Special Moments, Special Times: Problematic Occasions Following the Death of a Child[1]

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ABSTRACT

Using data obtained from 14 interviews representing 9 families and 10 child deaths, this paper examines moments in time that occasion or may occasion social encounters that are problematic for bereaved parent(s): 1) holidays in general, e.g., Christmas, New Years; 2) particular events, e.g., weddings, funerals, graduations; and 3) those occasions specifically associated with the deceased child, e.g., the child's birthday and/or death anniversary. For bereaved parents such occasions may be excruciating. In the case of holidays or special events, the absence of the deceased may be especially poignant since he or she would have been present had he/she lived. In the case of the birthday or death anniversary of the deceased, the failure of others to take note of the significance of the day accentuates the loneliness of loss. Such moments in time, however, are sociologically as well as psychologically important for they mark events that belong to the group as a whole as well as to individual members of the group. The bereaved parent, then, must contend not only with the members of the group but also with the group itself. Erving Goffman's conceptualization of the "social encounter" provides additional insight into why these occasions are so problematic for the bereaved parent. Implications for grief counseling are discussed.

Introduction

Although grief in general has long been defined as a normal response to loss, the point at which grieving becomes abnormal or pathological has been and is still being debated. Beginning with Freud's (1925) essay on mourning and melancholia, early researchers and clinicians (cf. Brabant (1989-90) relied on both intensity and duration of pain to differentiate between normal and abnormal grieving. Gradually, however, mitigating factors have been forwarded to explain, and thus, normalize continued and/or reoccurring pronounced pain. These factors include mode of death, e.g., sudden death as opposed to anticipated death, type of social support and/or predisposition of the bereaved (e.g., Parkes and Weiss 1983), and the relationship of the bereaved to the deceased (e.g., Raphael 1983). An additional factor, one that is particularly relevant to this paper, is any date or event that is associated with the deceased, e.g., the "anniversary phenomenon" (cf. Raphael, 1983; Brabant, 1989-90).

Regardless of extenuating circumstances, the death of a child is generally recognized as the most devastating loss of all (cf. Rando, 1986:6).The long term significance of the child in the parent's life, the need for primary role reorganization, and the response or lack of response from others are recognized factors that prolong and intensify the parental grief process. Holidays and anniversaries are conceded to be particularly traumatic for bereaved parents (cf. Rando, 1986). In the case of holidays or special events, the absence of the deceased child is especially poignant since he or she would have been present had he/she lived. In the case of the birthday or death anniversary of the deceased child, the failure of others to take note of a day that is important to the bereaved parent may accentuate the loneliness. Special moments and times, however, are sociologically as well as psychologically important if they mark events that belong to the group as a whole, not just to individual members of the group. Social occasions associated with these special moments and times are group phenomena.

Although factors such as type of social support, relationship to the deceased, and holiday gatherings take into account the impact of "others" on the grieving process, the primary focus of analysis is the individual (the bereaved person). This is largely due, we suggest, to the traditional use of a psychological frame of reference. The present paper uses a sociological frame of reference, specifically the work of Erving Goffman, to examine special times and the grief process. Goffman's

concept, the "social encounter," allows us to focus on the group as central to analysis, and provides additional insight into the complexity of "normal" grief.

This paper looks at the ways in which fourteen bereaved parents have dealt with three categories of special moments and times following the deaths of their children: 1) holidays in general, e.g., Christmas, New Years; 2) particular events, e.g., weddings, funerals, graduations; and 3) those occasions which are specifically associated with the deceased child, e.g., the child's birthday and/or death anniversary. Following a brief review of traditional (psychological) explanations for the pain identified with these days or events, a sociological interpretation of the trauma associated with these times is presented. Implications for grief counseling are discussed.

Data: Source and Findings

The data cited in this paper were obtained from a study conducted in 1990-91 on the social impact of the death of a child. Twenty letters were sent to members (a couple was sent only one letter addressed to both) of Compassionate Friends Inc., Acadiana Chapter, who had been bereaved for at least one year. Although the letters were prepared by the researchers, the recipients were selected by a member of the Board of Directors, thus assuring anonymity of those who did not wish to participate and complyingwith the policy of the organization. The letter explained the project and asked for permission to interview. Nine families who had experienced the death of a child (one family had lost two children) responded.

