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# Reflections of Young Adults on the Loss of a Parent in Childhood

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#### Abstract

The purpose of this qualitative study is to provide an early exploration of the reflections of young adults on the experiences of parental loss in adolescence. This study aims to understand what the impact of relationships with immediate family, extended family, and peers have on bereaved young adults, and how these relationships changed after the death of their parent. Qualitative methods were used to explore this area of research. Eleven participants were recruited through snowball sampling and personal connections, from Montreal and New Jersey. Using a phenomenological design, the participants were asked 14 in-depth questions using prompts and follow up questions for each. Interviews were transcribed, coded and analyzed for common themes. Four themes emerged from the data analysis: a) Pileup of stressors aggravate grieving; b) Benefits of social support; c) Coping strategies used by the participants; d) Adaptation to the loss of a parent: personal growth/maturation. Implications for future research and practitioners working with this population are considered.

# MONTCLAIR STATE UNIVERSITY

/ Reflections of Young Adults on the Loss of a Parent in Childhood /

by

Eva Apelian

A Master's Thesis Submitted to the Faculty of

Montclair State University

In Partial Fulfillment of the Requirements

For the Degree of

Master of Arts

May 2017

College/School <u>CEHS</u>

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# REFLECTIONS OF YOUNG ADULTS ON THE LOSS OF A PARENT IN ADOLESCENCE

# A THESIS

Submitted in partial fulfillment of the requirements

For the degree of Masters of Arts

By

Eva Apelian

Montclair State University

Montclair, New Jersey

May, 2017

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#### Acknowledgments

My inspiration to learn more about grief and coping with the death of a parent was the loss of my mother, Brigitte Apelian. I was just 19 years old when she passed away, and my life was turned upside down. Her loss was the most painful and traumatic event I have ever lived through. By conducting this research, I wanted to understand how other young adults had coped and were still coping with the loss of their parent.

This work would not have been possible without the support and guidance of Dr. Nesteruk, who worked actively to provide me with the tools and advice to complete this thesis. Her extensive knowledge was extremely valuable and taught me a great deal about conducting qualitative research and about academic writing in general. I am also grateful to my thesis committee members, Dr. Khaw and Jennifer Costa, with whom I have had the pleasure to work with during this time. They were both open to providing me the encouragement and assistance I needed throughout the completion of this work.

I would like to thank my father, brother, and husband for always believing in me and supporting me in all of my endeavors. I would not be where I am today without their love, guidance, and support. Dedicated to my mother

Brigitte Apelian

1960 - 2011

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#### Introduction

Death is part of life, and although it is inevitable, most human beings find it very difficult to accept. When death occurs at an off time, thus unexpectedly, it is even more challenging to accept and grieve the loss. Although parents must go before their children, very often, children lose their parents at an early age, and this strongly impacts their life (Raveis, Siegel, & Karus, 1999; Lawrence, Jeglic, Matthews, & Pepper, 2005). Statistics from UNICEF demonstrate that there are 153 million children around the world who have either lost both parents, a mother, or a father (Gimenez, Chou, Liu, & Liu, 2013). In the United States, 2.5 million children under the age of 18 have experienced the loss of a parent (Koblenz, 2015).

Osterweis (as cited in Raveis et al., 1999) indicated that there is a variety of factors that affect a child's grief process after the death of a parent, such as the child's family, the deceased parent's gender, gender of the child, and the circumstances of the death. Many of these factors will determine how well the child will adapt to the death. For example, a child is less likely to develop problems after the death if the surviving parent is available and supportive and if the child has adequate social support (Silverman & Worden, 1992).

The child's gender also plays a role in the grief process. Males are more likely to manifest problematic behavior, while females are more likely to display feelings of grief and sadness (Kraatz Keiley, Bates & Dodge, 2000). Martin and Doka (as cited in Lawrence et al., 2005) postulate that males are socialized to keep their feelings and emotions to themselves, while women are more encouraged to share their feelings.

Therefore, both males and females may have significant differences in grief reactions due to gender role socialization.

The gender of the deceased parent also plays a significant role in the child's bereavement outcome. Previous literature shows that the death of a mother has a more adverse impact on children than the death of a father (Silverman & Worden, 1992; Lawrence et al., 2005; Lendardt & McCourt, 2000; Smith, Hanson, Norton, Hollingshaus, & Mineau, 2014). Furthermore, children who lost a mother were more likely to report higher levels of depression, grief and suicidal ideation than children who lost a father (Lawrence et al., 2005).

It is fundamental to learn about and understand children's grief experiences, as unresolved grief may lead to severe repercussions later in life such as psychiatric issues, health problems, and depression (McClatchey & Wimmer, 2012). Children and adolescents may also go through a period of hopelessness and may have suicidal thoughts after the death of their parent (Lawrence et al., 2005). Early life stressors such as early parental death are known to affect suicide (Agerbo et al., 2002 in Hollingshaus & Smith, 2015). Suicide was in fact found to be the 10<sup>th</sup> leading cause of death among youth in the United States in 2011 (Hollingshaus & Smith, 2015). It is therefore crucial to study the possible impact of parental death on children in order to alleviate any severe health and psychological issues.

The repercussions of the death of a parent may be adverse (Koblenz, 2016; Saler & Skolnick, 1992), but there are times where children become extremely resilient after the loss of a parent (Raveis et al., 1999; Hope & Hodge, 2006; Greeff & Human, 2004). Resiliency, however, is also dependent upon a wide variety of factors, such as support

and communication from surviving parents, siblings, and peers (Greeff & Human, 2004), circumstances of death (Hope & Hodge, 2006), and the daily changes after the death (LaFreniere & Cain, 2015).

Resilience was mainly found among children who had a strong support system in their immediate family and through extended systems such as teachers, friends, and relatives (Greeff & Human, 2004). Raveis and colleagues (1999) found that the children in their study reported low levels of psychological distress 3-18 months after the death of their parent, suggesting a high level of resilience after the death. If a child's basic framework and routine remain the same after the death, it will be easier for him/her to become resilient (Hope & Hodge, 2006). Giving children the opportunity to talk about the death has also been beneficial in becoming resilient (Hope & Hodge, 2006).

Factors previously mentioned such as post-death family environment, daily changes, and circumstances of death, all contribute to different grieving processes and outcomes, therefore, the more we know about and understand this phenomenon, the more effective we can be in supporting those who are affected. Given the limited research on these factors in general, particularly among young adults, the current study aimed to gain a deeper understanding on the experiences of young adults coping with the loss of their parent.

#### **Review of Literature**

The death of a parent is a deep psychological pain for children and adolescents. Many changes are likely to occur after the death of a parent within relationships and the family environment. There are many factors that contribute to successful grieving such as support and communication from various family members, peers and therapists, the

stability of the child's environment after the death, and the circumstances of death (Greeff & Human, 2004; Hurd, 2002; Koblenz, 2015; Worden, 1996; Silverman & Worden, 1992; Hope & Hodge, 2006). Some children will experience adverse health and psychological issues (Raveis et al., 1999), while others will show incredible resilience (Greeff & Human, 2004).

#### **Circumstances of Death**

The literature on death and bereavement often compares the effects of expected and unexpected parental death on children. Anticipated deaths are usually when the parent has a terminal illness (Hope & Hodge, 2006), and unexpected deaths are when the parent dies very suddenly, usually from a heart attack, an accident, or suicide for example (Hope & Hodge, 2006).

Saldinger, Cain, Kalter, and Lohnes (1999) reported that children who were anticipating the death of their parent for a lengthy period of time had the most difficulty adjusting to the death. The stress of waiting for their parent to die is very tough on children emotionally and cognitively (Saldinger et al., 1999). The length of the illness, treatment of illness, and all the lifestyle changes that occur when a parent becomes severely ill can have adverse effects on children (Christ et al., 1993). However, another study found that children who lost a parent unexpectedly to suicide were more likely to develop psychopathology, due to the trauma they endured (Cerel, Fristad, Weller, & Weller, 2000). When the death is very sudden, the child has no time to prepare for the death, which can be problematic (Kranzler, Shaffer, Wasserman, & Davis, 1990).

Youths who lost their parent unexpectedly to homicide, did not cope as well as those who lost a parent to natural causes, such as illness (Thompson, Kaslow, Price,

Williams, & Kingree, 1998). Those who lost their parent unexpectedly expressed more distress and behavioral problems than those who anticipated their parent's death (Thompson et al., 1998). The loss of a parent to a violent death may also lead to posttraumatic stress disorder (PTSD) symptoms in children (Black, 1998). Children who are unable to process and express their grief after the violent and sudden death of their parent may also experience Childhood Traumatic Grief (CTG) (Brown & Goodman, 2005). However, studies have also shown that children who experienced expected and unexpected deaths will experience traumatic symptoms regardless (McClatchey, Vonk, & Palardy, 2009; Hope & Hodge, 2006).

Nader (as cited in McClatchey et al., 2009) found that other factors besides the circumstances of death have been found to play a significant role in children's grief such as the relationship the child had with their deceased parent, availability of support, the family's coping mechanisms, and the surviving parent's mental health. Hope and Hodge (2006) found evidence that both expected and unexpected deaths are difficult for children to adjust to. It may be that a child's awareness and understanding of the situation was in fact more important in determining how well the child adjusted to the death (Hope & Hodge, 2006). If children are not told that their parent has a serious illness and may die soon, the death itself may end up being unexpected for them, and therefore more challenging to deal with (Hope & Hodge, 2006).

#### **Immediate Effects on Children Following Parental Death**

After the loss of a parent, a child may face immediate effects such as health and psychological issues (Raveis et al., 1999; Silverman & Worden, 1992), changes in routine and a disruption in the stability of their environment (Worden, 1996; Silverman &

Worden, 1992; McClatchey & Wimmer, 2012). These short-term effects may adversely impact the child and therefore make grieving a much longer and more difficult process.

Daily changes. After the death of a parent, the family may be faced with many daily changes such as financial issues, relocation, change of schools, remarriage, and so on (Silverman & Worden, 1992; McClatchey & Wimmer, 2012; Greeff & Human, 2004; Raveis et al., 1999; LaFreniere & Cain, 2015). Children may also be faced with a decrease in their surviving parent's emotional availability, increase in family arguments, changes in allowance, possible need for employment for adolescents, daily chores, changes in bedtime hours and mealtimes, as well as a disruption in communication patterns (Worden, 1996). Most parentally bereaved families will undergo several daily changes in routine after the death of the parent and spouse. The more the daily environment is disrupted after the death, the more difficult it is for children to adjust well (Silverman & Worden, 1992; LaFreniere & Cain, 2015).

Children may also have increased responsibilities and an increase in household chores, especially after the death of a mother (Silverman & Worden, 1992). It is also very common for adolescent girls to take on a maternal role, and become the family's caretaker after their mother dies (Edelman, 1994). This can create a large amount of stress and burden on these young girls who are expected to take on this role at an early age (Edelman, 1994). Children under the age of 12, who lost a mother, were more likely to either take care of themselves when they were sick or had a relative take care of them (Silverman & Worden, 1992).

A family's financial situation after the death of a parent affects the family's grieving process. If financial resources have been drained due to medical bills, or if the

deceased parent was the breadwinner, this can be extremely stressful for the remaining family members (Greeff & Human, 2004). Furthermore, children as young as eight or nine years old worried about financial problems and felt that they needed to help their surviving parent by obtaining a job (McClatchey & Wimmer, 2012). The availability of resources plays a role in child outcomes; children from wealthy families experienced less sleep disturbances after the death of their parent than children from less affluent families (Greeff & Human, 2004). Children from more affluent families were also able to concentrate better in school and experienced fewer learning difficulties, compared to children from less affluent families (Raveis et al., 1999).

