2011

Bereaved Parents' Experiences of Supportive and Unsupportive Communication

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Abstract: This study examines bereaved parents' experiences of supportive and unsupportive communication using the optimal matching model of stress and social support (Cutrona & Russell, 1990). Analysis of the interviews revealed that parents described action-facilitating support as supportive, although information-giving was experienced as unsupportive. Regarding nurturant support, bereaved parents felt emotionally supported when family and friends were willing to talk about their deceased child. Parents also described network support as helping them cope with their grief. The results of this study indicate that listening, being present, and honoring the ongoing connection parents have with their deceased child are key ways in which family and friends can communicate support to parents during a difficult and painful time.

One of the most painful and life-altering events that a person can experience is the death of his or her child (Rando, 1988). A colossal attack on a parent's sense of self (Rando, 1991), a child's death challenges parents' beliefs in their abilities to provide and protect their children (Klass & Marwit, 1988–1989). Using the metaphor of an amputee (Klass & Marwitt, 1988–1989), a parent who loses a child essentially loses a part of themselves. A child's death results in a drastic change to a parent's identity as they can no longer perform their parental role (Toller, 2008), further compounding parents' feelings of loss and devastation.

In order to try and find meaning and cope, bereaved parents frequently need to share their grief (Hastings, 2000; Hastings, Musambira, & Hoover, 2007) as talking with others allows parents to affirm and authenticate their grief experience (Becvar, 2001). Even though talking with others about their child's death can be healing for bereaved parents, family and friends often struggle to understand just how devastating and life-altering a child's death is (Riches & Dawson, 1996) and the support bereaved parents expected to receive from family and friends is often missing as these individuals withdraw from parents, avoid conversation or say hurtful comments (Dyregrov, 2003–2004). As Rosenblatt (2000) suggested, a deep divide exists between bereaved parents and the rest of the world as parents are engrossed in their grief. This gap is further widened as friends and family view grief as parents' responsibility to work through (Rosenblatt, 2000).

Bereaved individuals may not receive support from friends and family members simply because these individuals are also grieving (Brabant, Forsyth, & McFarlain, 1995). Moreover, the support offered to bereaved parents may be short-lived and not sustained for long periods of time (Brabant et al., 1995). This is unfortunate as many bereaved parents may experience grief throughout their lifetime (Rosenblatt, 1996). As a result, this withdrawal of support leaves parents feeling ostracized and stigmatized by others (Dyregrov, 2003–2004; Hastings, 2000; Riches & Dawson, 1996; Toller, 2008). In addition, the lack of support from others significantly interferes with parents' grief work and ability to cope (Brabant et al., 1995) as being able to openly talk about their deceased child legitimizes and supports a parent's grief experience (Becvar, 2001) and allows parents to create a new sense of self (Hastings, 2000).

Two recent studies provide direct evidence that support from family and friends greatly impacts parents' grief work. In a study of parents whose children died from cancer, Kreicbergs, Lannen, Onelov, and

Wolfe (2007) found that parents who received support from family, friends, and medical staff before and after their child's death were more likely to have worked through their grief. Likewise, Laakso and Paunonen-Ilmonen (2002) discovered that bereaved mothers who received positive social support, such as being able to talk about the child's death over and over, were able to better cope with their grief.

Although scholars have examined the social support experiences of bereaved parents, questions still remain. In particular, researchers have yet to more fully examine what specific forms of social support bereaved parents find helpful and comforting. For instance, Laakso and Paunonen-Ilmonen (2002) asked bereaved mothers to differentiate between positive and negative support from family and friends; however, they focused only on bereaved mothers and did not account for fathers' experiences. Similarly, Dyregrov's (2003–2004) study focused primarily on what bereaved parents experienced as unhelpful social support and how they coped with this negative support. While these findings are insightful, more research is needed to determine what specific forms of social support bereaved parents find helpful and how these forms of support are communicated.