Four families were represented by one parent only: one father (Case 3) and three mothers (Cases 1, 2, 4). In five families both mother and father were interviewed (Cases 5-9). Interviews ranged from 1 1/2 to 2 1/2 hours. Age at which children died ranged from 15 hours to 29 years of age. The cause of death varied among these children: six died as a result of automobile or bicycle accidents; the other four children died as a result of AIDS, surgery, cancer, and Potter's Syndrome. Nine of the children who died were male and one was female. Bereaved parents were asked: 1) How would you have preferred to spend holidays? What did others expect of you at this time?; 2) Are you expected to attend social functions and events that were like those that your child participated in when living, e.g., weddings, graduations, sports events, baby

Table 1
Bereaved Families

Family Case Number	Parent	Child/ Age At Death	Years Bereaved	Cause of Death
1	Mother	Son/19	9 years	Auto
		Son/29	2 years	AIDS
2	Mother	Daughter/21	4 years	Auto
3	Father	Son/9	9 years	Bicycle
4	Mother	Son/15 hours	9 years	Potter's Syndrome
5	Mother Father	Son/18	6 years	Auto
6	Mother Father	Son/5	4 years	Cancer
7	Mother Father	Son/5	2 years	Surgery
8	Mother Father	Son/9	9 years	Bicycle
9	Mother Father	Son/23	6 years	Auto

showers, birthday parties, funerals, etc.? If so, how are you treated at these functions?; and, 3) How would you prefer to spend your child's birthday and death anniversary? What have others done that helped or hurt you on these days?

The responses of the bereaved parents provide poignant evidence that social occasions associated with holidays are particularly painful for bereaved parents, even those for whom several years have elapsed since the death of the child. All define the holidays as problematic. How they cope, however, differs. Some parents opt out of large gatherings: "I wanted to be here [home], by myself—I couldn't stand large family get-

togethers" (Case 1); "I never want to spend Christmas away from my home" (Case 2); "We try to remain as secluded as possible (Case 8); "We spend our Christmas quietly at home with our immediate family" (Case 9). One parent goes to family gatherings during the holidays because he wants to be with his family, but finds it "a very trying day" (Case 3). Others go because of family pressure. One parent "put[s] on a clown smile" (Case 4); one couple often plans trips to avoid going (Case 7), but go when they "have no choice." Two families have changed or added to the way things were done in the past in order to make the occasion more tolerable, e.g., send money to a special fund in their child's memory (Case 5) or burn a candle (Case 6).

The parents also find social occasions such as weddings, graduations, and funerals painful. Pressure to attend these types of functions, however, appears to be less than those occasions associated with holidays, particularly with respect to funerals. Which occasion a parent will find most problematic differs: "At weddings, everyone wants you to pretend like nothing has happened" (Case 1); "Weddings are out of the question" (Case 2); "The first baby shower was very difficult. My mother-in-law said we were depressing everyone . . . so I cut myself off from everyone" (Case 4); "Weddings are very painful; they treat us like nothing happened" (Case 5); "Events involving a particular cousin only five months older than my son are too painful to attend" (Case 6:father). One mother (Case 6) and one couple (Case 7) noted that there was no pressure to attend such events. Two mothers (Cases 8 and 9) attend events because they "have to do these things." The fathers in these two families avoid all social events. Several parents noted that funerals were, in fact, the least painful events to attend since they felt they could help those who were bereaved (Cases 3, 5:mother, 9).

All of the parents regard the deceased child's birth and death anniversaries as a time to be alone or with close family and friends. Several noted that they prefer to be alone (Cases 2, 4, 9:father). The responses from the other parents suggest that being alone is just the way it has turned out to be. One parent (Case 1) noted that "Sometimes friends call. That helps very much." A couple (Case 8) said that one of their child's friend's mother has a mass said every year on both the birth and death anniversaries. Two mothers (Cases 6 and 9) commented about how they wish others would remember these days, although one of these mothers (Case 6) said she also "needed her own space [on those days]."

Discussion

There is and has been general consensus in the grief literature that the death of a child is unique with respect to the complexity of the impact on survivors (e.g., Lindemann, 1963; Clayton, Desmaris, Winokur 1968; Kalish, 1985). Raphael (1983:281), suggests:

> "Whatever the age, the death of a child is seen as untimely by his parents. . . . In losing the child the parent loses not only the relationship but a part of the self and a hope for the future.

