Our Health, Our Thoughts and Our Feelings: How Can We Best Adapt Resiliently During Grief?

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Overview

• Feelings of grief
  – how can we adjust?

• Thinking during grief
  – what happens to our concentration?

• Health following loss
  – how do we stay healthy?
Feelings of grief
Acute grief

• Longing, and sadness, and thoughts and images of the deceased person.
• Hearing the deceased person’s voice, seeing the person, or sensing his or her presence is not a cause for concern.
• The bereaved person may disengage from usual activities, and may have a sense of disbelief or shock that a loved one is gone.
Integrated grief

• Emotions wax and wane unpredictably.
• Overall, the intensity of grief diminishes
  – as the finality and consequences of the loss are understood and
  – future hopes and plans are revised.
• Emotions may still surge at difficult occasions
  – anniversary of the death, family holidays
Complicated Grief

• The natural healing process can have complications.

• Since the death on more days than not and for at least 12 months.

  1. Persistent yearning/longing for the deceased
  2. Intense sorrow and emotional pain in response to the death.
  3. Preoccupation with the deceased.
  4. Preoccupation with the circumstances of the death.
Reactive distress to the death

1. Marked difficulty accepting the death.
2. Experiencing disbelief or emotional numbness over the loss.
3. Difficulty with positive reminiscing about the deceased.
4. Bitterness or anger related to the loss.
5. Self-blame in relation to the deceased or the death.
6. Excessive avoidance of reminders of the loss (e.g., avoidance of individuals, places, or situations associated with the deceased).
Social/identity disruption

7. A desire to die in order to be with the deceased.
8. Difficulty trusting other individuals since the death.
9. Feeling alone or detached from other individuals since the death.
10. Feeling that life is meaningless or empty without the deceased, or the belief that one cannot function without the deceased.
11. Confusion about one’s role in life, or a diminished sense of one’s identity (e.g., feeling that a part of oneself died with the deceased).
12. Difficulty or reluctance to pursue interests since the loss or to plan for the future (e.g., friendships, activities).
DSM-5 Criteria

• The disturbance causes clinically significant distress or impairment in social, occupational, or other important areas of functioning.

• The bereavement reaction is out of proportion to or inconsistent with cultural, religious, or age-appropriate norms.
Prevalence

• The prevalence of Complicated Grief is approximately 7%.

• 93% of bereaved adults adjust resiliently.
Have you tried to avoid reminders that your loved one is gone?

• I seek it out in some ways. We put her decorations out at Christmas, and we think about her.
  • Participant with non-complicated grief, age 45

• I wish I could remember it more. I don’t want the pain to go away. If the pain goes away, then I’ll forget her.
  • Participant with complicated grief, age 60
Meaninglessness

• Why would I give my children bat mitvahs if their grandmother isn’t there to see it?
  • Participant with complicated grief

*bat mitvah: coming of age ceremony in the Jewish tradition
Acute grief vs. depression vs. CG

• In acute grief, bereaved people retain the ability to experience positive emotions
  – recalling pleasant experiences with the deceased
  – expressing pride in the loved one
  – telling amusing anecdotes

• Sadness is not usually pervasive during grief
  – it occurs in waves.

• Acute grief is associated with thoughts and memories of the deceased,

• Depression is associated with self-critical or pessimistic rumination.

  Shear, 2009
Dual Process Model

FIGURE 1 A dual process model of coping with bereavement.

Stroebe & Schut, 1999
Thinking during grief
Difficulty concentrating

• People report difficulty during grief with
  – intrusive thoughts of the deceased
  – concentration and attention (Clayton et al., 1971; Horowitz et al., 1979).

• One problem is an attentional bias toward things that remind them of their grief.

• Alternatively, they may be unable to disengage from these reminders.
Our study

• No one had ever studied the neuropsychological function in grieving people.

• We did a variety of cognitive tasks with older adults who experienced the death of a spouse in the prior 6 months to 3 years.

• We also tested a matched group of married older adults.
Findings

• We didn’t see any differences between widow(er)s and married adults in short term memory or working memory.
Stroop task

cancer
cancer
cancer


ginger
ginger
ginger
- - - - - Complicated Grief, ......... Non-Complicated Grief, ......... Nonbereaved

**slow**

**fast**

Grief-related words
Health effects of grief
Mortality in 3 months after spousal death

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<th>Model 1: demographic characteristics</th>
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<tr>
<td>Overall</td>
<td>1.85</td>
<td>(1.29, 2.64)</td>
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<tr>
<td>Women</td>
<td>1.62</td>
<td>(1.06, 2.49)</td>
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<tr>
<td>Men</td>
<td>2.07</td>
<td>(1.41, 3.05)</td>
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<th>Model 2: Model 1 + adult SES</th>
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<td>Overall</td>
<td>1.72</td>
<td>(1.20, 2.45)</td>
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<tr>
<td>Women</td>
<td>1.49</td>
<td>(0.98, 2.28)</td>
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<tr>
<td>Men</td>
<td>1.96</td>
<td>(1.33, 2.88)</td>
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<th>Model 3: Model 2 + behavioral risk factors</th>
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<tr>
<td>Overall</td>
<td>1.67</td>
<td>(1.17, 2.38)</td>
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<tr>
<td>Women</td>
<td>1.45</td>
<td>(0.95, 2.23)</td>
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<tr>
<td>Men</td>
<td>1.89</td>
<td>(1.29, 2.75)</td>
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<th>Model 4: Model 3 + co-morbidities</th>
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<td>Overall</td>
<td>1.66</td>
<td>(1.16, 2.38)</td>
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<tr>
<td>Women</td>
<td>1.47</td>
<td>(0.96, 2.24)</td>
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<tr>
<td>Men</td>
<td>1.87</td>
<td>(1.27, 2.75)</td>
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Gene x Environment interaction

• Are all bereaved persons equally at risk for morbidity and mortality?

• Could inflammation be causally related to all-cause mortality?

• Could genetic predispositions increase the risk of health effects for specific people?
Bereavement and inflammation

IL-6 (pg/ml)

Controls

Bereaved

$F = 4.41, p = 0.04$
Gene x Environment interaction

![Bar chart showing IL-6 (pg/ml) levels for different genotypes and conditions.]

- **GG**:
  - Control: N = 13
  - Bereaved: N = 19
  - F = 5.09, p = 0.03

- **C carrier**:
  - Control: N = 15
  - Bereaved: N = 17
  - F = 0.05, p = 0.83
Take home points

• When adapting to stressful life events, focus on both loss and restoring your new life.

• Grief affects our attention, especially when something reminds us of our loss—
  – so give yourself a break if you aren’t as sharp as usual!

• Your physical health is impacted by stressful life events, not just your mental health
  – so get your regular medical and dental checkups.
Thank you

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