

# Prolonged Grief Disorder

Assessing Functional Impairment  
In Bereavement

Robert A. Neimeyer, PhD



Portland Institute  
For Loss and Transition





**We are wired  
for attachment  
in a world of  
impermanence.**

***--R. A. Neimeyer***





Nantou, Taiwan (2009)



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**“As long as there are  
social and intimate  
relationships, friendship,  
and love, there is grief.**

**It is the ‘price we pay for  
love,’ the ‘cost of  
commitment.’”**

***~ Jakoby, 2012, p. 680***



# Out of the Box

## Varieties of Grieving Experience

- *Disenfranchised grief*: Experiences of loss or mourners that are socially invalidated (e.g., loss of an ex-spouse, death of a loved one to overdose)
- *Non-finite grief*: A “living” loss that lacks a clear endpoint or resolution (e.g. chronic mental or physical illness in a loved one)
- *Ambiguous loss*: Occurs when a person is physically absent but psychologically present (e.g. a missing person) or psychologically absent but physically present (e.g. dementia)





# Prolonged Grief Disorder in the ICD-11

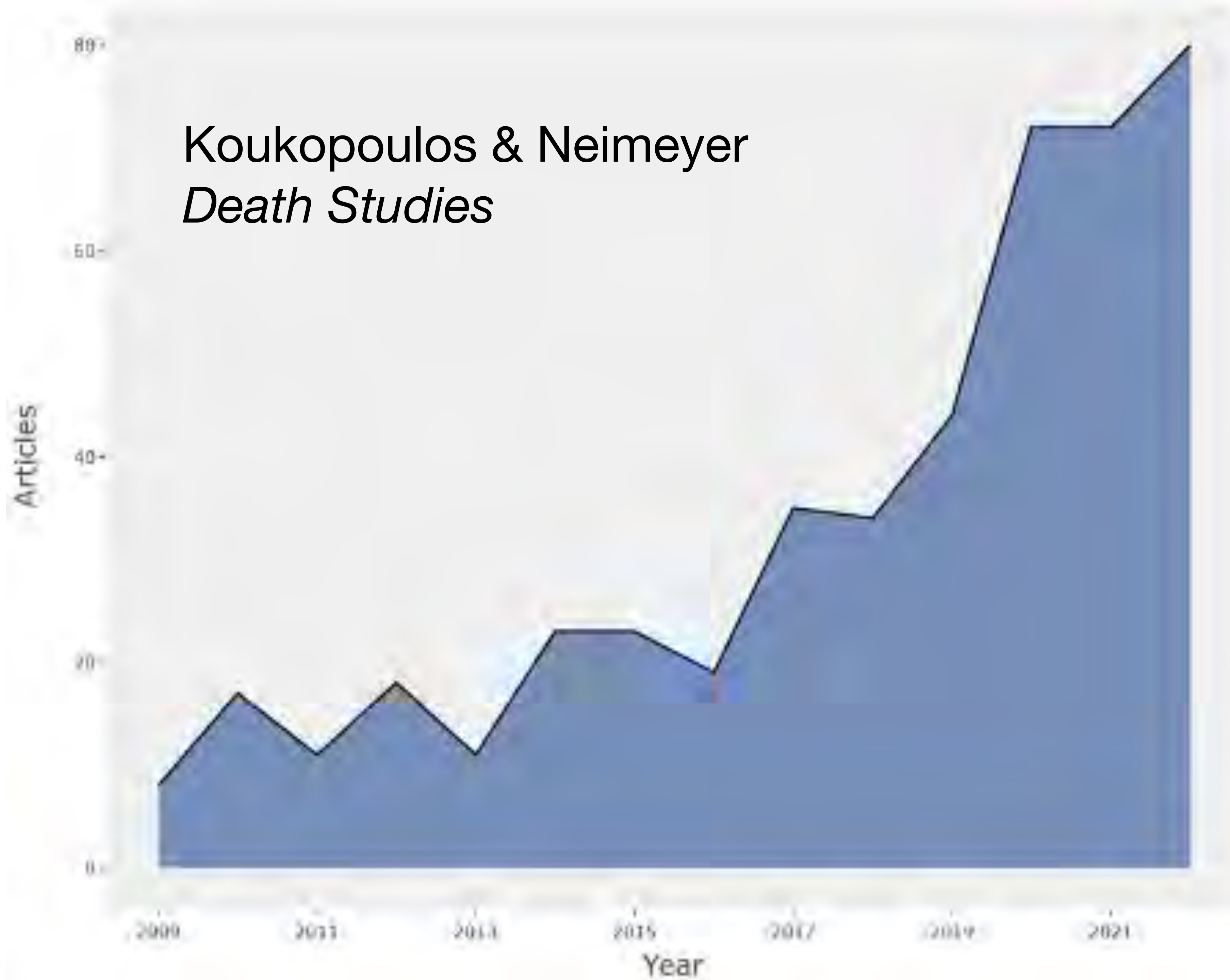
## Criteria:

- Death of a close person
- Persistent and pervasive grief response accompanied by longing for or preoccupation with deceased
- Intense emotional pain (sadness, guilt, anger, denial, blame, lost sense of self, absence of positive mood, numbness, avoidance of social and other activities)
- Minimum of 6 months after death, exceeding social, cultural and religious norms
- Significant impairment in personal, family, social, occupational or other functioning



Koukopoulos & Neimeyer  
*Death Studies*

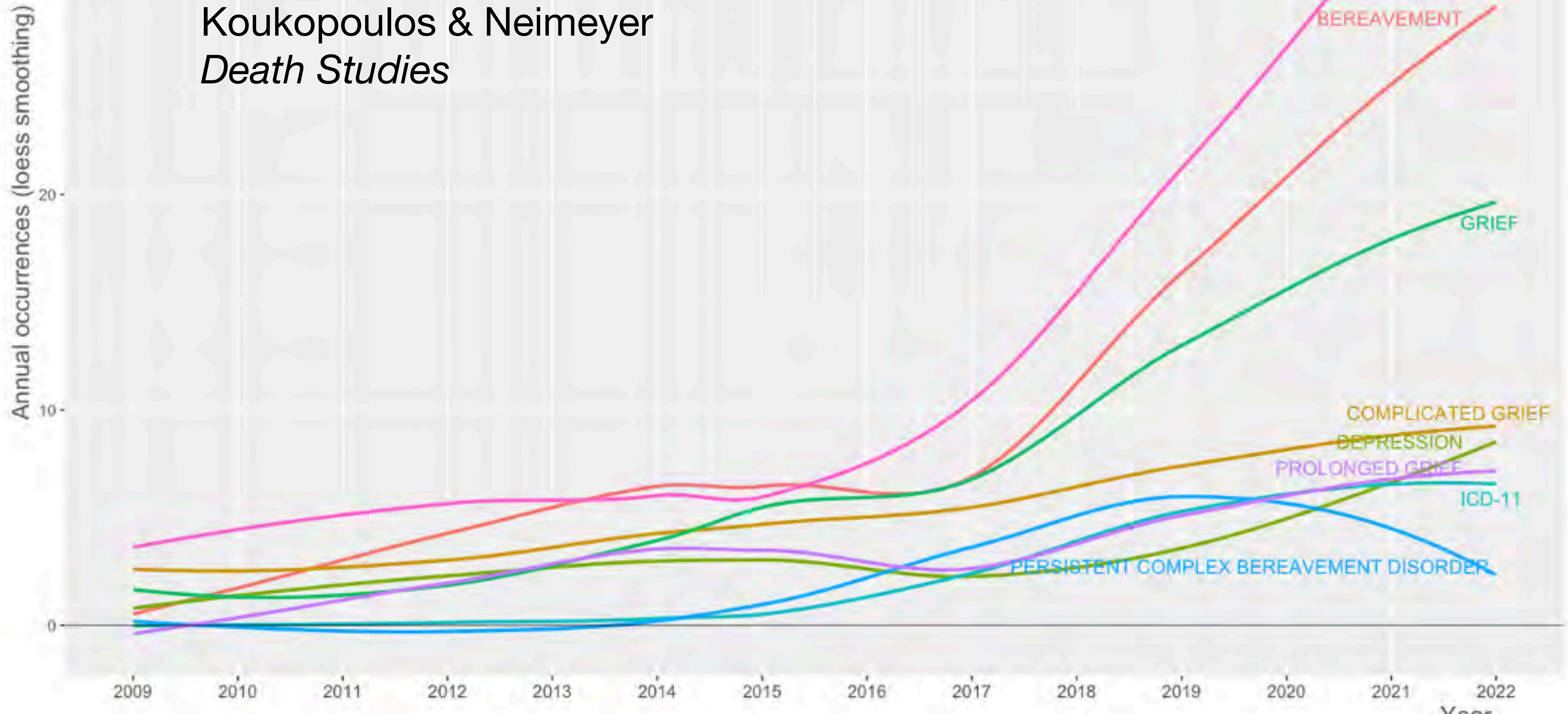
*Annual  
Scientific  
Production  
of Research  
on PGD*





