1-1-1998

# Grieving the violent death of a child: synthesizing the private and public response

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GRIEVING THE VIOLENT DEATH OF A CHILD:
SYNTHESIZING THE PRIVATE AND PUBLIC RESPONSE

by

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DISSERTATION

Submitted to the Graduate School

of Wayne State University,

Detroit, Michigan

in partial fulfillment of the requirements

for the degree of

DOCTOR OF PHILOSOPHY

1998

MAJOR: NURSING

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# DEDICATION

This work is dedicated to our beloved son who initiated this journey, to all the murdered sons and daughters whose parents so generously participated in this study, and to the memory of our dear friend Paul who left all of us far too soon.

# ACKNOWLEDGMENTS

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# NOTE TO USERS

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# CHAPTER I

## Introduction

Throughout history some parents have faced the arduous task of surviving the death of their child. World literature contains many sorrowful accounts of parents' responses to the loss of their child and of their difficulty in adjusting to the child's absence in their lives. The death of a child was and continues to be a profound event for bereaved parents. However, changes within the family and society have altered the experience of losing a child.

Since the turn of the century, families have changed. The birth and death rate of children have decreased. In 1900 a mother bore approximately four children, while 80 years later she would have an average of only two children. During this same time frame, the death of a child has changed from a common occurrence to a rare event. In 1900 over 50% of children died before their fourteenth birthday (Pine, 1984), and there was a 62% chance that a child would not survive to adulthood. During the next eighty years this percentage decreased significantly. Now, only 6% of children fail to survive childhood (Uhlenberg, 1989). This increase in the probability that a child will live to adulthood, coupled with the decrease in the average number of children per family, has probably altered the experience of having a child die. Parent are less likely to expect that a child will precede them in death, and may allow themselves to develop a more intense relationship with their child as a result.

Changes within society have also altered the experience of losing a child. The predominant cause of childhood death has shifted from illness to violence. Most of the children who died in the early 1900's died from illness. In the late 1900's a child's death

most often results from violence (Holinger, 1987). Violence is historically a part of American society (Hanrahan, Campbell, & Ulrich, 1993). However, the incidence of interpersonal violence is escalating (Nadwairski, 1992) and leads to an increasing number of deaths. Death rates in the general population have declined overall. In contrast, death rates for the young continue to rise (National Center Health Statistics [NCHS], 1993) and are projected to increase into the twenty-first century (Holinger, 1987). Violent deaths include those from accidents, suicides, and murders. These modes are the most prevalent causes of death in those between the ages of one and 25 (Holinger, 1987). If a child does die today, the death is likely to be as a result of violence.

A death from violence or any other cause also affects those who survive. In the 1970's the response to loss became an acceptable topic of study for professionals who care for the bereaved. Initial studies explored the response to loss in a variety of relationships and modes of death. Later research investigated the effect of a selected relationship or mode of death upon the subsequent bereavement response (Demi & Miles, 1986).

The premise that the nature of the relationship affects the response prompted studies related to the loss of a child. Subsequent research explored the response of parents to the loss of a child from perinatal and neonatal death and from acute and chronic illnesses. Research investigating specifically how parents respond to a the death of a child from violence is scant.

Researchers also began to investigate how the mode of death affects the response to loss. In exploring the effects of specific causes of death upon loss, some researchers began to study how a violent death affects the bereavement response. The number of individuals touched by these deaths warrants such studies. One study documented that

each murder victim in the study was survived by seven to ten close family members

(Redmond, 1989). In spite of the current prevalence of violent death among the young and

the number of parents bereaved in these situations, previous works have independently

addressed the two major issues of relationship and context related to the experience of

losing a child. Very little research has focused simultaneously on the parental loss of a

child and the context of violent death.

## Purpose of the Study

The response to loss has been studied extensively. When a child dies, it is

documented that the response to the loss is intense and prolonged (Rando, 1984).

However, there is only limited research on the question of how, or whether, the context

of violent death affects the response of parents to the loss of the child. There are studies

that explore the response of parents to the death of a child. In studies that explore the

response of a parent to the death of a child, the child may have died from violence, but

this mode of death was not a criterion for inclusion in the study (Hazzard, Weston, &

Gutterres, 1992; Littlefield & Rushton, 1986; McClowry, Davies, May, Kulenkamp, &

Martinson, 1987; Ponzetti, 1992; Schwab, 1990; Schwab, 1995-96). In other studies, the

focus was to explore how the context of violent death affects the bereavement response to

loss. Parents may have participated, but the study was not limited to the parent-child

relationship ( Amick-McMullan, Kilpatrick, Veronen, & Smith, 1989; Parkes, 1993;

Rynerson & McCreery, 1993; Sheskin & Wallace, 1976).

The purpose of this study is to enhance the understanding of how the context of

violent death affects the bereavement response of parents to the loss of a child. To

accomplish this purpose the aims of the study are to: (a) discover the central concern for

parents in these circumstances, (b) determine how this difficulty is processed, (c) discover

those factors that account for the variance in the bereavement process, (d) develop a

theoretical framework as a foundation for professionals caring for parents who have had a

child die from violence, and (e) provide a basis for further research in this area.

<div align="center">Background and Significance of the Study</div>

Violence is a serious problem in the United States (Leviton, 1991; Roberts &

Quillan, 1992; Rothenberg, 1991; Stark, 1991) with the potential to result in fatal

outcomes and is increasing, especially in the young (Betz, 1995). This increase in violence

is related to the availability of firearms, drugs, and alcohol (Betz, 1995; Greenberg et al.,

1987). Firearms were involved in more than 80% of adolescent homicides, and contributed

to the increase in the number of suicides and fatal and accidental shootings (Fingerhut,

1993). In major cities, alcohol was detected in the blood of at least 40% of homicide

victims. Operating a motor vehicle under the influence of alcohol or other drugs is

frequently a contributing factor in fatal accidents (Greenberg et al., 1987). The ultimate

outcome of the increase in violence is an increase in the number of accidents, suicides, and

homicides.

## Operational Definition of Violent Death

Deaths from accidents, suicide, and homicide have been classified as violent deaths

(Cleiren, 1993; Crittenden, 1993; Greenberg et al., 1987; Holinger, 1987; Michalowski,

1976). Violent death is a term which captures the essence of the context of the death

better than other labels such as bad (Kozak, 1991), traumatic (Rando, 1993), or a personal

disaster (Raphael, 1983). Labeling these deaths as violent is an effort to highlight the

differences between these modes of dying and other types of deaths.

Dying as a result of violence is not the mode of death we expect. It is natural to die, but we expect that a death will follow a long life or a period of illness or deterioration. To some degree these modes of death are anticipated and accepted as natural. Deaths that result from violence are neither accepted as natural nor are they anticipated.

It is more than the element of violence that contributes to the aftermath of the death for the bereaved. The perception of the loss affects the response of the bereaved (Rando, 1984; 1993). The degrees of volition and violation, as well as violence, are factors in the perception of the death (Rynearson, 1987). The more these elements are present, the greater the difficulty in dealing with the death. The act of suicide or homicide represents a willful intent to kill, while accidents often lack volition but may be the result of negligence for example, in the operation of a motor vehicle or handling of a firearm. Violation refers to the degree of unprovoked transgression. It is high with homicides, moderate with accidents, and lacking with suicides. These elements set homicides, accidents, and suicides apart from other modes of death.

Incidence and Prevalence of Violent Death

Accidents, suicides, and homicides continue to be the leading cause of death in those less than 25 years of age in the United States (National Center for Health Statistics, 1997). Homicide rates have nearly tripled since the 1960s. Between 1985 and 1991 alone, homicide rates rose 74% in the 15-19 year old age group (Betz, 1995). However, age is only one predictor of who is at risk to die from violence. Race and gender are others. In the White population, accidents are the leading cause of death for both males and females under 25 years of age. In the Black population, accidents also rank as the leading cause of death for both sexes in those under 15 years of age. However, between 15-24 years of

age, homicide is the leading cause of death (NCHS, 1997) with Black males 11 times more likely than White males in this age group to be the victims of a homicide (Fingerhut, 1993).

## Effect of Violent Death on the Family

Violent deaths result in the loss of more years of life and productivity than any other cause of death (Holinger, 1987). This loss of life and productivity is usually felt most acutely by parents who survive a child's death. Typically, parents have the strongest attachment and consequently the deepest response to the death of a child. How a parent responds to the death has an effect upon the response of others within the family (Raphael, 1983; Rando, 1984; Schiff, 1977). This effect is important since violent deaths affect a great number of parents.

The response of parents to the violent death of a child may also affect the parents' health. Responding to a child's death permeates the parent's existence, altering the emotional, psychological, behavioral, physical, and social realms. The response to the death of a child is normally intense and prolonged, and a death that results from violence can deepen the intensity of the bereavement response (Rando, 1993). The well-being of the parents is compromised when a child dies for any reason, and they may be even more adversely affected when the death is violent.

## Significance of Violent Childhood Death to Nursing

Nurses have cared for persons in situations of health and illness and more recently have expanded their roles to include care for the bereaved (Demi & Miles, 1986). Professionals know about the response to loss from a general perspective, but have not studied extensively how the response to loss may be altered by the context of violent

death. Especially today when more violent deaths in the young cause more parents to experience this type of loss, professionals have a responsibility to be knowledgeable about bereavement and caring for the bereaved (Osterweis, Solomon, & Green, 1987). Therefore, the impact of a child's violent death on the health of the parent is of concern to the discipline of nursing. There are a significant number of families in this predicament. Research of parental bereavement following the violent death of a child will provide data to explore the variation in the bereavement process of violent death on survivors and for developing a theoretical framework about the bereavement process. Because theory is a means for understanding, explaining, and predicting the process (Glaser & Strauss, 1967), theoretical development through this research will extend the foundation for caring for the bereaved by nurses and other professionals.

## Assumptions Guiding the Research

Certain assumptions influenced the research. First, there is a unique attachment between the parent and child. Second, the death of a child is a profound loss for the parent. Third, the context of the death influences the bereavement process. Fourth, violent death is a unique context that will affect the response. These assumptions prompted the research questions, limited the boundaries of the study, and determined whom to seek as initial participants.

# CHAPTER II

## Preliminary Review of the Literature

A preliminary review of the literature offers an opportunity to summarize the classic works on loss and the current understanding of two situations that are pertinent to this study: the death of a child and death by violence. The review of literature in a grounded theory study differs from the form and purpose appropriate to other methods (Glaser & Strauss, 1967; Glaser, 1978; Strauss & Corbin, 1990). In a grounded theory study a preliminary review of the literature serves as a "prelude" (Glaser & Strauss, 1967, p. 168). The purpose is not to identify a conceptual framework or suggest hypotheses for the study, since the purpose of the research is to generate these. Rather, the literature review provides a background for the relevance of the study and outlines the current understanding of the area (May, 1986).

In general, researchers now believe that loss evokes a grief response in those who survive that is normal and expected. The grief response is a process that is dynamic, individualized, and pervasive (Cowles & Rogers, 1991). The extent of the response is influenced by the nature of the attachment of the bereaved to the deceased and by the circumstances of the death. For those who survive, the death of a loved one is a profound, life-altering event. Death deprives the bereaved not only of the deceased's physical presence, but of multiple psycho-social intangibles (Rando, 1993). To a great extent, the attachment between the bereaved and the deceased determines the response to loss. Additionally, the circumstances of the death are a major determinant of the response to loss. The loss of a child and a violent death impact the response to loss in their own right. The current understanding of how either the parent-child relationship or the circumstances

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of a violent death affect the response to loss provides a background for the study (Strauss

& Corbin, 1990). At the initiation of the study, this background may stimulate research

questions and sensitize the researcher to the concepts and relationships that may emerge

from the data.

<div align="center">Loss</div>

The number of studies related to loss has continued to grow, especially throughout

the latter half of the twentieth century. Much of the research related to loss has been

conducted from a psychological perspective. The classic theorists focused on the death of

a loved one and the subsequent response to that death. Authors variously refer to this

response as bereavement, grief, or mourning. While some differentiate these terms,

typically these words are used interchangeably as they are here. Bereavement or grief is

the response to the loss of the loved one that follows the death.

Whatever the terminology, scholars credit Freud and Lindemann with being

among the first to write on the topic. Later  scholars frequently incorporate the ideas and

assumptions of these scientists into their own efforts (Horacek, 1995; Rando, 1984;

Raphael, 1983; Sanders, 1989). This approach is especially evident in the studies that have

been conducted during the last twenty-five years (Horacek, 1995). Occasionally, scholars

attempt to negate the basic assumptions and ideas of Freud and Lindemann. More often,

scholars integrate the earlier theories to expand our understanding of the area.

Mourning and Melancholia

Freud published the first intrapsychic response to loss in his paper Mourning and

Melancholia in 1917. Freud contrasted the pathological state of depression, which he

termed melancholia, with mourning or the normal response to loss (Sanders, 1989). Freud

(1917) viewed grief as a normal response to loss that does not typically require intervention. The process requires decathexis or withdrawal of the energy invested in the deceased. When the bereaved is able to accomplish decathexis, energy is freed to invest in other relationships and endeavors. As a non- pathological state, the process of mourning reaches a conclusion without intervention and within a relatively short time.

Freud's seminal work recognized the response to loss as a normal and expected process and has been a foundation for much of the later investigation about loss. However, he discussed the process as progressing in a linear and stage- oriented fashion to a point of conclusion and failed to recognize the pervasive and enduring nature of the mourning response. Although his professional writings never reflected a change in position about the conclusion of grief, his personal correspondence did. Years later after the death of Freud's daughter, he wrote to a friend that there is some grief that is never resolved (Sanders, 1989).

<u>Acute Grief</u>

Lindemann (1944) was concerned about analyzing the response to loss shortly after the event and hypothesized that the circumstances of the death affects the response. The purpose of his study was to understand the acute grief reaction in response to a traumatic loss. Lindemann conducted his study during World War II. His subjects included pyschoneurotic patients who had a relative die during treatment and relatives of persons who died while hospitalized, either in the war or in the Coconut Grove nightclub fire. The focus of his study was on defining the normal versus the abnormal response to loss. He had observed that there was a uniform reaction to acute grief. He emphasized that the loss evokes a psychological and somatic response and noted that grief affects the social

response of the bereaved. Lindemann summarized grief as characterized by somatic complaints, preoccupation with the deceased, guilt, hostility and a loss of the usual patterns of conduct. He argued that bereaved persons who display borderline pathological reactions acquire behaviors that are characteristic of the deceased. Lindemann laid the groundwork for describing grief as a syndrome and for differentiating the signs and symptoms that are normal from those that are not.

Lindemann's (1944) description of the normal response to loss paralleled Freud's in describing the normal process of grief as progressing from shock and disbelief to acute mourning, and finally to resolution. Lindemann said that the bereaved must accomplish the work of grief. That is "emancipation from the bondage to the deceased, readjustment to the environment in which the deceased is missing, and the formation of new relationships" (p. 143). Lindemann's concepts of emancipation and work are similar to Freud's of decathexis and energy. In Lindemann's model, efforts are directed toward readjusting to the new environment; and in both schemata energy is reinvested in other relationships. The bereaved's ability to reinvest in other endeavors and relationships indicates resolution or completion of the process. Lindemann, like Freud, depicted grief as a normal response to loss that should typically progress without intervention. Likewise, Lindemann and Freud both conceptualized the process as a linear response that proceeds in stages to a point of completion. Each noted that the process is active and involves the expenditure of energy or effort.

Lindemann's description of grief as a syndrome presented criteria for assessment and intervention in the bereavement process. Lindemann added to Freud's understanding that the response to loss involves more than the psychological component by delineating

the physical and social components. He summarized the symptoms related to the syndrome of acute grief. A hallmark of Lindemann's work is his suggestion that professionals can often predict who will experience a morbid, or distorted, grief reaction. For instance, in his 1944 study Lindemann noted that mothers of young children and those with previous psychiatric problems had particularly severe reactions to the loss. His observations about the response to loss emphasized that although grief normally proceeds without intervention, appropriate assessment and intervention can identify those instances when it does not, and facilitate the process in a normal manner. Lindemann emphasized the importance of the circumstances of the death and the relationship that is lost to the subsequent response.

Attachment and Loss

Bowlby's (1980) contribution to the area of grief is his work on attachment as the basis for loss. Bowly developed a theoretical basis for understanding the importance of the relationship or attachment between the bereaved and the deceased to the subsequent response to the loss. Bowlby posited that the nature of the attachment determines the response to separation or loss and also the intensity of that response.

There is a unique attachment between the parent and child. This attachment, and the response to the loss of the object of affection, is evident across cultures and species (Bowlby, 1961). Universally, loss of the love object results in specific mourning behaviors that are an attempt to recover the lost object and facilitate adaptation to the new environment without the deceased. When the object of love is lost, the first response is the urge to recover the lost object. In young children, the child's searching and crying after a temporary separation serves to reunite the child with the mother. These same

seeking and crying behaviors follow the death of a loved one. When the behaviors fail to call the loved one back from the dead, disorganization follows. The usual patterns of behavior and interaction cease. In healthy mourning, disorganization gradually decreases and reorganization increases (Bowlby, 1961). Evidence of reorganization shows an adaptive response to the loss and adjustment to a world in which the object of love is absent.

<u>Subsequent Works</u>

Many later theorists built upon the works of these classic theorists. For instance, a first phase of numbing was not delineated in Bowlby's original framework in 1961. This phase was recognized by Parkes (1974) and acknowledged and incorporated into Bowlby's later works (1980). Departing from the emphasis on grief as a normal psychological response to loss, Engel (1961) questioned whether grief is a disease, and Parkes (1972) likened it to a physical injury. Kubler-Ross's (1969) study of how individuals respond when they face their own death made grief an acceptable topic of study. Scholars incorporated other theories such as adaptation (Rando, 1983) and coping (Gilbert, 1989; Hoekstra-Weebers, Littlewood, Boon, Postma & Humphrey, 1991; Schwab, 1990; Videka-Sherman, 1982) to account for the response to loss. The body of knowledge related to loss continues to expand.

As we learn more about the response to loss, we become more cognizant of the fallacy of two assumptions made by Freud and Lindemann. One assumption is that there is an end to grief. A second assumption is that the bereaved will attain this end within a certain time limit. Current research adds considerable variability to these assumptions, especially with a "high-grief" loss (Horacek, 1995) such as those that involve either

children or violence.

Lindemann (1944) recognized the risk of a high-grief loss in his discussion of the severity of grief experienced by mothers who have lost a young child. "Our observations indicate that to a certain extent the type and severity of the grief reaction can be predicted... . Severe reactions seem to occur in mothers who have lost young children" (p. 146). This conclusion, together with the findings from his studies of violent deaths, suggested the importance of both the nature of the attachment and the circumstances of the death to the bereavement response.

<u>Loss of a Child</u>

The relationship that is lost is one of the most influential factors in determining the response to the loss. The relationship between the parent and child is a primary relationship. Primary relationships involve the closest and most intense of social interactions (Raphael, 1983). This is the type of relationship that exists between most parents and their children. When a child dies, a variety of issues surrounds the loss of this relationship.

Researchers have questioned if and how the death of a child differs from the loss of other relationships and have investigated a variety of issues. A number of relevant issues emerged from these studies: the effect of time upon the intensity and progression of grief, the psychological response and physical response of the parent to the death, and the effect of the loss upon the subsequent mortality of the bereaved parents.

<u>Time</u>. Parents typically expect that they will die before their child. A child preceding the parent in death adds to the unexpected nature of the death and alters the response to loss. Studies explored how the death of a child affects the progress of grief in

parents over time. Early studies found a higher intensity of grief in parents than in other bereaved persons (Clayton, Desmarais, & Winokur, 1968; Schwab, Chalmers, Conroy, Farris, & Markush, 1975). Sanders (1979-1980) reported a higher intensity of grief in parents who lost a child than in the bereaved who lost a parent or spouse. Owen, Fulton, and Markusen (1982-1983) also found the grief of parents to be more intense than the grief of adult children who lost an elderly parent and those who were widowed. Parents appear to grieve more intensely than do people who experience the loss of a parent or spouse.

Not only does the response appear to be more intense, but, additionally, the response seems more prolonged. While discussions of grief in general have suggested that grief diminishes within one to two years, studies of parents have indicated that there is still evidence of grief eleven or more years later (Demi & Miles, 1988; Kachoyeanos & Selder, 1993; Klass, 1988; Lehman, Wortman, & Williams, 1987; McClowry et al., 1987; Moore, Gillis, & Martinson, 1988; Rando, 1983; Shanfield & Swain, 1984). While parents' grief diminished between the first and second year after the death of the child, Rando (1983) found an exacerbation in the third year. While the grief of parents may diminish, it does not cease nor necessarily decrease in a linear fashion. Different parameters apply to the progression of grief in parents.

