

Complicated Grief

Complicated grief is when the normal process of mourning is no longer healthy and adaptive. It doesn't necessarily require the loss of a loved one. Rather it may be related to any loss such as health, a marriage or partnerships, a job or retirement, a home, etc. Sometimes uncomplicated grief can feel so intense that it feels like it is complicated. However, it may not be. It really is a matter of intensity and duration...if the intensity and duration do not decrease over time. It is especially when the thoughts and feelings overwhelm the person and then leads to psychological disorders such as major depression, post traumatic stress disorder, or anxiety or even panic attacks. Some people begin to turn to drugs or alcohol, or experience separation anxiety that never lessens over time. 14-30% of people who are mourning have a complicated mourning response.

What are *some* of the conditions of the death that can lead to complicated grief?

1. Guilt
2. Feels like they lost part of themselves
3. Previous unresolved losses
4. Emotional fragility or previous psychological disorder
5. Disenfranchised losses
6. No friends or other support
7. Acts like he or she is the "strong one"
8. Uncertainty of how the person died
9. Anger that has not been expressed
10. Self-blame
11. Dependent relationship
12. History of abuse
13. Insecure attachments
14. Too long of a duration
15. Repressed emotions
16. Belief that the loss was avoidable
17. Loss was unanticipated

There are several types of complicated grief. These are:

1. Chronic – There is no resolution that happens after a very long period of time (at least one year or so, depending on culture, relationship, and other factors).

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Emotions are very intense, which are expected in the first six months. But in this type, the intensity is just as if the loss just happened. There is a lot of confusion, intense desire to be reunited or healthy, and leads to problems like panic attacks, hallucinations, illogical fears, and depression. The person usually is aware that he or she is not doing well.

2. Masked – There is an absence of grief when it would be expected there should be. Sometimes this is called absent or repressed grief. Even though the person does not express emotions, the emotional pain comes out in other ways like in physical complaints such as reduced sexual drive, headaches, insomnia, body pains, stomach pains, irritable bowel syndrome, exacerbation of physical illness symptoms, and other illnesses. This person does not tend to even know that he or she is having these reactions because of his or her own mourning process.
3. Exaggerated – Emotions will be very exaggerated and disabling. This often happens when previous losses were never resolved and the new loss makes the person react in a very intense way. They will have extreme emotions and/or bodily complaints. Usually the person had emotional problems before, such as major depression, anxiety, or bipolar disorder.
4. Delayed – This is also known as inhibited, suppressed, or postponed grief. The individual did not grieve. It then is expressed, but is complicated by the development of a concurrent mental illness, such as major depression. Another loss or even seeing another person going through a grieving process often triggers the eventual expression of the grief. Depression is found most often here.
5. Traumatic – Traumatic grief is when there is a combination of extreme separation distress and traumatic distress. It does not require that the loss be one related to a trauma. Rather the trauma is related to how the separation distress feels. This is unrelenting and cannot be identified until at least 6 months after the loss or diagnosis, etc. This is also called prolonged grief disorder.

To know if you are experiencing complicated grief, an assessment from a professional who is educated about the symptoms, the process of grief, and how culture, gender, spirituality, type of loss, history of loss, current stressors, kind of loss it is, and other factors that affect the mourning process are interacting with each other is highly recommended. If you feel your grief may be complicated, talk with a professional who specializes in grief (also known as a thanatologist) to be evaluated and, if necessary, treated, so you can get your grieving process back on track.