Health and psychological issues. Following the death of a parent, children may experience distress, anxiety, depression, and difficulty focusing in school (Raveis et al., 1999; Silverman & Worden, 1992). Depression is very common among children after the death of their parent (Raveis et al., 1999; Lawrence, 1996; Weller, Weller, Fristad, & Bowes, 1991). In fact, about half of bereaved children become depressed in the year following their parent's death, and 16% remained depressed after the year has passed (Pfeffer, 2002). Children's level of depressive symptoms and anxiety were associated with the surviving parent's level of open communication (Raveis et al., 1999). The level of open communication from the parent was extremely beneficial in helping the child grieve in a healthy manner (Raveis et al., 1999). In Weller et al.'s (1991) study, 37% of the parentally bereaved children reported a severe depressive episode.

Girls tend to show more symptoms of depression than boys, partly due to factors such as more vulnerability to the death or an increase in household chores, which may affect their ability to psychologically adapt to the situation. (Raveis et al., 1999; Van

Eerdewegh, Clayton, & Van Eerdewegh, 1985). Furthermore, Martin and Doka (as cited in Lawrence et al., 2005) postulate that males are socialized to keep their emotions and feelings to themselves, while females are much more open about the way they feel, which may be a reason why girls demonstrate more depressive symptoms than boys.

Anxiety disorders are also common following the death of a parent (Jacobs et al., 1990). 44% of bereaved children experienced some form of anxiety disorder in the year following the death of their parent (Jacobs et al., 1990). Older children reported lower levels of anxiety than younger children, mostly because older children are more developmentally advanced and more mature than younger children, therefore they are able to cope better with the changes within the family after the death (Raveis et al., 1999). Silverman and Worden (1992) found that 61% of children aged 6-17 in their sample reported some kind of illness following the death of their parent. These children were mainly younger, had lost a mother, and were worried about their surviving parent's safety.

There are a variety of factors that contribute to the reduction of depressive and anxiety symptoms. Some of these include the age and gender of the child, therapeutic intervention (Finn, 2003; Tonkins & Lambert, 1996), communication and support from the surviving parent, as well as a supportive social network (LaFreniere & Cain; 2015, Raveis et al., 1999; Koblenz, 2015; Hogan & DeSantis, 1994).

#### The Role of Communication and Support after Parental Death

The post-death family environment can determine how well a child will adapt and adjust to parental death (Koblenz, 2015; Hope & Hodge, 2006). Children and adolescents need to feel supported and taken care of by their surviving parent after the death of their

parent. A stable environment, a similar routine to the one before the parent died (LaFreniere & Cain, 2015), and open communication and support from the surviving parent can really allow the child to grieve in a healthy way (Bugge et al., 2014; Saldinger, Porterfield, and Cain, 2004).

**Surviving parent.** Family communication and support are factors that are extremely beneficial and valuable to children and adolescents who are grieving the loss of a parent (Koblenz, 2015). More specifically, the surviving parent's adjustment to the death of a spouse plays an important role in the children's ability to adapt to the death of a parent (Bugge et al., 2014). The surviving parent's capability to emotionally support their child as well as to provide for their physical needs, are crucial for the child's well-being in this adjustment period (Gray, 1987). Participants from Koblenz's (2015) study reported the benefit of their surviving parent's emotional support and openness to talking about their deceased parent. Hope and Hodge (2006) found similar results in their indepth qualitative study with a group of professional social workers that had extensive experience working with parentally bereaved children. The participants in their study agreed that it was crucial for the surviving parent to adjust positively to the death, in order for the child to adjust well.

It is imperative for the surviving parent to maintain a healthy balance between their own mourning and grieving with their child (Hope & Hodge, 2006). Parents must find a way to be emotionally available for their child while dealing with the loss of their spouse at the same time. It is therefore essential for the parent to find his/her own support system in order to do so (Hope & Hodge, 2006). A more recent study also examined the influence of the post-death family environment on five-year-old grieving children (Bugge

et al., 2014). The authors emphasized the role of the parent in helping their child grieve by providing support, comfort, communication, and security for their children. The task of parenting grieving children is not always an easy one as parents are also grieving for the loss of their spouse. They must become "grieving role models" to allow their children to grieve as well (Hope & Hodge, 2006). This task of parenting during grief also involves "an intricately holistic balance between shielding and including, between informing and frightening, and between creating a new life while cherishing the old" (Bugge et al., 2014, p. 42).

Furthermore, family communication about the parent's death has also been shown to have a positive effect on grieving children. Sharing feelings and talking about the deceased parent allows the child to process his/her grief in a healthier manner and thus adapt more successfully to the loss (Saldinger et al., 2004). Children who are able to openly communicate with their surviving parent about the deceased parent and about their sorrow surrounding the death have a lower risk of developing depression in adulthood (Saler & Skolnick, 1992). Saldinger and colleagues (2004) compiled a list of nine positive parenting tasks specific to helping their school-aged grieving children. For example, they emphasize the importance of communicating about feelings and information about the death of the parent, as well as maintaining a stable environment for their children. Furthermore, studies show the benefits of having parents facilitate discussions and reminiscence about the deceased parent for both adolescents and schoolage children (Saldinger et al., 2004; Biank & Werner-Lin, 2001). Such discussions allow the parentally bereaved children to take part in expressing their grief and in holding positive memories of their deceased parent.

**Siblings.** The post-death family environment is not only comprised of the surviving parent, but may also include siblings. Although research has shown the utmost importance of the surviving parent's support, research pertaining to sibling relationships after the death of a parent has also shown the benefit of being able to share this experience with a sibling (Hurd, 2002).

Research on parentally bereaved sibling relationships has been contradicting, with some studies showing the benefit of having a sibling to share this tragic experience with (Hurd, 2002; Mack, 2004), and others showing the burden of having a sibling after the death of a parent (Scharlack & Friedriksen, 1993; Connidis, 1992). When the death of a parent occurs in childhood, the effect on siblings can be complicated as some sibling relationships will experience positive outcomes while others will experience negative ones. The responses to the death of a parent vary greatly among siblings (Ross & Milgram, 1982).

According to Parsons (1943), a family unit can be placed in an inner circle and an outer circle. Family members who are very close will belong in the inner circle, while those who do not have a close relationship will remain in the outer circle. Siblings are often in the inner circle in their early years of life, but in their later years many siblings will move toward the outer circle. However, when an event such as the death of a parent occurs, many siblings will move back into the inner circle in order to fill the space the deceased member held (Parsons, 1943). Bank and Kahn (as cited in Mack, 2004) found that when the death of the parent occurred in childhood, siblings permanently stayed in the inner circle due to their shared experience of the death of their parent, making them much closer and less likely to move to the outer circle later in life.

Hurd (2002) also found that siblings can be a very strong source of support, especially when the surviving parent is too preoccupied with his/her own grief. Siblings are able to assist each other in order to grieve in a healthy way and avoid depression (Hurd, 2002). Even very young siblings can contribute to healthy mourning with their humor and innocence (Hurd, 2002). However, support from an adult is fundamental, preferably from the surviving parent, as children need this type of help and reassurance when dealing with grief (Hurd, 2002).

Parental death may result in siblings becoming closer and strengthening their sibling bonds (Scharlach & Friedrikson, 1993), however, the death may also create distance between the siblings, especially if the kin-keeper in the family has deceased (Scharlack & Friedriksen, 1993; Connidis, 1992). The kin-keeper, most often the mother (Mack, 2004), holds the family together; she is the one who keeps every member close and organizes family events and holidays. Therefore, according to Matthews (as cited in Fuller-Thomson, 2000), if the kin-keeper in the family dies, it may actually create distance between the surviving family members, especially between siblings, because they no longer have that parent to keep them close. Moreover, if none of the children take on the kin-keeper's role after the death, this may result in more conflict within the family (Gold, 1996).

**Extended Relatives.** The immediate family such as the surviving parent and siblings are significant sources of support, however, extended family members are important as well and may also provide a good support system for bereaved children and adolescents. Relatives such as grandparents, cousins, aunts, and uncles, for example, may not only provide support but also provide an outlet for the child, in order to get their

minds off the death of their parent (Greeff & Human, 2004; Eppler, 2008).

Support from outside the home when parents are unavailable can be very beneficial for grieving children (LaFreniere & Cain, 2015). In Greeff and Human's (2004) study, their participants indicated that their extended relatives were important figures after the death of their parent as they made it easier for the bereaved to cope with the loss of their parent. Their extended family's support included "practical assistance, companionship, and a sense of security and solidarity, which can assist the family to adjust to the loss" (Greeff & Human, 2004, p. 37).

Eppler (2008) also found that grandparents as well as other extended relatives such as aunts and uncles were supportive for the child. The majority of the participants reported that their extended family members remained very present in their lives after the death of their parent (Eppler, 2008). Some children stayed with grandparents after the death, while others had extended relatives such as uncles take care of their family after the loss. Other children reported having a very close relationship with their cousins and engaged in many pleasant activities with them (Eppler, 2008).

Walsh and McGoldrick (2004) explain that the availability of supportive family networks alleviates the family loss experience. Families who lack a supportive extended network are not able to cope as well with the death of their loved one. The support of a family can play a valuable role in the face of crisis (Walsh & McGoldrick, 2004).

In addition to support and communication from the surviving parent, siblings, and relatives, what other sources of support have been found to be helpful to children, adolescents, and young adults grieving the loss of a parent? External sources of support, those that lie outside of the immediate family circle, can be especially important in

families where the surviving parent is emotionally or physically unavailable (LaFreniere & Cain, 2015).

**Peer Support.** A supportive social network such as siblings, teachers, and friends, is very effective in helping the child grieve (Silverman & Worden, 1992). Children tend to spend more time with their friends and peers after the death of their parent. Children, adolescents and young adults are involved with other peers and friends on a daily basis, therefore these relationships provide opportunities for grieving children to find support in their peers (LaFreniere & Cain, 2015). Adolescents with good quality peer and romantic relationships also reported fewer depressive symptoms (Schoenfelder, Sandler, Wolchik, & MacKinnon, 2011). For some adolescents, peers were the most helpful source of emotional support after the loss of their parent. Time spent with their friends allowed them to feel normal and less isolated (Gray, 1989).

According to Dopp and Cain (as cited in LaFreniere & Cain, 2015), there are three ways for peers to provide support that children find most helpful: allowing the child to feel normal, having discussions about the death and emotions regarding the death, as well as knowing that other children have had similar experiences with death. Participants in Koblenz's (2015) study stated that other mourning children were the most helpful source of support, as they were able to relate to each other. Grief camps have been found to be a great resource for children and adolescents because they are able to spend time with other bereaved children (McClatchey & Wimmer, 2012). Being able to share their feelings with other children who had similar experiences was very helpful as it allowed children to feel more understood and less alone in their grief (McClatchey & Wimmer, 2012).

**Professional Support.** A supportive social network not only includes peers, but may also consist of professional support from psychologists and therapists, individual and group therapy. Individual and group therapy have both shown to be helpful for grieving children at different times in their lives following the death of the parent (Finn, 2003; Koblenz, 2015). Therapy has been found to provide a safe space for children to talk about their grief and about their deceased parent (Koblenz, 2015).

