

Loss, Grief, Stress and Trauma: An Introduction

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Loss

- students with refugee backgrounds have multiple losses .
- the impact of loss on young people is often minimized or ignored.
- parents with refugee backgrounds may be placed in a challenging position around addressing their children's loss. When parents address the magnitude of their children's losses, parents may experience increased distress. Parental distress may in turn decrease the ability to be protective agents for their children.
- students from refugee backgrounds seldom have time to recover from one loss before another significant loss occurs. Student's grief, in response to multiple losses, can become complex and broad reaching.
- some of these losses may have become traumatic losses.
- losses are processed again and again at different developmental milestones, with maturity, with changing self and cultural identity, when other losses or traumas occur, etc .

Grief

- Is natural reaction to loss.
- is a process, and generally is hard and exhausting.
- grieving " takes time" and new losses can renew grief for old losses (e.g., a friend moving away triggers memories of the loss of a parent).
- processing grief includes the 6 R's (Rando, 1993):
 1. *recognizing the loss*
 2. *reacting to the separation*
 3. *recollecting and re-experiencing the deceased and the relationship*
 4. *relinquishing the old attachments to the deceased and the old assumptive world*
 5. *readjusting to move adaptively into the new world without forgetting the old*
 6. *reinvesting*

Complex Grief

- students may experience loss upon loss, with losses of traumatic nature (e.g., murder of parents). Grief can be hindered by the impact of traumatic experiences (e.g., avoiding feeling, painful flashbacks, etc.)

Cultural Bereavement

- students may experience cultural bereavement in the face of loss of social structures, cultural values, self-identity, cultural lens through which to interpret the losses, stresses, traumas , etc.

Stress and Psychobiology of Stress

- stress has impact on every level of one's being (e.g., cellular level, hormonal level, emotional level, social level, cognitive level, spiritual level). Another way of understanding stress is "threat."
- prolonged stress can alter the brain, particularly prolonged stress during early childhood.
- Stress has a biological impact: basic physiological systems, including the autonomic nervous system, the hypothalamic-pituitary-adrenal axis, and the immune system are involved; at cell-level, threat signals move cell into protection versus functional/growth mode.
- Stress causes cognition changes: shifting of memory storage; perception of time; attention; learning processes
- Stress causes emotional changes: increased recall of other stressors, stalling of emotional development,

etc.

- Stress causes social attending changes: decreased “feel good” hormones often leads to social isolation, self-soothing to calm distress, high attention to negative stimuli, higher interpretation of threat from others
- what is “threat” or “stressful” varies from person to person, and is largely reflective of experience (e.g., reacting to unexplained absence of teacher being like disappearance and eventual death of father)

Trauma

- trauma is defined here as a distressing event that is outside the range of normal human experience. Trauma often involves a sense of intense fear, terror, and helplessness. Trauma generates an abnormally intense and prolonged stress response.
- many students with limited schooling from refugee backgrounds have been exposed to traumatic experiences over again, without time to recover.
- the effect of multiple traumas is cumulative. Metaphorically, **one trauma + one trauma = four traumas**
- the impact of the trauma is dependent on age, event, presence of parents to soothe and support
- the brain responds to intense threat with focus on survival that involves multiple systems (i.e., neurobiological, neuroendocrine, and neuropsychological responses; at level of cells).
- these survival responses may include different survival strategies -- ranging from flight to fight to freeze / surrender. Likely a student will use each of these survival strategies when responding to new threats.
 - flight/fight: more common in males
 - freeze/surrender: more common in females; more common when the trauma occurs in infancy when the child cannot move out of the way; when witnessing torture.
- generally, the first survival strategy in the first trauma, sets the pattern for that survival strategy as a way of coping with later stressors (e.g., freeze during family violence while an infant in the crib → freeze during fire bell ringing at school)
- Post Traumatic Stress Disorder (PTSD) is a neuropsychiatric disorder that may follow a traumatic event. Formally this requires a clear, identifiable traumatic event for diagnoses. PTSD is characterized by intrusive images, avoidance of things that are like the event and physical hyper-reactivity.

Complex Trauma

- in the context of this group of students, can refer to the impact of multiple highly invasive traumatic events
- symptoms of complex trauma have been seen in students with refugee backgrounds who have experienced traumatic loss, as well as found in students who have been hurt over and over again by a trusted person; found in students who have experienced medical traumas
- has impact across multiple domains and systems including biological, emotional, cognitive, attachment, self-concept .
- can lead to lifelong challenges, including anxiety, depression, identity challenges, relational challenges, dissociation, emotional regulation challenges, cognitive distortions, self-mutilation, violence, substance abuse; complex relational and emotional impairments
- often occurs within the context of poor attachment, as well as abuse and/or neglect