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## Grieving together and apart: Bereaved parents' contradictions of marital interaction


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Grieving together and apart: Bereaved parents' contradictions of marital interaction

## Abstract

The researchers adopted relational dialectics theory (Baxter & Montgomery, 1996) to examine the discourse of 40 bereaved parents following the death of a child. Research questions guiding the study were what dialectical contradictions do bereaved parents experience when communicating with each other after their child's death and how do bereaved parents communicatively negotiate the dialectical contradictions they experience? Bereaved parents experienced two dialectical contradictions-the first between trying to grieve their child's death together as a couple and apart as individuals and the second between being both open and closed when talking with one another about their deceased child. Results describe how parents negotiated these contradictions using Baxter and Montgomery's (1996) praxical patterns. Implications for bereaved parents and practitioners are discussed.

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Grieving together and apart: Bereaved parents' contradictions of marital interaction

The death of a child is a devastating and life-altering event for parents. A child's death defies the natural and expected order of life (Becvar, 2001; DeVries, Dalla Lana, & Falck, 1994; Gamino, Sewell, & Easterling, 1998; Sanders, 1989) leaving parents with shattered hopes (Janoff-Bulman, 1992) and fragmented identities (Attig, 1996; Johnson, 1987). To grieve such an overwhelming loss, bereaved parents must re-learn who they are (Attig, 1996) and restore some degree of coherence and meaning to their fractured lives (Neimeyer, Prigerson, & Davies, 2002). As Wheeler (2001) claimed, a parents search for meaning "is central to the process of readjustment after the death of a child" (p. 62).

For bereaved parents, talking about their child's death is vital to their ability to grieve and reconstruct a sense of meaning and purpose (Bosticco & Thompson, 2005; Nadeau, 1998; Sedney, Baker, & Gross, 1994). Unfortunately, talking about their child's death with others is often difficult for bereaved parents as parents believe family and friends are unwilling or unable to communicate about the loss (Brabant, Forsyth, & McFarlain, 1995; Hastings, 2000; Toller, 2005). Scholars have found that bereaved parents report feeling ostracized and stigmatized when trying to communicate with others following their child's death (Riches & Dawson, 2000; Hastings, 2000). As a result, bereaved parents may monitor communication with members of their social network in order to protect themselves from further harm or judgment by family and friends (Hastings, 2000; Toller, 2005).

Likewise, bereaved parents may find it difficult to talk with their spouse about their child's death as both parents are simultaneously experiencing the death and each is lacking in the emotional strength needed to support one another (Rando, 1986a; Rosenblatt, Spontgen, Karis, Dahl, Kaiser, & Elde, 1991). Additionally, parents' incongruent experiences and expressions of

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grief make it even more difficult for parents to support and comfort one another (Miles, 1985; Rando, 1986b, 1991a; Rosenblatt, 2000; Schwab, 1990, 1996). Further, a number of scholars have found that dissimilar grieving styles can create conflict and marital discord for bereaved parents because parents struggle to understand each other's style of grieving (Martin & Doka, 2000; Riches & Dawson, 2000; Schwab, 1990, 1992). Finally, bereaved parents' styles of grieving are often very gendered with bereaved fathers being less emotionally expressive than bereaved mothers (Alderman, Chisholm, Denmark & Salbod, 1998; Carroll & Shaefer, 1994; Cook, 1988; Mandell, McNaulty, & Reece, 1980; Schwab, 1990). Undoubtedly, parents' gendered and dissimilar patterns of grieving will influence how, if at all, couples talk with one another about their child's death.

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Scholars have also found that bereaved parents may monitor talking with each other about their child's death in order to protect themselves or their spouse from further pain and injury (Rando, 1986a; Schwab, 1992). As Schwab (1992) found, parents regulate and even restrict communication with each other when talking about their child's death is too painful. Likewise, Scully (1985) claimed bereaved fathers hesitated to talk with their wives about their child's death because their wives would often cry during these conversations. Attributing their wives' reactions to talking about the death, these fathers refrained from communicating with their wives about their child's death in future interactions.

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In summary, differences in how mothers and fathers grieve can make it difficult for bereaved parents to communicate with each other about their child's death. Likewise, parents' desire to avoid causing one another or themselves additional hurt or pain influences whether they talk about their child's death. Nonetheless, researchers have found that bereaved parents experience a persistent need to talk about their child's death for support and sense-making

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(Becvar, 2001; Hastings, 2000; Rando, 1986b; Rosenblatt, 2000). Bereaved parents' conflicting desires to be both open and closed with each other about their child's death signals that parents may experience dialectical tensions or contradictions within their marital relationship (Baxter & Montgomery, 1996). As such, the goal of the present study was to identify possible dialectical tensions present in bereaved parents' discourse in order to explore how these tensions may animate parents' marital relationships. We centered the present study in the theory of relational dialectics as this theory focuses primarily on the interchange of rival and competing tensions that occur in intimate relationships (Baxter, 2006; Baxter & Montgomery, 1996).

#### Theoretical Perspective: Relational Dialectics

The foremost contention of relational dialectics theory is that communication between relational partners is filled with contending, multi-vocal discourses (Baxter & Braithwaite, forthcoming). Scholars using relational dialectics theory investigate how these competing discourses are revealed within the discursive practices of relational partners (Baxter, 2006; Baxter & Montgomery, 1996). Scholars centering their work in relational dialectics theory also examine how these rival discourses both compete and co-exist in an ongoing struggle for legitimacy and recognition (Baxter, 2004, 2006). Speaking to the multi-discursive nature of relational life, Baxter (2006) explained, "communicative life in families can be viewed as a dialectic in which different, often opposing voices interpenetrate—some more dominant and others more marginalized" (p. 132).

Comprised of rival and yet united discourses, contradiction is at the heart of relational dialectics theory (Baxter & Braithwaite, forthcoming; Baxter & Montgomery, 1996). Contradictions are located within relationships and are continuously created and recreated through the communication of relational partners (Baxter, 2004). Inherent within personal

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relationships, contradictions give life to relationships as they animate and influence the meaning-making processes of relational partners (Baxter & Braithwaite, forthcoming). The very nature of contradiction dictates that contradictions in relational life are experienced in a both/and fashion rather than either/or (Baxter, 2006).

Due to the continual interplay of competing discourses, relationships exist in a state of perpetual flux and imbalance. Rejecting the notion of balance, relational dialectics theory contends that competing and rival discourses give relationships vitality and energy (Baxter, 2004, 2006). However, relational partners may engage in different communicative strategies or praxical patterns to somehow manage or negotiate contradictions (Baxter & Montgomery, 1996). According to Baxter (2004), negotiation of tensions may be synchronic or diachronic in nature. Relational partners demonstrate synchronic praxical patterns when they give full and complete attention to each competing discourse. On the other hand, relational parents demonstrate a diachronic approach when they privilege certain discourses or discursive practice depending on the context or time (Baxter, 2004). Diachronic forms of negotiation are more common among relational partners as simultaneous and complete consideration of competing discourses is a difficult and complex endeavor (Baxter, 2004).