Because communication plays a key role in the transfer of social support, examining how support is effectively communicated to bereaved parents may provide their friends and family with better insight into how they can communicate support more successfully (Burleson, Albrecht, Goldsmith, & Sarason, 1994). Likewise, gaining a more complete understanding of what constitutes supportive and unsupportive communication within the context of parental grief may also provide others with knowledge of how to provide support in other grief contexts such as spousal or parental loss. As Servaty-Seib and Burleson (2007) argued, it is important for scholars to study what constitutes good support over negative support in order to better determine how that support facilitates grieving. Therefore, the intent of this study is to identify what specific forms of support are experienced as comforting and helpful by those who are grieving the devastating loss of a child as well as identifying specific ways that family and friends can effectively and appropriately communicate this support to parents.

Social Support

Albrecht and Adelman (1987) define social support as "verbal and nonverbal communication between recipients and providers that reduces uncertainty about the situation, the self, the other, or the relationship and functions to enhance a perception of personal control in one's experience" (p. 19). Communication plays a central role in the transmission of social support between individuals (Burleson et al., 1994) and to study social support from a communication perspective means to pay attention to support communicated within and through messages, interactions, and relationships (p. xviii).

A large part of the generated research has focused upon the dimensions or types of social support, and the majority of support research has centered on informational, tangible, esteem, emotional, and social network support (Cohen & Wills, 1985; Cutrona & Russell, 1990). Of the various models of social support, Cutrona and Russell's optimal matching model of stress and social support is frequently used by scholars studying social support (e.g., Braithwaite, Waldron, & Finn, 1999). Cutrona and Russell's model examines how specific types of stress call for specific and targeted forms of social support. In particular, their model takes into consideration whether or not the stressful event was desired and the degree of control individuals have over the stressful event. They argue that the controllability and desirability of the stressful event will determine what forms of social support are needed.

Cutrona and Russell's (1990) model divides social support into two broad categories: action-facilitating support and nurturant support. The purpose of action-facilitating support is to aid the distressed person in resolving the problem and this particular form of support is most beneficial in situations where events are controllable. The intent behind nurturant support, which encompasses both emotional and network

support, is to support and comfort someone without trying to eliminate the source of distress. Nurturant support is believed to be most helpful in situations where the stressful event(s) is out of one's control, such as illness and loss.

As stated earlier, scholars have examined the social support experiences of bereaved parents (Dyregrov, 2003–2004; Laasko & Paunonen-Ilmonen, 2002; Lehman, Ellard, & Wortman, 1986; Wortman & Lehman, 1983) primarily focusing on emotional support. Even though emotional support is the form of social support most consistently perceived as helpful in comforting situations, Burleson and Goldsmith (1998) argue that other beneficial types of communicative support sought by distressed persons warrant consideration. Likewise, Cutrona and Russell (1990) argued that certain situations may require multiple forms of support that go beyond the specifications of their model. Thus, by examining the social support experiences of bereaved parents using Cutrona and Russell's model, scholars will gain insight as to which forms of social support are best suited for supporting grieving parents and which forms are not. As such, the present study examines bereaved parents' experiences of receiving supportive and unsupportive messages using the optimal matching model of stress and social support as a theoretical framework. The primary research questions guiding this study were:

RQ$_1$: What forms of social support, if any, do bereaved parents experience as supportive?

RQ$_2$: What forms of social support, if any, do bereaved parents experience as unsupportive?

Methodology

In order to pay homage to the perspectives of bereaved parents I based the present study within the interpretive tradition (Creswell, 2007). Sampling was purposeful (Tashakori & Teddlie, 2003) and in order to participate in the study parents had to have experienced the death of a child and the child's death had to have occurred at least six months prior to the interview. I limited participation to at least six months past the death in order to better ensure that parents had been engaged in grief work for some time. Upon approval from the university's Institutional Review Board, I recruited participants by visiting two bereavement support groups, the Compassionate Friends and Community Friends. The Compassionate Friends is a peer-led national and international support group that has local, monthly chapter meetings (The Compassionate Friends, n.d.). Community Friends is a local support group that meets monthly at a community hospital. I visited each support group only once and left a sign-up sheet where interested parents could leave their contact information. The sign-up sheets were mailed to me at a later time and upon receiving these sheets I contacted interested parents and set up interview dates and times at their convenience and choice of location.

