Bereaved Young Adults: Social Isolation and the Influence of Gender

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Abstract

This thesis examines the prevalence of social isolation in bereaved young adults' experience of bereavement and asks whether gender plays a significant role in the experience of isolation. In bereavement literature, social isolation has commonly been examined as one of a series of side-effects of bereavement, rather than as a single phenomenon. Also, the young adult age-group has often fallen between categories of adolescence and adulthood, and thus, on a comparative level, has tended to be overlooked. In identifying these gaps, the thesis examines the social experiences of bereaved siblings, aged between eighteen and thirty when the sibling's death occurred, and for whom no less than one year and no more than ten years had passed since the death. Twenty-five young adults – ten males and fifteen females – and seven counsellors participated in the study which utilised a semi-structured interview format. The data collated emphasised a) that the level of social isolation varied from participant to participant, and b) the importance of wide-ranging and 'meaningful' social support, a type of support that even participants who identified themselves as 'loners' experienced as beneficial toward maintaining and/or regaining a positive social outlook. However, gender role identification could influence which types of support were interpreted as 'meaningful', while facets of the bereavement process often appeared threatening to the maintenance of one's gendered social identity. In this regard, the value of a gender sensitive approach towards studying young adult bereavement became evident. Furthermore, the results revealed the importance of researchers, service providers, policy makers, and the public generally, recognising grief as an ongoing process and developing a more expansive perspective on what constitutes 'productive' support.

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CHAPTER 1

INTRODUCTION

1.1 The study

Young adults' subjective experiences of their social life-worlds, following the death of a sibling, constitute the study's major focus. The two dimensions of this subjective experience that are examined in the study are social isolation and the influence of gender. The question I ask is: What are the social consequences of bereavement for the young adult, and does gender mediate these experiences? A phenomenological approach is adopted to examine this overarching research question.

1.2 The genesis of the study

The title of this study – Bereaved Young Adults: Social Isolation and the Influence of Gender – announces an examination of subjects that at first view may appear unrelated to each other. Or perhaps it is more that the subjects of youth and bereavement seem diametrically opposed to each other. In this study, bereavement is referring to the death of a sibling. If the term 'youth' is partially denotative of 'the future', then it would almost seem impolite to mention 'bereavement' in the same sentence. Furthermore, a consideration of the influence of gender in relation to the social experiences of bereaved young adults would appear to run the risk of simplifying the complexity of individual responses to bereavement.

In order to elucidate the study's themes and concerns – and how they intersect – a brief summary of what factors attracted me to the subject matter will be undertaken. The main factor relates to my parents' experiences as group co-ordinators in the Geelong branch of the 'bereaved parent' support group The Compassionate Friends (TCF). By 'bereavement' – and this relates to the provision of their services – TCF is referring to the death of a child.

An often-mentioned anxiety of bereaved parents centred on what they felt was the 'social isolation' of their surviving child or children. As the majority of parents were between the ages of forty and sixty, the surviving children they referred to were either teenagers or young adults. The parents' worry over the social isolation of their children usually arose one to five years after the bereavement occurred. The social isolation they referred to commonly signified a) their child's increasing propensity to 'retreat' to the solitude of the bedroom, b) the child's sense of apartness from – or disinterest in – the social environment and everyday concerns of his/her peers, and c) a more general sense of a lack of social 'belonging', even though he/she may still be partaking in social interactions.

In turn, their children noted discomfort in the behaviour of friends, peers and work colleagues, in relation to talking in any great depth about the sibling who had died. Also, it appeared that to avoid social isolation, their children felt a need and/or obligation to 'cover over' any expressions of grief-related feelings in public settings and –indeed in some cases – private settings. Overall, the perception these people held was that there were very few people whom they could 'lean upon'.

The social behaviours of 'covering over' emotion and/or 'leaning upon' other people in times of crisis inspired a contemplation of the influence 'gender' has in the social experience of grief and the experience of social isolation. Principally, the influence of gender was considered in terms of notions of 'masculine' and 'feminine' social identities and the social prestige associated with and/or afforded the expression of these identities. Based on the reports of the TCF parents, differences between how young men and young women respond to bereavement on a social and personal level had not proven to be of particular relevance to their children's bereavement experience. However, there may have been a simple reasoning behind this; the majority of the parents were bereaved of a son, and their remaining children were predominantly female.

Therefore, differences between men and women may not have been apparent. On the other hand, there was the suggestion that some of the bereaved sisters were 'adopting' traditional 'masculine' responses for handling life-crises (ie. on a social level, hiding any grief-related thoughts and feelings, and centring themselves on work-based activities as a form of protection from experiences of grief), while those who did express grief in an open manner reported the experience of social rejection and discomfort. So the influence of gendered behaviours emerged as a significant factor in relation to the experience of social isolation.

Previous research and literature on bereavement may have given little attention to the influence of gender in the bereavement experience of young adults, but it does allude to the probability that the bereaved individual will experience some form – or a variety of forms – of social isolation. As an example, Osterweis, Soloman and Green (1984: 50) state that a period of despair commonly follows the event of bereavement.[12] During this period of despair, the individual may lose interest in the outside world and will often give up activities that once brought him/her enjoyment in life, such as socialising with friends (Osterweis et al. 1984: 50). This statement reflects the concerns that were voiced by the bereaved parents at TCF, and it is suggestive of how social isolation may develop – and come to feature prominently – in the grief journey of bereaved individuals. The concerns of the parents generated in me an interest in investigating, in a systematic way, the connection between bereavement and social isolation. This systematic study started with a series of questions, namely:

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[1] Jacobs, Korsten, Kasl, Ostefeld, Berkman, and Charpentier (1987, cited in Schoka Traylor, Hayslip, Jnr., Kaminski & York, 2003: 576) argue that grief is distinguished from other types of emotional distress in that the bereaved individual pines for the person who has died.

[2] On the notion of despair, Freud (1917, cited in Worden 1991: 31) makes a valuable distinction between grief and bereavement. For the grieving individual, the world *looks* poor and empty, whereas the depressed individual *feels* poor and empty. At the same time, Worden's (1991: 31) caution that "some bereaved individuals do develop major depressive episodes following a loss" functions as a reminder that grief can precipitate depression.

- How significant is social isolation in the bereavement experiences of young people?

- How important is social support in relation to coping 'successfully' with bereavement?

- On a social level, what are – if any – the positive effects social isolation has for the individual? What are the maladaptive effects and social risks associated with too much isolation?

- Why do these bereaved young people commonly perceive there are very few people within their social life-world whom they can 'lean upon'?

1.3 The researcher

My own experience with bereavement occurred in 1993 when my brother Jeremy died in a plane crash. I was nineteen at the time. The concerns of the parents at The Compassionate Friends – in relation to their children's experiences of social isolation – did, in many respects, mirror my own experiences. What I initially believed had been a largely individual experience – the experience of social isolation, seemingly as the result of bereavement – now 'appeared' to be a more common and widespread occurrence among the bereavement-related experiences of young adults.

In the early years following Jeremy's death, I spent little time, if any, questioning my assumptions of social attitudes toward death and grieving. I certainly did not question the factors that may have come to form these assumptions. What I assumed was that people would feel uncomfortable and awkward when confronted with issues of death and grief (and 'confronted' with the people who had come to represent these issues). So outside of my immediate family, I made reference to my bereavement status very occasionally. Sometimes a reference was 'forced', in cases where a person enquired as to whether I had any siblings. On the few occasions where I did put

the subject forward it was received with discomfort – or at least that was my perception.

In the first three or so years after my brother's death, it often was difficult to articulate the nature of grief and grieving. This in itself impacted on my willingness to disclose to individuals outside of family. I felt that any bereavement-talk tended to turn into a 'ramble'. This appeared attributable to my struggle in 'finding' satisfactory descriptions of grief, a struggle often compounded by my concentration on any signs of discomfort and/or exasperation in the listener's (or listeners') behaviour.

However, there was one term I came up with for describing bereavement experience – 'present-lack'. Since Jeremy's death, the world I inhabited, and all that it had to offer, had lost much of its lustre. The events, objects and activities that continued to excite and challenge my peers now appeared to me to be mere shadows of their 'old' selves. Even if I could downplay my bereavement experience socially, the loss of enthusiasm for life in general was more difficult to hide. In light of my assumptions and lack of energy or inspiration to 'act', I found it easier to be alone. I sometimes wished that friends would be in contact with me and increasingly felt angry that they were not. But then I grudgingly acknowledged what I felt to be true – people, young people in particular, did not want to examine the path of death and grieving, or at least only from a safe distance and in short, non-too-confronting blocks of time.

As the grief has dissipated in strength over the past decade or so, I have found that a relatively comfortable re-integration into social environments outside of immediate family is possible, although it is difficult not to feel behind one's peers, that is in terms of establishing oneself in a career, or having shared experiences. However, this is not necessarily just the bereaved young adult's lot, as much as it is the lot of any young adult who has struggled with establishing a satisfactory path in life. Still, the experience of social support in recent years has for me been both a source of happiness and a harsh reminder of how social support can lift one's spirit, confidence and motivation. After

Jeremy's death, I appeared to have lost any inherent recognition (conscious or otherwise) of the benefits of social support and indeed social contact. Without wishing to paint a negative picture of any future trajectory of my own, as I hold it in a largely positive regard, I sometimes wonder what the trajectory of my 20s would have been if I had been living within a culture more educated and comfortable with the impact of death and the ongoing process of grief.

This is not intended to build a tract of regret or disappointment. If anything, the grief has constituted a substantial learning experience, if at times an overwhelming one. Ultimately, social isolation may be a necessary component of coming to terms with the bereavement. However, it is difficult not to speculate on how an individual could potentially benefit – emotionally, mentally, physically and spiritually – from a continuing social recognition of such a significant event in his/her life. In fact, it would seem irresponsible to avoid speculation on this matter.

My decision to undertake this research occurred when I discovered there were very few studies – if any – that explicitly linked youth bereavement and social isolation, and also examined gender-related influences on the nature of young adult bereavement. In bereavement literature, social isolation is commonly included in listings of 'potential symptoms' of bereavement; it appears alongside symptoms such as depression, lack of concentration, apathy towards everyday routines and activities, and fluctuating moods (Zagdanski 1990; Raphael 1993). In this research, social isolation will be the central focus. However, consideration will also be given to how the other noted symptoms of bereavement may influence the bereaved young adult's social functioning.

The ethical implications of the researcher's personal experience will be discussed in the Methodology chapter (Chapter 5).

1.4 Bereaved siblings
This study will concentrate on the bereavement-related experiences of young adults. An early decision in the study's development was to interview

approximately thirty young adults, each of whom has been bereaved of an immediate family member. As envisaged, the interviews would be semi-structured and would constitute in-depth examinations of the young adults' post-bereavement social experiences; each individual's recollections and perceptions of his/her social experiences would be sought. It was envisaged that there would be an even split between male and female participants to accommodate an analysis of the influence of gender in regards to bereavement and social isolation. It was considered possible that the number of participants might exceed thirty; in principle, once no more new information was being obtained in the interviews, then the recruitment of participants would cease.

The decision was also made to limit the participants to young adults who were bereaved of a sibling. The purpose here was to ensure consistency across what would, in all probability, constitute a relatively small sample. In this regard, it needs to be stressed that Chapter 2 of this study will discuss young adult bereavement literature that typically does not contrast the bereavement-related social experiences of bereaved siblings and bereaved children. However, the semi-structured interview component of this study – and subsequent presentation and analysis of results – will concentrate specifically on bereaved siblings and their social experiences.

1.5 Young adults

As previously mentioned, there are few systematic studies centred on young adults and their experiences of bereavement. In general, research that has been conducted examines the experiences of American university students. The results typically note bereaved students' feelings of isolation from nonbereaved peers, and their desire for greater levels of social support (Vickio, Cavanaugh & Attig 1990; Balk, Tyson-Rawson & Colletti-Wetzel 1993). Gender similarities or differences in bereavement experiences have also received little attention in these studies. According to LaGrand (1986: 17), "young adults are caught between the pressures of dependence and independence and the establishment of a basic human need – identity." The developmental transitions of young adulthood – to establish oneself interpersonally, financially, emotionally and

spiritually (Evan & Poole 1991) – are therefore demanding, although Blake (1999) notes that in Western society a common presumption is that youthful vitality will ultimately prevail against these difficulties and uncertainties. Presumably, to place within this context the death of a close family member would be to increase the level of social and personal demands on the young adult. According to Osterweis, Soloman and Green (1984: 5) the death of a close family member is "almost uniformly" identified by researchers and the public alike as "the most potent stressor in everyday life."

The social and personal demands on the young adult are given a further dimension in consideration of the Australian social landscape. Kellehear (1997: 1) observes that within Australia, there is an "officially endorsed set of cultural images of death", each of which emerge from "a triad of great myths about Australian identity." While The Bushman and The Soldier myths highlight death as external threat (for example, the difficulties in surviving the Australian terrain, and the human cost of various wars in the 20th century) the more contemporary *Homo Surburbia* myth highlights death as an interior process. The *Homo Surburbia* myth emerges from a post-World War II context where the masculinist representation of social and personal success was to own one's own home (Kellehear 1997). The occurrence of death threatens the foundation of this myth, essentially undermining the "quintessentially bourgeois dream of much of Western industrial society – privacy, comfort, control, predictability, safety and financial and marital security" (Kellehear 1997: 6-7). Deaths that affect young people, such as traffic accidents, suicide and AIDS received major attention, on account that their occurrence threatened 'haven-like images' of *Homo Surburbia* (Kellehear 1997: 7). The influence of cultural myths are particularly pertinent to this study in terms of how the type of death – and the age of the person who died – may influence the social support a bereaved sibling consequently receives. As Kellehear (1997: 1) notes "myths function to select and privilege certain experiences while marginalising or ignoring others", such as indigenous Australians' experience of death. If certain types of death are considered particularly destabilising to cultural and personal identity, would the social response ensure satisfactory support for the young adult?

1.6 The influence of gender

'Young adult' bereavement literature tends to disappear between the more comprehensively researched bereavement experiences of adolescents and parents. Within the literature on bereaved young adults that does exist, there is little consideration of bereavement experiences from the perspective of gender. The influence of gender has been centred primarily on the experiences of widows and widowers (Vandervoort 2000).

Just as the motivation to research youth bereavement and social isolation in tandem derives – in part – from a dearth of related studies, so too a consideration of the influence of gender derives from a dearth of gender literature relating to youth bereavement and social isolation. The issue of gender deepens the level of analysis required for this study, as the questions below illustrate:

The principle questions relating to gender ask;

- How do gendered actions and behaviours influence the young adult's experience of grief and social support?

- What are the social costs of emotional expression that veers toward the traditionally 'masculine'? Or alternately, expression that veers towards the traditionally 'feminine'?

There are also two further questions that emerge from this consideration of gender. They are more attuned to the issue of difference between the sexes;

- Are there differences between bereaved young men and women in the 'types' of social isolation experienced?

- Are there differences between the men and women in the extent to which positive and/or negative social isolation is experienced?

1.7 Western culture and bereavement

In his analysis of late twentieth century Western values and social structure, Slater (1974, cited in Charmaz 1980: 86) observes that the rise of 'individualism', a social discourse that encourages a heightened sense of self, has cultivated in Western populations an acute fear of death. Beliefs in 'individualism' can also obscure the recognition that our 'real selves' depend on relationships with others (Charmaz 1997: 232). That death can be perceived as "the ultimate form of loneliness" in Western societies, Slater (1974) argues, is a logical outgrowth of the fact that industrial societies lack the sense of social connectedness which other societies possess (cited in Charmaz 1980: 87). The psychoanalytical appraisal of cultural fears of death posits that the human drive towards the external and objective world of activity (ie. work, leisure activities) placates this fear, if only for short periods of time (Slote 1975, cited in Charmaz 1980: 85). In line with this 'escapist' orientation, Handsley (2001) notes that "social and cultural norms demand that 'life goes on'" and views "any excessive grieving as unnatural and pathological" (Handsley 2001: 13).

Coupled with the influence of individualism is the modernist, scientific-rationalist "desire to exercise control over mortality" (Howarth 2000: 128). In contrast to religious systems of the Middle Ages, where death was seen as an integral feature of life, the scientific-rational approach positions death as 'the enemy'; this approach "has been fundamental to death's sequestration from life" (Howarth 2000: 128). Religious interpretations and explanations of death and disaster – for example, 'an act of God' or 'the wages of sin' – were now challenged by scientific discourses of 'preventative measures' (Kellehear 2000: 4-5).

Aries (1974) also noted that a change in social sentiment toward the bereaved occurred in the early 1900s. No longer were individuals connected with the dying individual *merely* required to relieve the individual of "the burden of his (sic) ordeal" (Aries 1974: 86). They were also required to control their turbulent and unpredictable displays of emotion – that contact with the dying

would inevitably produce – within the public sphere. Hence, the avoidance of such emotions became the individual's responsibility towards not only the dying person, but also society itself. Aries' (1974: 89) opinion is that "One does not have the right to become emotional other than in private, that is to say, secretly."

Furthermore, between 1930 and 1950, the displacement of death – from the family home to the hospital – accelerated this progression and alteration of the social outlook towards handling death and bereavement. Funeral rites too had been modified to facilitate, to the greatest degree possible, social discreteness and the avoidance of emotion. Grief that is too open and evident inspires repugnance rather than sympathy; in the worst sense, it is indicative of mental instability and, in the best sense, indicative of poor social manners. Even within the family circle one can hesitate with open displays of grief, should he or she upset other family members. The only mourning permissible therefore is of a solitary nature (Aries 1974).

Aries (1974) cites that from the beginning of the twentieth century, funeral directors, doctors and priests were transformed, when and where it was necessary, into the 'doctors of grief'. These 'doctors' would aid "the mourning survivors to return to normalcy" (Aries 1974: 99). Their responsibility was in treating, shortening and ultimately erasing the individual's grief. This process of erasure would ultimately come to complement the character of present-day Western societies, circa 1974. That is, in the sense that the comparatively slow process of working through grief has little constructive place or value in an "urbanised culture which is dominated by rapid economic growth and by the search for happiness linked to the search for profit" (Aries 1974: 100). Furthermore, a victim of traumatic events "constitutes an insult to the belief (at least in the Western world) that human beings are essentially masters of their fate" (McFarlane & Van der Kolk 1996: 28).)

As Osterweis, Soloman and Green (1984: 204) point out, the cultural character of how bereavement is experienced emerges from the interaction of cultural,

social and economic forces. However, this apparent covering up of the effects of death in Western societies has not emerged as a result of any developing cultural indifference. To the contrary, in cultures where grieving is 'forbidden', mortality rates of widows and widowers are much higher in the year following their spouse's death, than they are for control groups of the same age (Aries 1974). In light of these findings, Aries (1974) believes that the removal of the right to express one's grief openly and/or publicly, and to tell the world of the person or people one is missing, has only served to aggravate the individual's trauma.

Taking these sociocultural factors into account, the concern arises as to what level of social support may be available to the bereaved young adult from his/her society. In particular, what support may be available from peers for the young adult, as he/she is commonly surrounded by the youthful mindset of "being drunk with future time" (Kearl 1989: 462). Added to this concern are a series of studies that are suggestive of the detrimental effects social isolation can have on the young adult, in that they emphasise the crucial role social support plays in tempering the effects of traumatic loss and promoting 'recovery' from bereavement (Cobb 1976; Hamburg, Adams & Brodie 1976; Kaplan, Kassell & Gore, cited in Osterweis, Soloman & Green 1984: 203). These studies will be examined in further detail in Chapter 2.

Use of the term 'recovery', in relation to bereavement, is somewhat contentious in bereavement research and literature, in the sense that recovery can be used to denote a conclusion to a period of grieving. The counter-claim to this is that one does not recover from bereavement, but rather one *adapts* to this significant life crisis (Balk 2004). Such a view of recovery, it is feared, creates or reinforces a social response to bereaved individuals (ie. 'It's time to move on'); a response that tends to produce much chagrin and disappointment in bereaved individuals, in that they feel the response underestimates the enormity of the individual's grief (Balk 2004).

Balk (2004: 368) however, repositions the term 'recovery' in relation to Leighton's (1959) ten 'essential human sentiments'. The individual may be

deprived of *all* – or at least a majority of these 'sentiments' – through bereavement, but ideally will *recover* each of these in the course of his/her 'grief journey' (Balk 2004: 368). The 'sentiments' are "(a) to possess physical security, (b) to achieve sexual satisfaction, (c) to express hostility, (d) to express love, (e) to secure love, (f) to secure recognition, (g) to express creativity, (h) to be oriented to one's place in society, (i) to secure and maintain membership in a human group, and (j) to belong to a moral order" (Leighton 1959, cited in Balk 2004: 368).

1.8 Defining social isolation

Social isolation is defined as "a blockage of social interaction and communication with other people" (Halvorsen 2002: 4). Furthermore, social isolation is viewed as being a sociological phenomenon, in that it pertains to the way in which society is organised. That is, social withdrawal and complications in personal relations are two factors that fall under the sociological banner of 'deviance' because in these cases the individual person can be viewed as not able to uphold social expectations and norms in society; expectations and norms relating to appropriate levels of social contact and appropriate modes of social interaction (Halvorsen 2002: 4).

Killeen (1998: 764) observes that the concept of social isolation encapsulates experiences of both loneliness and aloneness. Loneliness refers to deficiencies the individual perceives in relation to his or her social relationships (Cutrona, Rose and York 1984, cited in Halvorsen 2002: 1). The sense of deficiency derives from "discrepancies between one's desired and one's actual relationships" (Peplau & Perlman 1982, cited in Halvorsen 2002: 3). For the individual, loneliness is always an unwanted experience, whereas the opportunity to spend a certain amount of time alone – that is, to release oneself from social demands, scrutiny and constraints (Larson 1990: 157) – can be a desired experience (Halvorsen 2002: 3). In this sense, the nature of an individual's experience of social isolation can be considered in terms of a continuum, with loneliness at one end of the spectrum, and aloneness at the other.

The manner in which social isolation is experienced would appear dependent on whether the individual person is able to exercise choice within his or her everyday living; "social isolation with choice is aloneness, while social isolation without choice is loneliness" (Killeen 1998: 764). In other words, the type of social isolation that is primarily responsible for producing feelings of loneliness occurs where the individual perceives and/or experiences external pressures and 'blockages' in interpersonal relationships (for example, peer group expectations and experiences of social ostracism); these pressures and obstacles can be perceived by the individual to restrict his or her agency, except in retreating into solitude.

Ultimately, whether the individual is alone or lonely, or some combination of both, his or her social isolation can potentially be looked upon as deviance-of-sorts, in that he/she fails to uphold, or 'play by', social norms and expectations regarding social interaction. Placing 'deviancy' to one side, social withdrawal has also been seen as having positive ramifications for individuals. In Waskowic and Cramer's (1999) review of research conducted on the experience of solitude, time spent alone had been recognised for its positive effects, such as self-reflection, self-actualisation, and creativity. Conversely, the negative effects reported included loneliness, depression and low self-esteem (Waskowic et al. 1999: 1045). One could presume that the positive effects of time spent alone are synonymous with the individual's opportunity and capacity to *choose* to be alone, but it would also seem premature to discount the likelihood that positive self-reflection could occur in situations where the individual feels his/her social isolation has been externally imposed.

As mentioned above, social withdrawal was one 'deviant' factor associated with social isolation; complications and difficulties in personal relationships was cited as the other factor (Halvorsen 2002: 4). In Vandervoort's (2000: 230) review of research relating to social isolation and gender, she noted the common finding that high numbers of social contacts do not necessarily correlate positively with a reduced level in reported feelings of loneliness. Of greater

importance is the 'quality' of these relationships. That is, the individual is freed from loneliness when his or her relationships involve emotional intimacy and disclosure (Wheeler, Reis and Nzlek 1983, cited in Vandervoort 2000: 230). The therapeutic stance on satisfactory levels of emotional intimacy and disclosure similarly emphasise the positive outcomes for the individual; the individual's experience of being deeply understood and valued by significant others, and accepted by those people regardless of the trajectory of his or her life course, allows the individual to move on to a more positive state of being (Rogers 1961; 1980, cited in Vandervoort 2000: 3).

1.9 Perceived and experiential isolation

The concept of loneliness is therefore illustrative of the negative potential of social isolation. At the same time, a large number of social contacts do not necessarily remedy loneliness. In this regard, the concept of loneliness, and by extension, social isolation, can encompass more than the incongruity between an individual's desired and his/her actual relationships. Loneliness also identifies *the feeling of not belonging*, regardless of one's level of social contact (Halvorsen 2002: 3).   The subjective nature of the concept facilitates recognition of how one can feel invisible or ignored, or even like a stranger to close acquaintances, regardless of how social included or excluded the individual appears to other people (Halvorsen 2002: 3).

To conclude this subsection then, two assumptions about the concept of social isolation, assumptions that would appear particularly pertinent to this study, will be restated. Firstly, aloneness would appear to constitute the positive experience of social isolation, while loneliness constitutes the negative experience of social isolation. Secondly, social isolation would appear to be as much a subjective experience as an external reality.

The above descriptions and definitions of social isolation also indicate a further avenue to examine in this study. That is, what 'types' of social isolation ('aloneness-positive' or 'loneliness-negative') do bereaved young adults predominantly experience?

1.10 Overview of the thesis

This particular study is bringing social isolation into the forefront of young adult bereavement research. By design, it intends to extend knowledge of the nature of the relationship between social isolation and young adult bereavement. Furthermore, it is unique in its integration of the influence of gender into this relationship. Finally, the study is a new addition to what is the comparatively low research output regarding young adult bereavement.

The review of literature and theory in Chapters 2, 3 and 4 will provide this study with a solid theoretical foundation, drawing principally from the phenomenological tradition, from which an effective sociological inquiry into the subject matter will be possible. The Methodology chapter will then outline the qualitative methods employed for the study; for instance, the procedures employed for interviewing bereaved young adults, and the procedures employed for interviewing counsellors who have counselled bereaved young adults. The 'results and analysis' chapters that follow will total six chapters in all, and will centre on themes of social isolation (Chapters 6 and 7), the influence of gender (Chapters 8, 9 and 10), and the experience of social connectedness (Chapter 11). Finally, a summary of the main findings of the study and a consideration of their overall contribution to the field of bereavement literature will be presented in the Conclusion.

CHAPTER 2

CONNECTIONS: SOCIAL ISOLATION, YOUNG ADULT BEREAVEMENT AND GENDER

This study considers whether social isolation is one of the characteristic experiences of bereavement. Therefore, a review of literature relating to social isolation and bereavement needs to be undertaken. A core motivation in reviewing the literature is not solely to uphold process, but to test the validity of one's own subjective 'hunches'. Personal experience may provide insights into the study's key concerns, but how applicable one's personal experience of grief is to a multitude of grief experiences is questionable.[3]

The current literature can inform one of contemporary and historical thinking on social isolation. However, the dearth of studies simultaneously examining bereavement and isolation has created the necessity to locate and specify the patterns that exist between a variety of studies which at first view might appear unrelated. Similarly, studies concentrating on youth bereavement from the perspective of gender are few and far between. In this regard, 'gaps' in the research literature already exist. So the principal task of this review is to locate any patterns or observations from the research literature that are suggestive of links between bereavement, young adulthood, social isolation and/or studies of gender. Furthermore, a series of questions that emanate from the literature and relate to the study's key concerns – bereaved young adults, social isolation and the influence of gender – will be raised.

The literature that has been reviewed for this study will be categorised under the following sub-headings: *2.1 social isolation; 2.2 young adults and social isolation; 2.3 social isolation and gender; 2.4 bereavement and young adults; and 2.5 Australian youth 'today'.*

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[3] The results of my Honours thesis, where six bereaved young siblings were interviewed regarding their experiences of social isolation, suggested that the levels of both positive and negative social isolation experienced were highly variable (McNess 2002).

2.1 Social isolation

From the material outlined in the Introduction, it is implicit that social isolation can have an impact on the individual at psychological, physical and social levels. Loneliness and its associated social-interpersonal detriments (for example, the feeling of not belonging in a social group, or being 'out of sync' with peer group vernacular) are generally associated with negative experiences of social isolation. The potential discrepancy between external indicators of social inclusion and the subjective experience of 'belonging' are alluded to in Shoemaker, Breen and Stamper's (2000) study of fear of social isolation. The authors' intentions were to test empirically Elisabeth Noelle-Neumann's Spiral of Silence Theory (1984). The major assumption of this theory is that external signals of social acceptance preoccupy individuals to the extent that they will consciously edit or withhold any opinions and perspectives they perceive will run counter to the prevailing opinion of a social group. Essentially, people monitor the climate of public and/or 'group' opinion and, in a social context, modify their opinions accordingly so as to avoid the possibility of social exclusion (Shoemaker et al. 2000: 65). Applying this theory to the present study, the question can be asked 'to what extent can social context, or particular social contexts, inhibit the bereaved young adult's expression of feelings of grief on a social level?' If the individual does feel inhibited on a social level, what are the personal consequences for the individual?

Shoemaker et al. (2000) utilised Watson and Friend's (1969) Fear of Negative Evaluation scale (FNE) in order to test Noelle-Neumann's Spiral of Silence theory. Fear of negative evaluation is defined as "apprehension over others' evaluations, distress over their negative evaluations, avoidance of evaluative situations, and the expectation that others would evaluate oneself negatively" (Watson et al.1969, cited in Shoemaker et al. 2000: 68). Furthermore, the fear of loss of social approval was felt to be identical to the fear of negative evaluation (Watson et al. 1969, cited in Shoemaker et al. 2000: 68).

The FNE scale itself measured thirty items on a 5-point Likert scale, ranging from 5 for 'strongly agree', to 1 for 'strongly disagree'. Items included:

- 'I worry about seeming foolish to others.'
- 'I become tense and jittery if I know someone is sizing me up.'
- 'I often worry that people who are important to me won't think very much of me.'

A Likert-scale was also utilised by Shoemaker et al. (2000: 69) in order to indicate individuals' opinions on a controversial subject (such as a woman's right to abortion), individuals' perception of the predominant opinion, and the willingness of individuals to express an opinion socially.

To test the Spiral of Silence, a telephone survey of 403 adults, aged 18 years and older, was conducted in a mid-size Western U.S. city. The authors found "only the most modest support" for Noelle-Neumann's (1984) theory (Shoemaker et al. 2000: 71). Indeed, they found that the fear of social isolation was negatively correlated with the individual's opinion. The authors suggested that this negative correlation developed as a consequence of their choice of a controversial issue; another social issue, less publicised and politicised as a woman's right to abortion, may have produced a significant variation in participant responses. In any case, there was a faint suggestion, in the most indirect and decidedly inconclusive way, that the authors' concept of the fear of social isolation was being supported. That is, most of the people who participated in the study believed their opinions were identical to the opinions of most other people (Shoemaker et al. 2000: 72). Hence, the individual's belief and perception that his or her opinion is in line with the current social climate significantly reduces anxiety related to social exclusion. This finding inspires a further question – in what social context/environment would you feel confident in expressing a particular opinion? For this present study, the question translates to, in what social context/environment would you feel confident in expressing (or talking of) feelings of grief, without fear of social exclusion?

Overall, Shoemaker's et al.'s (2000) empirical research and review of theory and previous research is valuable in terms of suggesting how particular social

contexts (along with the presumed need for social approval) may inhibit the individual's free expression of opinion and, by extension, inhibit the individual's expression of particular feelings and emotions within those contexts. Furthermore, in referring to the definitions of loneliness outlined in the Introduction, one could suggest that as a consequence of restricting minority voices (that is, the individual bereaved of an immediate family member), the 'restricted' individual's sense of belonging and acceptance by others is reduced. Following the logic of Killeen's (1998: 764) assertion that social isolation covers experiences of both aloneness (positive social isolation) and loneliness (negative social isolation), the individual's perception of not belonging (Halvorsen 2002: 3) would then constitute a negative experience of social isolation.

Outlined in the Introduction also was the belief that a sense of belonging and connectedness to other people is generated more through emotional intimacy and disclosure in relationships than through the density of one's social relationships (Wheeler, Reis and Nzlek 1983, cited in Vandervoort 2000: 230). In many respects, empirical research conducted by Jones, Hobbs and Hockenbury (1982) supports this notion. Their research highlighted a correlational relationship between an individual's 'level' of loneliness (ie. a low-lonely or high-lonely individual) and the level of his or her social skills in dyadic relationships. More specifically, a low level of social skills correlated positively with a high level of loneliness, and vice versa. The research suggested that a low level of social skills resulted in relationships that were lacking in satisfying levels of intimacy.

Hence, Jones et al.'s (1982) results were reflective of previous research on loneliness; the lonely individual differed from the low-lonely individual in terms of the frequency of emotionally intimate interaction in his or her social relationships. At the same time, the overall frequency with which an individual interacts with others was found to be similar for both lonely and low-lonely individuals. The Jones et al.'s (1982) results introduce a question pertinent to this present study – 'Would the effect of bereavement on the individual obstruct

the young adult's development of social skills, social skills that would ultimately facilitate emotionally intimate interaction?' Also, the similarity found in the frequency of social interaction for both lonely and non-lonely individuals, alludes to one of the hypotheses of the present study; social isolation can be as much a subjective experience (feelings of not belonging) as an external reality (separating oneself physically from his or her peers).

In Jones at al.'s (1982) study, social skill in dyadic relationships was operationalised through the concept of 'partner attention', which refers to a specific class of conversational behaviours.   The authors based this concept on the results of social skills research conducted by Kupke, Hobbs and Cheney (1979, cited in Jones et al. 1982: 683). Kupke et al. (1979) found that a high rating of interpersonal attraction given by dyadic partners was significantly related to a high frequency of what was termed 'personal attention'. In the context of a dyadic relationship, 'personal attention' is operationally defined as questions asked or statements made about one's partner; that is, one's 'partner' in the experimental setting. 'Partner attention' therefore is referring to conversational behaviours where an individual displays and communicates a positive interest in the other person. Jones et al. (1982: 685) noted that with participants in their study (24 men, median age = 38.5; 24 women, median age = 38.0) it was found that self-reported high-lonely individuals, in comparison with low-lonely individuals, "(a) made fewer partner references, (b) continued the topic discussed by the partner less, (c) asked fewer questions of the partner, and d) emitted fewer partner attention statements."

While the authors were unable to discern whether a causal relationship between social skills and levels of loneliness existed, their subsequent speculations bear some relation to issues of bereavement and social isolation. For instance, the author's speculate that through the individual's assumption of deficits in his/her social skills, he /she develops an expectation of social rejection, regardless of whether rejection has actually occurred. The bereaved individual could perceive the consuming nature of his or her grief – emotionally, intellectually and physically – (Osterweis, Soloman & Green, 1984) to constitute a social

deficit in itself, and consequently predict or perceive social difficulties associated with his or her status of 'bereaved person'. Also, in relation to bereavement, the concept of 'partner attention' is an intriguing one; could the effect of bereavement on the individual reduce his or her capacity to attend to the necessities inherent in everyday verbal interactions with other people? If so, would this predicament lead to an experience of social isolation veering towards the loneliness end of the 'social isolation' continuum?

The issue of 'choice' in the individual's experience of social isolation has been examined through utilisation of a self-report scale developed by Burger (1995). Entitled 'The Preference for Solitude Scale', the scale "assesses the extent to which people choose to be alone" (Waskowic & Cramer 1999: 1045). Burger hypothesised that a relationship between positive self-esteem and a high preference for solitude exists for most people. However, results have been mixed in studies evaluating this relationship (Waskowic et al. 1999: 1045). For instance, Cramer and Lake (1998), found no significant correlation between solitude *and* self-esteem, self-concealment, and social anxiety. On the other hand, a significant correlation with loneliness was noted (cited in Waskowic et al.1999: 1045). Burger's hypothesis was challenged in his own research, finding in one study a positive correlation between solitude and loneliness, introversion and social anxiety. In another study, the possibility of neuroses was more likely for people who stated a preference for solitude. At the same time, the probability emerged that these people were just as conscientious, agreeable and open to new experiences as those who did not state a preference for solitude (cited in Waskowic et al. 1999: 1045).

Gender similarities and differences were considered in Waskowic et al.'s (1999) own study of individual preference for solitude. The results of the authors' study were also inconsistent with Burger's (1995) hypothesis of the interrelationship between solitude and positive self-esteem. Participating in the study were 411 undergraduate students from a Canadian university, most of whom were young adults – 257 women, 133 men, 21 unspecified; mean age 20.5 years. 'The Preference for Solitude Scale' was utilised, as were a series of

scale measures of social adjustment and social maladjustment. The authors found that higher scores on the 'Preference' scale were "correlated with rated feelings of social anxiety (fear of social interactions), social loneliness (an undesired absence of social interactions), and alienation (rejection from social interactions)" (Waskowic et al. 1990: 1047).

These correlations were found for both men and women, although women who stated a preference for solitude were also more likely to avoid social interactions and/or feel apart from others when they did participate in social interactions. With these details in mind, the authors suggested further investigation of whether a preference for solitude is more socially detrimental for women than for men (Waskowic et al. 1990: 1047). In any case, the results of these studies cast doubt over the validity of Burger's hypothesis. Even social isolation 'with choice' can produce outcomes that one might reasonably assume were socially and personally deleterious for the individual. The bereaved individual may desire a certain level of solitude, but on a social-interpersonal and personal level, there would appear to be an element of risk in spending significant amounts of time alone.

2.2 Young adults and social isolation

In researching the effect of death-related bereavement on American undergraduate students, Balk (2001: 69) noted the developmental transitions these individuals face –the majority of whom fit the age criteria for young adults.   These transitions include "forming autonomous lives, developing a clear sense of direction, and entering into lasting, intimate relationships" (Balk 1995; Fowler 1991; Josselson 1987; Marcia 1980; Perry 1970; Selmon 1980, cited in Balk 2001: 69). Balk observes that the challenge for undergraduates is related to the development of self-identity; regardless of whatever situations he or she may be presented with, the young adult needs to develop a stable and focused identity (Balk 2001: 69).

The 'aloneness' component of social isolation and the development of self-identity are both alluded to in Larson's (1990) examination of research covering

solitude and psychological well-being. Principally, Larson outlines the importance of the experience of solitude in childhood, adolescence, adulthood and old age. The issues he classifies as pertinent in adolescents' (12-18yrs) experience of solitude reflect, to a considerable degree, the issues surrounding the optimal development of self-identity in young adults. Time spent alone is viewed as important in terms of assisting with identity formation and experimenting with the autonomous self. Furthermore, time spent alone frees the adolescent from the influence of other people, providing some relief from his or her public persona and time for reflection away from the intensity of peer group demands and family responsibilities. Finally, solitude allows the opportunity for the exploration and reevaluation of personal values and standards, and as such, creates a buffer towards one's values being solely determined by external values, such as peer pressure and values found in media presentations (Larson 1990: 170-172).