Scholars have found relational dialectics to be a fruitful theory in advancing our knowledge about bereavement and communication. For example, Golish and Powell (2003) argued that a joy-grief contradiction characterized expectant parents' communication as parents celebrated their child's birth and simultaneously mourned the loss of full-term pregnancy. In a study examining wives of Alzheimer's patients, Baxter, Braithwaite, Golish, and Olson (2002) discovered that these women experienced a contradiction of presence-absence due to their husband's ongoing physical presence and simultaneous mental absence. Likewise, Bryant (2003)

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posited that stepfamilies formed after death of a parent experienced a contradiction of presence-absence as family members struggled to acknowledge and recognize the role of the deceased parent within the newly formed family. Finally, Toller (2005) argued that bereaved parents experienced the tension of presence-absence following their child's death.

Based on the findings of these scholars, we examined the communication of bereaved parents in order to discover what additional contradictory discourses animated their communication with one another following their child's death. The research questions guiding this study were:

RQ1: What dialectical tensions do bereaved parents experience when communicating with each other?

RQ2: How do bereaved parents communicatively manage these dialectical tensions?

### Methodology

In the present study we wanted to listen to the voices and experiences of bereaved parents and thus chose to ground our study in the interpretive paradigm (Creswell, 2007). Scholars residing within the interpretive paradigm seek to understand the viewpoints and meaning-making processes of participants by giving precedence to their words and experiences (Baxter & Babbie, 2004; Creswell, 2003, 2007; Leininger, 1994).

Like most interpretive scholars, we used purposive sampling (Spradley, 1979; Tashakori & Teddlie, 2003), and each participant met the following criteria: they had experienced the death of a child, their child's death had occurred at least six months ago, and they were currently married or had been married to the other biological parent of the child at the time of the child's death. We gave participants the choice to be interviewed alone or with their spouse. Upon approval from the University's Institutional Review Board, we recruited participants from



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3 bereavement support groups, communication classes, postings on community bulletin boards;  
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5 and from campus and community contacts who were asked to help locate persons who met the  
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7 criteria. Once parents had initiated contact with us we scheduled interviews with them at their  
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9 convenience.  
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### 12 *Participants*

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15 Of the 40 bereaved parents interviewed, 26 were women and 14 were men. A total of 31  
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17 interviews were conducted, nine taking place with both parents present. The sample consisted of  
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19 39 Caucasians and one Hispanic. Twenty-two interviews were conducted with only one bereaved  
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21 parent present, however of these 22 parents, eight of the participants were married to one  
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23 another. In other words, we interviewed four married couples, but at separate times due to  
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25 scheduling conflicts. At the time of the interview, thirty-seven of the participants were married to  
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27 their child's biological parent, one father was divorced from the biological mother of his child  
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29 and had remarried, and two mothers were divorced and not remarried. The length of marriages  
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31 ranged from 1.5 years to 45 years with a mean of 22.92 years (SD= 10.94). Fifteen parents  
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33 (37.5%) were currently participating in a bereavement support group, 11 (26.75%) had  
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35 participated in a bereavement support group at one time but were no longer participating, and 14  
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37 (35.0%) had never participated in a bereavement support group.  
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44 The time from the child's death to the interview ranged from 6 months to 24 years with a  
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46 mean of 8.42 years (SD= 6.36). The age of the child at the time of death ranged from 0 years of  
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48 age to 42 years, with a mean age of 8.61 years (SD= 11.03). The reported causes of death were:  
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50 three from illness (10.71%), 12 from stillbirth or birth defects (42.85%), three from suicide  
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52 (10.71%), nine from accidents (32.14%) and one from Sudden Infant Death Syndrome (SIDS)  
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54 (3.57)  
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*Procedures*

Interviewing participants is one of the most common and proven methods used by interpretive researchers (Fontana & Frey, 1994) and we chose to interview parents using a semi-structured interview format (Smith, 1995). Each interview began with a discussion of the purpose of the study, the human subjects consent process, and demographic data. The first author completed the interviews and asked parents to describe their interactions with each other before and after the death of their child. Parents were also asked to describe their marital relationship and their communication with each other in the present. To examine the possible contradictory discourses in bereaved parents' communication and to examine how communication between parents may have changed over time we modeled our interview questions after the retrospective interview technique (Huston, Surra, Fitzgerald, & Cate, 1981; Metts, Sprecher, & Cupach, 1991). Of the 31 interviews conducted, 14 took place in the participants' homes, 15 took place over the phone, and two took place at a local café. We did not detect differences in the interviews due to location. Interviews ranged from 80 minutes to 4 hours, with the average interview lasting about 2 hours. Each interview was audio taped with participants' permission.

*Data Analysis*

Each audio-taped interview was listened to in its entirety and then transcribed verbatim by the first author as quickly as possible following the interview. The transcribed interviews yielded a total of 982 pages of single-spaced data. All of the audio-tapes were number coded, and the transcripts were identified with the corresponding number code as well as pseudonyms.

A modified version of the constant-comparative analysis was used to identify and develop categories and thematic patterns (Strauss & Corbin, 1998). First, the transcripts were

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3 read through their entirety. While reading through transcripts, initial impressions were recorded  
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5 in the form of analytic memos, which continued throughout the entire data analysis (Smith,  
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7 1995). We then examined the raw data using relational dialectics theory as our sensitizing  
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9 concept and organizing framework (Strauss & Corbin, 1998), consequently reducing the raw data  
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11 to approximately 100 pages of single-spaced transcription.  
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16 The first author then open coded our reduced data, separating whole paragraphs into  
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18 categories (Strauss & Corbin, 1998). Following the example of others using relational dialectics  
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20 (e.g. Baxter, Braithwaite, Bryant, & Wagner, 2004) we organized our open coding around  
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22 Spradley's (1979) Attribution semantic relationship in which "X is an attribute (characteristic) of  
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24 Y" (p. 111).  
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28 Categories were compared against each other for similarities and differences (Strauss &  
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30 Corbin, 1998). When differences were found, a new category was added, resulting in 15 open  
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32 codes. Generally, open coding is repetitious, as coding categories are added, combined, and  
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34 revised until the coding categories do not require further modification (Strauss & Corbin, 1998).  
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36 As such, eight open codes remained at the conclusion of open coding.  
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40 After open coding, axial coding was completed. During axial coding "categories are  
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42 related to their subcategories to form more precise and complete explanations about phenomena"  
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44 (Strauss & Corbin, 1998, p. 124). In other words, categories and subcategories are further  
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46 examined to see if they are somehow linked or related to one another. Axial coding is similar to  
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48 Spradley's (1979) semantic relationship of Strict Inclusion, where "X is a kind of Y" (p. 111),  
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50 where in our study the "Y" represented contradiction. In this case, axial coding involved looking  
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52 at the bereaved parents' discourse for simultaneous opposites from the categories created during  
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54 open coding. Organizing bereaved parents' discourse was done using a modified version of  
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Spradley's domain analysis worksheet. As contradictions were identified during this stage, categories from open coding that were not dialectical were removed from analysis. Two main contradictions were identified during this second stage and non-dialectical themes were set aside for future studies.

We rechecked the analysis in a number of different ways in order to ensure the validity and trustworthiness of our findings (Creswell, 2007). First, we tested the analysis by holding a collaborative data conference with the first and second authors and four other researchers knowledgeable in relational dialectics theory and the interpretive paradigm. During this two-hour session, the researchers rigorously questioned and examined our data analysis in an effort to refine our findings and identify any rival explanations (Miles & Huberman, 1994). Second, the first author conducted member checking interviews with seven bereaved parents who participated in the present study. By checking the results via these interviews we were able to bring our analysis and interpretations back to the participants, allowing them to judge the accuracy and credibility of our findings (Baxter & Babbie, 2004; Creswell, 2007). Our participants indicated that we had accurately captured and portrayed their experiences of communicating with each other following their child's death.