# Annual Occurrences of Keywords in PGD literature

Koukopoulos & Neimeyer  
*Death Studies*





# Risks of Complicated Grief

*Prigerson et al., PLoS Medicine*

**Controlling for depression and anxiety,  
CG associated with:**

Myocardial infarction and congestive heart failure

Immune system dysfunction

Substance use and abuse

Essential hypertension

Functional impairment

Reduced quality of life

Suicide attempts





# Grief Impairment Scale: Research and Clinical Implications



**Sherman A. Lee, PhD, Christopher Newport University**  
**Robert A. Neimeyer, PhD, Portland Institute for Loss and Transition**



# Background Problem

**World Health Organization Disability Assessment Schedule 2.0 (WHODAS 2.0; Üstün, Kostanjsek, Chatterji, & Rehm, 2010)**

**Work and Social Adjustment Scale (WSAS; Mundt, Marks, Shear, & Greist, 2002)**

**PG-13-Revised (PG-13-R; Prigerson, Boelen, Xu, Smith, & Maciejewski, 2021)**

## Problems with existing impairment scales

- Rating Scales:
  - WHODAS 2.0 (*none to extreme*)
    - Subjective severity rating
  - WSAS (*no impairment to very severe impairment*)
    - Subjective severity rating
  - PG-13-R (*yes or no*)
    - Binary response
  - Symptom frequency is the metric used in most health care and research settings (e.g., *every day in the past month*)
- Do not assess essential domains:
  - Biological
  - Behavioral (psychological)
  - Cognitive (psychological)



# Scale Development

## Item creation

Item	Domain
Health Problems	Biological
Cognitive Difficulties	Psychological (Cognitive)
Unhealthy Coping	Psychological (Behavioral)
Unfulfilled Responsibilities	Social
Interpersonal Difficulties	Social



# Scale Development

## Item scaling (frequency type)

0 days (never)	1 to 3 days (seldom)	4 to 15 days (occasionally)	16 to 29 days (often)	30 days (always)
0	1	2	3	4

### Advantages

- Easy to understand and gauge
- More objective metric
- Commonly used in medical settings
- Valuable for diagnostics, tracking, planning, and goal setting



# Scale Development Research - *sample*

## Participants

- 363 bereaved adults
- Qualtrics Panel (high quality)
- ~ 40 years old
- 69.4% *White*, 68.0% *Women*

## Deceased

- 69.2% family members
- 78.5 % died of illness
- 60.6% deceased  $\leq$  one year