Of course, it would not be unreasonable to suggest that this particular experience of solitude, as a release from the demands of one's public persona, is one that would continue well into adulthood. However, as Kegan (1982, cited in Larson 1990: 172) points out "the process of psychological development from adolescence into adulthood is often characterised as a gradual reconciliation between a spontaneous internal self and the complexities and contradictions of external, social reality." Whether intentional or not, this statement suggests how crucial a task developing a stable self-identity is, in terms of providing an optimal transition from adolescent to adult.

Furthermore, Larson's (1990: 170) review of solitude research suggests that the experience of solitude is more meaningful and *more lonely* during adolescence than at any other stage in the lifespan, as adolescence brings with it new and heightened levels of social and personal awareness. Larson (1990: 173) notes that with the conciliation of different selves, adults generally feel less lonely and less different to other people than do adolescents. The implications that emerge from this research suggest that the experience of loneliness in solitude will continue into young adulthood, but will abate in intensity during this time.

However, while solitude can free one's attention from social participation and the self-monitoring that accompanies it, 'too much' solitude appears related to maladjustment in childhood, adolescence and consequently, adulthood (Larson 1990: 172). Parker and Asher (1987, cited in Larson 1990: 172) state that with adolescents "large amounts of social isolation may reflect a schizoid personality and poor peer relations" and increase the likelihood of poor mental health in adult years. Hansell, Mechanic and Brondolo (1986, cited in Larson 1990: 172) also found that experiences of anxiety and depression were greater for adolescents who were solitary.

Empirical research conducted by Larson, Csikszentmihalyi and Graef (1982) found a correlation exists between an adult's social roles and the quantity of time he or she spends alone. Individuals who reported less time alone were those who were married, had children, and had skilled – rather than semi-skilled – jobs. Their jobs were also of a high status. In the case of adolescents, the research found that social roles and life-situational factors, such as family size and number of friends, were unrelated to the amount of time adolescents spend alone (Larson et al. 1982: 45). Of course in terms of social roles, the majority of adolescents, and indeed young adults, do not carry the level of responsibility in their lives one would associate with marriage, having children or the demands of a high-status occupation. Responsibility is concentrated more towards the development of a stable and focused self-identity (Balk 2001: 69).

The finding that life-situational factors (ie. number of friends) were unrelated to the amount of time adolescents spend alone is reflective of a common finding associated with social isolation, a finding that was outlined above and is consistent across age groups – in short, that the opportunities for intimacy and emotional disclosure ward off feelings of loneliness more effectively than having a large number of social contacts (Vandervoort 2000: 230). Spending time alone does not necessarily signify loneliness and a lack of close relationships. Alternately, a large number of social contacts can disguise a lonely individual. Of course, one could reason that *access* to a large number of

social contacts could be significant in opening up further possibilities and opportunities for close relationships. More specifically, and to illustrate with an example, the bereaved young adult who has access to a large number of social contacts can effectively 'pick and choose', from a wide scope, individuals who are perceived to be particularly sympathetic or sensitive towards the young adult's bereavement status (McNess 2002: 45).

The capacity to 'pick and choose' is reduced for the individual with fewer social contacts; presumably the possibilities of locating like-minded people or people with similar goals are fewer. In considering the apparent value of relationship 'meaningfulness', it would appear that the individual's interpersonal needs could be satisfied by a small, select group of friends and family. However, from the outset, the individual requires a broad range of social contacts for a selection of adequate and desired 'confidants' to occur. While such an approach to relationships may seem, at first sight, coolly business-like in nature, the approach does carry important implications for the bereaved young adult in terms of procuring adequate social support (McNess 2002).

Interestingly, social support research conducted by Heller and Lakey (1985) suggested that the positive effects of social support are not to be found so much in the specific behaviours that occur in, say, an intimate dyadic relationship, but rather in how each individual in the dyad perceives and interprets the behaviour of the other person. Having used college students as participants, the authors speculated that the *belief* one has friends who can help you in times of crisis "may be more important than the help they actually provide" (Heller et al. 1985: 297). These comments reflect observations made in Osterweis, Soloman and Green's (1984) review of previous bereavement literature. Here, the authors noted one of the most commonly cited risk factors that stall recovery from bereavement is the individual's perceived lack of social support. Accompanying this perception is the detrimental effects on mental and physical health (Osterweis et al. 1984: 39). There is therefore some suggestion that the perception of social support is as important for the bereaved individual – perhaps even more so – than the reality of available social support.

2.3 Social isolation and gender

In a number of social psychology studies, characteristics of social isolation –
aloneness and loneliness – are explored in relation to experiences of gender.
The majority of the studies have utilised self-report scales, such as the UCLA
Loneliness Scale and the Social Network list. In Wheeler, Reis and Nezlek's
(1983) American study of sex roles and loneliness, the concept of 'femininity'
and its related social behaviours, are recognised for the significant role they play
in alleviating or protecting against experiences of loneliness. 'Femininity'
stands for expressive-affiliative traits such as empathy and nurturance
(Constantinople 1973, cited in Wheeler et al. 1983: 944).

Participants in Wheeler et al.'s (1983) study consisted of 96 college seniors (53
women, 43 men) who were required to keep a record of any daily interactions
that lasted ten minutes or longer in a period of time ranging from 7 to 18 days.
Qualities of the interaction – level of intimacy, level of disclosure from
participant or person with whom he or she is interacting, which person initiated
conversation, which person was more influential - were to be rated on a Likert
scale (ie. Intimacy scale - 1 for 'superficial', 7 for 'meaningful'). The sex of the
person he or she was interacting with was also to be recorded. Finally,
participants were required to complete a series of personality scales.

The most significant finding of this study related to the meaningfulness of social
interactions. With both male and female participants, the lonelier one was, the
less meaningful his or her interactions had been. 'Meaningfulness'
encapsulated greater intimacy, self-disclosure, other-disclosure, pleasantness
and satisfaction (Wheeler et al. 1983: 947). In terms of participants'
interactions with men and women, the more an individual of either sex
interacted with women, the less lonely he or she reported being. Wheeler et al.
(1983: 948) also observed that more 'feminine' people of either sex reported
feeling less lonely. This supported the authors' hypothesis that the
'expressiveness' of 'feminine' traits facilitates positive and effective social
interaction. While the authors do note that previous loneliness studies have

found greater well-being more closely related to 'masculine' traits (ie. independence, autonomy, self-sufficiency), they point out that most of these studies have measured "essentially masculine aspects of well-being." (Wheeler et al. 1983: 952)

However, while 'meaningfulness' in social interactions was found to be salient in measures of well-being for both sexes, a study conducted by Stokes and Levin (1986: 1073) suggests that men and women use different criteria in evaluating whether they are lonely. The study, concentrating on self-perceptions of loneliness, involved the participation of undergraduate students and, in the hope of providing a greater representation of the general population, the participation of 'over-25's' from evening classes at community colleges in Chicago (Stokes & Levin 1986: 1070). The results of Stokes et al.'s (1986) study supported the findings of the previous loneliness studies they reviewed, in that women were found to base their evaluations of loneliness on the quality of their intimate, dyadic relationships. Men, on the other hand, would assess their level of loneliness on the basis of the density (or interconnectedness) of their social networks (Stokes et al. 1986: 1073).

So, gender differences in the nature and quality of relationships are highlighted by a group orientation in men that involves the sharing of interests and social activities, and an intimate dyadic orientation in women that facilitates self-disclosure and trust. These observations are reflected in results from Fox, Gibbs and Auerbach's (1985) in-depth interview study of friendship attitudes among young, middle-aged and older adults. Most significant to this study were the attitudes of young adults. For instance, young men "appeared to be less aware than young women of the emotional needs that friendship could fill" (Fox et al. 1985, cited in Lips 1988: 248). In contrast, young women emphasised the importance of self-disclosure and accepting the innermost feelings of their friends. The women also spoke far more than the men did about the place of altruism and empathy in friendships (Lips 1988: 248).

Such general behavioural characteristics would appear to imply that in times of life crises, young men might find themselves more emotionally isolated on a social level than young women would. On the other hand, does the young male not recognise the 'meaningful' value of friendship (for example, self- and other-disclosure) because he does not feel the need for this type of friendship? There does at the very least appear to be value in this type of relationship; returning to Wheeler et al.'s (1983) study of sex roles and loneliness, the suggestion emerged that regardless of whether one's personality veers more towards the masculine or the feminine, 'meaningfulness' in social interactions is the most effective buffer against loneliness.

The results of Vandervoort's (2000) study of gender and social isolation suggest that men are more socially isolated than women, and this result supported previous social support research reviewed by the author. Vandervoort (2000) opined that one of the reasons for this result would be due to the fact that the majority (76.7%) of the sample (mean age = 26.6) was single. In light of previous studies suggesting married men are more likely than married women to "cite their spouse as their only confidant" (Powers & Bultena 1976, cited in Vandervoort 2000: 4) and that men and women both tend to view women as their primary providers of emotional support (Antonucci & Akiyama 1987; Belle 1987; Kessler, McLeod & Wethington 1985, cited in Vandervoort 2000: 4) it appears more likely that single men would remain more emotionally isolated on a social level than single women.

Furthermore, there is some indication that men may find themselves socially isolated – in terms of experiencing loneliness – in regards to social-interpersonal expectations relating to gender. Barbee, Gulley and Cunningham (1990, cited in Vandervoort 2000: 2) found that women expect their male friends to use more escapist and 'dismissal' forms of coping in response to discussion of relationship issues, while men also expect this response from their male friends. Women expect more support and problem solving oriented behaviours to be utilised by their female friends (Barbee et al. 1990, cited in Vandervoort 2000: 2). These gender expectations presumably would minimise the number of

opportunities for the young man to engage in 'meaningful' interactions, particularly if he felt the need – or had some sense of social obligation – to uphold a socially common and prescribed 'masculine' identity.

In relation to life crises, particularly bereavement, the question emerges as to whether dismissal and escapist forms of coping are an effective form of coping with grief. At the very least, they do appear to allow the young man to 'conform' with general social expectations relating to gender. Or do these responses require, in order for one to be a socially acceptable and desirable young man, an undesirable level of suppression of grief-related thoughts and feelings? Do these forms of coping produce feelings of social isolation, particularly feelings relating to loneliness? Or do they, through the experience of shared activities, produce for the bereaved man a more acute sense of connection with his community?

In any case, Vandervoort (2000) cautions against taking men's self-evaluations of loneliness at face value. Stokes and Levin (1986) may have found a relationship between a high density of social networks and male perceptions of being less lonely, but Vandervoort (2000) suggests the issue of 'socially desirable responding' is pertinent here. Concentrating on the density of social networks effectively overlooks the value of emotionally intimate relationships for both sexes, and it overlooks the tendency of men "to rely on the female member(s) in their social network for emotional support" (Vandervoort 2000: 2). Evaluating loneliness on the level of interconnections between friends rather than on the emotional intimacy between close friends would appear to facilitate a more 'masculine' self-image, for example confidence and leadership capabilities. A strong, interconnected social network complements the influence of the individual's masculine qualities. In contrast, intimacy can be seen as complementing feminine traits of nurturance and empathy.

Placing the issue of maintaining an 'appropriate' self-image to one side, Vandervoort's (2000) review of previous social support studies is supportive of claims that emotional intimacy is beneficial for men (as well as women) and

that men generally rely on women for emotional support. For instance, singlehood and widowhood for men is related to an increased risk of physical and mental health problems. A more significant predictor of mental and physical health problems for women is the lack of a female friend (Berkman 1985; Berkman & Syme 1979; Berkman, Vaccarrino & Seeman 1993; Helsing & Szklo 1981; Wingard, Suarez & Barrett-Connor 1983, cited in Vandervoort 2000: 1). Also, single men have been found to be lonelier, less psychologically balanced and less happy than single women (Glenn 1975; Newman 1986; Pearlin & Johnson 1977; Somers 1981, cited in Vandervoort 2000: 1).

Studies of gender differences in bereavement reflect these findings of Vandervoort (2000), even though these studies have concentrated on the experiences of "widowed men and women of the Caucasian ethnic group" (Stroebe 1998: 6). For instance, there is the tendency for the wife to be the husband's only confidant, whereas the wife also has other women with whom she can confide (Umberson, Wotman & Kesler 1992; Belle 1987; Ferraro, Mutran & Barresi 1984, cited in Stroebe 1998: 9). Also, Stroebe points out that a series of studies have shown that widowers are more socially and emotionally isolated than widows, and that this may have dire consequences for their health (Ferraro, Mutran & Barresi 1984; Lazarus & Folkman 1984, cited in Stroebe 1998: 9). Based on these findings, Vandervoort's (2000) wariness of male self-evaluations of loneliness is not surprising.

Interestingly, while Wheeler et al. (1983: 951) have noted that men are less adept in providing "loneliness-reducing meaningfulness" than women are, the authors also suggest that "the relative absence of intimacy contributions by men makes it all the more valuable" when intimacy contributions do occur. This suggestion places a question mark over the influence of social-interpersonal expectations relating to gender. The expectation that men should provide escapist and 'dismissal' forms of coping with relationship issues (Vandervoort 2000) may be more related to social expectations of male/masculine behaviour, than to individual preferences for a particular type of coping behaviour. That is, individuals of both sexes may be more receptive to emotionally intimate

interactions with male friends and colleagues than some literature suggests, although they may be more familiar and comfortable with 'escapism' and 'dismissal' as their principle mode of interaction with men.

Wheeler et al. (1983) also opined that the amount of time an individual spends with women operates as an effective measure of predicting loneliness. This is because relationship 'meaningfulness' is more likely to occur in any given interaction with a woman than it would with a man. However, while expressive, emotion-centred interaction would appear an effective buffer against negative experiences of social isolation – more effective than the instrumental, goal-centred interactions that commonly define male friendships – there is some indication that emotional disclosure carries its own risks to interpersonal relationships. Returning to Fox, Gibbs and Auerbach's (1985) interview study of friendship attitudes, the authors found the focus on 'shared activities' in male friendships and on 'shared talk' in female friendships was particularly pronounced in young adults (classified as ages 18-22 years).

The shared activities focus in male friendships was consistently found to promote *durability* in friendships. Friendships could stand the test of time in the sense that a focus on activities was effective in enabling individuals to overlook behavioural and/or attitudinal differences between themselves. However, the emotional sharing that commonly defined female friendships made women more sensitive to these differences and disagreements in their friendships; there were fewer 'distractions' from these differences. Therefore, a number of instances where individuals' beliefs and values were found to differ too substantially from each other would soon render the friendship as untenable (Fox, Gibbs & Auerbach 1985, cited in Lips 1988: 248).

Given that the experience of bereavement can have a marked effect on the individual's goals, beliefs and values (Zagdanski 1990), there would appear to be some likelihood of bereaved young women experiencing a negative form of social isolation. That is, a friendship between women or, in gender-neutral terms, a relationship predicated on emotional sharing, is sometimes fraught with

the possibility for the individual of loss of social support. A dramatic, or even gradual, change in beliefs and values of the bereaved young adult may jeopardise the level of social support hitherto available.   Still, the capacity for relationships that are mutually emotionally disclosing would appear to enable greater possibility of relationship 'meaningfulness' occurring, which has the carry-on effect of reducing the level of the individual's experience of loneliness.

Traditional social prescriptions of appropriately 'feminine' behaviour would appear to function positively for women in terms of helping procure satisfactory levels of social support, even if differences in beliefs and values may undermine the strength of these bonds. On the other hand, social prescriptions of 'masculine' behaviour (ie. independence, autonomy, competitive spirit) may obscure for the man even simple recognition of the value of relationship 'meaningfulness' or inhibit the pursuit of these types of relationships for fear of social disapproval. In this respect, for the bereaved young man a fear of social disapproval produces an experience of social isolation that is related to the sense of not belonging.

Of relevance to a consideration of the social influence of gender roles and gender-related expectations is research that was undertaken by Schut, Stroebe and van den Bout (1997) into the coping styles of widows and widowers. The results of an intervention assessment suggested that 'teaching' widowers to focus more on their emotions and widows to focus more on their everyday problems – that is, asking the men and women to adopt coping styles usually adopted by the opposite gender – was associated with a general lowering of distress. As grieving widowers tend to focus on problem solving and grieving widows focus more on emotions, this intervention is designed to redress the issue of widows and widowers neglecting to deal with certain aspects of the bereavement experience (Schut, Stroebe & van den Bout 1997, cited in Stroebe 1998: 9-10). Essentially, the men and women would now have a 'balance' in their coping styles – dealing with emotions *and* everyday problems, and vice versa – and this should reduce the intensity of the bereavement experience and

promote 'recovery'. That is, greater ease in interpersonal relationships, and dealing with work- and home-related demands.

While the bereaved individuals who participated in the research do not fit the category of 'young adults', the research is useful in terms of considering the influence and limitations of 'gender'. Also, as a model for coping and dealing with grief, this approach – commonly referred to as 'the dual process model of coping with bereavement' (Stroebe 1998: 10) – provides a thoughtful platform on which to begin devising strategies for tempering the effects of grief.

In Lindstrom's (1999) review of previous bereavement studies, the influence of feminine gender roles on the coping styles of bereaved women highlights the limitations and strengths of prescriptions of appropriate gendered behaviour. When intra-sex variation has been taken into account in gender-related studies of bereavement, poorer coping in bereaved women has been related to a strong adherence to the traditional 'feminine' gender role. By contrast, adherence to a more modern 'feminine', androgynous, 'masculine' or flexible gender role produces more positive outcomes in dealing with grief (Long 1989; McCall & Struthers 1994; McDougall 1993; Sorell, Silvia & Busch-Rossnagel 1993, cited in Lindstrom 1999: 33). Lindstrom (1999) provides a description and comparison of "traditional" and "modern" feminine gender roles; the traditional role relates to the individual who is economically dependent on her husband, whose career is that of housewife and whose interests are centred on home, family, children and cooking. The modern role refers to the economically independent woman who possesses greater options in terms of career and personal interests.

Again, this is a study that does not concentrate principally – if at all – on the experiences of bereaved young adults, but it does pertain to the influence of gender roles, and considers the contemporary forms, variations, and developments within female gender roles. Lindstrom (1999) stresses that gender roles are not fixed, and that subcultural differences do exist in terms of what constitutes 'traditional' women (TW) or 'modern' women (MW). She

also notes that this study touches on a continuing social and political debate – whether home or work (or a combination of both) is the better option for women.   In any case, the results of Lindstrom's own research – participants were widows, mean age = 62.5 years – supported previous literature in that MW generally coped better with conjugal bereavement than TW. Her findings supported proposals that bereaved TW have an extra risk of developing a sense of personal helplessness (McKean 1994, cited in Lindstrom 1999: 38).

Whereas it is important for MW to develop and maintain a sense of personal control, TW were more willing or likely to allow other people to exert control within their daily lives. According to Seligman (1975), the opposite of experiencing control is experiencing helplessness (cited in Lindstrom 1999: 38). Furthermore, according to Olff, Brosschot and Godaert (1993), a belief in personal control is related to the use of more problem-focused coping strategies (cited in Lindstrom 1999: 38).

In *theory* then, the MW, whose approach to everyday living tends more toward the exercise of personal control rather than toward the experience of mutual interdependence, would have a greater range of personal resources to fall back on when bereavement occurs. In this light, Lindstrom's (1999) research is beneficial to the present study in that it touches on the issue of dependency and independence – in terms of coping with bereavement – from the perspective of gender. How applicable the experience of widows is to the experience of bereaved young women is questionable. For instance, the mutual interdependence of husband and wife in a 'traditional' relationship would not be a common experience of most young adults. On the other hand, young adults may be involved in intimate relationships and/or have a familial background that tends to reflect either 'traditional' or 'modern' modes of gender role identity. Would this gender role identification influence the nature of their grief, and by extension, have any bearing on the extent of the social isolation they experience? Is the TW socially isolated, on a more negative level, than the MW?

2.4 Bereavement and young adults

A comprehensive search of academic journals reveals that studies centering on the experiences of bereaved young adults are relatively scarce. This is a comparative statement; in the realm of death-related bereavement research, the grieving spouse, the grieving parent and the grieving (usually preteen) child are far more commonly the focus of attention. In bereavement studies of young adults, American college students have overwhelmingly been the focus of attention, and within these studies gender comparisons have rarely been undertaken.

Balk, Tyson-Rawson and Colletti-Wetzel (1993) and Janowiak, Mei-Tal and Drapkin (1995) have likened the college (or university) environment to the stereotypical life of the young adult. On the one hand, the environment promotes fun and exploration on a social and personal level. On the other hand, there is the pressure on the individual to keep assigned work up-to-date and to contemplate career directions. Therefore, the college environment is geared primarily towards social and academic activities. According to Janowiak et al. (1995) such an emphasis is counterproductive in supporting the grieving student. The importance of social support and interpersonal understanding in helping the student make it through the grieving process is generally undervalued in the face of the social and academic preoccupations of college life (Janowiak et al. 1995).

A series of studies exemplify the difficulties encountered by bereaved young adults within the social contexts of university life. Balk (2001) observes that bereaved students quickly learn that the majority of people they observe or interact with are afraid to be around them. Complicating this situation is the tendency of 'unaffected outsiders' to underestimate the intensity and duration of the bereaved student's grief reactions (Balk 1997; Balk & Vesta 1998; Silver & Wortman 1980, cited in Balk 2001: 68). What then, in relation to these social-interpersonal problems, might emerge as the lesser of two 'evils' for bereaved students; being avoided by a peer or peers, or being recognized by peers, but then perceiving that their preparedness towards, and comfort in, interacting with

you derives from their having underestimated the extent of your grief experiences?

Research conducted by Vickio, Cavanaugh and Attig (1990) concentrating on undergraduates' perceptions of grieving peers further highlight these difficulties. However, the authors noted the sensitivity of nonbereaved students, at least in terms of what the students expressed in questionnaires, towards the needs of grieving peers. The nonbereaved students also displayed a general understanding of death-related grief issues. What is crucial here is the apparent gulf between nonbereaved students' understandings of grief and the bereaved students' perception of their supportive behaviours. In spite of the seeming sensitivity and understanding on hand, bereaved students reported a general unwillingness of peers to engage in grief-related conversations.

Balk's (2001) overview of research conducted into adolescents' empathic responses to a number of crisis situations revealed three main reasons for adolescents not offering to help others in distress; "some feel overwhelmed with the distress they recognise, some do not know the appropriate thing to say or do, and some conclude they have no obligations in the matter" (Balk 2001: 68). These three reasons are suggestive of Western social-cultural influences relating to bereavement and interpersonal responsibility (for example, 'death denial' and the associated lack of 'social scripts' for dealing with the bereaved).

Wortman and Lehman's (1985) overview of research conducted on social support for victims of life crises, further illuminates the tendency for supportive individuals to experience discomfort in dealing with a bereaved individual, although the authors are not focusing exclusively on young adult behaviour and reactions. They note the powerful emotions that can be felt by individuals who interact with a person (or people) who have suffered a life crisis. The emotions are largely negative in nature, as the crisis "force(s) us to think about things we would rather not contemplate, and confront(s) us with problems that we are unable to solve" (Wortman et al. 1985: 466). Supporting individuals can feel that their assumptions about the world are threatened, particularly in relation to

exercising a significant level of control over the future outcomes of their lives (Wortman et al. 1985: 465). Taking these feelings into account, it is conceivable then that for young adults – who are in the position of establishing themselves interpersonally, financially, emotionally and spiritually – the experience of supporting a bereaved individual might emerge as an unsettling and disturbing experience.

Wortman et al. (1985: 466) speculate that an intense anxiety co-exists with the negative feelings experienced through interaction with a bereaved individual. Potential supporters may approach the individual with a degree of uncertainty in regards to what they should say or how they should behave as they "may have little past experience to serve as a guide to them in this difficult situation" (Wortman et al. 1985: 466). Their awareness of the bereaved individual's present vulnerability may further intensify levels of anxiety; the fear that their supporting behaviour may unintentionally heighten the bereaved individual's distress effectively dilutes whatever positive impact their actions may have had. The fear to distress may actually increase the probability of supporting individuals utilising 'ritualised' support attempts (ie. offering platitudes such as 'Time will heal' or 'I know how you feel') rather than developing a support approach more likely to suit the bereaved individual's needs (Wortman et al. 1985: 467).

For the bereaved student, the disappointment and distress related to a perceived lack of peer support can be compounded by feelings of isolation as he or she observes nonbereaved peers 'getting on with it'. In Balk, Tyson-Rawson and Colletti-Wetzel's (1993) review of a university bereavement support group, the participating students expressed this type of sentiment. Observing their peers progression in studies and social activities provided an unflattering mirror to their own lives, in which bereavement was having a significant impact and influence. Balk et al. (1993) observed that, as a result of these feelings and perceptions, bereaved students would feel compelled to pursue one of two seemingly undesirable courses of action – a) to withdraw from peers, or b) pretend 'normalcy' in order to be accepted. As a series of studies illustrate,

young adults – bereaved or nonbereaved – do attach great importance to sustaining positive interpersonal relationships (Ringler & Hayden 2000; Balk & Lampe 1998; Balk, Tyson-Rawson & Colletti-Wetzel 1993, cited in McNess 2002: 8).

Therefore, the quality of interpersonal relationships plays a significant role in terms of facilitating the young adult's successful establishment of a stable and focused self-identity (Balk 2001: 69). A quandary emerges for the bereaved young adult; it would appear that the individual is faced with a number of difficult choices and undesirable courses of action in order to attain and sustain positive interpersonal relationships with nonbereaved peers. However, the emotional repression these courses of action potentially involve (that is, pretending 'normalcy', in spite of the grief that is being experienced) may itself threaten the development of a stable self-identity.

The principal concern of Balk (2001) is that bereavement obstructs the young adult's developmental transitions. For instance, the difficulties involved in recovering from grief may "endanger the prospects of gaining the maturity needed to lead lives filled with a sense of autonomy, direction and intimacy" (Balk 2001: 69). To illustrate his concerns, Balk makes reference to a series of life crises studies, all of which emphasise the importance of bereaved individuals maintaining a sense of self-efficacy when dealing with difficult life events as well as preserving a satisfactory self-image (Balk 1990; Braumers & Tomic 2000; Greenfield, Hufford, Vagge, Muenz, Costello & Weiss 2000; Hoff 1989; Hogan & Greenfield 1991; Moos 1986, cited in Balk 2001: 69).

Bereavement tends to imbue doubt in individuals in regards to their social (as well as personal) functioning; with a sense of personal control significantly jeopardised, the outcomes bereaved individuals desire on a short- or long-term basis may seem to be unattainable. So, while the bereaved young adults' social functioning appears dependent on gaining – or regaining – a sense of personal control, the duration and intensity of grief challenges their sense of control and along with it, a sense of effective social functioning (Balk 2001: 69).

The maintenance of self-image is addressed in Balk and Lampe's (1998) longitudinal study of bereaved and non-bereaved university students. Data for the study were collected in the following fashion: on three separate occasions, spanning a time period of about 3 months, 141 students wrote story responses to selected cards from the Thematic Apperception test (TAT). Coders then scanned for themes of death, grief, coping and affiliation in the students' story responses (Balk & Lampe 1998: 3). Themes and imagery of friendship and affiliation were prominent in the story responses of both bereaved and nonbereaved individuals, suggesting that the establishment, maintenance and restoration of friendships was of significant concern to the majority of university students, regardless of their background or personal situation.

What differentiated bereaved and nonbereaved students was a pattern that emerged over the time period of the three story responses. In the stories by bereaved students, the theme of maintenance of self-image emerged less frequently and consistently than it did in the stories by nonbereaved students. Balk and Lampe (1998), reflecting Balk's (2001) more recent musings on self-image and personal control, suggested that the duration and distress of grief challenges bereaved students' feelings of self-confidence and control. Would these feelings impact upon the bereaved young adults' abilities to effectively procure support from a wide-range of support networks and/or from within a large network, such as a peer group?

Of course a large support group or a wide range of social supports may not be desired by the young adult. After all, the aforementioned studies of gender suggest that relationship 'meaningfulness' is of greater importance to men and women than number of supports, although men are more likely to evaluate their level of loneliness on the basis of the density of their social networks. However, even with this in mind, a reduced number of potential social supports would reduce the capacity of bereaved young adults to 'pick and choose' appropriate and satisfactory social supports.

There certainly were indications that support systems, consisting of bereaved college students who support each other, were of value for bereaved individuals (Balk, Tyson-Rawson & Colletti-Wetzel 1993; Janowiak, Mei-Tal & Drapkin 1995). In these studies of campus-based bereavement support groups, the evaluations made by group members indicated the most rewarding aspect of the group was to have had the chance to spend time with others who were grieving. Emphasised within this overall evaluation was the value of having one's perspectives and reactions validated by group members and course facilitators, as well as the opportunity to support other group members and share personal information. Janowiak et al. (1995) observed that the impact of the students' losses on their relationships – with both bereaved and nonbereaved individuals – was the most salient concern of the bereaved students.

The authors also observed that during interviews for their study's support group, students expressed trepidation towards participating in the group experience. They stated a preference for listening to other members' talk of bereavement experiences, rather than having to contribute their own. While the rewards of the group experience soon allayed any reservations, the authors wondered whether such reservations might have deterred other bereaved students from participating in the support group. Student reservations were also referred to in Balk's (2001) account of Colorado State University's (CSU) response to the needs of bereaved individuals on campus. Even though a seminar on manifestations of normal grief and fundamental coping and support strategies was widely advertised, not a single student attended the seminar. Faculty and staff from all sectors of the university did attend, some of whom were "actively grieving individuals" (Balk 2001: 80).

The planners at CSU opined that it would be extremely difficult for bereaved students to admit on any level that they needed post-bereavement support. Balk (2001) felt this perspective made sense, noting the developmental stage of the young adult (that is, the need to develop a positive self-identity) and referring to the psychological concept of 'the imaginary audience'; students could fear that seeking campus-based support would indicate to other individuals weakness or

inadequacy. It would also seem possible that within a social climate of fun and exploration, the need for campus-based support may seem inappropriate in comparison with the more general activities of peers. Still, in light of the reported value of bereavement support groups, it would appear that bereaved individuals' avoidance of campus-based support could stifle their opportunities to successfully overcome difficult developmental transitions, even though on a superficial level, one's avoidance of campus-based support may suggest to others a stability and strength of character.

2.5 Australian youth 'today'

Richard Eckersley's (1995; 2001) research into the relationship of Australian youth with the (often rapidly) evolving character of contemporary Western culture is of value to this present study in terms of elucidating current contradictions, stresses and strengths in cultural values and social structures. From this, consideration can be given to how social attitudes can *potentially* isolate the bereaved individual and leave people – bereaved or non-bereaved – ill-equipped to support bereaved others and/or themselves. Principally, it is what Eckersley (1995; 2001) observes as being a social preoccupation with 'diversions' and 'self'-meaning that can produce obstacles in procuring social support and/or obscure the necessity of social support and relationship 'meaningfulness'. Before outlining these preoccupations, a summary of Eckersley's (1995; 2001) conclusions on the nature of contemporary social life for young adults will be provided, for the purposes of establishing the context within which these preoccupations exist.

In his reference to sociological literature concentrating on the psychosocial health of young people, Eckersley (2001) notes that individualistic values – values that tend to predominate over collective or communal values – coupled with the uncertain social transitions associated with life in 'high modernity' (Giddens 1991) have significant implications for the health of young people. The stresses of 'high modernity' include "the ongoing sense of doubt, the heightened sense of insecurity, the increased feelings of risk and uncertainty, and the lack of clear frames of reference that mark young people's world today"

(Eckersley 2001: para. 23). Examples of these stresses include job insecurity, relationship insecurity, moral relativism and the associated contradictory social values.

Eckersley (1995: para. 37) does note that positive change has occurred in recent decades; the evidence of which is found in a society that is more tolerant, pluralist and culturally diverse, and less conformist, parochial and sexist. However, in referring to McKay (1993), Eckersley (1995: para. 38-40) observes that these changes have come together at such an unprecedented rate that individuals are more anxious about, and uncertain of, the nature of their society than they are appreciative of the benefits of these social transformations.

Eckersley (2001) also expresses concern towards the influence of individualistic values on the cohesion of Western societies and the health of its members. This concern principally relates to the promotion of a "cultural norm of autonomy that is unrealistic, unattainable or otherwise inappropriate" (Eckersley 2001: para. 28). With the growing emphasis on self-fulfillment and self-actualisation, the expectations of individuals increase, expectations that are not necessarily conducive with social reality and human needs.[4] Individual choice, opportunity and freedom are promoted as being closely related to the social and personal achievement of happiness (Eckersley 2001). Furthermore, Eckersley (2001: para. 24) suggests that while traditional forms of inequality (gender, ethnic, and socioeconomic) remain, the atmosphere of risk and uncertainty, along with the cultural preoccupation with individualism, can produce in the young person a tendency to identify personal or social problems as a consequence of personal deficiencies. This is to overlook the influence structural and/or collective

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[4] Interestingly, in Janssen, Dechesne & van Knippenberg's (1999: 165) research on the psychological importance of youth culture, the authors speculate that "the prospect of death is particularly salient for the youth…" Not only does the quest for a secure sense of self motivate this thinking in young people, but also the social obligation to contemplate their futures whilst having few certainties regarding the possibility of achieving their wishes (Farnsworth, 1973; Fasick, 1984; France, 1996, cited in Janssen et al. 1999: 165). Within a society that "increasingly stresses the importance of getting a good career, yet decreasingly guarantees a valuable place in a secure worldview", Janssen et al. (1999: 165) predict that prospect of death will increase in saliency for young people.

tensions may have on the individual. This tendency emerges regardless of the level of the young person's social privilege.

In a Western culture of increasing risk and uncertainty, as well as moral contradictions and confusion, Eckersley (1995: para. 47) believes "most people continue to enjoy life" without "any sense of unease or emptiness (suppressed) by keeping themselves busy, amused, distracted", but herein, he feels, may lie the problem. On the basis of his own research into Australian youth, and the findings of other social researchers, Eckersley (1995 para. 47) suspects that a discrepancy between the private and the public individual is growing; the public individual is increasingly marked by pretense, and even self-delusion. In short, the continually positive and busy public persona masks a vulnerable and overwhelmed individual. In this sense, social skill and social effectiveness, is predicated on the individual's effective utilisation of the amusements and distractions offered within a high modern world, along with the ability to adapt to often-rapid change.

These observations and suggestions of Eckersley (1995) are intriguing in their relation to young adults' coping with bereavement on a social level. They paint a social arena that significantly promotes 'diversion' as an effective pacifier of social and personal uncertainties and anxieties. On the basis of these social values, the 'choices' for bereaved young adults, in terms of their promoting and acquiring positive social relationships, requires both a negation and control of feelings of grief. As was considered earlier in relation to 'male' ways of grieving (Vandervoort 2000), 'diversion' may free the individual from feelings of grief for a period of time. However, if diversion is the predominant social goal, in relation to social and/or personal crises, then the bereaved young adult may perceive that there are few social avenues for the expression of grief, should they desire it.

Eckersley (1995: para. 42) argues that "modern Western society is increasingly failing to meet the basic requirements of any culture, which are to provide people with a sense of meaning, belonging and purpose and so a sense of

personal identity, worth and security; a measure of confidence or certainty about what the future holds for them; and a framework of moral values to guide their conduct." With few ideals to believe in, there are no higher common goals to which young people feel convinced they should subordinate their personal interests. Lacking common cultural meanings in their lives, many people become preoccupied with locating meaning on more personal levels (Eckersley 1995). Eckersley (1995: para. 45) views this self-preoccupation – with looks, career, sex life, personal relationships, personal development, health and fitness, children (as an extension of the self), and so on – as "one of the hallmarks of the modern age." This reliance on 'self', Eckersley (1995: para. 45) believes carries much personal risk, in the sense that reliance on the self for meaning makes people "more vulnerable to a 'collapse of meaning' when things go wrong in our personal lives."

Preoccupation with the self, therefore, may appear conducive with building personal resilience, presumably through attaining a greater level of self-knowledge. However, the lack of cultural 'back-up' – especially shared norms and values – leaves the individual increasingly vulnerable to the stresses of personal crises. The lack of broader levels of meaning in people's lives further suggests how a predominantly individualistic society can socially isolate the bereaved young adult; the occurrence of bereavement would more than likely constitute a significant "collapse of meaning" that is situated within a predominantly self-focused world.

In such a self-focused social milieu, the bereaved person may have a lack of faith in successfully procuring adequate social support. Bessant and Hill (1997, cited in Burfoot 2003: 46) support this view, arguing that, in relation to expectations of citizenship, social values that favour individualism over cooperation constitute a major contributing factor in young people's experience of social isolation. Overall, Eckersley's (1995/2001) research and his review of previous research concerning Australian youth and Western culture is suggestive of the human stresses inherent in societies where – in the case of

individualistic and communal values – one set of values predominates over the other.

2.5.1 Spirituality

Interestingly, literature examining the spiritual life of Australian youth highlights how the young adult can incorporate and utilise individualistic values in such a way as to nurture a meaningful spiritual life. Webber's (2002) observations – as to how faith and/or religiosity may alleviate negative experiences of social isolation that occur within the context of a largely individualistic and 'life goes on'-centered social milieu – are applicable to the concerns of this present study. To begin with, Webber (2002) stresses that the increasing number of young people turning away from formal religion is not indicative of a general rejection of spirituality. Rather, it is indicative of a social philosophy of individual choice, of finding an avenue – or avenues – of spiritual expression that 'feel right' for the individual (Webber 2002: 41); finding subjective expression of one's religious experience holds greater appeal than the hierarchical structures and old-fashioned liturgies of formal religion (Webber 2002: 40). At the same time, most do believe in God and/or a supernatural force (Webber 2002: 40).