### Results

Bereaved parents expressed a desire to grieve with their spouse in order to provide each other with comfort and support. At the same time, parents indicated that they sometimes needed to grieve on their own as their experience of grief was unique from that of their partner. To speak to bereaved parents' concurrent needs to both grieve their child's death together as a couple and apart as individuals we labeled this tension grieving together-grieving apart. We also discovered that bereaved parents experienced competing needs to be both open and closed when it came to

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3 communicating with one another about their child's death and we labeled this tension openness-  
4 closedness. As Baxter and Montgomery (1996) claimed, multiple contradictions or competing  
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6 closedness. As Baxter and Montgomery (1996) claimed, multiple contradictions or competing  
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8 discourses may be knotted or webbed together in what they refer to as totality. Although we will  
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10 discuss these two contradictions separately, we recognize that the tension of grieving together-  
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12 grieving apart was inextricably linked to the tension of openness-closedness.  
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### 14 *Grieving Together-Grieving Apart*

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16 For parents in the present study, being able to grieve and share the pain of their child's  
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18 death with their spouse was of utmost importance. At the same time, parents recognized that  
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20 their own unique and individual response to their child's death meant working through the  
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22 grieving process on their own. Parent's need to both grieve together and apart is illustrated in this  
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24 exchange between marital partners whose teenage daughter died two years ago:  
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29 Matt: You have to go through the, uh, you do your grieving, uh it's all yours. You can't  
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31 share it with your spouse. You can help each other but you still go through this  
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33 alone. Connie's there for me and I'm there for her but we both realize that we  
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35 have our own grief journey to struggle through . . . .  
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39 Connie: And we want to do it together.

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41 Matt: Yeah, everybody does it differently and it's individual and boy for a long time it  
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43 felt like as much as we consoled each other we still felt like we were, to me, I felt  
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45 like I was having to go through this myself, alone. (22: 520-527; Note: numbers  
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47 denote interview and line numbers, respectively.)  
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51 Although this couple wanted to grieve together both acknowledged that doing so involved  
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53 honoring their own, individual grief journeys as well. Another mother whose teenage daughter  
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55 died reflected similar sentiments:  
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3 We need to do some things together but kind of, in some ways we're more supportive of  
4 our individualities. Sometimes when I know he has to do what he needs to do then it's  
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6 like you need to go do it. (23: 608-610)  
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10 Like the previous couple, this mother also believed she and her husband needed to grieve their  
11 daughter's death as individual parents. At the same time, she claimed it was important for them  
12 to connect and grieve with one another. Although parents wanted to both grieve together and  
13 apart they struggled to honor both needs of the contradiction as parents often experienced and  
14 expressed their grief differently from their spouse.  
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22 *Dissimilar experiences of grief.* For parents, experiencing the emotions of grief and  
23 working through the grieving process at dissimilar paces further complicated their ability to  
24 grieve together. A bereaved mother whose two children died at birth discussed how difficult it  
25 was to grieve together with her husband:  
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32 Jack was raised, he's the provider of the family. He has to move on, he has to take care of  
33 the family the best way he can. And that was his way of taking care of the family was by  
34 moving on. I wasn't going to pull him back and let him grieve. And with Marcus, the  
35 second time, he didn't grieve. I mean once the funeral was over that was the end of it.  
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41 That was the end of it for him. (3: 410-414)  
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44 For this mother, her husband's way of coping with the deaths of their children was to move  
45 forward. She later indicated that this was not how she wanted to grieve her children's deaths. As  
46 a result, she believed she grieved more apart from her husband than with him.  
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50 Although several parents in the present study believed that working through the grieving  
51 process differently sometimes caused problems in their relationship, a few parents framed these  
52 differences as positive and even helpful for the relationship. For some parents, dissimilar  
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grieving allowed them to support and comfort one another, which helped them to grieve better as a couple. One mother whose infant daughter died claimed that:

In that first few months after she died, it seemed that one person was up while the other person was down. I don't know how that worked out that way but it seemed like if I was having a bad day he was having a better day and was better able to support me through that and vice versa. (34: 172-175)

For this mother, experiencing grief differently from her husband allowed them to better care for each other during an extremely difficult time. By caring for each other they were better able to grieve together.

In addition to grieving at different paces, parents reported they and their partners also expressed their grief and emotions in disparate ways, which influenced their ability to grieve together with their spouse and increased parents' perception that they were grieving more apart. In the present study, bereaved mothers reported that they primarily expressed their grief through crying and talking about the loss. On the other hand, bereaved fathers claimed to express their grief more through activities, such as building things. While not all of the bereaved mothers and fathers in the present study strictly adhered to these gendered expressions of grief, the majority of parents did. Thus, parents in the present study who grieved along gendered lines found it difficult to connect and grieve together as each grieved differently from each other.

*Dissimilar expressions of grief.* For many bereaved parents, their expression of grief greatly differed from the expression of their spouse. Not surprisingly, this created conflict for many couples and left them believing they were alone in their experience of grief. In particular, spouses who openly expressed their grief believed their partner needed to do the same. If their

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3 partner was not open and expressive about his or her grief, then their partner was perceived to be  
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6 grieving "incorrectly." One mother commented:

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8 After Dennis died is when I noticed that particular difference in our communication style.

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10 It really came to the forefront. And so because he wasn't grieving the way I was, I

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12 thought he was doing it wrong. You're supposed to be talking about it, crying [laughing].

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15 (31: 159-161)

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17 As this mother's quote suggests, she expected her husband to grieve as she did; however, because  
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19 he did not conform to her expectations she believed he was not grieving properly. As a result,  
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21 this couple struggled to grieve together. A father whose daughter died from a lengthy illness had  
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23 a similar experience, "Her approach is more, not think about and keep going, at least that's my  
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25 perception. So if you couple that with not talking about it, that's "I'll get through this by not  
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27 thinking about it and keeping busy" (1: 300-302). At the beginning of the interview this father  
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29 explained that he wanted to talk more about his daughter's death with his wife; however, they  
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31 rarely talked about her death because his wife's way of grieving was not to talk.  
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37 Early on in the grieving process, a number of parents expected that they and their partner  
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39 would grieve alike. As we discussed earlier, parents who were more open and expressive of their  
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41 grief expected their partner to do the same. When their spouses did not ascribe to this style of  
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43 grieving, couples experienced great tension and conflict. Nonetheless, a number of bereaved  
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45 parents in the present study had worked hard to recognize, understand, and in some cases accept  
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47 their spouse's way of grieving. In fact, accepting one another's grieving style was a key way in  
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49 which parents managed the tension of grieving together-grieving apart. In the following section  
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51 we discuss how bereaved parents communicatively negotiated the tension of grieving together-  
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53 grieving apart.  
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*Negotiation of grieving together-grieving apart*

In the present study, bereaved parents managed their competing needs to both grieve together and apart in three distinct ways. First, parents managed this tension by accepting their grieving differences and dissimilarities. Second, parents negotiated this tension by compromising in order to partially meet both ends of the contradiction. Finally, parents navigated this tension by seeking outside help, which helped them honor at least one pole of the contradiction.

