



Grief: Different Reactions and Timelines in the Aftermath of Loss

In the wake of loss, there is no particular way of grieving that is right or wrong, and there is not a “normal” period of time for grieving. The amount of time it will take a person to grieve will depend on the circumstances of the death, the nature of the relationship, and their own personal needs. The popular “stage theory”, in which grief passes through five stages: denial, anger, bargaining, depression, and acceptance, may be appealing in that it makes loss seem controllable. However, research suggests that grief doesn’t follow a set of stages. It’s more of a complicated, ongoing process that comes in waves.

On the one hand, scientists have found that grief, like fear, is a stress reaction, which may be accompanied by physiological changes in stress hormones like cortisol, disrupted sleep patterns, physical distress such as weakness, breathlessness, restlessness, and immune system changes. On the other hand, some people do not appear to need to grieve as keenly as others, even for those they most love sometimes. Additionally, the bereaved person sometimes feels as much relief as sorrow, especially when suffering was involved prior to the other’s death.

While grief is not the same for everyone, there are characteristic behavioral/emotional reactions among people grieving after a loss of a *close* relationship, be that a family member, friend, or coworker. Again, these reactions are dependent on many factors, including the nature of the relationship, the person’s personality style, their characteristic coping strategies, and the environment in which they work or live:

- Spending a lot of time thinking about the person who died.
- Feeling strong feelings of sadness and loneliness, fear and anxiety, and even resentment and anger. The person may avoid thinking about the loss, while at other times they may make special efforts to remember or include the person’s memory in their life.’
- A subsiding of the intensity of grief as time goes by but with fluctuating periods of emotions, even as the intense grief subsides. A constant state of grief increases the risk of ruminating and withdrawing from the world or alienating others. Fortunately, emotions tend to come and go. Over time the cycle widens, with a gradual return to a more balanced state of equilibrium.
- A sense of guilt when starting to re-engage in activities and relationships, especially if the person feels guilty for having lived when the other person died or if they feel that by re-engaging in life, they are betraying the person who died.
- Worrying about forgetting the person who died, or losing memories associated with that person.

The longest bereavement study that has been conducted (spanning 35 years), found that for some, many aspects of bereavement fade only gradually, after many years have passed. Reflective thoughts and memories happen less frequently over time, but they are not completely absent. Some studies have shown that some mourners hold on to a relationship with the deceased for long periods after the death, with no notable ill effects.

Many risk factors can influence the severity of grief reactions along a continuum, including traumatic or sudden death, relation to the deceased, time since death, age, and gender. When grief symptoms are affected by these risk factors, they can contribute to what has been called “complicated grief”, which has been related to more severe or long-lasting grief, as well as a variety of psychological, behavioral, and medical outcomes such as depression, substance use, suicidality, blood pressure, and changes in central nervous system and cardiovascular responsivity. Studies have shown that there can be a blend of post-traumatic and grief reactions when loss is sudden or traumatic. Some people may:

- retreat from close relationships with family and friends.
- avoid their usual activities because they are reminders of the traumatic death.
- stay focused on the circumstances of the death, including being preoccupied with how the death could have been prevented, what the last moments were like, and who was at fault. These reactions may interfere with grieving, making it more difficult for survivors to adjust to the death.
- have post-traumatic stress symptoms such as feeling numb, wanting to avoid anything that reminds them of the death, or experiencing intrusive, disturbing images of the death. These reactions may make them feel confused or guilty for not having what they perceive to be more typical grief reactions. They can also prolong the grief process or interfere with positive reminiscing.

Some ways of thinking can increase or prolong grief after a traumatic, sudden or unexpected death. Common thinking patterns in complicated grief are:

- Trouble accepting the death
- Guilt about their possible role in the death, or the fact that the other/s died and they survived
- Inability to trust others
- Numbness and detachment
- Excessive agitation, bitterness, or anger
- Feeling very uneasy about moving on with life
- Feeling that life is empty or meaningless
- Believing the future will be bleak

These thinking patterns can be difficult to change on one’s own. If they linger for months, or cause significant distress or interference with functioning, consider seeking evidence-based prolonged grief treatment. It has been found to reduce the severity and frequency of these thought patterns, as well as the length and severity of prolonged grief.

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