



Refugee Services
National Partnership
for Community Training

Gulf Coast Jewish Family & Community Services

Case Study: Loss and Healing

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Tweet us your questions and thoughts during the webinar!

@NPCT_Refugee

NPCT is funded through the Department of Health and Human Services, Administration for Children and Families, Grant # 90XR0027. The contents of this publication do not necessarily reflect the views or policies of the funders, nor does mention of trade names, commercial products or organizations imply endorsement by the U.S. Department of Health and Human Services.

Webinar Series

- **Community is Refugee Mental Health**

- ❖ **Webinar 1: Community Impact**

- Importance of effective messaging
 - Trauma-informed practices enhance a welcoming environment

- ❖ **Post-Webinar Discussion: Community Engagement**

- Raise awareness and decrease stigma around mental health
 - Community engagement strategies: advocacy, gatherings, committees, focus groups

- ❖ **Webinar 2: How Communities Can Respond to Grief**

- Grief is a natural response to loss and trauma
 - Grief is multifaceted
 - Loss can include loss of loved ones, property, status, capital
 - Culture and context shape grief reactions

- **Refugee Mental Health and Suicidality Series**

- ❖ [Suicidality Among Refugees: Program Approaches and Community Responses](#)

- ❖ [Addressing Mental Health, PTSD, and Suicide in Refugee Communities](#)

Loss and Healing: A Case Study Discussion

- **Goal**
 - ❖ Explore approaches to serving refugee clients experiencing grief and loss
- **Objectives**
 - ❖ Connect with national colleagues working with refugees
 - ❖ Explore promising approaches that support refugees in the grieving process
 - ❖ Identify self-care practices for refugee resettlement staff

Who's in the Room?

- ❖ Mental Health Clinical Workers
- ❖ Case Managers
- ❖ Resettlement Agency Directors
- ❖ Direct Service Providers
- ❖ Community Members
- ❖ Clients (stories and experiences)

Terminology

- ❖ **Loss**
- ❖ **Grief**
- ❖ **Bereavement**
- ❖ **Mourning**
- ❖ Depression
- ❖ Trauma
- ❖ Complicated Grief
- ❖ Prolonged Grief
- ❖ Impacted Grief
- ❖ Secondary Grief
- ❖ Adjustment Disorder
- ❖ Community
- ❖ Healing
- ❖ Recovery
- ❖ Therapeutic
- ❖ Anticipatory Loss
- ❖ Mental Health

Grief, Bereavement, Mourning

- **GRIEF**
 - ❖ is a reaction to any form of loss; distress over affliction or loss
- **BEREAVEMENT**
 - ❖ process of recovering from loss of a loved one
 - ❖ “In and of itself a kind of culturally conditioned illness”
 - DSM V pocket guide
- **MOURNING**
 - ❖ To feel and express grief and sorrow

GRIEF:

Complicated, Prolonged, Impacted

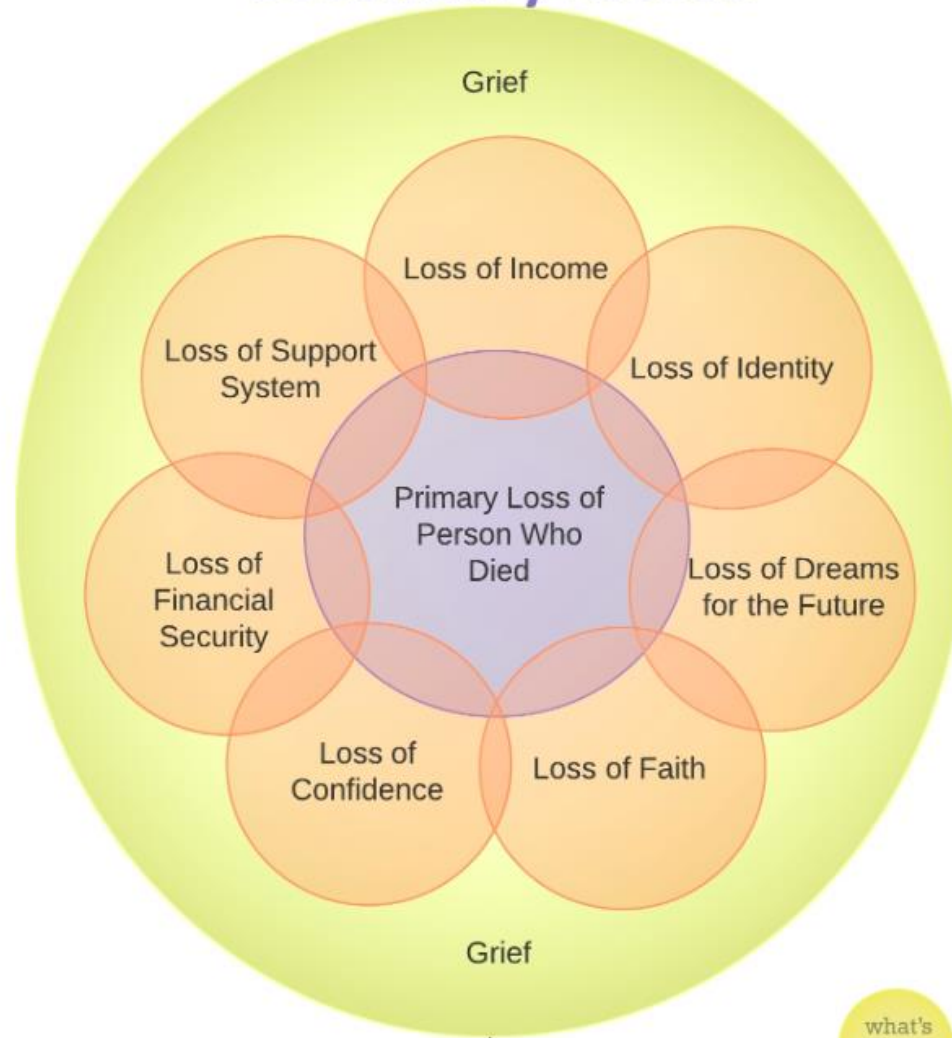
- ❖ Persistent form of bereavement that dominates a person's life, interfering with daily functioning for an extended period of time
- ❖ Intense sadness
- ❖ Preoccupation with the deceased or with the circumstances surrounding the death
- ❖ Longing or yearning
- ❖ Feelings of emptiness or meaninglessness
- ❖ Difficulty engaging in happy memories
- ❖ Avoidance of reminders of the deceased
- ❖ Lack of desire in pursuing personal interests or plans
- ❖ Bitterness or anger
- ❖ The *DSM-5* includes diagnostic criteria for “persistent complex bereavement disorder” in the section of conditions requiring further study
- ❖ “Impacted Grief” coined by Vietnam veterans (C. Shatan, 1973)

POLL

❖ What loss(es) have your clients experienced pre-flight, flight or during resettlement?

”No one told me that grief; felt so like fear” – C.S. Lewis

Secondary Losses



<http://whatsyourgrief.com>

what's
your
grief?

Secondary Loss

The ripple effect of a primary loss that impacts the loss of other factors or daily life norms, such as:

- ❖ Identity
- ❖ Country
- ❖ Home
- ❖ Trust
- ❖ Safety
- ❖ Stability
- ❖ Future Plans
- ❖ Loved ones