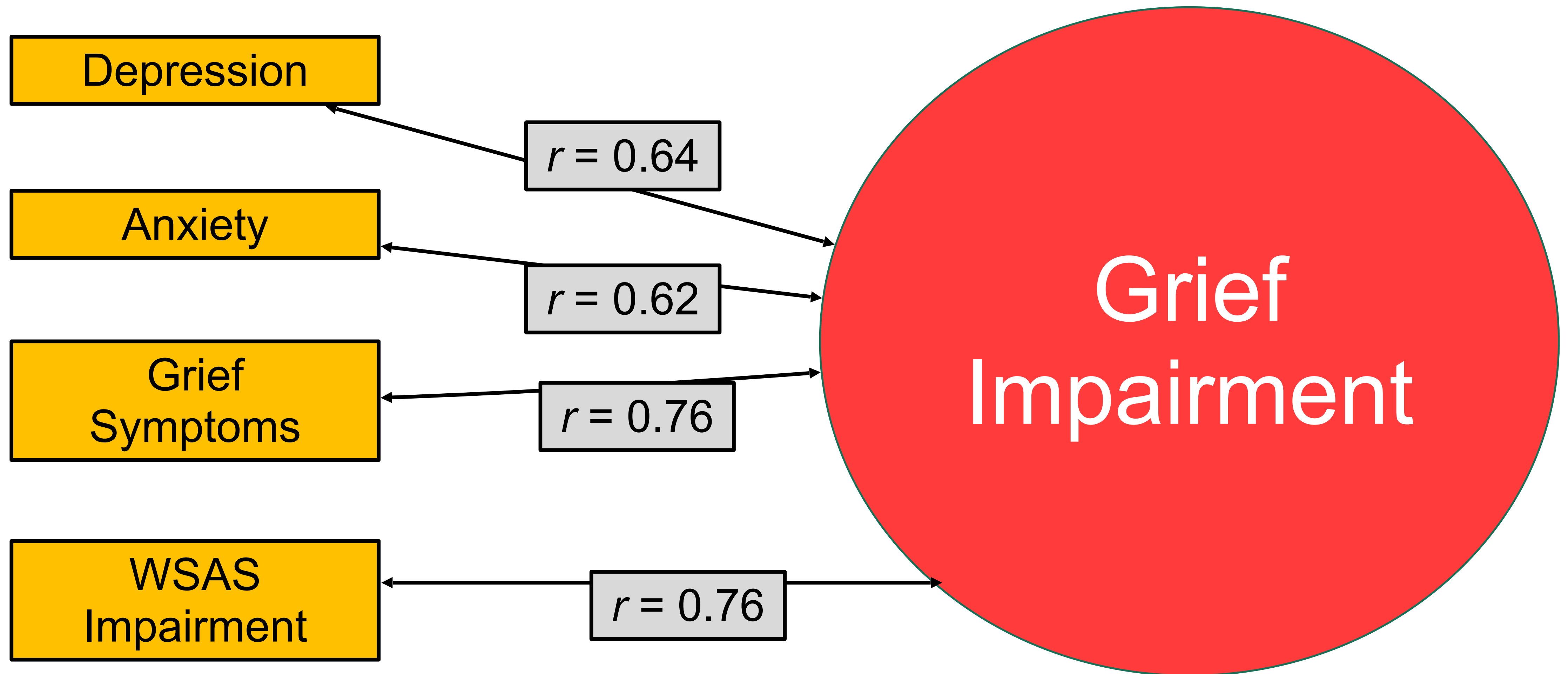
qualtrics<sup>XM</sup>





# Scale Development

## Research - *validity analyses*





# Clinical Uses Instructions

Each item is rated on a 5-point scale, from 0 days (never) to 30 days (always)

Each item provides known *examples* of each domain that has been negatively impacted by grief.

GIS Total Score of  $\geq 9$  indicates probable grief-related functional impairment

Instructions: Using the scale (0 to 4) below, please indicate how often (in the past 30 days) you had difficulty functioning because of your grief. We define “grief” as your reactions to your significant loss.

0 days (never)	1 to 3 days (seldom)	4 to 15 days (occasionally)	16 to 29 days (often)	30 days (always)
0	1	2	3	4

1. Experienced problems with *thinking* because of your grief.  
Some examples include:

- Difficulty with attention (e.g., unable to concentrate on an important task).
- Memory problem (e.g., forgot, lost, or could not remember something important).
- Difficulty with a decision (e.g., made a poor decision; was indecisive).

?

2. Experienced *health problems* because of your grief.  
Some examples include:

- Sickness, pain, or discomfort (e.g., cold symptoms; abdominal pain; felt sick).
- Sleep disturbances (e.g., unable to fall or stay asleep).
- Low energy (e.g., feeling exhausted).