Individual and group therapy for children who are grieving the loss of a parent have shown to reduce anxious and depressive symptoms (Koblenz, 2015). Group therapy is often used for grieving children and adolescents (Finn, 2003); those who attended group therapy felt more supported than those who did not attend group therapy (Koblenz, 2015; Gray, 1989). In fact, children and adolescents respond much better to group therapy rather than individual therapy, as they feel less stigmatized when in a group (Koblenz, 2015). Joining in activities with other bereaved children helped normalize their experience of losing a parent (Koblenz, 2015).

Individual therapy was found to be beneficial later in life, rather than immediately following the death (Koblenz, 2015). Often, a child is looking to be distracted immediately after the death of his/her parent, and therefore, having to talk about the death for a specific amount of time may be extremely difficult for the child (Koblenz, 2015). However, individual therapy "facilitates repairing the relationship that was ruptured by the death" (Koblenz, 2015, p. 221) and thus allows the bereaved to really delve into an in-depth understanding of his or her loss.

Support groups such as grief camps have also proven to be a significant help as they allow children to express their feelings about their grief, as well as gain knowledge

about grief through activities, rituals, and counseling sessions (McClatchey & Wimmer, 2012). Trained mental health professionals and counselors at camp allowed the children attending the camp to express their feelings and emotions in a safe manner, as well as provided them with specific techniques to help cope with grief (McClatchey & Wimmer, 2012).

Group and family support programs can help families work through their grief and provide knowledge to children about illness, death, and bereavement in order for them to fully understand the life-long process of grief (Biank & Werner-Lin, 2011). Furthermore, bereavement counseling can also have a positive impact on grieving children because it gives them an opportunity to openly express their feelings and work through their emotions (Hope & Hodge, 2006).

# Long-Term Effects on Children Following Parental Death

In addition to the short-effects, there are long-term effects that children may deal with after the death of a parent. A large portion of the research on death and bereavement studies the outcomes of communication and support from family members (Greeff & Human, 2004; Hope & Hodge, 2006; Bugge et al., 2014; Saldinger et al., 2004) and extended family and friends (Eppler, 2008; Greeff & Human, 2004; Silverman & Worden, 1992; LaFreniere & Cain, 2015), the circumstances of death (Saldinger et al., 1999; Cerel et al., 2000), and how the death of a parent affects children and adolescents emotionally and psychologically (Raveis et al., 1999; Silverman & Worden, 1992).

**Milestone events.** Very little research has been conducted on the impact of specific life events such as graduation, significant romantic relationships, marriage, or becoming a parent, on parentally bereaved children and adolescents. However, these

milestone events may in fact have a substantial impact on parentally bereaved young adults (Biank & Werner-Lin, 2011; Raveis et al., 1999).

Milestone events and transitions may trigger a grief response in those who have lost a parent. For example, entering high school, applying for college, or experiencing a first romantic relationship are events that may be difficult for a child who no longer has one of their parents (Biank & Werner-Lin, 2011). Other milestone events such as graduating from college and getting married may regenerate feelings of grief as well (Raveis et al., 1999). It would be valuable to study whether or not these significant events can trigger a grief response in the bereaved, and how this may affect those who have lost a parent.

Few qualitative studies (Koblenz, 2015; Cait, 2005) have allowed young adults to reflect on the loss of their parent several years after the death. In addition, few have enabled young adults to reflect on how their relationships helped them grieve and how these relationships changed over the years. Relationships include their surviving parent, siblings, extended relatives, and peers. I am particularly interested in whether siblings are a valuable source of support following the death of a parent in childhood or adolescence, as research on parentally bereaved siblings has shown to be complex and has not often been studied using in-depth personal interviews.

#### **Current Study**

The current study aims to understand the effects of parental loss and how young adults continue to cope with the death of their parent experienced in their teenage years. More specifically, it examines the relationships young adults have with their surviving parent, siblings, and extended network and relatives, and how these relationships have

contributed to their grief and coping and how they have changed over the years after the loss of the parent.

# **Theoretical Framework**

The Double ABC-X model will be used as the guiding theoretical framework to explore the reflections of young adults on the loss of their parent in adolescence.

Family Stress Theory and the ABC-X Model were originally developed by Hill (1958), and later expanded by McCubbin and Patterson (1983) and Boss (2002). The original model focuses on a family's reaction to a particular event, their perceptions of the event, and their ability to adapt to the situation. Hill (1958) proposed that families are groups of "interacting personalities, intricately organized internally into positions, norms, and roles" (p. 178). Hill's (1958) model postulates that there is a crisis-provoking event (A Factor). This is a stressor event that families have little to no preparation for, therefore it becomes a potential threat for crisis. A stressor is not necessarily a traumatic event, however, the stressor event creates a change in family dynamics and has a potential to destabilize the family. The stressor event then interacts with the family's availability and use of resources (B Factor) to deal with the crisis. Boss (2002) described the resources a family should have access to in order to cope well and adjust to the stressor event. A family must be supportive of its family members, must meet each other's physical and emotional needs, agree on its role structure, and move together towards the same goals (Boss, 2002).

The family's ability to cope with the stressor also depends on the family's definition of the event (C Factor). This is the way a family interprets and perceives the event they are faced with. The perception of the event will have an impact on the family's

ability to adapt to the situation at hand. Factors A, B, and C all play a role in whether or not a family will fall into crisis after being exposed to the stressor event. Depending on the availability of resources and the family's perception of the event, some families will cope better than others (Boss, 2002).

Hill's (1958) ABC-X model was subsequently refined by McCubbin and Patterson (1983). McCubbin and Patterson's (1983) Double ABC-X model includes four components that focus on family adaptation post-crisis. Families often have to deal with a pile-up of stressors after a stressor event occurs. This is referred to as the pile up of demands (aA factor) in the Double ABC-X model. McCubbin and Patterson (1983) identified five general types of stressors a family may encounter in a crisis: (a) the initial stressor and its hardships-- the difficulties families face after the initial stressor has occurred, such as a divorce or the addition of a new family member. (b) Normative transitions--the additional stressors/transitions a family will face alongside the hardships of dealing with the initial stressor. (c) Prior strains--potentially unresolved distresses from previous stressors or transitions a family went through, prior to the crisis they are currently faced with. (d) The consequences of family efforts to cope--these are the strains that may arise from attempting to cope with the crisis. For example, a father obtains a second job in order to improve his family's financial situation, however this causes more stress and tension with his wife as he is rarely home. (e) ambiguity, both interfamily and social--the ambiguity a stressor creates, within the family and in the community. For example, a divorce may create ambiguity within the family structure as the parents are now separated, but are still a mother and father to their children.

In a crisis, families have new and existing resources (bB factor). Resources allow

families to meet their needs and demands following a crisis. McCubbin and Patterson (1983) identified three kinds of resources: (a) family members' personal resources-money, education, health, personality characteristics, and self-esteem. (b) The family system's internal resources--the family's integrations and adaptability to the situation. (c) Social support--support from social networks such as extended relatives and the community, emotional support, and esteem support.

Families give new meaning to their situation post-crisis and the way they perceive the crisis, will affect how they adapt to the situation (cC Factor). A family's ability to give their situation a new purpose, meaning, and value, will allow the family to see the situation more clearly and thus manage it more effectively. The family will also feel less emotionally burdened by the situation and will encourage the family to support each other socially and emotionally (McCubbin & Patterson, 1983).

The following component of the Double ABC-X Model is a family's coping strategies to adjust to the crisis. A family may use three different coping strategies to adjust to the loss of a family member: "avoidance, elimination, and assimilation" (McCubbin & Patterson, 1983, p. 21). These strategies may be used alone or in combination. Avoidance is when family members try to deny or ignore the stressor. Elimination is a family's effort to remove the stressor or change the meaning of the stressor. Assimilation is the family's acceptance of the stressor (McCubbin & Patterson, 1983).

The final phase of the Double ABC-X model is adjustment. This is the outcome of a family after the crisis based on the multiple factors (A, B, C) that interacted with one another. The adaptation phase is where families make changes to their existing family

structure in order to adapt well to the crisis. This restructuration may include modifying roles, rules, goals and patterns of interaction (Mccubbin & Patterson, 1983).

#### Methods

Qualitative research is often used to understand how people experience particular events, how they interpret those experiences, and what meaning they attribute to their experiences (Merriam & Tisdell, 2016). Instead of focusing on numbers and percentages as quantitative studies do, qualitative work uses words and focuses more on understanding the experiences (Merriam & Tisdell, 2016). The purpose of this study was to gain an in-depth understanding of the reflections of young adults on their experiences of parental loss in adolescence. Considering the nature of the research being to understand the experiences of these young adults, a qualitative approach was the most appropriate method to use.

# **Phenomenological Design**

This study uses a phenomenological qualitative design. Phenomenology is often used to study emotional and powerful human experiences (Merriam & Tisdell, 2016). Phenomenology focuses on "the experience itself and how experiencing something is transformed into consciousness" (Merriam & Tisdell, 2016, p. 26). This qualitative design provides an in-depth understanding of the lived experiences of people and attempts to understand how people experience a particular event through their own perspectives and looks at what they have in common (Creswell, 2013; Johnson & Christensen, 2004). People's experiences are bracketed, analyzed, and compared to understand the essences of the particular phenomenon studied (Merriam & Tisdell, 2016). In this case, the phenomenon being studied is the death of a parent.

The phenomenological procedure involves collecting data from several persons who have experienced a similar phenomenon through interviews and by asking openended questions. The researcher then analyzes the data by choosing specific statements and quotes from the participants and searches for patterns across the interviews; this is called *horizontalization* (Merriam & Tisdell, 2016). It is the process of treating all the data with equal value and weight, and then organizing it into themes. The researcher must then view the data from different perspectives and angles (Merriam & Tisdell, 2016), and combine the textural and structural descriptions to convey an overall essence of the experience (Creswell, 2013).

#### **Establishing trustworthiness**

Trustworthiness refers to the extent to which we can trust the results of the findings in a particular study. Lincoln and Guba (as cited in Merriam & Tisdell, 2016) named five concepts in order to establish trustworthiness: credibility, transferability, dependability, and confirmability (Merriam & Tisdell, 2016).

Credibility, also known as internal validity, questions whether the research findings match reality. Dependability is the extent to which the results of a study make sense to outsiders and whether "the results are consistent with the data collected" (Merriam & Tisdell, 2016, p. 251). In other words, are the results dependable and consistent (Merriam & Tisdell, 2016). The most common method to ensure credibility and dependability is triangulation. Triangulation uses multiple methods to ensure credibility such as several investigators, theories, methods, and data. In this study, multiple methods were employed, such as research in the literature, interviews, and observations.

Transferability, also known as external validity, is whether the findings from one study can be used in other situations. Are we able to generalize the results from the study to the broader population? In order to obtain transferability, one must first obtain credibility, as we cannot generalize a study if the research findings do not match reality. Lincoln and Guba (as cited in Merriam & Tisdell, 2016, p. 298) established that the investigator of the study must "provide sufficient descriptive data to make transferability possible". A common strategy of transferability is the use of rich and thick description. In the current study, I wrote very descriptive and detailed notes of the setting, participants, and the findings of the study in the form of field notes, documents, and quotes from the participants.

