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Research report

Commonalities in grief responding across bereavement and non-bereavement losses



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ABSTRACT

Background: Despite implications for theory and treatment, commonality in responding to nonbereavement and bereavement losses are not well explicated.

Method: This study identified the factor structure of the three most common responses to bereavement, prolonged grief, posttraumatic stress, and major depression in a bereaved community sample (n=151, 59% female, 68% white) from the U.S. recruited from Amazon's MTurk using a cross-sectional survey design, then cross-validated the structure in samples where people had lost other potentially self-defining roles; one's employment (n=157, 47% female, 69% white) and one's marriage (n=116, 62% female, 80% white).

Results: Results indicated that symptoms of prolonged grief, posttraumatic stress, and major depression were distinct factors in the bereaved sample, the three-factor solution was a good fit for the job-loss and divorce samples, and levels of grief in each sample appeared to be best predicted by time since loss and centrality of the loss to one's identity.

Limitations: Limitations include potential sample bias due to convenience sampling, and the cross-sectional design did not allow examination of the stability of factors over time.

Conclusions: These results suggest that grief is not a unique response to loss of loved one but instead may be a common phenomenology across types of loss. This implies that facilitating meaningful engagement in self-defining activities that compensate for the disrupting loss might be efficacious in promoting grief resolution without the need for working through individuals' emotional attachment to a specific individual or processing one's emotional responses to the loss.

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Over the last decade in a growing body of the literature has demonstrated that reactions to bereavement include mood disruptions, posttraumatic stress responses, and/or a set responses unique to grief. In this paper, we examined if the pattern of responding to bereavement across these response clusters was similar in people who had recently lost a job or got a divorce.

1. Grieving non-bereavement losses

Most grief theories fall into two broad overlapping areas. The first set hypothesizes that grief is a result of loss of a biologically driven social bond with an attachment figure (Bowlby, 1980; Shear and Shair, 2005). The second set of theories can be loosely described as cognitive stress theories relating grief severity to the degree that a loss violates assumptive world views (Stroebe and Schut, 1999), with extensions emphasizing the role of meaning making (Harvey and Miller, 1998;

Neimeyer et al., 2006) or identity continuity (Bonanno et al., 2001) in determining grief severity. All these theories are consistent in hypothesizing that the loss of an important other has unique implications for individuals' ability to self-regulate and adaptation (see Papa et al., 2013a). As a result, none of these theories have looked at the potential impact of other non-bereavement losses with the exception of Harvey and Miller (1998), who proposed that an individual might experience grief after any loss that alters an important self-aspect, such as losing one's job or divorce (Carlson et al., 2000).

A large body of research supports the premise that non-bereavement losses can have significant impact on adjustment after events ranging from natural disasters (e.g., Hobfoll, 2002), chronic pain and illness (e.g., Palomino et al., 2007), disability (Roos and Neimeyer, 2007), to being diagnosed with a mental illness (e.g., Stein et al., 2005). The similarity in reactions to non-bereavement losses and bereavement has long been described in the literature (e.g., Parkes, 1972). However, the few studies that have examine reactions to non-bereavement losses have tended to look at adjustment in terms of either depression or trauma, and typically has not included evaluation of prolonged grief (PG) symptoms integral to current conceptualizations of reactions to bereavement, making it unclear if

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these losses share the unique pattern of response observed after losses of loved ones. In fact, only two studies to date have linked non-bereavement loss to symptoms of modern conceptualizations of pathological grieving.

In the first, Shear and colleagues (2011) used a brief screening tool to measure four key symptoms included in the diagnostic criteria for PG in survivors of Hurricane Katrina 5–16 months after the disaster. The screening tool assessed frequency of longing/yearning, feelings of bitterness, perceptions of emptiness or meaninglessness, and difficulty accepting the loss. Of those that participated in the study, 3.7% reported loss of a loved one and 50.8% reported other nonbereavement losses such as loss of property, close association with family and friends, well-being, sense of control, etc., as the most significant loss associated with the hurricane. Of those who reported loss of a loved one, 18.9% reported moderate to severe grief symptom levels based on rationally derived cut-scores for the screening tool. Of those reporting non-bereavement losses, 6.7% reported moderate to severe levels of grief, with the highest prevalence among those that reported non-death related interpersonal losses due to the hurricane (10.6%).

A second study looked at the factor structure of PG, general anxiety, and general depression symptoms after loss of a job (Papa and Maitoza, 2013). In this study, a principal components analysis found that items measuring PG, depression, and anxiety each loaded onto clearly distinguishable factors. The results indicated that the factor structure of grief, depression, and anxiety symptoms were distinct in the job loss sample, allowing the inference that there is a common response pattern in bereavement and non-bereavement losses based on the findings of other studies showing similar factors structures in bereaved samples. However, a limitation of this approach is that, while Papa and Maitoza (2013) found evidence of discriminant validity of PG in a job loss sample, they did not directly assess commonality across different types of loss.