An exception was a study of family members who have lost a parent, spouse, or child to suicide (McIntosh & Wrobleski, 1988). Parents, siblings, and spouses all reported similar responses to the loss of the relationship from suicide. These findings suggest that, in determining the response, the cause of the death may be as significant as the specific familial relationship and support the idea that both the relationship and the circumstances

of the death affect the bereavement response.

Psychological response. The response to loss is often presented as a psychological response. Clearly, the death of a child affects the psychological well-being of the parent. Studies have explored the long-term effects of parental bereavement and have reported more emotional distress in bereaved parents than in parents who have not had a child die (Demi & Miles, 1988; Lehman et al., 1987). The grief is so intense at times that parents may fear that they are "going crazy." One study explored the differences in the emotional status of psychiatric outpatients and bereaved parents. Although symptoms of emotional distress were greater in bereaved parents than in a control group, bereaved parents exhibited less emotional distress than the psychiatric patients who were not bereaved parents. While more emotionally distressed than the control group, the parents did not exhibit the degree of symptoms that would classify them as mentally ill (Moore et al, 1988). Symptoms were worse in persons who experienced concurrent life stresses or a lower socioeconomic status (Miles, 1985a). General functioning decreased following the death of a child (Lehman et al., 1987). Depression was long-lasting (2-7 years) and was not found to change over time (Martinson, Davies, & McClowry, 1991). Parents reported little meaning and purpose in life (Florian, 1989-90).

In contrast to the reported detrimental effects of the child's death, one study reported a positive aspect in the psychological outcomes to bereavement (Miles & Crandall, 1983). Parents identified an increased growth and purpose in their lives several years after the death of the child. Identification of these positive elements does not negate the fact that for bereaved parents, the years following the death of a child are distressful and disconcerting.

Physical response. Researchers have also been concerned about the effects of loss on the physical health of parents. Changes in health behaviors and an increase in physical complaints are commonly reported. Miles (1985a) reported that bereaved parents had more sleep and appetite problems than non-bereaved parents while Demi and Miles (1988) related an increase in the consumption of alcohol, cigarettes, and medications as well as an increase in health problems. In contrast, in a study of parents who had a child die in a traffic accident, Shanfield and Swain (1984) did not find a significant increase in the use of alcohol, cigarettes, or medications. They reported, however, a significant increase in other health complaints. Mandell and Wolfe (1975) reported an increase in spontaneous abortions and infertility compared to the expected norms following the loss of an infant from Sudden Infant Death Syndrome.

Lehman, Wortman and Williams' (1987) study of parents whose child died in an accident did not find an increase in either physical complaints or in the use of drugs or alcohol when compared to the non-bereaved parents. However, parents in this study did have a higher divorce and mortality rate than matched controls. One study of parents' physical, emotional, and social health also reported that the bereaved parents' health is not adversely affected by a child's death from a prolonged illness (Birenbaum, Stewart, & Phillips, 1996). In these circumstances, it may be that anticipation of death provides a buffer effect. The death of a child frequently affects the physical well being of the bereaved parent, but the manifestation of the change in health varies with each bereaved parent.

Mortality. Studies indicate an increase in mortality with the death of a spouse (Levav, 1989-90; Parks, 1987-88; Rando, 1984; Raphael, 1983; Sanders, 1988), but there

is minimal research relating the mortality of parents to the loss of a child. Lehman et al. (1987) found an increase in mortality for bereaved parents. However, a study of more than 3,500 bereaved Israeli parents did not find a significant increase in mortality for bereaved parents in comparison to the rate for the general population. The exception was a statistically significant increase in mortality for mothers without spouses ( Levav, Friedlander, Kark, & Peritz's, 1988). Levav (1989-90) later suggested that in comparison to the widowed, the support of the spouse may have buffered the effects of the loss for the parent. This explanation contradicts other explanations that the spouse, who is also presumably bereaved, is unable to provide support while contending with the loss (Schiff, 1977). Levav et al. also noted that mortality is an end that may have been the culmination of prolonged distress of some nature.

Not everything is known about how the grief of parents differs from the bereavement response to other losses. Generally, the effects of loss are more evident in parents than in persons who have lost other relationships.

<u>Gender Differences</u>

After a child dies, the mother and father share the loss of the child, but not the loss of the same relationship with that child (Schiff, 1977). A frequent area of inquiry is the difference between the responses of the mother and of those of the father. Many researchers have studied the mother's response to this loss. Society generally characterizes women as more demonstrative in their expressions of emotion than men (Schwab, 1996), and studies about loss have reported that mothers' manifestations of grief are more expressive and intense (Smart, 1993-94). Smith and Borgers (1988-89) reported that the sex of the parent is the only significant variable in parental responses to the loss of a child

during the perinatal period, and Littlefield and Rushton (1986) reported the same findings in a study of more than 400 bereaved parents whose child died between the perinatal period and 45 years of age. In a study of the loss of an adult child, mothers were found to grieve more intensely than fathers (Shanfield & Swain, 1984). Findings from various studies support the argument that mothers are more expressive than fathers in their response to the loss of a child.

Mothers and fathers also differ is in their reported manner of coping. Schwab (1990) reported gender differences between the coping strategies of mothers and fathers whose child died from the time before birth to 30 years of age. Mothers used several coping strategies. Expressive strategies such as crying and writing were more prevalent with mothers than fathers. Fathers preferred active styles of coping in contrast to the mothers' passive, expressive and palliative styles (Littlewood, Cramer, Hoekstra, & Humphrey, 1991b). Findings consistently supported the contention that mothers and fathers coped differently with the death of a child.

Personal functioning scores for bereaved parents were higher with greater education, income, and time since the death, but the scores of mothers were lower than those of fathers (Arbuckle & Vries, 1995). By accounts from both parents (Littlefield & Rushton, 1986) mothers reported more depression following the loss of a child (Mandell, McAnulty, & Reece, 1980) and grieved more intensely. Mothers were angered over the father's inability to share his grief while fathers expressed concern and frustration about the intensity of the mothers' grief (Schwab, 1992). Mandell, McAnulty, and Reece (1980) found more anger and aggression in fathers than in mothers following the loss of an infant. Fathers also manifested decreased self-worth, more self-blame, and a limited ability to seek

help. They responded to the loss by keeping busy and were more willing to have another child than were the mothers. Gender differences existed in a variety of responses to the death of a child and appeared to correspond with the expected roles for males and females within society.

However, in some areas gender did not make a difference in the response to the loss of the child. There were problems in relying on the usual means of support for parents following the child's death. Both mothers and fathers identified problems with communication, sexual intimacy, and irritability (Schwab, 1992). Studies found that sexual intimacy was a problem for both mothers and fathers two to four years after an infant's death (Gottlieb, Lang, & Amsel, 1996; Lang, Gottlieb, & Amsel, 1996). Gender did not account for a difference in anxiety and depression, but church attendance did. When parents were able to continue their spiritual relationship by attending church, both mothers and fathers experienced less anxiety and depression than parents who could not (Thearle, Vance, Najman, Embelton, & Foster, 1995). In spite of differences, the majority of couples attempted to support one another following pregnancy or infant loss (Gilbert, 1989; Smart, 1992). Attempts at support were not necessarily successful and this created a problem for mothers and fathers since sexual intimacy and spiritual activities are areas where parents frequently receive support.

The Deceased Child

Attributes of the deceased child also affect the bereavement response. Two of the factors that have been identified as influential to the parent's response to the loss are the sex and the age of the deceased child.

The perinatal period, the time from 20 weeks of gestation to 28 days after birth,

was an exception. Neither the sex (Smith & Borgers, 1988-89) nor the age of the infant was significant to the response of parents following a perinatal death (Kennel, Slyter & Klaus, 1970; Kimble, 1991; Smith & Borgers, 1988-89). Perinatal death by definition occurs prior to the first month of life. Weeks, not years, account for age. This may be why age and sex cannot account for differences in the grief response to perinatal loss.

One study found that the loss of an adult daughter or of a child born earlier in the birth order is associated with more intense grief (Shanfield & Swain, 1984).However, Littlefield and Rushton (1986) reported that the response to the loss of a male child is greater. They studied parental response to the deaths of over 400 older children. When health is considered, the loss of a healthy male child resulted in more intense grief than the loss of an unhealthy male or a female regardless of her health status. Age alone was not a significant factor in the intensity of grief over the death of an older child (Hoekstra-Weebers et al., 1991; Littlefield & Rushton, 1986). These studies explored age and sex as variables in the bereavement response of parents, but what may have influenced the response the most was the effect of these two variables upon the role that the child played in the relationship.

## Understanding the Response of Parents

Scholars have studied the parent's response to the loss of a child, and have frequently based their research on general models of grief. The findings from these studies have resulted in the identification and enhanced understanding of the issues that influence the response to the child's death, and have been a foundation for further research. A few scholars have also proceeded to develop models of parental grief that incorporate these issues.

Synthesis. The writings by Raphael (1983) and Rando (1984) are among the earliest professional works that discuss in depth how the parent responds to the loss of a child. Raphael and Rando systematically discussed not only the psychological, but the physiological and social reactions to loss. Both authors reviewed the literature related to loss extensively and identified a number of issues that affect the response. The death of a child was one. Each author identified similar issues, but the basis for discussion differed. Both emphasized the influential nature of the relationship between the parent and child to the subsequent response to the death of the child. Each emphasized the appropriateness and necessity of studying bereaved parents.

Rando (1984) used the parent-child relationship as the basis for discussing the constellation of issues that surround the death of a child. She presented extensive support from research for the contention that these issues influence the parent's response. She emphasized that the response is pervasive: manifestations of grief are evident in all aspects of the parent's life. The parent's behaviors in response to the loss of a child are the same as those that occur with the loss of other significant relationships but are more intense and persistent. In addition, the parent responds not only to the death of the child, but to the mode of death.

Raphael (1983) also viewed the loss of a child as an issue that affects the response to loss. Raphael proposed that the issues related to the loss of a child are closely connected to the age of the child at the time of his or her death. Raphael noted that the loss of a child at any age has its own issues and consequences. She created a developmental approach for understanding the issues related to parental bereavement that is unique to her work.

Raphael (1983) and Rando's (1984) efforts were among the first that emphasized the importance of the relationship between the parent and the child in understanding the parent's response to the death of the child. Their review of the professional literature was not only comprehensive, but synthesized a multitude of studies. The synthesis of the issues enhanced the understanding of the factors that affect the response of parents to the death of the child. Neither proposed a framework for understanding the parent's response to the loss of a child, but they emphasized the need for the development of frameworks to relate the issues that surround the loss of a child to the subsequent response. In response to this need, several authors have proposed frameworks for understanding the parental response to the loss of a child (Kachoyeanos & Selder, 1993; Klass, 1988; Klass & Marwit, 1988; McClowry et al., 1987; Miles, 1985b; & Sanders, 1989).

Parental grief and bereavement. Miles' work (1985b) was an early attempt to account for the parental response to the loss of a child. Miles derived her model from the work of Parks. The model consisted of fluid phases rather than the fixed stages that are posited in other works. Miles mentioned social implications involved in the response to loss, but she did not delineate these. However, a strength of Miles' model is her recognition of and emphasis upon the importance of caring by professional others during the response to loss. Her efforts were among the first outside psychiatry that resulted in a framework for understanding the parent's response to the death of a child.

Integrative theory of bereavement. Sanders (1989) developed a general model of grief for use in working with bereaved individuals in a wide variety of relationships. She presented her integrative theory of grief and then gave a general discussion of the issues relevant to parental grief that she viewed as a special type of bereavement. She left it to

the reader to identify where the issues related to parents fit within the theory. Her model incorporates characteristics of the deceased child, such as age and sex, as external mediators of the process. Health was also described as a factor that could be a mediator to facilitate or hinder the response. In addition, alterations in health could be an outcome of the response to loss. A major strength of the model is the theorist's emphasis on the bereaved's motivation to move through the phases of bereavement (Sanders, 1989). This is in contrast to the idea that grief is a passive experience.

Identification. Klass (1988) used a qualitative method of participant observation to collect data from parents in support groups. From this data, he developed a model of parental grief built around the concept of identification. It is the parent's identification with the deceased child, not attachment as Bowlby (1980) proposed, that determines the response to the loss of the child (1987-88, 1988). Klass (1987-88, 1988; Klass & Marwit, 1988) proposed and emphasized that the depth of the parent's identification, or how strongly the parent envisioned the child as a part of him- or herself, accounts for the differences in response to the loss of the child. There is resolution of grief when the parent does not idealize the child or reject the facts of the death, but develops a realistic memory of both the child and the death. Klass developed his theory specifically to understand the process of responding to the loss of a child. The parent's identification with the child is of minor importance in other discussions of parental grief, while Klass views the concept as central to understanding the parent's response to the child's death.

The empty space. Like Klass' (1988) model, the theory of the empty space was developed to describe and account for the grieving process of parents and other family members. It is one of only a few theories about parental grief developed within nursing.

The empty space concept of family bereavement emerged from a grounded theory study by nurses of the long-term response of family members to a child's death from cancer (McClowry et al., 1987). The theorist did not develop a linear approach to grief that identifies stages and phases in the process. Rather, the researchers discovered what was of central concern to bereaved parents responding to the loss of a child. Three patterns of response to the process emerged from the study: filling the space, getting over it, or keeping the connection. The theory is unique in that it identifies what is of central concern to family members. However, a limitation of this study is that the analysis proceeded only to the descriptive level.

Life transition theory. Another theory that nurses employ to understand the parent's response to loss is Life Transition Theory. Kachoyeanos and Selder (1993) used this framework in a nursing study of the parent's response to the unexpected death of a school-age or older child. The life transition theory describes how the parent bridges the gap between past and present reality after a critical life event, such as death. The researchers interviewed parents to obtain data in each category of the theory: trigger events, uncertainty, and closure. Trigger events reinforce the parent's awareness that reality has changed. Uncertainty is inherent in life of the parent after the death. Parents use a variety of strategies to manage and reduce the uncertainty. The strategies decrease uncertainty, construct a new reality, and change the priority of the critical life event in the life of the bereaved. Parents attain closure when their life no longer revolves around the death of the child.

Most researchers contend that the relationship between the parent and child is different from the relationships between spouse, siblings, other family members, or friends.

As a result, the parent's response to the death of a child is different from the response to the loss of other relationships. The professional literature contains discussions of the differences and the issues that are pertinent to the loss of the child. Scholars have applied general theories of loss in efforts to develop an understanding of parental grief and have progressed to developing theories that are specific to parental grief.

## Violent Death

Accidents, suicides, and homicides are deaths that involve violence. Besides the loss of the relationship, a second major factor that influences the parent's response to the death of the child is the cause of death. Broadly, causes of death can be divided into two categories: a sudden event or an anticipated event. Unexpected is another term for "deaths that cannot be equated with overtly recognized states of illness" (Fabrege & Nutini, 1994, p. 407). Deaths that are sudden may result from miscarriage (Berezin, 1982; Borg & Lasker, 1981; Stack, 1984), perinatal death (Berezin, 1982; Borg & Lasker, 1981; Gilbert & Smart, 1992; Kennel et al., 1970; Kirkley-Best & Kellner, 1982; Smith & Borgers, 1988-89), Sudden Infant Death Syndrome (Markukensen, Owen, Fulton, & Bendiksen, 1977-78; May & Breeme, 1982-83; Rando, 1984; Raphael, 1983), acute illness (Gyulay, 1989a), disaster (Horowitz, 1985; Lifton & Olson, 1976; Lindy, 1985), or war (Florian, 1989-1990; Levav, 1989-90; McKay, 1991). In each type of sudden death, common issues surround the death. It is these common issues that set one mode of death apart from another and influence the parent's response in these circumstances.

In contrast to sudden deaths are those that have been anticipated by the parent. The death of a child may result from a terminal or chronic condition (Burke, Hainsworth, Eakes, & Lindgren, 1992; Lindgren, Burke, Hainsworth, & Eakes, 1992; Olshansky,

1962; Stephenson & Murphy, 1986; Wacht, 1986). Deaths that result from a terminal or chronic condition often allow the parent some degree of anticipation of the death. This buffer effect is absent when death occurs suddenly.

The parent's loss of a child may also be precipitated by life events other than death: a custody decision, disappearance, or adoption of his or her child by another family (Lloyd & Zogg, 1986; Roll, Milan & Backlund, 1986; Toder, 1986). In these circumstances the loss is not necessarily irrevocable, and these types of loss are beyond the scope of this paper.

Deaths that result from violence are perceived as sudden. While a child may not die immediately after a violent act, the general perception is that deaths from accidents, suicides, and homicide occur quickly. The mode of death creates a context that specifies the setting and conditions of the social world of the bereaved (Chenitz & Swanson, 1986). Superimposed on the issues with which all bereaved parents must contend are those associated with the mode of death. Violent death is a particular type of sudden death, and the parent's response to the death is quite different from the response to a death from a lingering illness or to other types of sudden death.

The circumstances that surround an anticipated death are less distressing to the bereaved than those surrounding a sudden death, particularly a sudden death that results from violence. Violence complicates the response to loss. In addition to the death as sudden, the parent must contend with the violent aspect of the death, all of which, are factors that complicate and compound the response to the death (Rando, 1993). Parents who have a child die from violence face multiple issues in their response to the loss. Understanding the importance of the perception of violence to the subsequent behaviors

and outcome is "one of the major achievements of modern social science" (Parker & Toth, 1990, p.206). When a child dies, the parent's response is influenced by both his or her own and society's perception of a violent death.

Society and Violent Death

Sociological research has shown that violent death rates for the young are higher in the United States than in similar nations (Greenberg et al. , 1987; Stark, 1991). Yet sociologists have found that society does not always recognized violent deaths as a social problem. Researchers believe that this is because much competition exists in the public arena for attention to a variety of problems (Unnithan, 1994). In addition, Rynearson (1987) argues that the response of the public to the death is also dependent upon the public's perception of the circumstances of the death. The public deems some modes of death more acceptable than others, and how the public responds can affect the response of the parents.

Michalowski (1976) noted that the public's perception of the perpetrator's behaviors that resulted in the death is dependent on the public's assessment of the perpetrator's intent and degree of deviance. Society perceives that murdering someone with a gun is "deviant" and unacceptable behavior. In contrast alcohol is often involved when a person is killed in a motor vehicle accident. Drinking and driving with an elevated blood alcohol level is illegal, but many members of society do not perceive killing someone with a car to be as violent as using a gun. Deaths from war and disaster involve mutilation and destruction as do murders and accidents. However, war and disaster differ in that they are communal experiences in which parents may experience a loss (Lindy, 1985). Additionally, there may be a sense of indebtedness to the deceased (Lifton, 1980; Lifton &

Olson, 1976) or a patriotic meaning to the death (Levav, 1989-90) when the child died in the service of his or her country. Once more the public's perception of the degree of violence related to the death determines the public's response. This public response can affect the response of the parent.

Classification. Persons in official capacities within the public realm determine the classification of the death such as homicide, manslaughter, accidental, suicide, ect. Yet sociologists have found that there are errors in the individual classification of deaths (Holinger, 1987; Sheskin & Wallace, 1976). A death classified as an accident may have been a homicide that resulted from intentional abuse (Unnithan, 1994). More than seven percent of parents of adult children killed in traffic accidents question whether or not the death was actually a suicide (Shanfield & Swain, 1984). The reported rates for violent deaths are not always a true reflection of the incidence of such deaths. These errors influence whether or not the public perceives these deaths as a rare or a common event.

The classification of a certain death by the public may be at odds with the belief of the individual parent about the true cause of that death. When the classification of the death conflicts with what the parent believes, it causes additional stress for the parent. The classification of the death by public officials determines the subsequent response of the general public. A classification that is more acceptable to the public, such as an accident, does not elicit the same response as a homicide. This clash of perceptions may result in a public response that the parent judges as inappropriate for what the parent believes is the cause of death.

Public death. A violent death is a public event, in strong contrast to the extremely private experience of loss related to death during pregnancy or the perinatal period.

Society frequently considers fetal or infant death as insignificant in comparison to the loss of an older child (Berezin, 1982; Borg & Lasker, 1981; Smith & Borgers, 1988-89), and consequently accords these deaths little recognition. This muted response also happens with the death of an older child when the death follows a chronic condition. Unless the person or family is well known, the death remains a private affair. Parents in these circumstances find it difficult when they receive little or no recognition.

In contrast, a death from violence generates much public interest. During a two-week period, deaths causes by violence rated a 14:1 ratio in column inches of newspaper reporting over other deaths. Not one death from natural causes was reported on television in the same period (Michalowski, 1976). Deaths from violence thrust the victim and the parents into the public arena. The parents, the death, and the life of the deceased receive much attention.