Confirmability refers to the qualitative researcher's ability to remain objective (Shenton, 2004). The researcher must ensure that his findings are based on the participants' responses and experiences, rather than the researcher's own biases and preferences (Shenton, 2004). Triangulation is an effective method to reduce the possibility of bias. It is also crucial for the investigator to report all reasoning behind decisions made as well as explanations for favoring certain approaches over others (Shenton, 2004). In the current study, explanations were given for all approaches taken and I remained objective at all times and only reported exactly what my participants responded during the interviews.

#### Procedure

**Recruitment**. After IRB approval was obtained, parentally bereaved participants between the ages of 18 and 34 years were recruited through personal connections and by using snowball sampling. Snowball sampling requires the interviewer to find a few key

participants, and after interviewing them, asking them if they can refer the interviewer to anyone else who would fit the criteria (Merriam & Tisdell, 2016). The goal is to get as many participants as possible through these referrals. Flyers were distributed (see Appendix D) at the *Psychological Services* at Montclair State University and a grief organization called Good Grief was contacted, however no participants were recruited through these means. Participants were mainly recruited through personal connections and some through snowball sampling. Inclusion criteria required that participants were between the ages of 18 and 30, lost a parent at least two years ago and after the age of eight. The particular age range was chosen to ensure that several years had passed since the death of the parent; to fully allow the participants to reflect back on their loss. Participants over the age of 30 may have had trouble remembering their adolescent loss if too many years had passed since. Making sure that two years had passed since the death ensured that the event was not too fresh in the participants' memories and thus avoided potential distress during the interview. Interviewing participants who lost their parent after the age eight was necessary as they may have been too young to remember their parent clearly before that age. Two participants who were older than the age of 30 were given an opportunity to be interviewed as well. They volunteered their time to interview for the study, therefore the primary author did not want to turn them down.

Interested participants then partook in one face-to-face semi-structured interview that took approximately 30-60 minutes. Prior to the interviews, participants were asked to fill out a Consent Form (see Appendix C) and a Demographic Form (see Appendix A). The Demographic Form included questions about age, education, gender of the deceased parent, age of their parent at time of death, participant's age at the time of their parent's

death, participant's age today, number of siblings, and the age of their siblings. The Consent Form described the interview process, their right to withdraw from the study at any time, the researchers' names and contact information, as well as the names and phone numbers of free counseling services available to them.

**Participants**. Eleven participants who fit the recruitment criteria were interviewed for this study. Eight of the participants were recruited in Montreal, Canada, and three in Fort Lee, New Jersey. Of the eleven participants, five were female and six were males, with a mean age of 27 and a range from 18 to 34. Seven experienced a loss of a mother and five lost their father. The average age of the participants at the time of death was 17 and an average of eight years had passed since the death. All of the participants were either currently in college or had already completed a Bachelor's degree. Ten of the participants had one or more siblings, and one participant was the only child. Four of the participants lost a parent as a result of unexpected death, due to a heart attack or an aneurysm. For the eight other participants, their parent's death was expected, due to terminal illness such as cancer or a lung disease. The occupation for participants varied: seven were students with part time jobs, one participant was an elementary teacher, and another participant was a sales director.

**Interviews.** Most of the interviews took place in the author's home in Montreal or in the participants' homes. These locations were chosen by the participants to make sure they would feel comfortable during the interview. The participants were given the option of using their first names or pseudo names. All of the participants felt comfortable keeping their first name, however, pseudo names were used when presenting participants' quotes and stories in this study.

A semi-structured format was used for the interviews, which signifies that there is part of the interview that is structured and a part that is unstructured (Merriam & Tisdell, 2016). This type of interview is used when the researcher is seeking both specific information from the participants and interested in letting the participants share new and unique information (Merriam & Tisdell, 2016). This interview was guided by six main questions, with several follow up questions for each, for a total of 14 questions (see Appendix B). The order of the questions and the wording could be changed at the time of the interview. This gave the interviewer the freedom to ask new questions if needed and allowed the interviewee to bring up new ideas and topics (Merriam & Tisdell, 2016). The questions mainly pertained to the participant's relationships with family members before and after the death of their parent, support from their immediate family, extended family, peers and others in their social network. Questions about daily changes after their parent's death were asked, as well as the effect of milestone events, and how the death has changed them overall.

Probes are often used in semi-structured interviews to follow up on a question that has already been asked (Merriam & Tisdell, 2016). Probes usually come in the form of asking for more details, for clarification and for examples (Merriam & Tisdell, 2016). Throughout the interviews, probes were asked to the participants whenever the interviewer felt they were onto something significant or whenever more clarification was needed. This skill was refined the more interviews were conducted.

The interviews were audiotaped using a cellular device to allow the author to go back and listen to each one carefully and then they were transcribed verbatim in order to analyze them. All interview recordings were uploaded to a personal computer and deleted

off of the cellular device. In order to maintain confidentiality, only first names were used during the interviews. Following the interviews, field notes were written down to describe the participants and overall observations regarding the interview sessions.

**Building rapport.** Conducting in-depth interviews requires the researcher to rapidly build positive rapport with the participants, as time does not permit for rapport to be developed gradually. Building rapport is an essential part of the interview process, as the interviewee must trust and respect the researcher in order to comfortably share their personal experiences. The interview must take place in a safe and comfortable environment for the participant (DiCicco-Bloom & Crabtree, 2006). All participants in this study chose the location for the interview to take place. Before each interview, the author took the time to talk to the participants to briefly tell them about herself and her research interests. This process was valuable in order to make the participants feel more at ease. The demographic questions as well as asking general questions about education and occupation was non-threatening and allowed for building trust, respect, and rapport.

#### **Data Analysis**

Data analysis was guided by the Double ABC-X model (McCubbin & Patterson, 1983). Following transcription, each transcript was read several times, making notes in the margins and commenting on the data; this process was called *coding*. Coding signifies that a specific description is assigned to the data so that the author can easily recuperate particular pieces of the data (Merriam & Tisdell, 2016). Coding designations can be anything such as words, letters, numbers, phrases, or colors (Merriam & Tisdell, 2016). In this analysis, words and phrases were used. A separate table was created in order to keep track of the participants' answers to the potential themes. The goal was for the codes

to symbolically summarize and capture a portion of the data (Merriam & Tisdell, 2016). Each interview was compared to the previous one. Notes, ideas, and tentative patterns were compared and emerging themes were noted. The goal was to create categories that captured any recurring patterns and themes throughout the data (Merriam & Tisdell, 2016). Many categories were generated and the author had to take a step back and look at the big picture in order to review the study's purpose and goal. The categories were then narrowed and some of them were renamed to precisely reflect what was in the data (Merriam & Tisdell, 2016).

The beginning of the analysis process was inductive, as the author attempted to search for categories and themes using pieces from the data (Merriam & Tisdell, 2016). Near the end of the analysis, a deductive mode was used and a sense of saturation was reached, which is when the author no longer found anything new (Merriam & Tisdell, 2016).

#### Findings

While exploring the transcribed data, four major themes emerged from the participants' reflections on the death of their parent. 1) *Pileup of stressors aggravate grieving*. Most of the participants reflected on the stressors that occurred after the death of their parent. Some of these changes and stressors included increased responsibilities, additional chores, financial issues, relocation, and strained relationships with family members. 2) *Benefits of social support*. The participants also expressed the importance of having a strong support system after the death of their parent. A support system may include people such as surviving parent, siblings, friends, peers, and extended relatives. 3) *Coping strategies used by the participants*. All of the participants had their own way of

coping with the death. Some needed friends as a distraction, others needed isolation, and some buried themselves in their schoolwork. 4) *Adaptation to the loss of a parent: personal growth/maturation*. All participants have adapted well to the loss of their parent over the years. They explained that they gained maturity and strength through this experience, and developed an alternative perspective on life.

McCubbin and Patterson's (1983) Double ABC-X model was used in order to conceptualize and present the four themes that emerged during the analysis (*Figure 1*). Although the original ABC-X model was used to understand how families cope as a unit, the model in this study will be used to focus on the individual participants' perceptions of and experiences with coping. Participants' quotes were used to illustrate and provide support for the findings.

#### Stressor event (a Factor)

The stressor event for each participant was the death of his or her parent. Seven of the participants experienced the expected death of their parent due to a long-term illness. Six deaths were due to cancer and one to a lung disease. Four of the participants experienced the sudden and unexpected death of their parent. One parent died of an aortic aneurysm and three parents died of a heart attack. According to Family Stress Theory, the stressor event does not cause stress, but constitutes an occurrence that provokes change or disrupts family dynamics (Boss, 2002). In the case of this study, the stressor event was traumatic, and life changing, as each participant lost a parent at a young age and each family lost an important member. According to Boss (2002), this event can be categorized as catastrophic, situational and unexpected as this is an event that was not foreseen. All participants were affected by the loss of their parent and each of their

family's dynamics was also affected by the loss of a family member.

#### Pileup of Stressors Aggravate Grieving (aA Pile Up)

Once a family experiences a stressor event, such as the death of a parent, it is common for these families to deal with multiple stressors following the death (McCubbin & Patterson, 1983). This is referred to as the pile up of demands (aA factor) in the Double ABC-X model. McCubbin and Patterson (1983) identified five general types of stressors a family may encounter in a crisis: "(a) the initial stressor and its hardships; (b) normative transitions; (c) prior strains; (d) the consequences of family's efforts to cope; and (e) ambiguity, both interfamily and social" (p.14).

Following the death of the parent, each participant and their family members were confronted with many daily changes and a pile up of stressors that made grieving more difficult. These changes and stressors are quite common among families who experience the death of a parent and spouse (Silverman & Worden, 1992; LaFreniere & Cain, 2015). Some of these stressors included increased responsibilities, extra chores, financial issues, relocation, as well as strained relationships with siblings and a surviving parent. The participants who experienced fewer changes and stressors said that they were able to adapt quicker and more easily to the death of their parent. The less the participant was preoccupied with sudden changes in routine, finances, responsibility, chores, and strained relationships, it appeared that it was easier for them to focus solely on grieving.

**Financial issues.** Liam, who is 22 years old, lost his father at the age of 18, and explained that he was lucky to be able to grieve for his father's death, rather than focus on a pileup of stressors. He felt fortunate that his family did not have any financial struggles after the loss of his father.

We were really blessed with [not having to deal with financial issues] in the sense [that] we were really able to, not focus on grievance, but at least know like hey like you're still gonna go to school, everything is gonna be paid, we still have lots of money, don't worry. So I think that helped us.

Many of the participants who were fortunate to experience few changes and stressors, felt similarly to this participant.

Some participants had to deal with the burden of financial issues. Molly, currently 25, lost her father at the age of 18, and experienced many daily changes after he died. She shared, "I also did gain a lot of responsibilities around the household, because my mom was overwhelmed and had to worry about the finances." Her mother was not available to take on house chores, as she was preoccupied with their strained financial issues. Molly had to take on many chores and responsibilities around the house, especially since her brother was a few years younger than her.

Another participant, Samar, who is 21, lost his father when he was 20, and he and his mother also had to deal with financial issues. This created a lot of pressure and tension in the household and strained his relationship with his mother. He explains:

We had to get rid of the house and then we had to move to a new place, so it was all stress on her and on me. There's a lot more responsibility in terms of financial

issues because there's nobody working in the house so it's pretty hard.

Along with coping for the death of his father, Samar had to deal with many extra stressors such as relocation and financial issues.

