identity after bereavement (Stroebe & Schut, 1999; Neimeyer, 2019). These perspectives support movement without requiring linearity.

What transcendence adds

Meaning can remain an insight held in the mind. Transcendence asks how grief is carried through the body, spirit, relationships, choices, presence, and future. It does not place a person above pain. It names the possibility that sorrow and aliveness can coexist—that a life altered by loss can still become spacious, honest, connected, and purposeful.

> **A SACRED SPIRAL** The journey is neither a perfect ladder nor a return to who a person was before. A spiral revisits familiar ground while allowing new perspective, new capacity, and new breath.

Four distinctions that protect the model

- Transcendence is not closure. A relationship, memory, or continuing bond may remain important; its impact depends on meaning and context rather than one universal rule (Neimeyer, Baldwin, & Gillies, 2006).
- Transcendence is not performance. Pain is not raw material that must become a book, ministry, initiative, or inspiring story.
- Transcendence is not spiritual certainty. Lament, silence, anger, doubt, ritual, nature, prayer, and nonreligious meaning can all belong.
- Transcendence is not clinical avoidance. Persistent, severe, or dangerous distress belongs with qualified care; the framework can accompany referral but cannot replace it.

> **CARE ETHIC** Never use the language of healing, faith, resilience, or purpose to rush a person past pain, demand disclosure, excuse harm, or make support conditional on appearing improved.

2 | THE THREE SACRED MOVEMENTS

Name. Honor. Move toward becoming.

The three movements create an order of care without pretending that grief follows an orderly path. Naming prevents bypass. Honoring protects dignity and love. Moving toward transcendence opens possibility without demanding a particular outcome.

MOVEMENT	PURPOSE	CARE QUESTION
1 NAMING THE GRIEF WE CARRY	Before grief can be transformed, it must be named. The loss may involve death, marriage, identity, trust, health, belonging, a dream, or the life someone expected.	**What have I lost that I have not fully named?**
2 HONORING THE SACREDNESS OF GRIEF	Grief is neither worshiped nor minimized. It is honored because it reveals attachment, value, hope, and what mattered. Recognition comes before explanation.	**What does my grief reveal about what mattered to me?**
3 MOVING TOWARD TRANSCENDENCE	The loss is carried with growing wisdom, tenderness, agency, and breath. Sorrow may remain while life expands around it through five dimensions.	**What would one honest, life-giving movement look like now?**

How to accompany each movement

When naming: listen for the loss underneath the event. “I retired” may also mean lost identity, rhythm, influence, community, or financial safety.

When honoring: resist the reflex to reassure. Validation can be as simple as, “This mattered,” “I can hear how much changed,” or “You do not have to make this tidy for me.”

When moving: ask permission. Offer a small next step, not a destination. Returning to a meal, a walk, a conversation, a decision, or a boundary can be meaningful movement.

> **THE ORDER MATTERS** Movement without naming becomes avoidance. Meaning without honoring becomes explanation. Spiritual language without permission becomes control. Care begins by making room.

3 | THE FIVE DIMENSIONS OF TRANSCENDENCE

What changes when grief is carried rather than erased

The dimensions are not achievements to complete or evidence that someone is grieving correctly. They are places to notice movement. One dimension may feel alive while another remains inaccessible. The person—not the helper—determines what is relevant and when.

DIMENSION	MOVEMENT	REFLECTION
INTEGRATION	The loss finds a place within the larger life story. "Carrying forward" replaces pressure to "move on."	**How can I carry this loss without becoming only this loss?**
EMBODIED WISDOM	The body's tiredness, tears, tension, limits, compassion, and clarity become information rather than inconvenience.	**What has grief taught my body, heart, and spirit to notice?**
SPIRITUAL EXPANSION Awakened Inner Life	The inner life is allowed to change. Prayer, lament, silence, nature, ritual, music, memory, or honest uncertainty may support it.	**What does my inner life need now—prayer, silence, ritual, nature, lament, or simply breath?**
PURPOSEFUL PRESENCE	Grief becomes tenderness in daily life: more patience, truth, boundaries, attention, or care with another person's pain.	**How is grief changing the way I show up for myself and others?**
LEGACY	Love continues in another form—often quietly—through memory, truth, rest, pattern-breaking, relationship, or something carried forward.	**What love, wisdom, or truth do I want to carry forward?**

> **TWO TRUTHS** Love is not preserved by permanent suffering. Pain does not automatically make us wise—but pain tended honestly can become wisdom.

Guarding against forced meaning

A person may never describe a devastating loss as a gift, lesson, or source of growth. The model does not require that conclusion. Purposeful presence may be private. Legacy may be a single boundary or the decision not to pass pain forward. Spiritual expansion includes doubt and absence. Integration can mean making room for a reality that still feels unresolved.

> **THE MEASURE** The question is not, "Has this person become inspiring?" It is, "Does this person have more permission, support, agency, connection, and room to live honestly with what happened?"