Parents are generally unfamiliar with and inexperienced in dealing with the public attention that immediately follows and persists after a violent death. Parents encounter multiple public systems that include the media, legal and criminal systems (Burgess, 1975; Cowles, 1988b; Gyulay, 1989b, 1989c; Michalowski, 1976; Rando, 1984; Raphael, 1983; Rinear, 1988; Rynearson, 1984; VanDongen, 1990, 1991). A grounded theory study of the newly bereaved identified contending with these multiple public systems as the central concern for those who have had a significant other murdered. The intrusion of these systems resulted in a "personal world expansion" for the bereaved (Cowles, 1988b). In contrast to world expansion when a child is murdered, family members bereaved by suicide identified hiding, healing or experiencing the pain as central to their experience (Demi & Howell, 1991). Contending with the public's interest in the death increases the

difficulty of responding to a violent death.

Secondary victimization. The public nature of the death leads to another issue. The bereaved come in contact with others who often assign blame to the victim or the bereaved (Burgess, 1975; Sprang, McNeil, & Roosevelt, 1989). This practice is not limited to any one social system. It occurs within the healthcare system (Redmond, 1989), as well as within the legal and criminal systems (Cowles, 1988b; Gyulay, 1989b, 1989c; Peach & Klass, 1987; Rando, 1984; Raphael, 1983; Redmond, 1989; Rinear, 1988; Sprang, McNeil, & Roosevelt, 1989). Secondary victimization by society is an issue that can compound the response of the parent.

The parent's response to a violent death is influenced by society's overall perception of violence and the deaths that result. Multiple issues affect society's perception of a death from violence and create a context that sets a violent death apart in the mind of the parent from other sudden deaths. The parent whose child died from violence must consequently contend with the issues related to violence within society and those surrounding the specific death of the child.

Individuals and Violent Death

Each death from violence is surrounded by unique factors that are related either to the parent or to the deceased child. The presence or absence of these individual factors contributes to the context of the violent death and affects the parent's response to a violent death.

Participants. One of the elements that sets a violent death by homicide apart is the fact that parents must contend with the knowledge that someone wanted the child to be dead (Cowles, 1988b; Gyulay, 1989b, 1989c; Peach & Klass, 1987; Rando, 1984;

Raphael, 1983; Redmond, 1989; Sprang et al., 1989). "Homicide and murder are synonyms" (Holmes & Holmes, 1994, p. 2). When a family member is murdered, Rynearson (1984) found that all of the subjects viewed the death as intentional and expressed much anger toward the murderer. Rynerson found in his study that, although the anger never disappeared, it did diminish after 12-18 months. This time span coincides with the murderer's trial and sentencing. When the murder is not solved, the parent still exhibits much anger toward the unknown assailant and a desire for retribution (Cowles, 1988b; Gyulay, 1989c; Peach & Klass, 1987; Rynearson, 1984) that can last for years (Rynearson, 1984).

Anger and the possibility of retribution are also issues with other modes of violent death. When a motor vehicle accident resulted in a fatal outcome, parents directed much of their anger at the driver of the car. Parents referred to the driver in a fatal accident as the killer (Cleiren, 1993). Even when a fatal motor vehicle crash was officially classified as an accident, the parents perceived it as murder and wanted the driver to be punished (Rynearson, 1984).

Yet sometimes there was no appropriate object for this type of anger. For example, one study found that parents whose child died in a single-car, single-driver accident had the highest level of distress (Shanfield & Swain, 1984). In instances of suicide, much of the parent's emotions target the deceased (Demi & Howell, 1991; Gyulay, 1989b; VanDongen, 1991; Van der Wal, 1989-90). Parents continue to agonize over the unanswered questions that surround the death (VanDongen, 1990). The bereaved struggle to understand the death and the deceased's participation in his own demise. Whatever the specific mode of violence, the parent's perception of who caused or

contributed to the child's death clearly has a strong influence on the response.

Parental involvement. The death of a child typically causes the parent to question his or her own part in the death. The Federal Bureau of Investigation (FBI) reported that "nearly half of juvenile murder victims were either related to or acquainted with their assailants" (Betz, 1995, p.151). Parents have expressed concern that they may have been the person who initiated the contact between the child and the murderer.The murderer may even be a family member: one study reported that 18 % of murders are intra-familial (Rynearson, 1984). This creates a double grief for the family. When the murder occurs, the parent has lost not only the child, but a relationship with another family member who was the murderer (Gyulay, 1989c).The parent must contend with the loss of the child, and additionally with the knowledge that the murderer is someone that either the parent or child, and maybe both, previously trusted or even loved or not.

If the child is young, the murderer may actually be a parent. This is the case in more than two-thirds of homicides in those under three years of age (Stark, 1991). When the parent murders the child, the death frequently follows a history of abuse (Holmes & Holmes, 1994; Stark, 1991). One thousand children per year die from fatal injuries inflicted by parents or caretakers (Holmes & Holmes, 1994). The response of parents who fall into this category is beyond the scope of this study.

When the death is by an accident or suicide, parents express concern that they contributed to the death in an indirect manner. For instance, the parent may have been the driver when the child died in a fatal accident (Miles & Demi, 1986; Miles & Perry, 1985). Parents continue to question what they did or did not do that may have contributed to the death with a suicide (Gyulay, 1989b; Kovarsky, 1989; VanDongen, 1990, 1991) or an

accident (Kachoyeanos & Selder, 1993). Part of the parental response to this type of violent death is guilt over his or her part in the death.

Risk-taking. The violent death of an older child is often associated with risk-taking or self-destructive tendencies by the deceased (Burgess, 1975; Holinger, 1987). Risk-taking contributes to accidents (Gyulay, 1989a), suicides (Gyulay, 1989b) and homicides (Gyulay, 1989c). Risk taking includes such activities as the use of firearms (Fingerhut, 1993; Stark, 1991; Thorson & Powell, 1990); the ingestion of drugs and alcohol (Holinger, 1987; Kozak, 1991); and participation in hazardous sports that include auto racing, parachuting and mountain climbing (Doka, Schwarz, & Schwarz, 1990). One study reported that individuals who are most likely to engage in these behaviors are young, male, and less educated (Thorson & Powell, 1990), suggesting who may be most at risk for deaths from violence. Parents often have the knowledge that the child engaged in high-risk behaviors that led to the child's own death. This awareness is an issue that compounds the parent's response to the death.

Post-traumatic stress. Parents who lose a child to violent death have frequently demonstrated symptoms of post-traumatic stress disorder (PTSD) (Amcik-Mcmullan et al., 1989; Rando, 1993). Researchers have debated whether PTSD occurs in addition to grief or as a component of grief. Some researchers have contended that symptoms of either PTSD or grief follow the loss (Applebaum & Burns, 1991, Rinear, 1988; Rynearson, 1984). Others have argued that the bereaved are so devastated that symptoms of PTSD and grief are both evident (Amcik-Mcmullan et al., 1989; Rando, 1993). On both sides, those who have studied PTSD concur that PTSD is a "normal abnormality" when a death is violent: one expects to see this intense response with a violent death (Rando,

1993, p.222). PTSD follows events that are outside of the range of normal human experiences. Grief is a normal response to the experience of loss in life. A death from violence is not a usual experience. Following a violent death, the bereaved responds with more horror, rage, vengeance and phobic reactions than are evident with other deaths (Amcik-Mcmullan et al., 1989). All of these compound the response to loss from a violent death.

Evidence of PTSD was found in survivors of homicide, accident and suicide victims (Bard, 1982). Rynearson (1984) documented PTSD in all 15 participants in a descriptive study of family members who had lost a relative to homicide at least three years previously. Later writers argued that it is the violent nature of deaths from accidents, suicide and homicide that precipitate PTSD in survivors (Rynearson, 1987). In a survey of 200 parents whose children were homicide victims, the symptomatology reported by the respondents is characteristic of PTSD (Rinear, 1988). Further support for the presence of PTSD in parents was provided by Applebaum and Burns (1991). The study included the parents and siblings from 20 families who had lost a child from an accident or a homicide within the past seven years. This study suggested variances in the response to loss, with parents of homicide victims reporting more PTSD symptoms than do parents of accident victims. When the death is violent, more symptoms of PTSD were found in siblings of the deceased whose parents also reported more PTSD symptoms. These findings support the contention that a violent death affects the response to loss.

<u>Summary</u>

Classic theorists provide a basis for understanding the response to loss and a foundation for further study. Freud was among the first to discuss the response to loss.

Lindemann investigated the effect of a traumatic loss on the initial response. Bowly emphasized the importance of the relationship lost to the response that follows. Together, these early theorists suggested the importance of both the relationship lost and the mode of death to the subsequent response.

The studies reviewed indicate that the parent's response to the loss of a child deviates from the response to the loss of other relationships. The parental response to the loss of a child is intense and long- lasting in comparison to the response that follows the loss of other relationships. Researchers have proposed frameworks to account for the parental response to the loss of a child. These are general conceptualizations that are not specific to a violent death. Yet the mode of death appears to influence the response to loss.

Violent death is surrounded by conditions that create a specific context. This context superimposes additional factors upon the bereavement process of the parent responding to the death of the child. The context of violent death has unique issues that have implications for society and the individual. The parent must contend simultaneously with the death of the child and the fact that the death was violent. A violent death is imbued with additional issues that make responding to the death difficult.

Exploring how parents respond to the violent death of a child will provide an understanding of how parents respond to a specific type of sudden death: a death when violence is superimposed upon the loss. This study will identify what makes the particular situation especially difficult for parents and how they process the significant issues. The outcome of the study will provide a theoretical framework that is specific to the relationship and the mode of death.

# CHAPTER III

## Methodology

Grounded theory is a method for generating theory that was developed within the discipline of sociology. The method addresses social-psychological problems (Stern, Allen, & Moxley, 1984) and provides a new perspective in complex areas of study (Stern, 1980). The method is applicable to a variety of disciplines (Strauss & Corbin, 1990) and is especially suited to the discipline of nursing. Grounded theory and nursing are "intricately linked" (Stern t al., 1984, p. 371). The practice of nursing and grounded theory research both involve processes that occur in natural versus controlled settings and rely on the constant comparison and analysis of data. The latter requires that the investigator continually collect data about a particular problem, compare it to previously obtained data, and formulate hypotheses about the central concern and its resolution.

Grounded theory is an appropriate method for the development of theory when there is a paucity of knowledge in the area of interest (Glaser & Strauss, 1967; Strauss & Corbin, 1990). In the case of this study, there is an enormous body of knowledge about the bereavement response in general, and there is a limited understanding of how parents respond to the death of a child, but little is known about the parents' response to the violent death of a child. The researcher's desire to enhance her own understanding of this complex area prompted her to conduct a preliminary review of the literature on the topic. In doing so, she found that there are few theories specific to the bereavement response of parents or to the response to violent death. Because a theoretical basis for understanding the bereavement response of parents to the violent death of their child has not yet been developed, a grounded theory study offered the best opportunity to create a framework

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for caring for parents who have experienced such a death.

Grounded theory is a method for the discovery and generation of theory from data (Glaser & Strauss, 1967). Grounded theory systematically generates a theory that is intricately linked to the research data. The theory emerges from the data rather than arising from a preconceived framework (Glaser & Strauss, 1967; Glaser, 1992) as concepts and hypotheses are developed and verified throughout the research process. The method is also know as constant comparative analysis since incoming data are continuously compared to the previously obtained data.

Grounded theory generates "theories for new areas, as well as better theories for areas where previous ones do not work" (Glaser & Strauss, 1967, p. 11). The theories that emerge are middle-range theories that are either substantive or formal. A substantive theory pertains to an empirical area of study, while a formal theory relates to a conceptual area. The theories integrate the concepts and their relationships at an abstract level, so that the researcher can present the data at a higher level than mere description.

### The Emergent Design

Grounded theory is a method that simultaneously generates concepts and categories that are formulated into hypotheses while developing and verifying the emerging theory (Glaser & Strauss, 1967). It is one of many qualitative methods that is linked with the generation of theory. In contrast, quantitative methods are associated with verification (Glaser & Strauss, 1967).

The actual design of the study emerges from and is shaped by the research process. "The researcher works within a matrix where several processes go on at once rather than following a series of linear steps" (Stern et al., p. 373). The method includes the

development of a research question and the collection, coding, analysis, and comparison of data, but not in discrete steps (Bowers, 1988). The process resulted in the formation of concepts and hypotheses that required further development or verification (Glaser & Strauss, 1967). At times analysis was followed by further data collection in the form of theoretical sampling, and at other times by returning to the literature or existing data to elucidate concepts. Each of these steps was an effort to generate and verify the emerging theory.

<u>Research Question</u>

All phases of grounded theory are shaped by the background of the researcher (Glaser, 1978). The researcher's personal and professional experiences with bereaved parents in acute care and community settings prompted her interest in this domain of inquiry. It was evident that parents were profoundly affected by the death of their child. As a caregiver, the researcher wanted to enhance her own understanding of the parent's experience. What is most problematic for the parent? How does the parent resolve the problem? What makes a difference in the response of parents? Finding answers to these questions was an incentive for conducting the current study and the formulation of the research question: what is the bereavement response to violent childhood death?

Since the purpose of the research is to generate a theory based on the concepts that emerge from the research process, rather than entering the research with previously formulated hypotheses, the formulation of the initial research question is important. The broad boundary of violent death provided latitude to discover the central concern of bereaved parents. The researcher knew that asking an initial question this broad was necessary in order to include a variety of potential sources for data (family and community

members, literature, the media, and documents within the legal, criminal, or health care systems). The question was narrow enough to limit the focus to the bereavement response, but not so narrow as to preclude discovery (Strauss & Corbin, 1990). The question helped the researcher maintain her focus for discovering what was of major concern for the parent when a child died from violence, and for determining how parents resolved this concern. The question was flexible enough to allow the researcher to reformulate it if necessary during the study. The researcher did reformulate the question during the research in order to limit the study to the bereavement response of only those parents whose children died from murder. This ultimately narrowed the context and the focus of the study.

<div align="center">Data Sources</div>

## Initial Decisions

The initial decisions about data collection were based on the general perspective that the researcher had developed about the problem from the preliminary literature review and from her experience in the area. However, she did not enter the research with a commitment to the concepts and hypothesis of a preconceived framework (Glaser, 1967). The researcher could have chosen to begin collecting data from any of the sources that she previously identified as being potentially relevant, such as community members. Since the boundary of the study was the parental bereavement response to violent childhood death, a logical starting point was seeking parents whose children had died from violence.

## Participants

Recruitment. The researcher sought participants whose children had died from an accident, homicide, or suicide. The researcher accepted persons who identified themselves

as the parent of a deceased child, and did not define the relationship based upon a biological, legal, or age related factors as has been done in some studies. In addition, the researcher determined that parents or others who acknowledged that they currently had legal charges pending against them in the death of the child would be excluded. The researcher based this decision on the knowledge that information that is obtained in the research process is not considered privileged communication (Cowles, 1988a). Parents could have shared information with the researcher about the circumstances of the death that could have resulted in the researcher being subpoenaed. This would put the researcher in the position of being legally required to disclose information that the researcher considered privileged communication and would have been unwilling to divulge.

The researcher solicited the participation of mothers and fathers through support groups, advertisements (Appendix A), and personal and professional referrals. In group settings, the researcher identified herself and provided information about the study to members attending support groups prior to their meetings (Appendix B). This information afforded the participants the opportunity to choose what they wished to disclose to the researcher in the group setting. If participants indicated that they would be willing to speak further with the researcher, she used the consent form and procedures for in-depth interviews. The response to advertisements was minimal, but in these instances the researcher provided verbal information to potential participants who responded by telephone, and an interview was scheduled if they still desired to participate. Snowballing (Polit & Hunger, 1991), or referral of one participant by another, proved to be a more fruitful method for obtaining participants. In order to decrease potential emotional risk, persons who made referrals were asked to obtain prior permission for the researcher to

contact and discuss the study with the participant.

Multiple sources of data are desirable in order to *"maximize the possibilities* of obtaining data and leads for more data" (Glaser, 1978, p. 45) and to increase the range and variance in the generation of concepts and the development of theory. A variety of sources also minimizes the elite bias that potentially threatens qualitative research (Sandelowski, 1986). In order to avoid this bias, the researcher actively sought minority parents for inclusion. A minority colleague provided the researcher with the names of minority participants who were willing to participate in the study. However, since the researcher can speak only English, she limited the study to English speakers.

Characteristics. There was much variation in the characteristics of the twelve participants who completed in-depth interviews. They resided in three midwestern and one southwestern states. The group included both White and Black participants, and their socioeconomic status ranged from the lower middle to the upper class. Together the mothers and fathers represented a variety of religious affiliations. Parents stated that they were single, married, or divorced. All but one of the deceased had surviving siblings. Differences in the group were a potential source of variation in the concepts that emerged from the data.

The researcher conducted twelve in-depth interviews. Prior to narrowing the focus of the study to parents of murdered children, one participant was interviewed who was the mother of a teenage son who had committed suicide. The other participants included three fathers and eight mothers who, altogether, were the parents of nine murdered children. The deceased children collectively represented six sons and three daughters who ranged in age from two to thirty-one years of age at the time of death. The deaths had occurred

from one to eleven years prior to the time of the first interview. The majority of the children died from gunshot wounds, and the other deaths resulted from trauma and drowning. Several victims knew the perpetrator casually, and one participant's child was murdered by the other parent. In one instance the murder remains unsolved. These characteristics were a potential source for variance in the concepts that would emerge.

Consent and Confidentiality

The Institutional Review Board of Wayne State University in Detroit, Michigan required and granted permission to conduct the research and approved the written consent form (Appendix C).These procedures decrease the risk to the participants. Prior to the initial interview, participants read and signed the consent form, which the researcher retained. In addition, ongoing verbal or "process consent" was used throughout the research (Munhall, 1988, p. 157). In order to confirm ongoing consent when the parent was crying or appeared more upset than previously, the researcher paused and asked whether or not the parent wished to continue with the interview. Each time the parent indicated that he or she wanted to resume.

The researcher obtained demographic information (Appendix D) that was kept separate from the data (Stern, 1985). The participants all received a code to maintain their confidentiality. This policy avoided connecting embarrassing or harmful information to the participant. The participants selected the time and a private location for the interviews. As the researcher did with participant observation activities, she sought and obtained verbal permission to audiotape the sessions from all the participants. The researcher chose a person known for her personal integrity to transcribe the tapes. This person was familiar with the research process and was briefed on the confidential nature of the material. The

researcher kept the audiotapes, discs, and transcripts in secure locations and destroyed or returned the audiotapes to the participants at the conclusion of the research. The researcher obtained all data from the participants exclusively for research purposes. Subsequent discussions and dissemination of the results were done in a manner that avoided identifying information in order to maintain confidentiality.

Risks to the Participants

The researcher must always consider the risk to the participants prior to and throughout the study. Several researchers have discussed the legal and ethical issues related to qualitative research in general (Archbold, 1986; Munhall, 1988; Ramos, 1989). The risk to the participants was of special concern in this particularly sensitive area of study. Another researcher who was experienced in studying this substantive area suggested several issues to consider (Cowles, 1988a).

Initiating the interview. From the literature it is known that the reaction to loss may span years. The researcher wanted to interview parents with differing lengths of time since the death of their child in order to study the bereavement process over time. However, seeking a parent's participation too soon after his or her child's death could add to the emotional strain of the loss. At the other end of the continuum, the parent's participation years after the death of a child might evoke emotional and painful memories. In order to minimize the emotional strain to the parent, the researcher allowed each parent the option of initiating the first in-depth interview.

Emotional strain. Prior to beginning the interview, the researcher discussed the risk of emotional turmoil with the participants, but this issue did not seem to concern parents as much as the researcher had anticipated. Parents expressed awareness that

participation in such a study would be emotional. Either the parents chose to make the initial contact with the researcher, or they were introduced to the study by a third party. These introductions to the study may have given the participants more control over their emotions and their decision to participate than if the study had been introduced in a different manner.

Another concern of the researcher was the possibility of stimulating emotional responses that the parent may not have anticipated. Other researchers have referred to this issue as a "Pandora's box": the interview provokes previously unthought-of concerns by the parent (Ramos, 1989, p. 60). The researcher informed the participants of this risk prior to the research, but this concern also was unwarranted.

When participants became emotional, the nurse as a caretaker took precedence over the nurse as a researcher, and she paused and prepared to terminate the interview if the participant appeared unduly distressed. It was important for the nurse as a researcher to place her role of caring over that of discovery in conducting the study. Munhall (1988) refers to this issue as the therapeutic imperative superceding that of research. The researcher's intent was to discover more about the bereavement response but every effort was made to avoid doing so at the expense of the emotional well-being of the parents. Although participants did become emotional, a momentary pause was apparently sufficient for them to continue, and no participant ever chose to terminate the interview even when the option was given.

Disclosure of sensitive information. The nature of the study required that parents share not only emotional, but often sensitive information. Participation could prompt concerns by the parents that their responses are either abnormal or embarrassing.