Participants

Of the 16 parents who participated in the study 12 were women, 4 were men, and all were Caucasian. A total of 12 interviews were conducted, eight taking place with mothers only and four as marital dyads. Thirteen participants were currently married to the biological father/mother of their deceased child, one mother was currently married to someone who was not the biological father of the child, and two mothers were currently divorced. All but one parent was currently participating in a bereavement support group. I intended to conduct all interviews with both parents present as joint interviewing allows participants to co-create and emphasize shared meaning while querying each other for information and clarification (Morris, 2001); however, in several cases only the mother was willing to participate and in three situations the parent was no longer in contact with the child's other biological parent. That more mothers were interested in participating in the study than fathers is not surprising given that men are often more likely to process their grief through activity rather than talking about their grief experience (Martin &

Doka, 1996). In addition, existing gender norms and stereotypes may prohibit men from openly talking about their grief experiences (Martin & Doka, 1996).

The time from the child's death to the interview ranged from 6 months to 29 years, with a mean of 8.2 years. Rosenblatt (1996) argued that for parents, bereavement may be experienced indefinitely and that individuals may often grieve intermittently throughout their lifetime. Therefore, the time elapsed between the child's death and the interview did not raise concern as all parents represented in the present study could vividly recall their experiences of communicating with others following their child's death. The age of the child at the time of death ranged from 5 months to 35 years, with a mean age of 14.1 years of age. Of the 12 interviews conducted, the reported cause of death was as follows: four by suicide (33.3%), three to various illnesses (25%), and five by accidental death (41.7%).

Participation in this study was not limited to a specific cause of death or a specific age at the time of death for a number of reasons. First and foremost, I wanted to more deeply explore the experiences of bereavement and communication from a variety of bereaved parents and felt that limiting participation to a distinct age or cause of death would not allow me to do so. I especially wanted to incorporate the perspectives of parents whose children died as infants and as adults because the grief experience of these parents is frequently minimized or ignored by others (Doka, 1989). According to DeVries, Dalla Lana, and Falck (1994), the death of a child, regardless of age, results in the death of dreams and hopes parents held for that child. Indeed, the death of an infant is the loss of a prospective relationship whereas the death of an adult child is the loss of a relationship that has been nurtured and invested in over several years (Rubin, 1990). Therefore, criteria for participation in the study were flexible in order to attain the stories and experiences of parents who had children die at all ages and stages of life.

Interviewer Procedure

The semi-structured interview guide, located in Appendix A, consisted of various demographic questions followed by open-ended and hypothetical questions. I modeled the interview guide after the retrospective interview technique, which asked parents to describe their communication with friends and family members before and after their child's death, as well as the present day (Huston, Surra, Fitzgerald, & Cate, 1981). I chose this method of data collection because asking individuals to reflect upon support provided during a specific event has provided scholars with insightful data regarding support within particular and specific contexts (Burleson, 1994).

Of the 12 interviews conducted, 10 took place in the participants' homes, 1 at a hospital meeting room, and 1 at a local café. To accommodate parents' requests, these two interviews were conducted at a public place and I did not detect differences in these interviews due to location. All of the dyadic interviews were conducted at the couples' home. Because participants were assured that their identities would be kept confidential, pseudonyms are used throughout the study instead of the participants' names or the names of the participants' children. The interviews ranged from 90 minutes to 4 hours, with the average interview lasting about 2 hours.

Data Analysis

After the interview(s) each audiotape was listened to in its entirety. Each audiotape was transcribed verbatim by Toller as quickly as possible after the interview had taken place. All of the audiotapes were number coded, and the transcripts were identified with the corresponding number code as well as pseudonyms.

To better understand how bereaved parents' relationships with family and friends had been impacted by their child's death, parents were asked to describe what communication was like with friends and family before and after their child's death as well as in the present. Once data collection was complete, parents' responses were analyzed using a modified version of the constant-comparative analysis (Strauss & Corbin, 1998). Because parents were asked to describe what individuals said and/or did that were either helpful or unhelpful following their child's death, I used parents' responses to determine if they experienced a particular message or behavior as supportive or not. During this process of open coding, I created two broad categories that I labeled "supportive messages/behaviors" and "unsupportive messages/behaviors." I then used Cutrona and Russell's model as a framework to further guide my analysis during the process of axial coding (Strauss & Corbin, 1998). Throughout this process I compared and contrasted parents' responses to Cutrona and Russell's (1990) optimal matching model of stress and support, as I looked for words and phrases within parents' discourse that were both similar to and different to the categories that Cutrona and Russell used within their model.