Similarly, Rando (1986:10-11) includes the loss of parts of oneself, loss of one's sense of immortality, loss of hopes, dreams, expectations, loss of identity as protectors and providers, and loss of role as parent to explain the complexity of parental grief. Additionally, she adds the loss of "family" as it was before the death. The impact of the loss of a child extends beyond the immediate family. Rando writes (1985:20):

> They [the parents] often complain that they feel like "social lepers." Frequently they are avoided by other parents or find themselves the object of anger when their premorbid levels of activity and humor do not return quickly enough. Social invitations may become nonexistent.

Several explanations for the social isolation of the bereaved parent have been suggested. Rando (1986:38) suggests that bereaved parents may be avoided since their presence may remind other parents that this "unnatural event could happen to them and their own children." Worden (1991:122) proposes that "friends and family may not know how to respond to such a loss and to be supportive." Either or both explain why parents may be avoided. There are, however, certain moments in time that are important to the collectivity as a whole. If the parents are part of that collectivity, their presence at the celebration is expected, e.g., holidays, wedding of a family member. There are also events associated with the deceased child that demand attention, at leastfrom the parents, e.g., the deceased child's birth and death anniversaries.

Although it is generally recognized that holidays and family celebrations as well as birth and death anniversaries are often particularly painful for the bereaved in general and particularly so for bereaved parents, explanations for this pain differ. Earlier researchers and clinicians suggested that the "anniversary phenomenon" was related to incomplete or regressed grief, i.e., pathological grief (cf. Raphael, 1983; Brabant, 1989-90). More recently, researchers and clinicians have introduced additional

explanations for the reemergence or intensification of pain associated with holidays and anniversaries. One explication is the failure on the part of the bereaved to meet expectations. Rando (1988:289) writes:

> One of the most painful issues for you to deal with is how to survive the holidays after the death of the person you loved. Because holidays are supposed to be family happy times, and because of the extraordinary (although unrealistic) expectation that you should feel close to everyone, this time of year can underscore the absence of your loved one more than any other time.

Another interpretation is the missing child. Rando (1986:313) writes:

> The marriage of a surviving sibling, the birth of grandchildren, each of [the deceased's] birthdays and anniversaries-these are all events during which the [parent] will try to imagine how life would have been different if [the] deceased child had lived.

Although the pain is prompted or exacerbated within the social context, the rationale for the pain centers on the bereaved person. Something has happened in the individual's life, i.e., the death of a child, which renders the individual less capable of responding or unable to respond than he or she might have been otherwise. Goffman's conceptualization of the social encounter, however, offers an additional explanation. He (1967:5) writes:

> Every person lives in a world of social encounters, involving him in face-to-face or mediated contact with other participants. In each of these contacts, he tends to act out what is sometimes called a line-that is, a pattern of verbal and nonverbal acts by which he expresses his view of the situation and through this his evaluation of the participants, especially himself.

A social encounter, then, is important in maintaining and/or redefining a concept of self. Goffman (p. 6) continues:

> If the encounter sustains an image of him that he has long taken for granted, he probably will have few feelings about the matter. If events establish a face for him that is better than he might have expected, he is likely to "feel good"; if his ordinary expectations are not fulfilled, one expects that he will "feel bad" or "feel hurt."

Failure to act out a line that other participants expect forces one to be "out of face," which in turn results in "bad" or "hurt" feelings. When "expressive events are being contributed to the encounter which cannot be readily woven into the expressive fabric of the occasion" (p.8) trauma

to self, over and above that which prompted the expressive events, results.

For the bereaved parent, then, social encounters are inevitably problematic. The ability to sustain an image of happy participant is limited. Indeed, if he or she presents such an image, the cost is the denial of himself/herself as parent of thedeceased child as well as the denial of the existence of the child itself (cf. Brabant et al. 1994). To present himself/herself as a bereaved parent, however, is to introduce "expressive events...[that] can not be readily woven into the expressive fabric of the occasion" (Goffman 1967:8).

Goffman provides another insight into social interaction that has relevance to this paper. What happens when an individual brings an unexpected or additional participant to a social encounter?