*Understanding their differences.* For some bereaved parents, managing the tension of grieving together-grieving apart meant viewing each other's way of grieving as inherent to the nature of grief. By understanding and accepting one another's grieving style, parents were able to honor each other's individual grieving needs. At the same time, accepting each other's individual needs resulted in parents feeling validated by one another, which in turn helped them to feel more connected as a couple, consequently making it easier for parents to grieve together as well.

Parents' acceptance of each other's grieving style in order to grieve together and apart demonstrates Baxter and Montgomery's (1996) praxical pattern of reaffirmation. Relational partners demonstrate reaffirmation when they accept and even embrace contradiction as inherent to interaction and overall social life (Baxter & Montgomery, 1996). Accepting one another's grieving needs was not easy, but many parents believed it necessary in order to keep their marital relationship intact. One mother specifically advised other bereaved couples to accept each other's way of grieving:

You have to sometimes just let go. Just trust each other to help and guide each other. It takes sometimes just a lot of reevaluation and working it all out individually to be able to come back and work it out together with someone. (33: 255-257)

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As this mother suggested, bereaved parents need to process their loss as individuals before they can process their grief as a couple. Similarly, another mother described how understanding her husband's way of grieving allowed them to ultimately connect as a couple:

He's a hunter so he could go out into the woods and spend a lot of time out there and do his grieving in a more private place. And since then, we've been able to connect better in our communication styles because I understand. I think he understands my responses too. (31: 235-237)

By honoring and acknowledging her husband's individual needs, this wife believed that they were able to eventually grieve both together and apart.

A number of parents advised other bereaved parents to refrain from negatively evaluating their spouse's grief. As one mother indicated, bereaved parents should "realize that you're both in pain and not to expect more from someone. Do not make assumptions that somebody's not grieving because they are, they just grieve in different ways and there's nothing wrong with that" (24: 781-783). As this mother suggested, it is important for bereaved parents to accept each other's grieving styles. When parents are able to accept and appreciate how the other copes, they are better able to connect and share the loss as a couple.

*Compromising.* A second way bereaved parents managed the tension of grieving together-grieving apart was to partially honor their own grieving needs and the needs of their partner, which parallels Baxter and Montgomery's (1996) praxical pattern of balance. According to Baxter and Montgomery (1996) relational partners engage in a praxical pattern of balance when they partly meet the ends of each pole of the tension. For instance, bereaved parents would participate in certain activities they believed were important to their spouse in order to grieve together with their spouse. At the same time, parents would refrain from participating in some of

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3 these activities in order to meet their own grieving needs. Even though he did not need to go to  
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5 the cemetery as often, this father would sometimes visit the graves of his infant children with his  
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8 wife because it allowed them to share their loss together:  
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10 If we go up to the cemetery, uh, she goes up a lot more often than I do, uh it's just not  
11  
12 one of the things that I cherish but I'll do it because I need to, and if that's what she  
13  
14 wants me to do I'll do it. (12: 482-484)  
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17 By going to the cemetery with his wife, this father accommodated his wife's needs. At the same  
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19 time, he does not always go to the cemetery with her in order to meet his own grieving needs.  
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22 *Seeking outside help.* The final way bereaved parents managed the tension of grieving  
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24 together-grieving apart was to seek outside help in order to cope with and understand their  
25  
26 dissimilar grieving. By seeking outside help parents were able to accept one another's grieving  
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28 needs and eventually grieve together as a couple. Parents' actions emulated the praxical pattern  
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30 of spiraling inversion as they alternated back and forth between the poles of a contradiction,  
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32 privileging each pole at a different point in time. With the help of either a professional counselor  
33  
34 or a bereavement support group, parents reported they were able to understand why they grieved  
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36 so differently from each other, which later allowed them to reconnect and grieve more as a  
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38 couple. One mother discussed how she and her husband needed outside help because  
39  
40 communicating about their toddler son's death was difficult:  
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45 We had a lot of very difficult times after Peyton died where we were just not connecting  
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47 at all. It got to the point where we talked very little and ended up going and having some  
48  
49 marriage counseling together and then separately. (24: 229-231)  
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53 By seeing a counselor as a couple and as individuals, this couple was able to work through their  
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55 difficulties and eventually talk with each other about their son's death. For this couple, and many  
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GRIEVING TOGETHER 18

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3 other bereaved parents, talking with one another about their child's death can be a problematic  
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5 endeavor. Parents' struggle to communicate with one another about their child's death is at the  
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7 heart of the second contradiction, which we labeled openness-closedness.  
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### 10 *Openness-Closedness*

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12 Interconnected with the tension of grieving together-grieving apart, the tension of  
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14 openness-closedness was animated by bereaved parents' concurrent needs to both talk and not  
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16 talk with each other about their child's death. For parents, competing needs to be open and yet be  
17  
18 closed about their child's death influenced parents' ability to grieve together and apart. Parents  
19  
20 experienced the contradiction of openness-closedness in two ways: (a) both partners needed to be  
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22 open and closed; and (b) one parent wanted to be open about the child's death and the other  
23  
24 parent wanted to be closed.  
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29 *Both parents are open and closed.* Given that the death of a child is profoundly painful,  
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31 parents indicated that they and their spouse needed to communicate about their child's death in  
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33 order to share their loss together. At the same time, the pain was often so great that parents  
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35 believed it necessary to be closed with each other in order to give each other space. One father,  
36  
37 whose young daughter died in an accident, commented that although couples should talk about  
38  
39 their child's death they should not push one another to talk. When asked what advice he would  
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41 give newly bereaved couples on communicating with each other, he stated:  
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46 Don't force the issue with each other. There were times where I knew she needed  
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48 consoling but I wasn't to the point where I could deal with it. . . .There were times where  
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50 it was like, you wonder how come she's not coming and talking to me? That's why you  
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52 still have to have the communication open but you need the space also. (11: 776-781)  
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3 As this father suggested, communicating with a spouse about their child's death may involve  
4 both the occurrence and absence of dialogue. Whereas talking about their child's death with one  
5 another is supportive and helpful not talking about it and giving one another space to grieve as an  
6 individual is supportive as well.  
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12 Likewise, some parents were closed with their spouse in order to protect themselves or  
13 their spouse from further hurt or pain. One mother claimed she avoided talking with her husband  
14 about their daughter's death as talking about it often upset him:  
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20 We could talk about it, there was an understanding that we were both going through it,  
21 but, I mean, I guess we could communicate on that level, but it also was to the point I  
22 didn't communicate with him on it because it made him more depressed, more everything  
23 that I just couldn't, why talk to him if I know it's only going to make the situation worse?  
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29 (11: 211-215)  
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31 Although this couple was somewhat open with each other about their daughter's death, this  
32 mother chose to be closed with her husband at times in order to prevent additional stress for the  
33 both of them.  
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39 The majority of parents in the present study claimed to be comfortable with both talking  
40 and not talking about their child's death. However, a few parents reported they wanted to be open  
41 with their spouse about their child's death but their spouse did not. For these parents, the  
42 presence of the openness-closedness dialectic was antagonistic (Baxter & Montgomery, 1996),  
43 making it very difficult for parents to grieve together as a couple. Contradictions are considered  
44 antagonistic when relational partners adhere to disparate poles of the tension (Baxter &  
45 Montgomery, 1996). Not surprisingly, antagonistic contradictions create a great deal of conflict  
46 within the relationship.  
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*One marital partner is open; one is closed.* Many parents believed talking with their spouse about their child's death would allow them to support one another and grieve together more as a couple; however, grieving together was difficult when one parent wanted to be open about the death and the other did not. This resulted in parents believing they grieved more on their own than with their partner. One father who wanted to talk about his daughter's death with his wife commented:

My wife has a different emotional capacity when it comes to handling stress. It's just a different personality and so I think in many respects her way of handling things is kind of "What good is talking going to do?" So what might help me would be damaging to her essentially . . . but I'd like to talk about it. (1: 258-264)

Even though talking would be helpful for him, this father chose to be closed with his wife because of her desire to not talk about the death. As a result, it was difficult for them to share their loss together.