To illustrate and support each category, exemplars from the data are used. Transcripts were also compared to the written results section to ensure that this was an accurate representation of participants' experiences. I also checked and rechecked my analysis to ensure consistency of the categories and to identify any alternative explanations of the findings (Miles & Huberman, 1994). To ensure the trustworthiness of the findings (Creswell, 2007), copies of the completed manuscript were mailed to all participants along with a cover letter requesting feedback via e-mail or phone.

Findings

Analysis of the interviews revealed that bereaved parents perceived action-facilitating support as helpful, but only in terms of tangible aid. In terms of nurturant support, bereaved parents experienced emotional support through family and friends' willingness to talk about and remember their deceased child. Bereaved parents also felt that network support was extremely important in helping them cope with this life-altering experience. Finally, analysis of the data revealed that these bereaved parents took an active role in seeking support from others within their social network.

Action-Facilitating Support

To review, Cutrona and Russell (1990) describe action-facilitating support as support intended to aid individuals in ridding themselves of the stress or the origin of the stress itself. Included within action-facilitating support is informational support and tangible aid, which may include advice giving, factual input, and tangible resources/services, such as money or childcare (Cutrona & Russell, 1990). For the bereaved parents in this study, action-facilitating support was deemed helpful only when it came in the form of tangible aid.

Tangible aid

Even though friends and family members could not eliminate bereaved parents' grief and loss, they were able to provide support by helping parents cope with everyday activities at a time when day-to-day functioning was extremely difficult. In the aftermath of their child's death, parents found it nearly impossible to do common, everyday tasks. Sue, a single-mother who lost her son to illness remarked that "you need somebody there, to see to the meals, to greet the people that come to your house, so you don't have to go and answer the door … because you know, it's overwhelming. Those things are very, very helpful …. (1: 44–48).[1] As Sue suggested, having someone take care of their needs while they are initially overwhelmed in their grief is supportive and meaningful to bereaved parents. Likewise, John

remarked that after his son's suicide many people provided tangible assistance on their own initiative and took care of things such as house cleaning and telephone calls:

> People came in, some Sisters just came in and cleaned the house, they just did it, they didn't call and say "we'll be over at three" they just came over and started taking care of business. I thought that was a thoughtful gesture. (5: 32–35)

As John suggested, friends and family who initiated and carried out these various tangible acts offered a great deal of support to parents as they simply did not have the energy or wherewithal to accomplish these tasks themselves.

Informational support

Even though tangible assistance was reported as helpful by parents, the majority perceived informational support, another form of action-facilitating support, as unsupportive in nature. Cutrona and Russell (1990) describe informational support as advice with the intent of solving the problem or source of stress. In the present study, friends and family gave parents advice or told them clichés regarding their grief, which only served to frustrate and anger parents. Beth, whose daughter committed suicide, remarked that

> One thing my father-in-law started to say was time heals all wounds, and I was like, what does that mean, because time has stood still! You know, the nights never end, the days never end, and every minute is filled with this agony of pain and guilt … and it was like what does that mean? I'll never get better because time isn't moving. (6: 79–83)

For Beth and many parents, clichés such as this only trivialized the pain parents were experiencing and in essence told them what they should or should not do regarding their loss. In fact, unsolicited advice was given by family and friends so often that both support groups represented in this study often set aside time at their meetings for parents to vent their frustration about hurtful advice or comments they had received. During one of the interviews, Don, a bereaved parent and a cofacilitator of one of the support groups, remarked:

> Every few months someone needs to get this stuff off their chest and they unload about family and friends and the things people say. They are really dumb things, like, "I know just what you are feeling" or one of these clichés, like "she's in a better place now." … It sounds good from somebody's perspective but to a grieving parent it just makes them so mad. (2: 121–126)

As Don indicated, these comments, while possibly well intentioned, did little to comfort bereaved parents. If anything, they only upset parents more.

