Understanding ambiguous loss in young people involved in offending

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Introduction
Vulnerable young people, such as those involved in offending, are more likely than the general population to have experienced bereavements and substantial losses. The relationship between loss and behaviour is not fully clear. Loss in childhood may reduce resilience and directly lead to externalising behaviours to deal with the underlying loss, grief and trauma (Finlay and Jones, 2000). Or there may be some mediating factor rather than a criminogenic effect of loss, for example, reduced parental monitoring (Isherwood et al., 2007) or exclusion (Berridge et al., 2001). Others draw attention to the similarities in risk factors for both significant childhood disruption and offending (for example poverty, addiction, and community violence), which may contribute to the correlation between loss and offending (Childhood Bereavement Network, 2008).

Understanding young people’s responses to bereavement and, perhaps even more importantly, recognising that responses to offending, by taking young people into care or custody, can exacerbate the loss and trauma that young people experience, is an important step in improving outcomes for vulnerable young people. Yet the dominant approach to evidence-based youth justice practice, with its focus on risk and risk management, means that factors that are deemed ‘non-criminogenic’ such as the trauma and grief caused by bereavement and loss are often little understood and can be overlooked by youth justice and other practitioners (Hester and Taylor, 2011).

Losses experienced by vulnerable young people
To understand loss in young people it is important to acknowledge the full extent and range of losses that can be experienced, especially by those in care or custody. A study of young people involved in persistent offending found parental and traumatic bereavements occurred more frequently than in the general population (Vaswani, 2008). Similarly, Vaswani (2014) also found that almost all young men in a Young Offenders Institution had experienced at least one bereavement and that multiple and traumatic bereavements were common. Penny (2007) also reports on several studies indicating elevated rates of bereavement among the residential care population.

Experiences of loss are not limited to bereavements. A study of young men in a YOI found that there were numerous losses incurred either on the journey to, or as a result of custody, which could be classified as: loss of hope and future; loss of relationships; loss of status and loss of stability (Vaswani, 2015). Similarly, a young person’s experience of care may include significant change and associated loss, such as: loss of family; loss of identity; loss of cultural connections (Brodzinsky, 2009); loss of place (for example, a bedroom); loss of belongings; loss of privacy; loss of childhood; as well as loss of pets, friends and other relationships (for example, carers and staff).
Typically, the word ‘loss’ evokes images of large-scale losses such as the death of a loved one. However, it is clear that loss can take many forms that might appear to family, friends or practitioners to be less significant or more ambiguous than bereavement. Losses that contain an element of ambiguity can be particularly problematic. For example, temporary losses through being taken into care, or through parental imprisonment can be uncertain and confusing. The loss may be complicated by conflicting emotions if the family relationship had been ambivalent or even abusive. It is precisely these uncertainties that can complicate the response to loss for the individual and those involved in providing support.

Ambiguous loss and disenfranchised grief
In developing the concept of ‘ambiguous loss’, Boss (2006) recognises the significance of uncertainty and how this can negatively impact on a person’s response to loss. She argues that “ambiguous loss is inherently traumatic because the inability to resolve the situation causes pain, confusion, shock, distress, and often immobilization. Without closure, the trauma of this unique kind of loss becomes chronic.” (p.4). Furthermore, losses that are less well recognised may not result in the same levels of understanding or support from society or from professionals as a bereavement does. Ambiguous losses can therefore result in what has been termed disenfranchised grief, which is when losses are not publicly mourned, or socially supported (Doka, 1999). Young people in the care and justice systems are, by virtue of their age and the nature of their losses, more likely to be disenfranchised. This means that young people often have to face their losses alone, a concern when even small losses can be experienced as traumatic and can have an accumulative effect on young people.

To exacerbate the situation, entering custody or becoming looked after can disrupt coping strategies, for example by separating young people from their social supports, by creating additional losses, or by taking away their agency to choose their ways of coping (Vaswani, 2014, 2015). Combined, all of these factors can lead to grief and trauma that is never resolved, resulting in acting out, risk-taking behaviour, substance misuse, depression, anxiety and helplessness.

Implications for Practice
An important first step should be in helping young people to acknowledge, identify and label their losses but also to identify what has not been lost. Storytelling and narrative approaches may have utility in helping young people discover and tell their story (Vaswani, 2014). Allowing young people the opportunity to participate in rituals to mark the loss, no matter how small, may also prove useful (Monroe and Kraus, 2005).

However, Boss (2006) notes that with ambiguous loss it is often impossible to resolve the ambiguity, so the aim of intervention should focus on increasing resilience and learning to tolerate uncertainty. At present there is little research either to support or discredit interventions for dealing with all forms of loss in vulnerable young people, although Boss suggests that ambiguous loss is best treated systemically through family and community-based approaches. In these populations ‘community’ may usefully be defined as the residential unit or the custodial environment, especially given the pervasiveness of loss among young people in these settings.

Additional reading and a full list of references is available at www.cycj.org.uk.