Webber (2002) attributes the young person's quest for meaning in part to the loss of community, and this observation is suggestive of a paradoxical relationship. That is, while the majority of young people may follow an individualistic philosophy, alongside the adherence to this philosophy is a desire for a feeling of belonging and the need to locate a sense of purpose in life. Increasingly popular avenues of spiritual expression include earthbound religions, paganism, witchcraft and forms of 'self-help'. Tacey (1999, cited in Webber 2002: 42) sees these developments in a mostly positive light, arguing "the new outbreak of spirituality is a desperate attempt by youth culture to counter the advances of an increasingly secular society, with its appalling materialism, disillusionment and absence of hope." The question emerges as to whether an 'individualistic spirituality' operates primarily to 'fill' a communal void or whether it actually does promote an atmosphere and practice of

communal care. The latter effect would seem most conducive to helping ensure adequate social support for the bereaved young adult, and providing him/her with the comfort and knowledge that accessible social support does exist.

In reviewing previous research on young people's spiritual practice, Webber (2002) observes a number of predominant themes and concerns that characterise the spiritual life of young people. These include the importance of being in touch with one's 'inner soul', and appreciating – and being in awe of – nature and the possibilities of the imagination (Webber 2002: 42). Also, there was a need to rejoice in "the simple things in life", and, possibly in response to the moral relativity considered characteristic of 'high modern' life (Eckersley 1995), a concern with living a "good and moral" life (Webber 2002: 43).

In relation to the present study, the comfort and/or meaning that spiritual expression can potentially provide the bereaved young adult is important in terms of the level of relief it may provide from feelings of grief. To restate an earlier point, the nature of young people's spirituality today indicates that young adults can engage with a social life-world of predominantly individualistic values (Eckersley 1995) in order to develop a strong sense of faith, and/or that of a spiritual life. This in turn can provide some level of protection against the isolating tendencies of their social life-world. What *level* of protection from social isolation it could provide for the bereaved young adult needs to be examined further and is beyond the scope of the current thesis.

2.6 Conclusion

In both the bereavement and social isolation studies, a number of themes and issues have emerged. Firstly, for the bereaved young adult, the perception of social support appears just as important as the actuality of available social support. Secondly, relationship 'meaningfulness' and positive interpersonal relationships are of significant concern and value in the lives of both young women and men, although the influence of gender may affect the level of importance that the bereaved individual places on relationships. It would

appear that for the bereaved young adult to sustain friendships with nonbereaved peers a 'playing down' of grief-related feelings is often necessary.

Thirdly, there is the concern over whether the young adult, bereaved or nonbereaved, can successfully overcome developmental hurdles, and attain a stable and focused self-identity. Bereavement, it would appear, is an undesirable and extremely difficult obstacle to overcome in the face of efforts to attain a positive self-identity, and the impact of this can be experienced as much on a social level as a personal one. Finally, 'too much' solitude can have a maladaptive effect on the individual – ie. reintegration into social arenas can become increasingly difficult – even solitude that comes as the result of personal choice.

In reviewing literature relating to bereavement and social isolation, the issue of social support emerges as a particularly important one. It would appear that a general cultural discomfort – especially a Western cultural discomfort – with bereavement and bereaved individuals could reduce, for bereaved young adults, the possibilities of receiving adequate social support. Furthermore, rapid social change, the contemporary focus on 'self' and the increased pace of living do not appear to be factors especially conducive to promoting supportive social environments. If the avenues of potential social support (including peers, work colleagues, and extended family) are closed off, or reduced, then presumably the bereaved young adult has fewer opportunities for locating satisfactory social support. A lack of satisfactory social support may also affect the level of their social functioning, in terms of social skills and a sense of social connectedness. Travelling down this path, the negative experience of social isolation would appear inevitable for the bereaved young adult. Spiritual beliefs, as mentioned, may provide a level of personal solace for the young adult, although the degree to which spiritual beliefs could placate negative experiences of social isolation is uncertain.

As was discussed in the introductory paragraphs of Chapter 2, the present study encompasses issues of bereavement, young adulthood, social isolation and

gender. Very few of the studies reviewed in the process have encompassed these four factors. As a result, there has been the need to consider the results of these previous studies as suggestive of what themes and issues may emerge in the present study. Or they suggest which issues relating to the study's principle concerns should be examined further.

For instance, in light of studies that have indicated female friendships are dependent on shared values, and are often jeopardised by alterations occurring in friends' values – and in light of evidence that asserts that bereavement can significantly alter personal values – one could reasonably assume that social isolation would emerge as a salient issue for bereaved young women. As another example, in studies of social isolation, results have indicated that satisfactory social support for men may be compromised by social expectations relating to the display of appropriately 'masculine' behaviour (such as the perception that it is socially undesirable to be seen seeking help from others).

Although the majority of studies of bereavement and young adulthood have not examined gender differences, a logical conclusion could be drawn that the issue of satisfactory social support for men would be as pertinent for the bereaved young man as the nonbereaved young man, perhaps even more so. However, are these logical conclusions? Does bereavement alter the nature of social isolation in a fashion that studies centering on social isolation alone could not be relied upon to predict? In any case, these suggestions, questions and 'logical conclusions', such as the issues considering the influence of gender summarised above, are relevant to the concerns of the present study, and therefore are worthy of examination.

CHAPTER 3

THEORY: SUBJECTIVITY AND SOCIAL INTERACTION

To examine the relationship between death-related bereavement and the experience of social isolation, as well as the influence gender exerts in the nature of bereavement experience for bereaved young adults, a number of theoretical perspectives will be outlined in order to demonstrate how they illuminate these relationships. Each perspective provides important vantage points on the study's subject matter. The majority of the theories are suggestive of a) notions of social tolerance towards the bereaved young adult's experiences of grief, and b) the bereaved young adult's perceptions of social tolerance and understanding towards expressions of grief. The study's principle theoretical perspective is 'phenomenology', given its concentration on the individual's subjective experience and subjective interpretations of his/her society. The study examines what social behaviour and values are perceived by the bereaved individual to be encouraged, tolerated and/or rewarded.

The focus on subjective experience of one's social life-world is expanded upon with a series of theoretical perspectives that examine the social/individual interrelationship. Principles of 'symbolic interactionism' and Freund's (1982/1990) theory of 'dramaturgical stress' indicate the difficulties inherent in social interaction when one feels emotionally, morally or spiritually out-of-touch with social norms. Anthony Giddens' (1991) notion of the 'reflexive self', on the other hand, alludes to the possibilities for the individual to adapt, in a positive sense, to the disruptions that occur within his/her social 'world'. 'Positive' adaptation to bereavement may reduce the young person's level of negative experiences of social isolation. The individual's personal responsibility towards sustaining a cohesive society is emphasised in Parsons' (1951) concept of the 'sick role' and Crawford's (1990) notion of 'healthism'.

Here, the question emerges as to whether these social responsibilities may smother and repress the emotional expression the bereaved individual feels is both a necessity and of potential benefit, on both personal and interpersonal levels. Or do social responsibilities provide a respite from these feelings of grief?

Chapter 4 will encapsulate theories of gender – most notably, Lupton's views on 'emotionality' and 'femininity' and Connell's examination of the persistence of the 'patriarchal dividend' – and societal influence, in theories of 'narcissism', 'autonomy' and 'social capital'. The theories presented in Chapter 3 and Chapter 4 enable and inform a multilevel analysis – individual, social, and societal – of young adult bereavement, social isolation and the influence of gender. A wide-ranging analysis of the data collated for this study will be conducted, with phenomenology being the principal theoretical framework utilised.

The subsections of this chapter are entitled: *3.1 phenomenology; 3.2 symbolic interactionism; 3.3 dramaturgical stress; 3.4 the reflexive project of the self; and 3.5 the sick role and healthism.*

3.1 Phenomenology

As this study seeks to examine bereaved young adults' perceptions of experiences within their social life-world/s, phenomenology, which promotes "an understanding between states of individual consciousness and social life" (Orleans 2000: 2099), provides a theoretical perspective that is relevant to, and encourages exploration of, the research question. For instance, bereaved individuals may perceive the nature of their interactions with nonbereaved peers or work colleagues, as indicative of socio-cultural beliefs and values relating to bereavement and, more specifically, how bereaved individuals should conduct themselves in social settings.

Psathas (1973: 14) points out that phenomenology concentrates on the experience of the individual 'subject'; the example he provides relates to the

individual's perception of the people with whom he or she interacts as being individuals who inhabit social roles. In this sense, the people one comes in contact with, including the people one reads or hears about, operate for the individual as 'representatives' of social and/or cultural beliefs and values. Schutz (1966: 264) explains that individuals carry with themselves "a stock of knowledge" which is "nothing but the sedimentation of all our experiences of former definitions of previous situations, experiences which might refer to our own world in previously actual, restorable and obtainable reach or else to fellow-men [sic], contemporaries or predecessors."

Our 'stock of knowledge' – our previous subjective experiences, interpretations and typifications of our social life-world – therefore guides us in how we define future situations. Death-related bereavement, in most cases, challenges our subjective typifications and assumptions of our social life-world because it presents for us a set of experiences that are, in general, outside our common, 'everyday' experiences (Martin & Doka 2000: 15); our typified, taken-for-granted social life-world has been significantly unsettled.

As phenomenology concentrates on subjective experience, one may conclude that phenomenology can only operate on a microsociological level. However, Psathas (1973) argues that subjective experience has implications on a macro level; an intimate relationship exists between the individual's subjective experience of society and the subsequent procedure in which he/she externalises and objectifies his/her social life-world. From this perspective, the 'objective reality' of an individual's social life-world – community, social groups and formal organisations, for example – develops through subjective experience and interpretation, and the consequent interaction of 'subjectivities'. The interaction of 'subjectivities' refers to the development of collective meanings and typifications through the interaction of individuals in family, peer group, and work-related settings, as well as individuals' 'reading' of meanings contained within texts (Psathas 1973).

The patterns and generalities that have emerged through perceptual experience also influence how an individual thinks and acts within his or her social life-world. For example, our conscious experience of our social surroundings includes our imaginings of interactions with others. This includes our imagining, based on previous experience, how particular behaviours in particular social contexts may promote social inclusion or social exclusion. Our experience of interacting with an imaginary other, or others, is as relevant a social experience as our 'concrete' interactions with existing persons (Psathas 1973). To reiterate a previous point, our 'stock of knowledge' is instrumental in defining how we think and act in future situations, as well as how we think and feel about our social life-world.

Psathas (1973: 9) notes that for the individual "when the unexpected happens or new situations occur and the taken for granted is thrown into question, only then is he [sic] forced to consider alternative schemes of interpretation." Our 'stock of knowledge' may provide us "with rules for interpreting interactions, social relationships, organisations, and institutions" (Psathas 1973: 9), but the 'unexpected' or 'new' require us to re-think and/or re-adjust the patterns and typifications of our social life-world.

As Wagner (1973) opines, the older individuals are – and consequently the more extensive the level of life experience they have accrued – the more specific their expectations and anticipations will be as to the outcome of particular situations. The assumption here is that the patterns and typifications inherent in one's stock of knowledge increasingly solidify through the repetition of social scenarios that are perceived as similar in form and constitution. The individual never experiences the same situation twice, but the individual may perceive particular situations – for example, the response of nonbereaved individuals to a bereaved individual – to be similar in terms of their constitutive elements (Wagner 1973: 65).

On the basis of Wagner's observations, one could speculate that the unexpected happening may disrupt the patterns and typications of a 45-year old's social life-

world more acutely than those of a 22-year old's social life-world. Still, it is more than likely the young adult has emerged from the patterns and typifications relating to secondary education into a 'wider' social sphere that demands of the young adult the development of a new set of meanings and typifications. In this sense then, 'untimely' sibling bereavement would demand from the young adult alternative interpretations of one's social life-world, but this interpretation would occur along with the social re-interpretations necessitated through the his/her entry into a wider social sphere. Potentially, the stresses and pressures relating to re-adjustment would be experienced at a two-fold level for the bereaved young adult. It is little wonder that Balk (2001) expresses concern regarding the potentiality of bereavement to stall the demanding developmental transitions associated with young adulthood, for example development of a positive and stable self-identity.

Martin and Doka's (2000: 14-15) definition of grief similarly emphasises 'disruption' in the individual's assumptive (social) world. Specifically, grief can be defined as the psychic energy that results from tension created by an individual's strong desire to a) maintain his or her assumptive world as it was before the loss, b) accommodate themselves to a newly emerging reality resulting from his or her loss, and c) incorporate this new reality into an emerging assumptive world.

On a phenomenological level, Wagner (1973) addresses the issue of the individual's adapting to excessively rapid 'social life-world' changes in his essay, *The Scope of Phenomenological Sociology*. When a series of life events deviate too drastically from the individual's established expectations, and render his or her adaptive defenses pointless or obsolete, only "the most astute and cynical individuals" could "work out (successful and effective) adaptation techniques" (Wagner 1973: 77). The incongruent relationship between one's stock of knowledge and the new 'reality' of one's social life-world, leads to the individual feeling isolated from "the mainstream of life as it is lived by others" (Wagner 1973: 78).

Wagner (1973) proceeds to outline a series of individual responses to this lack of cohesion in one's assumptive social life-world. These responses include "flight into an autistic world of fantasy or reality distortion, which is socially described as mental illness; acceptance of a world devoid of meaning by adapting cynical outlooks and practices; 'conversion' to a creed or world view securely removed from that which failed the individual in the hour of crisis; flight into spheres of artificially induced fantasy-experiences that represent an 'ultimate reality' in place of the negated realities of everyday life; sudden assumption of the aggressive role of the 'rebel' and 'revolutionary'" (Wagner 1973: 78).

Each response relates to the individual's struggle to incorporate or accommodate a newly emerging 'social life-world'-reality. The severity of these responses is indicative of the difficulties inherent in the types of adaptation techniques that would successfully keep the individual within the 'mainstream of life'. For example, an adaptation technique for the bereaved individual might involve covering up, in the public sphere, any emotional expressions relating to the grief he or she is experiencing. Here, the bereaved individual controls his/her grief for the purposes of social acceptability; the individual is attempting to adapt to his/her newly emerging social life-world, and the activity of 'distraction' from one's emotions may indeed provide some level of release from the debilitating experiences of grief.

However, such a 'socially acceptable' adaptation technique – learning to handle the everyday 'crises' that occur in a public setting through successfully controlling emotions, such as distress or anger – may have often been effective for the individual prior to their bereavement, but applied post-bereavement, the technique could potentially inhibit the expression of grief the individual feels is necessary for his or her mental, physical and emotional health. Giddens' (1991) concept of the 'reflexive self', which is examined further on in this chapter, posits a more positive individual response to life crises, than Wagner (1973) provides. Nevertheless, even in the 'reflexive' sense, a considerable amount of

time is necessary for the individual to effectively adapt to his/her disrupted social life-world.

A further response that is outlined by Wagner (1973) corresponds more closely to this study's linking of the experience of bereavement and social isolation. This response is the individual's removal of him or herself from the social sphere through the act of suicide. From a phenomenological perspective, individual anomie and the subsequent suicide are not revelatory of societal pressures, nor do they operate as objective indicators of societal structures under stress. The stress of the subjective response derives from the individual's inability to counter the expanding gulf between his or her assumptive social life-world and the rapidly emerging 'new' social reality. The individual then comes to define his or her "overall situation as unbearable, and thus his life [sic] as impossible" (Wagner 1973: 78). What is particularly pertinent to this study is not so much the act of suicide, even though as a response to the many forms of bereavement (such as death, relationship breakdown, loss of employment), suicide undoubtedly has been, and will continue to be, a crucial field of study. Rather, and this is in relation to the experience of social isolation, the individual's compulsion to remove him or herself from the stresses of conflicting social life-worlds.

Furthermore, Wagner's (1973) discussion of the variety of potential responses to the rapid changes occurring in one's assumptive social life-world does provide some theoretical basis for understanding the bereaved individual's experience of feeling removed from the 'mainstream of life'. The individual finds that as a reaction to the rapid change that has occurred in his/her assumptive social life-world, a sense of meaninglessness now pervades the values and goals that previously sustained and motivated him/her, particularly the goals and values relating to work or education. As the individual is neither willing, nor able, to remove him or herself from these settings, on an external level, the distressed individual is seen to endorse, or at least adhere to, the demands of societal structures. On an internal level, however, a spiritual rejection of external impositions has occurred.

This relationship between the external 'performance' and the internal 'rejection' alludes to Balk, Tyson-Rawson and Colletti-Wetzel's (1993) research findings concerning the experiences of bereaved college students.   The bereaved individual's 'pretending normalcy' in order to optimise his or her chances of continuing social acceptance – and more ironically, to procure adequate social support – is suggestive of an internal social isolation that belies what external realities might communicate to those observing the individual.

3.2 Symbolic interactionism

In relation to this study, symbolic interactionism builds upon the themes outlined in sociological phenomenology, as well as mirrors the issues of social inclusion that were discussed in Chapter 2 – subsections 'Social isolation' and 'Bereavement and young adults'. In short, symbolic interactionism provides a focus on the subjective experience of social acceptance – or indeed, social exclusion.

As a theoretical perspective, it posits that the 'meanings of the objects' contained in one's social life-world derive from the social interaction one has with other people (Blumer 1969: 2). The 'objects' that carry meaning for the individual, and encompass the individual's social life-world, consist of physical objects, other human beings and their actions/reactions, everyday situations, and shared or individual ideals. On a macro level, the nature of human interactions are viewed as constitutive and indicative of the workings of a particular society (for example, Australian society, Western culture or a subculture). Consideration is subsequently made of how these interactions can reproduce and/or transform cultural meanings, values, ideals, and power relations. Placing the individual within the lens of the symbolic interactionist perspective, the notion of the 'social self' becomes salient. With the social self, "each of us, as individuals, fashions a sense of our own selfhood through engagement with other selves" (Elliott 2001: 25). The reactions of other people to one's actions are therefore crucial to the individual's assessment of how his or her social self is accepted and/or deemed effective on a social level.

The bereaved individual's sense of conflict with his or her social self-presentation (such as to 'pretend normalcy' or, by behaving spontaneously, to risk social rejection), or more succinctly, his or her perceived 'socially acceptable' self, is an issue that is reflected on a theoretical level through George Herbert Mead's (1863-1931) writings on the 'social self'. The constitution of the individual self, Mead (1974) explicates through examining, and distinguishing between, the conceptual categories of the 'I' and the 'me'. The 'me' is representative of the aforementioned social self, as the 'me' is made up of the attitudes of others that the individual has internalized, on both conscious and unconscious levels. The 'I', on the other hand, refers to the spontaneous, unsocialised self, a self that contains "an assortment of personal desires, needs and dispositions" (Elliott 2001: 27). The potential and the capacity of the 'me' to recognise the attitudes of other people, provides the individual with the means for a socially accepted existence. However, should the individual's present needs and disposition differ too significantly from external, social attitudes – or should the individual predict his/her values will conflict with perceived social attitudes – then the potential for social exclusion may become an encompassing concern for the individual.

The relationship between the 'I' and the 'me' can thus be considered in relation to the 'pretending normalcy' quandary that Balk, Tyson-Rawson and Colletti-Wetzel (1993) consider as existing for the bereaved young adult. The 'I' encapsulates the individual's raw, unguarded emotional responses to the experience of bereavement, while the 'me' operates to recognise social attitudes towards death and bereavement, and perceives and interprets the reactions of others towards one's status as a bereaved individual. Self-awareness, for Mead (1974), is achieved when the individual becomes capable of distinguishing between the 'I' and the 'me'; the individual can recognise, and reflect upon, the dominant (and alternative) beliefs and values within a society (Elliott 2001: 27,28). However, if social attitudes toward death and the handling of grief are perceived as not satisfactorily acknowledging the extent of the young adult's grief, or allowing the public expression of grief, then this achievement of self-

awareness may be as emotionally and physically deleterious for the individual as it is personally revelatory.

Mead's (1974) conception of 'The Generalised Other' involves the individual's internalisation of others' attitudes. More specifically, the individual's compilation of other's attitudes develops into a generalised interpretation of what one's community – for example, one's country, social group, or the media – values and believes in. As Mead explains, "the attitude of the generalised other is the attitude of the whole community" (1974: 154). What the bereaved individual's 'generalised other' contains is worthy of investigation in terms of examining how the perception of social attitudes may impact on the individual's sense of social connectedness. For instance, does the individual's 'generalised other' contain the repetition of particular, dominant attitudes towards death *and* the handling and duration of bereavement? Perhaps the 'generalised other' contains a multiplicity of varying attitudes towards the subject matter – attitudes which themselves have emerged from a variety of social contexts and groups – some of which are seemingly intolerant, while others are tolerant? To procure social support, does the individual need to seek out like-minded individuals from within a seeming morass of differing opinions? Or perhaps he or she perceives a general social tolerance towards the process of grieving?

3.3 Dramaturgical stress

A significant issue in this study is the emotional and physical 'costs' for the bereaved young adult of pretending normalcy in a given social situation. Does this 'pretence' in social interaction function as an escape, a psychosomatic relief from thoughts and feelings of grief? Or does it constitute a form of emotional and physical repression? Or can it operate as one or the other, depending on the individual's emotional needs at particular points in time? The potential costs of 'pretending normalcy' are alluded to in Freund's (1982, 1990) conception of 'dramaturgical stress'. The concept emerged from within a relatively new field of sociological thought and research – the sociology of emotions – although it was Goffman (1990) who initiated a 'dramaturgical' analysis of social situations. The individual's regulation of emotion in order to meet the assumed

norms of a social situation, Freund (1998, cited in Scott n.d.: para. 3) argued, places conflicting demands on the individual. The individual's experience of these conflicting demands constitutes 'dramaturgical stress'; in a particular social situation (such as being at a party with members of one's peer group) or a series of social situations, the bereaved young adult may feel the obligation to present a cheerful, easy-going persona, while he or she feels melancholy on the inside (Scott n.d.: para. 3).

Scott (n.d.: para. 3) argues that the oppositional nature of these motivations leaves the individual "feeling ambivalent and uncertain, as well as ill-equipped to deal with the situation." The implications here are that similar situations, which will arise for the bereaved individual in the future, will produce similar levels of emotional and physical stress. In this sense, the individual's private troubles can be silenced on a public, social level. Retreating from these situations may provide respite from 'dramaturgical stress', but at the same time this course of action potentially cuts off a number of possible avenues for social support, and reduces the individual's level of 'practice' in a variety of social situations – hence making any social re-integration a more daunting proposition for the bereaved young adult.

The reactions of those individuals who surround the bereaved young adult in everyday interaction also need to be taken into account, in terms of their potential to socially isolate the individual, either willingly or unwillingly. In Goffman's (1990, cited in Scott b n.d: para. 4) 'dramaturgical' analysis of social life, the individual, and the individuals he or she interacts with, operate as 'social actors'. The individual's 'external' social life-world is, in this sense, a stage, and everyday encounters are conducted in a fashion similar to a performance on stage. Echoing Mead's (1974) conception of the 'social self', each 'social actor' carefully monitors the reactions of others to his or her performance (Scott b n.d.: para. 4). In Goffman's 'dramaturgical' arena, social acceptance is predicated on the individual's successful delivery of a situationally appropriate and desirable performance. However, Scott (b n.d.: para. 5) points out that within a social arena of complementary and reinforcing

performances, a problem arises when "one person's behaviour fails to match the normative expectations of others and thus poses a threat to the smooth flow of the interaction order." From this perspective therefore, it would appear highly unlikely that sabotaging the interaction order is the bereaved young adult's intention, but rather the intensity of grief leaves the individual feeling inadequate and poorly equipped to handle the interpersonal dynamics of a social situation effectively. While Mead's 'dramaturgical' analysis may draw criticism for depicting everyday social interactions as the locus for calculated, self-preserving performances (Elliott 2001: 34), such an analysis is beneficial for this study in illuminating how feelings of inadequacy and loneliness can exist within a seemingly smooth-operating 'external' world of socially connected individuals. It is also suggestive of how individuals, overcome by the consuming nature of bereavement, can threaten to undermine the 'interaction order'.

3.4 Reflexive project of the self

To reiterate a previous point, life crises, such as a death in the family, the death of a friend or familial breakdown, significantly unsettle individuals' 'stock of knowledge' about themselves and their social life-world. For instance, the confidence previously held in one's ability to cope with difficult life events, and the sense of security one had in the day-to-day functioning of his or her immediate social life-world, can be thrown into emotional disarray. A consequent retreat, and/or a sense of emotional and psychological distance, from one's social life-world may present a number of immediate and/or future problems for the individual, such as loneliness or difficulties re-integrating one's self into social life.

On the other hand, studies on solitude (Larson 1990: 157-159) have suggested the adaptive benefits of spending time alone – time to reflect on thoughts, feelings, and previous actions and reactions – where one is free, at least on a physical level, from the influence of outside sources. Too much solitude may have maladaptive effects (Larson 1990), but a time to reflect could provide an opportunity to 'lick one's wounds' from adverse or difficult events and

situations, with the subsequent re-integration – at least in theory – of one's renewed self into social activities.

The capacity of individuals to reflect on social interactions and events is indicative of Anthony Giddens' concept of 'reflexivity'. 'Reflexivity' is essentially Giddens' variant on theories of the self; while it mirrors phenomenology and symbolic interactionism, in terms of recognizing individuals' subjective experience and interpretation of society, the ability of individuals to reflect on their social surroundings takes precedence in Giddens' conceptual framework. 'Reflexivity' writes Elliott (2001: 37), "can be defined as a self-defining process that depends on the monitoring of, and reflection upon, psychological and social information about possible trajectories of life."

The individual is reflexive in the sense that modern social life is reflexive. Or indeed the 'reflexive self' constitutes a response – an attempt to adapt – to an increasingly fragmented and pluralistic modern world of secular ideals and declining of traditional authority (Giddens 1991). Applied to the occurrences of crises in the individual's life-world (such as the death of a family member, partner or close friend, or the occurrence of relationship breakdown), the individual's reflexive approach to living offers the possibility of positive adaptation to change, from the significant to the subtle, in one's social life-world. It is not merely a possibility, but a practical necessity to live reflexively in order to sustain one's self effectively – emotionally, physically and psychologically – within the evolutions of modern social life.

In reflexive terms, life crises do not result in the 'disintegration of the self', but rather locate and implicate the individual in an 'open project' of the self. One can trace over the past, imagine the future, and experiment with a new sense of identity (Elliott 2001: 40). We learn from our experiences, thereby gaining new perspectives on living effectively or contentedly; however painful crises may be, we ultimately learn and develop (as human beings and/or agents) from them. Otherwise we stagnate in a social life-world indicative of times passed. However, one question this study does ask is whether the bereaved young adults

perceive that the society surrounding them expects that they 'learn and develop' from their bereavement at a faster rate than their experiences of grief will accommodate? Such an issue will be considered in greater depth in the sub-section below covering Talcott Parson's conception of the 'sick role', along with the contemporary conception of 'healthism'.

What the concept of 'reflexivity' does provide is a sense of a positive personal renewal in the face of the tremendous disruption that can occur *within* one's social life-world. In commenting upon the criticism that 'reflexivity' has drawn, Elliott (2001) notes that by positioning the individual at the center of society, it would appear that social change emanates solely through the individual's personal desire for change, thereby downplaying the role of social and political struggle. Elliott (2001: 41) argues that such a view is somewhat misplaced; reflexivity is not so much centered on self-mastery and self-actualisation, but rather it positions the self as being "reflexively implicated in the thrills and spills of social life." Social and political struggles – and the accompanying (and often rapid) social change – constitute a series of continuing processes within which the individual is 'reflexively implicated'; such a description epitomises the nature of living within what Giddens' (1991) terms 'late modernity'.

In relation to bereaved young adults and their experience of social isolation, the reflexive self posits the possibility of positive personal growth and development in the face of disruption to one's social life-world. Alongside the struggle to adapt to the continual social change inherent within a 'late modern' world, is the opportunity to develop new perspectives in approaching everyday life, especially in terms of the bereaved, a forceful reminder and reinforcement of the value of interpersonal relationships. However, the focus on positive adaptation, as a social and cultural value, is also likely to affect bereaved young adults' perceptions of social tolerance. That is, the individuals surrounding the bereaved person may stress the importance of positive adaptation at the expense of displaying a tolerant attitude towards the young adult's experience of grief.

This is not to undermine the pressures and stress people may experience in interacting with a bereaved individual, but rather a caution against emphasising personal growth without similarly acknowledging the consuming nature of one's grief. Reflective of this concern, is Elliott's (2002: 42) observation that Gidden's conceptualisation of the reflexive self tends to "downplay the degree to which the influence of emotion, memory and desire can limit or conflict with our conscious attempts to order our lives and make sense of the world in more reflexive terms."

3.5 The sick role & healthism

In considering how social and cultural forces can contribute towards creating a social life-world for the bereaved young adult that is perceived as socially isolating, a further two concepts will be examined below. Both concepts illustrate how such forces can influence the individual, in the sense that the individual perceives an 'obligation' to choose a socially acceptable path for personal 'recovery'. This is regardless of whether the path is considered or experienced as being a personally beneficial one. The concepts are Parsons' (1951) 'sick role' and Crawford's (1980) 'healthism'. Both concepts are related to a) the individual's responsibility to maintain or attain optimal health – to the benefit of one's society – and b) the social control of disease.

According to Williams and Bendelow (1998: 148), in recent years the definition of health has shifted from 'the absense of illness' to the more expansive notion of true 'wellbeing'. Therefore, this contemporary definition of health encompasses the integration of mind, soul, body, emotional life and personal relationships into a stable and thriving 'whole' (Coward 1989, cited in Williams and Bendelow 1998: 148). In the sense that the attainment of optimal health requires constant effort and dedication from the individual, health is closely linked with notions of individual commitment, attitude and responsibility (Coward 1980, 1984; cited in Williams and Bendelow 1998: 149).

On the basis of this contemporary definition, death-related grief can be classified as an illness, and therefore active recovery from the illness can be

publicly viewed as distinctly possible, if not inevitable. According to Gire (2002: 4), "Recovery comes about due to the conscious and concerted effort by the bereaved, who realises there is no sense dwelling on the loss, and that he or she has a lot of other responsibilities to take care of." However, just as the pervasiveness of social expectation can produce for the individual perceived time-limits for the recovery from his or her illness (for example, a couple of days off work for the common cold), and the resultant behaviours illness invokes (for example, a day spent in bed), so too socially-produced limits can be placed on the individual's experience of grief, as will be suggested below.

Gire (2002) stresses that there is no specific timeframe, from the initial shock and numbness to 'recovery' in the individual's experience of grief. The timeframe is influenced by such factors as relationship 'meaningfulness' between the deceased and the bereaved, the availability of social support, and the age of the deceased when the death occurred (Gire 2002: 4). However, he does note that "experts" believe this progression, from shock to recovery, "takes at least a year, perhaps more…" (Gire 2002: 4). The conception of a general recovery time can operate as a reference point for bereaved individuals and those who come in contact with them, but unwittingly or not, can also divide public – and in many cases private – expression of grief into two classes: 'normal' and 'abnormal'.

Worden (1991) provides a criterion of abnormal grieving; a) grief that is expressed in a self-injurious manner, b) grief that, on a public level, is never displayed, and/or c) grief that is too 'intense' in character and that extends beyond a socially anticipated recovery time. Therefore, abnormal grieving falls into the realm where grief is expressed 'too little' or 'too much', a categorisation reminiscent of Hochschild's (1983) conception of 'feeling rules'. Individuals recognise feeling rules through a multi-layered process combining social interaction, self-monitoring and self-reflection; that is, the recognition of rules occurs by "inspecting how we assess our feelings, how other people assess our emotional display, and by sanctions issuing from ourselves and from them." (Hochschild 1983: 57) In relation to grief, Hochschild (1983: 64) believes "we

can offend against a feeling rule when we grieve *too much* or *too little*, when we overmanage or undermanage grief."

Parson's (1951) 'sick role' touches on Worden's (1991) two latter indicators of abnormal grief – grief that is never displayed or is too 'intense' in its nature – and as a theoretical perspective it emphasises a cultural valuing of personal responsibility. However, what will be considered to begin with is the connection the 'sick role' has with what bereaved young adults perceive is a socially acceptable duration of time for their recovery from bereavement, even if it does not coalesce with their personal experience of grief.

In terms of the 'sick role', illness does not merely indicate the individual's physiological condition, but it also enables and necessitates the individual's public expression of an alternate social role. The 'sick role' can provide an 'escape' from social obligations and responsibilities when the individual is experiencing some level of physiological difficulty in his or her life. The duration of this social avoidance – how long one's society exempts the individual from everyday roles and responsibilities – depends on institutionalised notions of how personally deleterious the individual's illness can be and the extent of the social harms that arise from exposure to the individual's illness (Roach Anleu 1999: 196). What then might be the time limit of the social allowance granted to the 'maintenance' of a 'grief role'?

Of course, in its consideration of appropriate illness behaviours and associated time-limits, the 'sick role' touches on the often-noted discrepancy between social expectations relating to how long the bereaved individual's grief should last and what form the grief should take, and the bereaved individual's actual and continuing experiences of grief (Balk, Tyson-Rawson & Colletti-Wetzel 1993; Balk 2001). For what time – three months, six months, a year, three years? – does the bereaved young adult believe his/her society will tolerate personal expressions of grief? If social expectation and personal experience do not coalesce, will feelings of frustration and personal futility emerge?

The appropriately reflexive individual may, on a public level, display a successful adaptation to the circumstances surrounding his or her bereavement, but on a private level bemoans the continuing feelings of grief and the general lack of community tolerance towards one's expression of grief. To reiterate Elliott (2001), the intensity of emotion, memory and desire can obscure the individual's capacity to reflect and build upon the events of one's life. So too, emotion, memory and desire (especially for 'contact' with the deceased) may overwhelm any of the bereaved individual's desires, conscious or unconscious, to uphold his/her perceived conception of a socially acceptable recovery time.

The 'sick role' exemption from everyday social roles and responsibilities is somewhat illusory; the label of 'illness' is coupled with the obligation for maximizing recovery and attaining/re-attaining 'optimal health'. People may resist admitting to their 'illness' in an attempt to continue their everyday activities, but as Parsons (1951: 437) observes "it is not uncommon for others to tell them they *ought* to stay in bed." There is a moral connotation in this advice, Parsons opines, in that the smooth functioning of society is protected against potential 'malingering'. Could the physical isolation of bereaved young adults protect a society from the potentially disruptive and upsetting 'spectacles' that the emotional rawness of grief can evoke?

While social 'malingering' may be avoided, physical isolation, as a means of preventative action against social disharmony would also appear to fall into one of Worden's (1991) categories of abnormal grief. That is, one is *not seen* to grieve. Whether judged as abnormal or as a responsible course of action to help prevent social 'malingering', the physical removal may, to some extent, indicate to one's social life-world the extent of the grief he/she is experiencing. However, as previously mentioned, such high levels of solitude cannot be underestimated in terms of the personally deleterious effects it may have, in particular, negative experiences of social isolation and difficulties in social re-integration. In considering that abnormal grief is often located at points where either 'too little' or 'too much' grief is publicly displayed, the question emerges as to what types and what levels of behaviour and communication constitute

socially acceptable expressions of grief. Do these socially acceptable expressions provide a satisfactory outlet for bereaved young adults? Presumably if they were satisfactory for the emotional needs of the bereaved, the individuals would then avoid negative experiences of social isolation by virtue of the fact their bereavement-related behaviour was judged positively by other people. In any case, the theory of 'postemotionalism', which is examined later in this chapter, will examine the issue of socially acceptable behaviour in greater depth.

Another obligation associated with the 'sick role' is for the individual to seek specialised help. This is the dimension of the 'sick role' that overlaps most evidently with Crawford's (1981) concept of 'healthism'; the maintenance of health (for example, eating patterns, exercise, and coping abilities) exists solely in the domain of individual initiative. As such, the healthist ideology downplays the social and economic factors that can impact on the individual's maintenance of his/her health. Poor health is attributed to the poor motivation of the individual and the lack of self-responsibility he/she has taken. Consequently, the individualist ideology inherent in Western capitalist society obfuscates the recognition of possibilities for the prevention of illness through "appropriate legislation and social change" (Turner 1995: 168). Does this individualist approach to the maintenance of health extend to the bereaved individual's coping with feelings of grief?

Charmaz's (1997: 230) caution regarding Western values of individualism and autonomy relates to the focus on self that can "make understanding the depth and extent of attachment elusive." From this perspective, the bereaved individual's realisation of the strength of attachments emerges through bereavement, but this realisation occurs within a social context where the majority of the population remains largely unaware of the 'depth' and 'extent' of interpersonal relationships. The conclusion that can be drawn here is that from a social perspective the extent of the bereaved individual's grief is both underestimated and misunderstood. Keeping in line with individualistic notions of self-help and self-responsibility, the bereaved individual's healthist-related

obligation is located principally in his/her utilisation of psychotherapeutic services.

Optimally, the therapeutic environment provides for the bereaved individual an uncritical and accepting 'private' space within which expressions of anger, despair, anxiety and guilt are largely permissible (Parkes 1975). A sense of trust – trust that one's feelings can be safely expressed – is attained, and the path towards 'resolution' can begin, to the benefit of a smoothly operating society (Parkes 1975: 209). However, as Gordon (2003: 2) has stressed, the "provision of services…does not bridge this gap (the traumatised person's sense of separation from the untraumatised) since (the services) are provided by people not integral to the person's (social) network." 'Healthism' may emphasise the individual's responsibility for maintaining and/or restoring one's 'health', but in the case of the bereaved, the provision of services would appear to be insubstantial in the achievement of optimal health, unless coupled with a sense of compassion and understanding emanating from within the networks of one's society.

Williams and Bendelow (1998: 148) do note that in the last decade "the number of so-called 'experts' in the field of emotional health and illness (has) mushroomed." Concurrent with this increase in psychiatrists, clinical psychologists, relationship therapists, 'agony aunts', art therapists, and so on, has been the tendency of 'lay people' to "frame their problems in professional terms" (Williams & Bendelow 1998: 148). Williams and Bendelow (1998) observe that this integration of the 'therapeutic' into the 'everyday' is suggestive of new forms of surveillance and social control. In poststructural terminology, this integration is referred to as the 'psy' complex. In relation to this study, the question emerges as to whether the 'psy' complex not only produces in the individual an increased preoccupation with the self but also produces an increased understanding, or desire to understand, the 'other'. That is, applying the therapeutic gaze towards other people.

If the 'psy' complex gravitates towards both courses of action, one could assume the communal benefits – such as individuals' perceptions of community tolerance and understanding and the experience of relationship 'meaningfulness' – and the subsequent benefits for the bereaved individual. (In Chapter 4, this particular theme is examined in greater depth in Sennett's (2000) conceptualization of the 'narcissistic' society.) However, Williams and Bendelow (1998) position the 'psy' complex solely in the realm of individual responsibility; the authors suspect the complex moves beyond the obligation to 'treat' one's problems into the realm of the individual 'normalising' himself/herself.

