



Research report

When hope and grief intersect: Rates and risks of prolonged grief disorder among bereaved individuals and relatives of disappeared persons in Colombia



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ABSTRACT

Background: Forced disappearance is a frequent phenomenon in violent conflicts and regimes, yet little is known about unresolved grief processes as a possible outcome of the disappearance of a loved one. This study investigates prolonged grief disorder (PGD) and its risk factors in a sample of persons who lost a significant other to disappearance as compared with a sample of bereaved individuals, both groups having experienced displacement due to the armed conflict in Colombia.

Method: In a cross-sectional study conducted in four Colombian provinces, 73 persons who lost a significant other to disappearance and 222 bereaved individuals completed measures of PGD (PG-13), depression (HSLC-25), and PTSD (PCL-C) via face-to-face interviews. Trauma- and loss-related variables, including the extent to which significant others of disappeared persons hoped that their loved one was still alive, were assessed.

Results: Results indicated that 23% of participants who lost a significant other to disappearance met criteria for PGD as compared to 31.5% in bereaved participants. No differences were found between the two groups in terms of symptom severity of PGD, depression, posttraumatic stress disorder, or traumatic exposure. Regression analysis indicated that, among relatives and friends of disappeared persons, the extent of hope predicted PGD above and beyond depression severity whereas among bereaved persons, PGD was predicted by time since the loss, the number of traumatic events and symptom severity of PTSD and depression.

Limitations: The instruments were not validated for use in Colombia; generalizability of findings is limited.

Conclusion: Forced disappearance is related to prolonged grief reactions, particularly when those left behind maintain hope that the disappeared person is still alive.

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1. Introduction

After more than 50 years of armed conflict, millions of Colombians have experienced severe human rights violations. About one tenth of the Colombian population has been displaced by paramilitary or guerilla groups. According to recent data, about 80,000 persons are unaccounted for, 25,000 of whom are known to be victims of forced disappearance (Grupo de Memoria Histórica, 2013; Instituto de Medicina Legal y Ciencias Forenses, 2013).

Many people go missing during acts of war, conflict, or natural disasters. Forced disappearance is an exceptional form of disappearance involving forced abduction by agents of the state, followed by the refusal to acknowledge the abduction or to

provide any information about the fate of the disappeared person (United Nations, 2007). In several countries, forced disappearance is used as an instrument of political repression to weaken political opponents and to create an atmosphere of silence and fear (De Alwis, 2009; Rozema, 2011).

The loss of a significant other represents one of the most painful experiences in human life. Although most persons who experience a significant loss are capable of adjusting well, a significant number of bereaved individuals develop symptoms of depression or prolonged grief as a consequence of their loss (Stroebe et al., 1988). Prolonged grief disorder (PGD) has been defined as a maladaptive grief reaction following loss. It is characterized by intense longing and yearning for the lost person as well as by feelings of hopelessness and emptiness over a period of at least 6 months (Prigerson et al., 2009). Although PGD and depression share certain symptoms and are therefore often comorbid, research has shown that the two disorders are distinguishable in terms of clinical course and response to treatment

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(Boelen et al., 2006; Jacobs et al., 1987). Especially after exposure to the violent death of a significant other, PTSD can occur together with PGD (Nickerson, 2014). However, avoidant symptoms in PGD rather refer to reminders of the loss and moving on without the deceased than the avoidance of fear-inducing stimuli as in PTSD (Prigerson et al., 2008).

Persons who lose a significant other to disappearance may experience grief differently from those mourning a deceased loved one, as they have to cope with constant uncertainty about his or her fate (Blaauw and Lähteenmäki, 1997). They are often preoccupied with the potential whereabouts of their significant other and, in repressive states, with the fear of that he or she has been subjected to torture as well as the fear of being subjected to torture or other human rights violations themselves as a form of kin liability (Blaauw and Lähteenmäki, 1997; Grupo de Memoria Histórica, 2013). These preoccupations may exacerbate the processing of the loss. Families of disappeared persons are often confronted with financial hardships as in most cases the person sustaining the family is the one being disappeared (Haugaard and Nicholls, 2010). Without the verification of death, families often have to cope with confusion about roles in the family system (Boss, 2004). Social marginalization and a decline of social support by the community have also been reported to result from disappearance of a significant other (Quirk and Casco, 1994; Robins, 2010). It has therefore been proposed that relatives of disappeared persons experience more severe mental health consequences than do bereaved individuals (Quirk and Casco, 1994). Powell et al. (2010) found higher levels of traumatic grief and severe depression in a group of 56 women whose husband was missing after the war in Bosnia and Herzegovina than among widows who knew their husbands had died in the conflict. Quirk and Casco (1994) interviewed Honduran families in the aftermath of the forced disappearance of a family member and found them to experience higher levels of psychological and physiological distress than families who had lost a family member to accident or illness or than families who had not lost a family member in the last 10 years. In a study on the differential effects of parental loss due to war, early adolescents whose fathers were missing expressed significantly higher levels of depression than did those whose fathers were killed during the war in Bosnia and Herzegovina (Zvizdic and Butollo, 2001).