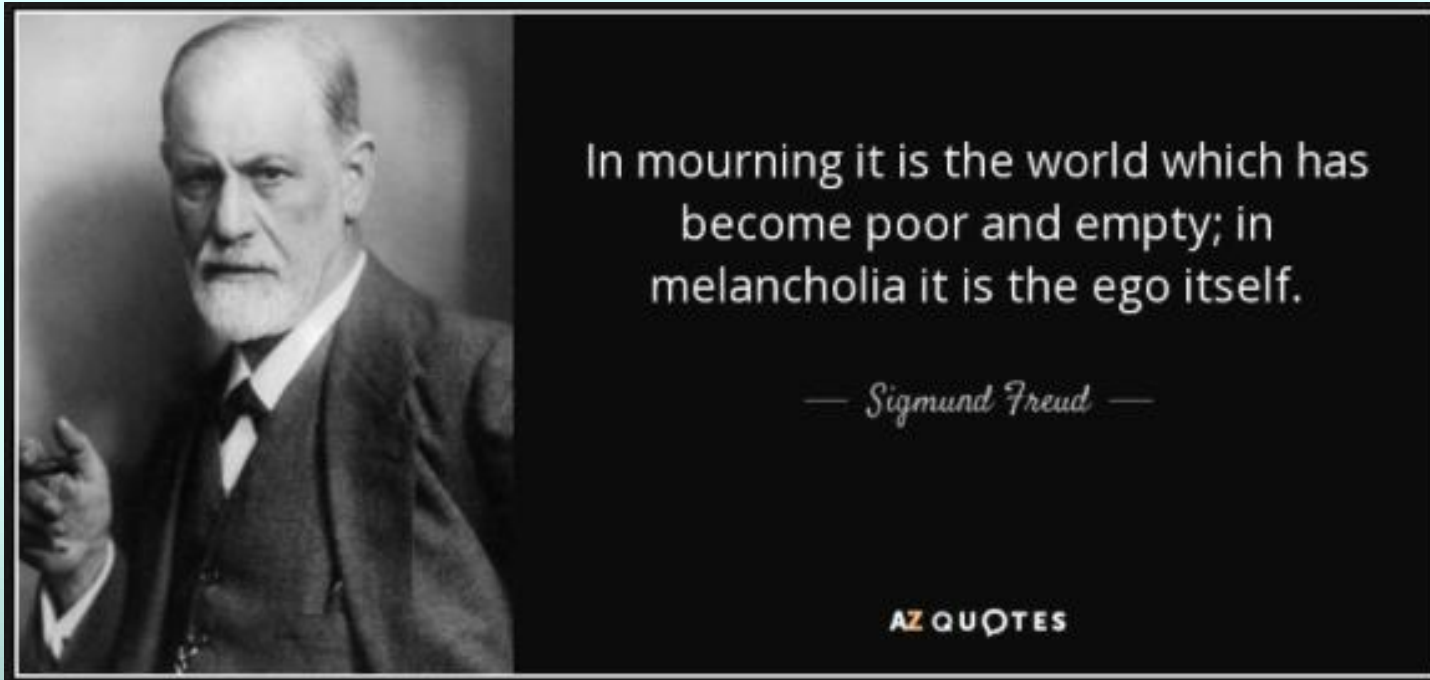
GRIEF:

Common Assumptions

- ❖ Grief means the death of a loved one
- ❖ There is a predictable grieving process
- ❖ Grieving is linear
- ❖ There is an end to grief
- ❖ Acceptance of loss is the goal
- ❖ Time will heal

“They say time heals all wounds, but that presumes that the source of the grief is finite.” – Casssandra Clare

History of Grief: From Freud to the DSM V



FREUD: MOURNING AND MELANCHOLIA

- ❖ Mourning: occurs over an object of love consciously
- ❖ Melancholia: person grieves over the loss he is unable to fully comprehend or identify - this occurs in the unconscious mind
- ❖ Freud viewed Mourning as normal and Melancholia as pathological

DSM IV and DSM V

DSM IV:

- ❖ Prevented bereaved person from being diagnosed with depression until at least two months had elapsed from the start of the mourning period
- ❖ Grief was the exception to receiving or providing a diagnosis of clinical depression

DSM V:

- ❖ Bereavement is excluded from depression diagnosis
- ❖ Benefits: No longer have to wait for 2 months to be diagnosed with depression; access to immediate support sooner
- ❖ Considerations: higher rates of prescribed anti-depressants