2. The current study

A number of factor analytic studies have shown that PG differs from depression, anxiety, and PTSD in bereaved adults from the U.S. and Canada (Barnes et al., 2012; Ogrodniczuk et al., 2003; Prigerson et al., 1996a), elders in the U.S. (Prigerson et al., 1995, 1996b), adults, adolescents, and children in the Netherlands (Boelen and van den Bout, 2005; Boelen et al., 2003, 2010; Spuij et al., 2012), adolescents in Belgium (Dillen et al., 2009), and adults in Croatia (Golden and Dalgleish, 2010). However, despite indications that the most common responses to bereavement include not just PG symptoms but symptoms of MDD and PTSD (Kristensen et al., 2012), almost all the factor analytic studies completed to date have examined the distinctiveness of general grief, anxiety and/or depression, or have only looked at differences between PG symptoms and depression or PTSD – giving an incomplete picture of how these symptoms clusters overlap to describe the phenomenology of loss. Only two factor analytic studies have examined the factor structure of PG, MDD, and PTSD symptoms, though in both cases goals of the studies did not lead the researchers to address cross correlations between items and the potential that a model trimming approach might illuminate the unique pattern of MDD, PTSD, and PG symptoms over and above a common distress response. In the first, Boelen and colleagues' (2010) confirmatory factor analysis (CFA) found the best fit for a six factor solution including factors for PG, MDD, and up to four factors for PTSD in two community samples from the Netherlands. Similarly, Golden and Dalgleish (2010) completed a principle components analysis in a post-war Croatian sample which found that items measuring PG, MDD, and PTSD loaded onto separate factors.

The current study sought to extend the existing literature by identifying the items that describe the latent factors underlying PG, PTSD, and MDD symptom ratings that might be unique to bereavement, and then to examine whether this pattern adequately describes the reported experience of those who experienced non-bereavement loss. The first step of this process entailed examining the distinctiveness of the symptom profiles of the three most common responses to bereavement identified in the grief literature in a community sample from the United States. This involved identifying the factor structure describing PG, MDD, and PTSD using EFA, in which correlated errors could not be specified, and then refining that model using CFA, in which the variance attributable to correlated errors could be specified and used in model refinement. The second phase of this project involved cross-validating the final refined model from the bereaved sample in two other samples where participants had lost other potentially self-defining roles; employee and spouse.

3. Method

3.1. Participants and procedures

An Internet-based survey was used to compare three different types of loss (bereavement, job loss, and divorce) on different indices including self-reported psychiatric symptoms. Four hundred twentyfour participants were recruited using Amazon's Mechanical Turk (MTurk) service. To participate, MTurk workers logged into their account, which automatically listed tasks for which they qualify based on researchers' specifications in order to earn money for their Amazon account (see Mason and Suri, 2012 for detailed description). Inclusion criteria were (1) loss of a full time job of at least 6 months duration, death of a parent, child or spouse, or divorce all within the last 12 months, (2) English proficiency, (3) 18+years old, and (4) U.S. A. residence. The survey took about 30 min to complete (M=28.53 min). The researchers paid Amazon \$1.50 for each survey, which was then credited to the Amazon accounts of volunteers minus a 10% fee. This study was fully approved by the University of Nevada, Reno Institutional Review Board.

Studies comparing MTurk workers to U.S. population have found that MTurk workers to be slightly younger than the population of the U.S. (approximately 32–33 across studies vs. 37 in the U.S. in 2013 per https://www.cia.gov/library/publications/the-world-factbook/fields/ 2177. html). MTurk samples have also been found to be more educated, and more likely to under- or unemployed than the population of the U.S. . The mean ages of participants in our study ranged from 33 to 35 across samples. About 68% of bereaved, 69% of job loss, and 80% of the divorced sample identified as "white only," compared to 79% from 2012 US Census data (http://quick facts.census.gov/qfd/states/ 00000.html). Participants with bachelor's degree or above ranged from 41 to 45% compared to 31% in the general population (http://www.census.gov/hhes/socdemo/ education/data/cps/2012/ tables.html). MTurk workers reliably report symptoms of MDD and general anxiety comparable to those found by Kessler et al. (2005) in the NCS-R and as well as similar levels of exposure to potentially traumatic events. However, since this study recruited individuals who had recently experienced an adverse life event, levels of probable PTSD (ranging from 30 to 38% across groups) and MDD (ranging from 22 to 25% across groups) were higher than found in the general population.

3.2. Measures

In addition to demographics, grief symptoms were assessed using the Prolonged Grief-13 scale (PG-13); a 13-item questionnaire that assesses the proposed symptoms of Prolonged Grief Disorder proposed by Prigerson et al. (2009). For this study, questions were changed to refer to the "job you lost" or to the person's ex-spouse/

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