Changes in a spouse's communication following a child's death created problems for couples as well. A bereaved mother recalled that she and her husband could talk openly with each other prior to their son's death, "We did a lot of communicating before. Afterwards it was, I knew he was hurting and he knew I was hurting, so, you just leave it alone" (10: 50-51). Because each was in so much pain, this mother and her husband did not talk with each other as they did prior to their son's death. Not talking about his death made it even more difficult for this couple to grieve together, leaving them to grieve more apart.

#### *Negotiation of openness-closedness*

Bereaved parents managed the tension of openness-closedness in three ways. For parents, being closed with their spouse and open with someone else, such as a friend or therapist, allowed

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3 them to both talk and not talk about their child's death. Parents also negotiated this tension by  
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5 being closed with each other verbally but open with each other nonverbally. Finally, parents  
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7 worked to accept each other's need to be open or closed about their child's death.  
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11 *Opens with others; closed with spouses.* Since it was sometimes painful to talk with one  
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13 another about their child's death, parents chose to talk to friends or family members instead. By  
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15 being open with others, parents met their own needs to talk about the death and at the same time  
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17 honored their partner's need to be closed about the death. Parents' actions parallel Baxter and  
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19 Montgomery's (1996) praxical pattern of segmentation. Segmentation, a diachronic pattern,  
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21 occurs when relational partners' privilege one pole of the tension based upon the topic or subject  
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23 matter (Baxter, 2004; Baxter & Montgomery, 1996). One father discussed how he was closed  
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25 with his wife because she did not want to talk about his daughter's death and is open instead to a  
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27 professional psychologist: "it's [talking to a psychologist] a way for me to clean out all the things  
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29 that I never really had an actual chance to actually do" (1: 327-328). By talking with a  
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31 psychologist, this father is able to work through his grief and at the same time honor his wife's  
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33 desire to not talk about the death.  
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39 Talking with supportive family and friends was especially common for parents who  
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41 believed that their spouse was unwilling to be open about their child's death. For instance,  
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43 because she could not talk with her husband about their son's death, this mother was open with  
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45 her own mother:  
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48 So when he wasn't giving me what I needed I would call those that did and talk about it.

49 My mom was a great one for support as far as I'd say "Mom, I'm ready to leave him.

50 He's driving me wild." She'd say "well, you know, give him time". . . .that helped me a  
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lot because I had other avenues and places to go . . . but I wanted it from Kyle too. (24: 356-363)

Being able to disclose to others, such as her mother, was helpful for this participant; nevertheless, she indicated that she wanted to talk about it with her husband too.

*Closed verbally; open nonverbally.* As we discussed above, a number of parents found it difficult to be verbally open with each other about their child's death. As a result, parents were closed with each other verbally, but shared thoughts and feelings nonverbally. It is important to note that parents' nonverbal communication allowed them to be open *to* and yet closed *with* one another. Baxter and Montgomery (1996) make a clear distinction between openness with and openness to, claiming that openness "with" involves partners self-disclosing information whereas openness "to" involves partners being responsive and receptive to each other's disclosures. Thus, even though some bereaved parents did not verbally disclose information they were receptive to their spouse's nonverbal communication.

Parents' method of negotiation resembles Baxter and Montgomery's (1996) praxical pattern of recalibration. Recalibration is characterized by relational partners minimizing tensions through the creation of an integrated and temporary solution (Baxter & Montgomery, 1996). For example, one couple discussed how they communicated primarily through letter writing as verbal communication about their son's death was difficult:

Alicia: We finally wrote down, I wrote down everything on my mind and left the paper for him. And then he wrote down everything on his mind. And that's finally how we got going again. But it was tough for a long time. It was very tough.

Jeff: Every now and then we still just don't communicate well. So every now and then



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we'll just write something and leave it for the other person. And then it gets it out in the air. I guess I'm not much to talk and she isn't either and that's not good. But it's really important after you lose a child to discuss it. But we just didn't. (30: 239-245)

As this couple indicated, writing out their thoughts and feelings allowed them to talk about their grief which in turn helped them to grieve their loss together.

Parents also discussed how touch allowed them to be open to their partner when they or their partner could not be open verbally. One father explained how he and his wife used handholding to emotionally connect following the death of their adult daughter. When asked to describe communication between the two of them after her death he remarked:

I think a lot of it's nonverbal. I think we still, even to this day, we'll hold hands a lot, even in church. So, I think a lot of it's nonverbal. I think we think about the same things but I don't think we do a lot of verbalization. (9: 115-117)

According to this father, verbalization of feelings and emotions are not always necessary as he and his wife are able to communicate them nonverbally. Through nonverbal communication, they are able to connect and share their loss together.

*Accepting each other's communication.* The final way parents managed the tension of openness-closedness was similar to how they managed the tension of grieving together-grieving apart in that parents accepted how their partner communicated about their child's death. Parents did so by framing each other's need to be either open or closed as part of their spouse's grieving style. Parents' method of managing the tension this way is similar to Baxter and Montgomery's (1996) praxical pattern of reaffirmation. Accepting each other's communication about their child's death was not easy for parents but many believed they were able to do so with the passage

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3 of time. For instance, one mother discussed how she learned to appreciate her husband's  
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5 communication style even though it differed from her own:  
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8 I think just sitting down and watching the Gary Smalley tapes led both of us to  
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10 acceptance of our communication styles and allowing each other to do that without  
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12 recrimination or being angry or saying "well I don't understand why you do that." I think  
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14 just his unspoken support for whatever I needed to do to help myself and mine for him  
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17 (31: 518-521).  
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20 Even though they had divergent approaches to grieving and talking about their son's death, this  
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22 mother indicated that she was able to understand their differences. Another mother commented  
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24 on how she was able to give her husband the space he needed to grieve, even though his way of  
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26 grieving was different from her own, "I would never have survived if I hadn't worked through it,  
27  
28 but that was me. That's what I had to learn to accept. My way was not going to be his way" (23:  
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30 685-687). As this mother suggested, learning to accept her husband's way of dealing with their  
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32 daughter's death was not easy, but it was something she believed she had to do. By validating  
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34 their spouses' needs, these mothers were able to create a safe and comfortable space where they  
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36 could later connect and grieve together.  
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#### 40 Discussion

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42 Using relational dialectics theory was important to explore and understand the  
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44 contradictions present as parents grieve and communicate with each other following the loss of a  
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46 child. We identified two interrelated contradictions of grieving together-grieving apart and  
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48 managing openness-closedness in the discourse of bereaved parents. In his review of parental  
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50 bereavement scholarship, Oliver (1999) argued that more comprehensive and theoretically driven  
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52 research was needed concerning the influence of dissimilar grieving on bereaved parents' marital  
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relationships and our findings help answer this call. Several scholars have argued that incongruent grieving styles can create marital distress for grieving parents (Dyegrov & Dyegrov, 1999; Gilbert, 1989; Schwab, 1992). We believe that relational dialectics provides a more nuanced view of what appear to be divergent grieving styles and we identified that parents align with both poles of the contradictions at different times. Rather than prescribe that parents try to force themselves to grieve the death of a child in the same way, we agree with Oliver (1999) who argued that dissimilar grieving patterns may actually allow parents to support one another and that researchers should investigate the potential benefits of incongruent grieving.