<u>5 Stages</u> Kubler Ross Model "Death & Dying"	<u>7 Stages</u> Kubler Ross, colleagues, and other adaptations	<u>4 Stages</u> Linda Rodebaugh	<u>4 Tasks of Mourning</u> J.W. Worden	<u>2 Tasks</u> Stroebe and Schut
Denial	Shock/Disbelief	Reeling Shock Denial Disbelief	To ACCEPT the reality of the loss	Loss-Oriented Activities Crying Yearning Dwelling Avoiding Healing
Anger	Denial	Feelings • Anger • Anguish • Guilt • Deep sadness • Helplessness • Detachment	To WORK THROUGH the pain and grief	Restoration Oriented Activities Adapting, managing changes, cultivating new way of life
Bargaining	Bargaining	Dealing Thoughts and actions to aid in coping	To ADJUST to life without the loss	
Depression	Guilt	Healing Integrating the loss into your life	To MAINTAIN a connection	
Acceptance	Anger			
	Depression			
	Acceptance/Hope			

Stages, Helixes, Continuums, Teardrops & Tasks

PARTICIPANT POLL:

What images or symbols come to mind when you think of the grieving process?



Culture and Grief POLL

- ❖ Flag half mast
- ❖ Headlights on during funeral
- ❖ Wearing Black
- ❖ Covering Mirrors
- ❖ Covering Head
- ❖ Praying morning and night
- ❖ Candle burning
- ❖ Gatherings/Vigils
- ❖ Shrine/Altar

Symptoms of Grief

- ❖ Sleeplessness
- ❖ Lack of appetite
- ❖ Listless
- ❖ Lack of interest
- ❖ Anhedonia
- ❖ Memory difficulties
- ❖ Disorganization
- ❖ Increased irritability
- ❖ Numbness
- ❖ Bitterness
- ❖ Detachment from social groups
- ❖ Preoccupation with loss
- ❖ Inability to show or experience joy
- ❖ Digestive problems
- ❖ Fatigue
- ❖ Headaches
- ❖ Chest pain
- ❖ Sore muscles

Symptoms, Culture, and Assumptions

- ❖ How do assumptions influence observations and impact assessments?
- ❖ Example: “Client is no longer eating or engaging in activities he previously enjoyed, such as listening to music and being outdoors.”
 - Question – are these symptoms of grief? Depression? Or are these simply traditional acts that honor one’s cultural expression and practice of mourning?
 - Always review the length of time symptoms have existed and their impact on client goals

DIAGNOSES Related to Grief

- Major Depressive Episode, with or without psychotic symptoms
- Hysteria
- Bereavement
- Adjustment Disorder
- Prolonged Grief Reaction
- Psychosis
- Acute Anxiety
- Anticipatory Grief

Culture and Diagnosis

Mourning shows substantial cultural variation: the bereavement reaction must be out of proportion or inconsistent with cultural or religious norms.

What do you think when you read the following examples?

- ❖ When she walked home from ELL class she heard the voices of her deceased younger brother. She would hear them when she would try to fall asleep and again when she woke from nightmares.
– Congolese 25 year old female
- ❖ Iraqi man would not stop pacing, walking, holding his heart and talking to Allah.

	PGD	MDD	PTSD
Rumination over Loss	X		
Focus on Separation from Loss	X		
Preoccupation with Loss	X		
Loss of Interest	X (specific)	X (general)	
Inability to Identify Sources of Pleasure	x	x	x
Fatigue	X	X	X
Change in Eating Habits	X	X	X
Change in Sleeping Habits	X	X	X
General Diminished Concentration		X	
Self Blame about Loss	X		
General Sense of Worthlessness		X	X
Intrusive Thoughts of Fear			X
Intrusive Thoughts of Shame			X

Symptoms and DIAGNOSIS: Prolonged GRIEF Disorder (PGD), Post-Traumatic Stress Disorder (PTSD) or Major Depressive Disorder (MDD)

Assessment Tools

❖ Brief Grief Questionnaire (BGQ)

