

Complicated Grief in Bosnian Refugees: Associations With Posttraumatic Stress Disorder and Depression

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Complicated grief is likely to be common among refugee populations exposed to war trauma. However, there have been few studies investigating the traumatic antecedents and correlates of complicated grief in refugees, and the relationship of that symptom pattern with other common disorders such as posttraumatic stress disorder (PTSD) and depression. We studied Bosnian refugees recruited from a community center in Sydney, Australia, with the sample being supplemented by a snowball method (N = 126; response rate, 86%). Measures included a trauma inventory, the Clinician Administered PTSD Scale (CAPS), the depression module of the Structured Clinical Interview (SCID), and the Core Bereavement Items (CBI). A dimension of traumatic loss derived from the trauma inventory was a specific predictor of compli-

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The relationship between life-threatening trauma and psychiatric morbidity in refugees has been extensively studied in recent times.⁴⁻⁶ In comparison, the role of traumatic loss in generating grief and other psychological disorders has attracted much less scientific study, a deficit in the literature given that ruptures to bonds are so pervasive among war-affected and forcibly displaced populations.⁴ The present study focused on the antecedents of complicated grief and its relationship to other common stress-related disorders such as PTSD and depression among Bosnian refugees resettled in Australia.

War-affected persons from the former Yugoslavia comprise the largest group of refugees admitted to Australia in the 1990s.⁷ Several characteristics of this group facilitated study of complicated grief and its antecedents. Previous studies in other resettlement countries have documented the wide range of traumatic events, including losses suffered by Bosnian refugees,^{5,8} and our own professional

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experiences in working with this group in Australia since the early 1990s⁹ support the impression that many of these refugees were exposed to multiple traumatic deaths of family members. Deaths often occurred in horrific circumstances with the killings being witnessed by the surviving family,^{6,8} conditions that would be expected to lead to severe grief reactions.¹⁰

One limiting factor of research in the area has been the lack of consensus about the criteria for diagnosing abnormal or complicated grief. Considerable variability is evident in how grief-related reactions have been conceptualized and measured. Historically, Freud¹¹ characterized normal grief as a response of painful dejection, loss of interest, and inhibition of activities. He emphasized the close link between unresolved grief and risk to depression. Subsequently, links between grief and a wider range of disorders including depression, anxiety, PTSD, and adjustment disorders have been identified.^{12,13} More recently, clearer formulations have been provided to distinguish complicated grief from other psychiatric disorders.^{14–19} Complicated grief has been described as the intensification of the normal bereavement reaction to the level where the person is overwhelmed, resorts to maladaptive behavior, or remains incessantly in a state of social dysfunction without progression of the mourning process towards completion.^{10,20}

Features of complicated grief form a cohesive cluster that is predictive of future psychiatric morbidity.^{14,16–18,21} The afflicted person experiences persisting symptoms of separation distress such as yearning, longing, and searching for the deceased, as well as excessive loneliness; traumatic symptoms such as intrusive preoccupations and images associated with the deceased person; disbelief, severe pangs of emotion, denial, feelings of purposelessness and futility; and a sense of numbness or detachment. Other features include feeling persistently shocked, stunned, or dazed, the sense that life is empty and unfulfilling, a fragmented sense of security, and neglect of essential activities at work and at home.¹⁴ Yet, some of the conceptualizations applied, especially where terms such as “traumatic grief” are adopted,²² appear to blur the distinction between grief and other trauma-related disorders, particularly PTSD. The potential for overlap between traumatic grief and PTSD is particularly relevant to refugees whose experiences

are complex and often involve life-threat as well as traumatic losses.⁴

Even in civilian settings, where most relevant studies have been undertaken, questions remain about the phenomenologic similarities of PTSD and complicated grief.^{15,23} More recent research has attempted to distinguish the two syndromes.^{14,16–18} Conceptually, PTSD is represented as being distinct from complicated grief in that the former arises from life-threatening events and the latter from loss of a loved one. In grief, the trauma is typically a separation trauma and therefore includes symptoms of separation distress such as yearning and searching, features not included in DSM-IV criteria for PTSD. In complicated grief, it is the absence of the deceased that is the source of the distress, rather than fears that the traumatic event will be re-experienced as in PTSD. Hypervigilance in grief is provoked by cues relating to the deceased rather than to fundamental insecurities associated with fears of re-experiencing past trauma.

At the same time, experiences of life-threat and loss often occur concurrently in settings of civil warfare.⁴ For example, it was common for Bosnian survivors to have witnessed the violent deaths of families while being in mortal danger themselves.⁵ Hence, it seems possible that intrusive memories of these events might include characteristics of both PTSD-related images as well as aspects of grief.

The relationship between grief and depression also requires clarification. Traumatic loss has been identified as a contributory factor to depression,^{8,22,24} but in refugees, the persistence of depression may be mediated by other more immediate postmigration stresses.⁸ For example, one study²⁵ indicated that premigration trauma experiences (including death of family) were associated with PTSD,²⁵ whereas ongoing postmigration stresses were more closely linked to depression.

The present study aimed to examine the antecedents of grief and its relationship to PTSD and depression in Bosnian refugees. The analysis builds on previous reports based on the same dataset in which the traumatic antecedents of depression²⁶ and PTSD²⁷ were examined separately. In particular, we wished to examine whether the specific pattern of life-threat leading to PTSD yielded by an earlier analysis²⁷ differed from that of grief, which, we postulated, would be closely and specifically linked with traumatic loss. We also wished

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