Types of Grief

Uncomplicated or	normai griet				
Defining features	Normal/healthy psychological reaction to a significant loss. Multifaceted a diverse, not reflected by any universal set of symptoms or behavioral reactions. Often conceptualized as 5 nonlinear phases; denial, anger, negotiation, depression, and acceptance. These do not have a set order, a person may not experience them all or may return to a phase multiple times.				
Psychological processes or symptoms	Common physical symptoms may include; muscle or stomach pains, headaches, appetite loss or gain, fatigue, trouble sleeping, or tightness in the chest. Mental or emotional symptoms may include; depressed mood, intensorrow or sadness, shock, anger, confusion, despair, or a feeling of numbness or emptiness.				
Intervention	Typically, symptoms will wane over time and resolve/person will regain normal functioning on their own, provided they have adequate social support.				
Anticipatory grief					
Defining features	Significant loss is imminent or expected e.g. death of a loved one with terminal illness.				
Psychological processes or symptoms	Anticipatory mourning prior to the loss. Symptoms may include heightened even clinically significant anxiety. A sense of relief and guilt are also commo reactions when the loss occurs.				
Intervention	May require support navigating complex and contradictory emotions or support with continuing to function normally out of necessity prior to the actual loss.				
Disenfranchised g	rief				
Defining features	The severity of the emotional experience following loss is not socially accepted or recognized, e.g. the death of a pet or an end of an unconventional relationship. The significance of the loss may not be validate by those in their support system.				
Psychological processes or symptoms	Often lacking the necessary support to process loss. Embarrassment, guilt, or shame surrounding their feelings. May come to believe they are having a uncontrollable, unwarranted, and extreme reaction, which can interfere with the healthy processing of loss.				
Intervention	May require validation of their feelings or loss and support in communicating their experiences to loved ones.				
Distorted grief					
Defining features	Prolonged, heightened feelings of anger following a loss (towards self, world and others).				
Psychological processes or symptoms	Can skew cognitions about the self, world, and others (beyond the loss itself Distorted grieving may present as high hostility, fighting or violent tendencies irritability, and self-harm or substance abuse.				

Intervention	May require support processing or accepting the loss/emotion, cognitive reframing, anger management. Those around the person may also require support.					
Complicated grief	or prolonged grief disorder (PGD)					
Defining features	Intense feelings of grief over an extended period interfere with the grieving person's ability to function. This is a mental disorder that requires diagnosis.					
Psychological processes or symptoms	Concerning maladaptive behaviors such as substance abuse, as well as rumination, self-blame, and difficulty accepting the loss or moving on. The intensity or severity of grief reaction is considered atypical and self-perpetuating.					
Intervention	Requires a diagnosis and psychological support, in some cases antidepressant medication. Cognitive behavioral therapy or cognitive reframing and help accepting the loss may be beneficial.					
Chronic grief						
Defining features	An extended period of mourning, similar to complicated grief. Continuous symptoms that do not reduce with time.					
Psychological processes or symptoms	The individual may intentionally prevent themselves from feeling better or processing the loss to uphold the memory or avoid letting go of the deceased					
Intervention	May require help understanding why they need to move on, processing or accepting the loss, and experiencing positive emotions.					
Abbreviated grief						
Defining features	The grieving period seems abnormally short or abruptly ends in a way that does not seem 'proportionate' to the significance of the loss. This may occur if the individual has found an alternative to processing their loss, e.g., remarrying soon after being widowed.					
Psychological processes or symptoms	Reluctance to contend with psychological or emotional discomfort. Can result in tension with others also impacted by the loss, e.g. family members. If a brid mourning period is the result of finding a distraction from the loss, it may progress into delayed grief later.					
Intervention	May require help accepting or processing the loss. Often, psychological help must be wanted to be effective. Those around them may also require support.					
Absent grief						
Defining features	Following significant loss, people may not experience the expected feelings associated with mourning, which can be a form of complicated grief.					
Psychological processes or symptoms	Can present as emotional numbness, feeling disconnected, or relief after the loss. May be an inability to access all emotions. Can be isolating, especially if those around them are in active mourning.					
Intervention	May need help accessing or identifying loss, feeling socially connected, and feeling psychologically safe enough to process the event. May need help to feel their grief process is valid.					

Delayed grief or in	hibited grief					
Defining features	Grieving process may begin weeks, months, or years after the loss (can follow absent grief).					
Psychological processes or symptoms	the mind defers processing loss until it has the resources or time or if the loss results in initial shock that interrupts typical grief onset or processing. Can be isolating, especially if those who share the loss have already processed it.					
Intervention	May need help communicating feelings with social connection or validating their experience. May need help working out why the grieving process was delayed.					
Traumatic grief						
Defining features	Occurs when loss is sudden, violent, abrupt or in an extremely distressing context, e.g. a natural disaster, witnessing a violent death, or the unexpected death of a child. Symptoms may overlap with post-traumatic stress disorder.					
Psychological processes or symptoms	Symptoms of trauma such as heightened stress, fear, and anxiety. Often difficulty accepting or processing the event. Often interferes with daily functioning and relationships.					
Intervention	May require help managing anxiety and stress, processing the event, managing triggers, communicating experiences and feelings, and returning to normal functioning.					
Ambiguous grief						
Defining features	Grief towards an unresolved loss, e.g. when a loved one is missing or presumed dead. Unexpected loss and uncertainty can simultaneously create feelings of hope and despair.					
Psychological processes or symptoms	False hope or disappointment, which may be harmful in the long term, difficult processing or accepting the loss, inability or not wanting to move on. Extreme unsustainable stress or anxiety is common. Often the person will spend a lot personal and cognitive resources until the situation is resolved.					
Intervention	May require help managing stress and anxiety, navigating complex or contradictory emotions, creating healthy coping mechanisms, finding time, energy or focus to rest, work, and practice self care. If over a prolonged period, may require helping returning to normal functioning. Primary therapeutic goal is resiliency.					
Cumulative grief						
Defining features	Losses or distressing life events succeed one another before the individual can process them, resulting in compounded or cumulative grief.					
Psychological processes or symptoms	Desensitization towards loss, normalization of sadness. Can skew how the individual sees the world and prevent them from recovering. May not be able to recognize the significance of these experiences or their effects.					
Intervention	May require help understanding and processing experiences, understanding emotions, and cognitive reframing.					

dditional notes			

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