The uncertainty regarding the whereabouts of a loved one may constitute an important risk factor for mental health problems. After a certain time, some relatives assume the death of the disappeared person, while others continue to believe or maintain hope that the disappeared person is still alive (Robins, 2014; Sluzki, 1990). This belief may prevent them from achieving closure and eventually contribute to the development of prolonged grief reactions (Blaauw and Lähteenmäki, 1997). The idea that hope in the disappeared person returning is associated with increased psychological distress has been suggested elsewhere (Robins, 2010), but has not yet been empirically tested.

A growing body of literature has addressed risk factors of PGD—that is, factors that increase the likelihood of PGD emerging. Recent studies in the context of war and definite loss have shown that PGD is more likely to develop when the death was relatively recent and due to violent causes (Schaal et al., 2010). Concurrent symptoms of depression and PTSD have also been found to constitute a higher risk for PGD (Morina et al., 2011; Stammel et al., 2013). Findings on gender effects have been mixed: Some studies have found that women are more likely to develop PGD; others did not find this association (Morina et al., 2010; Stammel et al., 2013). Whether these risk factors also apply in the context of the disappearance of a significant other has not yet been investigated.

The aim of the present study was to investigate PGD in a sample of persons who lost a significant other to disappearance and in a sample of bereaved individuals. Both groups were victims

of displacement due to the armed conflict in Colombia. The first goal was to explore whether psychological distress among persons who lost a significant other to disappearance can be captured by PGD, to determine the rates of PGD, depression, and PTSD and to compare them with the respective rates among persons bereaved through the armed conflict. In accordance with previous findings, we expected persons who had lost a significant other to disappearance to experience more severe mental health distress than bereaved persons. Second, we examined the specific impact on PGD symptom severity of the extent to which relatives or friends of disappeared persons hoped their loved one to be alive. Finally, we sought to gain a more comprehensive understanding of potential risk factors that influence PGD. Based on previous findings, we expected severity of symptoms of depression and PTSD as well as time since the loss to form predictors of PGD among bereaved individuals. Whether these risk factors also applied in persons having lost a significant other to disappearance was subject of research in this paper.

2. Method

The study utilizes data from a survey on the mental health of internally displaced Colombians and their attitudes to the current reparation program. The cross-sectional study was carried out in four districts of Colombia between September and December 2012. The study was reviewed and approved by the ethics commission of the Freie Universität Berlin. Participants were identified by linear systematic sampling (Chang and Huang, 2000) from a list of $N=1898$ displaced persons affiliated with our partner organization Tierra y Vida in the four districts. Tierra y Vida is a local NGO assisting displaced persons in the process of claiming the restitution of their land. After their selection, potential participants were contacted via phone and invited to participate in the study. Of the initially 952 selected persons, 498 persons could not be contacted or rejected participation. The main reason stated for rejecting participation was lack of time. Potential participants were provided with a full description of the study and informed about the voluntary nature of participation, the principles of confidentiality and anonymity, and the right to refuse answers to any question at any time. Informed consent was then obtained from all participants. Structured face-to-face interviews were conducted by three Colombian psychologists (M.A.) who had previously participated in a 2-week training course on the assessment of relevant concepts and the use of questionnaire measures. The interviewers received weekly supervision. The interviews took place in office rooms obtained with the support of our partner organization and lasted about 80 min on average. Transport expenses were reimbursed and participants received information about psychosocial service facilities in their department. All participants were provided with contact information of the study coordinators.

In total, $N=454$ persons were interviewed. For the purposes of the present study, only participants who had experienced the death or disappearance of at least one family member or friend in the Colombian armed conflict were included ($n=309$). A further 14 participants were excluded because essential data were missing; the final sample thus comprised 295 participants.

2.1. Instruments

Socio-demographic information was obtained, including gender, age, marital status, and educational background. Traumatic events were measured using an extended checklist based on the first part of the Harvard Trauma Questionnaire (Mollica et al., 1992). In total, 24 traumatic events were assessed.

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