Participants could have and did express concern that their response was not "right." The researcher was aware of this possibility and provided reassurance about the participant's response in a manner that attempted to be neither non-judgmental or directive but rather encouraged candid reporting. Reassurance minimized the risk to the participants yet permitted the interview to continue.

Trust had to be established between the researcher and the participants in order for the participants to divulge sensitive information. The researcher provided reassurance and acceptance of the emotions and private information that participants shared. As a result, participants seemed to speak candidly. They verbalized concern about being able to provide the needed data. All agreed to, and frequently volunteered for, further participation if needed. Participants appeared able to disclose sensitive information to the researcher, which permitted the research to continue without harm to the participant.

Decreasing risk. The responsibility for dealing with the risks and the sensitive nature of the interviews rested with the researcher. The researcher attempted to be perceptive to cues given by the participant in an interview by sensing when to pause, how to continue, and what to say. Other strategies included providing facial tissues, a telephone number to reach the researcher if questions arose and resources for support and self help if desired. All of the participants indicated that they were grateful that someone was interested in this topic of research. Participants indicated that being able to enlighten others about the bereavement experience outweighed any distress incurred with the interviews.

Participant Observation Activities

Participant observation activities by the researcher were an additional source of

data. Participant observation activities included the researcher's attendance at local meetings and national conferences on violent death for parents and professionals. A local support group consisted of five couples whose children had died from accidental deaths several years previously. A three-hour group session with these couples was audio taped while observations were recorded in field notes with the parents' consent. The researcher attended a national conference on violent death and one for Parents of Murdered Children (POMC). At the POMC convention, one day was devoted to participant observation with professionals who come in contact with the families of murdered children. Two additional days were spent observing and participating in activities with the parents whose children had been murdered.

Additionally, the literature and media were useful in the development and comparative analysis of the concepts that emerged from the study. A concurrent literature review done during the process of coding and analysis, facilitated the generation of concepts. Books, newspapers and magazines were perused for articles related to violent death, and pertinent articles were reviewed in detail. Data included a scrapbook of the media coverage that a parent had compiled related to her child's murder and to a second murder committed by the same perpetrator. Commercial films that were showing in the theaters or available for home previewing were viewed. Ten interviews conducted by the researcher in an earlier study were also used for comparative analysis. Throughout the substantive and theoretical coding and analysis, these sources provided additional data for the generation and development of the emerging concepts.

Researcher-Participant Involvement

The nature of a qualitative study results in the researcher's becoming involved with

the participants. The researcher affects the participants and the participants in turn affect the researcher (Lincoln & Guba, 1985). While this involvement is inherent in this type of a study, the researcher cannot become so involved that she is unable to maintain a realistic perspective on the data (Cowles, 1988a). As expected, given the sensitive nature of this study, each participant related an intense, emotional account of the child's death. The researcher utilized debriefing periodically to allay bias and maintain a realistic perspective on the data. Perceptions that could influence the analysis of the data were recorded in the field notes. When the researcher deemed that it was necessary, she shared her thoughts and feelings with a trusted colleague, without disclosing information that could have betrayed the confidentiality of the participant. The nature of participant research made it challenging for the researcher to be involved with the participants, but not to the extent that she was too overwhelmed to conduct the research.

<div align="center">Methods</div>

## Data Collection

Twelve in-depth interviews that were approximately two hours in length allowed the researcher to collect sufficient data to obtain both different views ("slices") and an adequate amount ("depth") of data to generate a substantive theory (Glaser & Strauss, 1967, p. 65) related to the bereavement response to the violent death of a child. As the theory emerged, additional short interviews were conducted with several of the participants. The primary means of data collection were unstructured formal interviews (Swanson, 1986). Supplemented by additional sources of information, the data obtained in the interviews was sufficient for the discovery and comparison of concepts in order to generate the theory.

In order to focus the direction of the initial interview, the researcher developed a topical guide (Appendix E) that was based on her experiences with, and knowledge of, bereaved parents. Lapel microphones were worn by the participants and the researcher. These proved to be a useful tool for obtaining a clear recording that facilitated transcription. The researcher then listened to the audiotape and noted any needed corrections in the transcript. Field notes and comments were compiled during participant observation activities or recorded as soon as possible after the encounter.

## Coding and Analysis

The researcher coded and analyzed the data based on the tenets of grounded theory (Glaser & Strauss, 1967; Glaser, 1978). Coding and analysis occurred simultaneously and began after transcription of the first interview. The researcher reviewed the content line by line. The initial coding, with its concurrent analysis, is termed open coding.

Open coding. Open coding is "the process of breaking down, examining, comparing, conceptualizing, and categorizing data" (Strauss & Corbin, 1990, p. 61). The process fractures, or takes apart, the data. Throughout open coding, the researcher analyzes the data and assigns a code to a phrase or a few lines that is an indicator of a concept. Concepts are labels that are applied to the indicators, or the phrases that suggest an event in the data (Strauss & Corbin, 1990). More than one code might be assigned to an indicator. These codes are termed substantive or in vivo codes since the codes at the empirical level often reflect the words of the participants. The researcher did open coding by reading a line or two at a time. While reading, the researcher asked herself questions such as "What is going on here?" or "What does this indicator represent?" For instance,

one participant related that "there were so many people" at the crime scene. This was

coded as public, and crime scene. The researcher wrote a code by each line or two of data

in longhand in the wide margins of the transcription. Open coding continued after the

transcription of the next three interviews and resulted in the identification of hundreds of

concepts from these four interviews.

Constant comparison. Researchers refer to each phrase or line or two of data that

suggests a code or concept as an indicator. Throughout coding and analysis, each time a

piece of data appeared to indicate a concept, this piece of data was coded. If the code was

a concept that the researcher had already discovered from the data, the researcher

compared the newest indicator to the earlier ones to verify that they were indicative of the

same concept. Glaser (1992) refers to the development of the concepts (and subsequent

theory) as emerging. In addition to comparing indicators to indicators, concepts were

compared to earlier concepts, and those which were similar were clustered together in a

category (Stern, 1980). Further analysis and coding was facilitated by writing each

concept and its indicators, key phrases from the data along with the coded source, on five-

by-eight index cards.

Theoretical sensitivity. Theoretical sensitivity is the ability of the researcher to

think of the data at an abstract level beyond the substantive codes (Glaser, 1978).

Theoretical sensitivity "refers to a personal quality of the researcher. It indicates an

awareness of the subtleties of meaning of data" (Strauass & Corbin, 1990, p. 41).

Theoretical sensitivity is evident when the researcher is able to extract from the data the

inference of the words, rather that just the concrete meaning. The researcher is able to

think of the data then in theoretical rather than just descriptive terms (Stern et al., 1984).

Coding and analysis in grounded theory is dependent upon the researcher's theoretical sensitivity or ability to see concepts within the empirical data, and subsequently to move the presentation of the analysis from an empirical to an abstract level. Throughout the process of this study, discussions with an expert grounded theorist and others versed in the method enhanced the theoretical sensitivity of the researcher. The researcher's ability to code the data at an abstract level permitted the analysis to go beyond description and identify the relationship between the concepts or categories at a higher, more integrated level (Glaser, 1978). For instance, indicators such as "he didn't care" or "he was a lot of help" were coded as "response" and "support" during open coding. Later, these concepts were clustered in a category and coded at an abstract level as "investment."

Theoretical sampling. Theoretical sampling is the principle that the emerging theory controls the process of data collection (Glaser & Strauss, 1967). The concepts that emerged and appeared to have a bearing on the process under study guided the researcher's decisions about where to conduct subsequent sampling (Strauss & Corbin, 1990). The developing theory directed the subsequent research. Once the concept of "public" emerged from the data as a central concept that affected bereavement, the principle of theoretical sampling directed the researcher to collect further data about this and related concepts. Meanwhile, the researcher suspended data collection of other concepts that did not emerge as having a bearing on bereavement.

As a consequence of the emergence of the concept of public, the researcher chose to sample from the group of parents whose children had been murdered. These deaths are often highly publicized events and would allow gathering of in-depth data. Choosing to continue to sample from parents of murdered children at this point minimized the

differences in the comparison groups in order to develop the concept in depth and clarify its relationship to other concepts (Glaser & Strauss, 1967). This type of coding is called axial coding (Strauss & Corbin, 1990). The concept of public did not emerge as the central concern in the data from the parents whose children died from suicides and accidents, but was of prime concern for those parents whose children were murdered. At this point, the emerging theory became limited to studying the bereavement response to a violent death from murder.

In order to develop the concept of public, the interview was modified. The new questions included: How much publicity was there about the death? What public systems did you come in contact with after the death? What was that like? How do you think it would have been different if your child had died from another cause? Theoretical sampling enhanced the development of "public" and other emerging concepts and was a basis for the researcher to formulate tentative hypotheses about the relationship of "public" to other concepts.

The core category. Once several predominant concepts emerged, the researcher needed to discover the process that accounted for most of the variance in the response to violent childhood death. This concept is called a core category because it "...accounts for most of the variation in a pattern of behavior" (Glaser, 1992, p. 75). A core category is redundant: it appears over and over throughout the data and is specific to an empirical area of study. Its hallmark is that it integrates the other concepts related to the process. The researcher wanted to discover how the central concern of the parents was resolved.

In contrast to the core category, concepts frequently emerged that were not specific to the context of violent death. These concepts were "universal" ones that any

person familiar with bereavement would expect to be of concern when a child has died. The researcher kept a list of these "universal" concepts that emerged from the data such as change, vulnerability, and fear of reoccurrence. Identifying the universal concepts helped the researcher to maintain a focus on discovering the core category.

Emerging concepts clustered into two central categories: the public response and the private response. Both concepts appeared throughout the data and seemed crucial to the parent's bereavement response, but neither one alone could account for the response of these parents to the violent death. What was the connection between the two? As the analysis continued, the researcher realized that what accounted for the variance in the bereavement response was synthesis: the ability of the bereaved to integrate the public and private response to the death. Synthesizing emerged as the core variable that integrated the other emerging concepts into a substantive theory.

Theoretical coding. Synthesis is not only the core category but one of the theory's theoretical codes. A theoretical code "conceptualizes how the substantive codes may relate to each other as hypotheses to be integrated into a theory" and gives "integrative scope, broad pictures, and a new perspective" to the problem (Glaser, 1978, p. 72). The concepts of public and private emerged from the data early in the study. The researcher recognized that there was a relationship between the two and could make the statement that the public and private response to a violent death affect the parent's bereavement response. But the concept that rendered explicit the "subtleties of the relationships" that emerged from the data (Glaser, 1978, p. 71) was synthesis.

Selective coding. In grounded theory studies, once the core category is identified, coding becomes more limited or selective. The core variable provides a focus for further data

collection and sampling. The concepts are developed until nothing new emerges about the concepts (Stern et al., 1984). Selective coding refines and develops the concepts and categories by developing the properties (characteristics) and dimensions (variations) of each (Strauss & Corbin, 1990). In this study, selective coding limited coding to synthesis and its related concepts. The concepts were developed in greater detail at this point, and the relationships between the concepts were verified. For instance, it was discovered that the degree of public investment determined the degree of public response. In Glaser's words, the codes "weave the fractured story back together again" (1978, p. 72). Selective coding developed the core category of synthesis and its related concepts.

Memos. Memos are documentation of the research process. The memos create an audit trail that permits another individual knowledgeable in the method to ascertain whether the researcher's interpretation of the data was valid (Glaser, 1978). The audit trail is one strategy for achieving rigor in a qualitative research study (Sandelowski, 1986). The necessity of the audit trail compelled the researcher to record her thoughts throughout coding and analysis, and to avoid depending on her memory to recreate the research process.

The researcher compiled memos of the coding and analysis process in notebooks separate from the field notes. The type and level of the memos varied as the research progressed. The first memos were operational memos (Strauss, 1987) that tracked what was done next and why. As coding and analysis progressed, so did the level of memos. Later memos were theoretical memos that suggested a relationships between the concepts in the form of hypotheses (Strauss, 1987). For example, how disconcerting the death is determines the public response. Memos had an extremely practical aspect as the researcher was ready to present the findings (Glaser, 1978; Strauss, 1987). Theoretical sorting of memos enabled the

researcher to create an outline in order to "put the fractured data back together" (Glaser, 1978, p. 116) when she was ready to disseminate the findings.

## Grounded Theory Criteria

A grounded theory is judged once the findings from the study are disseminated. A theory that is good meets specific criteria. A theory is "likely to be a better theory to the degree that is has been inductively developed" (Glaser & Strauss, 1967, p. 5). The systematic use of constant comparison and analysis generates a theory that fits, works, is relevant (Glaser & Strauss 1967), and is modifiable (Glaser, 1978).

"Fit" means that the categories are "applicable to and indicated by the data under study" (Glaser & Strauss, 1967, p. 3). The categories emerged from the data, rather than grouping the data into preconceived categories. In this study, comments such as "well, I really didn't believe that before, but she was a college student, so I suppose she could have done it" fit with the concept of synthesis instead of being forced into a commonly accepted stage of grief such as acceptance.

"Work" means that the categories are "meaningfully relevant to and . . . able to explain the behavior under study" (Glaser & Strauss, 1967, p.3). The categories not only explain, but predict and interpret what is happening in the substantive area (Glaser, 1978). In this study, the core category of synthesis explained that the bereavement response of parents whose children died from the violence of murder was related to the ability of the parent to synthesize his or her own private response with that of the public. The theory predicts that a greater investment in the death will result in a more intense response. The theory interprets the influence of such concepts as investment on the bereavement. response to a violent death.

A third criterion is relevance. Theories that are relevant make sense to the persons in the area of study. When the researcher related the findings from the study to various participants, they verified, "That's it!" Theories that are relevant often have "grab" (Glaser, 1978, p. 4). The theory is interesting and people remember it.

The last criterion is that the theory can be modified. Subsequent indicators do not necessitate that the theory be rejected or accepted as is. Rather, additional indicators from new data only modify the theory by suggesting additional concepts, relationships and variance in the process (Glaser, 1978). The theory is ever-emerging.

## Summary

Grounded theory is a research methodology to generate theory using a process of comparative analysis. This chapter is an overview of the application of grounded theory to one research study. A brief history of the development and purpose of the research method in the generation of theory was given. The researcher presented the appropriateness of this methodology for studying the bereavement response to violent childhood death. Potential risks to persons who participate in qualitative studies, especially ones that are of a sensitive nature such as this, were identified, and the researcher explained how these were minimized. A detailed discussion of the pertinent processes in grounded theory was illustrated with examples such as the emergence of synthesis as the core variable to enhance the understanding of the application of grounded theory to this study. The researcher also listed the accepted criteria for judging a grounded theory study. The findings from the research are presented in subsequent chapters.

CHAPTER IV

SYNTHESIS AND RECREATING THE SCENARIO OF THE DEATH

Synthesis, the core concept that emerged during the study, is a cognitive process. It is a method of thinking, reasoning, and analyzing that enables a person to combine diverse and varying ideas into a "unified entity" (Webster, 1989, p. 1443) or whole that summarizes and integrates the available information (Kavale, 1995) about a serious concern. The process is dialectical (Politzer, 1976) and leads to a qualitative change in ideas about the problem under consideration. The new idea is an "insightful summary" (Stock, Benito, & Lasa, 1995, p. 105) that encompass previous findings and advances the understanding of the relationship between the original ideas (Stevens, 1984). Discussions of synthesis and its synonyms, such as reasoning, dialectics, induction, deduction, and analysis (Mawson & Whitling, 1964) emphasize the cognitive aspects of the process. In contrast, definitions of grief focus on the emotional.

As the analysis described in Chapter III has shown, synthesis was the process central to the participants' response to their children's murders. Synthesis is the basic process "*that processes the problem* to make life viable in the action scene" (Glaser, 1978, p. 57). In a grounded theory study, the core concept accounts for how persons resolve the on-going concern. This research revealed that the process of synthesis accounted for the differences in parents' bereavement response to a violent death. The most difficult factor for parents in this situation was contending with differences between their own private responses to the death and those of the public. Synthesis resulted when parents were able to integrate the two successfully.

Once synthesis emerged as the core variable, the research progressed to conducting

a concurrent literature search in a variety of disciplines. Exploring the literature about synthesis in other disciplines helped the researcher to bracket preconceived ideas about the process and to elucidate the concept further (Glaser, 1978). The literature review, especially discussions of research and theory synthesis, sensitized the researcher to possible theoretical concepts for the emerging codes.

Historical Perspective

Conflicting ideas precipitate the process of synthesis, which is a means of solving the cognitive problem caused by this conflict. The first idea or thesis is opposed by a conflicting antithesis. History credits Hegel (1770-1831) with having espoused the philosophical belief that the competition of opposites is a means of understanding an event that has transpired (Van Doren, 1991). In this study, the parents' comments throughout the interviews indicated the conflicting information that confronted them as they attempted to recreate the scenario that surrounded the death ("I thought. . . but they said. . ." ). In the process of synthesis, the conflict is resolved by integrating the conflicting views. The outcome incorporates previous perspectives and moves the current understanding of the problem beyond that which was previously known.

The Process of Synthesis

The basis of synthesis is knowledge. For bereaved parents, knowledge came from a variety of sources about the death of the children: beliefs, experiences, ideas, perceptions and facts. Persons judge knowledge to be true, false or a matter of opinion and then formulate this knowledge into propositions (Holden, 1996). The more serious the question under study, the more knowledge, evidence or information one needs to draw a conclusion about the truth of the propositions under consideration (Kikuchi, Simmons, & Romyn,

1996). As parents attained more information about their children's deaths, they were exposed to conflicting information, which often precipitated the process of synthesis (Athey, 1982).

Individuals who face a grave concern, such as bereaved parents, and researchers investigating a serious problem both proceed through similar phases in the process of synthesis. Each defines the problem, gathers available information, asks relevant questions, and analyzes the situation. Subsequently, they propose hypotheses and possible solutions and formulate generalizations that "summarize the data, predict new observations, and guide further research" (Kavale, 1995, p.355). Throughout the process, each considers plausible factors and co-variants that may have had a bearing on the outcome, and subsequently makes judgement about integrating or rejecting available information (Carlberg & Walberg, 1984). In both instances synthesis is rarely accomplished in an orderly or methodical fashion but rather progresses rapidly at times that are not always anticipated. However, synthesis is necessary to advance knowledge and draw conclusions (Kavale, 1995) about the problem. In this study, interviews with the parents contained the elements that are typically associated with the process of synthesis that also occurs during formal research. Parents actively sought this information about the death of the child ("We had to know what happened").

Outcomes of Synthesis

Synthesis occurs when one is able to integrate diverse findings or information about a concern and advance the understanding of the problem. The advanced understanding of the problem reflects the fact that synthesis is a qualitative change and not just a process of accumulation (Stevens, 1984). Synthesis results in an advanced

understanding of the problem for several reasons (Athey, 1982). One reason is that synthesis defines the context or parameters of the problem. In this study, interviewed parents prefaced their comments with phrases such as "From what we know about the death. . . " Synthesis also presents a balanced and varied perspective on the problem. Throughout their interviews, parents contrasted what they had thought and known with conflicting information attained from the public response and explained how they had reconciled those differences by integrating them. Additionally, the parents' integration of these varied perspectives broadened their understanding of the death. The parents' recreation of the scenario of the death included not only the information that they had originally known about the death but diverse pieces of information they had acquired from the public. The parents' ability to combine this diverse information created a more insightful (Stevens, 1984), complete and accurate account of the death. Parents indicated throughout the interviews that synthesis of their own private responses with the responses of the public was a cognitive endeavor ("I think. . .", "I thought. . .", "I knew. . .").

Synthesis results in an understanding of the problem at the current time, and it is important to note that the element of time is inherent in any process. The synthesized idea that resulted from the thesis-antithesis struggle becomes a new thesis, with the potential to be contested by another antithesis. As time progresses, there is the potential for an "ad infinitum" process in this contest/confrontation (Morris & Pai, 1976) and judgement process (Kavale, 1995). Analysis of the data from the interviews in the study revealed that synthesis was on-going for the bereaved parents. They frequently made comments that indicated the continuing nature of their synthesis ("At first we thought. . .but then they said . . .", "So now we think. . .", "Unless someone else comes forward. . .").

For the synthesis of information to occur, prior investigations must have been interested in similar questions and focused on the same outcomes (Carlberg & Walberg, 1984). In this study, every parent responded to the death by attempting to recreate the scenario that surrounded the death of his or her child from violence. At the same time, the public response to the death also centered on recreating a version of the death. The scenarios that emerged were different in various aspects and for this reason created conflict for the parent. In spite of these differences, however, the goals of the parent and the public were congruent: to recreate the scenario that surrounded the death.

