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Traumatic Grief within a Northern Plains Tribal Community: An Exploration of Group Differences

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Abstract

The construct of maladaptive grief, although not completely new to psychology, has recently been redefined and has become a focus of clinical attention. Traumatic grief, formerly known as complicated grief, is now referred to as Persistent Complex Bereavement-Related Disorder (PCBRD) in the DSM 5. Previous research has shown that traumatic grief is clinically distinct from other related disorders such as Major Depression Disorder (MDD), post-traumatic stress disorder (PTSD), anxiety disorders, and adjustment disorder. Research has also established risk factors for the development of traumatic grief, such as a history of childhood separation anxiety, a close kinship relationship to the deceased, the nature of the death, and lack of preparation for the death. Prigerson and Jacobs (2001) developed the Inventory of Traumatic Grief to measure symptoms of maladaptive grief. This measure has since been used in a variety of studies investigating grief; however, the applicability of this measure with an American Indian sample was unknown. Given the well-documented premature mortality rates and generally lowered life expectancy in American Indian communities, this secondary analysis sought to explore group differences on several factors for those participants who scored at or above the suggested cut-off point on the Inventory of Traumatic Grief- Revised (ITG-R) for a diagnosis of traumatic grief and those who scored below the suggested cut-off point. *Methods*: Fisher's exact test and nonparametric t-tests were conducted on archival data to investigate group differences on several variables between participants who scored at or above the suggested clinical cut-off point for a traumatic grief diagnosis, and those who did not. Participants: The sample consisted of 87 (43 females, and 44 males) Native American adults ranging in age from 18 to 81 years (M = 43.74, SD = 14.74). Results: Fisher's exact tests showed no significant differences between the two groups on variables including gender, employment, living status, education, the time since the most recent death, and endorsement of religiosity or spirituality. In addition, nonparametric t-tests showed no significant

differences between the two groups on the total deaths experienced, the number of unexpected and expected deaths experienced, and the age of the participants. *Conclusions:* Results found no significant group differences on several variables for participants who scored at or above the suggested clinical cutoff point for a traumatic grief diagnosis, and for those participants who scored below the suggested clinical cut-off point on the Inventory of Traumatic Grief-Revised. Results may suggest that the construct of traumatic grief should be further investigated within American Indian populations to determine content validity of the ITG-R, as well as other potential risk factors and protective factors for the development of traumatic grief within an American Indian community.