**Increased responsibility**. The pile-up of stressors made grieving and coping with the death much more difficult for many of the participants, even if some did not have to

deal with financial issues. The stress from losing a parent is severe, and being burdened with additional stressors can make adaptation to the loss very difficult. Some participants were burdened with the responsibility of completing house chores such as cooking, grocery shopping, laundry, and cleaning. Thirty-year-old Daniel, who lost his mother at the age of 16, experienced several of these daily changes:

[I had to] take on a lot more responsibility, there wasn't anybody to do the dishes or do my laundry, clean or fold and put my clothes away and stuff like that. So there was definitely a lot of household chores like doing garbage, even grocery shopping.

Daniel's father was not supportive after the death of his mother and did not take on many chores around the house, thus Daniel was forced to assume many responsibilities as a teenager. Similarly, Sofia, currently 20, lost her mother when she was 15, had to assume more responsibilities after her mother passed away. She shared, "the fridge was always empty, [my father] was never there. I would always have to do the groceries and I would spend a lot more money, because I would spend for my sister also."

Strained relationship with surviving parent. Several of the participants expressed that their relationship with their surviving parent became very strained after the death. Several did not have a close relationship with their surviving parent prior to the death, and the passing away of their parent only stressed the relationship even more. These participants felt that their surviving parent was not a supportive or helpful resource to help them cope with the death. Juliette, 34 years old, who lost her father when she was 26, stated:

My mom was depressive and she want to suicide, which she tried a couple of

times in her life. So, the first year we were always afraid about her, we were always around her, so the relationship changed because I was more responsible of her. The three first years we were not able to grieve because we were taking care of her.

According to Juliette, her relationship with her mother was very toxic and broken before her father passed away, and it did not amend itself after he passed. After her father's passing, she had the immense responsibility of ensuring her mother's safety and wellbeing, as her mother was depressive and suicidal. This burden did not allow Juliet to focus her energy on grieving for the death of her father for the first three years after he passed. Eight years later, she is still grieving and has not been able to fully cope with the loss.

Losing a parent who played a significant role in the household and whom the family depended on emotionally and financially has a great influence on the family's adaptation to the loss (Murray, 2015). Those participants who lost the parent who was responsible for house chores experienced a greater change in the amount of chores they had to complete. Some families worked together to make it work, in order to alleviate the burden of these chores and responsibilities, others did not have much help from their surviving parent. Families who lost their breadwinner also had a much more difficult time grieving, as this added a lot of stress and pressure on the family. The financial stressor also caused irritation between family members, which made it hard for them to depend on each other and stay unified as a family. The pile up of stressors aggravates the post death environment as families are already dealing with grief, sadness and depression due to the loss.

#### **Benefit of Social Support (bB Resources)**

Resources allow families to meet their needs and demands following a crisis. McCubbin and Patterson (1983) identified three kinds of resources: "(a) family members' personal resources; (b) the family system's internal resources; and (c) social support" (p.16). Resources may be tangible, such as money or health, or intangible such as friendship and self-esteem (Murray, 2015). The data showed that participants with a strong support system had the ability to cope in a healthier manner. A majority of the participants needed support either from their immediate family members, friends, or extended relatives. If support from siblings and the surviving parent was not available, the participants were then able to depend on their extended relatives or friends.

A majority of the participants felt they could depend on either their sibling(s) or their surviving parent for comfort and support. If their relationship with their parent was strained, as was the case for several participants, then they were usually able to find support from their sibling(s). After some time following the death, many of them became closer to their sibling and/or surviving parent. The tragic experience allowed them to create a closer bond, however, time was needed before the family was able to recover.

Siblings. It is common for siblings to become much closer and lean on each other for support after such a tragic event, especially if their surviving parent is unavailable or emotionally preoccupied (Hurd, 2002). Eighteen-year-old Emma and her sister Sofia, who is two years older, lost their mother when they were 13 and 15 respectively. Due to their small age gap, the sisters have always been close, however, a distance was created during the first few months after they lost their mother. They were both grieving differently, and were not able to remain close initially. Sofia explains: "When it happened

we were really really close and supportive, but my sister reacted in a different way than I did [...] so we kinda grew apart for a while, like a year and a half." Nevertheless, after some time, the sisters reconnected and were able to lean on each other for support, as described by Emma.

I don't think the change happened short term. It wasn't when it happened we instantly became closer, because we both dealt with mourning in different ways,

but long term we definitely got closer. Now I consider her my best friend. Emma and Sofia did not have the full support of their father in mourning, as he met someone else a year and a half after their mother passed away. Both sisters were each other's support systems and their close bond helped them get through the tragic experience.

Another participant, 32-year-old Akiko, felt similarly as her relationship with her father was very strained after her mother passed away. Her younger sister was therefore a strong source of support for her and she was someone Akiko could relate to as they shared a common experience. The two sisters lost their mother when they were 17 and 15.

[My relationship with my sister] definitely got stronger because we shared a very painful experience. So we felt like we are the only two people who actually understand what it's like to go through this kind of pain, so we have a little bit stronger bond.

Studies have shown the benefit of sharing grief experience with a sibling and having someone to be able to relate to (Hurd, 2002; Mack, 2004). As Akiko quoted, the loss of their mother created a stronger bond between them because of the unfortunate event they

shared.

Samar, the only participant who does not have any siblings, believes "it would have been better to have a sibling around, just because there would be somebody else that could relate to me." He did not have anyone else to share this experience with. It is important for children and teenagers to feel that they can relate to someone after experiencing the death of a parent. If the surviving parents are incapable of emotionally supporting their child due to their own grieving, having a sibling to share the grieving experience with provides surviving individuals with support and comfort.

**Surviving parent.** The support of the surviving parent is crucial in helping children cope with and adjust to the loss of their parent (Koblenz, 2015; Becker & Margolin, 1967). Liam, along with his two siblings, developed a strong admiration for his mother after his father passed away: "We all really admire my mom for keeping her shit together." His mother's ability to stay strong and keep the family united after their father passed made a difference in his grieving process. It allowed him to move forward and to lean on his mother whenever he needed the support. Today, he is extremely close with her: "Yea we're really really close, like partners she likes to call it." His mother's strength permitted him and his siblings to maintain a similar daily routine and maintain a certain level of normalcy. She kept the family from falling apart, and made sure her children could count on her for comfort and support. His brother, 20-year-old William, who was 16 when their father passed away, expressed a similar feeling: "She was really strong towards this period [...] she was able to hold everything together."

Another participant, 21-year-old Noah, who lost his mother when he was 15, also became very close to his father after his mother died. "What automatically happened

when she passed away is that I got really close to my father." Losing his mother naturally pushed him closer to his father, which allowed him to form a close relationship with him. His father was very supportive and tried to help Noah cope with the death of his mother.

Several participants reported that they were not able to find support from their surviving parents. This was either due to the fact that their relationship was strained prior to their parent's death, or because the death, along with other stressors, created distance and tension between them. Molly was not on speaking terms with her mother before her father passed away. They had always had a difficult relationship and the death of her father created even more distance between them.

It changed so much at different moments. Initially, well, before my dad passed away, my mom and I were not on speaking terms, so that just shows that we were really not close at the time. And then after it happened I think there was some resentment, like we had resentment towards one another in some ways and said some hurtful things to each other for at least a few years after my dad passed away.

Instead of staying united as a family and being there for one another, Molly and her mother distanced themselves even more from each other. They were incapable of communicating and finding support in each other. However, most of the participants who had a strained relationship with their parent after the death were able to recover after many years. This was due to time passing since the death, geographical distance, and maturity.

Akiko explained that her relationship with her father became very strained after her mother passed away. She was not that close to him prior to death, and it took them

almost 10 years to understand each other better and to communicate.

It didn't draw us closer, we kind of created a little bit of distance and misunderstanding or we kind of stopped communicating so much [...] we struggled for almost 10 years [...]. Now we got closer, we do understand, because my grandmother died, now he understands what it's like to lose a mother finally and he got more understanding.

Akiko and her father needed time to mend their relationship and to finally be able to start understanding each other more.

**Extended relatives and friends.** For the participants, whose surviving parent and siblings were not available or helpful, their extended relatives or friends became a source of support. When support from the immediate family is unavailable, support from extended relatives can be very beneficial for grieving children (LaFreniere & Cain, 2015). Daniel had very little support from his immediate family. His two sisters were living on their own prior to their mother passing away, and his father had a girlfriend prior to the death. Daniel's parents were still married, however he did not go into much detail about his family's situation prior to the death. Since his father spent a lot of time with his girlfriend, Daniel's aunt was the one who provided support and helped him on a regular basis.

I don't know where I would be without [my aunt], because she's by far the most important person in my life. She would get up if I missed the bus, she would take me to school, always made sure I had clothes and money.

Daniel not only received emotional support from his aunt, but also tangible support. She was the person who provided him with financial security, clothes and made sure he got to

school to receive an education. Daniel's aunt was supportive and helpful, which eased his grieving process.

Molly, who lacked support from immediate family or extended relatives, found her friends to be very helpful in coping with the death of her dad. Her brother was experiencing depression and her mother was dealing with financial issues and grieving the loss of husband. Molly therefore relied very much on her friends for support, as she was not receiving any emotional support from her mother and brother.

I had a lot of friends at the time, which was really helpful [then] and even as life has gone. A lot of my friends I can talk to about losing my father, and they will be supportive and that's great. In terms of family, my mom and I were really not able to support each other and my brother either, at that time.

Overall, all participants commented that they needed the emotional support from someone, and if immediate family members were not available, then the support usually came from friends or extended relatives. Individuals expressed the benefit of having a strong support system because they had someone to share their experience with and to relate to, allowing them to form a stronger and closer relationship. Those participants who were able to stay united with their family, who had someone to talk to, and someone to provide them with financial and emotional stability, were much more likely to cope better with the loss.

#### Family Perception of A (cC Factor)

The cC Factor in the Double ABC-X Model refers to the meaning a family gives to a stressor event. This is a family's perception of the situation or crisis they are facing and the meaning they give it. A family may define a situation as "an opportunity for

growth or believing that it is best for everyone" (McCubbin & Patterson, 1983). In the current study, the event that the participants and their families were confronted with was the death of a parent. All participants suffered from the loss of their parent and therefore it was a painful and stressful situation, one that would be difficult to assign a positive meaning to. Whether the participant lost their parent suddenly or due to a long-term illness, none felt that the death was something positive in their lives. However, not enough data was collected on the participants' perception of the death and what it meant to them to lose their parent at such a young age. The cC factor section of the model was therefore not relevant to this study.

#### **Coping Strategies Used by the Participants**

According to the Double ABC-X Model, a family may use three different coping strategies to adjust to the loss of a family member: "avoidance, elimination, and assimilation" (McCubbin & Patterson, 1983, p.21). These strategies may be used alone or in combination. Avoidance is when family members try to deny or ignore the stressor. Elimination is a family's effort to remove the stressor or change the meaning of the stressor. Assimilation is the family's acceptance of the stressor (McCubbin & Patterson, 1983). After the loss of a parent, people develop certain coping mechanisms to help them grieve. Participants did not discuss in detail the coping strategies they used as a family, however, most of the participants developed their own as individuals. The three main coping mechanisms described by the participants were: working hard in school, using friends as a distraction, and the need for isolation.