## The Story

Each story was a detailed review that recreated the scenario surrounding the death. Every parent included in this account a description and explanation of the death, the circumstances surrounding it, the sequence of events, and his or her response to the death. At the time of the interview, each parent's story related the participant's personal knowledge about the death at the time of the murder and how it changed over time as the process of synthesis took place. Each story represented the truth for the parent that was a composite of experiences "and ways of thinking and knowing" (Rew, 1996, p. 58) about the death from the parent's perspective (Sedney, Baker, & Gross 1994). Persons often think of stories as fiction and contrast them with truth. Yet each contains elements of the other. The stories that are related "in research interviews comprise efforts to tell the truth" (Sandelowski, 1996, p. 120). Stories that are believable, coherent, consistent, and intelligible are "good" stories (Sandelowski, 1996) that represent the truth as it is known to the participants. The researcher determines the credibility of the findings from previous experiences, the believability of the account within the context of the story, and "through

prolonged engagement with informants" (Leininger, 1990, p. 43). During the study, the researcher ascertained through these activities that she was obtaining believable accounts, which were a prerequisite for generating credible findings.

<u>Death Review</u>

In the thanatology literature, telling the story of the death is referred to as a death review, and this activity is known to be an important component of the bereavement process (Parry, 1994; Sedney et al., 1994; Walter, 1996). Reviewing the death accomplishes the purpose of maintaining some semblance of the deceased within the life of the bereaved. In the past, classic models of grief emphasized that the major purpose of grief was to detach from the deceased. Maintaining a connection to the deceased was seen to be of minor importance. More recently, however, professionals have come to recognize the importance of maintaining a connection to the deceased. Reviewing or telling the story of the death creates an enduring place for the deceased within the lives of the living (Walter, 1996). From past experience, the researcher anticipated that each parent would want to include an account of the child's death during the interview. Yet prior to conducting the study, she was unaware of the importance that telling the story of the death would assume in the substantive theory.

The passage of time accounts for differences in recounting the death. Reviewing the death can occur periodically from months to years after the death (Parry, 1994) and may eventually buffer the emotional response to loss. When a death results from violence, the passage of time may expose the parent to new information about the death. If the information differs from what was previously known, it challenges the parent cognitively either to reject or to integrate the new information into the story of the death. Synthesis

occurs with the parent's integration of new information and changes the telling of the story.

Context of the Death Review

Differences in the telling of the story also are dependent upon the context of the death. The context specifies the circumstances or the setting and is a crucial element to a story (Sandelowski, 1996; Sedney et al., 1994). Circumstances and details of the death vary depending on who is telling the story. For example, when a mother told the story of her son's death she related that the context was murder. Published accounts reported the death as self-defense. The parent and the public both recreated the scenario of the death, but differences existed between the information that the mother provided in the interview and public accounts of the death. These discrepancies were conflicting information that the parent integrated into her recreation of the scenario surrounding the death. The mother acknowledged that her account differed from official accounts but integrated the information with her conclusion: "What counts is he's in jail for another murder." Throughout the study, differences occurred between the parents' and the public's recreation of the scenario surrounding the death.

Dialectical Characteristics

Dialectical synthesis is a *"developmental transformation . . . which occurs via constitutive and interactive relationships"* (Basseches, 1984, p. 22). The stories of parents who were able to synthesize their private response with that of the public displayed the dialectical characteristics of the process of synthesis. In these instances, the parents prefaced comments with phrases that reflected a change in their understanding of the death scenario and attributed this change to the response of the public. In contrast to the

parents' initial scenario, the revised scenarios were modified from the previous ones and were more comprehensive. Synthesis did not always result in the parents liking the information that they obtained but they related satisfaction that synthesizing this information achieved their goal of recreating the scenario of the death ("At least we know.").

Parents varied in their ability to synthesize their response to the death with that of the public. Parents who were absolutely unable to integrate conflicting information from the public realm maintained their original contentions about the death. The stories of parents who were able to synthesize conflicting accounts from the public into their scenarios integrated the particulars of the events into a comprehensive whole (Politzer, 1976; Kempler, 1978). An excerpt of an interview with one mother indicated her ability to synthesize her response to the death with that of the public.

> We don't know to this day. That was a big problem. Could she— they said they let her go and she reached into her car to grab her purse and as they were leaving. . . Well, I know that doesn't make sense, and in the back of your mind, you say to yourself "Could she have been dumb enough?" Because she liked her paycheck, her money, could she have been dumb enough to have thought she could grab her purse? I mean common sense tells you no. No, when you are escaping somebody, you surely wouldn't get into the car. But because of the comments published by the paper that they were just stealing her purse, and that she had reached into the car or whatever, we began to question ourselves. And then you think, my God, I'm questioning someone who is dead.

Bopp and Weeks (1984) propose analyzing a statement such as this one by searching for indicators of dialectical characteristics. They divide these into four categories: motion, which results from change; a new form or shape to the information; an analysis of relationships; and transformation from the original ideas. Indicators of all of these dialectical characteristics can be found in this account.

Motion. Change involves movement. Movement occurs as elements of the conflicting relationships; and transformation from the original ideas. Indicators of all of these information interact (Bopp & Weeks, 1984). Interaction occurs via the cognitive activities of thinking, reasoning, and analyzing. Previous forms of thought give way and change to a new form that results from interaction. In the excerpt, change occurred in the parent's thoughts about the possible risk behaviors on the part of the victim at the time of the murder. This change required the integration of the parent's initial thoughts in response to the death with the information from the pubic response to the death. The parent's thoughts about whether the deceased engaged in risky behavior at the time of her death changed from "no" to "could she?"

Form. One characteristic of synthesis is that information takes a new form or shape. Synthesis presents the information as an integrated whole instead of fragmented pieces. The classic comment that "the whole is greater than the sum of its parts" summarizes this characteristic (Basseches, 1984, p.21) and refers to the advanced understanding that results. Synthesis presents a whole picture that incorporates a variety of viewpoints versus the view from a single perspective. This form or overall picture provides a greater understanding and insight than could be gained by relying on isolated pieces of information. For one parent, the thought that her daughter would reach into a vehicle to retrieve a purse in the course of an abduction did not make sense. In contrast, the public contention was that she did. This conflicting information prompted the mother to integrate the knowledge that the daughter valued her money and consider alternative possibilities. As an isolated event, reaching for a purse is not risky behavior. In the context of an abduction it was evaluated by the parent who had knowledge of the consequences as

risky, however. This information advanced the mother's knowledge about what could have happened at the time of the death. She incorporated this information from the public realm into her private recreation of the scenario.

Relationships. Attempting to retrieve a purse in the course of an abduction is risky behavior. The relationship between the behavior of retrieving and the context of abduction integrates the two separate activities and changes the evaluation of the behavior of retrieving from benign to risky based on the context in which it occurred. This "interaction is the source of movement" in the ideas involved in synthesis (Bopp & Weeks, 1984, p. 52). The relationship determines not only the movement that occurs between the conflicting information but the subsequent form and transformation that results in previous information. Prior to synthesis, the mother's contention was that there was no relationship between the two pieces of conflicting information. With synthesis, she integrated the information into a tentative relationship that she included in the scenario of the death.

Transformation. Transformation is a change in the original ideas. A person connects or rearranges the original information in a new manner. Parents who accomplished synthesis were flexible and fit diverse information together. The parent reformulated the old information with the new in a way that accommodated, rather that rejected, the new. In this example, the parent integrated into her recreation of the scenario the possibility that the daughter may have engaged in risky behavior during the abduction that ultimately resulted in her death.

The synthesis of the information transformed the parent's knowledge of what may have occurred. The private response (She would not engage in risky behavior in the course of an abduction) was integrated with the public response (The media said she

engaged in risky behavior in the course of an abduction). Synthesis resulted in the formation of an alternate hypothesis (She liked her money so she could have engaged in risky behavior).

In contrast, parents who were unable to integrate the private and public response rejected new information. These parents could not accommodate new information and failed to demonstrate any movement or transformation in responding to the death. They retained their original scenario about the death. In the absence of synthesis, the mother would have maintained her original contention that the daughter could not have engaged in risky behavior.

## Summary

A child's death from violence precipitates an intense response in parents, and often in the public. The public response to the death is the most difficult issue for parents whose children are murdered. The goal of both the parent and the public is to tell the story or recreate the scenario that surrounded the death. Often conflicting information surfaces in the two accounts. Parents resolve the conflict through the cognitive process of synthesis, which allows the parents to integrate the conflicting information between the private and public responses. The outcome of synthesis is that the parent's recreation of the scenario changes. When the parent is unable to integrate conflicting information, and rejects it, the scenario remains unchanged.

# CHAPTER V

## The Substantive Theory

This chapter presents the substantive theory of the parental bereavement response to the violent death of a child. A substantive theory illuminates an empirical area of inquiry (Strauss, 1987). In the context of violent death, the theory advances the understanding of how parents respond to the murder of their child. This enhanced understanding results from the theory's ability to predict and explain the behavior of the participants (Glaser & Strauss, 1967). When a child is murdered, the public response to the death creates a problem for the parents. Parents resolve this problem through the process of synthesis. This is a cognitive response to the loss in which they integrate their own private response to the death with that of the public. Synthesis is the core category. It is the "central phenomenon" (Strauss & Corbin, 1990, p. 116) or "main theme," which has a "prevalent relationship to other categories thereby integrating them into a whole" within the theory (Glaser, 1978, p.95). Synthesis accounts for the variance in the parents' responses to the violent death of their child. Parents attain synthesis when they integrate information from the preliminary and subsequent reports in recreating the scenario of the death.

### Universal versus Unique Concerns

The loss of a child is an extemely stressful event for the parents. Some of the stressors surrounding the death of a child are faced by all bereaved parents, including parents whose child has been murdered. Indicators of these "universal" concerns described in the literature and are also found in the data from this study. For example, bereaved parents point out that when a child dies, there is an emptiness that follows the loss. One mother said during the interview, "Every Christmas, every holiday, there is an

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empty spot." Such a statement is an indicator of the "empty space" phenomenon. In their

grounded theory study, McClowry, Davies, May, Kulenkamp & Martinson (1987)

identified this concept as the core variable that accounted for the difference in how parents

whose children had died of cancer responded to the death. Furthermore, the emptiness

that follows the death of a child is not a problem that is exclusive to the loss of a child

from cancer. Rather, this sense of loss is a problem for every parent whose child dies.

These common problems are reflected in the stories that all bereaved parents tell

about the death of their children. What makes the stories different from one another is the

context of the death. The context of violent death dominates the story told by each parent

of a murdered child and influences the parent's response. As a result, the "story line" of

parents of murdered children is distinct from the stories of other bereaved parents. These

parents have unique problems to resolve in their bereavement process.

The Central Concern

In this study, the parents of murdered children found that the response of the

public was the most troublesome issue for them to face. (The response of the public is

depicted in Figure 1) Once any death is reported, the public is involved to some extent, yet

a violent death involves individuals outside of the family constellation more than deaths

from other causes. Individuals in various capacities respond to and are interested in the

murder for a variety of reasons. Some individuals respond out of duty or obligation while

others are prompted by a range of motivations including curiosity, care, concern, and self-

serving interests. The wide range of these responses creates problems for the parents.

Initially, the police, coroner, and possibly witnesses respond to the murder. As

time passes, other members of society become involved as well, especially those who
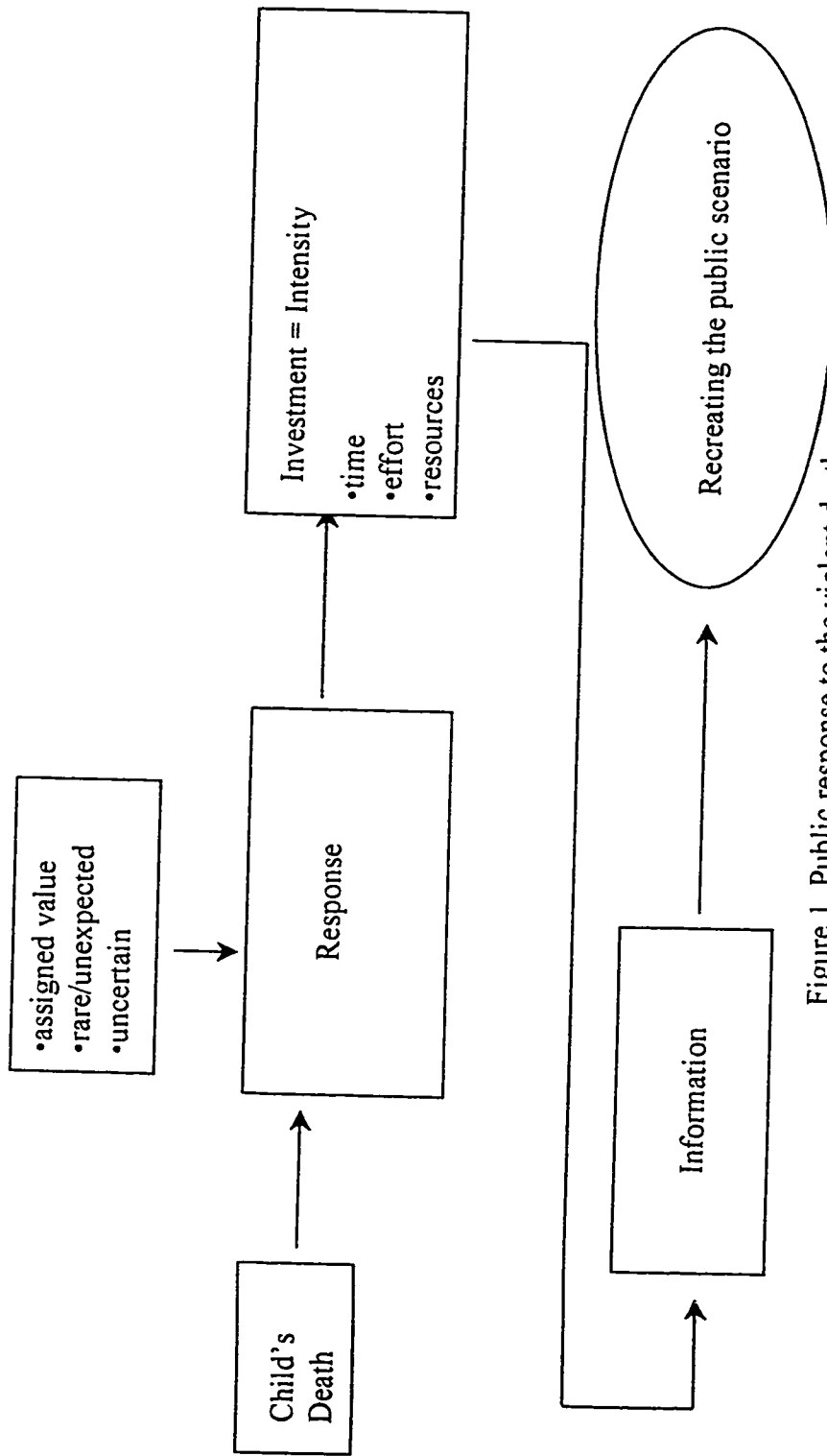
Figure 1. Public response to the violent death of a child

work in the legal, judicial, and criminal systems - lawyers, court officials, and detectives. Members of the media, including radio, television, and newspaper personnel, also respond and in some instances devote so much attention to the murder that the death escalates into a form of entertainment. When this happens, individuals who under other circumstances would not be aware of the death respond to the attention surrounding certain deaths by investing to find out more about what happened. They invest in the murder by expending time, effort, and resources to recreate the scenario of the death. To parents, the intensity of this public response shows how much investment the public has in the child's death, measured by the time, effort, and resources spent on recreating the scenario. For the parents of the murdered child, it is not the public's emotional response but their behavioral responses - the actions taken or not taken - that are the most difficult.

Public activity centers around determining what happened when the murder occurred. While both the parents and the public respond to the murder of a child by attempting to recreate a scenario describing the circumstances of the death, grieving parents are confronted by the fact that these versions are different. Most of what the parent initially knows about the murder comes from various members of the public, who provide the preliminary reports. From this public information, the parents develop a tentative idea of what happened, but subsequent reports arise as both the public and the parents continue to seek information. Inevitably, discrepancies occur as the preliminary reports are contradicted by subsequent discoveries. Parents are then confronted with the task of revising their tentative version to incorporate the new information, and they accomplished this through the cognitive response of synthesis. This study discovered that the process of synthesis resulted as parents integrated information about the death from

the preliminary and subsequent reports.

The process of synthesis, by its nature, occurred over time. The parents explained that as time passed, they synthesized in varying degrees the discrepancies between their initial rendition of what happened and the version developed by the public. The substantive theory outlines a progression of ideas that parallels this temporal flow (Sandelowski, in press) of the process. Figure 2 depicts the phases of synthesis involved in the parents' response to loss.

### The Preliminary Reports

The preliminary report represents the first phase in the parents' process of synthesis and contain the first tentative information about the death. Parents are less cognizant of their acquisition of information at this point in comparison to later times, but this phase is significant because it becomes the parents' foundation for recreating its scenario. Statements by the parents showed that they were aware of the tentative nature of the preliminary reports. For instance, parents frequently commented, "At first they only told us . . . so when they later said that I thought . . . ." In retelling the story of the murders, the parents explained how their initial understanding of the death progressed and became a synthesis that took account of additional information.

### Responding

To obtain preliminary information about the death, and ultimately to develop a complete picture of the events surrounding it, parents must depend on the response of the public. Initially, certain individuals report preliminary information, and the parents begin to develop their understanding about the murder. When other members of the public invest time, effort, and resources to learn more about the murder, the information available to the
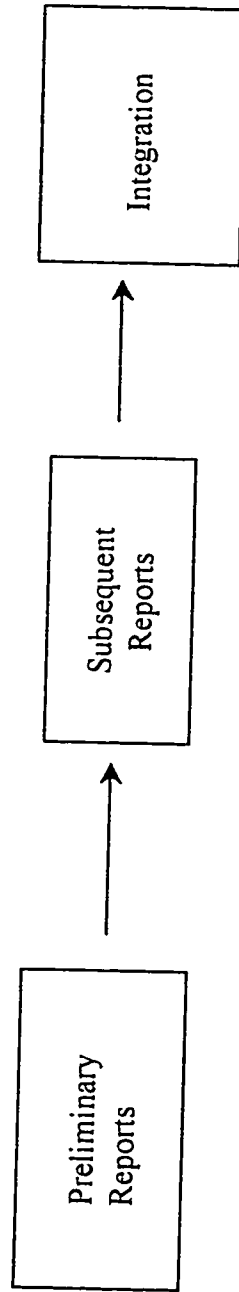
Figure 2. Phases in the parent's synthesis of the private and public response to the violent death of the child

parents also increases. In this sense, the parents find the public response not only necessary but desirable. However, stressors arise when members of the public fail to respond or when the investment yields information that confronts the parent with discrepancies.

The degree of upset that a death causes determines who besides the parents becomes aware of, and responds to, the death. A death seems more or less disruptive to the public based on the value of the deceased to society, the rare or unexpected nature of the death, and the level of uncertainty about the events surrounding it. When a death is very disruptive, as is a murder, more persons are likely to respond and to do so more intensely. An intense response results in the development of more information about the death.

In contrast, parents are always distraught about the death of their child. When a child is murdered, his or her parents experience an intense emotional response, and the violent context of the death only adds to their pain. When children are murdered, the parents also respond cognitively by investing time, effort, and resources to learn what happened. Murders occur under unexpected and uncertain conditions that usually offer parents only limited information. For one mother, her son's death was not totally unexpected. How he died was unexpected, however. She said, "We knew he'd been on drugs since he was eight years old. We found that out in drug 'rehab.' We thought he'd die from an overdose. Not murdered!" This mother acknowledged her son's drug activities and knew that this information might someday be part of a story about his death. It was not a fact that she would have been challenged to synthesize into the scenario. However, it took a great deal of effort for her to incorporate the fact that he was

murdered because of his drug activity rather than dying of an overdose. The more

unexpected and uncertain the death, the greater the investment the parents must make to

obtain or incorporate the information about the death.

The public also finds upsetting the deaths that occur under uncertain and

unexpected circumstances. Deaths are upsetting when they happen to one who is a

celebrity, young, beautiful, wealthy, or White because society places a high value on these

attributes. The death of JonBenet Ramsey on Christmas night in 1996 contained all the

elements that the public finds upsetting (Hewitt, 1997). When a murder happens to

someone like this, they find the murder more upsetting than the murder of someone who is

old, unattractive, poor, obscure, and a minority. These elements influence who responds to

and tells the story of the death.

Uncertainty about the events surrounding the murder is another criterion by which

the public gauges how disconcerting the death is. Deaths are upsetting in proportion to

uncertainty that surrounds them. The public responds and invests more, whether through

official investigations or by buying tabloids, into recreating the scenario of the death when

they are uncertain about what occurred. On the other hand, the response is less when they

think that they are certain about what happened. As an example, one mother felt that the

authorities never investigated her daughter's murder fully. She thought that the police

were certain that her son-in-law killed his wife and therefore never pursued any other

possibilities. Years after her daughter's murder the mother said, "They always thought

that my son-in-law did it, so they never looked at anyone else." The inadequate response

was a problem for the mother. Because the detectives felt certain about the events

surrounding the death, their response was minimal. In the parent's estimation, their

response did not yield adequate information for her to recreate the scenario of the death. This mother was still distraught that the police failed to respond adequately to her daughter's death.