?

3. Engaged in *unhealthy activity* to cope with your grief.  
Some examples include:

- Alcohol or Substance use (e.g., pain killers; cocaine; heroine; methamphetamine).
- Unhealthy Eating (e.g., overeating or skipping meals).
- Self-Destructive Behavior (e.g., damaging self or objects; reckless driving).

?

4. Unable to fulfill an *important responsibility* in life, such as work/school, housekeeping, and/or caring for others, because of your grief.  
Some examples include:

- Work or School (e.g., absent/tardy; failing assignment/exam; poor quality work).
- Housekeeping (e.g., unkept rooms; dusty/dirty surfaces; uncleaned dishes/clothes).
- Caring for Others (e.g., unable to provide food/shelter; did not provide adequate supervision or tend to medical needs).

?

5. Unable to *positively engage with others* because of your grief.  
Some examples include:

- Avoided a significant person, place, or event.
- Fought or argued with others.
- People avoided you or treated you in a hurtful way (e.g., insensitive comments).

?

TOTAL SCORE

?

Note. The GIS is placed in the public domain to encourage its use in clinical assessment and research. No formal permission is therefore required for its reproduction and use by others, beyond appropriate citation of the present article.

## Optional instructions:

- Suggest underlining relevant examples of symptoms they experience for each item
- Encourage write-in comments and explanations

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HFA

16



# Deborah's Desolation

## Using the GIS

Consider Deborah's presentation, both verbal and non-verbal

Complete the GIS as you believe she would, at this point 2+ years after her mother's death

Note prominent areas of impairment with colleagues, with examples

Calculate her total score across all items

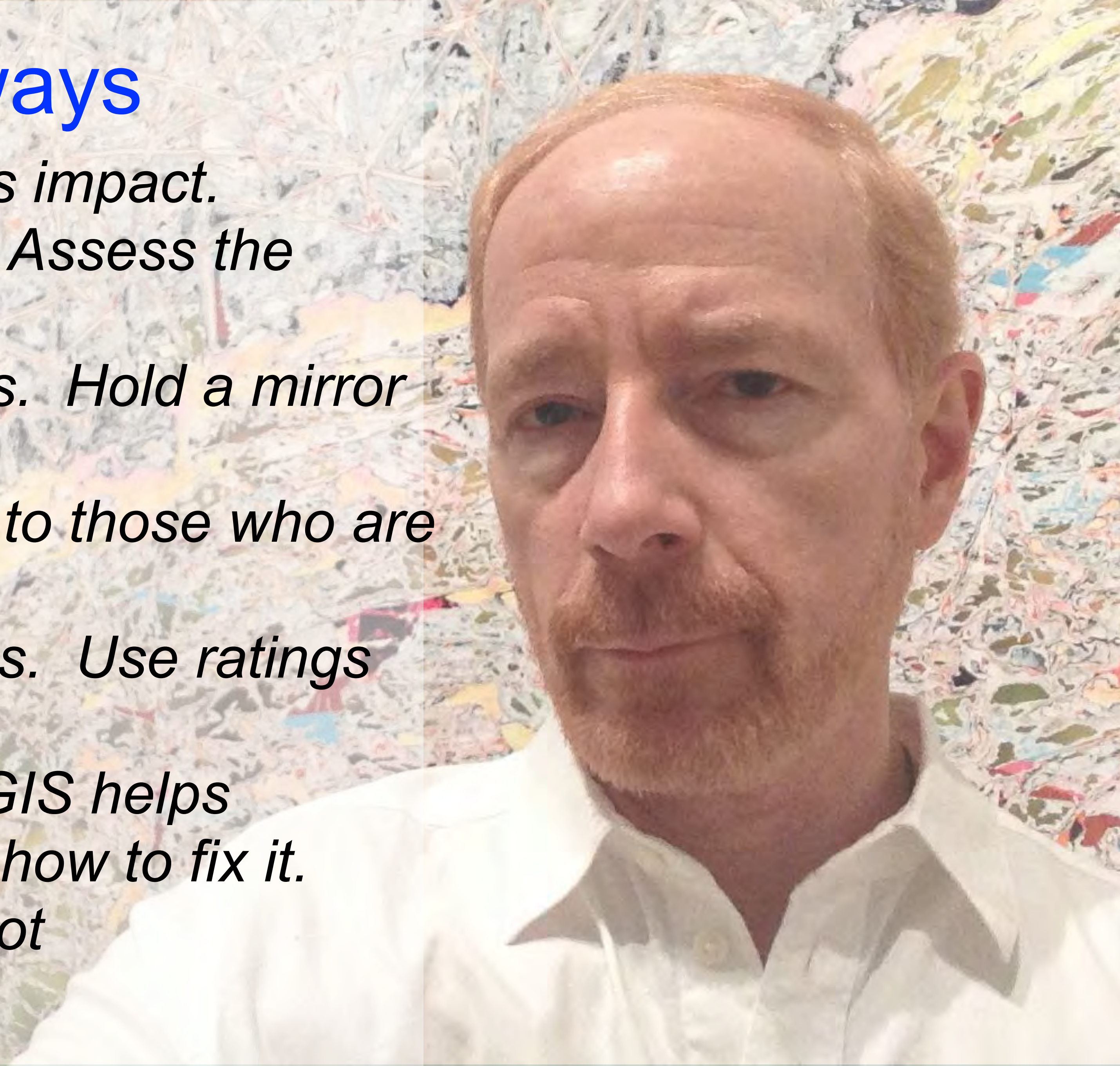
		0 days (never)		1 to 3 days (seldom)		4 to 15 days (occasionally)		16 to 29 days (often)		30 days (always)
		0		1		2		3		4