Hard work. For some participants, the death of their parent pushed them to work hard in school and, as a result, succeed in their academics. For many of the participants,

they were in a period of their lives where their school grades were important; they were either in their midterms, in the process of taking exams to enter University, or simply were at an age where their grades were crucial for their future. They used their academics as a coping mechanism and a distraction from the loss, thus creating avoidance. Their schoolwork was something they could control and focus on rather than have to face the reality of losing their parent. Liam expressed: "when your parents die in your midterms, you already have so much shit on your mind that it helps you to just work." For Liam, focusing on his schoolwork allowed him to keep his mind off his father's death. Focusing his energy on school was an outlet and allowed him to focus his time and energy on something other than feeling the pain of his loss.

Another participant, William, buried himself in his schoolwork and worked extremely hard. He managed to ace his semester in school, however his behavior was not healthy and he recognized this. Focusing solely on his academics kept him distracted from the sad reality he was facing. "So I think one of my ways to sort of get my mind off things was just to work like a crazy psycho. I mean I've never worked so hard in that one, two years of my life."

**Isolation.** For some, they felt the need to isolate themselves from others, in order to grieve on their own. Lucas, who is 33 years old, lost his mother when he was 16, pushed most people away, and decided to cope by himself. Lucas's coping strategy was a form of assimilation. His isolation was not unhealthy, he accepted the fact that his mother was dead and he needed to cope and realize this on his own.

I was one of those who kind of put up that wall where it was like I didn't need anybody. It was about two years of just darkness where I just kind of isolated

outside, I would put up that front.

Lucas needed to be alone in order to grieve the death of his mother. He felt that he did not need the support from anyone. Although support was available to him, he chose not to take it and instead cope using spirituality and music. "I became a little more spiritual where I found relief in that, I found relief through good music, that was the way I kind of dealt with it."

Some participants found it difficult to maintain social ties with others following the loss of a parent. Noah, who isolated himself from his good friends, reflected, "What happened is that when my mom passed away, I clearly moved away from most people, like I clearly stopped being friends with certain people." Although this participant had healthy support from good friends, and was quite popular in his school, he chose to distance himself from all and to isolate himself. Emma felt similarly to Noah, as she also distanced herself from her friends:

Socially, it's inappropriate to still be sad after two years because people from the outside that haven't been through something like that don't understand [...]. I distanced myself because you don't want your friends to always see you sad and crumbled.

**Friends**. Many participants used their friends as a distraction. Their friends provided fun and activities, which allowed the participants to take their mind off the death. This is another form of avoidance as a strategy. Samar explained: "my grieving process is distraction", and when asked what he used as a distraction he replied: "just hanging out with friends, just doing things I like to do, my hobbies etc." For many of the participants, spending time with their friends or peers in leisure was a helpful coping

strategy. They did not necessarily need their friends to talk to about the death and their grieving, but more to talk about other topics, not related to the death. Akiko said: "So I didn't really expect anything, just having fun and just you know, they're [friends] being in my life is good enough, happy enough." The simple presence of friends was sufficient to keep moving forward. Children and teenagers want to feel normal and do not want to be seen as outcasts. The death of a parent sets them apart from most other students, therefore maintaining their friendships with a certain degree of normalcy is important and allows them to stay distracted.

For some participants, their friends were used as an unhealthy distraction as they were negative influences. Noah expressed: "I started being friends more with other people that were kind of used as an escape route." His new group of friends allowed him to escape his reality where his mom was no longer alive, because they were taking drugs and engaging in certain dangerous and potentially unlawful activities. Although he had the support he needed from his family and good friends, he chose to distance himself from the people that cared for him and decided to form relationships with people that allowed him to escape reality by using drugs.

#### Adaptation Following the Loss of a Parent: Personal Growth/Maturation

Family adaptation is "the outcome of a family to achieve a new balance in family functioning" (Hesamzadeh, Dalvandi, Maddah, Koshknab, & Ahmadi, 2015, p. 181). Adaptation ranges from positive adaptation to maladaptation. Each member of the bereaved family had to adjust to their new family functioning by taking on new responsibilities and new roles, and the success or failure of doing so allowed the families to either adapt well or not to the death. For this particular study, the focus was on the

participants' individual adaptation to the loss, as not much detail was given about their family's adaptation as a whole.

An average of eight years have passed since the participants lost their parent, and most reported to have adapted well. Reaching a point of adaptation to such an event takes time, and those who reflect on their childhood loss many years later are able to evaluate whether they have adapted or not. Although for some young adults in the study it was still difficult to talk about their loss, most of them learned to live with it. Positive adaptation depended on many factors; resources, coping strategies, and the pile up of stressors. All participants expressed that their loss had made them stronger, helped them gain maturity, as well as fostered a different perspective on life over the years. Most participants commented that they have developed resilience and strength despite the loss they experienced, as explained by Noah:

Suffering makes you learn a lot about life, about yourself, about others, about everything. It depends how you deal with it, but suffering makes you learn a lot, it makes you grow.

Losing a parent at a young age forces children to become more independent and thus mature faster. The participants' experience of losing their parent has made them learn a lot and made them grow as individuals.

Many participants felt that their loss pushed them into adulthood much faster compared to their peers who had not experienced a similar tragedy. Children and adolescents who lose a parent are faced with many extra stressors, such as chores and more responsibility, which forces them to gain maturity, and thus turn into an adult quite fast. They are forced to figure things out on their own depending on the support they

receive from their surviving parent. Juliette lost her life coach the day her father passed away. He was an important figure in her life that advised her and guided her in her decision-making and daily life tasks.

I became an adult the day he passed away [...] I still remember the two first years I was not able to take any decision because my father was always there to tell me what I have to do or not [...] He was my mentor on top of it. So I did stupidities [made mistakes] and I grew up and like I said, this day I became an adult, [make] my own decisions.

Sofia explained something similar, as she also felt she lost an important figure in her life, one who also advised and guided her.

It's hard because usually when you doubt, there's always your mom. There's always this support you've always had and now when you doubt you have to triple doubt because there's no one that's gonna say, oh I've been through that, I've made that mistake before.

Losing a parent in childhood is an unbearable experience that forces a child to change their perspective on life. Participants compared the loss of a parent at a young age with the loss of their childhood. Liam explained: "You kind of change your vision on life or you really try to enjoy the moment and mature." Similarly, Daniel expressed: "I've matured a lot I guess, because I was kind of thrown in the fire." The theme of maturity and growth was prevalent in every single interview. All participants felt that, retrospectively, the death of their parent changed them and allowed them to mature and grow into an adult.

#### Discussion

The purpose of this qualitative study was to explore the reflections of young adults on the experiences of parental loss in their adolescence and their coping with grief. This study aimed to research the changes that occurred immediately after the death and over the years, the impact of the participants' relationships with their family, friends, and peers, and how they coped with parental loss. Losing a parent in adolescence is not an uncommon phenomenon, and it is important to understand the repercussions of such loss on the individual and the family. Death and grief are complicated as everyone grieves differently. Based on the findings of this study, the adaptation of an individual to the loss of their parent was influenced by many factors.

Several researchers (Worden, 1996; Silverman & Worden, 1992; McClatchey & Wimmer, 2012) have found that a disruption of the daily environment after the death of a parent can extend the grieving process and make it more difficult for children. Previous studies concluded that children who lose a parent are faced with many daily changes, such as financial issues, relocation, change of schools, parental remarriage and so on (Silverman & Worden, 1992; McClatchey & Wimmer, 2012; Greeff & Human, 2004; Raveis et al., 1999; LaFreniere & Cain, 2015). Children may also have increased responsibilities and household chores (Silverman & Worden, 1992). The findings in the current study are concurrent with previous research, as many participants indicated that they had to deal with a pile-up of stressors subsequent to the death. This made grieving more difficult as the added stress did not allow them to focus solely on coping with their loss. Stressors included financial issues, increased responsibilities and chores, and strained relationships with the surviving parent. Previous studies (McClatchey &

Wimmer, 2012; Greeff & Human, 2004; Raveis et al., 1999) found that issues related to money created a large amount of stress on the surviving parent and the children, which is concurrent with the present study. Participants witnessed their parent stressing about financial issues and this, in turn, created stress for the participants themselves and tension within the household. Several participants shared having many responsibilities and chores to do around the house following the death, regardless of the gender of the parent that died, which is concurrent with previous research (Silverman & Worden, 1992). Silverman and Worden's (1992) research indicated that children dealt with more responsibilities and household chores, especially if their mother died. However, this was not necessarily true in the current study. Having to take on more responsibilities was difficult for many of the participants, regardless of whether they lost a mother or a father. For some of the participants, the increase in responsibility and household chores was a burden, as they were not used to handling such tasks before their parent died.

One of the main changes the participants in this study experienced following parental loss, was the change in family dynamics, namely a change in their relationships with their surviving parent and sibling(s). This relates to Worden's (1996) research, which states that children may be faced with a decrease in their parent's emotional availability, increase in family arguments, and changes in communication patterns. Several participants spoke about tension and communication issues within their family due the differences in their grieving and coping process. For those who experienced these changes, it took some time before they were able to reconnect with their family members. The participants felt overwhelmed by the pile-up of stressors and this created tension and

additional stress within the household. For many, the pile-up slowed down and complicated their grieving process.

A majority of the participants expressed the utmost importance of family or friends as sources of support. All participants in the study either relied on sibling(s), surviving parent, friends, or extended relatives for emotional support. This was important in helping them cope with the loss of their parent. This finding is consistent with previous studies that found the importance of support from the immediate family, extended relatives or friends a child or adolescent receives after the death of a parent (Koblenz, 2015; Hope & Hodge, 2006). Previous research also emphasizes the prominence of the surviving parent's role in the post-death family environment in particular (Koblenz, 2015; Hope & Hodge, 2006). In the current study, not all participants were able to rely on their surviving parent for emotional support as many had strained relationships prior or subsequent to the death. These strained relationships made it more difficult for some to grieve and added stress and tension to the already traumatic situation of losing a parent. For many, it took several years before their relationship with their surviving parent was mended. Others became closer with their surviving parent as this was the only parent they had left. Open communication, security, a stable environment, and support were offered to these participants by their surviving parent. This is in line with Saldinger et al.'s (2004) research on the nine positive parenting tasks in helping children grieve. Those participants who were fortunate to have the emotional support of their surviving parent expressed that being able to rely on the surviving parent was very helpful in their grieving process, which helped alleviate some of the stress and pain stemming from the death of their parent.

If the surviving parent was not emotionally available, the participants turned to their siblings, extended relatives or friends for support. Previous research on sibling relationships following the death of a parent was contradicting, with some concluding that it creates distance between the siblings (Scharlack & Friedriksen, 1993; Connidis, 1992), while others concluding that it strengthens sibling bonds (Hurd, 2002; Mack, 2004). The findings in this study were consistent with the research demonstrating the benefit of having a sibling to share the experience of losing a parent with. Ten of the participants had siblings and most expressed the value of their sibling's support in working through their grief. Those who had a good relationship with their siblings found it extremely helpful to be able to relate to someone else who shared the same experience as them. Many participants discussed the need to relate to others in general in the present study. A majority of the participants were able to count on their sibling for support, especially when the surviving parent was not emotionally available, due to his/her own difficulty coping with the loss. The present study yielded similar results to Hurd (2002) and Mack's (2004) research, as siblings were able to assist each other in healthy grieving and the experience of losing a parent strengthened their sibling bond.

