

THE EVOLUTION OF GRIEF

STAGE	DURATION	CHARACTERISTICS	NEEDS	DEVELOPMENTAL TASK	HELPER FUNCTION
SHOCK A	Begins immediately after death, lasts one- three days	Shock, disbelief, denial Inability to hear or comprehend Numbness Weeping, wailing Agitation, confusion	the presence of caring & supportive people	To protect oneself To "get through" the wake, funeral service ...	Get in touch Assist with char practical needs, & funeral arrangements
NUMBNESS N	Several weeks or months	Mechanical functioning Insulation	Emotional distance	To protect oneself from feeling the impact of loss	Keep in touch Assist with chores & practical needs
DISORGANIZATION DEPRESSION SUICIDE G	Many months to a year or more	Physical difficulties: Sleep & appetite problems Shortness of breath, dry throat, etc... Painful feelings: Irritability, agitation, weeping, anxiety, immobilizing depression Feelings of "going crazy" - panic guilt, difficulty concentrating, feelings of drowning Painful longing - preoccupation & idealization Mental images - sense of the deceased being present	Intimacy Ventilation of feelings	To acknowledge the impact of loss	Permit expression of all feelings Listen to talk about life together and details of death Encourage the postponement of major decisions Reassurance of normal
REORGANIZATION E	Several weeks or months or more	Occasional peacefulness Less intensity of feelings Able to review & discuss impact of loss, in terms of the past, present, & future Beginning to cope	Encouragement to re-enter life's mainstream	To complete emotional relationship with the deceased To take emotional energy away from the loved one & invest it in others	Listen Gently draw out Treat as normal Expand social network
RESOLUTION & RECOVERY ADJUSTMENT R	Several months or years	Ability to recall the past with pleasure Ability to cope with daily life Few periods of sadness	Normal social outlets	To resume ordinary activities	Closure

Adapted from: Roberta James, Living with an Empty Chair; Drs. R. White & L. Githman, "The Syndrome of Ordinary Grief"; and Judith Urra, RN, PhD.