Goffman (1971:21) writes:

> It should be borne in mind that-at one level at least-social settings and social occasions are not organized in terms of individuals but in terms of participation units. Some places disallow unaccompanied guests but welcome the same persons when accompanied; and other places (albeit not many) enforce the reverse.

The bereaved parent's continued insistence that his or her loss be recognized is to demand that the child's symbolic presence be acknowledged. The child may come to be viewed as the disallowed guest. Failure to comply with the group rules, e.g., bringing an uninvited guest, results in additional "expressive events" that can not be "woven into the expressive fabric of the occasion" (Goffman 1967:8). This may result in even greater trauma for the parent.

Goffman, then, provides an additional insight into the complexity of parental grief. The social occasion is important for two reasons. First, it is within such a setting that an individual reaffirms his or her image of himself or herself as "good." Second, it is within such a setting that the group itself isaffirmed. Both the individual participant and the group, however, are dependent upon each other. In a real sense, the bereaved parent threatens the survival of the group, and concomitantly his or her own self image, when he or she cannot meet the group expectations. An individual may be able to accommodate the bereaved parent (although very few did in this study). The group as a whole, however, has less flexibility with respect to change since each participant is responding to group norms. It is the group as a whole, not an individual, that cannot absorb "expressive events." Put simply, a group can only acknowledge a loss; it is the individual who grieves.

Remembering the deceased child's birthday and death anniversaries appears to be best handled by making these private (the immediate family) or even individual occasions. One mother (Case 2) noted:

> I like to visit my daughter's grave on these days. She is buried in a pretty cemetery off the highway and I enjoy bringing a bouquet of flowers, sitting and thinking by her grave, changing the water and sweeping. On these days I like to be by myself! No husband to hurry me off. I like to take my time while at her grave.

Such behavior may well be encouraged by close family and friends. One couple (Case 7), for example, noted that none of their child's grandparents "want to have anything to do with the birthday anniversary."

There are, however, those special moments or times that evoke or occasion encounters that are so important, to the group as well as to the individual, that failure to participate takes on enormous meaning for both the individual and the group. For the parents in this study, holiday celebrations are apparently much more problematic than other social events. Traditional holiday celebrations may demand greater participation with little flexibility to permit "expressive events." Some parents opt out of large gatherings (Cases 1, 2, 8, and 9); others go and pretend (Case 4). For Cases 3, 5, 7, the parent(s) try to live up to expectations. In only one instance (Case 6) did a group change the traditional format in order to accommodate bereaved parents and this was due to the insistence of a group member who was also a counselor. This lack of accommodation to the bereaved parent(s) is particularly surprising given the locale in which the study was done. In the Acadian culture concern for individual family members is touted to be of singular importance. Even in this culture, however, the group need to maintain "normalcy" is apparent.

Occasions which mark events of importance to the collectivity, e.g., funerals, weddings, may be as or even more painful than holidays. These occasions are particularly traumatic if they signify unreached milestones in the child's life. In many instances, however, the parent is not pressured to attend. Indeed, the parent may not even know about the event. One couple (Case 6) noted that they were never expected to attend these type of functions. "There was no pressure put on us, [but] we felt like they were walking on egg-shells and handling us with white kid gloves." The father noted that, "They [their families] would schedule things around us; [they] have had parties sometimes we didn't even know about." Is the group protecting the parent(s) or itself?

Clinical Implications

The similarity of the responses of the parents who participated in this study is striking. Is this typical of parental grief in general or are the responses associated with being a participant in a support group for bereaved parents? If the latter, it is possible the individuals who participated in this study were attracted to a support group because they had a particularly difficult time integrating the death into their social and personal lives. It is also possible that the responses are the result of membership in the support group, since grief support groups may define the nature of grieving for members and particularly for members who remain with the group for an extended period of time. Another question that begs to be asked is why are all but one of the children male? Is the death of a male child statistically more likely, more problematic, or is grieving the death of a male child more acceptable? Unfortunately, answers to these questions are not within the scope of this research.

As mentioned earlier, however, other researchers have noted the pain associated with social occasions. Thus, the diversity of the age of the child at time of death, the type of death, and the time since the death of the child lend support to the notion that the responses of these parents are not atypical and that social occasions constitute an important consideration in understandingparental grief.