1.	Experienced problems with <i>thinking</i> because of your grief. Some examples include: <ul style="list-style-type: none"><li>• Difficulty with attention (e.g., unable to concentrate on an important task).</li><li>• Memory problem (e.g., forgot, lost, or could not remember something important).</li><li>• Difficulty with a decision (e.g., made a poor decision; was indecisive).</li></ul>	
2.	Experienced <i>health problems</i> because of your grief. Some examples include: <ul style="list-style-type: none"><li>• Sickness, pain, or discomfort (e.g., cold symptoms; abdominal pain; felt sick).</li><li>• Sleep disturbances (e.g., unable to fall or stay asleep).</li><li>• Low energy (e.g., feeling exhausted).</li></ul>	
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5.	Unable to <i>positively engage with others</i> because of your grief. Some examples include: <ul style="list-style-type: none"><li>• Avoided a significant person, place, or event.</li><li>• Fought or argued with others.</li><li>• People avoided you or treated you in a hurtful way (e.g., insensitive comments).</li></ul>	



# Clinical Take-Aways

- *Look beyond grief. Consider its impact.*
- *Go bio-psycho-social-spiritual. Assess the whole person.*
- *Promote clients' self-awareness. Hold a mirror to their functioning.*
- *Read the red flags. Reach out to those who are clearly struggling.*
- *Shift from numbers to narratives. Use ratings as conversation starters.*
- *Practice clinical humility. The GIS helps pinpoint what is wrong, but not how to fix it.*
- *Offer support. And when it is not enough, offer grief therapy.*