Many parents were angered by the comments and suggestions from others because they felt these individuals were not entitled to give them advice in the first place. Sara, whose teenage son committed suicide, remarked:

> I had a friend say something recently, something about "I hope you find peace with this or something," and I was like, well, you tell me how to do that, because I'm trying to figure that out … that irritated me, it irritates me for people who haven't had a loss to tell me how to handle my loss. (4: 242–246)

To receive advice on how to cope with her loss was not comforting to parents such as Sara and ultimately left parents feeling judged for how they were handling their grief. Beth offered similar comments, stating:

> People need to know that breathing in and out is about all a newly bereaved person can handle, whether it's the loss of a child or anything. That's it, so they don't need Bible quotes, they don't need clichés, and they don't need to be told how to feel. (6: 271–274)

Beth's comments clearly illustrate that newly bereaved parents do not need support in the form of popular colloquialisms and advice. Rather, as discussed earlier, many bereaved parents needed help in the form of tangible aid. Likewise, bereaved parents also needed a great deal of nurturant support, which is discussed below.

Nurturant Support

Cutrona and Russell (1990) describe nurturant support as support intended to help individuals cope without removing the source of stress. Individuals who provide nurturant support recognize that the problem or source of distress cannot be remedied or eliminated and that the best form of support is to comfort and nurture individuals within the given circumstances. Whereas emotional support provides individuals with expressions of empathy, sympathy, and caring (Cutrona & Russell, 1990), network support provides the distressed person a sense of identity and belonging among other individuals who have had similar experiences (Cutrona & Russell, 1990). For bereaved parents in the present study, nurturant support in the forms of emotional and network support was described as supportive and helpful.

Emotional support

For bereaved parents in the present study, friends and family demonstrated emotional support when they were willing to talk with parents and share memories about the deceased child. For example, Sue discussed how much it meant to her when her deceased son's friends would tell stories about her son:

> What I enjoyed the most was hearing stories about him that I didn't know. They would come up, these big huge guys, and give me these big, bear hugs, with tears streaming down their face, telling me how much they loved him. It meant more to me, to have the friends who he shared his life with, come and tell me things I didn't know. That gave me great joy. (1: 150–154)

Hearing these stories and being told how much her son was loved and missed was a key way in which Sue felt support and love from these individuals. Likewise, Beth commented on how much she enjoyed it when people brought up her deceased daughter's name or remembered her daughter in some way:

> People that mention Jill's name, that's the greatest gift to mention her name or to write in a card and mention her name, or to share a memory, that's good … when people act like you're supposed to forget them that's real painful, so the people that do the opposite, you know, are just warming my heart, touching my spirit. (6: 115–119)

For bereaved parents like Beth, the willingness of friends and family to remember the deceased child meant that their child had not been forgotten by others and that these individuals knew how important it was to parents that their child was remembered.

In addition to talking about and remembering the deceased child, many parents reported that friends and family communicated support and caring through nonverbal gestures and acts of remembrance. On the anniversary of what would have been her daughter's first birthday, Marie mentioned how a coworker left a pink rose on her front step, with a note saying "In memory of Baby Amelia." According to Marie, this gesture "meant so much to me, I didn't even think, she probably heard me talk about it [her daughter's death] all the time, but you know, I didn't even think somebody would do that" (8: 331–333). By leaving a rose on her step, this coworker was showing Marie that she was thinking of her and her deceased daughter on a difficult and significant day.

In addition, parents found it supportive when friends and family members would silently sit with them and just listen to them talk over and over about their child and their grief. Even though her 3-year-old-son died nearly 15 years ago, Megan still remembers how her friend helped her by listening:

> For many hours, she would just let me, we were supposed to be studying and she would just let me talk and talk and talk, and she'd cry with me. She was really great, and a lot of friends just, they were there to listen, they didn't judge, you know. (9: 287–290)

Having this friend spend time with her and listen without judgment was incredibly supportive to Megan. At the same time, friends and family who would not or did not listen to or spend time with them was experienced as very hurtful by parents. Based on her own experience of not having supportive friends and family who would listen, Mae advised that people should:

> Go and be with them. You don't have to say anything, just say, "I don't know how you feel, but I'm here." Go sit down and just be with that person. What I wouldn't have given to have somebody come and knock on the door and stop in. (10: 156–159)

For Mae, having someone who would have stopped in to talk and spend time with her would have been of great value and comfort following her son's death. Likewise, having someone who was willing to suspend judgment and just listen would have been very meaningful to Mae. Unfortunately, she, like many other bereaved parents in this study, did not receive this kind of support.