In this regard, the 'psy' complex operates as a form of self-surveillance or more succinctly, 'self-normalisation'. Rose (1990) displays an awareness of this possibility, referring to the integration of the therapeutic mindset into everyday living, "in Foucauldian terms, as '*Governing the Soul*'" (cited in Williams and Bendelow 1998: 148). In a similar vein to Balk's (2001) research on university students and the principles of symbolic interactionism, the concern here relates to whether the concerted effort to 'normalise' one's self for the purposes of promoting social cohesion and a sense of belonging, can have maladaptive effects for the bereaved individual.

The interaction, cooperation and mutual dependency between community and the individual emerges as a pertinent issue when situating individualistic ideologies such as 'healthism' in the realm of death-related bereavement. Therefore, with 'the sick role' and 'healthism', the notion of individual responsibility needs to be positioned alongside questions relating to perceived levels of community tolerance, compassion and understanding.   To a considerable degree, it would appear the bereaved individual's effective level of social and economic functioning is dependent on the experience of an effective level of support from his/her social networks.

3.6 Conclusion

The theoretical underpinnings of this study are centred most explicitly upon a) the bereaved young adult's subjective experience of his/her society, and b) how social discourses relating to gender may influence the young adult's social expression of grief (see Chapter 4). The enormity of life crises is similarly significant in terms of how it may alter previously held beliefs about the nature of society, and force bereaved individuals to reassess their social values and how they conduct themselves in a variety of social settings and situations.

The 'reflexive self' alludes to the possibility of adapting to one's 'disrupted' social life-world, even if the process occurs over a considerable period of time. However, at what personal and social cost, in the interim, does this come? Finally, the 'sick role' and 'healthism' emphasise the importance of a two-way relationship occurring between the bereaved young adult and his/her society – the bereaved individual's responsibilities towards social cohesiveness should intersect with a society that affords him/her an adequate level of tolerance and understanding.

Taken together, these disparate theoretical traditions combine to position the bereaved young adult as both an active agent operating within his/her society, and an individual adapting to – and possibly feeling overwhelmed by – a seemingly transformed social structure. The combination of theories is immeasurably useful in suggesting how social isolation can be an individual course of action both socially produced and personally acted upon. Chapter 4 will build upon this interrelationship with its theoretical perspectives on gender and societal forces. As such, this combination enables – for the analytical component of this study – a multilevel analysis of the study's key concerns.

CHAPTER 4

THEORY: GENDER AND SOCIAL CONNECTEDNESS

This chapter will outline and examine theories of gender and societal forces that relate to the social experiences of bereaved young adults. In considering the influence of gender, two theoretical perspectives on gender are particularly suggestive of how contemporary social discourses of gender are both fluid and fixed in nature. These are Lupton's views on 'emotionality' and 'femininity' (1998) and Connell's examination of the persistence of the 'patriarchal dividend' (2002). These perspectives use a gender lens to illustrate how social forces can influence individual consciousness and action. Most crucially, they provide sociological insight into both the gendered display of emotion and the social acceptability of emotional displays.

The other theoretical perspectives to be examined in this chapter are suggestive of the impact and influence societal values have upon the bereaved individual. For instance, Richard Sennett's (1977) notion of the 'narcissistic society' specifies the dangers inherent in contemporary social preoccupation with the 'self' (that is, a subsequent lack of social support, or at the very least, the perception of a lack). Sennett also examines how the cultural championing of the autonomous individual tends to coexist with individual anxiety over feelings of dependency. In resistance to the nature of a 'narcissistic' social climate, the notion of 'social capital' proposes that community-centered values benefit both the individual and his/her social life-world. The value in 'social capital' is that its cultural promotion would potentially increase the level of confidence a bereaved young adult has in the supportiveness and compassion of his/her social life-world.

The subsections for this chapter are entitled: *4.1 gender and emotional expression; and 4.2 narcissism, autonomy and social capital.*

4.1 Gender and emotional expression

As this subsection will illustrate, the most pertinent gender-related issue to this study is what the social cost of emotional displays and self-revelation may be for bereaved young men and women, in that such expression may fall outside of traditional conceptions of, respectively, 'masculinity' and 'femininity'. Traditional 'masculinity' focuses on emotional reserve and autonomy while traditional 'femininity' promotes traits that nurture interpersonal relationships (Wheeler, Reis & Nezlek 1983). This tension between emotional expression and gender expectations is contextualized within the contemporary social push for acceptance of more expansive notions of what it to be a man or woman, as opposed to defining sex-appropriate behaviour along more dichotomous lines. Has the emergence of 'alternate' male and female social identities – the 'sensitive man' (Lupton 1998) and the 'modern woman' (Lindstrom 1999), for example – provided the bereaved individual a wider 'selection' of socially acceptable behavioural responses for coping with bereavement? Or have traditional notions of appropriate male and female social behaviour preserved a significant influence in contemporary Western societies, such as Australia, an influence that presumably limits the bereaved young adult's social response to bereavement?

Although "the history of gender…includes the production and transformation of the categories of gender" (Connell 2002: 69), a contemporary examination of gender needs to be contextualised in relation to the history of the 'patriarchal dividend' (Connell 2002: 143). As Connell (2002: 143) observes "the sex-role reformers of the 70s…hopelessly underestimated the patriarchal dividend, missing what men stood to gain from current arrangements in terms of power, economic advantage, prestige, etc." On the other hand, why should men choose and/or continue to conform to the 'patriarchal dividend' (Connell 2002) – where emotional containment is synonymous with male social power (White 2002) – when male privilege and power has come under significant and wide-ranging cultural criticism (The Australian's Review of Books 2001)? There are three issues that can be identified from Connell's statements and the above question; 1) the persistence of the 'patriarchal dividend', 2) the association

between emotional containment and social power, and 3) on the basis of conflicting perspectives, an overall uncertainty regarding the *level* of continuing influence the 'patriarchal dividend' has in contemporary society. On the latter issue, the question could be asked whether, in the majority of contemporary social contexts, traditional notions of 'masculine' emotional expression/containment are afforded a stronger association with social respect and esteem than traditional 'feminine' expression is. Presumably, the more tolerance a society generally displays towards diversity in gendered expression, the more tolerant and accepting the bereaved individual may perceive his/her society to be in regards to a wider variety of emotional 'expressions'.

In this sense, it is fortunate then that within the cultural challenges (exemplified through second-wave feminism) directed toward paternalistic gender roles, efforts have occurred to raise the social status of human traits commonly associated with traditional 'femininity'(Lupton 1998). A higher valuing of the 'feminine' beyond private spheres would appear to have positive implications for both men and women. That is, social and personal benefits for women in terms of a greater cultural valuing of 'female' traits, and with it, freer emotional expression for men without the subsequent fear of loss of social status. To extend this further, a higher social valuing of the 'feminine' – extending its value beyond the private sphere – would presumably benefit the bereaved individual in terms of reducing the perception of negative social costs associated with emotional expression.

However, there may be another barrier, aside from the 'patriarchal dividend' and traditional 'masculinity' that continues to compromise the valuing of 'feminine' traits in a wider variety of everyday contexts. Both men *and* women may fear a loss of social status due to what Lupton (1998) observes is the close association between 'emotionality' and 'femininity' in Western societies. 'Emotionality' – alluding to the individual who is both capable of intense feeling and of expressing it openly – is "associated with weakness of will, insufficient capacity for reasoned thought and loss of control" (Lupton 1998: 107). Furthermore, the equation of immaturity and lack of intellect with

emotion is by no means culturally atypical (Shields 1987: 229), especially given the above mentioned associations between emotional containment and male dominance; dominance, as in social position and social role (White 2002: 274). Still, through the validation and celebration of 'female' ways of relating toward others, second-wave feminism has endeavored to reverse or, at the very least, reduce the level of negativity concentrated upon 'emotionality' and, by extension, the 'feminine' traits intrinsic in the psychological make-up of both women and men (Lupton 1998: 130).

Lupton (1998: 130) also notes that some feminists "have taken a different tack [to feminists who discredit the negative association between 'femininity' and 'emotionality'] by attempting to privilege what they see as women's more highly developed capacity for emotional sensitivity and expression." Taken in consideration of the apparent importance of relationship 'meaningfulness' – in particular, greater intimacy and self-disclosure in relationships (Wheeler, Reis & Nezlek 1983) – a privileging of 'feminine' modes of interaction in Western societies would appear beneficial for both bereaved young men and women in terms of optimising the potential for 'meaningfulness'. Whether 'meaningfulness' extends to discussions of death and grief is another matter. However, in a culture where the 'act' of self-disclosure is more commonly practised, and even expected as course of 'meaningful' interaction, the possibilities of open dialogue would presumably be greater.

However, as has been alluded to, the contexts in which 'meaningfulness' can be enacted may be limited in scope, particularly for men and boys. Connell's (2002: 6) observation that "boys and men who depart from dominant definitions of masculinity because they are gay, effeminate, or simply wimpish, are often subject to verbal abuse and discrimination, and are sometimes targets of violence" provides a sobering indication of dominant cultural attitudes toward 'femininity', particularly when it is 'practised' by men and boys. A rejection of both the cultural goal of hegemonic masculinity[5] and "the institutional means to

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[5] The characteristics of the hegemonic ideal are mirrored in the traditional concept of 'masculinity'.

achieve this goal (competing with others for power and resources to achieve this ideal status)" (White 2002: 276) appears to coexist with a number of health-related risks, such as depression. A rejection of conventional goals may create a form of psychological dissonance in that alternate forms of 'masculinity' are observed to lack a comparable level of social legitimisation (White 2002: 276). However, even if a man does approach the 'ideal' masculine status as a personal goal, the fact that "few men have the cultural or economic resources to attain [the 'ideal'] in the course of their lives" suggests that the 'failures' inherent in one's actual lived experience may become a "major source of stress, anxiety, confusion and emotional angst for some men" (White 2002: 275). Such experience constitutes 'gender role strain', a psychological phenomenon whereby the individual finds the social demands of gender inconsistent with his/her "*naturally occurring tendencies*" (Kilmartin 1994: 34).

The issue of social legitimisation of emotional expression can be considered one step further in the archetypes of the 'sensitive new age male' (Lupton 1998) and the 'modern woman' (Lindstrom 1999). The 'sensitive man' and 'modern woman' archetypes can, at the very least, be seen as a broadening of male and female social roles for a more complete humanity that encompasses both traditional 'masculine' and 'feminine' traits.[6] Boscagli (1992/1993) suggests that the action of men allowing themselves to become more 'feminine' signals their response to alterations in gender relations. In some cases, it also signals their emotional distress in attempting to develop a secure sense of self-identity whilst in the midst of a contemporary "crisis in masculinity" (cited in Lupton 1998: 134). However, Boscagli (1992/1993) also argues that social permission for men to express emotional vulnerability, such as through crying, is open only to men in significant positions of power. Franks (1989, cited in Freund 1990:

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[6] White (2002: 278) notes "it is important [in giving new meaning to masculinity] to move beyond an approach which simply integrates in a mechanical fashion certain desired attributes of masculinity with those of the desired attributes of femininity" ; the same could be said in integrating traditional 'masculine' traits into a 'feminine' social identity. The caution here highlights that "there may well be certain features of being male and being female which are not cross-transferable in the sense that fundamental differences may exist between the two sexes which, in the end, cannot be ignored at a social and cultural level." (White 2002: 278) As this study is positing, the important emphasis is on the level of public acceptance there is toward a variety of ways of 'doing gender'.

466) similarly opines that the emotional expression of a lower status individual is not taken as seriously or accorded the same weight as the emotional expression of a 'higher status actor'. Therefore, only when a man has succeeded in acquiring a notable level of socioeconomic prestige would his 'emotionality' be accepted, and even appreciated, rather than stigmatised (Boscagli 1992/1993, cited in Lupton 1998: 134).

On this level, socially respected 'emotionality' becomes a privilege that helps ensure the continuance of a largely masculinised public sphere. The credence of both Boscagli's (1992/1993) and Franks' (1989) arguments may be debatable, particularly in light of contemporary social discourses that discourage emotional containment in men in general (Walter 1999). However, the implications of Boscagli's (1992/1993) argument for the bereaved young man are worth considering. Given that very few men between the ages of eighteen and twenty-five have had the time or opportunity to acquire significant socioeconomic prestige (relative to one's socioeconomic background), the assumption could be made that for the majority of young men, a consistent display of masculine traits is necessary. On the social front this display could be seen as helping ensure for the individual a satisfactory level of social acceptance, until material and social achievement validates one's 'emotionality'. For men who never achieve a socially recognised level of prestige the emotional consequences would appear especially bleak.

In any respect, the 'emotionality' of grief may drive a bereaved young man to isolate himself from his social life-world as often as necessary in order to retain a sense of a socially-viable 'masculine' self. Paradoxically, such action falls precariously close to being situated within one of the definitions of abnormal grief – to be 'seen' to be grieving too little (Worden 1991). On a social level, this abnormality possibly relates more to women, in terms of whether they have *or have not* adopted a suitably 'feminine' response to bereavement. For a man to be rarely seen grieving in public settings would seem to fall within the parameters of displaying a traditional 'masculine' emotional fortitude. Still, the

principal question here relates to what level of emotional expression a Western society presently permits, or is perceived to permit, the grieving young man.

With the contemporary archetype of the 'modern woman' (Lindstrom 1999) traditional 'masculine' autonomy and self-sufficiency is integrated with traditional 'feminine' traits. Or in another sense, this 'feminine' archetype promotes social acceptance of nontraditional traits. So, a fuller expression of one's humanity is enabled, but this expression is no longer tainted by the possibilities of social ostracism.[7] Also, a sense of autonomy could be seen as regulating and evening out women's inclination to define themselves through their connections to others (Chodorow 1989, cited in Nicholson 1999: 20). The idea of contemporary cultural archetypes, such as the 'sensitive man' and the 'modern woman', enabling a wider avenue of human expression (than traditional gender roles would commonly permit) is reflected in Schut, Strobe and van den Bout's (1997) research into the coping styles of widows and widowers. As referred to in Chapter 2, levels of emotional distress were lowered in the bereaved individuals who adopted coping styles typically associated with the opposite sex. So, through utilising another coping style the widow can find distractions from grief through the 'masculine' activity of problem solving and the widower can increase his likelihood of avoiding the pitfalls of emotional repression through a greater 'feminine' engagement with emotions.

However, a promotion of 'balance' in coping strategies may run the risk of alienating some bereaved individuals. Contemporary recognition of the need for 'open' emotional expression in the grief process – even if such openness is relegated to the psychotherapist's office – belongs to a wider and more general feminist critique of masculinised public spheres (Walter 1999). In the case of bereavement, a traditional 'masculine' response favours emotional containment. However, Walter (1999) and Martin and Doka (2000) caution against favouring an expressive coping response over a more contained, instrumental response in

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[7] Also, greater access to male privilege (ideally) need not necessitate the constraint of 'feminine' traits.

that social expectation can potentially isolate the individual whose personal coping response to life crises falls outside the 'preferred' level of conduct. As Kellehear (2000: 8) observes "The view that there is one way to deal with grief reactions – reserve or 'letting go' – from diverse social and cultural populations is a modernist notion that assumes an asocial view of an essentially social construction of identity and loss." Emotional containment may not always be indicative of emotional repression or, specifically with men it may not be a (conscious) expression of male power/privilege. Rather, it may simply be seen as another form or style of coping with bereavement. Some individuals, male and female, may not view emotional containment as a repression of his/her experiences of grief and may believe it has not produced negative experiences of social isolation. In short, is one's containment of feelings of grief, an attempt to preserve social status (particularly for men) or does it function principally as a personal coping style?

On one level then, social permissiveness towards a variety of coping responses is necessary. On another level, the suggested importance of relationship 'meaningfulness' for both men and women emphasises the importance of promoting, or continuing to promote, positive social-cultural associations with 'femininity'. These associations need to extend beyond the positive associations gained on an interpersonal front. If the association between 'femininity' and 'emotionality' in spheres of work and leisure, for example, generally confers weakness, then what social costs does 'feminine' self-expression pose for the bereaved young adult? If one considers the contemporary theory of 'postemotionalism' (Mestrovic 1997), then 'feminine' self-expression requires the sort of careful management one would commonly associate with 'masculinity'. 'Postemotionalism' has emerged from the consumer orientation and media-focus of Western societies. Ultimately, the cultural goal within a 'postemotional' social milieu is to understand and express the uniqueness of the self, but avoid emotional disorder: all this to help ensure a smoothly operating society. Although emotional expression is promoted, particularly for purposes of self-development, the principal goal is to avoid

emotional disorder (Mestrovoic 1997, cited in Williams and Bendelow 1998: 150).

Williams and Bendelow (1998) liken the postemotional management of emotions to Ritzer's (1993) 'McDonaldisation of society'. 'McDonaldisation' refers to where one's emotions are displayed to surrounding 'consumers' in carefully crafted and manipulated forms (Ritzer 1993, cited in Williams & Bendelow). For instance, while emotional expressiveness may be encouraged in service and information occupations (presumably friendly and inclusive atmospheres), the level of this expressiveness is questionable. In a 'postemotional' sense, expressions of feelings of grief may be seen as deleterious to smoothly operating social environments and suggestive of emotional disorder: such expression would be better relegated to the private world of the psychotherapist's office. However, to reiterate Gordon (2003), therapeutic services can only achieve so much in reducing the bereaved individual's sense of separation from his/her society, as more than likely the services would not have been an integral part of the individual's social network prior to his/her bereavement.

Ultimately, the influence of gender can be considered in terms of how it colours the other sociological theories described in this chapter. Take, for instance, the social responsibilities inherent in 'the sick role' and 'healthism'. In light of traditional social prescriptions of 'male-masculine' behaviour, one could presume that bereaved young men are expected to 'get over it' – that is, reduce their open expressions of grief in social settings – in a shorter period of time than bereaved young women. Then again, with greater cultural recognition of the emotional repression inherent in the hegemonic 'masculine' ideal, diversity in male emotional expression may be more readily tolerated. In regards to phenomenology, the bereaved young adult's internalisation of traditional 'masculine' or 'feminine' codes of personal conduct, or a combination of both, would more than likely inform his/her social response to bereavement and by extension, influence the level of social support he/she receives.

In terms of symbolic interactionism, adherence to 'masculine' or 'feminine' codes of personal conduct may influence the nature of the bereaved individual's interactions with other people. For a bereaved woman, the expression of grief in a fashion that is reflective of traditional 'femininity', such as the free expression of emotions, would facilitate the open expression of one's grief. Social acceptance of such 'feminine' emotional expression could, at least on a social-interpersonal level, be reassuring for the bereaved woman, in terms of the acceptance providing a sense of social tolerance and compassion. On the other hand, in a 'postemotional' social life-world, is the open expression of grief restricted to a particular level? For instance, the bereaved woman may experience 'social permission' to talk openly of her grief, but she may experience and/or perceive in her social interactions that such openness may invite the judgement that she is 'dwelling' too greatly on her grief.

To reiterate this subsection's principal issue then, how socially and culturally available – and acceptable – are forms of emotional expression that build on, or offer alternatives to, the gendered emotional expression located in traditional gender roles? How persistent are the traditional dictates of gender in contemporary society and what social and personal costs might they create for the bereaved young adult? As 'postemotionalism' suggests, even in societies where 'feminine' expression is promoted, the requirement to carefully manage such expression may negatively affect bereaved young adults' perceptions of societal empathy and tolerance toward their bereavement experiences.

4.2 Narcissism, autonomy & social capital

The purpose of this subsection is to explore how societal forces can influence bereaved young adults' experiences and perceptions of their social environment. In examining Richard Sennett's (1977/2000) theses on the cultural championing of 'narcissism' and 'autonomy', and Eva Cox's (1995) application of 'social capital', questions arise as to what levels of social support a bereaved individual can reasonably expect to receive on a social-interpersonal level or social-occupational level. Alongside this question is the consideration of what level of support bereaved young adults might perceive as being available to them based

on their own experiences and perceptions of contemporary societal values relating to personal and interpersonal conduct. Also, the theories of Sennett and Cox are somewhat reflective of the concerns of Eckersley (1995/2001) and Webber (2002) that were outlined in Chapter 2. That is, the theories are suggestive of the opportunities and pitfalls that can emerge within a value system that is primarily individualistic, and they are suggestive of the necessity to integrate communal values into Western social spheres that are primarily individualistic in their focus.

4.2.1 Narcissism

Sennett (1977) uses the term 'narcissism' to indicate an emerging societal trend that, in essence, nurtures in individuals an all-encompassing preoccupation with the self. To articulate the nature of 'narcissism' further he makes reference to Reisman's (1950) definitions of inner-directed and outer-directed societies. In the outer-directed society, people make commitments and pursue actions depending on what they perceive to be the needs of others. In the inner-directed society - which Sennett equates with a narcissistic society - people's commitments and goals are predicated upon the sentiments they feel within themselves (Reisman 1950, cited in Sennett 1977: 5). In a narcissistic society, Sennett (1977: 4) argues, "*to know oneself* (italics mine) has become an end, rather than a means through which one knows the world."

Sennett (1977) locates the institutional origins of narcissism in the formation of secular, capitalistic cultures and the decline of traditional authority. Reflective of Eckersley's (1995/2001) views on Australian youth, the breakdown of social-moral 'absolutes' motivates a retreat to the self as the major source of personal meaning. The level of narcissism has also increased in response to the shrinkage of spheres of public activity and the reduction of cities to thoroughfares rather than open meeting places (Sennett 1977, cited in Giddens 1991: 170). Outside events - events in the public sphere - are only of interest to an individual if they reflect his/her needs and desires. Therefore, with the shrinkage of spheres of public activity, along with the reduction in shared

cultural meanings, 'narcissistic' social activity attempts to fill the 'public void' through linking the self meaningfully to external worlds.

However, the major presumption in Sennett's (1977) thesis on 'narcissism' is the constant search for self-identity; this commitment, Sennett argues, is not conducive to sustaining intimate relationships or attaining a sense of civic duty. From the narcissistic perspective, the only objects existing in the external world that are important to the individual are those objects that are deemed by him/her as authentic to the self. On the other hand, the narcissistic pursuit for self-knowledge, Sennett (1977) opines, requires a continual sampling of the many experiences one's social life-world offers; the commitment required in intimate relationships would ultimately reduce the number of opportunities one has to 'sample'. Hence, commitment to a number of relationships - family, spouse, partner, friends, and so on - restricts the quest for self-knowledge, and is often a source of irritation and frustration for the individual. Ultimately, Sennett (1977), like Eckersley (1995), believes that a narcissistic preoccupation with the self as a means for achieving self-understanding and self-actualisation places unrealistic day-to-day expectations on the individual and those with whom he/she is in contact.

A preoccupation with the self would appear, in its very nature, to block a significant number of pathways towards caring for – or about – other people. Likewise, a society that is narcissistic in nature, would presumably invoke little confidence in its members as to the level of availability of social support or even the level of sincerity or genuine concern within interpersonal relations. A sense of 'feminine' nurturance, understanding and care – *outside* of the self – is distinctly lacking. However, in returning to the notion of the 'reflexive self', Giddens (1991) stresses that cultural diagnoses, such as those contained in Sennett's (1977) narcissistic society do not provide a satisfactory account of human agency. As a consequence, it could also be suggested that the appreciation and respect for 'self' inherent in the narcissistic quest for self-knowledge may also translate into the individual's recognition and appreciation

of the importance of the life journey of other people, along with an active concern for their life struggles.

Therefore – and perhaps inadvertently – the quest for 'self' would highlight to individuals the necessity of possessing a greater understanding of the general fears, joys and concerns of other people *as a means* for understanding other people; that to know one's self in a narcissistic sense does not necessarily operate as a means to an end. Followed to its logical ends, such concern and recognition should manifest itself in the individual's perception of a community that is inherently caring and supportive in its nature. To what extent this concern for others, along with the energy and sacrifice it often requires, may be seen as intruding on "the many experiences demanded in the search for self-fulfillment" (Sennett 1977, cited in Giddens 1991: 170) is another question.

Also, it is difficult not to equate the tenets of 'narcissism' – the understanding of self as a means to an end – with the development of self-identity. Presumably, as a secure sense of self is gradually attained in the movement from adolescence to adulthood, the considerable force of the narcissistic drive will dissipate over time. In any regard, does the recognition of this social characteristic as manifested through the behaviour of its members, particularly peers, leave the bereaved young adult more vulnerable to a sense of isolation?

4.2.2 Autonomy

The issue of individual confidence in levels of social connectedness and interpersonal care and concern is addressed further in Sennett's (2000) more recent musings on the nature of the self within society. Here, he highlights the notion of individual 'autonomy'. Working in tandem with the contemporary machinations of the political economy of Western society, 'autonomy' is recognised as the preferred mode of social conduct for each and every individual. It is, Sennett (2000: 284) argues, "a modern fundamental value…someone in control of him or herself commands respect."

Autonomy operates in conjunction with the demands of modern corporations and companies in the sense that the modern worker needs to adapt to – and work effectively within – the increasingly flexible nature of the workplace. The worker needs to adapt in a 'controlled' manner; these values echo masculine imperatives and 'healthist' social responsibilities. Whether the preoccupation with 'autonomy' extends beyond the social-occupational level, Sennett (2000) does not address, although he does suggest the futility of relationships where individuals, as proudly independent beings, actively deny any level of dependence on each other.

What is particularly pertinent to this present study is Sennett's (2000: 284) assertion that the "politics of autonomy arise…from a horror of dependency" and that this "horror of dependency (on others) is lodged deep in modern consciousness." In considering the overall influence of political and economic domains within a multitude of social spheres, a question mark appears over the social acceptability and desirability of individual behaviour that suggests a person is continually dependent on others.

Dependency, in so far that it is a polar opposite to autonomy, would not appear to be equated with political progressiveness or economic growth. Furthermore, in light of the individual responsibility inherent in 'healthism' and the general social devaluation of 'feminine' traits (in comparison with 'masculine' traits) – alongside this 'autonomous' discomfort with interpersonal need – Sennett's (2000: 284) positioning of dependency as a "source of social dishonour" does not appear too excessive an assertion.

If 'autonomy' is, as Sennett (2000) argues, highly valued in Western societies, and its cultural promotion consequently creates a level of guilt or a sense of failure in the individual when he/she experiences feelings of dependency on others, the implications for the bereaved individual successfully procuring social support would not appear particularly probable. The 'social allowances' afforded the grieving person in relation to his/her personal conduct – ie. the 'sick role' and it's associated 'supports' of family and community, work leave,

counselling support services, and so on – may reduce the level of dependency-related shame or guilt he/she experiences. However, as previously mentioned, the time limits and obligations towards a successful recovery, both of which are also associated with the 'sick role', remove these allowances after a certain period of time. Following Sennett's (2000) evaluation of cultural values, a return to the autonomous individual would be deemed necessary, at least on a social-occupational level.

4.2.3 Social Capital

Conversely, in Eva Cox's (1995) theoretical application of 'social capital', communal values are preferred over individualistic ones. It would appear this preference functions to redress an assumed imbalance, namely the emphasis given to individualistic philosophies at the expense of more communal philosophies. With 'social capital', dependency is viewed in a distinctly positive light, not as a shameful counterpart to 'masculine' independence, but as part of the means to achieving a desirable level of social cohesion and even as a pathway for optimising economic growth.

On the latter point, 'social capital' replaces competition with cooperation as the primary social philosophy for encouraging economic prosperity. Ideally, cooperation between individuals builds faith and trust in each other; as well as promoting social networks and expanding their level of inclusiveness. Cox (1995, para. 13) refers to Putnam's (1995) citing of numerous studies that display a correlation between "high levels of civic culture, comfortable lifestyles and positive economic outcomes."

Trust between individuals, and acceptance of 'others' are predominant social goals in the theory and application of 'social capital'. According to Cox (1995: para. 7) the term "refers to the processes between people which establish networks, norms, social trust and facilitate co-ordination and co-operation for mutual benefit." On this level, Bulleen (1999, para. 7) observes that 'social capital' is not located within the individual person or within the social structure, but rather it is found in the space between people. While human capital refers

to the skills and knowledge an individual has thus far accumulated (Cox 1995), social capital concentrates on the connections made between individuals (Putnam 1995). The 'capital' that develops between people can positively influence both individuals and social structures.

In theory then, the strengthening of interpersonal connections enables and promotes greater social tolerance and understanding of 'difference'. To find connections and common ground with others reduces the level of tension and discomfort that commonly arises from the discovery and/or realisation that others have beliefs or values different from our own (such as ethnicity, life experience, family background, religious affiliations, and moral upbringing). As Cox (1995: para. 14) argues, "Experiences which engender trust and a recognition of common ground, allow people to move from the defensive 'I' to the mutual 'we'."

As a model for everyday living, social capital, unlike narcissism and autonomy, would ideally engender in each person a faith in society and its members. That is, a trust and a belief in others' capacities and abilities to empathise, care, attempt to understand and be tolerant, as well as engendering a confidence in one's own interpersonal abilities. This theoretical line reflects the literature of Osterweis, Soloman and Green (1984) which highlights the view that the bereaved individual gains as much from the perception of availability of social support as from the actuality of the support itself.

Also, the equating of social connectedness with economic benefits is perhaps suggestive of a shrewd attempt to humanise any cultural preoccupation with economy prosperity and its associated values. From this perspective, the interrelationship of social connectedness and economic benefits would ideally lead to the cultural realisation that a preoccupation with economic prosperity is largely unnecessary as long as 'social capital' is promoted continuously in Western culture. Take care of one and the other takes care of itself – at least in theory.

However, as Cox (1995) opines, the individuals' effective accumulation of 'social capital' is threatened by the conditions of everyday living, such as the increased pace of living, longer work hours, the proliferation of home-based media entertainments, and the juggling of work and family commitments. With the individual, time is needed – time to relax, think and converse – along with the conscious recognition of individuals of the need to build 'social capital' in a fashion that was achieved unconsciously in decades past (Cox 1995: 11). 'Social capital' may represent an attractive social and individual mindset, in terms of social cohesion and individual contentedness, but its very existence appears borne from the discontents of contemporary living. As such, these conditions are what potentially restrict the proliferation of its values and they constitute what it needs to transcend.

The social and personal value of the individual building 'social capital' through interaction within groups and organisations – such as sport, work, and peer-based groups – is a common theme in the 'social capital' literature (Putnam 1995; Cox 1995; Bulleen 1999). The social interaction, tolerance and understanding offered in grief support groups is an obvious example of the bereaved young adult accumulating 'social capital'. However, to return to Gordon's (2003) argument, the bereaved individual needs to make connections with – and experience acceptance from – a wider spectrum of society than is offered through support organisations.

The themes that characterise 'social capital' highlight the importance of social networks, particularly in terms of support options when bereavement occurs. Ultimately, the seemingly competing contemporary discourses of 'narcissism', 'autonomy' and 'social capital' proffer the question of how bereaved young adults experience their social life-world. How might they perceive the general nature of their social interactions (supportive or superficial) and what are their beliefs in regards to societal values (individualistic, communal, a combination of both)? Do they note a post-bereavement change and/or development in beliefs regarding the nature of society and social interactions?

4.3 Conclusion

As previously mentioned, these disparate theoretical traditions have been combined to position the bereaved young adult as both an active agent operating within his/her society, and an individual adapting to a transformed social life-world. The combination of theories from Chapters 3 and 4 enable a multilevel analysis – individual, social, societal – of the study's key concerns of young adult bereavement, social isolation and the influence of gender.

A transformed social life-world is suggested in the theories of gender examined for this study. The theories posit a contemporary social life-world that, at once, is more encouraging of wider social displays of emotional expression from men and women, yet remains influenced by traditional 'ways of doing gender'. In this regard, the social costs of emotional expression remain prominent in the public consciousness.

In relation to public consciousness, theories of 'narcissism', 'autonomy' and 'social capital' paint a conflicting social life-world of human need and societal values. On one level, the independent individual is socially valued above those who display a need for other-support, and on another level, 'social capital' espouses the value of 'connections between individuals' to nurture healthy and competent human agents. The combination of 'societal forces' theories elucidate the attainment of social support which can at once be enabled and thwarted by societal pressures.

CHAPTER 5

METHODOLOGY

As previously stated, the phenomenology of the young adult's experience of bereavement is the principal focus of this study. The reasons why grief may be perceived by counsellors, or by bereaved young adults themselves, as promoting social isolation is a further issue emanating from this focus. There is also consideration of the overall influence gender may have on the bereavement-related experiences of young adults, particularly in relation to how social isolation is experienced.

What is most apparent in this study is the need to employ social research methods that will help elicit in-depth responses from bereaved young adults that outline the changes – or lack thereof – that have occurred in their interpersonal interactions, thought processes, behaviour and emotions since the bereavement occurred. A methodology that facilitates this focus – the bereaved individual's subjective experience of his/her social life-world – will be outlined in the first section of this chapter. For instance, the reasons why particular social research methods are being utilised – using the semi-structured interview format rather a questionnaire – will be outlined. Also, consideration of the methodological flaws and ethical issues associated with this approach will occur, along with a discussion of the methods by which potential participants – both bereaved young adults and counsellors – were located. The latter part of this chapter will provide an overview of how the methodological approach developed and altered during the actual interview component of the study, as well as how the data collated was analysed.

The methodological plan of this study will be examined in the following subsections; *5.1 interviewing bereaved young adults; 5.2 phenomenology and the semi-structured interview; 5.3 participants – bereaved young adult interviews; 5.4 socially desirable responding; 5.5 interviewing counsellors; 5.6 participants – counsellor interviews; 5.7 interview questions; 5.8 ethical*

considerations – interviewing participants; 5.9 ethical considerations – the competencies of the researcher; 5.10 analysing the data; 5.11 personality and society; 5.12 participant details; 5.13 locating and interviewing bereaved young adults; 5.14 counsellors' accounts; 5.15 the researcher's experiences; and 5.16 limitations in representation.

5.1 Interviewing bereaved young adults

In developing a methodology for research – one that concentrates primarily on the subjective experiences bereaved young adults have had in their social life-world – it soon became apparent that an interview format would best facilitate the study's aims. The format seemed most appropriate for 'drawing out' and examining the young adults' perceptions and personal experience of social interaction and societal values. This subsection will outline how the methodology was developed and why particular choices were made in the process.

Initially, a quantitative approach that involved utilising survey questionnaires was considered for this study. This questionnaire format was useful for two particular reasons; a) it would accommodate the participation of a large number of individuals, and b) this accommodation would be beneficial in terms of procuring a substantial amount of comparative data, which in turn allows a significant level of generalising to the wider community (Burdess 1997).

However, the quantitative characteristics of the survey questionnaire ultimately ruled this format out. In short, the format would compromise the exploratory nature of the study, placing significant restrictions on both participants and researcher. Given that the format only allows participants a fixed set of answers, it seemed highly likely that the possibilities of their providing comprehensive and wide-ranging accounts of their experiences would be significantly reduced. For the researcher, there are restrictions placed on pursuing and asking for elaboration upon particularly relevant and/or unexpected responses that participants provide. A further issue relates to the general tendency for only a small percentage of participants to actually return

their questionnaires (Burdess 1997), leaving the interviewer with an untenably low response rate in terms of generalisability of results.

A qualitative approach that was initially considered was the structured interview. The specification of this format is that the interviewer has to organise and develop a fixed order of questions to ask the interviewee. As well as this, the interviewer needs to maintain the same context of questioning for each participant. A common consequence of a fixed order of questions is that participants are restricted to a fixed range of answers (Bryman 2001).

These restrictions left the impression that the structured interview format would be largely unsuitable for this study, particularly in relation to the interviewing of bereaved young adults. The structural dictates of this format seemed too impersonal in their 'fixedness' for approaching experiences of grief sensitively and openly. Furthermore, these structural dictates appeared quite similar in effect to the dictates found in survey questionnaires. That is, they would appear to stifle any examination of unexpected and/or particularly relevant answers, and this would seem counterproductive towards a thorough exploration of the subject matter.

On the basis of having considered the survey questionnaire and the structured interview as methodological possibilities, it became apparent that an interview format with a 'freer' structure was necessary. That is, an interview format that allowed a greater degree of latitude in terms of exploring unforeseen issues, or issues particularly pertinent to the subject matter. On face value, the semi-structured interview appeared to facilitate this necessity. According to Bryman (2001), the format requires the interviewer to have compiled a general number, and a general sequence, of questions. However, the structure can be deviated from through either varying the order of the questions – mainly to accommodate the direction the interviewee's answers progress – or asking further questions, in order to examine in greater depth a significant or unexpected reply (Bryman 2001). The format may require a basic structure - a basic number of themes to be explored – but the structure operates to promote a less formal interview

environment. Ideally, the format should inject a more conversational tone into proceedings, as opposed to a strict, question-answer scenario. The tone should provide a more relaxed and less intimidating experience for both interviewer and interviewee.

5.2 Phenomenology and the semi-structured interview

Layder (1993: 116) observes that the design of the semi-structured interview is such that the perceptions, recollections and feelings interviewee's have of their social environment – over an extended period of time – become the central concern of the study. Likewise, recollections of events and interactions from the immediate past are given a less central focus (Layder 1993).

Overall, Layder's (1993) assessment is a positive one for this study in that the semi-structured interview, as a central component of the study's methodology, complements the principal theoretical perspective of phenomenology. The study is not so much asking bereaved young adults to provide recollections from the immediate past, as it is asking for an overall appraisal of their post-bereavement social experiences. Of course, participants may then provide detail to their appraisals with recollections of specific events that have characterised their general social experience of grief.

5.3 Participants – bereaved young adult interviews

For this study, the initial selection criteria for 'young adults' was specified as people between the ages of 18 and 29 years when a sibling (or siblings) died. Some qualification of the term 'sibling who died' is necessary as it will be used quite prominently in the results and analysis chapters (Chapter 5-10). It is being used to avoid the term 'deceased sibling' which, at least on the basis of my experiences with The Compassionate Friends, can be found offensive. 'Deceased' can be felt to denote a cessation of 'all the person is', not just body, but spirit as well. At the same time, 'sibling who died' might suggest a relatively slow and 'peaceful' death for the sibling, but it is actually being used as an all-encompassing term to cover vehicular accident, illness, suicide, and so forth. Its primary usage is to avoid the term 'deceased'.