- ❖ BGQ asks patients to report symptom severity on a 3-point scale for five grief symptoms
- ❖ “How much does grief still interfere with your life?”
- ❖ “How much are you having trouble accepting the death of _____?”
- ❖ **Benefit:** not culturally rigid
- ❖ **Consideration:** focuses primarily on death of a loved one

❖ Texas Revised Inventory of Grief

- ❖ 13 statements about grief-related thoughts and behaviors
- ❖ Uses 5 point scale from “Completely False” to “Completely True”
- ❖ Mildly culturally rigid as it assesses for “normal grief”
- ❖ **Benefit:** uses first person statements and looks at current feelings
- ❖ **Considerations:** challenging to identify what is normal across cultures

❖ Inventory of Complicated Grief (Prigerson et al, 1995),

- ❖ 5 point scale from “Never” to “Always”
- ❖ 19 first-person statements concerning the immediate bereavement-related thoughts and behaviors
- ❖ **Benefit:** targets intense grief reactions
- ❖ **Considerations:** hallucinations are seen as a pathological indicator, which can have cultural implications
- ❖ Consider Unresolved Grief when working with clients presenting with other issues and concerns

General Guidelines for Cultural Considerations

- 1) Do you have interpretation?
- 2) Are the questions being asked culturally or situationally rigid?

“Do you feel blue?”
“Do you hear voices?”

- 3) Consider the timing of using certain assessments

Example: the BGQ asks about being cut off from family and activity engagement due to the loss of someone. The data gathered from this questionnaire could be complicated when assessing a refugee client’s experiences.

Culture & Grief:

Through the Refugee Lens

- Refugees arrive with a common sense of loss
- Identity formation is always in motion and at the hands of others
- Personal loss is publicly displayed in media
- Shift in personal, economic, social, and gender status
- Inability to hold traditional ceremony for deceased loved ones
- When traditions and norms cannot be honored due to crisis and search for safety
- Grieving loss to suicide
- Grieving loss of a child
- Grieving loss of an elder

Case Study Discussion:

Observations, Assessments, Treatment

WHAT ARE YOU SEEING?

- ❖ Country of Origin
- ❖ Date of Arrival
- ❖ Religion
- ❖ Length of time seeing the client
- ❖ Frequency that you see the client
- ❖ What do you observe when working with this client?
- ❖ Major themes
 - ❖ Isolation
 - ❖ Insomnia
 - ❖ Aggression
 - ❖ Anxiety
 - ❖ Diagnosis
 - ❖ Trust

Practices, Modalities, Meaning and Modeling

- **Cognitive Behavioral Therapy**
- Solution Focused
- **Narrative Therapy**
- Exposure Therapy
- **Symbolic Representation – creating an altar or celebration space**
- Strength based
- **Continuing Bonds Theory**
- Group therapy
- **Community Engagement**
- Internet Options
- **Music – create a playlist**
- Journaling – identify triggers, memories, moments
- **Anniversaries**
- Share pictures, storytelling, memories
- **6th Stage of Meaning Making**
- Create and model a culture of self-care and celebration for yourself, your agency, and your clients



The power of relationship

Grief is based on the loss of a relationship to someone or something

Individual: The role of the therapeutic relationship can aid in the creation of new relationships based on trust, consistency, and compassion. The role of a mentor can aid in feeling cared for and build a sense of belonging.

Community: “When the community opinion is of acceptance, integration can more likely occur. When community opinion is a climate of rejection, isolation is more likely to occur.” – Veterans re-integrating into community (Herman, 1997)

Agencies: Trauma-informed practices can enhance a grieving client’s capacity to become future oriented and engage in services.

REVIEW

- Grieving is **NOT** a linear process
- Grieving is a healthy, necessary reaction to loss
- Loss is not solely about a loved one
- Grief is universal, but the expression of it is unique to each person
- Cultural considerations are key when working with grieving clients and community members





Contact Information

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Gulf Coast Jewish Family & Community Services

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