By using a relational dialectics perspective, we were able to see how some parents who experienced dissimilar grieving styles framed this as positive and helpful for their relationship. In particular, parents believed that their differences in grieving allowed them to support and comfort one another during a very difficult time. By viewing their dissimilar ways of grieving as complementary rather than oppositional, parents were able to negotiate and manage a potentially destructive and harmful contradiction. Further, by working to accept and embrace each other's individual way of grieving, parents were able to reconnect and share their loss together.

Bereaved parents' management of the grieving together-grieving apart contradiction speaks strongly to how transformative and empowering certain praxical patterns can be for relational partners (Baxter, 2006; Baxter & Montgomery, 1996). As Baxter and Montgomery (1996) suggested, praxical patterns such as reaffirmation facilitate relational growth and understanding because they allow partners to embrace and appreciate the inherent richness and depth of contradictions. Bereaved parents taking part in this study demonstrated that it is possible for relational partners to accept and even appreciate the opportunities presented by individual and seemingly competing needs to grieve differently.

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In terms of the second contradiction of openness-closedness, in line with other scholars studying parental bereavement (Rando, 1986a; Schwab, 1992), we also found that bereaved parents wanted to talk with each other about their child's death. While bereaved parents perceived openness to be important, we also discovered that they believed it equally necessary to embrace closedness in order to give one another space to grieve as individuals. Even as the parents in the present study expressed the need to be both open and closed, they repeatedly advised other bereaved parents to be open with their spouse about their child's death as much as possible. In this prescription for openness, parents contradicted their own practices as few reported being consistently open with their partner about their child's death. Rather, these parents were selective concerning the timing and content of communication with their spouse about the death of the child.

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Parents' advice that other bereaved parents be open with one another indicates that openness is viewed as central to being able to grieve a child's death together. It appears that parents in the present study express the predominant cultural notion that "good" and "healthy" relationships are characterized by complete openness and dialogue (Baxter & Montgomery, 1996). As Baxter and Montgomery (1996) argued, American culture prizes openness and self-disclosure over closedness and candor and this ideology dominates our conception of healthy and functional relationships.

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While researchers such as Pennebaker (1990) have provided compelling evidence regarding the therapeutic and healing nature of openness and self-disclosure, our findings suggest that selective closedness between bereaved parents may be healing as well, particularly if it allows parents to meet their individuals grieving needs and protects one another from additional pain. Our findings also suggest that parents who struggled to be verbally open *with*

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each other could be open *to* each through nonverbal communication. In particular, parents in our study were able to connect and grieve together by holding hands, hugging one another, and writing each other letters. These parents illustrated that openness comes in many forms and that one can communicate with their spouse and simultaneously meet individual needs for autonomy and difference.

#### *Limitations and Call for Future Research*

Limitations of the present study need to be addressed in future projects. Our study primarily reflects the grief experiences of Caucasians and does not speak to the possible influence culture and ethnicity would have on one's experiences and expressions of grief. Undoubtedly, a parent's ethnic and cultural background would influence how he or she grieves and communicates with others. As such, future researchers must account for cultural and ethnic differences by including the voices and perspectives of more diverse research participants. This is a challenge for this research team, as we need to find ways to gain access to different communities and diverse participants. We intend to do so by engaging in even more rigorous recruitment practices, in hopes we will be able to find more diverse participants.

In future research we desire to interview even more parents who are not participating in bereavement support groups. The majority of parents in the present study participated in a support group at the time of the interview or attended a support group at one point in time. As Gottlieb, Lang, and Amsel (1996) asserted, bereaved parents who participate in bereavement support groups are over-represented within parental bereavement literature and researchers need to more fully investigate the experiences of parents who do not attend bereavement support groups. While we made extensive efforts to recruit parents who were not participating in support groups we struggled to locate parents who were willing to participate in the first place. When

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3 conducting future research on bereaved parents we plan to exert even more of an effort to recruit  
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5 parents who have not attended a bereavement support group as their experiences of  
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7 communicating with each other after a child's death may be very different from parents who  
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9 have attended support groups.  
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### 12 Applications

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15 Bereaved parents who volunteered to take part in the present study demonstrated a  
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17 remarkable ability to accept and work within one another's grieving differences in an effort to  
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19 manage conflict and stay connected to each other. Our participants demonstrated that granting  
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21 each other room to grieve together and apart and managing openness and closedness was a  
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23 powerful way of giving one another love and support. In addition, these parents illustrated how  
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25 support may be communicated nonverbally when verbal messages prove to be difficult or  
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27 inadequate.  
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34 We hope that bereaved parents will find the experiences of our participants helpful and  
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36 develop their own ways to honor both their own and their partner's grieving needs. Our data  
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38 suggest that privileging the needs of one partner over the other may bring additional stress and  
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40 conflict to the marital relationship in a time when marital partners need each other the most. We  
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42 encourage bereaved parents to find creative and resourceful ways to connect as a couple while  
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44 recognizing and accepting their individual needs. For example, performing a ritual of  
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46 remembrance, such as planting a tree together or building a memory box, may allow parents to  
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48 share their grief without requiring disclosure or overt emotional expression at a time that would  
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50 be difficult for one or both of them.  
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Likewise, we encourage parents to find individuals in whom they can confide about their child's death. While most parents in our study did talk with their spouse, they recognized how exhausting and draining it was for both of them to frequently discuss their child's death. Therefore, support groups, counselors, clergy, and trusted friends were often a great source of support and relief for our participants. We encourage other grieving parents to find formal and/or informal sources of support in addition to their spouse. This can be challenging, as friends and family members often withdraw from bereaved parents (Brabant, Forsyth, & McFarlain, 1995; Hastings, 2000; Toller, 2005). Thus, formal support sources, such as counselors or clergy, may be a safer, if not necessary, outlet for grieving parents. Support groups like The Compassionate Friends (2007) also provide bereaved parents an opportunity to share their pain with others who have also experienced the death of a child. The Compassionate Friends is a national, peer-facilitated organization with local chapters across the United States. While in-person support groups can be very helpful for bereaved parents, online support groups provide an additional opportunity for parents to find individuals who will listen and support them during those times when grieving apart is more comforting for one of both partners (Grief Recovery Online, 2006).

We would recommend that bereaved parents consider seeking help from professionals trained to work with those who have lost a child. Our results provide empirically-based suggestions for professionals working with bereaved parents. The perspectives of our participants can help other grieving parents understand that differing and incongruent ways of grieving can be a benefit to their relationship. Likewise, professionals need to help bereaved parents recognize that there is no one right way to grieve and that giving each other space to grieve as individuals is important. Finally, professionals also need to encourage parents to find

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useful ways of connecting and grieving that honor parents' needs to be both open and closed about their child's death.