According to the Australian Bureau of Statistics, it is individuals aged 15-29 years who fit into the 'young adult' category (ABS 2000). However, this study concentrates on the effect of bereavement on young people who have recently left the secondary school environment and are in the process of establishing themselves in the 'wider world'; hence the age range has been reduced to 18-29 years. The decision to classify 'bereaved young adults' as young people bereaved of siblings was made for the purposes of narrowing the field of participants. Given the small size of the sample, no attempt was made to select a sample that was statistically representative of the population in relation to socioeconomic class, race, ethnicity and religion. However, age and sex were selectively employed as well as rural/urban location.

However, while some potential comparative data will be avoided – for example, parent bereavement versus sibling bereavement – other comparative data that may provide an insight into the bereavement experience will be considered. For instance, no less than one year and no more than ten years must have passed since each participant was bereaved. The nine-year space is to ensure a comparison can be made between the experiences of young adults whose bereavement has been relatively 'recent' and those who are further 'down the track' (for example, more than five years since the sibling's death occurred).

The exclusion of young adults, whose bereavement occurred within a year of when the interview takes place, is due to a concern expressed by Deakin University Human Research Ethics Sub-Committee, in relation to the sensitivity of the subject matter. The Sub-Committee advised that from an ethical point of view, the interviewing of such recently bereaved individuals would be inappropriate (see Appendix A).

The projected number of interviewees was thirty; when no new knowledge was gained, recruiting of participants would cease. Participants were recruited though The Compassionate Friends (TCF), a bereavement support organisation that has locations in Melbourne and Geelong. TCF was prepared to advertise

the study in their April-May 2004 newsletters (see Appendix C); the organisation has both a parents and siblings newsletter. The advertisement consists of three short paragraphs outlining what the study entails, and inviting bereaved young adults to participate (see Appendix D). The interviews – which run a projected hour to an hour and a half in length – were conducted in the participants' homes or at other locations that they specified. The most important factor in the choice of location was that the participant felt comfortable within that environment to talk openly about their bereavement-related experiences.

5.4 Socially desirable responding

One of the initial motivations for conducting counsellor interviews arose from a concern I had in regard to socially desirable responding (Nachmias & Nachmias 1981). According to Nachmias and Nachmias (1981: 222), "the term social desirability refers to the tendency of respondents to agree with questions that support accepted norms or that are perceived as socially desirable."

My concern was that the validity of the interviews of bereaved young adults might be compromised by the possible desire of respondents to present (to the researcher) a more positive appraisal of their bereavement experiences than had actually been the case. A study that alludes to experiences of loneliness, social rejection and the inability to 'master' feelings of grief, might be threatening to participants in terms of the possibility of their having to refer to personal thoughts and behaviours that could be deemed as 'socially undesirable'.

Two initial measures were taken with the goal of reducing the possibilities of socially desirable responding occurring. Firstly, participants were made aware of my own background as a bereaved sibling in the study's advertising materials for recruiting participants (see Appendix D); my bereavement-status was restated at the beginning of the interviews. Ideally, this measure should operate to reassure each participant that any thought or behaviour that might be considered 'socially undesirable' to some – that is, the 'unaffected' observer – is potentially more understandable to others – namely a similarly bereaved

individual. In short, the interviewer can be seen as providing more an 'empathetic ear' than a critical eye.

Secondly, participants were informed in the Plain Statement Language (PLS) (see Appendix E) and at the beginning of the interview (see Appendices F & G), that pseudonyms would be used for themselves and their deceased siblings (see subsection 'ethical considerations' below). In this sense, even if the participants believed that any reader of this study might consider the thoughts and actions they reveal to the researcher as being socially undesirable, their anonymity gave them the 'freedom' to relate experiences without fear of social consequences. The PLS also informed them of the storage of the interview tapes, interview transcripts and consent forms within a locked filing cabinet at Deakin University's Waurn Ponds campus. Finally the PLS explained that access to these materials would be restricted to my supervisor and myself, and in keeping with the university's Code of Good Practice, the materials would be destroyed approximately six years after the study's completion.

5.5 Interviewing counsellors

At its simplest level, the decision to interview counsellors was motivated by the researcher's desire to obtain a perspective on youth bereavement that derived from a different source; whether the counsellors' perspectives on youth bereavement mirrors the bereaved young adults' views on their own personal experiences constitutes a further avenue of investigation.

The principal motivation relates to the possibility of socially desirable responding occurring within the bereaved young adults' interviews. While a counsellor may stand 'outside' the experiences of the bereaved individuals, his/her professional environment ideally offers a private space for a bereaved individual that is permissive, and even encouraging, of 'open' expressions of grief (Gordon n.d.) – for example, a preoccupation with the person who died, emotional and/or verbal outbursts of anger and disappointment.

In this regard, bereavement experiences can be talked about openly and without fear of social judgement, although the level of openness may be coloured by the quality of the relationship between counsellor and client. So, in the context of this study, the counsellor interviews can be considered to function as a 'checking point'; that is, for monitoring whether or not the responses of bereaved interview participants might have been falling into a socially desirable mindset. Also, through interviewing counsellors another perspective on the level of pervasiveness of social isolation in the bereavement experience of young adults is accessed. This satisfied the need to 'triangulate' sources of information for the study. 'Triangulation' establishes the methodological "principle that multiple methods should be used in every investigation, since no method is ever free of rival causal factors" (Denzin 1989: 25).

Ultimately, as a path to self-understanding and self-reflection, the counsellor's office is an environment where particularly personal appraisals of life events are not subject to wider social judgement, even though other people may judge the mere act of seeing a counsellor in negative terms. For instance, as an admission of emotional fragility and/or an inability to cope with life crises. Still, to return to the theoretical perspective of Williams and Bendelow (1998), the infiltration of the 'therapeutic' into the 'everyday' may have helped remove any stigmas associated with seeing a counsellor.

5.6 Participants – counsellor interviews

Presumably, the counsellor interviews would provide insights into youth bereavement that the interviews with the young adults might otherwise have not revealed. At this point, it does need to be noted that the counsellors interviewed were not necessarily counselling the bereaved young adults interviewed for this study.

In the overall analysis of the counsellor interviews, the most important findings relate to the general patterns that emerge between each of the counsellor's observations of bereavement experiences. Of course what each counsellor revealed about the nature of bereaved young adults' experiences would

constitute hearsay. Taken together, patterns of observation emerged to the point where the 'individuality' of hearsay is overtaken by the commonalities found in counsellors' observations; the research plan to interview five counsellors facilitated this goal. A further number of interviews were planned if these interviews had related no generalities in bereavement experience.

However, while patterns of observation may be the central research goal, the latitude to examine any unexpected or particularly pertinent issues that emerge in the course of the interviews was also desired. So, again the semi-structured interview format was utilised, specifically for the purpose of allowing the researcher to diverge, if necessary, from the basic structure of the interview (Kvale 1996: 124). As with the bereaved young adult interviews, the counsellor interviews ran for an hour to an hour and a half in length (see Appendix H).

In terms of locating counsellors, the plan was to interview a mix of counsellors in private practice and government employment. This was to help ensure that the counsellors, as a collective, have come into contact with a 'diverse' range of bereaved young adults in terms of socio-economic status, ethnic background, level of education, and other variables. For instance, to concentrate solely on counsellors in private practice may have restricted the representation of bereaved young adults to those individuals of middle- and upper-middle class backgrounds. An immediate question to be asked of counsellors regards the reasons they believe bereaved young adults seek their services in the first place.

5.7 Interview questions
A series of questions were developed for both the counsellor and young adult interviews with the central aim of 'building a profile' of the – potentially – socially isolated bereaved young adult (see Appendices I - K). The review of relevant literature and the standpoints of various theoretical perspectives have been particularly influential in the development of the questions. With regard to the bereaved young adults, none of the questions actually contain a direct reference to the concept of social isolation. However, they do allude to the possibility of social isolation having been experienced by the young adult,

whereas with the counsellor interviews, the question of the significance of social isolation in the bereavement experience was directly addressed.

The term 'social isolation' was avoided out of concern that over usage of the term could bias the responses of the bereaved participants. If the interviewer emphasised the experience of social isolation, then participant responses may have given the impression that social isolation was a more significant factor in the bereavement experiences of young adults than was actually the case. The questions were developed to allude to the possibility of experiences of social isolation. However, as will be indicated below, the questions equally allude to the possibility of social support having been effectively procured, with social isolation, as a consequence, being a fairly minimal occurrence in the experience of young adults.

As will be shown, the questions and concerns that have emanated from the sociological theory and previous youth bereavement/social isolation/gender-related research relevant to this present study are reflected in the form and direction the questions have taken. The principal line of questioning, for both the counsellors and bereaved young adults, was concerned with where social support had and had not been found by the bereaved individual (from family members, friends, work colleagues, counsellors, and others).

From there, a series of questions were asked to ascertain reasons from both the bereaved and the counsellors as to why they believe social support has or has not been found in particular social spheres. For instance, one question asked whether and/or how the values or goals of bereaved young adults have changed since the bereavement occurred. This line of questioning echoes the phenomenological concern of 'disruption' occurring within the individual's subjective typifications of his/her social life-world, and how, as a consequence of this disruption, he/she will then adapt to this 'new' social life-world (Psathas 1973). Of course this adaption may not tally with the present life-world preoccupations of his/her peers or work colleagues.

A question asking what effects bereaved respondents believe bereavement, and the subsequent grief, has had on their a) ability to concentrate, b) sleep patterns, c) eating patterns and d) ability to combat stress, is informed by the widespread contention that bereavement constitutes a major life stressor (Osterweis, Soloman & Green 1984: 5). Presumably, negative effects would make social interaction a more daunting, even exhausting prospect. The individual is not operating at an optimal level, but would this increase the probability of him/her becoming socially isolated?

Another question – informed by Goffman's (1990) concept of 'dramaturgical stress' and Balk's (2001) research into bereaved university students – asked whether the young adults felt that they do or do not need to disguise or downplay feelings of grief in order to be accepted in a social situation. To gain some perspective on 'the generalised other' of bereaved young adults, participants were asked, on the basis of their own experience, how compassionate and understanding they believe Western society (or indeed the particular groups and subcultures with which they commonly come in contact with) is towards the experiences of bereaved youth. The opinion of counsellors on this matter was also sought, based on the dialogues they have had with bereaved young adults.

An example of a question alluding to levels of social understanding would be one that asks how much 'grieving time' do they believe peers, family, work colleagues, and so on, allow them before a near-to-complete 'recovery' from bereavement is expected? These themes of social tolerance and the weight of social obligation and responsibility have emerged from a number of the previously outlined theoretical perspectives – 'healthism', 'the sick role', 'narcissism' and 'social capital'. However, while these questions facilitated discussion of issues relevant to this study, I do want to stress the importance of also asking 'counter-questions' in the semi-structured interviews. To elaborate on this goal with an example, I deemed it as important to ask in what social situations or social spheres bereaved individuals had found social support as it would be to ask where they have not found support. To only ask where they

have found support is to (potentially) direct the participant to reflect on his/her experiences, or the experiences of others, from a particular perspective. This may have led participants to overlook other significant occurrences or patterns in their bereavement experiences. In this sense, counter-questions can function to 'open out' the participants' level of reflection and observation.

Presumably, the risk with counter-questions is that bereaved participants may continually contradict their previous observations and/or reflections, even though this pattern of response may itself have some analytical value. Still, one of the major goals in the development of these questions has been to avoid the use of leading questions and reduce the level of scope in the researcher's interpretation of data.

As Shipman (1997: 87) points out, social scientists have a tendency to concentrate on vulnerable social groups for a number of reasons: to help them, to determine what system/s produces the vulnerability, and also what the vulnerability of the group can say about the nature of society as a whole. In the end however, such seemingly honourable intentions may paint a skewed picture of a social phenomenon. As Shipman (1997: 87) opines, "the vulnerable can easily be led to answers in questionnaires and interviews." In attempting to avoid a skewed recollection of experience, counter-questions have a particularly important role to play.

In relation to gender, the extent of its influence in terms of bereavement experiences was considered in the process of analysing the transcribed interviews. I addressed the following questions: are there gendered responses to bereavement? Does the individual's gender determine the type of social connection or disconnection that he/she experiences? The identifying details of each bereaved participant – such as religious denomination, amount of time that has passed since the death/s occurred, sex and birth order of the sibling who died – were also analysed in the course of this study. This was to establish if there are any patterns between the bereavement experiences of the young adults,

particularly in relation to the experience of social isolation and whether it appears to fall outside – *or* indeed it interacts with – the influence of gender.

There is also the benefit of establishing (potentially) comparative data. For example, I analysed the data collated to see if it was suggestive of a relationship between the type of death and the level of social isolation the bereaved sibling subsequently experiences. As another example –data analysis included assessing if the negative experience of social isolation emerged as a more significant issue for the bereaved young adults bereaved within a three year period than it did for those for whom more time had passed since the sibling's death. Consequently, participants were asked to fill out a short 'identifying details' questionnaire before the interview began (see Appendices L & M). However it needs to be noted that some of the questions (especially type of death), given their sensitivity, were asked in the course of the interview, rather than upfront in the form of the identifying details questionnaire.

Lastly, in the course of the bereaved participant interviews, questions were asked as to whether ethnic background (and associated beliefs) and spiritual/religious beliefs had provided some personally beneficial approaches for coping with grief.

5.8 Ethical considerations - interviewing participants

The predominant ethical issue concerns the involvement of bereaved young adults in this study. With the aspects of their lives they were asked to elaborate upon being of a particularly sensitive and personal nature, the stress/risk factors of this study cannot be underestimated. It was possible that the questions I asked would bring to the fore feelings that had previously been played down or even repressed. The interview experience may have also left participants in a state of emotional flux.

With my previous study of bereaved youth (McNess 2002), each participant spoke at a later date about how they felt the opportunity to talk openly about bereavement-related experiences had been a positive and valuable experience.

However, despite those outcomes, I approached this study with a similar level of caution as I did the previous study. For instance, in case the interviews left bereaved participants feeling upset or unsettled, I informed them in the Plain Language Statement (see Appendix E), and in the course of the interviews, that if they wished they could contact a named counsellor at Barwon Paediatric Bereavement Programme (for Geelong participants), or counsellors at TCF in Canterbury (for Melbourne participants).

5.9 Ethical considerations - the competencies of the researcher

As executive approval from the Deakin University Human Research Ethics Sub-Committee was necessary in order to carry out the interview component of this study (see Appendices A & B), I was also required to consider what qualities would make me a competent and suitable interviewer. Firstly, there was the previous study (McNess 2002). Secondly, my own status as a bereaved sibling and finally, in the period of 2000-2001, I held a position as co-group coordinator in a monthly meeting group for bereaved adolescents. These qualities/'qualifications' should at least hold some weight in terms of a) considering the subject matter with a considerable level of personal insight, and b) approaching bereaved participants with a degree of sensitivity.

One particularly beneficial aspect of the data that was collated in the previous study was that for me it solidified the notion of the 'individuality' of bereavement experiences, even though patterns of bereavement experience were also observed. I found my bereavement-related experiences were not necessarily characteristic of the majority of participants. While my experiences were of some benefit to this present study, I also believe that the findings of the previous study informed and benefited this study. That is, they challenged any stereotypical notions I may have developed about the nature of bereavement and the experiences of bereaved individuals, stereotypes that would have developed on account of my own bereavement experiences.

In considering the relationship between personal experience and the interpretation of other's social experiences, I was drawn to Weber's use of the

term 'verstehen' in relation to social research. In translation, the term denotes "understanding" and/or "empathy" (Jureidini 2000: 62). Weber's argument is that the identification of objective social norms and social behaviour provides an insufficient account of social action (Edgar 1980: 49); the sociologist should attempt to understand people's behaviour not from the perspective of an outsider, but from his or her own perspective (Jureidini 2000: 65). This is the basis by which the sociologist "seek(s) to grasp the ideas, belief, motives and goals which move people to act" (Cuff & Payne 1985, cited in Jureidini 2000: 62). I would add then that what is discovered in the process data collection that diverges from personal experience should also sought to be understood. That is, the "personal" provides a platform for further understanding, even if this should – or particularly if it does so – challenge the researcher's personal preconceptions.

A number of measures were taken to ensure the confidentiality of each participant. Pseudonyms were used for both the counsellors and the bereaved young adults in the course of the interviews and in the presentation of the data. Pseudonyms were also used for deceased siblings and any relatives mentioned in the bereaved young adult interviews. The tape-recorded interviews were transcribed and each recording was erased within two weeks of when the interview took place. Transcriptions are stored in a locked filing cabinet. If any participant preferred that his or her interview not to be tape-recorded, then note taking was offered as an alternative method of data collection.

5.10 Analysing the data

Miller (1999) has emphasised that when a single researcher undertakes the analysis of the collated data, then subjective interpretation emerges as a significant methodological issue. It is likely that the analysis will become susceptible to 'positivist' criticisms, particularly that analyses of the same data may vary significantly, depending on the gender, age, class and ethnicity of the researcher (Miller 1999: 45). On this note, the transcribing of interviews is a valuable tool in that the activity can challenge initial interpretations of data.

Transcribing an interview ensures that the researcher becomes familiar with the content of the interview (May 2001: 139).

Note-taking during the interview, by contrast, carries the risk of the researcher overlooking the particularities of phrases and language used, as his/her immediate interpretation of participants' responses and comments takes precedence (Bryman 2001: 317). The researcher may only 'hear' themes or patterns that support his/her various hypotheses and fail to notice disconfirming evidence or variations on given themes. Transcription, on the other hand, facilitates a detailed analysis of data and it ensures that the participants' comments and responses are heard on their own terms (May 2001: 139).

In approaching an analysis of the collated data, Miles and Huberman (1994: 246) emphasise the value in noting the recurring patterns or themes that emerge in the interviews; it is "very productive when the number of cases and/or the data overload is severe." By noting recurring themes and patterns, the collated data begins to take a meaningful shape, or series of shapes, and the implications of the data can begin to be considered. Such an approach was both suitable and helpful to this study, in terms of its ability to order and give shape to what should amount to be a substantial volume of qualitative data.

However, Ross and Lepper (1980; cited in Miles et al. 1994: 246) opine that belief in the existence of a pattern can make the researcher resistant to new evidence that would be suggestive of variation within a given theme/pattern. The analytical value of noting patterns and themes needs to be tempered by openness to disconfirming evidence (Miles et al. 1994). As is the case with this study, the themes and patterns that have arisen from personal experience, previous research and social theory can operate as a guide to approaching the subject matter concisely and effectively. However, it needs to be remembered that they operate merely as guides and should not become thematic preoccupations that blind the researcher to disconfirming evidence. Furthermore, as Katz's (1983: 146) quote below suggests, a certain analytical

conscience is necessary for 'openness' (to disconfirming evidence) to be effectively exercised.

> On what else other than the accuracy of his [sic] analysis in the scene researched can the author rely to avoid a subsequent researcher's discovery of disconfirming data and the consequent charge that the analysis offered exists only in the author's mind? For the analytic researcher, methodological constraints are experienced as existential matters, not as matters of methodical convention
>
> (Katz 1983: 146).

Lofland (1971: 117) notes that researchers "sometimes imagine data collection to be one phase of their work and analysis another." In this sense, the research is 'disconnected' in design as data collection and analysis are conducted in time frames separate from one another (Ezzy 2002: 62). Given the unpredictability of procuring participants for this study, particularly if one is intending for the data to be collated in a relatively short, contained time-frame, then it seems necessary in this regard for the research to be 'integrated' in nature. 'Integrated' means that while it is common for a significant portion of the data analysis to be undertaken after data collection is completed, the analysis can commence during data collection (Ezzy 2002: 62). Furthermore, Ezzy (2002: 61) asserts that conducting these activities in the same time-frame allows the participants to shape the analysis in "a more fundamental way" than if the analysis commenced only at the conclusion of data collection. However, theoretical interpretations and conceptualisations of data during the collection period again need to be tempered by an analytical conscience. Below, Katz (1983) illustrates the responsibility of 'integrated' research to accurately represent the data collated, and again, an openness to disconfirming evidence is necessary for this obligation to be fully realised.

> When encountering a "negative case" – evidence contradicting the current explanation – the researcher must transform it into a confirming case by revising the definition of either the explaining or the explained phenomenon. The researcher is enjoined to seek negative cases and the resulting opportunity to modify the explanation. There is no methodological value in piling up data of a

> sort already determined to be consistent with the theory. Quantification therefore plays no logical role.
>
> (Katz 1983: 130-131)

By noting recurring themes and patterns in the interview transcripts, the analysis of data for this study was operationalised through the method of 'coding'. As mentioned, the noting of recurring patterns is helpful in terms of ordering large amounts of data, as well as locating the principle themes contained within the data. However, one of the main intentions with coding is to link the patterns in the data to the theories and research earlier outlined. Does the data mirror the theory presented or the previous research?

As coding of the transcribed interview proceeds, naturally more data will be collected for the developing categories. Some anticipated categories on the researcher's part are 'types' of social support procured and 'types' of social isolation experienced. Conceivably, as the latter interviews are being coded, some of the categories developed earlier in the analysis will become less relevant overall to the bereaved young adults' social experiences.

In relation to coding, Charmaz (1991: 270) advises the researcher/s to maintain a system of memo-writing. The memos should concentrate on the categories, processes and ideas one develops during and after the collation of data. As part of this system of memo-writing, the notes should over time become more conceptual and the codes more abstract (Charmaz 1991: 270). This system was utilised for this study to assist the process of coding, in that it ultimately enables one to approach the anecdotes, recollections and appraisals of the participants in a more conceptual manner.

5.11 Personality and society

This subsection relates to the above 'analysis of data' in that it takes into account the influence of each participant's personality on the overall 'character' of the data. The quotation below is a multifaceted definition of 'resilience', and among other things it highlights the influence of personality (especially inner

strengths) in relation to how one experiences one's social life-world. However, the quotation also displays the author's awareness of where personal traits can be socially determined.

> What we call resilience is turning out to be an interactive and systematic phenomenon, the product of a complex relationship of inner strengths and outer help throughout a person's life span. Resilience is not only an individual matter. It is the outward and visible sign of a web of relationships and experiences that teach people mastery, doggedness, love, moral courage and hope.
>
> (Butler 1997, cited in Greene & Conrad 2002: 52)

As has been previously emphasised, this study focuses on the bereaved individual's subjective experience of his/her social life-world. The purpose of interviewing thirty bereaved young adults is to locate the commonalities in subjective experience. At the same time, in the course of collecting the data, it needs to be anticipated that within the range of participant responses there may be indications of the influence of personal disposition (such as personality 'types', 'inner strengths' and 'weaknesses') on the individual's experience of bereavement.

If personality does emerge as a significant issue, it is not by intention of the semi-structured interview design. The study, by its sociological nature, encompasses the interrelation between society and the individual; the study would be focusing outside its appropriate domain if it were strictly personality centered. Alternately, these boundaries are not designed to exclude any mention made by individuals of their perceived inner strengths and weaknesses. It would seem likely that an interview centered upon subjective experience of one's social life-world may, on occasion, inspire or even require participants to reflect upon how their own perceived personal traits have played a role in their post-bereavement social experiences. Of course, whether these reflections are vocalised or not is another matter.

As Butler's (1997) above definition of resilience infers, external factors (such as outer help) impact upon, or interrelate with, the 'inner strengths' of each

individual. The individual's level of access to a range of social supports (such as family, peers and counselling services) is a prime example of external factors interrelating with the young adult's experience of bereavement. This consideration of external factors may also extend to the counsellor interviews, especially in taking into account each counsellor's own experience of bereavement, and how this experience may influence his/her perception of bereaved young adults' social experiences. This is not necessarily bereavement that is strictly death-related, but that which can encompass relationship breakdown, or loss of faith (for example, loss of faith in God or in the presumed fairness of social structures).

Therefore, the concept of the resilient individual is not centered exclusively on the notion of inner strengths. 'The sociological imagination' (Mills 1959) posits that individuals shape their society whilst being simultaneously shaped within it, so resilience highlights the relationship between 'inner strengths' and 'outer help'. To illustrate with an example, in the data collated for my previous study (McNess 2002), I observed an apparent relationship between levels of social isolation experienced and one's geographical location. That is, if bereaved young adults were living in localities where their peers had known – and interacted with – the sibling prior to their death, then social isolation was less salient in their bereavement experience.

If one bereaved individual is less socially isolated than another – and by extension, it could be perceived the less isolated individual is more 'resilient' than the other – does this denote one individual possesses inner strengths that the other does not? By factoring 'outer help' into the equation, it also asks on a social level 'why one individual might be less 'resilient' than another'. If the individual speaks of inner strengths, then what are the 'outer helps' that have been surrounding them?

However, while the above definition of resilience (Butler 1997, cited in Greene et al. 2002: 52) reminds one that 'inner strength' does not exist independently of social influences, it alternately highlights the influence of personality upon

social experience. In relation to the present study, resilience also alerts the researcher to anticipate data that may be suggestive of the influence of personality.

5.12 Participant details

Thirty-two bereaved young adults from Victoria and New South Wales expressed an interest in participating in the study. Ultimately, twenty-five of those individuals did participate in the study (fifteen women and ten men), five individuals less than the projected thirty. With the counsellor interviews, seven individuals were interviewed for this component of the study, two more than the projected five.

Twenty of the bereaved participant interviews were conducted face-to-face, in most cases at each participant's home. One interview was conducted over the telephone, and the four other interviews were 'conducted' through the email questionnaire. As the majority of interviews were conducted face-to-face, these five exceptions provide some level of 'triangulation' (Denzin 1989) of the data.

Based on participant response, the email questionnaire (see Appendix J) could provide data as detailed and thoughtful as the interviews conducted in person or over the telephone. In fact, for the email questionnaire, participants were given a general window of two months in which to complete it, a sharp contrast to the more 'on the spot' nature of the other interview formats. However, with the email questionnaire, I was more aware of the author's ultimate dependency on what the participant was prepared to offer the study in terms of details of his/her bereavement experience. If responses were sparse and/or vague in detail, I did follow-up contact with the participant. However, the effectiveness of this was only limited as I felt I needed to keep follow-up questions to a bare minimum so as not to make any more significant demands on their time. Also, four of the eight potential 'email' participants did not return their questionnaires. So, while the email questionnaire could provide a rich source of data to be procured, it was less reliable a form of securing participants and ensuring 'usable' responses.

The seven counsellor interviews were conducted either at practices or at homes. Four women and three men were interviewed; one of the male counsellors, JAMES, asked that his interview not be tape-recorded. In this case, notes were taken.

5.13 Locating and interviewing bereaved young adults

Kellehear's (1989) comments below on interviewing people in palliative care largely encapsulate the themes of this subsection, particularly in regard to the factors that motivated the bereaved young adults' participation in the study.

> In the final analysis, one must weigh harm against good and risk against benefit. Without ever questioning the dying about their social experience as they see it and as they interpret it, we are confined to speculation and the opinion of caretakers. Without information about what may or may not be typical, individual dying persons may feel that their own needs are deviant, eccentric or neurotic…the reason for the high participation rate (only four out of 104 declined to participate); the reason why only one person withdrew mid-interview; the main reason why embarrassment, pain, the absence of voice boxes and the presence of tears did not deter, was the explicit and persistent belief that others should know their story, and that others might benefit from knowing it.
>
> (Kellehear 1989: 65)

With interviewing six bereaved young adults for my Honours thesis, there remained the niggling thought that if I had interviewed another six individuals – another six *personalities* – then a substantially different collection of results and observations may have been garnered. By increasing the number of research participants, the possibility of personality significantly influencing the shaping of the data was deemed to be reduced. However, as the male to female ratio of bereaved participants would suggest, finding bereaved male participants for this study proved a particular challenge.

One of the counsellors interviewed for this study had worked as a facilitator for a bereaved young siblings group during the 1990s. The majority of attendees at

these group meetings were female, and a continuing mystery for the counsellor was 'where are the boys?' For a considerable period of time, I felt her question 'haunted' my efforts to recruit male participants.

The majority of female participants were recruited through their responding to The Compassionate Friends (TCF) advertisement. For men, only one of the ten participants responded to the TCF advertisement. A second male participant was recruited through a subsequent TCF advertisement that asked specifically for the participation of men. On the basis of the low response from bereaved young men, it seemed quite conceivable that the gender component of the study would not be workable on a comparative level, unless it focused on how young *women* utilise 'masculine' and/or 'feminine' forms of coping in relation to life crises. Even six months after the Deakin Ethics Committee had approved the study's method of data collection, no further bereaved men had expressed an interest in the study.

By this stage, supervisors, family members, friends, and acquaintances had become well-acquainted with my sense of disappointment. Much to my surprise and relief, it was their networking efforts that secured the interest of eight other bereaved young men; the previous six months soon appeared a mere aberration. A couple of female participants were recruited through the networking route, but by and large this was the method for recruiting men. In my conversations with the bereaved participants, it became apparent that the women had been more willing to put themselves forward as potential participants. The male participants were not apathetic towards the subject matter, but in general their involvement originated from the encouragement of others.

Interestingly, a significant number of the young adults offered their participation out of an altruistic concern for the researcher; they wondered how successfully I would fare in recruiting a substantial number of bereaved individuals for a PhD thesis. This was an interesting perspective for participants to take in light of the study's concern with cultural discomfort surrounding death and grief (which

may influence bereaved young adults' willingness to speak openly), and my own difficulties in procuring male participants.

A smaller number of participants agreed to participate on the basis of their parents' encouragement. A common sentiment from bereaved participants was that they felt the research was potentially of great value to other bereaved young adults and the community in general. In this regard, the feeling that their own recollections and anecdotes could help inform other bereaved young adults inspired their participation. Intriguingly, participants who received satisfactory social support were as likely to cite this motivation as participants who were dissatisfied with support.

Certainly, their overall support of the subject matter was personally encouraging. The value they saw in 'offering' their experiences for the purposes of increasing social awareness felt to me like validation of concerns that motivated this study, namely a lack of public knowledge and recognition of the 'finer points' of grief. The importance of greater social awareness to the bereaved participants was especially evident in their views on the necessity of ongoing social acknowledgement of the sibling who died and one's subsequent grief. This need for acknowledgement emerged regardless of the levels of support one received or the negativity of isolation one experienced.

I felt that a motivation such as this suggested the willingness of participants to provide an upfront and uncompromising account of the grief process as it has been socially experienced. Conversely because of this, I felt a responsibility to ask participants about positive experiences (such as sense of personal growth, social support avenues, grief as a motivating influence), particularly if their recollections veered towards the negative. There is obviously socially beneficial knowledge to be gained in bereaved individuals providing upfront accounts of their experiences, but if participants centre on a particular train of thought, that is not completely representative of their overall experiences, knowledge of the wider context of grief experience is denied. Sometimes the counter questions were effective in bringing out the range of bereavement

experiences anyway. In this regard, it is worth noting that the counter questions rarely suggested any contradiction in the bereaved participants' responses.

Perhaps it due was the concentration on social experience, but during the interviews it was uncommon for participants to become emotional – 'emotional' in terms of 'physical indicators' (notably tearfulness). On the few occasions where there were tears, I hesitated to offer participants the opportunity to withdraw. It was not out of a desire or determination to complete the interview. Indeed to again voice the option of withdrawing I felt to be both a considerate and reasonable action to offer the bereaved participants. Instead, it was a fear that my action might be interpreted as discomfort; that the researcher himself – dealing with the subject of grief no less – was uncomfortable with expressions of emotion. The principal desire for me was to reassure them that their tears were not an awkward or unwelcome display. I reasoned that if any further tearful responses occurred – which they did not – that I would vocalise the option to withdraw.

The most common appraisals of the interview process was that it was 'cathartic' or 'like talking to a good friend'. The general trend was that participants who found the experience 'cathartic' typically were those who reported greater levels of negative isolation. The participants who found the interview 'like talking to a good friend' invariably were those who had reported satisfactory levels of social support.

One way in which the researcher can display respect for the participants is to provide them with feedback on the results after the research has been completed (Liamputtong & Ezzy 2005: 16). For this study, participants (including the counsellors) will be sent out a five-page summary of the results. The option of being sent a copy of the entire thesis (most likely in a .doc file) will also be provided for the participants.

5.14 Counsellor accounts

Like the bereaved participant interviews, the counsellor interviews proved a rich source of data, especially in the overview they provided of the nature of social isolation for bereaved young adults. In light of the possibility of 'socially desirable responses' occurring (particularly on the bereaved participants' part) I kept in mind the possibility of counsellor and bereaved participant responses diverging too significantly from each other. However, apart from the counsellors' references to a form of 'grief response' that was rarely alluded to in any of the bereaved participants' accounts, (see Chapter 7) there was little divergence between the two interview groups. Overall, the counsellors provided valuable summations of issues that emerged in the personal anecdotes of the bereaved participants.

It is worth noting here that the counsellors were particularly sensitive and cautious toward generalising at any level about differences in grief responses and experiences between men and women. It was uncommon for any appraisal of gender not to be prefaced by a 'disclaimer' on the influence of professional and personal experience. The counsellors noted that their comments were not representative of any overarching and definitive study on gender. It was an interesting trend in light of this study's combined theories of gender, such as the interrelationship of 'emotionality' and 'femininity' (Lupton 1998). Taken together, the theories posited a contemporary tension between more expansive notions of gender and the ongoing influence of traditional concepts of gender. They also suggested the social sensitivities that emerge from this tension.

The counsellor NICHOLAS also noted that his own experience of sibling bereavement could possibly inform some of his interpretations of the nature of his clients' grief. With the three counsellors who did work specifically with bereaved individuals, each had previously experienced the death of an immediate family member during their adolescence or young adulthood. On the one hand, their past experiences were suggestive of how bereavement can motivate individuals to support other bereaved individuals, as was sometimes apparent in the bereaved participants' responses. On the other hand, for the

purposes of optimising as 'balanced' a view as possible on sibling bereavement, I found it reassuring to have four other counsellor participants who had not experienced the death of a parent or sibling.

5.15 The researcher's experiences

Given the age I was at the time of conducting the interviews – 29 & 30 years – I was concerned that participants may view me as a *peer*, a peer in the negative sense of the term. That is, judgmental and inclined to compare my own experiences with theirs, but in a fashion not attuned to understanding and empathy (through a respect for difference as much as commonality). Therefore, I felt that withholding information about my own grief experiences in the course of each interview ran the risk of being interpreted by participants as aloofness, and certainly the basis for an unequal relationship. So, if an experience they spoke of mirrored my own, I would – on a number of occasions – provide an example of my own.

I say 'on a number of choice occasions' because sometimes providing a personal example did not suit the present moment. For instance, the bereaved participant may provide a personal example, but this example would immediately generate further reflection from the participant. It seemed my own interjections might (conceivably) threaten to interrupt this reflective and speculative thought. Furthermore, I was concerned that the injection of too many personal examples might create more a sense of one-upmanship than an 'empathy of identification'; a case of the good intentions of the researcher producing a negative, personally distressing experience for an already vulnerable participant. In this respect, even though the researcher's own experience of the subject matter would seem a considerable asset in interpreting social action, the responsibility of the researcher to exercise judgement remains critical. However, wherever possible, I endeavoured to respond to participants' comments in an 'affirming' fashion, as responses "should be designed to reassure the respondent that they are 'OK' and that their experience, whatever it may be, is what the interviewer is interested in" (Liamputtong Rice & Ezzy 1999: 57).

Quite unexpectedly, this approach to creating a sense of equality between researcher and participant became a useful interpretive tool. The bereaved participants' responses to my 'mirror' experience allowed me to gauge whether my initial interpretations of their experience were accurate or representative. Most participants seemed vocal and forthcoming in their evaluation of whether my experience was an appropriate mirror of their own. The need for one's experiences and actions to be properly understood seemed a particularly salient issue for each bereaved participant.

On account of the research stating that both men and women tend to view women as their primary providers of emotional support (Antonucci & Akiyama 1987; Belle 1987; Kessler, McLeod & Wethington 1985, cited in Vandervoort 2000: 4), I did also wonder whether bereaved participants would feel as comfortable to disclose with me as they might a female researcher. Might the male participants, in particular, view discussion with another man about such personal, potentially emotive issues, akin to a loss in social status? As mentioned, offering my own personal experiences was a deliberate method in which to help reduce any possible participant apprehension, and consequently provide an atmosphere conducive to disclosure. However, I did also emphasise my 'shared status' of 'bereaved young adult' in the TCF advertisements. For participants who were not recruited by way of the TCF advertisement, I announced my bereavement status to them prior to the commencement of the interview. I also hoped the announcement of 'shared status' would help allay any perception each participant might possibly have of him/herself as 'other' or 'deviant' on account of his/her bereavement status.

5.16 Limitations in representation

None of the male participants identified themselves as gay; likewise none of the female participants identified themselves as lesbian. What a broader range of sexualities presumably would have provided the study was a broader representation of gender identities and, by extension, a more detailed overview of gendered responses to bereavement.

A couple of the counsellors interviewed wondered whether the experience of bereavement would serve to further dislocate gay and lesbian young adults from the mainstream culture. On the other hand, they wondered if strong support groups existed within these subcultures to help lessen the experience of social dislocation. Or perhaps these subcultures would generally be as uncomfortable with the subject of death, and unknowing in the provision of support, as their 'mainstream' counterparts.

Also, only two of the bereaved participants were of non-Anglo-Saxon heritage. Each individual was of European descent, and each did not feel ethnic beliefs and values had had a considerable influence on their responses to the bereavement and their social experiences of grief.

However, while the study lacked non-Anglo-Saxon representation and presumably lacked representation of non-dominant sexualities, the findings of the data strongly suggested that the influence of any culture (or subculture) would need to be considered in terms of;

a) Cultural attitudes toward the importance of communal support.

b) The culture's level of openness toward – and comfort with – issues of death and grief.

c) Whether there is a cultural promotion of grieving rituals that extend beyond the first month or so following the sibling's death.

5.17 Conclusion

The methodological framework of this study has the primary intent to examine the bereaved young adults' social experiences from a phenomenological perspective. However, this aim has been undertaken with an eye toward the sensitivities inherent in the subject matter. In this regard, it has been gratifying that the bereaved participants have overwhelmingly pointed to the interview experience as being a positive one. In the collation and analysis of the data, it has been evident that representation beyond an Anglo-Saxon, heterosexual 'norm' has been lacking. In consideration of further dimensions that could

impact on young adult bereavement experiences, future research that addresses these unrepresented factors would seem well worthwhile.

CHAPTER 6

SOCIAL ISOLATION

Within the six results and analysis chapters that follow, both a presentation of the trends that emerged in the interview data, and an analysis of the trends, will be undertaken.