As these exemplars illustrate, bereaved parents in the present study placed a great deal of importance on their child being remembered and talked about. Likewise, parents emphasized their need to be listened to by others without receiving judgment or advice. In order to find individuals who were willing to engage in these acts of supportive communication, many bereaved parents turned to support groups instead of family and friends. Support groups are considered a form of network support, which according to Cutrona and Russell (1990) "entails a sense of belonging among people with similar interests and concerns" (p. 116). For bereaved parents in the present study, support groups comprised of other bereaved parents was an invaluable source of support as they found other grieving parents with whom they could connect and share their grief.

Network support

For the bereaved parents in the present study, being in a bereavement support group with others who have had similar experiences was essential to coping with their loss. By spending time with other parents with similar losses, parents found a safe space where they could freely talk about their deceased child and their grief. These bereavement support groups became especially pertinent as time passed and family and friends no longer wanted to talk about the child's death. Don remarked:

> The support group becomes useful, even necessary, after the family is tired of hearing about it and friends think you should be moved on, or gotten over it, which, there is no getting over it, but, so somewhere around 2 years is when it starts being very meaningful for people to have somebody to come to and talk about it. (2: 233–237)

As Don indicated, support groups provide a venue for parents to remember and talk about their child without infringing time limits on their grief. Bill also remarked that he and his wife were still in a support group 7 years after their daughter's death because the support group provides more long-term support than family and friends:

> One of the reasons that we're in this support group and continue to be in this support group was because … you have a certain time and then you're supposed to get on with your life, and that's it, and they don't talk much about it anymore, they don't lend the support. (5: 99–103)

Due to family and friends placing limits on parents' grief, many reached out to fellow bereaved parents as these individuals intimately knew that the grief from a child's death cannot be resolved in a certain

amount of time. For the majority of parents in the present study, bereavement support groups met their needs to remember their child and work through their grief. However, some parents represented in this study felt it important to also reach out to family and friends for ongoing support and to try to educate family and friends on how to best support them.

Actively Seeking Support

Throughout the interviews, bereaved parents could clearly and quickly articulate what communication and behaviors they found supportive and unsupportive from family and friends. Despite the exhaustion and immense grief they were experiencing, some parents were able to actively reach out to others and to inform them on how they could be helpful and supportive. Whether writing friends and family letters or specifically telling them what they needed, some parents sought out support by educating others. For instance, a few weeks after her daughter died Lucy wrote her friends a letter telling them what she needed in terms of support:

> About 2 weeks later I got a bunch of roses, and wrote something that must have been divinely inspired because I couldn't have done it myself, and just said "this is what I need, you know, thank you for what you did, and here's where I am, and this is what I need, and don't be afraid to be stupid, and I'll be good." (3: 243–247)

Through these letters, Lucy communicated to her friends her appreciation and also encouraged and reassured her friends about how they could best support. With her letter, Lucy attempted to put her family and friends at ease by specifically telling them what she needed while also giving them permission to make mistakes in their efforts to support her. Many parents expressed that they often had to communicate support and understanding to others at the very time they needed support themselves. Sara illustrates this in her comment below:

> You have to kind of lay out those rules of communication for the people. And I did that kind of innately. I've had several people say, it really helps that you're so open about it, because you know, they, it's not that they don't want to communicate, they don't know. But they can't, and you can't expect them to, you know, for the most part. (4: 256–259)

As Sara suggested, bereaved parents must set up guidelines and boundaries for family and friends as these individuals likely do not know what to say or do. Jean expressed a similar opinion, stating that "It's up to the people that have lost a child to teach the other people about it. But you don't know that ahead of time. It's just kind of a learning process, but you need to help them to know that" (9: 176–178). For both bereaved parents and their social network, learning to communicate with one another is indeed a process of trial and error following a child's death. Educating others and telling them what they need is a key way in which bereaved parents can facilitate this process.