Deaths are also more upsetting to the public when they are unexpected. The public makes a judgement that the death is an unexpected event when the death violates statistics or society's values. For instance, they perceive murders as disconcerting when they occur in areas that they consider safe or when the murder involves young children. Under these conditions, the murder is more upsetting than deaths that follow an expected course of events, such as a prolonged illness and the unexpected nature of the death intensifies the response to the loss.

The public's response is also affected by how upsetting they find the death. At times, they fail to invest, while at other times, they withdraw or are indifferent in response to the death. One parent said, "If you meet someone at the supermarket that you know, you'll see them turn and go down another aisle and just avoid you." These responses are also a problem for the parents because information about the deaths does not always come from officials. Often private individuals have knowledge of the events surrounding a murder, and if they fail to invest or withdraw, the parents' potential for learning more about the death decreases.

Investment and Intensity

It is important to the parents for others to respond by investing in the death. Investment is an intervening condition (Strauss & Corbin, 1990) between the response and the scenario of the death. Parents recognized the importance of investment and realized that activities such as the investigations of officials, the reports of private citizens, and the

coverage by the media, all involved time, effort, and resources. All of these forms of investment can influence the quantity and quality of information available to the parents. A father pointed out, "We thought our daughter's death warranted a full-fledged investigation." He knew that expenditure of time, effort, and resources by public personnel would influence what he could learn about the death.

Time. For both the parents and the public time is a valuable asset in obtaining accurate and complete information. Yet a limited parameter of time exists during which officials can expend effort and resources. One mother explained, "They really believe you have 48 hours and if something doesn't materialize in the first 48 hours it really starts getting cold." As time passes, the likelihood of the parents' obtaining additional information decreases. A minimal preliminary report, which is typically prepared under time constraints, also increases the probability that parents will need to synthesize more discrepancies from subsequent reports into their scenarios of the death.

As time passes, the public's investment and the corresponding intensity of the response may decrease. When this happens, little additional information about the scenario is generated. When a death is extremely disconcerting to the public, however, they may continue to maintain the investment in recreating the scenario of the death and potentially may generate information many years later. In addition, the passage of time may lessen the public's fear of revealing information. A parent pointed out, "I was glad to have the publicity and the exposure so that just in case, enough time had gone by someone felt like, you know, now we can talk about it and come forward." When the public's fear decreases sufficiently, additional information may then surface.

Effort. Effort is an additional component of investment. The amount of

information that the parent has to recreate the scenario of the death depends on the effort expended in accumulating information. The degree of effort that the public puts forth limits the amount of information available to the parent. A mother related that the police failed to respond to her son's abduction because as she said, "They didn't care." Some officials could just "put their time in" and "go through the motions" at a superficial level of investment while others expend time and effort in a concerted attempt to discover information.

Resources. The level of resources available to learn what happened can have a tremendous bearing on the amount of information that the parents and the public are able to access and accumulate. Resources increase the options to learn more about the death. One wealthy mother said, "I will do anything to solve this murder. Anything. Whatever you need. You want me to bring in a psychic, I mean, I'll bring in a psychic. I will pay a reward. I will pay a detective." The level of resources influences the quality and quantity of information in the preliminary as well as the subsequent reports. When parents lack such resources, and when the public must operate on a limited budget, parents may receive only limited information to incorporate into their scenarios.

Tentative Scenario

In response to the death, the parents rely on the available information to develop a tentative scenario. This first understanding of the events surrounding the death involves minimal analysis and evaluation on the part of the parents. The preliminary report, the first account of the death, contains limited findings and information concerning the sequencing of events, responsibility, the cause, and the contextual factors. Yet everything contained in the preliminary report becomes the parent's benchmark for evaluating the conflicting

information that may arise in subsequent reports. Although parents related that they were more passive in their acquisition, analysis and evaluation of information at this point in comparison to later times, this phase is important to the process of synthesis. From the preliminary reports the parents develop the seminal understanding of the events surrounding the death. The integration of all subsequent information is contingent upon the outcome of this phase of the preliminary reports.

## Subsequent Reports

Subsequent reports result from the public's investment in the murder. Parents compare the additional information with their benchmark and decide whether or not to accept it and to synthesize it into their scenarios of the death. As new data surfaces, parents continually recreate the tentative scenario. Subsequent reports depend of the continuing investment of others in the death. More time, effort, and resources spent in recreating the scenario of the death result in more post-death events like autopsies, police reports, a coroner's investigation, and witnesses' accounts. These kind of post death events are important to the parents because they increase the number of subsequent reports and therefore the volume of information to help explain the events of the death. These subsequent reports require the parents to synthesize more information, but they also allow the parents to develop a more comprehensive understanding of the events surrounding the murder.

In their evaluation of the information, parents determine whether the additional data supports, negates, or augments their tentative scenario. Subsequent reports that contain contradictions challenge the parents with an antithesis that contrasts with the original thesis presented in the preliminary report. For instance, from the information in

the preliminary report the parents may have believed that the child was murdered, but the subsequent reports may identify the death as an accident. In this instance, the parents must decide whether to accept or reject this new identification. The decision that the parents make in evaluating the new data influences the recreation of the scenario. Rejecting the information forces the parents to maintain their original version while continuing to be confronted by the discrepancy. Accepting the information permits the parents to reconcile the present and prior information into a new scenario. Ultimately, the fewer the discrepancies between the primary and subsequent report, the more readily the parents can integrate new information from the subsequent reports. This phase of synthesis appears in Figure 3.

## Accumulating Information

The response to a more disconcerting death can result in reports, including official documentation and personal communications, that number in the thousands. Parents must be able to access the information from the reports, but certain barriers inhibit their efforts. For example, some of the facts about a murder are available only to individuals in select roles and at certain points in time. One father explained that the prosecuting attorney could not share everything about the murder until after the case was over. The father said,"There was so much information that he couldn't tell me 'til after the trial." Parents employed multiple strategies to overcome these barriers.

Facilitating access. If the parents had previous experiences in accessing public information, they were more likely to learn additional facts about the murder. Often, however, parents have had limited interaction with public systems before the death and were frequently unfamiliar with the legal and judicial systems, the roles of the various
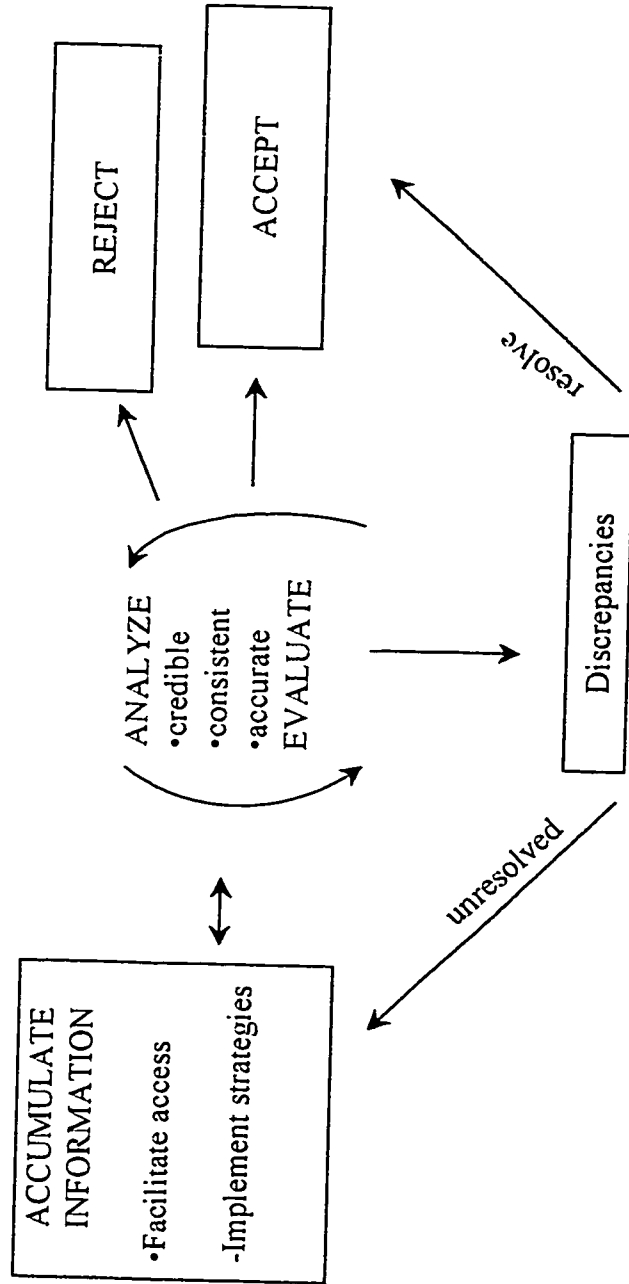
Figure 3. The parent's processing of subsequent information

people involved, and the rights of the parties. One father said, "We had no idea in our

mind what a prosecuting attorney was or what their job was." The parents' lack of

experience made it more difficult for them to discover what public officials had learned

about the events surrounding the death of their child. In theses instances, the parents were

stressed by the need to invest relatively more time, effort, and resources in accumulating

information.

Parents learned that an additional investment could be profitable to them because

persistence overcomes barriers and eases access to information. A father pointed out,

> "The old adage 'the wheel that squeaks the loudest gets the grease' . . . I made
> calls. Talked to attorneys on the phone and lawyers, and advertisements of
> wrongful death cases and everything. And I'm just searching for somebody to tell
> me what I need to do to get a full-fledged investigation."

This father related how his persistence paid off. Taking the time and effort to telephone

key people at his own expense netted a "full-fledged investigation." He learned more

about his child's murder because of his persistence.

Sufficient public or private resources help parents access additional information,

and there may be an interplay between these resources. Sufficient time, effort, and money

provide parents with access to information that might otherwise be unattainable. Officials

may offer informants money with a parent contributing if public funds are unavailable.

One mother said, "They asked me if I kept any money in the house, because it was the

weekend and they had someone who might have some information." The incentive of a

monetary reward may prompt an individual to overcome fear of retaliation and report his

knowledge of events related to the death.

Implementing strategies. When conditions were not conducive to discovering

additional facts, parents used various strategies and unconventional tactics to learn more about their child's death. One parent said, "We would do anything." Another explained, "We went to psychics, we went to lawyers, we went to private investigators." Parents were not opposed to "pulling rank" to obtain the desired information. As one pointed out, "Their name was pretty prominent, so she called and told them. I don't know if her name had influence on it or not, but that's what it had to be." The use of these alternative options required the parents to expend an inordinate amount of time, effort, and resources.

Parents consciously worked to increase the public's involvement in the death. This strategy encourages others not to withdraw their investment in responding to the murder. When information dwindled, parents appealed to the public to maintain their awareness of the death. As one parent said, "Publicity, keeping the rumor mill going. So that it would keep it fresh on their minds." Other parents employed this tactic with investigative personnel. These parents said:

> I'd call them for a couple of months and they'd call me. Um, that went on for another year and then I started hearing less from them, but I kept calling them once a month until I moved. When I moved I gave them my new information and then I started calling them every three months about.

This mother realized how important it was for her to keep her daughter's murder in the forefront. Initially, the detectives invested time and effort by calling the mother following the death, but as time went on their investment decreased. To keep them from forgetting the daughter's murder, the mother contacted them periodically. Her hope was that they would respond by continuing to invest in recreating the scenario of the daughter's death.

Parents also took the initiative to track post-death events. In this way they uncovered information crucial to their recreation of the scenario, but that the public had

discounted at the time. One parent found a discrepancy in the register at the funeral home. The father pointed out, "You study the register. The guy that murdered her was there and signed it twice on different pages." This was a source of information that the police had not thought to investigate. The parent's investment revealed critical information about the scenario of the death.

As parents learned the importance of accessing information so that they could recreate the scenario, they attempted to educate public personnel. Educating the public made it easier for other bereaved parents to obtain information. When parents were able to educate the public about the difficulties that they had encountered, they helped other parents learn about the events surrounding their own child's death. One mother related that she shared with the coroner the importance of viewing the deceased at the time of the death. She pointed out:

> If they had let me as I ask, to go over to the morgue to see him, just to know that it was him, I think I would have settled down and handled things better. At the time the coroner was of the opinion that you kept people from seeing the worst of it. Well, you can't keep people from seeing the worst part because the worst part is that they're gone. After several discussions with the coroner, he has changed his whole outlook on that. As a matter of fact, he told me if ever there was a situation that came up, and they couldn't get into the morgue, to call him. He would personally see that they got over there.

This mother related that viewing her son would have provided her with more information earlier in the course of events. Following the death, this particular mother said that she had imagined that there had been a terrible mistake about the identity of her sone. Seeing him would have dispelled this fantasy earlier. She also discussed the importance of knowing the extent of his injuries and how viewing him helped her to integrate these facts.

These strategies increased the parents' access to additional information. The

accumulation of data is not a discrete phase of the process of synthesis, but occurs

concurrently with analysis and evaluation. These phases overlap as parents acquire and

attempt to synthesize additional facts.

Analysis and Evaluation

Parents exert much time and effort in the analysis and evaluation of each

subsequent report. They scrutinize each additional fact that they receive about the murder.

Rather than discarding or discounting the information, they analyze and evaluate in minute

detail what they have accumulated from the subsequent reports. Parents examine the

facets of each piece of information and the various ways that each fact could relate to

other elements of the scenario. As a result, they identify possible relationships between the

elements of the reports, formulate these into hypotheses, and then decide whether to

accept or reject the information. They evaluate the information for consistency, accuracy,

and completeness to decide whether they will accept the hypotheses they have developed.

Parents consider the credibility of each piece of information and the relationship

that the hypothesis expresses. They first evaluate whether or not the report is believable

because this criterion is the most important to them. In their analysis and evaluation, they

ponder whether the new information could possibly fit with what they knew previously

about the murder. Reflecting on the possible murder weapon, a mother said,

> They told me they had killed her with something pointy. It punctured her skull.
> They looked at everything in the house. It could have been the steel toe of a boot.
> It could have been a hammer or the point of an iron. It could have been any of
> them.

This parent did not know what the weapon was, but she accepted the possibility that it

could have been any of these items. She identified a relationship between the puncture

wound in her daughter's skull and the murder weapon, integrating this hypothesis into her scenario about her daughter's death. Though the information may be revolting, parents decide whether to accept or reject it based on whether they are able to somehow integrate it. Parents do not need to like a certain report in order to incorporate it. They only need to think that it fits with what they knew previously and does not represent a discrepancy.

Parents more readily synthesize information that is consistent with what they already know. When a detective questioned one parent about the details surrounding the murder, she had to reflect on her knowledge of her daughter's personal habits in relation to her attire at the time of death. "He asked me, 'Did she wear underwear?'. I said, 'Well, ya, you know, all the time'." Since her daughter routinely wore underwear, and yet her body was found without underclothing, the parent found this fact consistent with the preliminary report that her daughter was probably raped before the murder.

Parents also evaluate each subsequent report for accuracy, deciding whether the information is probably correct. Following his son's murder, one father heard a radio report that his heterosexual son was murdered because he was gay. The father related that the police had told him that the murderer had thought his son was gay because he attended college in an area that was know for its gay population. The father reformulated the hypothesis that the young man was killed because he was gay into a new hypothesis that his son was killed because the killer thought he was gay. The father then integrated this hypothesis and created a more complete scenario of the death.

During the process of synthesis parents do not merely accumulate information but reformulate it. They often discussed their progress in obtaining subsequent reports and in understanding their relationship to the overall scenario. Parents often said, "Well, we

didn't know this until . . . and then we realized . . . ". When parents accept the information, they develop new relationships between what they know and integrate these into their recreation of the scenario surrounding the death, thereby expanding their understanding.

To increase the possibility of integrating each additional fact, parents attempt to rectify discrepancies in the rejected information. One approach that they employ is setting others straight. Parents used this strategy when they thought that the public had misconceptions. When the media reported that one child was involved a drug deal when he was murdered, the parents completely rejected the implication. The parents went to the newspaper for assistance in rectifying this public misconception about the relationship between the murder and the drug deal. In response to their plea, the newspaper rescinded the story that it had published. The father said, "The newspaper wrote a retraction, not as perfect as I would like it to be, but they did. And from that point on, every time there was a conviction and a sentencing, I should say our son was nothing but an innocent bystander." The parent needed to rectify others' misconceptions to resolve the discrepancy between his own and the public's scenarios.

Parents also rectify discrepancies by formulating alternative hypotheses that they integrate into the scenario of the death. A mother explained how she integrated information from the police about her daughter's possible drug activities with what the mother believed before the death. The mother said:

> So when they said, you know that, that night they had smoked marijuana and that one of the people she was with had gone and bought some cocaine, and they'd all done cocaine. You know, my first thought was, not my child, and then I thought she was nineteen years old and she was alive and she was vivacious. Hell, yes she could have done it. You know, it wasn't like she was dealing drugs.

The mother had rejected the idea that her daughter had used drugs, but she was

confronted with this information from the police. She then rearranged the relationship

between the divergent pieces of information. This mother was able to develop an

alternative hypothesis that incorporated her prior knowledge of the daughter's behavior

with the additional information that she accumulated. The daughter could have used drugs

because she was a college student. The mother reconciled the discrepancy between what

she knew then and now, synthesizing the alternative hypothesis into her account. In doing

this, she incorporated the information that she had rejected earlier into the recreation of

the scenario in a new form.

When parents are unable to resolve discrepancies, they respond by accumulating

additional data that they further analyze, evaluate, and synthesize. The process continues

to oscillate between analysis, evaluation, and the continuing accumulation of information

until the parents reach a "critical juncture" (Glaser, 1978, p.99). At this point, their

inability to accumulate additional information or to rectify discrepancies forces them to

suspend the process and stops their progress in recreating the scenario of the death.

Recreating the Scenario

Because they have such a strong desire to understand their child's death, parents

strive to recreate the scenario of the murder. To accomplish this goal, they need

information about various areas of the death: the cause, the sequence of events, the

contextual factors and responsibility for the death. As they synthesize additional

information, parents integrate additional elements and relationships about and between

each area. The process of synthesis leads them to recreate a scenario that is more complete

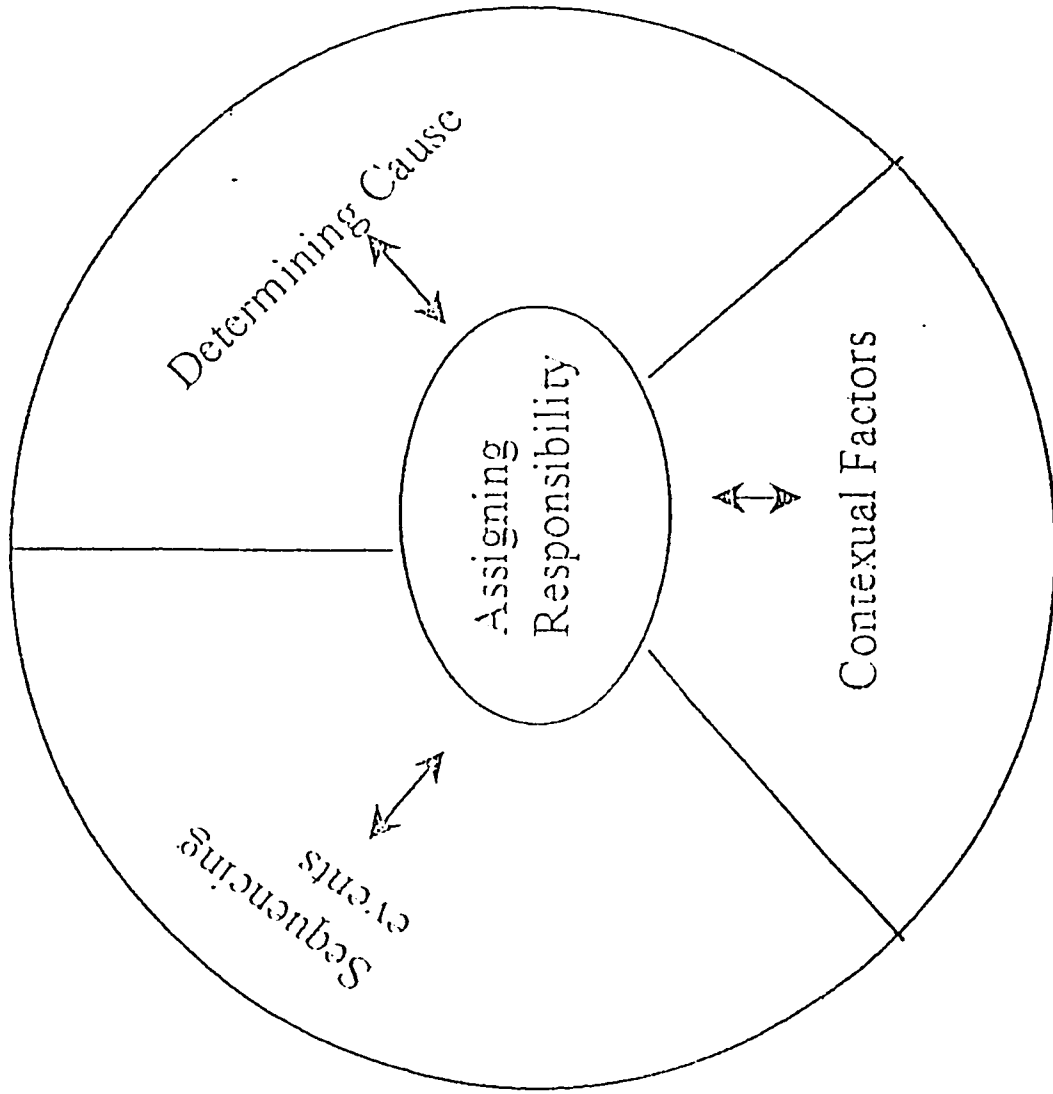and detailed than the initial, tentative one. Figure 4 illustrates the components involved in

Figure 4. Components of recreating the scenario

recreating the scenario. The configuration of this figure suggests the transformation in the parent's understanding of the scenario from the tentative scenario to the present.