In the Methodology chapter, a discussion of the intent in coding the interview data, led to the following question – does the data mirror the theories or the previous research presented? Based on the accounts of the bereaved participants and the counsellors, the data was seen to both mirror and deviate from the theories and previous research presented. Furthermore, the 'particularities' in the accounts of the bereaved participants and the counsellors necessitated a division of the interview trends into the following chapters;

- Chapters 6 and 7 – *Social Isolation* and *Isolating Factors* – will provide an overview of the level of significance social isolation has in the young adult's bereavement experience. The forms in which social isolation is manifest are also outlined.

- Chapters 8, 9 and 10 – *Gendered Responses to Bereavement*; *Sex Differences, Gender and Social Support*; and *Gender and Social Support* – examine, and integrate, the influence of gender into the subject matter of social isolation.

- Chapter 11 – *Social Connectedness: Needs and Expectations that Transcend Gender* – outlines the areas of bereaved young adults' social experiences where personal needs appear to transcend gender difference.

Within this first results and analysis chapter, the significance and the characteristics of social isolation are examined in the following subsections; *7.1 how significant is social isolation?; 7.2 the provision of counselling services;*

7.3 an overview of social isolation; and 7.4 the 'waves of grief' and residual tensions.

To view the demographic and situational details of each bereaved participant, please refer to Appendix N. To view the details on each counsellor, please refer to Appendix O.

6.1 How significant is social isolation?

The majority of the counsellors opined that social isolation was a significant issue in the bereavement experience of young adults, notably more so than any of the bereaved participants reported. The counsellors, as such, were particularly concerned with recognising the extent to which their bereaved clients' periods of solitude were being experienced as 'constructive' in nature (as befits aloneness) or were veering more towards the negative (as befits loneliness). However, this apparent disparity – between the counsellors and the bereaved participants, in relation to the prevalence of social isolation, is worth considering from the context of variation in the interview approaches. That is, the disparity between opinions may have emerged simply as a result of the differences in;

   a) the line of questioning between the counsellor interviews and the bereaved young adult interviews, and

   b) the long-term trust relationship which had developed between counsellors and bereaved young adults which was more conducive to revelation of 'socially unacceptable' feelings, such as loneliness, than a one-off interview with a researcher was.

Some re-iteration on the study's methodology is required. In the counsellor interviews, the question was asked as to whether, on the basis of the counsellor's professional experience, he or she believed social isolation was a significant factor in the bereavement experience of young adults. The issue of social isolation was therefore directly articulated to each counsellor.

This approach was not replicated for the bereaved young adult interviews. Although the Plain Language Statement (PLS) and the The Compassionate Friends (TCF) newsletter advertisement did outline the subject matter of the research (see Appendix D), the question of whether social isolation was – or had been – a significant part of his or her bereavement experience was not asked by the researcher. Any direct reference to the term 'social isolation' came from the participants themselves. The purpose of refraining from using the term 'social isolation' in the interview format was to test whether stated experiences of isolation emerged in the participants' responses as a result of asking them to reflect on their bereavement experiences. One could logically surmise that, in terms of percentages, the 'significance of social isolation' was articulated more often by the counsellors than it was by the bereaved young adults because the issue of social isolation was directly addressed with counsellors during their interviews. One could also surmise that the bereaved young adults who sought counsellor support did so out of a lack of 'meaningful' social interaction.

However, with this in mind, it is also worth noting that the bereaved participants' accounts and recollections of their bereavement experiences did strongly suggest that the counsellors' opinions of the significance of social isolation were valid. Most bereaved participants' accounts did suggest that a level of social isolation had been experienced, although its occurrence was not always presented as negative in nature. What would need to be countered with the counsellor's opinion is that, based on the cross-section of bereaved young adults interviewed, social isolation does not appear to figure significantly in the social experiences of all bereaved young adults.

As will be referred to in this chapter and Chapters 7-11, 'meaningful' support from within a wide range of social support networks (such as workplace, peer group, extended family members, and sporting groups), appeared the most effective buffer against the negative effects of social isolation. It also seemed to increase 'reflexivity' in the bereaved young adult's personal responses to his/her

bereavement. These trends in the data will be given particular emphasis in Chapter 11.

6.2 The provision of counselling services

As mentioned in the Methodology chapter, the question commonly posed by the counsellors was 'Who are the bereaved young adults who do not seek out counselling or support groups?' Have these individuals 'meaningful' and satisfactory social support that placates and substitutes any recognised need for counselling? Or might they be experiencing significant levels of depression [8] and/or social isolation that prevent them from feeling sufficiently self-motivated to seek professional help? Perhaps the action of seeing a counsellor might be considered as emblematic of personal and/or social failings?

Based on the bereaved participants' interviews, the young adults who had a wide range of support networks, and encouraged 'meaningful' interaction, were less likely to seek out counsellors than participants who lacked a similar breadth of 'meaningful' support. Similarly, participants with a small number of close confidants were less likely to seek counselling – at least, it would seem, for a period of time. In their case, they would often feel that their continuing need to talk about the sibling or talk about the ongoing nature of their grief, would ultimately be asking too much of their confidants' time and endurance. They were likely to have articulated the concern that the increasing passage of time since the sibling's death would negatively influence supportive individuals' patience with their ongoing grief. They were also mindful that the passage of time could reduce the sense of immediacy the sibling's death had previously held for their confidants.

The potential difficulties in the counsellor-bereaved young adult relationship will be discussed in Chapter 11. At this juncture, the concentration will be on the provision of counselling services and/or support groups.

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[8] To quote from the Time magazine article "Real Men Get the Blues": '"Depression sometimes precludes its own treatment because you lack the energy to take action," says NIMH [The National Institute for Mental Health] director, Dr. Thomas Insel, who was trained as a psychiatrist. "It's like a loss of life force"' (Kluger September 22 2003: para. 5).

In situations where the bereaved individual had a wide range of social contacts, but received little support and/or 'meaningfulness' from within them, counselling and/or support groups were often sought out. Also, two of the three male counsellors interviewed mentioned the tendency of bereaved men (at least the bereaved young men they had come in contact with) to utilise counselling services as a base-of-sorts for emotional disclosure. Each 'disclosure session' could potentially operate as a form of emotional catharsis, after which the bereaved men could return to the everyday social arenas, within which they had not felt comfortable to express their bereavement experiences. The above examples show an overall trend where social isolation, regardless of whether it is manifest in physical separateness or a *sense* of separateness (or both), can motivate the utilisation of counselling services.

6.3 An overview of social isolation

6.3.1 Positive isolation

As mentioned above, the counsellors were asked directly how significantly they believed social isolation figured in the bereavement experiences of young adults. Given this line of questioning, they also proffered observations on the nature of social isolation and the forms which it can take. As JOHN's (counsellor) comments below suggest, there is a certain inevitability that with each bereaved young adult some level of social isolation will be experienced. He also observed a personal benefit for the bereaved young adult – and given the individual benefits, a presumably wider social benefit – in the experience of social isolation.

> JOHN (counsellor): I would think that when people take the opportunity to withdraw and reflect that is not necessarily a bad thing. Often it's a matter of course rather than a conscious choice, and it is likely that there is a positive outcome from that. People are trying to process their experience and develop an understanding from it…[through isolating themselves] they allow themselves to feel the loss of the loved one. The isolation in a sense helps them to experience

the physical component, and from that follows the intellectual and spiritual. They're removing themselves; it's almost mirroring the loss of the person.

The idea of 'processing' an experience and developing an understanding from it is reminiscent of Larson's (1990) examination of research on solitude and psychological well-being. In the development of a stable self-identity, time spent alone can assist with the formation of identity, allowing reflective thought and autonomous behaviour away from the influence of other people (Larson 1990). From a phenomenological perspective, the disruption the bereavement creates in a person's understanding of his/her social life-world ultimately requires a re-evaluation of his/her prior 'stock of (social) knowledge' (Psathas 1973). For the young adult, the challenges of developing a stable self-identity are presumably compounded by the challenges of adapting to a new reality that, in essence, questions values and beliefs about how society operates. The possibilities of social isolation allowing time for both reflective thought and the opportunity to make some personal sense and/or adaptation to life without the sibling would, therefore, appear valuable for the bereaved young adult. The risks of spending too much time alone is another matter, which will be addressed later in this chapter.

In NICHOLAS' (counsellor) comments below there is further development of the theme that social isolation *almost mirrors* the loss of a loved one; the physical isolation can often provide an environment conducive to 'connecting' with the sibling.

> NICHOLAS (counsellor): Most young adults I come across will at times say "Hey, I just felt I needed some time alone, and I want other people to just leave me alone." And they will say "I really need to do that." They see it as a positive to have that space away from other people… whether it's a brother or sister, they will talk about wanting to spend time with the person who has died…going to the cemetery or some place where they feel a connection with that person, and they want to do that alone. They might talk about doing that sort of thing as a family group, but they also talk about doing these things on their own as a positive thing.

In this regard, a sense of connection and/or understanding is often experienced alongside the need – and the struggle – to *incorporate* the sibling's death into one's future life plans. In JANE's (counsellor) comments below, she refers to the bereavement experiences of parents, but the sentiments and quandaries expressed here emerged as salient in the bereavement experiences of the young adults interviewed as well. The need to accommodate the sibling's death into one's everyday life and sense of identity is situated against the uncertainties, borne of experience and perception, regarding the general social tolerance towards his/her ongoing experiences of grief.

> JANE (counsellor): I have been involved with [this bereavement organisation] for a long time – 18 years I think…I've had a lot to do with bereaved parents. I've got something of an understanding of their experience and this man was sitting next to me in the coffee group I go to in the mornings, and he was saying "I couldn't believe it, there was this thing on the TV last night with these people who wanted to put something on the grave of their child. It's seven years on – you think they'd want to get on with their lives." I thought "Oh well, what am I going to say here?" I think when a child dies you have to give them ten years – at least. People do get on with their lives, but there is still a place for the child. Even there, it's the criticism, the implied criticism – they shouldn't be doing that now, they shouldn't be doing it that way. I'm sure that that is an isolating experience for a lot of people in their grief.

The example of a bereaved participant, DENISE, typified this 'accommodation/social tolerance' tension.

> DENISE: Some of [my friends] have said I should be good by now. I've got a few friends, I don't know whether you would call them close friends because they sort of say "It's been a year" and you think "Well, yeah." They seem to think it's old news – because it happened a year ago I should be good. They expect me to be good and have my life back to normal…they seem to expect that after a year you'll be all fixed. Like you're a broken toy – everything should be back in order; you should be back at work and doing your hobbies. Everything

should be normal now. Like it's old news, but it's not like that, not like fixing a broken toy.

6.3.2 Problems with isolation

The disparity between a) the process of accommodating the sibling's death into everyday living, and b) the general experience of limited community tolerance and understanding can therefore contribute to the experience of social isolation. For the bereaved young adults to reach some level of acceptance of the bereavement without accompanying (potentially) negative external judgements, social isolation – at least in periodical bouts – would appear a practical necessity for them. However, the counsellors felt that a characteristic problem with socially isolating one's self was when it ceased to be a constructive part of expressing and processing one's bereavement experiences. Furthermore, the anxiety associated with continually isolating one's self from interacting with others could become a self-reinforcing 'trap'.

> JOHN (counsellor): I mean, if [the social isolation] became a main feature in their lives…if it was occurring over days and continuing into weeks and months, then you'd need to be concerned about it. Short periods of isolation would be part of an understandable and expected process. Not that I believe that there are set stages or a template for how one should be grieving…when it ceases from being a healthy part of trying to work through something, then it becomes avoidance or withdrawal which in fact are symptoms of trauma. There's an anxious component to that which is reinforced whenever the avoidance takes place. *You wouldn't want that to become a kind of pattern over an extended period of time because it's self-reinforcing* (italics mine).

The association of social isolation and anxiety becomes particularly interesting from a sociological viewpoint when reconsidering the notions of social deviance in relation to this study's subject matter (see Introduction; page 12). According to Halvorsen (2002: 4) withdrawing from social interactions and experiencing complications in personal relationships are two factors that are classified as 'deviant'. Their expression undermines norms and expectations relating to appropriate modes of social interaction and appropriate levels of social contact

(Halvorsen 2002: 4). The aforementioned anxiety is understandable given the bereaved individual's sense that continually isolating him or herself will – in a cumulative manner - negatively influence other people's assessments of his/her social behaviour. ALISTAIR's (9 years & 9 months since his brother's death) reflections below on his bereavement experience were suggestive of this anxiety.

> ALISTAIR: I really found that after my brother's death, it was easier not to spend time with people other than family. If I was down when I was with friends, I felt like I was dumping something on them…if I pretended to be happy – or actually was feeling good at a particular time – then I kind of resented people because I thought they would assume I was okay and over it all. Some people I found almost aggressively happy – it's like "We are going to have fun and not think about anything, and hell be damned if you are not having 'fun, fun, fun' as well." Even though I could have times of being lonely and pretty angry, it was preferable not to spend time with friends…it was good and bad to have a lot of time with my thoughts. In some respects I shouldn't have separated myself so much. Aside from family, I still feel somewhat separate from most people. I feel pretty awkward, socially-speaking, like I don't quite get the 'lingo' and yet I don't really like the 'lingo' either…I have at least found a small group of people in recent years who care about things that I care about…the thing is, because most of the people around me at the time of my brother's death didn't really want anything to do with it, I just kind of assumed that most people in the world would be like them – especially people around my own age.

Continuing on the theme of social behaviour and the potentiality of isolation/exclusion, both NICHOLAS (counsellor) and ELIZABETH (counsellor) contextualised the isolation of bereaved siblings in relation to the developmental 'challenges' of young adulthood. In this regard, they placed a particular emphasis on the navigation of new environments. That is, environments outside the secondary school and the familial home.

> NICHOLAS (counsellor): I would say [social isolation] does seem to me to be quite a major aspect of the bereavement. Particularly that sense of feeling they're not able to share what has happened with other people and that sort of creates this

sense of social isolation. So yeah, I would see that as a fairly major issue for the age group you're looking at, and even younger. Say adolescents... I think it is there for any bereaved person, in a sense. But I think particularly with young people because they're at a point where they're developing and working out social situations and social skills. For them, [social isolation] seems to be a bigger issue.

ELIZABETH (counsellor): I think it is interesting to note that with the bereavement group [age range 12-25] we run, we revisited over the last five or six years – for young people who have experienced the death of a brother or sister – and we wrote up some of the things that had occurred, we sort of brainstormed, and social isolation was one of those identifying factors for all of them…we have spoken to people at one of the universities and it's a very lonely world for young people who are trying to negotiate school and uni, having those grief issues and not having anyone to share them with.

A bereaved participant, ALANA, felt that a bereaved young adult was the antithesis of what young adulthood commonly signified, such as excitement, 'new horizons' and the 'navigation of new environments'. This sense of social displacement could in itself contribute to a sense of rejection and isolation for the young adult.

ALANA: Young bereaved people remind other young people of their own mortality. We make them uncomfortable. We are a walking reminder that death can touch anyone at any age, and at any time. They avoid us. We are diseased, touched, marked.

JANE's (counsellor) assessment below of the negative characteristics of social isolation centred less on social rejection and more on a lack of 'constructive' activity during periods of isolation. For example, she cited cases where bereaved young adults experienced difficulties in expressing or processing grief-related feelings. On the other hand, she also countered the presumed negative effects of extended periods of social isolation through emphasising the individual needs of each young adult. A more introverted individual, for instance, may find longer periods of isolation more personally beneficial than an

extrovert would. JANE's (counsellor) emphasis therefore slightly undermined the aforementioned idea of social anxiety being borne of the individual's sense of 'deviant' conduct through isolating one's self for extended periods of time. For either personality 'type', the principal concern is whether 'expression' occurs within these blocks of isolation, rather than the actual length of the blocks.

> JANE (counsellor): The way I think that I see [social isolation, in the negative sense] is that the person has retreated and is unable to express their emotions – that's when it would begin to be a negative thing. If someone's quietly gone to their bedroom and they're just there listening to their music and things that help them express, then that's fine. If they've gone there, and all they're feeling is they're not able to do anything except feel lousy, and they can't process [the grief] in any way, and then maybe – and this is something that I've found continuously – they turn to alcohol and drugs to deal with it; to make themselves feel better. I would see that as a negative thing, but *it does also depend on the individual* (italics mine)…some people are very introverted, and spend an incredible amount of time alone, and that's fine. Then there are other people that are extremely extroverted and want contact all the time. It's in the realm of *"Is this person able to express in some way for themselves when they are isolated or can't they?"* (italics mine) If they can't, then I think there are problems.

The theme of 'expression' is continued in NICHOLAS' (counsellor) comments below, but the issue of 'constructiveness in aloneness' is substituted for the procurement and experience of relationship 'meaningfulness' (Wheeler, Reiz & Nezlek 1983: 947) within one's social interactions. The amount of time spent alone or the sense of isolation within social situations is of less concern than whether satisfactory levels of 'meaningfulness' had been experienced by the bereaved young adult.

> NICHOLAS (counsellor): The sense that social isolation is something fairly positive is based on whether it is something [bereaved young adults] have actively sought. That perhaps can go on for quite a long time and they still feel okay about that, but if it was a negative type of social isolation it is not so much a matter of time as whether they *need* to be around other people (italics mine).

NICHOLAS' observations reflects Killeen's (1998: 764) appraisal of the dichotomous nature of social isolation: "Social isolation with choice is aloneness, while social isolation without choice is loneliness." Aloneness befits a positive isolation, whereas loneliness befits a negative isolation. In an example of social isolation without choice, JANE (counsellor) refers to an isolation that is seemingly initiated by the people the bereaved young adult commonly interacts with.

> JANE (counsellor): I would like to add that I think there can be a huge isolation that comes from the young people themselves. They don't remove themselves from people, but they express their grief and people don't accept it. Whether it's in the form of criticism or rejection of their grief, it can create huge isolation. So that goes with the territory of being out of step with peers.

ANNA's comments below are an example of where this social rejection produces an ongoing sense of frustration and resentment.

> ANNA: I have felt at times like I was on the edge of exploding in social situations. I have felt like I wanted to just get up from the table in a restaurant or wherever and just run away. It was like I just couldn't cope any longer...part of me feels that this is because of the restriction I feel – not being able to mention it. I really struggle with it because my brother was part of my life for 23 years and the effect his life and indeed existence has had on me is profound. Losing that in an instant therefore was equally profound and I don't understand how I can deny that just to favour a social situation.

6.3.3 Disconnection and reconnection

Part of the process of feeling 'out of step with peers' is the alteration in personal values and the re-evaluation of wider social values that bereavement can invoke. A number of the counsellors referred to this as a new-found personal 'maturity'. In terms of peer relations (in particular), this maturity is not necessarily conducive to a sense of social belonging, especially if the bereaved young

adult's assessment of social belonging is largely predicated on the size of his/her social networks.

> LORRAINE (counsellor): I think it's isolation that comes from being pushed into territory not everyone has experienced. It makes some of the young people I see feel prematurely old. It makes them feel different to their peers.

> ELIZABETH (counsellor): I think that there is that period of introspection we talked about where you've had to…many people say, "It really led me to realise how materialistic I was. How everything was about money and position and ambition – and now it doesn't matter." I really think people's whole direction changes – there's a new path – and in many cases, it's a very creative path…I think it's just, particularly for bereaved young people, *a maturity that they didn't necessarily want* (italics mine).

The creative path that ELIZABETH (counsellor) referred to suggested the possibility that a stronger sense of social connectedness could be attained (or regained) through contact with similarly bereaved individuals, particularly other young adults.

> ELIZABETH (counsellor): …that maturity seems to lead to that creativity and that caring for other people, and that feeling that there are things they want to change about what may have happened; that they want to learn more about it or help others who are going through similar experiences. Some of them do public speaking. Others want to be in groups to support others. Some people become supporters themselves; some of these young people are certainly supporting others. I think that's quite interesting.

In relation to the pursuit of creative activity[9] and empathic support, the question of who the bereaved young adults are who do not contact counsellors again emerges. Are those particular individuals motivated in a similar fashion to the young adults to which ELIZABETH (counsellor) refers? How representative

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[9] Other creative activity examples from the bereaved participants included writing music or establishing a business in memory of the sibling who died, undertaking courses that have a 'humane' emphasis (ie. social work, counselling) and working with and caring for animals**.**

are ELIZABETH's (counsellor) examples? Of the bereaved participants interviewed for this study, there appeared little-to-no connection between young adults who did or did not seek counselling (or between those who contacted me personally or had their name passed on by a parent, relative or friend) and the desire to pursue creative and/or empathic activity. Women were more likely to express such creative/empathic goals, but then again there was an unequal ratio of female-to-male participants in this study.

The pursuit of creative activity and empathic support would seem a constructive path for the bereaved young adult to follow in light of Leighton's (1959) ten 'essential human sentiments' (see Introduction; page 11). The 'essential sentiments' (such as expressing one's creativity and being oriented to one's place in society) were discussed in relation to the ambivalence in bereavement research towards using the term 'recovery' (Balk 2004). For instance, does an individual ever 'recover' (as in gain a sense of closure) from the death of a loved one? Balk (2004) repositions the term 'recovery' in relation to Leighton's (1959) ten essential human sentiments (cited in Balk 2004: 368). The individual may be deprived of all the sentiments through bereavement – or at least some – but ideally will recover each of these in the course of his/her 'grief journey'. Therefore, the constructiveness in creative activity and empathic support signifies a partial regaining of personal and social skills and the sense of purpose that are often-times depleted through the experience of grief.

For instance, one bereaved participant, ROBERT, referred to his family's collaboration to establish a business in his sibling's name, and how this venture had provided him with a sense of purpose that he found, in any other context or situation, to be inaccessible. Another participant, REBECCA, had 'discovered' empathic support as a valuable mantra for approaching everyday interaction with other people. She also felt that she would be well-suited to grief counselling, and was contemplating undertaking part-time study in future years.

6.3.4 Familial realignment

ELIZABETH (counsellor) also referred to further disruptions that a significant life stressor, such as death of a loved one, can bring to one's prior typifications of his/her social life-world. For instance, family roles tend to undergo a significant realignment. In this regard, young adults can feel increasingly responsible towards the mental and physical health of parents. They may also come to believe that they should be adopting the familial 'roles' that the sibling who died had once enacted (for example, the practical joker, the adventurous sibling, the protective sibling). On a practical level, the realignment of family roles is understandably more pronounced for the young adults living in the parental home.

> ELIZABETH (counsellor): I think when you're young you have an idea about yourself and who you want to be, and what will happen in your life. If a brother or sister dies, it's like your whole family will never be the same again…it changes things irrevocably. The family all have to…it's like moving pieces in a jigsaw puzzle – they're all working towards fitting around each other and working out where they now fit, and whether they want to fit.

Given the accounts of both the counsellors and bereaved participants, the issue of where the bereaved siblings 'now fit, and whether they want to fit' in the overall family structure was usually manifested in one of two possible directions. On the one hand, the young adults may find their parents' expression of grief too confronting to continually encounter. Social support would thus be sought elsewhere, even if the support tended toward a more 'diversionary' nature (such as participating in team sports and 'group' recreational activities). A component of the young adult's developmental transition relates to increasing independence from the familial structure, but given the ingrained quality of family dynamics, the responses of family members to bereavement were often experienced as problematic by the young adult. For instance, it was common for participants to note the distress they felt at being privy to their parents' grief (manifested in emotional breakdowns and depressive episodes, for instance), commonly describing it as one of the most difficult things a person could ever see or hear. Furthermore, the established

parent/child support-dynamics could become ambiguous in nature, with familial roles alternating back and forth continuously. An example of this is where the child effectively takes on as substantial a support role as the parents commonly provide for him/her. The young adult would hesitate to talk with parents about the bereavement for fear it would upset the parents further and consequently unsettle the young adult's sense of security.

The second direction was where the family can also function as a 'haven' for bereavement-related self-disclosure. As long as there existed similar attitudes towards 'styles' of grieving, as well as an openly shared 'appreciation' of the sibling's absence, then the young adult could benefit from the immediate understandings that family members can provide. Those immediate understandings entailed shared memories of the loved one, recognition of the ongoing nature of grief, and an appreciation of the impact of the family's loss. Furthermore, in examples such as ANNA's below, the importance of immediate family in terms of providing mutual support became evident.

> ANNA: I was very protective of my parents…my Mum and Dad needed me as much as I needed them. I spent a lot of time with my parents even when I had my daughter. When I had her, one thing I was thinking was "This will help my parents." I had to reach out to them.

However, as will be referred to throughout Chapters 6-11, the experience of support from sources outside of immediate family, along with those within, appears to instil a more secure sense of social connectedness than one source of support can provide. The issue of difference between family members' styles of grieving will be examined in Chapter 10.

To restate then, interactions with family members often (though not always) have the benefit of immediate understanding. As such, the interactions allow a more comfortable atmosphere for open communication. However, interactions with peers and work colleagues, for instance, can be more cautious and

complicated in nature – for both the bereaved and nonbereaved[10] parties. Regarding these complications, JOHN (counsellor) noted bereaved young adults' sensitivity to any indications of social rejection and/or discomfort.

> JOHN (counsellor): Other people's reactions (in a social environment can make bereaved young adults feel uncomfortable). They may be correctly or incorrectly reading the looks on people's faces. Also, the amount of effort people make to engage or continue a conversation – and the effort other people make to follow up contact.

6.3.5 Continuing support and 'pretending normalcy'

On the basis of both the counsellor and bereaved participant interviews, John's latter observation – 'the effort other people make to follow up contact' – was observed to be one of the most powerful indicators of ongoing support and tolerance towards one's bereavement status. In instances where the bereaved young adult declined an offer of a social outing, the person who made the offer did not cease contact with him/her.

However, while the bereaved individual may experience a fraught, seemingly unsupportive social milieu, he/she may not always cite difficulties in interactions as a consequence of 'external problems'. NICHOLAS (counsellor) explains;

> NICHOLAS (counsellor): Previously, I've had people talk about the social isolation and say how they're unhappy about that and find that difficult. They initially talked about how it is imposed (on them) by other people, other people being intolerant or something like that. But then often as they talk about it more, they will say 'On the one hand I can't blame them because I'm not particularly 'out there'.' So they feel they've contributed to their social isolation as well.

JOHN (counsellor) similarly notes bereaved young adults' citing of a 'two-way' relationship with social rejection and isolation.

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[10] 'Nonbereaved' is referring to individuals who have not experienced the death of an immediate family member (ie. a parent, sibling or child).

> JOHN (counsellor): Conversely, sometimes people will blame themselves. 'I am not good at this, I'm hopeless, I'm uncomfortable.' And that's why they don't make contact and don't enjoy any contact that is made.

The tendency to 'blame' one's self reflects a 'dramaturgical'-like (Freund 1982/1990) tension where one has felt unable to meet the assumed norms of a given social situation. Based on the bereaved participant interviews, a major contributing factor to such a perception was the common sentiment of 'Who could understand this grief? Who would want to understand this grief?' The majority of the bereaved participants viewed their experience of grief as being situated outside any previous frames of reference/'typifications' of their social life-world. Therefore, they doubted that their peers, in particular, could have an appreciably insightful understanding of grief, given that they presumably still held to those previous frames of reference.

Especially within the first three years following the death, the consuming nature of grief was such that the bereaved participants and the counsellors' clients could doubt their effectiveness in meeting assumed norms of a particular social situation. Some of the bereaved participants' examples of 'consuming grief' were a) a yearning for the loved one, b) the struggles and malaise in adapting to a new personal and social reality, and c) mental and physical tiredness. In observing connections between self-blame and awkward interaction, JOHN (counsellor) provided some insight into the nature of bereaved young adults' 'dramaturgical stress'.

> JOHN (counsellor): People find a whole set of reasons as to why they don't mix and one of them might be 'I just can't give up my thoughts yet', on account of the death that has occurred. They feel that the people around them- 'They don't want to hear about it. They don't know what to say or to do. So they feel awkward and I feel awkward' - and so it's better not to venture into social situations, but rather venture out...so 'provided I pretend I'm okay, I can venture out, but I don't feel okay so I won't pretend and I won't venture out.'

The consuming nature of one's own thoughts coupled with the awkwardness of others is a further reason for viewing social isolation as an inevitable by-product of bereavement. John's comments above reflect the 'pretending normalcy' conundrum that Balk, Tyson-Rawson and Colletti-Wetzel (1993) referred to with American university students. That is, does one pretend normalcy and refrain from emotional expression and bereavement-related disclosure? Or does one reject such restraint and consequently risk social isolation?

How feasible a form of social interaction might the 'pretending normalcy' option be? While social isolation might be avoided, what are the consequences in restraining any social expressions of grief? Based on the data collated, indications are not entirely clear. There are some indications that the 'normal' integration of self into everyday interactions, which to all appearances may seem a form of 'pretending normalcy', is not necessarily indicative of pretence and emotional repression. In Chapter 7, there is detailed consideration of a trend in the data which suggests that some bereaved young adults re-establish themselves effectively in everyday tasks – and exist comfortably within mainstream value systems – in a relatively short period of time following the sibling's death. Subsequently, negative experiences of social isolation are characteristically short in duration. Is this a case of 'pretending normalcy' for the purposes of ensuring social acceptance?

On the basis of the counsellors' reports on this trend of 'postponed grief', the answer would be 'not necessarily'. The 'postponed grief' refers to the situation where the impact of a bereavement (or a series of bereavements) in young adulthood does not impact on the individual, at least not in a conscious sense, until middle age. The clients of the counsellors did not refer to any attempts to 'pretend normalcy' in the interim period; the grief that impacted upon them decades later appeared to genuinely take them by surprise.

Perhaps bereaved young adults whose bereavement trajectory follows a 'postponed' path are those who commonly do not contact counsellors? Certainly, the young adults interviewed for this study reported a trajectory

where the conscious experience and recognition of grief affected them on a regular, if not daily, basis. In their case, another perspective on 'pretending normalcy' and participation in diversionary/trivial interaction was forthcoming. As will be examined in greater detail in Chapter 10, social interaction of a diversionary nature (such as parties) can provide the young adult respite from bereavement experiences. What appears to make instances of 'pretending normalcy' tolerable is if the bereaved young adult is simultaneously confident that more 'meaningful' or supportive behaviours will be forthcoming at other times. That is, the diversionary activity of peers and colleagues does not predominate to the extent of continually excluding possibilities for more 'meaningful' interaction and/or displays of support (that is, keeping in regular contact with the bereaved young adult).

6.4 Summarising social isolation

To summarise this overview then, it would seem that, according to the counsellors interviewed, the experience of social isolation has a beneficial and important place in terms of responses to bereavement. As befits the physical manifestation of social isolation, there is the opportunity for reflection away from external influences. The isolation can mirror the sense (and the reality) of loss that in turn can assist one's adaptation to the new dynamics of one's social life-world. However, this adaptation/incorporation of the sibling's death into everyday living is typically complicated by the realisation that it rarely runs to a timeframe parallel with dominant social expectations of 'recovery' from bereavement.

The counsellors identified social isolation as a personal and social problem not so much on the basis of the amount of time spent alone, but on whether one is able to spend time alone constructively. Coupled with this is the issue of whether one feels his/her social needs are being met or whether one feels bereavement-related social expression is being denied or restricted. The rejection of peers can also occur, or it can be felt to have occurred; the acquisition of the "maturity one may not want" can position the bereaved young adult outside the common values and preoccupations of peers. Feeling 'out-of-

step' with peer values and modes of interaction can evoke a dramaturgical-type social awkwardness which the bereaved young adult feels largely responsible for, given the persistence of his/her feelings of grief.

Immediate family may provide a substantial avenue of support not otherwise found. However, with the realignment of family roles and the potential differences in coping styles between family members, this otherwise beneficial support base can become stressful and claustrophobic. Outside of the familial environment, the bereaved young adults – the young adults interviewed for the study and those reported on by the counsellors – commonly wondered who could possibly understand their grief. Furthermore, with the theme of fear of burdening others, they wondered who would want to understand this grief. 'Pretending normalcy' may be the preferable option to being a potential social 'burden', but newfound values and beliefs can make the everyday concerns of others seem trivial in comparison.

Beliefs and values notwithstanding, the importance of supportive individuals who keep in regular contact with the bereaved young adult cannot be underestimated. In fact, particularly in the case of bereaved women, it seems that tolerance for the 'trivial' discussions of others is relative to the preparedness of those others to listen to any bereavement-related disclosure. Finally, the issue of accommodating the sibling's death into one's everyday life does not appear an essential task for *all* bereaved young adults, at least not in the short term. In these cases, the young adult continues to experience social inclusion, as he/she partakes in the developmental tasks and transitions of young adulthood at a similar rate to nonbereaved peers. Whether these cases constitute examples of 'postponed grief' is another matter; as such they will be discussed further in Chapter 8.

6.5 The 'waves of grief' & residual tensions

The overview of social isolation indicates how the intensity and preoccupying nature of grief can impact on the quality of one's social experiences and interpersonal relationships. Within the experience of grief is the issue of

accommodating/incorporating the sibling's death into one's everyday responsibilities and interactions. In light of this gradual accommodation, how persistent and continuous then might the experience of grief be over an extended period of time, such as five years? One bereaved participant, CLAIRE, made an observation that encapsulates a common sentiment expressed by the bereaved participant population.

> CLAIRE: The waves of the really intense grief, the time between them gets wider as time goes on. People might think "You'll get over it" or "Time heals", but having incorporated (the loss of the sibling) into your life, so you have accepted that into who you are now.

While noting the widening of time between 'waves of grief', REBECCA specified the time periods in which she experienced the particularly intense bouts of grief.

> REBECCA: I think the way I look at it is the pain is 24 hours at the start, but then it starts to minimise and minimise as time goes on. Initially, for the first couple of years the pain is pretty much the whole of the day. The pain's there, even physically at times. You don't want to be social. You don't want to make the effort. But then life does move on – I find personally that I can go out to dinner or somewhere. Just a few hours of the day, and I find I can switch off and zone myself into that moment, and not think of things of a negative nature.

In terms of the 'waves of grief' becoming wider apart in their occurrence, the bereaved participants noted a number of factors they saw as signifying this progression. The factors included:

- being able to talk about the sibling without crying,
- feeling less tired during the day (ie. one feels less in need of rest during daytime hours than he/she has felt in previous months or years),
- feeling that "depressive episodes" are becoming shorter in length,
- feeling more comfortable with the idea and the reality of the sibling's death, and

- feeling a greater sense of confidence to participate in social situations.

Regardless of this gradual diminution, the episodes of grief may leave in their wake a number of social difficulties and associated frustrations. One of the questions asked in Chapter 2 regarded the influence ongoing grief would have on the social skills of bereaved young adults. In retrospect, this question was found to be not *quite* the relevant question. The bereaved participants expressed considerably less concern with the impact of grief on social skills than they did on the quandary of feeling 'out-of-step' with peer group and/or work colleague concerns and values. Female participants in particular, found such concerns - in a comparative sense - annoyingly 'trivial'. An effect on the effectiveness of one's social abilities constituted a by-product of these central concerns.

On the other hand, an often-mentioned benefit of the widening of time between episodes of grief was the reduction in social awkwardness for the bereaved young adult. The quandary of whether to express one's grief openly or 'pretend normalcy' became less recurrent in the bereaved young adult's everyday interactions. The need to separate one's self from others on account of intense feelings aroused by the bereavement became less of a necessity, as NICHOLAS's (counsellor) comments suggest.

> NICHOLAS (counsellor): I guess as a fair bit of time has gone on, most often the issue of social isolation lessened. It's not always the case, but generally people will talk about how they're feeling like they're aware that they're engaging in life in general a bit more as time has gone on – the social isolation seems to be, whether it's positive or negative, less of an issue that's focussed upon.

However, even with the reduction in feelings of awkwardness, this does not mean the bereaved young adult will cease isolating him or herself from other people. More often, it is the *reason* for isolating one's self that changes. The counsellors referred to the problem of increased anxiety (in relation to the prospect of social interaction) when one has continually isolated him or herself for extended periods of time. However, for the majority of the bereaved

participants the principal reason for separating themselves from others was due to a generalised disappointment in, and/or cynicism towards, those who inhabit their social life-world. The bereaved young adults' disappointment and cynicism appears to derive from a lack of social support since the bereavement occurred and/or a lack of support that is deemed to be constructive and helpful.

Whether one year or more than five years had passed since the sibling's death, bereaved participants would express their pleasure or displeasure at the quality and breadth of social support they received. Based on their examples, this pleasure or displeasure emanated principally from experiences that occurred within;

a) the early months following the sibling's death (when less than three years had passed since the death), or

b) the early years (when more than three years had passed).

Should one view bereaved participants' citing of these early experiences as indicative of how initial support experiences set in motion a particular social life-*world view*? Or should one regard the citing of these early experiences as simply indicative of the acute impact of first-time experiences (as opposed to the impact of recurring, even predictable, experiences) at a time where the grief itself is 'new' and particularly intense in nature? It is difficult to pinpoint, at least on the basis of the data collated, and may even encompass components of both.

The re-investment of energy is located primarily in the procurement and maintenance of new friendships with more 'compassionate' people. In any case, the disappointment and cynicism is often coupled with a sense of separateness from the population at large. Separate that is, except from people who are ultimately regarded as 'compassionate' individuals (usually people who have also experienced 'untimely'death). So, while the time between episodes of grief may widen, a sense of cynicism/disappointment prevails. Given the

accompanying trend of separating one's self from others, this has long-term implications for the bereaved young adults' social experiences. Worden (1991) suggests that, as part of the grieving process, the bereaved individual needs to accomplish four tasks. They are to: 1) accept the reality of the loss; 2) experience the pain of grief; 3) adjust to an environment in which the deceased is missing; and 4) reinvest energy in other possibilities (Worden 1991). Within this framework, it would seem that participants with a lack of 'meaningful' support experienced a multi-layered process of 'adjustment' – adjustment to an environment without the sibling as well as adjustment to an environment where access to former friends and peers had diminished. So, in terms of indicators of grief, a widening in the 'waves of grief' may signify a reduction in the intensity of grief, as well as signal the beginnings of an accommodation of the sibling's death. However, the residual effects of grief cannot afford to be overlooked in the process.