Discussion

The findings of this study speak to Cutrona and Russell's (1990) model in several ways. First, Cutrona and Russell suggested that bereavement may call for multiple forms of support as grief and loss affect several aspects of a person's life. In the present study, bereaved parents reported that both nurturant support and instrumental support, in the form of tangible aid, was helpful and comforting, thus supporting Cutrona and Russell's contention that situations of loss may require various forms of support from others in order to help grieving individuals cope with both the emotions of grief as well as everyday tasks and obligations.

Likewise, Cutrona and Russell's (1990) model also posited that tangible aid would be helpful in situations where the distressed individual had minimal control over the event and that informational support, such as advice giving, would be most appropriate in situations where the recipient has a degree of control over the stressful situation. For parents in the present study, the death of their child was an event that stripped them of any sense of control or power over their lives. Thus, receiving advice from others about what they should do or how they should feel was hurtful and unsupportive to parents as most were already doing their best to cope with a devastating loss. In essence, parents were frustrated with family and friends trying to impose order and control on a grief experience that was deeply intimate and personal to parents.

On the other hand, bereaved parents did experience nurturant support, in the forms of emotional and network support, as helpful and comforting. As Cutrona and Russell argued, nurturant support would be most helpful in situations where the distressed individual has little to no control over the situation. Indeed, having a child die is largely out of a parent's control and having friends who were willing to sit with them in the midst of their pain without trying to impose meaning and order upon the death was deeply comforting and supportive. Likewise, talking with and spending time with other parents who had also experienced a child's death provided parents with a great deal of comfort as well, further supporting Cutrona and Russell's argument that network support would be helpful to distressed individuals because of the commonality and shared experiences that occurs among individuals with similar stresses.

Of all of the forms of support discussed by parents, receiving advice from family and friends was described as the most frustrating and hurtful and there are several potential explanations as to why parents experienced advice giving in this way. First of all, being the recipient of advice may have been frustrating for these bereaved parents because advice in and of itself is inherently face-threatening (Goldsmith, 2004). As Goldsmith argued, receiving advice from others threatens an individual's face or desired image because the advice suggests that the recipient is incompetent or unable to handle the stressful situation. In essence, when family and friends told bereaved parents how they should feel or behave, they were challenging how parents were coping with their loss, ultimately suggesting that parents were somehow grieving incorrectly. In a study specifically examining facework between bereaved parents and their social network, McBride and Toller (2008) did find that bereaved parents experienced a multitude of face threats when interacting with members of their social network and one specific face threat they frequently experienced was feeling judged by others for how they were handling their grief. To cope with these negative face threats, these parents were strategic regarding what they disclosed and who they disclosed to in order to minimize the judgment and criticism they received (McBride & Toller, 2008).

Another explanation as to why bereaved parents were frequently the targets of unwanted advice and information may largely be due to family and friends' own discomfort with grief and loss. As Cohen Silver, Wortman, and Crofton (1990) found, individuals react either positively or negatively to a distressed person, depending on how well the distressed person appears to be coping. They found that distressed individuals are reacted to and viewed more favorably if they appear to be coping positively with the crisis or are at least taking steps to cope. On the other hand, individuals who demonstrated more negative coping with the crisis at hand, such as depression, were treated negatively. Thus, the advice bereaved parents received may be due to friends and family members wanting the parent to begin coping more positively. In essence, telling parents how they should grieve and what they should do is one way that friends and family can encourage bereaved parents to cope in what they feel is a more positive and appropriate way. However, as parents in this study demonstrated, being told how to grieve and how to deal with their loss was anything but supportive and helpful.

That bereaved parents found emotional and network support comforting brings forward several implications for family and friends who desire to support grieving individuals in positive and meaningful

ways. First and foremost is the importance of listening while withholding judgment. As bereaved parents in this study indicated, having someone simply be with them and listen to them talk over and over about their child, without offering advice or suggestions, helped parents immensely in their process of grief. Likewise, individuals who are willing to honor and respect the ongoing connection that parents have with their deceased child are providing parents with a great deal of comfort and support. As Toller (2005) found, bereaved parents often maintained a deep connection with their deceased child, despite the child's physical absence. Thus, having friends and family who were willing to honor this connection was meaningful to parents. Having someone come in and take over daily tasks, such as answering the phone or cooking meals, is also extremely helpful to parents within the first few days after their child's death.