While counselors, clergy, and support groups can help educate bereaved parents about dissimilar grieving and managing openness-closedness, bereaved parents who do not find or avail themselves of these resources need this information as well. We believe that written materials need to be created and distributed to bereaved parents without formal support networks. Parents interviewed in this present study suggested that funeral homes and hospitals are well positioned to provide such materials.

Based on the results of this and other empirical work, the first author is undertaking a project to develop written materials which discuss how parents can manage the contradictions we identified. She has been in contact with One Caring Place, an organization that publishes CareNotes, which are booklets that are distributed in the majority of hospitals within the United States. According to their website, over 50 million CareNotes have been distributed to date (One Caring Place, 2006). She has offered to develop CareNotes targeted toward helping bereaved couples communicate and support one another. We believe this is one viable way of getting our study results out to bereaved parents and members of their social networks.

The death of a child is devastating and earth shattering for parents. At a time when they need each other most, parents are stripped of their strength and resources. As our study reveals, it is possible for bereaved parents to interact, support, and help one another through this most difficult of times. By understanding and accepting one another's grieving style, giving each other the space they need to grieve, parents can and will be able to share their loss together.



## References

- Alderman, L., Chisholm, J., Denmark, F., & Salbod, S. (1998). Bereavement and stress of a miscarriage: As it affects the couple. *Omega*, 37, 317-327.
- Attig, T. (1996). *How we grieve: Re-learning the world*. New York: Oxford-University.
- Baxter, L. A. (2004). Relationships as dialogues. *Personal Relationships*, 11, 1-22.
- Baxter, L. A. (2006). Relational dialectics theory: Multivocal dialogues of family communication. In D. O. Braithwaite & L. A. Baxter (Eds.), *Engaging theories in family communication: Multiple perspectives* (pp. 130-145). Thousand Oaks, CA: Sage.
- Baxter, L. A., & Babbie, E. R. (2004). *The basics of communication research*. Belmont, CA: Wadsworth.
- Baxter, L. A., & Braithwaite, D. O. ( forthcoming). Relational dialectics theory: Discursive things that go bump in the night. In D. O. Braithwaite & L. A. Baxter (Eds.), *Engaging theories in interpersonal communication: Multiple perspectives*. Thousand Oaks, CA: Sage.
- Baxter, L. A., Braithwaite, D. O., Bryant, L. E., & Wagner, A. (2004). Stepchildren's perceptions of the contradictions in communication with stepparents. *Journal of Social and Personal Relationships*, 21, 447-467.
- Baxter, L. A., Braithwaite, D. O., Golish, T. D., & Olson, L. N. (2002). Contradictions of interactions for wives of elderly husbands with adult dementia. *Journal of Applied Communication Research*, 30, 1-26.
- Baxter, L. A., & Montgomery, B. M. (1996). *Relating: Dialogues and dialectics*. New York: Guilford.
- Becvar, D. S. (2001). *In the presence of grief*. New York: Guilford Press.

Running Head:

GRIEVING TOGETHER 32

1  
2  
3 Bosticco, C., & Thompson, T. L. (2005). Narratives and story telling in coping with grief and  
4  
5 bereavement. *Omega*, 51, 1-16.  
6

7  
8 Brabant, S., Forsyth, C., & McFarlain, G. (1995). Life after the death of a child: Initial and long  
9  
10 term support from others. *Omega*, 31, 67-85.  
11

12 Bryant, L. E. (2003). *Stepchildren's perceptions of the contradictions in communication*  
13  
14 *with stepfamilies formed post bereavement*. Unpublished doctoral dissertation, University  
15  
16 of Nebraska-Lincoln.  
17

18  
19 Carroll, R. & Shaefer, S. (1994). Similarities and differences in spouses coping with  
20  
21 SIDS. *Omega*, 28, 273-284.  
22

23  
24 The Compassionate Friends (n.d.). Retrieved April 16, 2007 from,  
25  
26 <http://www.compassionatefriends.org/>  
27

28  
29 Cook, J. A. (1988). Dad's double-binds: Rethinking fathers' bereavement from a men's studies  
30  
31 perspective. *Journal of Contemporary Ethnography*, 17, 285-308.  
32

33  
34 Creswell, J. W. (2003). *Research design: Qualitative, quantitative, and mixed methods*  
35  
36 *approaches* (2nd ed). Thousand Oaks, CA: Sage.  
37

38  
39 Creswell, J. W. (2007). *Qualitative inquiry and research design: Choosing among five*  
40  
41 *Traditions* (2nd ed.). Thousand Oaks, CA: Sage.  
42

43  
44 DeVries, B., Dalla Lana, R., & Falck, V. T. (1994). Parental bereavement over the life  
45  
46 course: A theoretical intersection and empirical review. *Omega*, 29, 47-69.  
47

48  
49 Dyregrov, A., & Dyregrov, K. (1999). Long-term impact of sudden infant death: A 12-to 15-year  
50  
51 follow-up. *Death Studies*, 23, 635-661.  
52

Running Head:

GRIEVING TOGETHER 33

- 1  
2  
3 Fontana, A., & Frey, J. H. (1994). Interviewing: The art of science. In N. K. Denzin & Y.S.  
4  
5 Lincoln (Eds.), *Handbook of qualitative research* (pp. 361-376). Thousand Oaks, CA:  
6  
7 Sage.  
8  
9
- 10 Gamino, L. A, Sewell, K. W., & Easterling, L. W. (1998). Scott & White Grief Study: An  
11  
12 empirical test of predictors of intensified mourning. *Death Studies*, 22, 333-355.  
13
- 14 Gilbert, K. R. (1989). Interactive grief and coping in the marital dyad. *Death Studies*, 13, 605-  
15  
16 626.  
17  
18
- 19 Golish, T. D., & Powell, K. A. (2003). 'Ambiguous loss': Managing the dialectics of grief  
20  
21 associated with premature birth. *Journal of Social and Personal Relationships*, 20,  
22  
23 309-334.  
24  
25
- 26 Gottlieb, L. N., Lang, A., & Amsel, R. (1996). The long-term effects of grief on marital intimacy  
27  
28 following an infant's death. *Omega*, 33, 1-19.  
29  
30
- 31 Grief Recovery Online (2005). Retrieved April 16, 2007 from <http://www.groww.com/>  
32  
33
- 34 Hastings, S. (2000). Self-disclosure and identity management by bereaved parents.  
35  
36 *Communication Studies*, 51, 352-371.  
37  
38
- 39 Huston, T. L, Surra, C. A., Fitzgerald, N. M, & Cate, R. M. (1981). From courtship to  
40  
41 marriage: Mate selection as an interpersonal process. In S. W. Duck & R. Gilmour (Eds.),  
42  
43 *Personal relationships 2: Developing personal relationships* (pp. 53-88). London:  
44  
45 Academic Press.  
46  
47
- 48 Janoff-Bulman, R. (1992). *Shattered assumptions*. New York: Free Press.  
49
- 50 Johnson, S. (1987). *After a child dies-counseling bereaved families*. New York: Springer  
51  
52 Publishing Company.  
53  
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Running Head:

GRIEVING TOGETHER 34

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60

Leininger, M. (1994). Evaluation criteria and critique of qualitative research studies. In J. M.

Morse (Ed.), *Critical issues in qualitative research methods* (pp. 95-115). Thousand Oaks, CA: Sage.

Mandell, F., McNaulty, E., & Reece, R. (1980). Observations of paternal response to sudden unanticipated infant death. *Pediatrics*, *65*, 221-225.