4 | BREATH PRACTICE™

Returning to life without betraying love

BREATH is a practice, not a performance standard. It can be used in one quiet reflection, revisited across months, or adapted in a conversation with a trusted companion. Begin anywhere. Pause whenever the process becomes too much. The person retains the right not to answer.

	PRACTICE	INVITATION
B	BE HONEST ABOUT THE LOSS	Tell the truth about what happened and what it cost.
R	RECOGNIZE WHAT GRIEF HAS CHANGED	Notice the body, mind, relationships, faith, identity, pace, and daily life.
E	EMBRACE MEMORY WITHOUT BECOMING IMPRISONED BY IT	Give memory a sacred place without requiring it to become the whole house.
A	ALLOW SMALL RETURNS TO LIFE	Open the curtains. Eat. Walk. Rest without apology. Laugh without guilt. Accept one moment of ease.
T	TRANSFORM PAIN INTO TENDERNESS, NOT PERFORMANCE	Do not make grief impressive. Let honest tending deepen compassion, truth, and wakefulness.
H	HONOR LOVE WHILE HEALING FORWARD	Healing does not betray love. Breathing again does not erase what mattered.

A one-view sequence

Name grief › Honor what mattered › Integrate loss › Listen to embodied wisdom › Awaken the inner life › Show purposeful presence › Carry love forward › Keep breathing

USE GENTLY BREATH is not a checklist for proving readiness. It should not be used by an employer, caregiver, clinician, pastor, family member, or group leader to score progress, demand a story, or pressure reconciliation.

5 | APPLYING THE MODEL

Presence before repair

The model is most faithful when it changes the quality of accompaniment. The helper's task is not to produce transcendence. It is to create conditions in which truth, dignity, support, choice, and breath remain possible.

SETTING	POSTURE	PRACTICE
INDIVIDUAL OR FAMILY	Begin with the loss that is present—not the loss others think should matter most. Ask permission before reflecting, praying, planning, or inviting a next step.	Naming, journaling, memory ritual, rest, practical help, a trusted companion, professional care when needed.
CHAPLAIN, PASTOR, OR CAREGIVER	Offer presence before explanation or scripture. Let faith and pain coexist. Honor silence and tears. Do not turn someone's sorrow into a sermon, testimony, lesson, or prayer request without permission.	Ask rather than assume. Offer—not impose—prayer or ritual. Protect confidentiality. Know scope and referral pathways.
SUPPORT GROUP OR COMMUNITY	Establish consent, confidentiality, voluntary participation, and the right to pass. Avoid comparing losses or rewarding the most coherent story.	Use one movement or BREATH letter at a time. Close with grounding, resources, and clear follow-up.
WORKPLACE	Leaders are not therapists. They can still name loss, recognize its impact, make practical accommodations, communicate clearly, and preserve dignity.	Leave, coverage, workload adjustment, flexibility, quiet space, EAP, counseling, chaplaincy, remembrance, and trust repair.

When grief enters the workplace

Grief may appear as fatigue, silence, irritability, withdrawal, mistakes, conflict, or a changed pace. Loss may involve a death, diagnosis, layoff, restructuring, closure, leadership departure, scandal, community tragedy, or prolonged pressure. Research on bereavement at work underscores the value of communication, accommodation, recognition, and emotional support (Gilbert et al., 2021; Wilson, Rodríguez-Prat, & Low, 2020). A leader can begin with three questions: What has been lost? Who is affected? What care does this moment require?

ORGANIZATIONAL TRANSCENDENCE A grief-informed workplace does not lower standards. It deepens care. The organization survives loss and allows the experience to teach it how to communicate, accommodate, remember, repair trust, and become more human.

REFERRAL BOUNDARY Seek qualified clinical or emergency support when there is danger, suicidal intent, severe or worsening impairment, trauma symptoms, substance-related risk, or distress beyond the helper's competence. Diagnosis belongs to qualified professionals (World Health Organization, 2024).

CONCLUSION | RESPONSIBLE USE | REFERENCES

Sorrow can remain while life becomes spacious again

The Transcendence Grief Care Model™ refuses two false choices: remain permanently defined by loss or abandon what was loved in order to live again. It offers another way. Name the grief. Honor what mattered. Carry the loss with growing integration, embodied wisdom, an awakened inner life, purposeful presence, and legacy. Keep breathing—not because the loss was small, but because love can remain while life continues to become.

> **RESPONSIBLE-USE STATEMENT** This original conceptual and practice framework has not been presented as a validated clinical intervention or measurement instrument. Do not use it to diagnose, rank grief, impose religious meaning, force disclosure, guarantee growth, evaluate employee fitness, or replace appropriate professional care.

About the author

Esther Agbenu Ochoga, PhD, MDiv, is the creator of the Transcendence Grief Care Model™ and founder of Workplace Care USA. Her work brings grief care, spiritual care, human dignity, and organizational responsibility into the same field of practice. She writes for the places where private sorrow meets public life—and where care must become visible in how people are accompanied.

Suggested citation

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