Limitations and Future Research

Although this study provides insight into bereaved parents' experience of supportive and unsupportive communication, questions still remain. Extending beyond Laakso and Paunonen-Ilmonen's (2002) work examining bereaved mothers, this study found that bereaved fathers also described talking about their child and having someone listen to them as meaningful and supportive. However, only four bereaved fathers are represented in this study and three of the four fathers were active in bereavement support groups, thus more insight is needed on how bereaved fathers experience social support. Likewise, the majority of parents represented in this study were active in bereavement support groups. Gottlieb, Lang, and Amsel (1996) expressed concern that too many bereavement studies use participants that are in bereavement support groups as these individuals may be more predisposed to talking and sharing emotions in the first place. Thus, to truly explore the support experiences of a range of bereaved parents more parents need to be studied who are not in support groups.

Another limitation is that only the perspectives of bereaved parents are represented in this study. With the exception of Dyregrov (2005–2006), the majority of studies examining the relationships between bereaved parents and their social network are based on the parents' perspective. Dyregrov found that, although friends and family desired to support parents, these individuals found supporting parents difficult and challenging. The majority reported feeling they had inadequate knowledge and skills to help parents and many were worried that they had said or done something hurtful to the parents in their attempts to be supportive. Further investigating what family and friends perceive as supportive communication and why would provide scholars with insight into why there is so often a mismatch between the support parents want and the support they often receive.

A final area of future research that would provide scholars with further insight and knowledge would be to examine in greater detail how, if at all, social support influences the marital relationship of bereaved parents. In a study examining the marital relationship of bereaved parents, Toller and Braithwaite (2009) found that parents experienced a dialectical contradiction of openness-closedness following their child's death. This contradiction was characterized by one parent wanting to talk with their partner about their child's death while the other parent wanted to avoid any conversation related to the child's death. To cope with this tension, many of the parents who wanted to discuss their child's death turned to family and friends for support and an outlet to grieve. Although their study did examine how parents used family and friends to cope with marital tensions, they did not explore, in depth, how social support may mediate conflicts and tensions that arise between grieving parents. Thus, a fuller and more in-depth investigation of social support and its influence upon the marital relationship of bereaved parents is warranted.

In conclusion, nothing is as devastating and life shattering as is the death of their child. Bereaved parents must somehow piece their lives back together and friends and family can play a key role in this process. Providing advice and instructing parents on how they should feel and behave are some of the most hurtful

and unsupportive messages family and friends can provide. On the other hand, by listening, being present, and honoring the ongoing connection parents have with their deceased child, family and friends can offer support in a way that facilitates healing and hope.

Notes

Numbers denote interview number and the line number(s) of the corresponding transcript.

Appendix A: Interview Protocol

1. If you feel comfortable, could you tell me a little bit about your child? What were they like?
2. How would you describe your communication with your spouse before ___ died?
   a. How would you describe your communication with your spouse after ___ died?
   b. How would you describe your communication today?

3. How would you describe your communication with your surviving children before __ died?
   a. How would you describe your communication with your children after ___ died?
   b. How would you describe your communication today?

4. How would you describe your communication with outside family members before __ died?
   a. How would you describe your communication with your family after ___ died?
   b. How would you describe your communication with your family today?

5. How would you describe your communication with friends before __ died?
   a. How would you describe your communication with your friends after ___ died?
   b. How would you describe your communication with your friends today?

6. Overall, what were some things people said or did that were helpful at the time you lost your child?
   a. What were some things people said or did that were not helpful at the time you lost your child?

7. How likely are you, today, to communicate about the loss of your child?
   a. To whom do you communicate about your loss most often?
   b. Who are the people you would not share your loss with?

8. What are some of the most difficult things to talk about after losing your child?
   a. What are some things that are easier to communicate about?

9. What, if any, are some rituals or activities that you do to remember your child?

10. If you were to give advice to others who have a friend or family member who loses a child, what if anything would you advise them to do or say?

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