SERIES IN DEATH, DYING,  
AND BEREAVEMENT



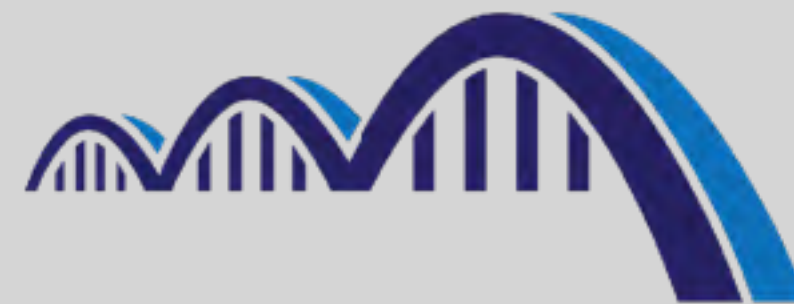
## **New Techniques of Grief Therapy**

Bereavement and Beyond

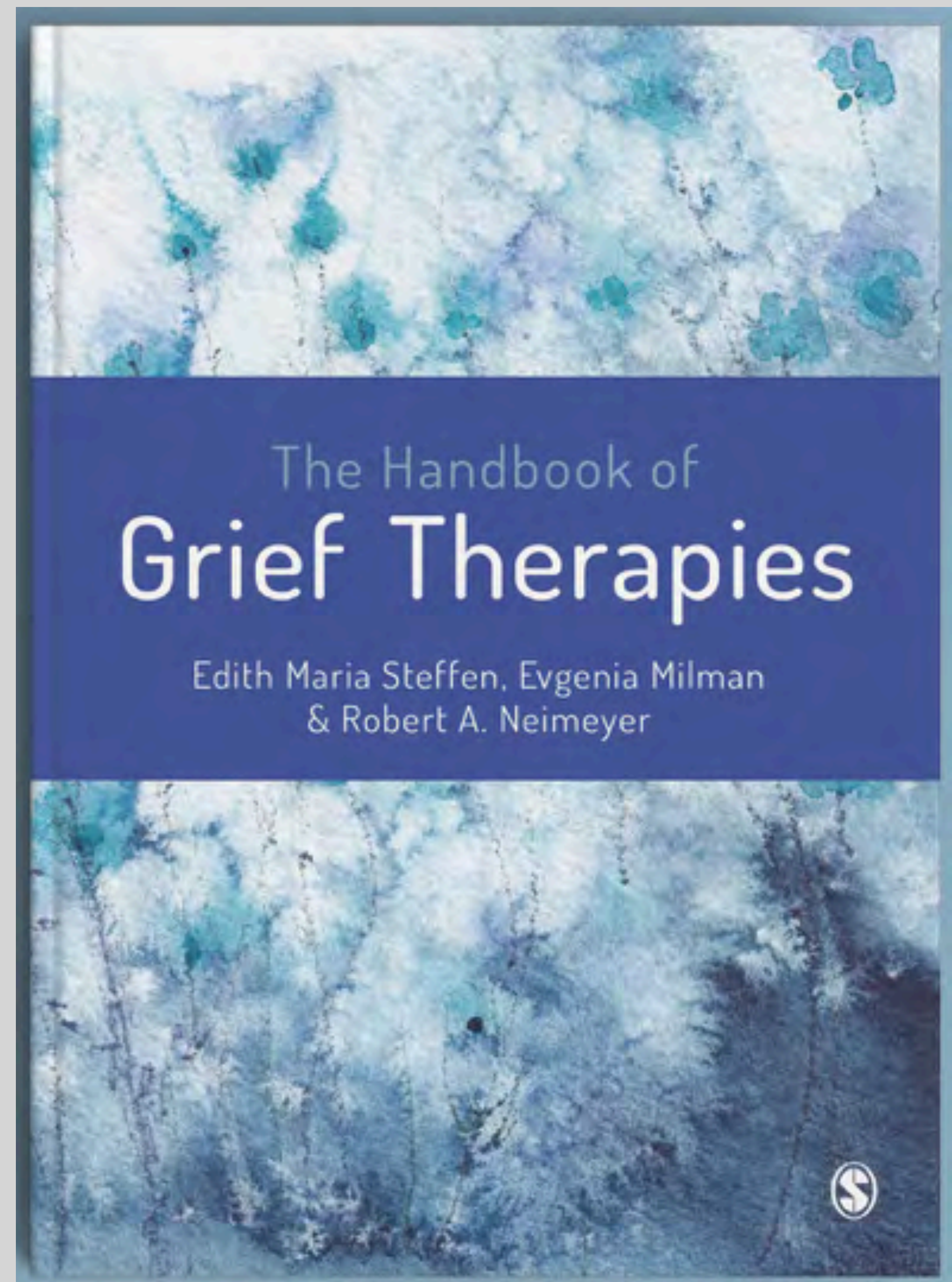
Edited by Robert A. Neimeyer



# Clinician's Toolbox



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