Previous research concluded that children may become resilient after the loss of a parent, however their ability to become resilient depends on various factors such as communication, support from family and friends, and a stable environment (Raveis et al., 1999; Hope & Hodge, 2006; Greeff & Human, 2004; LaFreniere & Cain, 2015). All of the participants in this study stated that the traumatic experience of losing a parent contributed to their personal growth, maturity, and the development of a new perspective on life. Many expressed that the experience turned them into an adult faster. All of the

participants had some form of support system after the death, whether it was their surviving parent, siblings, friends, or extended relatives. This finding is consistent with Greeff and Human's (2004) research that found that resilience was mainly found among children with a strong support system within their immediate family or extended systems such as teachers, friends, and relatives. After such a tragic event, children and adolescents have more responsibilities to deal with and are forced to figure things out on their own, if they do not have guidance from their surviving parent. Many participants expressed that losing a parent was like losing their life coach, their guide, and thus without this person, they were forced to make decisions on their own.

This study did not explore in depth the potential gender differences in adolescents grieving for the loss of their parent. However, during the interviews, none of the men cried and two of the female participants were very emotional and cried. This shows that the men in the study were possibly more reluctant to expressing their emotions, while women were more open to displaying their true feelings.

#### Implications

Implications from this research can be beneficial for educators, family therapists, counselors, and future researchers. Research in the area of grief can aid families and practitioners in creating strategies to help deal with the pile-up of stressors that may occur after a death, as well as strategies to help individuals and families cope with the loss. Future research should explore the importance of resources and coping mechanisms in order to adapt well to the loss of a parent. For example, children and adolescents need to relate to someone after the loss of a parent. If they do not have a sibling or if they do not have a positive relationship with a sibling, participating in grief camps or group therapy

may be valuable (Koblenz, 2015; McClatchey & Wimmer, 2012). Bereaved children are also in need of emotional support from family or friends (Koblenz, 2015; Hope & Hodge, 2006). Research on those grieving the loss of a parent can encourage practitioners to create intervention strategies that focus on building supportive parent-child and sibling relationships after the loss of a parent. Practitioners must encourage families to bond and stay unified after a loss. It is important for families to stick together and work together while coping. Research on grief can help practitioners such as counselors, psychologists, and those leading grief camps to create strategies to help children and adolescents cope with the loss of a parent.

#### Limitations

The current study makes an important contribution to understanding the experience of grief in young adults, however, there are several limitations that need to be addressed. There is a selection bias, as those individuals who agreed to participate in the study may be more open to talking about their experience or had an easier time adjusting and coping with the death, and may therefore be fundamentally different from those who chose not to participate. The participants in this study lost a parent due to different causes: some to a long-term illness, others to a sudden heart attack. The differences in whether the death was sudden or anticipated may have complicated the mourning process for some, and this was not discussed in depth during the interviews. The cause of death was asked in the Demographic Form, however, none of the interview questions delved into this topic and the participants did not bring it up of their own accord in the interviews.

Another limitation to this study is that some of the participants had trouble reflecting on their relationships prior to and following the death of their parent, as they were young and several years had passed since the event. There is therefore a chance of respondent bias due to their inability to recollect situations properly, which can limit the accuracy of the data (Cresswell, 1994). Longitudinal research could benefit this area of study, however it would be more expensive and time consuming, thus not appropriate for this particular thesis.

One of the initial intentions of this study was to explore the impact of milestone events such as graduation, marriage, having children, and remarriage of the surviving parent on grieving young adults. I wanted to find out whether such major life-cycle events triggered any grief responses and how grieving young adults dealt with that. Unfortunately, very little information was gathered during the interviews on this topic. The participants in the study were too young and therefore most had not experienced many or any of those milestone events. Some participants anticipated that getting married and having children would be difficult events without their deceased parent, and some expressed that special events such as birthdays and holidays were difficult. Future research may be able to explore the impact of milestone events if they recruit participants who are older than 30 years of age and who are married and have children.

#### References

- Biank, M. N., & Werner-Lin, A. (2011). Growing up with grief: Revisiting the death of a parent over the life course. *Omega*, *63*(3). doi: 10.2190/OM.63.3.e
- Black, D. (1998). Working with the effects of traumatic bereavement by uxorcide (spouse killing) on young children's attachment behaviour. *International Journal of Psychiatry in Clinical Practice*, 2(4), 245-249.
- Boss, P. (2002). *Family stress management: A contextual approach*. United States of America: Sage Publications.
- Brown, E. J., & Goodman, R. F. (2005). Childhood traumatic grief: An exploration of the construct in children bereaved on September 11. *Journal of Clinical Child & Adolescent Psychology*, 34(2). 248-259.
- Bugge, K. E., Darbyshire, P., Rokholt, E. G., Haugstvedt, K. S., & Helseth, S. (2014). Young children's grief: parents' understanding and coping. *Death Studies*, 38(1), 36-43. Doi: 1080/07481187.2012.718037.
- Cait, C.-A. (2005). Parental death, shifting family dynamics, and female identity development. *Omega*, 51(2), 87-105.
- Cerel, J., Fristad, M. A., Weller, E. B., & Weller, R. A. (2000). Suicide-bereaved children and adolescents: A. controlled longitudinal examination. *Journal of the American Academy of Child and Adolescent Psychiatry*, 38(6), 672-679.
- Christ, G., Siegal, K., Freund, B., Langosh, D., Henderson, S., Sperber, D., & Weinstein, L. (1993). Impact of parental terminal cancer on latency-age children. *American Journal of Orthopsychiatry*, 63, 417-427.

Connidis, I. A. (1992). Life transitions and the adult sibling tie: A qualitative study. Journal of

Marriage and the Family, 54, 972-982.

- Creswell, W. J. (2013) *Qualitative inquiry and research design: Choosing among five approaches.* California: Sage Publications.
- DiCicco-Bloom, B. & Crabtree, F. B. (2006). The qualitative research interview. *Medical Education*, 40, 314-321. doi: 10.1111/j.1365-2929.2006.02418.x
- Dopp, A. R., & Cain, A. C. (2012). The role of peer relationships in parental bereavement during childhood and adolescence. *Death Studies*, *36*, 41-60.

Edelman, H. (1994). Motherless daughters: The legacy of loss. New York: Dell.

- Eppler, C. (2008). Exploring themes of resiliency in children after the death of a parent. *Professional School Counseling*, 11(3), 189-196.
- Finn, C. (2003). Helping students cope with loss: Incorporating art into group counseling. Journal for Specialists in Group Work, 28(2), 155-165.
- Fuller-Thomson, E. (2000). Loss of the kin-keeper?: Sibling conflict following parental death. *Omega*, 40(4), 547-559.
- Gimenez, L., Chou, S., & Liu, J. (2013). Parental loss and children's well-being. Journal Of Human Resources, 48(4), 1035-1071.
- Gold, D. T. (1996). Continuities and discontinuities in sibling relationships across the life span.
   In V. L. Bengston (Ed.), *Adulthood and aging: Research on continuities and discontinuities* (pp. 228-243). New York: Springer.
- Gray, R. E. (1989). Adolescents' perceptions of social support after the death of a parent. Journal of Psychosocial Oncology, 7(3), 127-144. doi: 10.1300/J077v07n03\_09.
- Gray, R. E. (1987). Adolescent response to the death of a parent. *Journal of Youth Adolescent*, *16*, 511-525.

- Greeff, P., A., & Human, B. (2004). Resilience in families in which a parent has died. *The American Journal of Family Therapy*, 32(1), 27-42. doi: 10.1080/0196180490255765.
- Hesamzadeh, A., Dalvandi, A., Maddah, B. S., Koshknab, F. M., & Ahmadi, F. (2015). Family adaptation to stroke: A metasynthesis of qualitative research based on double ABCX model. *Asian Nursing Research*, 9, 177-184.

Hill, R. (1958). Generic features of families under stress. Social casework, 49(2-3), 139-150.

- Hollingshaus, M. S., & Smith, K. R. (2015). Life and death in the family: Early parental death, parental remarriage, and offspring suicide risk in adulthood. *Social Science & Medicine*, *13*(1), 181-189. doi: 10.1016/j.socscimed.2015.02.008.
- Hogan, N., & DeSantis, L. (1994). Things that help or hinder adolescent sibling bereavement. Western Journal of Nursing Research, 16(2), 132-153.
- Hope, M. H., & Hodge, M. D (2006). Factors affecting children's adjustment to the death of a parent: The social work professional's viewpoint. *Child and Adolescent Social Work Journal*, 23(1), 107-126.
- Hurd, C. R. (2002). Sibling support systems in childhood after a parent dies. *Omega*, 45(4), 299-320.
- Jacobs, S., Hansen, F., Kasl, S., Ostfeld, A., Berkman, L., & Kim, K. (1990). Anxiety disorders during acute bereavement: Risk and risk factors. *Journal of Clinical Psychiatry*, 51, 269-274.
- Johnson, B., & Christensen, L. (2004). Educational research: Quantitative, qualitative, and mixed approaches. Boston: Pearson.
- Koblenz, J. (2015). Growing from grief: Qualitative experiences of parental loss. *Journal of Death and Dying*, 73(3), 203-230.

- Kranzler, E., Shaffer, D., and Wasserman, G., Davies, M. (1990). Early childhood bereavement. Journal of the American Academy of Child and Adolescent Psychiatry, 16 (4), 272-284.
- Kraatz Keiley, M., Bates, J. E., & Dodge, K. A. (2000). A cross-domain growth analysis: Externalizing and internalizing behaviors during 8 years of childhood. *Journal of Abnormal Child Psychology*, 28(2), 161-179.
- LaFreniere, L., & Cain, A. (2015). Parentally bereaved children and adolescents: The question of peer support. *Journal of Death and Dying*, 71(3). 245-271.
- Lawrence, E., Jeglic, E. L., Matthews, L.T., & Pepper, C. M. (2005). Gender differences in grief reactions following the death of a parent. *Omega: Journal Of Death And Dying*, 52(4), 323-337.
- Lawrence, G. B. (1996). The impact of coping and perceived control on adjustment in children who have lost a parent. *Dissertation*.
- Lenhardt, A. C., & McCourt, B. (2000) Adolescent unresolved grief in response to the death of a mother. *Professional School Counseling*, 3(3), 189-197.
- Mack, Y. K. (2004). The effects of early parental death on sibling relationships in later life. *Omega*, 49(2), 131-148.
- McClatchey, I., & Wimmer, J. (2014) Coping with parental death as seen from the perspective of children who attended a grief camp. *Qualitative Social Work*, 13(2), 221-236. doi:10.1177/1473325012465104
- McClatchey, S. I., Vonk, E. M., & Palardy, G. (2009). The prevalence of childhood traumatic grief- A comparison of violent/sudden and expected loss. *Omega*, 59(4), 305-323. doi: 10.2190/OM.59.4.b

McCubbin, I. H. & Patterson, M. J. (1983). Family transitions: Adaptation to stress. In H. I.

McCubbin & C. R. Figley (Eds.), *Stress and the family* (5-25). New York: Brunner/Mazel INC.