Another issue that was significant for the bereaved participants was the short-term and long-term effect of grief's tendency to exacerbate particular personal habits and traits, as well as intensify the utilisation of means with which one copes with life adversity, such as alcohol. So, where a participant identified him or herself as 'rather shy' or 'self-conscious', the experience of grief was often felt to increase levels of social anxiety. In cases where a participant referred to a trademark 'quick temper' (particularly notable in the reports of the bereaved male participants), the grief was felt to increase the frequency of fluctuating moods and deepen the intensity in which the moods were felt. Alcohol, and other drug usage, was also mentioned by a minority of participants for its usefulness in suppressing feelings of grief and, in some cases, helping ensure social inclusiveness from peers. However, the problem with alcohol and other drug usage was that as a pacifier of grief, the usage could develop into a dependence which was experienced as complicating the difficulties of long-term grief. Except for three exceptions, alcohol usage was cited most commonly by male participants.

So, as the intensity of grief begins to decrease, does the experience of grief as an exacerbating influence similarly decrease? Again, it is difficult to ascertain, but certainly in cases where more than two years had passed since the sibling's death, the participants referred to the need to 'work on' and/or resolve 'residual' bereavement issues (such as addictive behaviour and a quick temper). The 'exacerbating' tendency of grief is another factor that supports the 'indicators' caution that an emphasis on the widening gaps between 'waves of grief' runs the risk of obscuring and underestimating the potentiality of the residual effects of grief.

So, as an indicator of subsiding grief, the 'waves of grief' may be somewhat illusory. On this note, a final factor to consider was the report from a significant number of bereaved participants that when the initial intensity of grief subsided, it was often replaced by feelings of flatness and despondency. Activities that brought considerable pleasure to the young adult prior to the bereavement now seemed ordinary, 'colourless' and unexciting. It is reminiscent of the idea of 'present-lack', referred to in the Introduction, where the absence of the beloved sibling, renders the present moment as wanting and unsatisfactory. This flatness and sense of futility could almost be viewed as constituting a second phase of grieving, although not all bereaved participants referred to, or acknowledged, its occurrence. Perhaps predictably, these participants were commonly the individuals for whom no more than two years had passed since the bereavement occurred and hence they may not have yet become so removed from the 'phase' as to be able to identify it. More intriguing in this regard were the participants for whom more than two years had passed and yet they appear to have bypassed (or at least not become mired within) this sense of despondency. These participants' grief experiences point particularly to the considerable benefits of wide-ranging social support. Such benefits will be examined in further detail in Chapters 7 and 11.

While bereaved participants often displayed an awareness of where they believed the bereavement had impacted on their social behaviour, they did occasionally speak of incidents that revealed hitherto unrecognised aspects of a)

the impact of the bereavement, and b) the influence of social beliefs and values on how they had responded to the bereavement. For example;

> DAVID (2 years & 5 months since his brother's death): I often find myself asking people if they have brothers or sisters. I always have done this. But now when some people ask me the same thing I mostly say I am an only child. I didn't realise it until recently that I actually feel guilty about this. I brought my brother up in a recent conversation and felt tremendous joy, as though a weight had been lifted, just to acknowledge that I once had a brother.

> VICTORIA (4 years & 7 months since her sister's death): I turned to alcohol for a few years just to go and have fun at nightclubs, to go dancing and all that. When I look back on it, it was just to hide the pain.

Furthermore, while the counsellors' accounts supported the bereaved participants' appraisal of their relative awareness of the impact of bereavement, the counsellors also noted that bereaved young adults could overlook other areas where the grief had impacted on feelings and behaviour. Problematically, the counsellor's bereaved clients could often attribute social difficulties to personal deficiencies.

> JOHN (counsellor): People who have 'complicated grief' or a 'protracted grief process' don't often self-diagnose themselves. They're more likely to think that they're awkward or anxious or depressed. Like most people, they often leave the issue behind because they've adapted to it. [The loss has] become a part of their life – it's been an unconscious part of their life – and as they move into the first or second year after the event, they're no longer consciously thinking about it and they're not attributing it to how they think and feel. However, it's there and they're more likely to see themselves as not enjoying social interaction, or socially awkward and unskilled, or anxious and depressed. Then they will be conversing with a person who revisits the notion that 'Have you thought that maybe you haven't dealt with this issue?'

The propensity to falsely attribute grieving to personal deficiencies was given another layer of complexity in the bereaved participants' appraisal of the mirror

relationship between depression and grief. The reportage and discussion of depression served to illuminate another factor associated with bereavement that could disadvantage social interaction. Depression was the most commonly cited 'side-effect' of bereavement. By contrast, there was more variation in the bereaved participants' accounts of the impact of grief on concentration, energy levels and sleep patterns. For instance, it was as unlikely, as it was likely, for a bereaved participant to cite difficulties in concentration as a result of the bereavement. However, consideration of the impact on mood was likely to raise discussion on episodes of depression. Approximately half of the participants related episodes (or symptoms) of depression, while a third mentioned having used antidepressants at some point following the bereavement. There was no apparent relationship between the participants' experiences of depression and levels of cynicism and anger relating to social support (or a lack thereof). Occurrences of depression appeared to have a random quality; the individuals' shock and despondency towards his/her sibling's death seemed central to their mood, but there was no apparent inevitability that these responses would lead to depressive episodes.

Where depression was experienced, its relationship with grief was intertwined. Bereaved participants, who had experienced depression in years prior to the bereavement, pointed out that they had always felt confident that the intensity of the grief would diminish over time. It is an interesting insight in that it suggests that knowledge gained from prior adverse experience provides some level of placation with present adversity. One participant, ANNA, noted that despite her confidence that episodes of grief would pass in time, she was still surprised by the 'carryover of grief' more than three years after her brother's death. Although the placation only appeared to extend so far, it was still a notable trend in the data.

Also, it suggests that the participants closely aligned the experience of depression with that of grieving. Perhaps this linkage of grieving and depression provides valuable social insight into the manner in which grief is manifest, particularly in the sense that it can be recurring in nature and socially

'invisible'. In BEN's case such insight and recognition could only improve his feelings of social acceptance and connectedness.

> BEN: … if you're grieving, if you have depression– the people who are dealing with you don't really associate you with a "sick" person because they can't see fractures and so on. So if you're having a bad day and trying to hide the anger or sadness, that person doesn't know you're sick until those sparks of emotion come out and they become a victim. People who knew I had depression, they know you can be doing poorly for a few days, a week or even two weeks. What they don't seem to realise is it can come back.

Overwhelmingly, the bereaved participants believed that grief became invisible roughly six months after the death occurred, this being the point at which social expectation toward reinvesting one's self in everyday living became more explicit and obvious. At the same time, bereaved young adults may be as likely as their nonbereaved counterparts to overlook the recurring nature of grief and depression. This recurring nature reflects the counsellors' caution that bereaved individuals, in having consciously pronounced their grieving as over, could falsely attribute future experience of grief to that of a 'weak character'.

To sum up this subsection then, the reduction in intensity and the increase in length between episodes of grief may serve as an indicator of the reduction in the bereaved young adult's experience of social isolation. However, in consideration of the residual effects of grief, it seems inadequate as a *sole* indicator. Taken alone, it may overlook isolating behaviours (prevailing bitterness with unsupportive peers, a negative social life-world view, and recurring depression, for example) that have been set in motion in the midst of the 'grief journey'.

6.6 Conclusion

The counsellors' issue with social isolation is where it ceases to be an 'opportunity' to process the grief, but rather becomes an accumulation of experiences that promote social disconnection. Compounding this issue is the residual impact of grief on social abilities. These factors emphasise the need

and value of a public understanding of what ongoing episodes of social isolation commonly denote. That is, they are reflective of the impact of grief upon the young adult, rather than indicative of an individual actively avoiding engagement within social interaction. However, public discomfort, together with a lack of long-term public empathy, may soon make avoidance the preferable path of action to take.

CHAPTER 7

ISOLATING FACTORS

The previous chapter – Social Isolation – provided both an overview of the 'character' of social isolation and influence of residual effects of bereavement on the experience of social isolation. By contrast, this chapter will outline and examine the social factors found to be significant in positively or negatively influencing the bereaved young adult's experience of social isolation and/or increasing or decreasing the occurrence of negative isolation.

These factors will be examined in the following subsections: *7.1 'life goes on' and grief education; 7.2 the benefits/deficits of work; 7.3 the fear of burdening others; 7.4 young adulthood; 7.5 socioeconomic 'options' & unemployment; and 7.6 the type of death.*

7.1 'Life goes on' & grief education

One of the common social difficulties in the bereaved young adult's 'grief journey' is the realisation that the ongoing reality of one's grief does not necessarily tally with general social expectations of a timeframe for 'recovery' from grief. The *sense* of disconnection from 'nonbereaved' others becomes prominent in the course of this realisation, regardless of whether the bereaved young adult had physically separated him or herself from other people or not. Interestingly though, it would appear that one of the indicators of a reduced social tolerance towards ongoing grief – the bereaved young adults' observations of 'life going on' may be potentially misrepresentative of public opinion. Observations of 'life going on' may be interpreted and perceived in a symbolic sense as representing public opinion towards bereavement; that opinion being the bereaved individuals themselves should be 'getting on with it'. Therefore, the observations of one's social life-world can be felt to

represent personal and collective belief[11], even if their representativeness to the wider community is ultimately minimal. This response is reminiscent of Psathas (1973:14) sociological perspective of phenomenology; the people one comes in contact with, including the people one reads or hears about, operate for the individual as 'representatives' of social and/or cultural beliefs and values.

Below, JOHN (counsellor) emphasises the social difficulties of 'life moving on'; this is relating to the apparent 'incompatibility' of bereavement with the developmental transitions of young adulthood.

> JOHN (counsellor): After a death has occurred, you only need to look out a window and you know that everything is going on as it was. Who cares? "So, I could be the same, I could be dead tomorrow, cars would continue to go down the street, people would continue to go to work. There would be no year of mourning." When people are forced to deal with issues much earlier than they might have – well, it is untimely death. The death of a sibling does not fit any expected developmental process or progression.

The three participant examples below of 'life moving on' highlight the personal difficulties that arise from these observations and accompanying perceptions, which have social ramifications.

> LISA: That's another hard thing you have to deal with [with grief], that life goes on even though the person has died… You hear friends complaining about a brother or sister. It's always in the back of my mind – "They're lucky really."

> MARK: For those who saw me after it occurred…it feels like a long time because they're outside the situation enough for them to almost have completely forgotten it. For them to rarely be debilitated by it, they move on.

> CLAIRE: I have found that there are two parts to the grieving. There's the immediate, when it's really raw, the person has just died, and people are aware of

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[11] The sentiment that one should 'get on with it' could also be directly articulated to the bereaved participants; see the subsection 'Partner support and 'getting on with it'' in the Gender Differences chapter.

it and are all around you. They bring dinner around, but then time passes and
everyone goes off back to their own lives. They go back home if they've come
from interstate and they go back to their jobs. They just fall back into their lives
as usual. You still feel a big hole in your life, so you feel the
loneliness…because you don't have everyone around you like you did. So if
you're having a low patch or whatever, because they've moved on it's not going
to be their initial thought "She's still upset about whatever" or "She's different
now, we'll allow her some space." I just don't think they consider that.

In fact, some peers' topics of conversation are interpreted as insensitive or
thoughtless, as JASON's example suggests;

> JASON: When people, say, talk about their siblings I'm happy for them, but…I
> have this thing of thinking, "Why are you talking to me about this, when you
> know my situation?"

However, JOHN (counsellor) suggests that the bereaved young adult's
difficulties associated with 'life going on' are not just a matter of perceptions of
social intolerance and a lack of ongoing empathy and recognition. The other
contributing factor is both the bereaved and nonbereaved individuals' lack of a
template for speaking about grief and recognising how grief manifests itself in
the long term. From a phenomenological perspective, an educative template
could prove especially helpful in rectifying the incongruent relationship
between one's stock of knowledge and new reality of one's social life-world
(for both the bereaved and nonbereaved). In regard to the nonbereaved, they
may possess some understanding of the ongoing reality of grief, but the lack of
a template for articulation stifles social expression of this understanding.

> JOHN (counsellor): …in a relatively short space of time - a number of months -
> it's all over and life goes on. Especially in schools, church groups, extended
> networks of peers and friends - people stop talking about it very quickly. You'll
> sometimes get a reference, an aside, an oblique reference as to what's happened,
> but you don't get people actually sitting down and saying "What's it actually like
> for you now?" And sometimes they don't ask that question because when they
> do, the person is not able to be articulate about it. The bereaved individual and

the person who is asking - both of them don't have a template...they're not taught how they're going to talk about or work through the bereavement of a sibling.

JOHN (counsellor) goes on to assert that educating both bereaved and nonbereaved individuals on the range of responses to bereavement may help create this template for articulation and recognition. For bereaved young adults, what it might also provide is understanding about the impact of bereavement and provide them with the ability to recognise its influence in everyday life, rather than attributing their experiences of social disconnection (for example) to personal deficiencies in social interaction.

> JOHN (counsellor): Education [that concentrates on the effects of bereavement] is a useful thing in this respect – if people know they are going to have a filtered experience of social gatherings and events then they won't falsely attribute their disinterest to a whole range of other idiosyncrasies.

TONI (counsellor) continues on this theme of the importance of education to *normalise* the experience of ongoing grief for both bereaved and nonbereaved individuals.

> TONI (counsellor): Most young people don't understand that what they're experiencing is grief. They don't actually understand the symptoms. They don't necessarily connect it with the fact that somebody has died. They're confused by the process, and they're confused by their feelings. Yes, they can expect to feel bad for a day or so at the time of the death, but three or six months down the track …so educating them around that is often very helpful to normalise what has been happening to them.

While education to normalise grief experience would appear valuable on both personal and social levels, it may obviously have its limits if only a small proportion of the population is privy to the information. Without widespread education, only bereaved young adults who have a wide range of supportive individuals are likely to avoid being affected by this 'lack'. This is evident particularly in the area of future plans and life strategies articulated by the

bereaved participants. On the basis of the counsellor and bereaved participant interviews, the supportive individuals were typically those who knew the sibling who died, and/or were touched by the circumstances of the death/s.

To outline how a wide-range of supportive individuals could play a prominent role in promoting the future plans and life strategies of a bereaved young adult, an elucidation of some issues relating to the stress of 'life going on' is necessary. To begin with, the participants – for whom less than two years had passed since the sibling's death – often mentioned that there could be 'too much change' occurring in their social life-world (that is, external signs of the passage of time). Concurrent with this was a desire for time to 'stand still'. As vain a wish as this would seem, at least in symbolic terms it was felt to sufficiently honour and acknowledge the sibling's life and death. For these participants, the strategy for dealing with all that everyday living entails is to approach it 'day by day'. The future would seem to be rarely contemplated, at least not in positive terms. Although the observation of 'life going on' can lead to feelings of despondency – the majority of participants noted that anniversaries could be particularly effective in evoking grief-related feelings – more strategies and life plans typically emerge after the two year mark.

Interestingly though, for those participants who had a wide-ranging support system that provided 'meaningful' support, their life strategies were more inclusive of future plans; there was greater evidence of a 'reflexive' response to their bereavement. This was regardless of whether they were, or were not, situated within two years of their sibling's death. The future was viewed in a more positive light and, on the basis of timeframes, this positive view was adopted at an earlier point in the 'grief journey'. Along with this trend was less reported bitterness and disappointment in relation to the supportive behaviours of other people. Their future plans could involve creative activity that honoured and acknowledged the sibling's death, without accompanying reservations regarding public response to it.

Eight of the twenty-five bereaved participants also reported how bereavement experiences could influence their outlook on life. From this minority, some reported that it was only in retrospect that they could see the development of particularly negative world-views. For others, they mentioned that they were conscious of a significant alteration in their mindset occurring within a short period of time following the death. In both types of experiences however, examples were cited of the need and the value of a re-education and re-evaluation of their responses to life events.

For instance with BRIAN's (2 years & 11 months since his brother's death) example below, it appears that he was more in need of advice and support in learning how to *re-view* social interactions than he was in need of gaining an awareness of how the grief could have affected him.

> BRIAN: With the suicide [of my brother] there were lots of questions about the world and there were a lot of doubts that came into my mind about the world…about humans and the way they treat each other and the earth. I had a lot of doubts about humanity…when I would go out socially I would go out and look at people and judge them in a negative way. That would impact on my socialising… Last year, when I hadn't had a holiday and I was stressed with work, I decided to go and see a psychologist about my thoughts…she challenged my negative thoughts and how I perceived things. I'd always considered myself to be quite a positive person before my brother's death. That was a change since his death I really noticed. So she helped get me back into the – [referring to an example of perceiving a social situation negatively] "Look at the two women. They're not gossiping [as I initially believed], they're catching up and enjoying seeing each other. Good on them."

By contrast, VICTORIA mentioned that the cognitive behavioural therapy she was undergoing was viewed by her as an opportunity to overcome a negative mindset. Her negativity had gradually developed within the six years following her sister's death. Given the gradualness of this development, the negative thinking was rarely viewed as bereavement-related, but was attributed more to personal deficiencies. An example such as VICTORIA's provides significant

support for assertions such as JOHN's (counsellor) of the importance of having a template that informs bereaved individuals of how bereavement can produce a filtered view of social experiences.

Another participant, KIRSTEN, made particular reference to what she saw as the significant media attention given the Australian national depression initiative, 'Beyond Blue'. She noted some parallels between symptoms of depression and symptoms of grief, but the primary value of the initiative for her was the opportunity it presented for increasing public awareness of the life factors that can contribute towards depression. Also, the social 'invisibility' of depression she saw as similarly characteristic of the lack of social recognition of grief. So, in the process of raising awareness of depression, some valuable information on the impact of grief could be imparted.

However, two of the counsellors noted what they saw as cultural characteristics that they believed could stifle social recognition of the ongoing nature of grief; the characteristics relate principally to a preoccupation with viewing problem-solving within a short-term prism. They argued that, if applied liberally to everyday living, such a preoccupation would undermine the importance of long-term support for bereaved individuals.

> JANE (counsellor): Look at the TV – you can fix any problem, everything. When you can't fix things, people don't have natural answers, you have to make them up as you go. I don't know how many people are naturally taught that it's great to just listen to someone. It's not valued.

> LORRAINE (counsellor): [The bereaved person] doesn't know what to say to other people because I think they think "Well, what can anybody do?" We almost need to be educated into recognising the value of sharing things for its own intrinsic benefit.

What was commonly expressed by bereaved participants was that there were definite benefits in talking with others about one's grief. For instance, the talking/disclosure could provide a release-of-sorts from troubling thoughts.

Also, it was valuable to hear other perspectives as well as develop and clarify one's perspective on the nature of grief. However, such benefits were often discovered in hindsight; until the patterns of experience were recognised, talking appeared to be attached more to the *need* to express one's thoughts than it was attached to the expectation that talking could in any way prove beneficial. Therefore, LORRAINE's (counsellor) assertion that "we almost need to be educated into recognising the value of sharing things for its own intrinsic benefit" has a particular relevance – and resonance – for bereaved, as well as nonbereaved, individuals.

JAMES' (counsellor) concerns regarding ongoing social recognition of grief were centred on what he viewed as a media emphasis on 'closure' in the bereavement experience. He believed it was common for discourses of 'closure' to accompany televised news items on the funeral of a well-known public figure or the resolution of a court case involving murder or an industrial accident. He was also doubtful as to whether the ongoing media attention of anniversaries for 9/11 and the Bali Bombings of October 12, 2002[12] served more as an indicator of the ongoing nature of grief than it did as a memorial for 'high casualty' tragedies. He noted that with each anniversary, 'closure for the families' was a central discourse, an observation similarly noted by the two bereaved participants who had had sibling's die in the Bali bombings.

The counsellors' examples of the potentiality of 'short term solution' and 'closure' discourses to obscure public recognition of the ongoing (if sometimes 'postponed') nature of grief were at times balanced by positive accounts of public response to bereavement education. To reiterate, the social value in bereavement education is most likely to be dependent on the size of the audience and the extent to which the knowledge they gain is utilised to inform others.

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[12] On this date, two bombs were detonated within the Sari nightclub, killing 202 people. (88 of whom were Australian.) With this act, the threat of terrorist acts was brought ominously closer to the Australian way of life, both literally and figuratively.

ELIZABETH (counsellor): There's not that opportunity to talk about it [with peers] and that was where we had some of the students go and talk to the student welfare co-ordinators and to a number of interested students about what it has been like for them. I think that was one of our more successful talks. There was a lot of interest expressed in that.

7.2 The benefits/deficits of work

A number of the counsellors commented upon how the bereaved young adults they saw tended to express surprise at how quickly 'life moves on'. In more specific terms, the young adults were surprised at how quickly they needed to reintegrate themselves into the daily patterns of life. This was to ensure the continued procurement of everyday essentials, such as food, homecare items and clothing. Another sign of life moving on was the need to reintegrate themselves into work patterns, such as paid employment or tertiary study.[13]

Based on the bereaved participants' responses, it is difficult to even speculate on how the level of trauma associated with a particular type of death (such as the trauma of suicide vs. the trauma of vehicular accident) may impact on the level of one's ability to concentrate. Or alternately, how the strength of the sibling attachment similarly impacts on the individual. For some, concentrated work was a respite, a chance to rest a distressed mind through concentrating on the required task/s, while for others the concentrated activity of work was yet another taxing activity in the daily challenge of living.

As the bereaved participants' responses suggest, the concentrated 'escape' of work was not always successfully attained by all bereaved young adults, particularly those who were still within three years of the sibling bereavement. In these minority cases, an inability to concentrate for extended periods tends to invade all contexts. On the basis of the interviews conducted, there is an evident pattern relating to concentration; as the waves of grief grow wider so concentration becomes sharper and is sustained for longer periods.

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[13] Accounts of bereaved young adults' experiences of *unemployment* are referred to in subsection 7.5 – Socioeconomic options and unemployment.

One might reasonably speculate that work satisfaction or the particular demands of one's occupation is intrinsic to optimising and sustaining concentration, but even on this level, the variation remains. For instance, CATRIONA, who stated she had always loved primary teaching, found sustaining concentration for even short periods had become a major difficulty in the two years following her sibling's death. Another participant, BROOKE, found in her work duties a respite from her bereavement-related preoccupations. However, she stated that both prior to – and following – the bereavement, she had viewed her journalistic assignments with a minimum of enthusiasm.

The tendency of grief (or at least episodes of grief) to preoccupy thoughts to a physically exhausting level might continually frustrate the bereaved young adults' attempts to reach expected levels of workplace/tertiary study productivity. However, there may be another factor that thwarts adequate productivity for the bereaved young adult, and this relates to a recurrent theme in the bereaved participants' accounts. There appeared a relationship between the motivation for being a productive employer/employee/student and the level of empathy expressed towards the sibling's death by individuals within the workplace/study environment. Participants' accounts continually noted how an empathetic supervisor and/or co-workers, for instance, could influence them significantly in continuing or aspiring to be reliable, autonomous and productive in their endeavours. However, a lack of consideration or enquiry into the ongoing nature of their grief complicated efforts to concentrate and maintain a competent level of work.

So, although the reintegration of one's self into work patterns is only logical, it nevertheless can surprise the bereaved individual in its symbolic indications of how quickly 'life moves on'. The benefits of concentrated activity are such that an escape or diversion from grief-related thoughts can be provided. Furthermore, it is on a social-interpersonal level that tensions and disappointments are experienced and negotiated. However, it would be negligent to underestimate the influence of the social-interpersonal on the social-occupational. On the basis of the data collated the desire and/or

requirement by others for the bereaved individual to return to or attain a productive and autonomous 'working-self' is more likely to be achieved if an empathetic work environment is experienced by him/her.

7.3 The fear of burdening others

One especially pertinent issue that arose in the interview process concerns difficulties in social interaction that can obstruct bereaved young adults' efforts to procure 'meaningful' support.

> JOHN (counsellor): You can find [bereaved young adults] can be articulate and thoughtful about their bereavement experiences - with an immediate family member usually, not so much extended family members. However, outside of that person or people, they keep it all to themselves. They don't like making other people uncomfortable.

This issue – 'the fear of burdening others' –will be looked at from a variety of perspectives (especially male/female differences in what the anxiety encapsulates) within Chapters 7-11. The anxiety of the participants related as much to their perceptions of socially acceptable behaviour and acceptable topics of conversation as it did to others' responses to their bereavement status. As mentioned in regard to familial relationships, the impact of the bereavement can influence an undesired realignment of a bereaved young adult's 'social roles'. As BRIAN (counsellor) opined, the inability to maintain a 'fun-loving' social role may seem to the young adult as a negative development in the midst of attempting to maintain social relationships. Until the sibling's death can be incorporated comfortably into the young adult's everyday living, he/she may consider the realignment a burden, not only to one's self, but to the people with whom he/she interacts.

On this note, it is difficult not to wonder whether the young adult's reading of other's discomfort is linked partially with his/her pre-bereavement perceptions of the social appropriateness of death and grief as conversation topics. Do they view the topics as inappropriate in the majority of social contexts, especially if

conversation moves beyond a more superficial appraisal of death and grief (that is, superficial appraisals based on media or filmic representations of death, grief and tragedy[14])? Based on a minority of participant responses, a significant post-bereavement learning curve occurred when they realised the *extent* of the general discomfort other people had with the subject of death (even associations with death such as reflecting on the sibling who died) and the ongoing nature of grief. While they initially may have assumed that people might experience some awkwardness in approaching the subject matter, their early experiences of post-bereavement socialising soon made it apparent to them that they may have underestimated the extent of such awkwardness.

KIRSTEN and BROOKE's experiences below are reflective of the counsellors' accounts of their clients' realisation of their social discomfort. Such realisations had occurred through the reading of both gestures and the rhythms within conversation.

> KIRSTEN: In the early days, I would disclose [my brother's death] very early on – soon after I said, "Hi, my name's Kirsten." It was very immediate and right in front of me. It was something that was very much a part of me. These days I don't [mention the topic as soon or as regularly in conversation]. It's not because it's not a part of me anymore – because I now almost feel awkward saying it because I know people react uncomfortably.

> BROOKE: I found so often if I tried to speak about Martin people would withdraw. They would either physically withdraw or they would mentally withdraw and wait for a pause in anything I was saying and then change the

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[14] In his essay 'The Pornography of Death' (first published in 1955), Gorer (1977: 197) argues that violent death has "played an ever-growing part in the fantasies offered to mass audiences" while natural death has increasingly become hidden or ignored in mass representations. The glorification of violent death, Gorer notes, is displayed in the literature and cinema of detective tales, thrillers, Westerns, war and spy tales, horror comics and science fiction. If Gorer was writing on the late 20th – early 21st centuries he presumably would expand his list of 'providers' to include television, computer games and the internet.
A point made by Gorer is particularly pertinent to the above statement on 'superficial appraisals' of death and grief. In his linkage of pornography with death, Gorer provides an appraisal of a chief characteristic inherent in mass representations of death. That is, just as pornography pays 'little or no attention' to accompanying emotions of love in its representations of sex, so representations of violent death typically underplay accompanying experiences of grief for those affected by the death/s (1977: 197).

subject. When they did that subject change I would be very aware of it. I would feel self-conscious and awkward because people had changed the subject…I would feel kind of guilty because a really good conversation may have been going on and I would drop in something about Martin, or the whole business of death, and everything would change…I felt I had made it hard for everyone. People never wanted to go to that deeper level. They were very happy to skate over the top of what was going on.

Overall, bereaved participants found that there were certain bereavement-related topics that people were relatively comfortable with and other topics less so. If the person had known the sibling who died, then they were likely to be comfortable with listening – and contributing – to happy and fun stories involving the sibling. Alternately, acquaintances might express a curiosity in the circumstances surrounding the sibling's death and their family's approach to coping with tragedy. Both groups however would be likely to communicate a discomfort with bereaved participants' accounts of ongoing experiences of grief.

7.4 Young adulthood

BROOKE's comments above alluded not only to the anxiety of burdening others, but to the personal burden of interacting with peers who were not prepared to engage in bereavement discussion that moved beyond a superficial level. Her further comments (included below) about the burdens inherent in peer interaction raised issues pertaining to the development of self-identity during young adulthood. Her views suggested that within the process of establishing a secure sense of self, performative interaction is focussed upon at the expense of interactions of a more 'meaningful' nature. The interaction is performative in the sense that the young adults trial a variety of potentially self-affirming social identities. As such, these interactions could be felt by the bereaved young adult to be more about self-aggrandisement than empathy or understanding; they were felt to constitute a surface empathy.

BROOKE: People were in their early-, mid- and late-twenties where everyone thinks they're very sophisticated and talk about serious issues in a very shallow

way because it's when people are learning their opinions and are pretty happy with some of their ideas. I felt that a lot of it was front, because I was going through a huge and real event. And while they were happy to talk about that surface, shallow stuff no one was very brave about wading in and talking about death. Happy to talk about it in a third person, distant kind of way, but not to me, in a close sort of way.

One of the questions posited in Chapter 3 was – 'Could the physical isolation of bereaved young adults protect a society from the potentially disruptive and upsetting 'spectacles' that the emotional rawness of one's grief can evoke?' To address this issue, some reiteration of Mestrovic's (1997) theory of 'postemotionalism' is required. BROOKE's view of her peers is reflective of 'postemotionalism'; the theory asserts that while emotional expression is promoted within consumer-oriented and media-focused Western societies, the principal goal is to avoid emotional disorder (Mestrovoic 1997, cited in Williams and Bendelow 1998: 150). Applied to bereaved young adults' social experiences, 'postemotionalism' does not necessitate a physical isolation from one's peers, but it limits the content of conversations in order to avoid potential disruptions within social interaction.

> BROOKE: I probably alienated myself – I was angered by the way they perceived themselves to be deep thinkers and confronting a great many of life's problems…it's that whole thing of people asking "How are your parents?" and not asking you how you are. Maybe that's a bit too hard hearing from you how you are, and again it may be that they would have to speak to you on that deeper level. People don't really want to do that…or very few people do. I think people feel that young people are resilient – well, it's not even really resilient – it's that they somehow deflect death. It was people around my age and people who were living quite a fast life – they didn't want to be dragged down because it was a time in life where people were eating out every night and going to theatre and films and sport events and going out with different ones and trying to establish long term relationships – it's just a very busy time. It was a depressing, difficult topic and it was easier not to deal with it.

Another question posited in Chapter 3 was whether the 'psy' complex (Williams & Bendelow 1998) produces the desire in a (nonbereaved) individual to understand the 'other' (the bereaved individual)? The 'psy' complex was referring to the contemporary tendency of non-professionals (that is, 'lay people') to frame their everyday problems and issues in professional therapeutic terms. Would they apply this therapeutic gaze towards the problems of other people? In terms of their peer groups, the common complaint of bereaved participants was that any such gaze was felt to be enacted on fairly superficial, self-focused terms; the quest for self-understanding seemingly outweighing a more outward-directed desire to 'understand' others.[15]

However, in relation to BROOKE's particular experiences, it is worth noting that 18 months prior to her brother's death, she moved from a rural location to a metropolitan one. Within that timeframe, she did not feel she had developed any significant relationships. She did have a boyfriend, although ultimately the closeness of their relationship did little to alleviate his discomfort with her brother's death. If BROOKE had lived in this metropolitan environment for an extended time, would the greater period have optimised her chances of procuring 'meaningful' support?

The subsection 'People who knew the sibling' in Chapter 10 will suggest the influence of these time-space factors in procuring 'meaningfulness'. On the other hand, it was apparent that in both the bereaved and counsellor interviews that the bereaved young adults' grievances were most commonly directed at the young adult age group. Like BROOKE, CLAIRE was living in a metropolitan location when her sister's death occurred. Unlike BROOKE, it was an area CLAIRE had lived for the most of her life. As her comments show below, the disillusionment with peers was quite similar in nature to BROOKE's (that is, frustration with performative interactions and the 'setting one's self up' preoccupations). CLAIRE's disillusionment was stated indirectly through her praise of the support offered by her mother's middle-aged friends.

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[15] There were more positive suggestions of the 'psy' complex in bereaved participants' accounts of interaction with other 'loss'-experienced individuals and individuals with a greater level of 'adverse' life experience (see Chapter 9).

CLAIRE: They are genuinely interested [in you] – they're not just throwing questions at you because that is what you do. They are interested in what you're up to, and how you're feeling. Perhaps because they're mothers as well they're more interested in how you're feeling as well…I could call them up tomorrow, say, with all these feelings and they would be happy to catch up – they can make the time and the allowance. They're not so preoccupied with their own thing, and I guess I found out a lot about the girls I know. I don't have any single female friends. Once they've got their relationship, that's it. I mean that's fine, I would probably do the same thing, but they're so wound up in their own little world… I think one friend does [have strong memories of my sister and would be prepared to reminisce about her]. [She's] my best female friend, although she's married now.

Two further examples of support from parent's friends are similarly indicative of the particular difficulties that could occur in relating with young adults. In the second example, KIRSTEN's comments illustrate a dramaturgical-like struggle with peer group dynamics, coupled with a maturity that placed her outside common peer group interests and concerns.

MIRANDA: I get along better with older people than younger people. Those friends are Mum and Dad's age. They're more understanding – some have been through a similar situation, a loss in the family, but in a different situation.

KIRSTEN: I think because [his death] happened when I was young [18] it aged me prematurely, to a certain extent, but it also interrupted my development. So in some respects I felt like a little child inside…the people I get along better with are my parents' friends, to be honest – people who are in their forties and fifties. They're the people I feel comfortable with. With people my own age, I have difficulties having relationships with them. Maybe it's because life is simple when you're young. Life gets more complicated the older you get, and you have more commitment – and there's more baggage you carry around.

In terms of social comparison, bereaved young adults' interactions with peers may also produce anxiety. When their values have altered from mainstream

peer values and their energy levels are erratic, the thought of being 'out-of-step' with or 'behind' their peers is not always a reassuring one; particularly in lieu of the isolation it can invoke.

> TONI (counsellor): It's hard [for bereaved young adults] to hold [their peers'] attention and sympathy. "Let's move on and get on with things" – especially at that age with most of the people saying, "Do something." Well, what can you do? That in itself can be isolating, when the bereaved young person cannot get on and can't put the experience behind them and they see their friends' lives moving on. It can be hard if they haven't been able to keep up with that peer group, which is quite important at that age.

JOHN (counsellor) observed that the level of social support from peers, as well as the opportunities for the bereaved individual to be reflective and contemplative could be influenced by where the young adult was situated in terms of age and social-developmental 'markers'.

> JOHN (counsellor): If [bereaved young adults are] still in their teenage years, then their ability to stay on a serious topic is limited to a certain period of time. If they are inclined to stay on the topic then often their friends will listen for a while, and perhaps off and on, but not continuously. Not often do you find someone under 20 who is prepared to talk about grief and loss. But 25, 26, 27 – they're more likely to get a hearing. It does happen, but it's not the normal thing. You're more likely to see it come out in the wash with other problems people talk about in their twenties. The general mood is now that A leads to B leads to C, rather than something that's a bit more mosaic in early adulthood. You jump from one preoccupation and activity to another. Then, things start to be corralled a bit. If you've got an unresolved issue when that is starting to happen, either you'll be distracted by the new order of things - a new relationship, a new job, buying a house, having kids, new friends, having money to pursue new interests - or because there is a new order, you've got a bit more time to be contemplative.

If it is any reflection of JOHN's (counsellor) comments, there was a distinct tendency for participants, bereaved in their late-teens/early-twenties, to develop new friendships with more 'compassionate' individuals, when they entered their

mid-to-late-twenties; there was thus a greater opportunity to "get a hearing." Friendships were procured that were more emotionally open, and by this time, pre-bereavement friendships would have significantly decreased in number. As suggested, this trajectory was not experienced by all the bereaved participants. For example, participants with a wide circle of friends who had known the sibling who died were less likely to have sought out new friendships.

A further similarity to JOHN's (counsellor) comments was shown in the greater tendency of bereaved participants, aged in their late-twenties to mid-thirties, to view their bereavement experience in a more philosophical and contemplative light. This was largely irrespective of the amount of time that had passed since the sibling's death; while reflective in relation to their bereavement experiences, participants located within two years since the sibling's death, would more often describe the immediacy of their grief.

Continuing on the theme of young adulthood and associated levels of reflectiveness, the counsellors noted that the bereaved young adults they saw typically did not identify the treatment they received from other people as symptomatic of wider social values, such as 'narcissistic' self-involvement or 'autonomous' fears of dependency. Only a minority of bereaved young participants, commonly the older participants, identified how their social experiences might be indicative of social values. It was more likely they would view their bereavement experiences in experiential terms; for instance, in not being spoken to about bereavement experiences or conversely having family and friends willing to hear of such experiences.

An observation made by JAMES (counsellor) was suggestive of where the mindset of bereaved young adults could notably differ from that of other young adults. He noted that the experience of bereavement could produce in young adults a more tolerant attitude towards the behaviour of – and 'life choices' made by – individuals they interacted with in their daily lives. JAMES (counsellor) drew the analogy of the person who, prior to the bereavement, 'has it all' on interpersonal, occupational and financial levels; at that time, he/she

would have been perplexed as to why, for example, another individual would not have secured employment in the last year or could not seem to recover from a broken relationship. The 'has it all' individual interprets the behaviour and 'choices' of others from a personal standpoint of 'I've taken every opportunity, so why shouldn't they?'

From a perspective similar to the phenomenological notion of disruption to one's typified social life-world, JAMES (counsellor) observes that bereavement highlights to the 'has it all' individual that there are no 'clear-cut answers in life'. The bereavement highlights the complexity of life, particularly in regard to how one responds to significant life stressors. In this regard, two of the bereaved male participants mentioned that they had become less judgemental of the ambiguous and/or unappealing behaviour of other people; they said they now gave greater consideration to the negative factors in peoples' lives that could play a part in motivating such behaviours. However, in the majority of bereaved participant responses, this greater recognition of the complexity in everyday living was more likely to draw the bereaved young adults to the individuals they deemed to be more 'compassionate'; there was less tolerance of individuals who interpreted life events, particularly bereavement, in 'black-and-white' terms. So, a desire to understand the difficult behaviour of others was rarely articulated by the bereaved participants. The desire for empathic activity, which was expressed by a minority of participants, might suggest otherwise, if indeed their energies are not concentrated solely on other bereaved individuals. A desire to understand and support others would at least carry positive social ramifications as well as contribute toward a greater sense of social connectedness for the bereaved young adult, assuming a greater sense of connectedness was necessary for the individual.

In illustrating the areas where peer relationships can fall into difficulty and alienation, this subsection ultimately may have cast a rather sobering view of young adulthood and its associated capacities for support and self-understanding. However, Chapters 9-11 provide a number of examples where

'meaningful' support from peers has been experienced by the bereaved young adult.