Martin, T.L., & Doka, K.J. (1996). Masculine grief. In K.J. Doka (Ed.). *Living with grief: After sudden loss* (pp.221-241). Washington, D.C.: Hospice Foundation of America.

Metts, S., Sprecher, S., & Cupach, W. R. (1991). Retrospective self-reports. In B. M. Montgomery & S. Duck (Eds.), *Studying interpersonal interaction* (pp. 162-178). New York: Guilford Press.

Miles, M. S. (1985). Emotional symptoms and physical health in bereaved parents. *Nursing Research*, *34*, 76-81.

Miles, M. B., & Huberman, A. M. (1994). *Qualitative data analysis* (2nd ed.). Thousand Oaks, CA: Sage.

Nadeau, J. W. (1998). *Families making sense of death*. Thousand Oaks, CA: Sage.

Neimeyer, R. A., Prigerson, H. G., & Davies, B. (2002). Mourning and meaning. *American Behavioral Scientist*, *46*, 235-251.

Oliver, L. E. (1999). Effects of a child's death on the marital relationship: A review. *Omega*, *39*, 197-227.

One Caring Place (n.d.) Retrieved April 16, 2007, from <http://www.carenotes.com/>

Pennebaker, J. W. (1990). *Opening up: The healing powers of confiding in others*. New York: William Morrow.

Running Head:

GRIEVING TOGETHER 35

- 1  
2  
3 Rando, T. A. (1986a). The unique issues and impact of the death of a child. In T. A. Rando (Ed.),  
4  
5 *Parental loss of a child* (pp. 5-43). Champaign, IL: Research Press.  
6  
7  
8 Rando, T. A. (1986b). Individual and couples treatment following the death of a child. In T. A.  
9  
10 Rando (Ed.), *Parental loss of a child* (pp. 341-413). Champaign, IL: Research Press  
11  
12 Company.  
13  
14  
15 Riches, G., & Dawson, P. (2000). *An intimate loneliness: Supporting bereaved parents and*  
16  
17 *siblings*. Buckingham: Open University Press.  
18  
19  
20 Rosenblatt, P. C. (2000). *Parent grief: Narratives of loss and relationship*. Philadelphia:  
21  
22 Brunner-Mazel.  
23  
24  
25 Rosenblatt, P.C., Spoentgen, P., Karis, T., Dahl, C., Kaiser, T., & Elde, C. (1991). Difficulties in  
26  
27 supporting the bereaved. *Omega*, 23, 119-128.  
28  
29  
30 Schwab, R. (1990). Paternal and maternal coping with the death of a child. *Death Studies*, 14,  
31  
32 407-422.  
33  
34  
35 Schwab, R. (1992). Effects of a child's death on the marital relationship: A preliminary study.  
36  
37 *Death Studies*, 16, 141-154.  
38  
39  
40 Schwab, R. (1996). Gender differences in parental grief. *Death Studies*, 20, 103-113.  
41  
42  
43 Sculley, E. J. (1985). Men and grieving. In E. M. Stern (Ed.), *Psychotherapy and the grieving*  
44  
45 *patient* (pp. 95-100). New York: The Haworth Press.  
46  
47  
48 Sedney, M. A., Baker, J. E., & Gross, E. (1994). "The story" of a death: Therapeutic  
49  
50 considerations with bereaved families. *Journal of Marital and Family Therapy*,  
51  
52 20, 287-296.  
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Running Head:

GRIEVING TOGETHER 36

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- Smith, J. A. (1995). Semi-structured interviewing and qualitative analysis. In J. A. Smith, R. Harre, & L.V. Langenhove (Eds.), *Rethinking methods in psychology* (pp. 9-26). Thousand Oaks, CA: Sage.
- Spradley, J. P. (1979). *The ethnographic interview*. New York: Holt, Rinehart & Winston.
- Strauss, A., & Corbin, J. (1998). *Basics of qualitative research: Techniques and procedures for developing grounded theory* (2nd ed.). Thousand Oaks, CA: Sage.
- Tashakkori, A., & Teddlie, C. (2003). *Mixed methodology: Combining qualitative and quantitative approaches*. Thousand Oaks, CA: Sage.
- Toller, P. W. (2005). Negotiation of dialectical contradictions by parents who have experienced the death of a child. *Journal of Applied Communication Research*, 33, 46-66.
- Wheeler, I. (2001). Parental bereavement: The crisis of meaning. *Death Studies*, 25, 51-66.

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*Interview questions*

1. Please tell me a little bit about \_\_\_\_\_ [child's name] when \_\_\_\_\_ [child's name] was alive.
  - a. What were some of \_\_\_\_\_ [child's name] interests?
  - b. How would you describe \_\_\_\_\_ [child's name]? What was he (she) like?
2. If you are willing, please tell me about \_\_\_\_\_'s [child's name] death. As much as you are comfortable, tell me about what happened.
3. What was the most difficult part of communicating with \_\_\_\_\_ [spouse's name] about \_\_\_\_\_ [child's name] death?
  - a. How, if at all, did you and \_\_\_\_\_ [spouse's name] handle these difficulties?
  - b. What, if anything, do you wish you could have changed about what you did or said?
  - c. What, if anything, do you wish you could have changed about what your husband/wife did or said?
4. What was the best/most positive part of communicating with \_\_\_\_\_ [spouse's name] about \_\_\_\_\_ [child's name] death?
  - a. Why do you think communicating with \_\_\_\_\_ [spouse's name] about this was positive?
5. What were some of the different ways you communicated with \_\_\_\_\_ [spouse's name] about \_\_\_\_\_ [child's name] death?
  - a. Why did you communicate with your spouse in that particular way?
  - b. [For each one mentioned] How helpful was it to communicate this way?
6. How, did you and \_\_\_\_\_ [spouse's name] try to support one another after \_\_\_\_\_ [child's name] death?
  - a. How effective was this?
  - b. What, if anything, do you wish you could have changed about what you did or said?
  - c. What, if anything, do you wish you could have changed about what your husband/wife did or said?
7. After \_\_\_\_\_ [child's name] died, what issues, if any, created conflict between you and \_\_\_\_\_ [spouse's name]?
  - a. How did you and \_\_\_\_\_ [spouse's name] handle the conflict?
8. What were some of the biggest changes you noticed about yourself after \_\_\_\_\_'s [child's name] death?
  - a. How likely were you to communicate with \_\_\_\_\_ [spouse's name] about these changes?
9. What were some of the biggest changes you noticed about your spouse after \_\_\_\_\_'s [child's name] death?
  - a. How likely was your spouse to communicate with you about these changes?
10. If there are any routines or traditions that you and \_\_\_\_\_ [spouse's name] started after \_\_\_\_\_ [child's name] death, will you tell me about these?
  - a. Why did you and \_\_\_\_\_ [spouse's name] start these routines and traditions?

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3 b. How, if at all, have other family routines or traditions changed since \_\_\_\_ [child's  
4 name] died?  
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7 11. If you were to give advice to newly bereaved parents about communicating with one another  
8 after the death of their child, what would you tell them to say or do? [For each prescription, ask  
9 why]  
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11 a. What should they not say do? [For each prescription, ask why]  
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13 12. Are there any other important aspects of your communication with your spouse following  
14 the death of a child that you believe I should know in order to understand your experience?  
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