Determining cause. As they synthesize additional information, parents increase their certainty about the cause of death. A possible cause of death becomes probable and then definitive when parents integrate enough additional data. A parent described his own progress in understanding how his daughter died:

> See that is, is our analysis of why she died was this guy wanted a young person and she did not want a guy. He forced himself on her. She was fighting and so she wouldn't tell on him, he knocked her unconscious and put her in the lake. Of course when they're unconscious you don't move, get up out of the water. And the coroner said . . . her death was drowning. He murdered her to shut her up.

This initial report stated that the girl's possible cause of death was drowning. Yet subsequent reports, showed that the death must have involved foul play. The daughter was unconscious, not dead, when she was thrown into the lake. This further information increased the father's certainty that although she drowned, it was because the murderer intentionally put her in the water while she was unconscious. The drowning resulted from intentional activities. Synthesis of these facts contributed to the parent's recreation.

Information about the cause of death is pertinent to understanding other elements in the scenario. Parents relate the information about the cause of death to the sequencing of events, the context of the death, and assigning responsibility. Knowing that the drowned daughter was unconscious prior to being put in the lake made her death a murder. The parents then integrated this knowledge into their understanding of the other elements. Another parent explained that once she discovered that her son's father had cleaned out the father's apartment and given his possessions away, she knew that he had planned to murder their son and commit suicide. This act was not committed in a moment

of passion. For this mother, these facts filled gaps about the sequencing of events, the context of the death, and the assigning of responsibility in recreating the scenario of this child's murder.

Sequencing events. As they recreate the scenario, parents assess their knowledge of the events that surrounded the death and their current understanding of the order in which they occurred. The sequence of events affects what parents know about the death and also their ability to integrate it into the scenario. One parent said that when he and his wife heard about the child's death, they went to the crime scene. The father lamented, "They let you go within eye sight but yet not right on the scene." Being able to see the deceased and the crime scene only from a distance limited the information the parents had initially. One father said, "I feel like if we'd been able to see the initial scene and everything . . . We'd see for ourself that she wasn't dressed properly . . . we would have already seen it in our own eyes." Parents found that their inability to view the deceased and the crime scene increased the discrepancies in the reports. If viewing the deceased and the crime scene had occurred earlier in the sequence of events, parents would have attained more information earlier in the course of events. This would have decreased the possibility of their needing to continue to synthesize information in recreating the scenario.

Contextual factors. As parents learn more about the cause of death and the sequence of events, they are also gathering information about the context of the death. The fact that the child was murdered continues to affect the parents' response. Murders involve violence, violation, and volition (Rynearson, 1987). In their accounts of the children's deaths, the parents discussed these elements and explained how difficult it was for them to integrate this information into the scenarios of the death.

Additional facts about the extent of the injury and mutilation involved in the child's death intensify the parents' response. A mother pointed out, "Not only was he shot but they ran over and over his body." In her synthesizing process this mother had to contend not only with the information that her son was murdered but with the facts that he had been shot and run over prior to his dying. The degree of injury also affects other events that surround the death, such as being able to view the deceased. Parents may be unable to see their dead child's body because of the extent of the injuries. A father explained, "The detective told us that he was shot in the head, my legs just collapsed. You know, 'cause we thought we'd never be able to see his face again." One mother said, "They didn't think 'twas a good idea for me to see him, so I never got to see for myself." In these instances, the parents' direct knowledge of events is limited, and they must depend on subsequent reports to expand their scenarios.

The degree of transgression is another element that affects the parents' synthesis of information. Parents ponder the deceased's activities and assess whether high-risk behaviors or activities could have precipitated the events that culminated in the murder. The absence or presence of these affects the parents' response. A father said, "He was nothing but an innocent victim and many, many times they said he had nothing to do with it. He was just there at the wrong place and wrong time. We've heard that over, so, many times." Not knowing what could have provoked the murder spurs the parents to accumulate additional information. In contrast, the parent of a child involved in illegal activities at the time of his death explained, "I didn't even go to the trial. I didn't need to hear that stuff about him." For this parent, the information that she had about the scenario did not compel her to seek additional information.

All parents whose child has been murdered are affected by the knowledge that someone intentionally took the child's life. Additionally, not understanding the motivation for the murder troubles parents, and they attempt to learn what led a person to murder their child. One mother cried, "It was all over a kiss." This mother was incredulous that a kiss led to the murder. In contrast, a father said about his son's murder, "It was a case of mistaken identity. They thought he was part of the drug deal gone wrong." Although the father was extremely distressed that his son was dead, he recognized that people involved in drug deals can get murdered. This father explained, "People get killed over drugs." Parents have a greater difficulty incorporating information when the course of events makes little or no sense to them than when they think that the murder resulted from activities that they realized were likely to culminate in such a violent death.

Assigning responsibility. Assigning responsibility for the death to a specific individual is a pivotal element in the parents' recreation of the scenario. It is now possible that the parents will be able to access information that only the murderer knows. As one parent said, "All of those questions can't be answered until someone is caught." One mother said that knowing who the murderer was would have answered many of her questions. She explained:

> Whoever killed her, was it a he, was it a she. We don't know, ya know? Was it someone she knew slightly, was it someone, we doubt, they don't feel like it was someone she knew. But could she, could it have been an acquaintance, could it have been someone she saw out in the places they party? Did a stranger kill her, you know? Did someone see her and think she was adorable and follow her home? There's no way to know because we have nothing to go on. They never found the murder weapon, so even though she was viciously beaten to death and fought really hard for her life, um, it could have been one of many objects. Of course they consider the thing that murdered her. She had five blows to the head and one of them actually punctured her skull and pierced her brain. So, it could have been the point of an iron. It could have been one of those pointed hammers or metal toe

boots. I mean, there are so many things that it could have been but they never found the murder weapon. We don't know what time of day she was, exactly when she was murdered. We know approximately when, we know when she left, the last place she left.

Information from the perpetrator could have given this mother the opportunity to recreate a complete and detailed scenario of the death.

When parents assign responsibility, they also consider how the deceased may have contributed to his or her own death. The deceased's participation in events surrounding the death may have increased his or her risk of being murdered. When a son's drug activities culminated in his murder, one mother said, "We knew for a long time he did drugs and it probably would kill him." This mother did not encounter a discrepancy when she compared the information that she had previously with what she learned later. She was able to integrate this into her scenario. When the parents' assessment of the deceased's high-risk activities matched those in subsequent reports, parents confronted fewer discrepancies to integrate into the scenario.

## Integration

A violent death challenges parents to synthesize information from the public's recreation of the scenario with their private version. Parents achieve synthesis when they are able to integrate the information from others with their own. At some point, the process of synthesis culminates for the parents. The process of recreating the scenario concludes at its highest point of development or the final stage (Webster's, 1989). The accumulation of additional data ceases and no longer challenges parents (see Figure 5).

Culmination

Parents achieve a culmination when they have exhausted the possibilities of
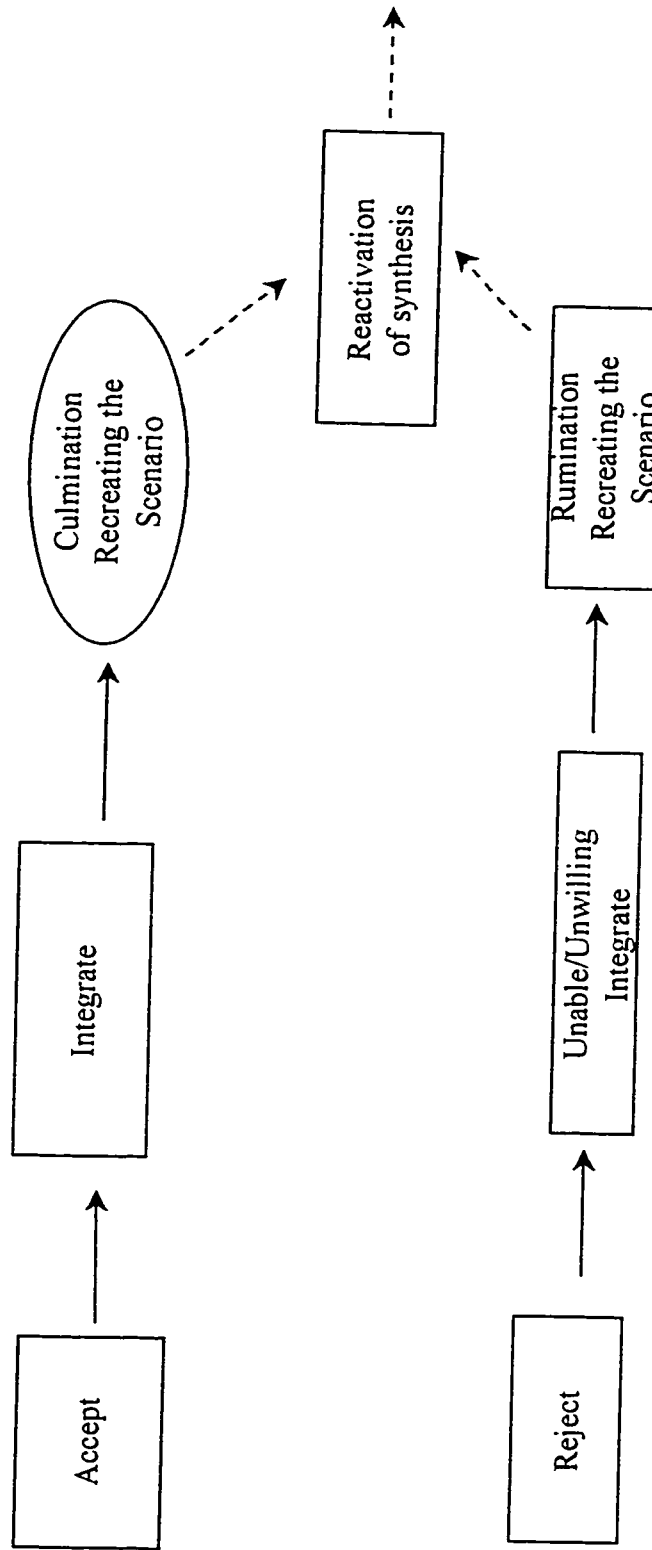
Figure 5. Variance in the outcomes of attempted integration

accumulating and integrating further information. At this time, the parents' recreation of

the scenario surrounding the death is as complete and detailed as possible. Parents said,

"There is nothing more we can do." Parents reach this point when they recognize that they

have depleted the possibilities for obtaining further information and that they know all that

they can at this point in time about the death. Parents who reach a culmination in the

process of synthesis attain a reprieve from investing a tremendous amount of time and

energy into recreating the scenario of the death. They know that their investment yielded

the maximum gain.

> Now that part is over. We don't have the trials to go to--so not hearing about how
> he died and the bullet wounds. And not having to think about the people who did it
> any more. Or look at them anymore. That's behind us.

When the parents' investment is no longer profitable, they have the option of

withdrawing their time and energy and investing in other endeavors. Parents can think

about something besides the murder. Once the murder trial concluded, a mother pointed

out, " What's different for me, it's just somehow to try to get back to whatever normal

can be." Even when parents do not have the satisfaction of seeing the murderer

prosecuted, they recognize that they have come to an end and are able to invest in other

endeavors. One mother explained:

> When nothing materialized after about three months of that, uh, that's when I
> knew that the chances of , their chances of catching someone, unless someone
> turns someone in, wasn't going to be very good . . . In my heart I never really felt
> like it was going to be solved and that hard, but it's true. I mean, that's how I
> really felt so I was able to work.

When parents reach a culmination in their synthesis, their scenarios reflect

dialectical characteristics. Parents experience a transformation in their understanding of

the events surrounding the death. One mother's tentative scenario included the

information that another man had murdered her son. She had hoped that later she could

integrate information about the conviction of her son's murderer. Instead, the accused

murdered was found innocent in her son's death but was later convicted of killing

another young woman. She said:

> The thing that really helped me was when he was convicted of her murder and
> rape. He got two heavy sentences on that and I knew then that he would be
> behind bars for a long time. It was a huge relief for me.

Synthesis transformed this mother's understanding to a higher level. The scenario now

includes hypotheses other than those in the preliminary report. For this mother, her

understanding that a man murdered her son progressed to knowing a man murdered her

son and that he was not convicted for his murder but for someone else's. Synthesis

results in a change in the relationship between the elements of the scenario. The

relationship between the murder and the conviction changed. The mother was able to

incorporate the fact that he murdered her son and was not convicted when she could add

that he was convicted for another killing. The change in relationships implies the

movement that occurs in the process of synthesis. With synthesis, the form of the

understanding changes and is greater than the isolated bits of information. While the

murder was not convicted for one murder, he was convicted for another killing, and this

knowledge provided a relief to the parent. When synthesis reaches a culmination, parents

have a greater understanding of the scenario surrounding the death and are reprieved

from further efforts to discover new information about it.

Rumination

Some parents are unable to progress in their understanding of the death. They

experience no movement in their cognitive response to the death. These parents do not

attain synthesis; instead, they fail to integrate the public and private responses to the violent death of their child. Rather than accepting new information in some form, these parents reject it. They are unable to integrate the information from the subsequent reports about the death and cling to their previous contentions. Rather than reaching a culmination in their understanding of the scenario, they ruminate on their current version because they cannot integrate the subsequent information.

When parents cannot integrate new information, they do not experience a change in their current understanding of the scenario surrounding the death. They maintain their previous hypotheses and do not explore other relationships between the elements. Their level of understanding about the scenario fails to progress, and movement toward integrating the subsequent information is absent.

Attempts at synthesis cease when parents are unwilling or unable to accept new information. They cannot integrate the information in any form and do not attempt to identify new relationships. One mother could not accept the fact that her son's murder did not go to trial. She cried, "Not to have a trial, not to go to the courts. They let somebody plea bargain. He got , um, 18 to life, but to me that's not enough. I'll never get over it. " Another mother explained that it was not that she <u>didn't</u> want to believe what they told her, she just <u>couldn't</u> believe that her son-in-law killed her daughter. Parents can cease attempting to integrate new information at any point. They may have attempted to integrate additional information, and then reach a point where they are unable or unwilling to do so. They are unable to reconcile their scenarios with those of the public.

In contrast to parents who reach a point of culmination because they have

exhausted the possibilities of accumulating and integrating further information, parents who ruminate reject further information outright. For these parents, their recreation of the scenario surrounding the death is never complete. They make no progress in their cognitive response of understanding the events surrounding the murder. They continue to invest time and energy in the maintaining the scenario they know and never attain a reprieve from their efforts. In response to the murder, these parents continue to be troubled by the discrepancies they can not resolve.

Reactivation

Culmination in the process of synthesis is temporary. In philosophy, the outcome of synthesis becomes a new thesis. For bereaved parents, the recreation of the scenario becomes the parents' new tentative scenario. As time passes, the public may thrust the murder into the limelight. Parents again face the challenge of integrating information from the public into their present scenario of the death and must once again make cognitive response to the murder.

Interactions between the public and private response precipitate this process ad infinitum. One mother and father discussed the events that followed the conviction. They said, "Then we went to the district court of appeals. That was his first appeal. That was denied. And then of course, they took it to the Supreme Court." Parents are never certain that the scenario is complete. For a variety of reasons, the murder may come to the forefront again, requiring parents to once again invest time and effort in recreating the scenario. Parents are forced to reactivate the process of synthesis. The culmination that the parents experienced may be only a temporary reprieve. For parents who were stuck ruminating over the scenario of the death, reactivation may provide them with an

opportunity to once again attempt to synthesize their knowledge with that of the public and finally attain a reprieve.

## Summary

When the violent death of a child becomes public knowledge, parents must contend not only with their own response to the death, but with that of the public. Both the parents and the public respond to and invest in a violent death based on how disruptive and disconcerting they find it. For both, their response is commensurate with time, energy, and resources they expend to recreate the scenario surrounding the death. The problem for the parents is that the versions vary, confronting them with discrepancies.

The process of synthesis enables the parents to resolve the discrepancies successfully. Parents formulate a tentative scenario from the preliminary reports about the death and use this as a benchmark to integrate additional information into the scenario. They then continue to integrate further information until they have exhausted the possibilities. Most parents' understanding of the scenario of the death progresses and reaches a culmination  They no longer encounter additional information to integrate and are free to invest in other endeavors.

The process does not always reach a culmination, however. Some parents are unable or unwilling to accept new information in any form. They reject it and fail to incorporate it into their scenario of the death. These parents invest in maintaining their current understanding of the scenario surrounding the death rather than creating a new one. They do not attain a reprieve from recreating the scenario.

As time passes, information about the death may again surface and become

public. Whether or not they were previously able to synthesize information, parents again

must contend with the public response to the death. At this time, they reactivate the

process of synthesis to integrate new discrepancies between the public and the private

response to accounts of the death.

CHAPTER VI

Discussion and Implications

This research generated a substantive theory that explains how the bereavement

response varies for parents whose child's death was due to murder. A substantive theory

illuminates the most troublesome issue in an empirical area of inquiry - in this case,

parental response to a traumatic loss - and predicts how the participants strive to resolve

the problem (Glaser & Strauss, 1967). The findings from this study develop our

theoretical understanding of the bereavement response of parents whose children are

murdered and provide a foundation for improving the quality of care offered by nursing

professionals to these parents.

### Practice, Research, Theory Link

This study has arisen from the reciprocal relationship that exists between nursing

practice, research, and theory. Practice, research, and theory all prompt questions

(Meleis, 1991). When the research question arises from practice, one strategy for

answering the question is the generation of theory. With regard to the practice question

that prompted this research project, theories were either lacking or not useful in

illuminating the phenomenon of interest. The approach taken in this study contrasts with

methods appropriate for responding to questions arising from research or theory, which

often stimulate investigation. In these instances, a certain amount of agreement already

exists about the concepts and propositions that are pertinent to the area of study. In

contrast, the purpose of a grounded theory study is to discover and verify concepts and

their relationships in the process of developing the theory.

The grounded theory method also differs in that the theory developed focuses on

enhancing the understanding of a particular situation. The original research question for this study arose in the course of the day-to-day practice of nursing, and grounded theory methodology offered the best approach to answering the question. In addition, this methodology has the strength of generating a theory that was discovered and verified throughout the research process. Because of its constant comparison and analysis, this research yielded a valid substantive theory. It can support the work of practicing nurses in offering care to parents whose children are murdered.

The theory generated as a result of this study is relevant to a select population with very specific concerns: the parents of murdered children. Such a theory pertains to a limited area of inquiry and "fills the gaps" between grand theories and practice (Walker & Avant, 1988, p.5). Because of its limited scope in comparison to an all-inclusive grand theory, a substantive theory is especially applicable to an empirical area of practice. This substantive theory structures our knowledge of how parents whose children are murdered process the problems associated with this horrendous experience.

A theoretical understanding of the response to this loss is advantageous to those in practice. The development of a theory has the advantage of transcending "the finite grasp of things" (Glaser, 1978, p. 13). Rather than merely describing the parents' experiences when their children are murdered, a theory systematically relates the elements of the process. This level of development permits the nurse to make connections between the concepts. The practitioner can then anticipate the consequences, conditions, and strategies involved in the parents' response to the loss. This understanding empowers the nurse to predict and explain the behavior of the bereaved. The resulting ability to go beyond description by explaining and predicting the process has the potential to advance the

practice of nursing in caring for bereaved parents.

