

Depression During the Grieving Process

Depression and despair are common reactions to important losses. Many writers feel that it is precisely an important loss that gives rise to any psychological depression. Whether or not this is true, there are numerous symptoms of depression that also are usual manifestations of grief: withdrawal, anhedonia, apathy, feelings of meaninglessness, decreased energy, decreased sexual desire, regression, dependency, feelings of helplessness, loneliness, sadness, feelings of hopelessness or abandonment, ambivalence, shame, feelings of being out of control, depersonalization, disorganization, lack of concentration, somatic problems.

The depressed mourner's inability to concentrate or process information should not be underestimated. He often feels he is losing control because he feels so confused and lacks the decision-making abilities and incisiveness he once had. He may be nonassertive. This lack of clarity and certainty only heightens the anxiety and unreality of the situation. In many cases, the bereaved individual becomes very angry at himself for not being able to see things more clearly, so it is important for him to know that such responses are natural and will appear in all areas of life (difficulty working, confusion about social arrangements).

The combination of depression and changes in normal capabilities often causes the mourner to feel childlike, helpless, and dependent on others. These intense regressive feelings can bring out latent negative self-images. Mourners need support in acknowledging their regressive feelings and coping with them without becoming hostile or internalizing these feelings as permanent characteristics.

Accompanying depression may be a lack of concern for the self. When moderate, it appears as a disregard for personal matters due to preoccupation with the deceased. Self-care may be permitted only as it benefits others, for example, "If it weren't for the children, I would have ended it all myself." When taken to an extreme, this lack of concern is manifested in self-destructive behaviors, even suicide. While many bereaved individuals have fleeting thoughts of suicide as a means of reuniting with the lost one and escaping the pain of grief, most do not act on them. However, suicide threats should be taken seriously and be evaluated, especially with the following high-risk groups: those who have previously attempted suicide; those with past or present psychological disorders, especially problems with impulse control or acting-out personalities; those who have difficulty dealing with anger; those who feel hopeless; those who are overly dependent; those who feel they lack the resources they need to cope or who lack social support; those who are deeply depressed; and those who have made concrete plans for suicide.

Several common reactions are a combination of depression and anger. These include irritability, anxiety, and tension. There is heightened psychological arousal. It is common for the bereaved to be very restless, to wander anxiously, or to feel a sense that something is going to happen. This is part of the searching behavior that normally goes on during grief.