It has long been recognized that the death of a child is not an isolated event. It occurs in the context of the child's as well as the parent's place in the family as well as the quality of the parent's relationship with other family members. Regardless of this recognition of the social component in grief, the focus usually centers on the individual, e.g., the absence of the child who would have been there had he/she not died, the parent's reliving of painful times, the inability of others to cope with the death and/or the grief, the expectations of others that the bereaved parent should return to whomever he or she once was. In contrast, this paper focuses on the interaction between the bereaved parent and "the group." Some of the parents in this study felt pressured to meet group expectations; others were "excused" from group functions. In only one family (Case 6) did "the group" make an effort to accommodate to the bereaved couple and this was only with respect to the holiday celebration.

Although painful, the birth and death anniversaries may well be the least problematic for the bereaved parent from a sociological perspective. For our respondents there was no pressure to meet group expectations at these times. Indeed, for the most part, "others" ignored these days. The bereaved parent was left to commemorate as best he or she

could. The respondents in this study are predominantly Catholic; seven of the nine families have a mass said on the child's birthday or the anniversary of its death. If the parents were Jewish they would perhaps be expected to participate in Mourners Kaddish during the Saturday service closest to the anniversary of the child's death every year, as a routine part of the Sabbath service. Since the religious beliefs of the parent(s) structure(s) to some degree the honoring of the memory of the dead, problems associated with these days may be quite different across ethnic and religious groups. Thus the clinician should affirm the parent's right to commemorate birth and death anniversaries and assist those parents, who lack structured ways to commemorate these days, in the creation of a ritual that will mark the significance of these moments in time.

Occasions which call for or demand the bereaved parent to participate in group activities may be more problematic from a sociological perspective. Earlier explanations for the trauma associated with such occasions places the responsibility for the trauma on the parent. You need to get on with your life; you need to put this loss behind you; your sad face is ruining the celebration. Such collective blame puts additional pressure on a person already overburdened. Using Goffman's framework, the clinician can help the bereaved parent recognize the social occasion as a "Catch 22" (Heller, 1961). The social encounter is important since it is within this encounter that an individual affirms his or her image ass "good." It is also important that the group itself be affirmed. Failure to attend may result in expulsion from the group. If the parent does go, however, there will also be problems. The parent must either deny his or her grief and "put on a happy face" (thus in effect abandoning his orher deceased child), or risk the introduction of "expressive events" that threaten the group as a whole. For the bereaved parent, the social encounter presents a no-win situation. Given this perspective, the parent's pain ceases to be the "fault;" the problem lies within the particular social context. The parent must make a choice. Will going to a holiday dinner or a wedding cause more pain than not going? Will not going cause more pain? The parent, then, assumes responsibility for making the choice, not for feeling the pain.

This is particularly the case with respect to holiday celebrations. The grief of the bereaved parent is not simply a feeling that is internal to himself/herself. His/her grief affects his/her social networks. The bereaved parent, then, is forced to contend with these "others." Some of these "others" may be accommodating; some may not. When members of this network constitute a group, the bereaved parent is forced to con-

tend with "the group" as well. Unlike individual "others," the group as an entity is less flexible. Does the parent "choose" to pretend happiness or remain at home? Does he or she take the deceased child (symbolically) to the gathering? The parent is now able to respond to the group as an entity, not just a collection of individuals.

All of the parents interviewed in this study had been involved in the grief process for over a year, many for a number of years. It is apparent that each had finally come to the conclusion that he or she had to make a personal choice. It is possible that this would have taken place regardless. Again, it is entirely possible that this perspective was gained through membership in Compassionate Friends. Older members repeatedly enjoin new members to "take care of yourself; don't go if it hurts too much, or, if you go, don't expect too much from yourself" (cf. Schiff, 1977). A sociological perspective affords the clinician an additional framework with which to help the bereaved parent consider self, others, and the group itself in making decisions about social encounters. Once the onus of self blame for continued grief is removed, the clinician can assist the bereaved parent to explore the consequences of either avoiding or participating in social occasions, affirm and support the parent's decision to go or not to go, and assist the parent in creating new ceremonies/activities that will enhance or at least render less painful those ceremonies/activities that belong to the group.

NOTES

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