

# Facts on Bereavement & Loss

**Bereavement** is a normal reaction to the loss of a significant other, which typically includes depressive symptoms, but does not usually result in clinical depression.

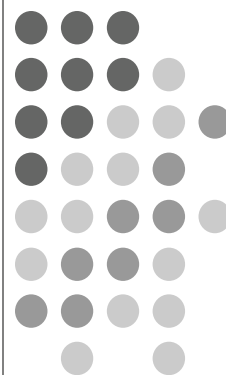
**Grieving** peaks about 6 months after the initial loss and then at every anniversary—symptoms usually fade after 2 years, although grieving could continue for many years.

**Prolonged and complicated bereavement** can occur when:

- Grief is suppressed.
- Severe guilt and a sense of direct personal responsibility for the death combined *with*
- Extremely negative views of one's self and the future.
- Previous emotional problems.
- Difficulties with coping.
- Multiple losses—causes the grieving to last longer and be more complicated. Losses might include divorce, death of spouse, loved one, or family member, poor health, retirement, financial decline, or loss of a pet.
- Requires direct treatment of depression; then, the normal grief process can begin.

**Traumatic deaths**, such as suicide or homicide can lead to blocked emotional other traumatic responses.

**Domestic violence** or prolonged caretaking may carry excessive anger and conflicted guilt and can impede the grief process.



## The Three Phases of Grieving

1. **Initial Shock**—numbness or disbelief with severe anxiety and physical symptoms, such as low appetite and disrupted sleep.
2. **Depressive Symptoms**—crying, chronic sleep disruption, and lack of interest in routine activities lasting from 4-6 weeks. The searching and yearning for the loved one begins. A strong sense of the “presence” of the deceased usually happens. Anniversaries will bring back depressive symptoms. Plan for them. **One MUST experience the grief**—the relationship with the deceased one needs to be remembered and explored. Work through unresolved feelings.
3. **Resolution and Acceptance**—of the loss and reintegration of self into new social role activities is the last phase and usually begins with the anniversary of the loved one's death.

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