- Merriam, B. S., & Tisdell, J. E. (2016). *Qualitative research: A guide to design and implementation.* San Francisco: Jossey-Bass.
- Murray, C. (2015). Death, dying, and grief in families. In C. A Price, K. R. Bush, & S. J. Price (Eds.), *Families and change: Coping with stressful events and transitions* (pp. 359-380).
  U.S.A: Sage Publications.
- Parsons, T. (1943). The kinship system of the contemporary United States. *American Anthropologist, 45,* 22-38.
- Pfeffer, C. R. (2002). Group intervention for children bereaved by the suicide of a relative. Journal of the American Academy of Child Adolescent Psychiatry, 41, 505-513.
- Raveis, H., V., Siegel, K., & Karus, D. (1999). Children's psychological distress following the death of a parent. *Journal of youth and adolescence*, 28(2), 165-180.
- Ross. H. G., & Milgram, J. I. (1982). Important variables in adult sibling relationships: A qualitative study. In M. E. Lamb & B. Sutton-Smith (Eds.), Sibling relationships: Their nature and significance across the lifespan (pp. 225-249). Hillsdale, NJ: Lawrence Erlbaum Associates.
- Saldinger, A., Cain, A., Kalter, N., & Lohnes, K. (1999). Anticipating parental death in families with young children. *American Journal of Orthopsychiatry*, 69(1), 39-48.
- Saldinger, A., Porterfield, K., & Cain, A. C. (2004). Meeting the needs of parentally bereaved children: A framework for child-centered parenting. *Psychiatry*, *67*, 331-352.
- Saler, L., & Skolnick, N. (1992). Childhood parental death and depression in adulthood: Roles of surviving parent and family environment. *American Journal of Orthopsychiatry*, 62(4),

504-516.

- Scharlach, A. E., & Fredriksen, K. I. (1993). Reactions to the death of a parent during midlife. *Omega*, 27(4), 307-319.
- Schoenfelder, E. N., Sandler, I. N., Wolchik, S., & MacKinnon, D. (2011). Quality of social relationships and the development of depression in parentally-bereaved youth. *Journal of Youth and Adolescence*, 40(1), 85-96. doi: 10.1007/s10964-009-9503-z.
- Shenton K. A. (2004) Strategies for ensuring trustworthiness in qualitative research projects. *Education for Information, 22*(2), 63-75.
- Silverman, R., P., & Worden, W., J. (1992). Children's reactions in the early months after the death of a parent. *American Orthopsychiatric Assoication*, 62(1), 93-104.
- Smith, K. R., Hanson, H.A., Norton, M.C., Hollingshaus, M. S., & Mineau, G. P. (2014). Survival of offspring who experience early parent death: Early like conditions and laterlife mortality. *Social Science & Medicine*, *119*, 180-190. doi: 10.1016/j.socscimed.2013.11.054
  - 10.1010/j.300301100.2013.111001
- Szymanowska, J. (2014). A child in the face of a parent's death: Aspects of children's loneliness. *Progress in Health Sciences, 4*(1), 118-123.
- Thompson, P. M., Kaslow, J. N., Price, W. A., Williams, K., & Kingree, B. J. (1998). Role of secondary stressors in the parental death-child distress relation. *Journal of Abnormal Child Psychology*, 26(5), 357-366.
- Van Eerdewegh, M., Clayton, P., & Van Eerdewegh, P. (1985). The bereaved child: Variables influencing early psychopathology. *British Journal of Psychiatry*, 147, 188-194.
- Walsh, F. & McGoldrick, M. (2004) *Living beyond loss: Death in the family.* New York: W. W. Norton & Company

Weller, R. A., Weller, E. B., Fristad, M. A., & Bowes, J. M. (1991). Depression in recently bereaved prepubertal children. *American Journal of Psychiatry*, 148(11), 1536-1540.

Whitchurch, G. G., & Constantine, L. L. (1993). Systems theory. In Boss, G.P., Doherty, J.W., LaRossa, R., Schumm, R.W., & Steinmetz, K.S. (Eds.), Sourcebook of family theories and methods: A contextual approach (pp. 325-349). New York, NY: Springer Science and Business Media.

Worden, J. W. (1996). Children in Grief: When a Parent Dies. Gilford Press, New York.

# Appendix A

## Demographic Information

| First name you would like to use:      |                              |  |
|--|------------------------------|--|
| Age:years                              | Gender:                      |  |
| Education:                             |                              |  |
| Occupation:                            |                              |  |
| Deceased parent (mother or father):    | · ·                          |  |
| Year parent died:                      |                              |  |
| Age of parent at time of death:        | _ Your age at time of death: |  |
| Cause of death:                        | Expected/Unexpected?         |  |
| Were your parents married at the time? | C (2019)                     |  |
| Siblings (gender, ages):               |                              |  |
| Age of siblings at time of death:      |                              |  |
|  |                              |  |
|  |                              |  |

Notes:

#### Appendix B

#### Interview Guide

- How did your relationship with your sibling change after the death of your parent? Did your relationships get stronger? Or did the death create a distance between you and your sibling (s)?
  - a. Do you feel like you can talk to your sibling about the death of your parent? If so, has that helped you grieve in any way?
  - b. (For those who have no siblings) If you had had a sibling, how do you think this could have changed your grieving process? Did you miss having someone other than your parent to talk to and confide in?
- 2. Explain how your social network helped your through your grieving process (relatives, friends, teachers/professors, and/or therapists).
- 3. How would you say your relationship with your surviving mother/father was impacted?
  - a. Do you think your surviving parent has helped you grieve? If so, how?
  - b. Can you talk to your surviving parent about the death?
- Please explain any daily changes you experienced after the death of your parent. (relocation, financial issues, increased responsibility/chores, emotions)
  - a. Did you find this difficult? Or did it help you with your grieving process?
- What milestone events have occurred in your life since your parent passed away? (Graduation, marriage, career job, baby, moving out, birthdays, anniversaries, holidays).
  - a. Did it make you feel like you were grieving again? Did it make you think

about your parent? Did you wish he/she was there with you in this important moment? How did these moments make you feel?

- 2. How do you think the death of your parent has changed you?
  - a. Has it made you stronger or weaker?
  - b. What advice would you give to other children going through this? What would you say helped you the most?

Appendix C

#### Consent Form

### **CONSENT FORM FOR ADULTS**

Please read below with care. You can ask questions at any time, now or later. You can talk to other people before you sign this form.

Study's Title: "Grieving the Loss of a Parent"

Why is this study being done? To understand the experiences of young adults who have suffered the loss of a parent.

What will happen while you are in the study? You will first be asked several questions about your background. You will then be asked questions about your experience losing a parent, your feelings about the loss, how it has changed your relationships with your family members, how it has changed your life, and how you have coped with it. You do not have to answer any questions you do not feel comfortable answering. The interview will be audiotaped.

Time: This study will take about 60 minutes.

**Risks:** The loss of a loved one is very painful and speaking about it can bring some discomfort. Please remember that you do not have to answer any questions that you do not want to answer.

Should you need support in coping with your loss, please contact the following free organizations:

Good Grief in New Jersey. Phone: (908) 522-1999. E-mail: <u>info@good-grief.org</u> The Grief Center in Montreal, Canada: (514) 486-0550.

**Benefits:** There are no personal benefits to you being in this study. However, your responses will help increase the knowledge about the experience of losing a parent. Researchers and practitioners in the field will benefit from the information you provide us.

<u>Who will know that you are in the study?</u> Only the researchers will know you participated in this study. Your information will be kept confidential and your interview will only be heard by the research team. You will be given a fake name.

**Do you have to be in the study?** You do not have to be in this study. You are a volunteer! It is okay if you want to stop at any time and not be in the study. You do not have to answer any questions you do not want to answer. Nothing will happen to you.

#### Do you have any questions about this study?

Please contact: Eva Apelian, Masters student, Family & Child Studies Department, Montclair State University, 1 Normal Ave., Montclair, NJ 07043. Phone: (201) 914-4616. E-mail: apeliane1@mail.montclair.edu Olena Nesteruk, Ph.D., Associate Professor, Department of Family and Child Studies, Montclair State University, Montclair, NJ 07043. Work phone: (973) 655-7984. E-mail: nesteruko@mail.montclair.edu

**Do you have any questions about your rights as a research participant?** Please contact Dr. Katrina Bulkley, Chair of the Institutional Review Board at Montclair State University at reviewboard@mail.montclair.edu or 973-655-5189.

#### **Study Summary**

I would like to get a summary of this study: Please initial: \_\_\_\_\_ Yes \_\_\_\_\_ No

It is okay to audiotape me while I am in this study: Please initial: Yes \_\_\_\_\_ No

### One copy of this consent form is for you to keep.

#### Statement of Consent

I have read this form and decided that I will participate in the project described above. Its general purposes, the particulars of involvement, and possible risks and inconveniences have been explained to my satisfaction. I understand that I can withdraw at any time. My signature also indicates that I am 18 years of age or older and have received a copy of this consent form.

| Print your name here                          | Sign your name here | Date |
|---|---------------------|------|
| Eva Apelian<br>Name of Principal Investigator | Signature           | Date |
| Dr. Olena Nesteruk<br>Name of Faculty Sponsor | Signature           | Date |

Appendix D

Flyer

# Grieving The Loss of a Parent

"Grief is like the ocean, it comes in waves, ebbing and flowing. Sometimes the water is calm, and sometimes it is overwhelming. All we can do is learn to swim." – Vicki Harrison

#### Why are we studying this?

• To better understand the experiences of young adults who have lost a parent.

#### Who we are looking for:

- Young adults currently between the ages of 18 and 30.
- Who have lost a parent after the age of 8.
- At least two years have passed since the loss
- Who still have their surviving parent

Participation in the study involves:

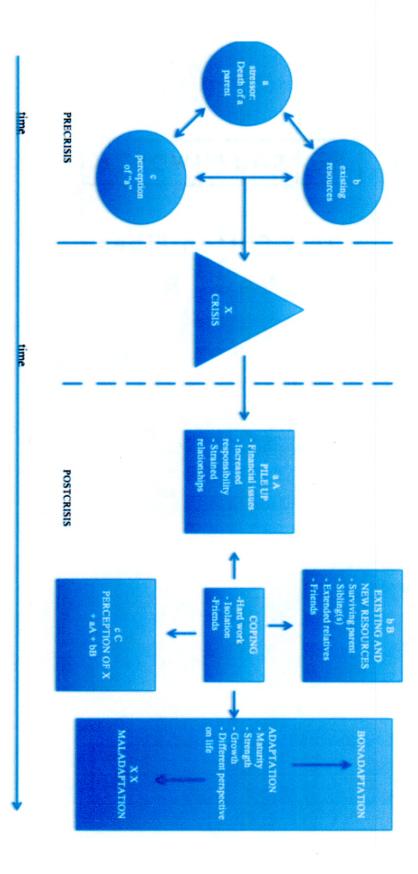
- One interview lasting about one hour
- Interviews scheduled on a day, time, and location convenient to you
- All names and personal information are kept confidential (you will <u>NOT</u> be asked to provide your last name, address, status in the U.S., SSN, or any other personal information; the focus of the study is on understanding individual experiences and stories)

# If you would like to participate in the study or if you have any questions please contact:

Ms. Eva Apelian Department of Family and Child Studies, Montclair State University, Montclair, NJ 07043 Phone: 201-914-4616 Email: <u>apeliane1@montclair.edu</u> Olena Nesteruk, Ph.D., Associate Professor Department of Family and Child Studies, Montclair State University, Montclair, NJ 07043

Work phone: (973) 655-7984 E-mail: nesteruko@mail.montclair.edu

Figure 1. Adaptation of the Double ABCX Model for grieving families



PARENTAL LOSS

.JAN!