## Synthesis: A Response to Loss

The substantive theory that resulted from this study adds to the research literature about the parents' bereavement response to violent childhood death. For the practitioner, the theory is a foundation to understand and explain what will be the most difficult for parents whose children have been murdered and to predict how they will process the problem. The theory expands the current understanding of the response to loss in a specific context. When children are murdered, the parents respond in many ways that are similar to the response of parents whose children have died from other causes. But these parents also have an additional component in their response. The circumstances of a murder require the parents to actively process what has happened to their children while reconciling their understanding of the course of events with what the public believes happened during the murder. Parents accomplish this when they cognitively integrate their response with those of others and in the end transform their own understanding of what occurred at the time of the murder.

## The Parents' Response

Cognitive Transformation. Awareness of the bereaved parents' process of synthesis enhances the professional understanding of how these fathers and mothers contend with the public response to the death. This focus on synthesis meshes with discussions that appear in the literature, which argue that the response to loss is adaptive (Rando, 1993). Adaptive responses are those that help the bereaved to live with the change that has been imposed upon them by the death of their loved one. In general, grief helps the bereaved to adapt to the loss and "to live in a healthy way in the new world

without the deceased" (Rando, 1993, p. 23). Grief transforms the bereaved (Schneider, 1989) and "forms a bridge from a reality that has been disrupted to a newly constructed or surfacing reality" (Kachoyeanos & Selder, 1993, p.42). When a child was murdered, this transformation occurred specifically in the parents' understanding about the scenario surrounding the death. During the study, bereaved parents discussed their efforts to integrate what they previously knew with what they later learned about the violent death. Also, the parents were not in an acute state of grief at the time of the interviews. Although discussions of loss consistently emphasize the bereaved person's emotional response and intermittently include the behavioral, social, and physical reactions, few have emphasized the cognitive aspects of responding to loss. This theory developed in detail the cognitive dimension to loss. When children are murdered, this component is central to the parents' bereavement response.

Active Participation. Recent discussions of grief emphasize the importance of conceiving of grief as an active process (Attig, 1991) and "not merely as a passive victimization which must be endured, gotten through, resolved, or completed" (Corr & Doka, 1994, p. 545). Bowlby (1961) described searching as an attempt to recover the lost object that results from the strong attachment between the parent and child. Searching efforts entail restlessness, preoccupation, emotional distress, and the need to know (Rando, 1984). This study discovered that parents were active participants in recreating the scenario and were aware of the fact that they were striving to obtain and integrate their findings. As parents actively respond to the loss, they invest in recreating the scenario.

Their expenditure of time and effort increases the likelihood that these parents of murdered children will accomplish the work of grief. Grief work entails completing certain

tasks related to the loss. Each bereaved person must become emancipated from the bonds of the deceased, readjust to the environment without the beloved, and form new relationships (Lindemann, 1944). While theorists have contended for years that the bereaved must accomplish these tasks, the discoveries from this study specify that the grief work of parents whose children are murdered centers around recreating the scenario of the death. All of their cognitive efforts are directed at this goal.

To attain this goal, parents need information about the death. The parents' efforts to accumulate and extract further information are expressions of searching efforts that follow loss (Parks, 1970). When they are able to recreate the scenario, the work of grief is accomplished. Attaining this goal permits the parents a rest - or emancipates them- from recreating the scenario. Once the bereaved complete this step they are free to invest emotional (Worden, 1982) and cognitive energy in other endeavors . Integrating information about the death allows a parent to accept the reality of the death and to think differently about what happened to the child. Being able to accomplish this transformation helps the parents adjust to life without the their children.

Reviewing the death. Professionals need to recognize the importance of the bereaved's reviewing the death. Previously professionals thought that the major goal of grief was to detach from the deceased. The bereaved's reviewing the death was an activity that professionals formerly considered to be of minor importance but now recognize as a significant component in the process (Walter, 1996). Rather than detaching from the deceased, the bereaved carries out a death review that creates a lasting place for the deceased within the lives of the living. Parents affixed the permanency of the deceased in their lives by recreating the scenario of the death. As they became more certain about the

scenario surrounding the death, even though they did not like the ending, parents were telling the final chapter in the lives of their children .

Another element in a death review is the sense of control that the process bestows in the bereaved. Parents' feelings of helplessness are common following a child's death (Miles, 1986). Reviewing the death provides the bereaved with a certain amount of control (Corr & Doka, 1994) which is an important element in the death review (Parry, 1994). Control is extremely significant to parents who have been victimized not only by the loss of their children but also by the manner in which they died. As parents reviewed the death, they had a sense of control because they had the choice of whether or not to integrate additional information into their scenario.

Synthesis is a cognitive response to the murder of the child. This process allows the parents to contend with the unique problems that surround the murder. For the professional, this perspective adds to the theoretical understanding of the nature of attachments and their effect upon the response to their loss (Parks, 1988). The process of synthesis discovered in this study contains properties that are evident in other responses to loss. Loss is also an ongoing process, and the response to the loss is never totally obliterated. While time generally buffers the response to loss, it can also reactivate the process. When parents attain a culmination in their process of synthesis, it is only an apparent endpoint.

The Public Response

For professionals, a theoretical understanding of the process of synthesis lends itself not only to explaining the process but to predicting the relationships between the concepts. This theory specifies the conditions in society that influence the response to loss.

It emerged from this study that when the child's death is violent, the nature of the death and the value that society places on the child determines the public response. When a child is murdered, care givers will now be able to recognize that only in the case of a violent death is the variance in the parents' response to the loss of a child so contingent upon the response of the public. As parents become more certain about their understanding of the events surrounding the death, they can accept, assimilate or reject variations in the reports that are contingent upon the response of the public. Nurses must recognize that they are part of the public realm and that their responses and those of other members of the public will affect the parents.

In some instances, American society greatly values the child. Yet the value of any given child is not an absolute. In the past, the public has not always valued the child to the extent that they viewed child homicide as a social problem. Even today there is wide variation in the public's response to child homicide. Unnithan (1994) notes that:

> There is competition and selection (among various social problems and specific definitions of them) in arenas of public disclosure. Since each arena has finite "carrying capacity" (e.g. newspaper space, legislative hearing time, budgets of nonprofit groups, etc.), problems selected for attention are those that are dramatic, reflect cultural themes, are politically acceptable, can withstand competition, and are in tune with institutional rhythms. (p. 64).

The competition and selection that Unnithan identified as vying for public attention emerged in this study as conditions that continue to affect the public response to a child's murder. When children were minorities, poor, or unknown, their murders generally elicited less response than the deaths of children who were well known. One author noted that the public responds not only to the fact that the child died but to the manner of death (Mickalowski, 1976). The findings in this study expanded the findings from previous

works. All professionals who interact with parents of murdered children need to be cognizant of the fact that their response to the death will affect the response of the parents. This responsibility is especially significant for those in health care who are ethically bound to provide unbiased and holistic care.

This study verified the fact that bereaved parents view healthcare professionals as within the realm of the public. This discovery lends support to and elaborates on the findings from another qualitative study. In a descriptive study that was limited to the four months following a murder, what was most problematic for the bereaved was a "personal world expansion." The murder forced the bereaved to contend with unfamiliar systems and to "accommodate new elements into their personal worlds" (Cowles, 1988b, p.692), which was the most difficult issue for the newly bereaved. The current research verified the findings from this earlier descriptive study by other investigators. In addition, this study discovered, verified, and developed the relationship between the public and other concepts. This theoretical understanding of the relationship between the public response and that of the bereaved parents is a necessary foundation for caring for these mothers and fathers in such situations.

## A Foundation for Practice

A theoretical understanding of how parents respond to the violent death of a child is a foundation for practice. As a professional discipline, nursing is concerned not only with knowledge, as are academic disciplines, but additionally with the realm of practice (Donaldson & Crowley, 1986). For those who care for bereaved parents, the theory that resulted from this study is not only a means for describing the response to the child's murder but for explaining and predicting the process.

All bereaved parents need care. While many professionals provide care, nursing espouses care as its essence (Leininger, 1984). It is "a humanistic mode of being with others to assist them in times of need" (Leininger, 1990, p. 29). The bereaved find that the care that professionals offer to them is the most influential element in how they respond to the loss (Rando, 1984), and nurses are frequently among these professionals.

The parents in this study interspersed their discussions with comments about the caring nature of others in their time of need. During the study, parents were asked, "What is the most important thing for others to know?" They responded consistently with comments related to the need for care and understanding. Professionals have a responsibility that goes beyond human compassion to be "knowledgeable about bereavement and skilled in dealing with it" (Osterweis et al., 1987, p. 12). The theory that resulted from this study provides a theoretical understanding that is specific to the bereavement response of parents whose children were murdered. This level of understanding goes beyond description and as such is a foundation for care.

Direct Care

In direct care, nurses in all specialties have the potential to come in contact with the bereaved. The nurse may be caring for a laboring patient whose older child was murdered or a pediatric patient whose sibling was shot. The nurse may encounter the mother of the murdered child in any out-patient setting. In critical care areas, the nurse may be caring simultaneously for a mortally wounded child and the family. In the new speciality of forensic nursing, the nurse may be blending her expertise as a nurse and a criminal investigator (Lynch, 1993). In all of these areas of practice, the nurse's understanding of the process of synthesis will provide a basis for caring for the parents.

Knowing that the parents have a need to recreate the scenario of the death, nurses will understand the importance of the information that parents obtain. As care givers, nurses will realize that parents view them as members of the public and that they need to provide the parents with information that is accurate, consistent, and complete. Such information decreases the discrepancies that parents will have to integrate into their scenario of the death. Nurses caring for these parents will recognize that recreating the scenario of the death is paramount and can then collaborate with the parents to achieve this end.

Education

Education of both professionals and nonprofessionals is a component of professional nursing care . "Parents substantiate the notion that support for the bereaved is often not forthcoming, and when it is, is not sustained over a period of time" (Brabant, Forsyth, & McFarlain, 1995, p. 80). Comments such as this suggest that not only professionals, but society overall, need information about the response to loss. Education is a nursing responsibility.

To provide competent care, professionals need an understanding of how parents respond to the violent death of a child. Interacting with the bereaved requires that the care giver have some knowledge of how the response is affected by the attachment between the bereaved and the deceased and by the context of the death. Current literature discusses these factors. This study resulted in an in-depth understanding of how parents respond to the murder of their children. Professionals should have adequate knowledge about the response to loss to assess whether or not the response falls within normal parameters (Osterweis et al., 1987). This study expands the professional understanding of the normal

variations in the parents' response to their children's murder.

General content about grief, incorporating the information from this study, should be included in baccalaureate curriculums. The content can also be offered as continuing education and at informal programs. In addition, the professional should use this knowledge to provide parents with information and offer emotional support. Nurses can do this in their contacts with patients at the time of the murder or informally in telephone follow-up of bereaved parents. Based on their knowledge of the importance of support, nurses may also develop more formal protocols for follow-up. Throughout their interactions with the parents, nurses should be able to identify other avenues for bereaved parents to obtain additional support in the form of either professional or lay resources and incorporate this information into their care.

Surveys of those bereaved by sudden death suggest that follow-up programs are helpful because the programs provide "caring, warmth, and understanding" (Williams & Frangesch, 1995, p. 475). Parents seek support from groups such as the national organization Parents of Murdered Children (POMC), possibly because emotional support is not available from family friends, or co-workers. These parents do not have others in a similar situation available to them for support in their social network (Schwab, 1995-1996). Besides providing emotional support, those in support groups often "know the ropes." Parents who have had a child murdered may know how to assist other bereaved parents in accessing the information that they might need to recreate the scenario of the death. Educating the public about the response to loss can alter the public's response. As a consequence, parents might experience more support and caring from the public when their children are murdered. This change can affect the information that parents obtain

about the death. In this study, parents indicated that educating the public at the local level did change policies that affected the information that was available to other parents of murdered children.

In some instances, parents have undertaken the responsibility for educating the public about how their actions can impact others. As parents recreated the scenarios of their children's deaths, they gained information that spurred them to seek changes in national laws. The abduction and subsequent murder of six-year-old Adam Walsh in 1981 led his parents to a campaign that resulted in the enactment of the first federal Missing Children's act of 1982 (Shiflett, 1997). More recently, the murder of Megan Kanka resulted in laws that mandated that communities be informed when a convicted sex offender moves into the area (Neighbors, 1997). In recreating both scenarios, the parents assigned responsibility for what had happened to the public. Officials were slow to carry out measures to find Adam because of policies at the time. Megan's parents were unaware that a pedophile had moved into their neighborhood. No law stated that they had to be informed. Both situations are examples of the relationship that exists between the private and public systems and how the response of each to a death from violence can affect the other. The individual outcomes might have been very different had the public response not been what it was at the time of the deaths. The public response to the deaths of these two children affected the private response of the respective parents and led to changes in the public system.

Ethically, nurses also need to be concerned about how mothers and fathers respond to their child's murders because of the impact that the parents' response has on the family constellation. Studies of the response of parents to the loss of a child from a

variety of causes found that the parents' responses affect surviving siblings (Applebsum & Burns, 1991; Demi & Gilbert, 1987) and spouses (Gilbert, 1989; Schwab, 1992). A child's death influences family functioning in general (Davies, Spinetta, Martinson, McClowry & Kulenkamp, 1986; Gelcer, 1983). When a child is murdered, it is likely that the degree to which parents attain syntheses will also affect others and that caring for the parents will subsequently promote the well-being of families and ultimately society.

## Summary

The goal of this research was to contribute to the discipline of nursing by formulating a substantive theory as a basis for understanding the bereavement response to violent childhood death. The process of synthesis provides the professional with a theoretical understanding of the parents' response to violent death. The theory is useful to professionals in a variety of settings who come in contact with bereaved parents following a violent death. The theory helps explain and predict the response of grieving parents to the loss of a murdered child.

The theory is not a finished product. As Glaser and Strauss (1967) noted, one advantage of grounded theory is that it is modifiable. The "theory is an ever-developing entity" Glaser & Strauss, 1967, p.32). As professionals continue to care for parents whose children are murdered, further data may elucidate additional concepts and relationships in the process of synthesis. Future studies might explore how synthesis is used as a strategy for solving other problems.

Appendix A. Advertisement

# IF YOU ARE A PARENT

# WHO HAS

# HAD A CHILD DIE

# FROM AN

# ACCIDENT, SUICIDE, OR HOMICIDE

and are willing to talk about your loss for a nursing research study, or if you wish

additional information about the study, please telephone:

H. Christine Dannemiller, R.N., M.S.N.

216-972-6826

Appendix B. Introductory Letter

Dear _____,

Your name was given to me by _____. (Or I obtained your name from reports of your child's death.) I am a doctoral student at Wayne State University in Detroit, Michigan. I am interested in talking with parents who have had a child die from an accident, suicide, or murder. The knowledge that is gained from this study will help health professionals in the future to provide better care for other parents who experience such a loss.

I would like to talk with any parent whose child has died as the result of an accident, suicide, or homicide. I am also interested in talking with others who have been involved with the family who has lost a child in this manner. The source of the information obtained will be kept confidential. Interviews will be conducted in private, and last approximately ninety minutes. If you are willing to talk with me, or have further questions, please complete the form below or telephone me at the listed number. If you do not wish to participate, you need not return the form.

Thank you for your time.

Sincerely

H. Christine Dannemiller
216-972-6826

_____

I would be interested in talking to Christine Dannemiller about her study of parents who have had a child die from an accident, suicide, or homicide.

NAME: _____

ADDRESS: _____

_____

TELEPHONE:_____(Home)     _____(Work)
Time and place you prefer to be contacted:
                        _____

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Appendix C. Informed Consent

## The Bereavement Response to Violent Childhood Death

INVESTIGATOR:      H. Christine Dannemiller, R.N., M.S.N.

PURPOSE: The purpose of the research study has been explained to me. I am being asked to participate in a study concerning the death of children from an accident, suicide, or homicide. The information obtained from this study will be useful to health professionals caring for bereaved parents.

PROCEDURE: If I agree to participate in the study, H. Christine Dannemiller will conduct at least one tape recorded interview with me. During the interview I will be asked about the death of the child. The discussion will include what has been of greatest concern or most problematic for me since the loss. I will have an opportunity to share my thoughts on what has contributed to this concern.

RISKS/SIDE EFFECTS: Talking about the death of the child may be distressing to me. The discussion may provoke previously unthought of concerns. If at any time I am too distressed to continue the interview, H. Christine Dannemiller will stop the interview.

BENEFITS: There are no benefits known to me. However, I have been told that the information obtained from this study may benefit parents in the future whose children have died in similar circumstances.

COMPENSATION: In the unlikely event of injury resulting from this research, I understand that no reimbursement, compensation, or free medical care is available from Wayne State University or H. Christine Dannemiller.

VOLUNTARY PARTICIPATION/WITHDRAWAL: My participation is voluntary. I can refuse to answer questions, withdraw my consent, or discontinue my participation at any time without an explanation or penalty.

If I have questions about the study now or in the future, I can contact H. Christine Dannemiller at 216-972-6826. If I have questions about my rights as a participant in the study, I can contact Dr. Lefford, Chairman of the Behavioral Sciences Research Committee at 313-577-1628.

CONFIDENTIALITY: All information is confidential and my identity will not be revealed in any reports of the research. Tapes of the discussions will be destroyed at the conclusion of the research or returned to me. Transcripts of interview data will not contain identifying data. Consent forms will be kept separate from the interview data so that names cannot be associated with the data.

CONSENT TO PARTICIPATE IN THE RESEARCH STUDY: I have read, or had read to me, all of the above information concerning this study. The meaning of the above information has been explained. All of my questions have been answered. I hereby consent and voluntarily agree to take part in the study. I will receive a signed copy of the consent form.

Participants Signature: _____  Date: _____

Address: _____

Telephone: _____

Investigator: _____  Date: _____

Appendix D. Demographic Form

Relationship to child

Male _____     Female _____

Age _____     Ethnicity _____ Religion _____

The child died from:

accident ☐     suicide ☐     murder ☐

Age at time of death

Other family members of the deceased:

Age at time of death

Brothers _____     _____

_____     _____

_____     _____

Sisters _____     _____

_____     _____

_____     _____

Appendix E. Topical Guide

1.      Profile of the child
- age
- sex
- race
- education/employment
- attributes

2.      Family
- conditions (SES, age, religion, race locale)
- constellation (siblings, parent(s) others)

3.      Circumstances surrounding the death
- mode
- when and where
- involvement of others
- contributing factors

4.      Notification
- by whom
- how informed
- immediate response
- other

5.      Managing
- how
- self-evaluation/feelings
- differences over time
- helpful persons or things
- hindrances
- support (spiritual, professional, non-professional)
- other loss experiences
- future expectations

6.      Changes
- aspects (physical, psychological, social, spiritual, economic, other)
- expected or unexpected

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ABSTRACT

GRIEVING THE VIOLENT DEATH OF A CHILD:
SYNTHESIZING THE PRIVATE AND PUBLIC RESPONSE
by

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December 1998

Advisor:      Dr. Marsha Cohen

Major:        Nursing

Degree:       Doctor of Philosophy

Accidents, suicides, and homicides are the leading causes of death in the young. These are

all modes of violent deaths. Although the response to loss has been a prevalent area of

inquiry, limited research exists how or whether the context of violent death affects the

response of parents to the loss of a child. The purpose of this grounded theory study was

to enhance the theoretical understanding of the parent's bereavement response to the

violent death of the child. Twelve parents whose children were murdered participated in

the in-depth interviews. With the constant comparison and analysis of data, the public

response to the death emerged as the most troublesome and unique issue when a child is

murdered. Parents contended with this problem by synthesizing their own response to the

death with that of the public in an attempt to recreate the scenario surrounding the death.

The ability of the parents to synthesize the public response with their own accounts for the

variance in the outcome of the process. When parents attain synthesis, they integrate both

and attain a culmination in the process. Parents who are unable to synthesize the two do

not attain this reprieve. As the number of violent deaths continues to increase, more

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children will be murdered. The substantive theory developed from this research extends

the foundation for nursing caring for parents bereaved under these circumstances.

# AUTOBIOGRAPHICAL STATEMENT

H. Christine Dannemiller has been an Instructor at The University of Akron, College of Nursing, Akron, Ohio for fourteen years. She received a BSN in 1980 and a MSN in Family Health Nursing in 1987 from the University of Akron. Prior to teaching, she worked as a staff nurse in postpartum, the newborn nursery, and labor and delivery. She has also had experience as a clinical nurse specialist and an assistant director of nursing.

In support of her doctoral studies, Dr. Dannemiller received financial assistance from a Professional Nurse Traineeship and the Wayne State University Graduate School. Additional financial support was awarded by the Delta Omega Chapter of Sigma Theta Tau in 1996 and 1998. Her interest in the parent's response to a child's violent death is long-standing. Her dissertation is an outgrowth of the research that she conducted for her master's thesis.