7.5 'Look after your parents' & sibling attachment

Seven of the bereaved participants recalled experiences where a person or group of people advised and encouraged them to 'look after' their parents. The issue for the participants was not the sentiment as such, but that sentiments toward their own grief were not similarly forthcoming. It constituted another example where the bereaved young adult could feel his or her grief was being underestimated. Although a minority, the participants' comments on having received such advice were particularly emphatic; these moments appeared to carry a particular significance in their experiences of social recognition and tolerance. Such advice was rarely cited as having been articulated by a peer or an immediate family member. An extended family member or friend of the family's was more likely to have done so.

> MARK: One of my Mum's friends is a clinical psychologist, and clinical in every sense of the word. Absolutely no emotional…none whatsoever. She said to me once "Now, you take care of your mother." This is right after it happened. Take care of my mother? Who's going to take care of me? That was a really silly thing to say, especially coming from someone with such apparent high qualifications.

Based on the bereaved participant and counsellor responses, ALANA's continual experiences (outlined below) of the undermining of sibling grief were not typically recounted by the bereaved participant population. However, the recurring nature of ALANA's experience point towards another area where bereaved young adults, or bereaved siblings specifically, can experience negative forms of social isolation.

> ALANA: With the exception of the above mentioned "kindreds", whom I have had poignant, and incredibly beautiful experiences of shared mourning with, I do not show my grief to anyone. On the occasions when it is mentioned, usually resulting from probing questions about the whereabouts or dynamic of my

family, the person usually belittles sibling grief. The number of times I have been informed by someone who has no idea that my grief "couldn't hold a candle to my mother's" is staggering…bereavement is a very interior process, especially for siblings, whose grief is largely ignored by most people. So often, when responding to prying questions, I have been hurt by comments that my grief is somehow less significant than my mother's.

Five of the bereaved participants mentioned that they had had an especially close relationship with the sibling who died. The volunteering of such information appeared to be for the purposes of providing a context for the intensity of grief that they described. For instance;

> CATRIONA: I know everyone is special. I know everyone has special kids. But Georgina was just amazing. It's still enormous. She's the one who never should have gone. Too special to too many people. I always had a protective role with her. She was my baby sister and no one could do any wrong by her. I just wanted everything to be right for her all the time. For me, not to be able to save her was huge.

Unless bereaved participants volunteered information about the nature of their sibling relationship, the issue was not raised during the interviews. Questioning the quality of their relationship in the face of the grief they were describing seemed inappropriate, even insulting. So, even though some knowledge of the sibling relationship might have provided further insight into the character of their grief (feelings of guilt and the sense of missed opportunities, for instance), the issue was not pursued. Based on the comments the bereaved participants did offer, it was their post-bereavement experience of sibling (and wider familial) attachment that emerged as particularly salient in their bereavement experiences. Whether the sibling relationship had veered more towards the positive or alternately toward the negative, the overwhelming feeling was that the sibling's absence highlighted the centrality of familial relationships in their life. It was not uncommon for participants to feel that in retrospect familial connectedness had been underestimated or taken-for-granted prior to the sibling's death.

7.6 Socioeconomic options & unemployment

The data did not generate any clear connections between socioeconomic background and levels of social isolation experienced. In any respect, socioeconomic factors were overshadowed by the salience of social support in tempering bereavement experience. However, income – whether it is parental income, self-earned income, or a combination of both – was notable for the 'material options' it provided young adults. 'Options' included taking a holiday, taking time off work or moving into an apartment. The 'options' could operate on one level or on a multitude of levels for the bereaved young adult; they could operate as diversions, or as an opportunity for contemplation, or an opportunity for release – however temporary – from social difficulties, such as the distress associated with observing parental grief. However, the capacity of 'options' to temper experiences of grief was difficult to ascertain. Certainly, there did not appear a connection between an array of income-related 'options' and the successful procurement of wide-ranging, 'meaningful' support. If anything, bereaved participant accounts suggested that the value of 'options' emerged relative to the experience of insubstantial or disappointing support from others.

In symbolic terms, a holiday or a new residence could be felt to represent, at least in hindsight, a progression in the grief 'process'. Whether these 'markers' were actually effective in tempering experiences of grief and/or a sense of social disconnection (in comparison with the experiences of bereaved participants who referred to fewer income-related 'options') was not particularly evident.

With regard to the relatively scarce bereaved participant accounts on the experience of unemployment – a scarceness that may suggest a low representation of bereaved young adults from poorer socioeconomic backgrounds – lack of employment did appear to correspond with reduced options in procuring social support. However, the interrelationship of unemployment and bereavement, and its consequent effect on the individual's social identity and social confidence remained indistinct on account of the low

representation in this area. A couple of participants, GRAEME and ALISTAIR, had considered unemployment a preferable alternative to paid employment, particularly in the early years following the sibling's death. Even though periods of unemployment had isolated them from others (aside from family members and close friends), the influence of the bereavement on their personal values and tolerance levels often rendered their work relationships fraught and unsatisfying.

> ALISTAIR: You've been through this huge event, and then you walk into a workplace which can be full of gossipy behaviour. There's status stuff as well. It seemed so unnecessary. I know it's pretty much impossible to truly get along with everyone, and you have to work a way around that. It's not easy, and conflict is sometimes impossible to avoid, but some people just fuel the flames. I did meet good people – it's not as though the workplace is all bad, it certainly isn't – but the unpleasant people I found difficult to ignore because even many of the good people were uncomfortable with the fact I had a sibling who was killed…to me, my brother's death set in stone ideas I had about being a mature individual and I walked into a workplace that beneath the surface didn't seem much different than a playground. So when I was unemployed, I found it pretty damn hard to work up any enthusiasm towards looking for jobs, although I would have to say that the grief as well had a large impact on my enthusiasm for life.

7.7 The type of death

A principal question posed in the Methodology chapter was 'Is the data collated suggestive of a relationship between the type of death and the level of social isolation the bereaved sibling subsequently experiences?' In relation to this question, some comments CLAIRE made provided a succinct overview of the study's findings on this issue. CLAIRE experienced the death of her father during her mid-teens, and the death of her sister in her early twenties. Both deaths occurred through illness. A month after her sister's death, the sister's boyfriend (whom CLAIRE said she loved like a brother of her own) committed suicide. CLAIRE's comments below highlights how, regardless of how the sibling's death occurred, the grief associated with an individual's absence is an

inherent part of bereavement. What the type of death can add – in a sociological sense – is a particular social 'character' to his/her grief.

> CLAIRE: In say comparing a sudden death with a long, drawn-out death, there's the feeling that with sudden death there is no chance to say goodbye. As I've experienced both types…just knowing that the death is going to come doesn't make it any easier when it does come. Both ways are bad, but some deaths also have the trauma-factor because of the suddenness of it.

Before proceeding further, it should be emphasised that societal discomfort with the facts of death and the ongoing nature of grief was a constant in the bereaved participants' experiences (albeit to often differing levels) regardless of the particular influence a 'type of death' could have on social interactions. To proceed then, a number of trends were observed regarding the social 'character' and consequences of types of death. For instance, with an industrial and/or workplace death, the bereaved young adult may experience an accompanying loss of faith with the fairness of social systems and human motives.

> BEN: This experience [with the legal system and not receiving any answers] drew me closer to religion, my faith in God, but destroyed my faith in humans. I saw some of the colder and murkier aspects of humans come out through dealing with solicitors, through dealing with managers, and just individuals who have no concept of the grief you are going through. I used to be a black and white person, and now I had to see the grey, and that created a whole other set of problems because I didn't understand how people could be so underhanded and how people can see something so obvious and do everything to contradict what is fact. That caused me heaps of grief, along with my family as well. It was a soul destroying thing – a human life can be removed and no one really cares. Don't make it a health and occupational issue. What about the family who are affected by this?

In the case of suicide, the question of 'Why?' can preoccupy the individual to both a personal and socially debilitating level.

BRIAN: My friends were understanding but they didn't really *understand* (italics mine). Initially, I wasn't ready for them because I suppose a lot of it was stigma as well – you know, what people think about suicide or "That family is disturbed." When you're thinking about all these different things and spending so much time trying to find these answers, everything else in your life obviously falls back behind and that adds to the (problem) as well…(his death) had a massive impact…I went to a counsellor, but it wasn't said to me that I had depression. Looking at the signs and symptoms of depression, I had most. Feeling down for more than two weeks and not feeling able to socialise – I had a lot of that…it's just that you're constantly reminded of it, and you're constantly coming up with questions, but you don't find answers to a lot of the questions. It's something that really drives you crazy. All these questions – it continually goes round and round in your mind…there are times you just have to stop and go to sleep. Get some sleep. Physically you're just so drained – headaches, nausea, you're so tense.

With a vehicular accident, the bereaved young adult's social expression of grief could be severely constrained by the apprehension that people would judge the sibling's actions as having been irresponsible and/or unsafe. In fact, in the case of suicides, workplace accidents and vehicular accidents the fear of judgement was found to be a shared anxiety. Aside from a few close confidants, social expression of grief was curtailed partially on account of this apprehension. So, the need for recognition and acknowledgement of the sibling could be compromised by the sense one needed to engage some level of caution within social interactions as a way of safeguarding familial reputations.

The spectre of judgement may also figure in cases where the cause of death remains unascertained. However, REBECCA suspected that the overriding factor that alienated her from her close friends was not so much the speculation and talk, but rather the mystery surrounding her brother's death. She felt that it proved a further complication for others in approaching her.

REBECCA: I feel that I turned off the few friends…I don't really see them anymore. Maybe they found it difficult to understand the whole concept of how he died because there was mystery to my brother's death. I think there was a lot

of talk. I don't know, but I was pretty sure there was a bit of talk about how he died. People may be finding it hard to - you know "What do I even say?" They may feel uncomfortable about the whole situation.

Much was said in Chapter 6 about the process of accommodating/accepting the sibling's death into the fabric of one's everyday life, and how social interactions may (in the most positive scenario) become less fraught and more fulfilling in the course of this development. Based especially on the counsellors' observations, a component of the accommodation is coming to terms with the manner in which the sibling died. Suicide is perhaps the prime example of where accommodation is manifest in a prolonged and often agonising process for immediate family members, in particular. However, also mentioned by a minority of the participants were traumatic memories and imaginings surrounding the circumstances of the sibling's death (ie. the pain and/or fear experienced by the sibling in a workplace accident, the sibling's contemplation of suicide and decision to proceed). In effect these memories and imaginings could 'haunt' the young adults' everyday functioning for an extended period, until some level of adaptation and conciliation with the circumstances of the death occurred. Memory could also produce trauma and anxiety in that death effectively transformed the sibling from 'living being' to 'memory'. Memory could thus become an integral and essential link to the sibling; so much so that the fears that the memories themselves would fade became prominent.

On a personal level, I related to any fear a participant expressed in relation to fading or obscured memory. However, over an extended time, I found for myself that some memories do not diminish and that anxiety could not obscure their clarity. Nevertheless, this concern was palpable in the early years following the bereavement. Also, I felt that I participated 'outside' of social interactions. That is, I felt unsettled that time would ultimately wear away any personally 'meaningful' interactions in the way I feared it would wear away at the clarity of my brother's memory. It took roughly the five years to allay this anxiety. Although a minority of participant responses hardly suggests the

universality of my experience, it does provide further contemplation of how bereavement can make one feel 'apart' from the dynamics of social interaction.

There were some reassuring examples of where social support transcended any tendencies to judge the type of death, but shared experience and geographical closeness appeared necessary conditions for ensuring this support. The bereaved participants affected by suicide mentioned a series of social judgements that tended to accompany this type of death. There was the previously mentioned stigma of mental illness associated with the family, but there was also the religion-based conception of suicide as a 'sin' and the more popular (in a contemporary sense) view of suicide as a 'selfish act'. However, negative judgements were observed by bereaved participants and counsellors alike to generally fall away in cases where a spate of suicides had occurred in a geographically small area (ie. a rural town or suburb). As Chapter 11 details in greater depth, when such a substantial number of the population – families, friends, work colleagues, general acquaintances – are affected by the deaths, the tendency to judge is subsumed by the need to understand and comfort. An isolated suicide, by contrast, was less likely to be granted such a considerable level of communal support and understanding.

This trend is particularly interesting in light of the contemplation of Australian cultural identity. The question was asked in the Introduction as to whether certain types of death are considered particularly destabilising to cultural and personal identity, would the social response [to these types of death] ensure satisfactory support for the young adult? In the case of the *Homo Suburbia* myth, deaths of young people are afforded greater national attention than the greater number of deaths of older and indigenous people (Kellehear 2000: 3) as the deaths of young people threaten *Homo Suburbia*'s 'haven-like' images (Kellehear 1997: 7). On the basis of the data collated, it would seem that any stigma relating to a type of death – and consequent with it, the social discomfort with supporting the bereaved – is somewhat mediated by time and space. That is, an 'isolated' suicide is more likely to attract judgement than support for the

bereaved, whereas a spate of suicides in a geographically small area would appear to reverse the social response.

The benefits of communally shared grief were especially prominent in the accounts of WARREN and ROBERT, both of whom had had sibling's killed in the Bali bombings of 2002. The extended media coverage of the bombings included profiles of the victims and their families, the 'hero' status afforded the victims by media outlets, and coverage of the victims' anniversaries. This along with the high mortality rate, and the national anxiety relating to terrorism (arguably largely mediated by political and media institutions) were felt by the participants to promote an ongoing social recognition of both the sibling/s and familial mourning.

> WARREN: I had a mate who died in a motorcycle accident. No one knew a thing about it or anything. When my sister died in Bali – and it would be in the first 3 or 4 pages of the newspaper that first week – the whole of Australia knew about it, and the government was out to help the people involved. I don't quite know how to kind of explain it, but it definitely makes it easier when your sister has passed away and the government is putting you on a plane to Canberra for a memorial service. Just everyone knowing about the Bali bombing, feeling some grief for what happened, it sort of made things easier…the way the people died in Bali, they were acknowledged (by the media) like heroes…I mean, (in other situations) you find out the person's died and five days later it's the funeral. Then it's all over, it's gone, there's no more celebration of their lives. For me, it was spread over two months…the girl who went with my sister to Bali – she had a fundraiser exactly a month after my sister's funeral. It was sort of like another celebration…I look back to the friend who died when I was sixteen and I think of his Mum. I don't know how she…was supposed to pick up the pieces straight away. I think my situation was easier and *I* was still struggling to get through.

WARREN's experience pertained to rituals of 'acknowledgement' that extended beyond the funeral, the occurrence of which was personally reassuring for him. It did not remove the trauma of his sister's absence and the circumstances of her death, but a sense of social disconnection did not appear to

accompany his grief. The 'social' did not weigh on the 'personal', at least not in the sense that support was unforthcoming or abruptly discontinued. One of the problematic social perceptions the counsellors highlighted was the perception that 'someone else' would be 'taking care of' the sibling's grief (ie. a family member, a counsellor, a close friend), and thus would not recognise the value of their own contributions of support.

> JOHN (counsellor): When somebody dies, the funeral, the notices in the paper occur in an *x* amount of days. The wake occurs and then it's over. It's all done in a week, unless there's a coronial inquiry in which case the process tends to drag on. That can make things worse, in terms of an after-effect. Sometimes that process helps, provided there is little doubt about the outcomes of the inquiry. If there is ambiguity or judgements people don't agree with, that doesn't necessarily put an end to things...bereaved people can be surprised by themselves in that they are virtually having to get on with life to make money, to look after people, to do whatever and they might not have really dealt with the issues. What you find in reality is that once the funeral is over, it's all still stuck in your head and everyone else gets on with life. There are no free tickets, and no real provisions are made in society for people who have experienced loss. My experience is that there is not a lot of attention paid to the needs of people who have experienced loss, especially young people. *Everyone assumes that someone else is taking care of it* (italics mine).

The type of death may attract social support, and in these circumstances the perception that 'someone else is taking care of it' does not appear to emerge; a wide range of networks continue to be supportive. However, for the majority of bereaved participants, the type of death can create a fear of social judgement which in itself contributes to a sense of isolation, physical or otherwise. The type of death, in most cases, provided another complication in the process of accommodation and adaptation.

7.8 Conclusion

In considering isolating factors for the bereaved young adults – for instance, the sense of their bereavement status constituting a burden for others – the lack of a

social template for understanding the nature of grief and approaching bereaved individuals became evident. The concern of the counsellors was that whatever template may presently exist centres on 'quick-fix', 'get on with it' sentiments that, if anything, increase levels of anxiety and social disconnection.

The manner in which the sibling died was notable for the fears of social judgement and social stigma it could invoke in the bereaved young adult. Paradoxically, the manner of death could potentially optimise the likelihood of receiving satisfactory social support, most apparent in the accounts of the two men who had siblings die in the Bali bombings. The type of support they received encouraged in them a positive, forward-looking approach to everyday living. More importantly, they felt encouraged without simultaneously feeling required to repress the memory of their sibling/s.

CHAPTER 8

GENDERED RESPONSES TO BEREAVEMENT

This chapter – Gendered Responses to Bereavement – begins three results and analysis chapters focussing on the influence of gender. The other chapters are entitled Sex Differences and Social Support (Chapter 9), and Gender and Social Contact (Chapter 10).

In analysing the collated data from the perspective of gender, three processes have been undertaken by the researcher. The first has been to disaggregate the data, on the basis of sex, in the bereaved participant interviews. Sex differences relating to young adult responses to bereavement, and social experiences of grief, were noted. Secondly, the sex disaggregation enables a consideration of the influence of social constructions of 'masculinity' and 'femininity' on the social behaviours of men and women, respectively. Thirdly, in the collation and analysis of data, consideration has also been made of gendered responses to bereavement. By gendered response, the point is being made that the adoption of 'masculine' or 'feminine' traits is not necessarily relative to one's sex. A bereaved woman may process her grief in a style that is culturally defined as 'masculine' in nature, or alternately a man may process his grief in a style that is culturally defined as 'feminine' in nature. An analysis of the influence of gender therefore exists on three levels.

In referring back to the literature and theory of Chapters 2, 3 and 4, traditional 'masculine' and 'feminine' patterns of social behaviour in most Western societies can be seen to be distinctly opposite to each other in character. This is not to say a male individual's behaviour is distinctly 'masculine' or a female's 'feminine'. Traditional (or hegemonic) 'masculinity' represents behaviour that is active in nature, rational, emotionally reserved and emotionally controlled (White 2002). 'Masculine' traits include independence, autonomy and self sufficiency (Wheeler, Reiz & Nezlek 1983: 952). 'Feminine' traits, by contrast, encapsulate the free expression of emotions, the promotion of affectionate

relationships and the practice of nurturance (Constantinople 1973, cited by Wheeler et al.1983: 944).

These descriptions of 'masculinity' and 'femininity' are utilised in this chapter and the subsequent results and analysis chapters. This chapter will focus exclusively on the gendered responses to bereavement. The following 'gender' chapters will focus more on the sex disaggregation of the data collated and influence of social expectations of gender on men and women.

Gendered responses to bereavement, and their influence on the experience of social isolation, are examined in the following subsections: *8.1 the dual process model of coping with bereavement; 8.2 the 'masculine' coping style;   8.3 the 'feminine/masculine' coping style; 8.4 reflectiveness; 8.5 gendered behaviour and social isolation; and 8.6 gendered behaviour and the 'maturity one may not want'.*

8.1 The dual process model of coping with bereavement

In the process of interviewing both bereaved young adults and counsellors, I have been reminded of issues explored in Stroebe's (1998) conception of the 'dual model process of coping with bereavement'. To re-iterate, Stroebe (1998) was concentrating on the coping styles of widows and widowers as a means of discerning differences, or indeed similarities, between women and men in their personal response to bereavement. The 'dual process model' seeks to redress an imbalance, noted by Schut, Stroebe and van den Bout (1997), in which men tend to cope with grief by concentrating their energies on problem solving activities, while women concentrate on their emotions. In terms of accommodating a partner's death into the framework of one's life, the widower's approach is diversionary in nature, while the widow's approach is active in nature, even though the latter approach could conceivably be judged as 'dwelling on the loss'. So, in daily living, the 'dual process' encourages the widowers to balance problem-solving activity with emotion-focussed activity, and vice versa for the widows.

8.2 The traditional 'masculine' coping style

While Stroebe's (1998) research focussed on an age-group that falls outside the parameters of the present study's focus population, it is nevertheless useful in highlighting the traditional 'masculine' nature of problem solving (emotional rectitude, the 'active' agent) and the traditional 'feminine' nature of personal emotional work (self and *other*-nurturance, interpersonal skills). It is the nature of these coping styles – and the gendered nature of each style – that has emerged as a significant issue in the course of collecting and analysing the qualitative data for this study.

The majority of counsellors interviewed for this study reported that the onset of grief can be significantly delayed for some bereaved young adults. This view was formed on the basis of the counsellors' accounts of contact with clients (aged in their thirties or forties) who were struggling with a series of life crises, most of which were work and/or relationship-related. In the course of these consultancies, the clients revealed they had suffered the death of a sibling during late adolescence or early adulthood. In the intervening years, their daily lives had been moving along relatively smoothly. For example, families were being raised and supported and work promotions were being earned or worked towards. However, in more recent years a series of stressors had been accumulating and/or another significant life crisis may have occurred, such as another death or the breakdown of a relationship. In other instances (or occurring concurrently with these stressors), an opportunity for a sustained period of reflection may have emerged[16], and through the reflection, the clients' have experienced powerful emotions associated with the sibling's death. Until these occurrences, social isolation had not been reported as figuring significantly in their post-bereavement experiences.

The counsellors mentioned that these adults were often somewhat bemused by the re-emergence of acute grief feelings. That is, since the funeral, they had been able to concentrate their energies on the demands of everyday living,

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[16] An opportunity for sustained reflection that is characteristically denied in the young adult's need and/or sense of obligation to set him or herself up financially, interpersonally and spiritually, as well as adopt a 'youthful' pace of living (Evan & Poole 1991).

effectively following a traditional 'masculine' trajectory, and this had sustained them for the last ten or twenty (or more) years. Developmental tasks had been achieved at roughly an equivalent rate with those of their peers and the lack of socially-displayed grief-related emotions and behaviour had meant any potential social awkwardness was largely avoided. As the majority of counsellors have observed, there are bereaved young adults who, on the basis of their post-bereavement experiences, question the overall importance and value of particular social attitudes, such as materialistic preoccupations and ambitions. Then there are those young adults who, to all appearances, do not question or lose faith in social values. Whether consciously intended or not, their actions operate as a means of optimising and/or ensuring their continued inclusion and ease-of-interaction within a range of social arenas. This trajectory is reminiscent of Eckersley's (1995) musings on modern individuals suppressing feelings of unease by keeping themselves continually distracted. However, as some of the counsellors opined, it is more likely that within the demands of modern living and the expectations of young adulthood, there is little time available for the individual to be particularly reflective or contemplative.

In any event, the grief had emerged suddenly and unexpectedly. In a slight variation on this theme, counsellors noted a further sentiment that was often expressed by male clients – for them, there was the sense that the time to talk had arrived, as the responsibilities and busyness of everyday living could no longer satisfactorily submerge feelings of grief. The individual had sensed, and come to the conclusion, that grief-related emotions and feelings could no longer be contained.

The counsellors' comments below are particularly indicative of how Western cultural values, particularly in relation to the 'developmental tasks' of young adulthood, can contribute to this apparent delayed onset of grief. TONI (counsellor), who has a predominantly male clientele, alluded to the 'enactment' of the traditional 'masculine' coping style in young adult responses to bereavement.

> TONI (counsellor): …[because of] the patterns they have established in helping them survive [their sibling's death], the impact [of the death] does not emerge until they're much older…I can talk better for males than I can talk for females – males have said "I want to *not* talk about it – showing feelings and talking about emotions", but will socialise around drinking or engaging in something that is meant to distract from, and not engage in, the process of grieving.

However, even if such activities are not pursued, other activity-focussed paths will be taken.

> TONI (counsellor): I think then their energies might go into their relationships or into their work. Or making money these days is important to young people. I guess their concern for security has increased. The need for family, perhaps their need to create their own family unit coincides with that [need for security]. So there are some things that they can do. Often it's not done in a very thoughtful way. It's underlying an emotional package that is yet to unfold.

JOHN (counsellor), on the other hand, noted how the daily practicalities of everyday living, coupled with a limited (and short-term) array of cultural rituals relating to death and bereavement, contributed towards setting in motion an activity-focussed coping response.

> JOHN (counsellor): Grief is often something that can be masked, as depression can be. You'll often find that people who are bereaved are caught up with practicalities and other people. We don't have a good language for describing the physical sensations that go with loss. We do have a number of rather banal and ritualistic ways of dealing with grief that encourages us to 'get on with it' and not spend time on it, but the reality of it is that many people will not actually process their grief until some time after the event - whether that's a matter of months or even years. They even have delayed onset of some of these issues – 20 or 30 years in some cases – and so the way that grief may reveal itself is a core problem.

The question then emerged as to how obviously the grief may 'reveal itself' to both the bereaved individual and the people he/she interacts with.

JOHN (counsellor): It's varied – it may come up as depression or anxiety, relationship difficulties, sense of loss and abandonment. That sense of abandonment can be projected onto a relationship. So it comes up in a more oblique or tangential way.

8.3 The 'feminine/*masculine'* coping style

Counsellors also referred to a second trajectory of bereavement experience where the 'emotional package' was unfolding quite evidently – on a social and personal level – from the time that the bereavement occurred. This trajectory was reflected in what the majority of bereaved young participants recounted in relation to their own experiences of grief. In these cases, the pressures and obligations of everyday living were situated within an ongoing process of attempting to accommodate the death of their sibling into their lives.

Social isolation had been a seemingly unavoidable by-product of this process. The bereaved young adults could feel they were behind – or were in the process of lagging behind – their peers in terms of developmental transitions. They could also feel a sense of separateness from the majority of those with whom they socialised; outside of family (as a general rule, that is), they found their values and personal preoccupations had become significantly different from other people's. What these bereaved young people have reported is a trajectory of grief that is quite unlike the 'diversionary' response counsellors have noted; their response was more feeling-oriented, and by extension, followed a more recognisably 'feminine' path.

The function of the term 'feminine/*masculine'* is to underline the fact that the individual still participates in some level of practical, 'everyday' activity, such as paid employment, home duties, and full-time or part-time study. Such activity may provide some diversion for the bereaved young adult from grief-related experiences. However, in contrast to the traditional 'masculine' coping style, such activity does not constitute a diversion in and of itself, but rather it forms an essential component of everyday living. So, in the 'feminine/*masculine'* sense, the conscious struggle of 'coming to terms' with

the bereavement ('feminine') is integrated within the demands of everyday living ('masculine'), and vice versa.

In a sense, the 'feminine/*masculine*' combination also prefigures an issue that will be discussed in greater depth in Chapter 11, the issue being the balance between 'emotional disclosure' and 'diversion-oriented activity' in daily living.

To italicise 'masculine' in the term 'feminine/*masculine*' is to emphasise the variation between bereaved participants in the level of 'masculine' activity undertaken on a daily basis. For some participants, the demands of full-time study or employment and familial obligations had been followed steadily since the bereavement occurred. For others, a 'retreat' from work or study responsibilities was often undertaken, whether by taking time off work or study, working part-time or having periods of unemployment. These 'retreats' were experienced as somewhat of a double-edged sword; anxiety could arise where – as previously stated – the bereaved individuals felt a trajectory in life had been inadvertently set in motion where they continually 'lagged' behind the developmental achievements of their peers. On the other hand, bereaved participants could refer to any experiences of 'retreat' as having been an important, if difficult, part of accommodating the sibling's death. This sentiment emerged regardless of the time that had passed for each participant since his or her sibling's death.

There were however some bereaved young adults who appeared to have had greater success in avoiding negative experiences of social isolation, without simultaneously avoiding the process of accommodating the sibling's death into their lives. Furthermore, their everyday social functioning had reportedly followed a comparatively smooth path. Their experiences suggest the importance and value of 'meaningful' community support. Whether or not the grief will re-appear more acutely later in their lives is another question. For now, two quite distinct classes of bereaved young adults have emerged;

a) those who 'divert' their grief into activity (a traditional 'masculine' coping style),

b) those who consciously struggle to accommodate this life crisis, along with the resultant grief, into the activity of their daily lives (a 'feminine/*masculine*' coping style).

It would appear that had counsellor interviews not formed a part of this study's methodology, the former class would not have been recognised, or at least not to any notable degree.

8.4 Reflectiveness

In regard to the bereaved young adults who participated in this study, it would seem they were all generally reflective in nature towards their bereavement experiences (a couple of the email responses not withstanding). However, this characteristic became evident within the context of a semi-structured interview that asks them to be reflective.

In this regard, I found myself returning to the counsellors' question that was mentioned in Chapter 6 – 'Who are the bereaved young adults who do not get in contact?' Are these unseen individuals 'grieving' in a fashion that mirrors the activity-focus of the traditional 'masculine' coping style and thus any involvement with counsellors (or indeed researchers) is not felt to be personally relevant?

Two of the counsellors, both of whom had been facilitators of youth bereavement support groups, similarly speculated on which bereaved young adults would not have sought out support services. Their speculations were framed in relation to the absence of men in grief support groups.

> ELIZABETH (counsellor): They're very reluctant to come to the group, the young men. I find they're very hard to attract to the group. If we get them fairly young, like young teenagers, that's okay, but young men of 17, 18, onwards,

they're very difficult to get to come to a group…it's the stoicism. "I'm alright. I'm fine. I don't need that sort of thing."

JANE (counsellor): …the people who came predominantly to the meetings were female…I kept thinking "Why is The Compassionate Friends predominantly female?" Men had this experience too, and need to deal with this in some way – are we meeting the needs of the men?

In relation to the bereaved participants' reflective thinking, the nature of the grief they had experienced seemed to have given them little choice but to be reflective. NICHOLAS' (counsellor) comments below referred to the emergence of a sense of separateness (to the general populace) as a result of this reflectiveness.

NICHOLAS (counsellor): I think having had a bereavement during that time [young adulthood] can have quite a big impact on how [personal value systems] are formed and what people see as important…[bereaved young adults] feel like they have that deeper level of understanding of the basics of life …people often talk about feeling less materialistic and being around friends who are talking about the new car they've bought…they're around girlfriends who always want to go shopping and buy the latest fashions and that sort of thing. They actually feel separate from that, and think "That's such a waste of time and that stuff is not important. Those people can't see that because they haven't had anything *bad* happen in their life (italics mine)."

8.5 Gendered behaviour & social isolation

The traditional 'masculine' coping style appears to ensure social inclusion as bereaved young adults continue to embrace the social values that sustained them prior to the bereavement.[17] Such a response may produce concern within the bereaved individuals' circle of family and friends. That is, an all-too-successful containment of grief could fall within Worden's (1991) social classifications of 'abnormal grief'. On the other hand, by continuing to conform to established customs and values, and thus more or less maintaining their pre-bereavement

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[17] This is to presume for each individual that a particular set of values had enabled social inclusion for him or her prior to the bereavement.

selves appears to reduce the level of social awkwardness for both bereaved and nonbereaved parties.

By contrast, the 'feminine/*masculine*' coping style, which is emotion and disclosure-focused and often rejecting (whether overtly or covertly) established and/or contemporary social values and systems, carries the risk of social awkwardness and rejection. By its very nature, this coping style produces periods of social isolation for bereaved individuals, even though these periods are not always negative in effect. The disruption to the bereaved young adult's typified social life-world is more apparent and pronounced.

Table 1 below summarises responses to bereavement and the social consequences of the 'masculine' and the feminine/*masculine*' coping style.

Table 1. MASCULINE & FEMININE COPING STYLES

COPING STYLE	RESPONSE TO BEREAVEMENT	SOCIAL CONSEQUENCES
Traditional 'masculine'	Postponement of grief	Social inclusion
Feminine/ *masculine*	Gradual accommodation of bereavement into one's social life-world	Social exclusion/ social isolation/ limited inclusion

Based on the bereaved participant and counsellor interviews, following a traditional 'masculine' path or a 'feminine/*masculine*' path is not necessarily relative to one's sex. Given the theories of gender outlined in Chapter 4 – where the *level* of persistence of the 'patriarchal dividend' is uncertain – these deviations in the social behaviour of young men and women from traditional gender roles should not be surprising. Both men and women can experience

social isolation in the negative sense. At the same time, some men and women manage to largely avoid experiences of isolation, and this avoidance appears most closely related to the level of availability of satisfactory social support.

Based on the counsellor interviews, it seems the traditional 'masculine' coping style carries the risk of postponing the process of grief to a later date, a date in which a comparable life crisis occurs.[18] However, in the period in-between – a time that can extend into decades – difficulties in social interaction, well-defined in the theory of 'dramaturgical stress', are largely avoided.

Furthermore, the traditional 'masculine' coping style seems to complement the achievement/'setting one's self up' orientation of young adult culture. As TONI (counsellor) suggests, for both men and women there can be an impatience or sense of frustration with reflective thinking and/or activity that diverts attention from the achievement of culturally-ascribed developmental goals.

> TONI (counsellor): Do parents include young people in their discussions? Often they don't, especially with guys again. The guys don't want to engage in that discussion, they want to get on with their lives. They want to get that job or career going. They want to establish themselves – there seems to be this energy they then put into life for themselves and they don't want to engage in just feeling and talking about things that are now in the past…[with girls] there's a greater acceptance for them – and a greater ability – to show emotion, but I think that at the end of the day they too don't want to engage in that process of reflection. They just really want to get on with their lives.

Based primarily on the bereaved participants' responses, the 'feminine/*masculine*' coping style carried the inevitability of social isolation being experienced. It was rare for the isolation to be solely manifested in the positive experience of aloneness. However, participants' accounts also indicated that 'social capital' could be rebuilt or even extended upon, post-bereavement. It may not have occured within one's established peer group, or

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[18] To gain some comparable data from bereaved participants, it would seem both valuable and necessary to interview bereaved adults for whom 20 or so years have passed since their sibling's death.

even within a new set of peer relations, for peers could hold up to bereaved individuals an 'unflattering mirror', highlighting where one should ideally be situated in the achievement of developmental tasks. For example, GRAEME (2 years & 10 months since his brother's death) noted how he eventually recognised the necessity to 'assess' the level and/or development of his grief on his own terms, rather than attempting to adhere to social expectations of appropriate developmental achievements for young adults.

> GRAEME: I try not to compare myself to people anymore. I did that for a while – trying to work out where I was at and where other people were at – but I can't be bothered anymore. [If you compare] you feel as though you've wasted the last three years of life…I try not to let [the development of peers' lives] affect my way [of responding to my brother's death].

However, where 'social capital' *was* often strengthened was in bereaved individuals' discovery (or in some cases, re-discovery) of 'compassionate' individuals. (see Chapter 9) The extent to which 'compassionate capital' could provide a sense of social connectedness appeared dependent on how wide the range of networks that provided this 'capital' were.

Despite the personal value and the potentially positive social ramifications of these discoveries, both counsellor and bereaved participant interviews suggested the persistence and/or the after-effects of negative social isolation. For instance, the eventual accommodation of the sibling's death into one's life could be accompanied by the recognition that the trajectory of one's life had fallen considerably behind the general life trajectory of one's peers.

8.6 Gendered behaviour & the 'maturity one may not want'

The 'maturity (that) one may not want', which the counsellors have spoken of (see Chapter 6) applies more evidently to the experiences of bereaved young adults who 'adopted' the 'feminine/*masculine*' coping style. An example of this 'maturity' was the bereaved individual's realisation of the significance and value of close relationships through having 'lost' a close relationship. A further example was the expression of impatience and disappointment with what was

perceived to be an excess of 'trivial' social exchange. The expression of new-found 'maturity' increased the probability of social isolation occurring for the bereaved individual, given that a typical feature of the coping style is the questioning and re-evaluation of mainstream societal goals and values. This is particularly pronounced in terms of the peer rejection or discomfort it may arouse. By contrast, with the traditional 'masculine' coping style it would seem that conformity to the values of one's social life-world is conducive to retaining a sense of personal connection and agreement with those very values.

The issues of social assertiveness and intolerance of 'triviality' were particularly pertinent in the responses of the bereaved female participants; both issues will be addressed in greater depth in Chapter 9.

8.7 Conclusion

In applying a gender lens to young adult bereavement, the social costs of 'working through' grief (that is, having a 'feminine/*masculine*' coping response) becomes especially evident. The potentiality of social acceptance and personal integration into one's social life-world appears more closely related to the traditional 'masculine' coping style. Based on the data collated, this dichotomy in social experience between the two coping styles does not necessarily situate men in the realm of the socially included and relegate women to the realms of the socially excluded – a particular coping style was not relative to one sex or the other. However, the relationship of traditional notions of 'masculinity' and 'femininity' with that of youth bereavement indicates a general social discomfort with 'open' expressions of grief, particularly grief that is manifested in the long-term.

CHAPTER 9

SEX DIFFERENCES, GENDER AND SOCIAL SUPPORT

Adding to the gendered responses to bereavement, this chapter will concentrate on differences between the sexes in their social experience of bereavement and how gender mediates understandings, and action, in relation to social support. The primary differences relate to;

a) Understandings of what constitutes 'meaningful' social support.

b) Perceptions of the social costs of emotional expression that falls outside the boundaries of traditional 'masculine' conduct for men, and traditional 'feminine' conduct for women.

c) Social avenues in which 'meaningfulness' can be found.

One of the main queries of this chapter relates to whether in contemporary terms, 'masculine' and 'feminine' patterns of behaviour are more likely to be combined in the social behaviour of a given man or woman (Lupton 1998; Lindstrom 1999). The question is what level of tolerance these 'combinations' socially afforded, given the ongoing influence of 'traditional' social expectations relating to male and female social behaviour in contemporary Western culture.

These sex differences will be examined in the following subsections: *9.1 male attitudes toward the 'feminine/masculine' coping style; 9.2 male 'presence' support & female 'disclosure' support; 9.3 relationship 'meaningfulness' and the bereaved male; 9.4 protecting male social status; 9.5 the fear of burdening others: 9.6 male-female differences; 9.7 female assertiveness; 9.8 trivialities; 9.9 female support: the person who listens; and 9.10 disclosure-with.*

9.1 Male attitudes toward the 'feminine/*masculine*' coping style

In essence, this subsection reiterates the factors that constitute the 'feminine/*masculine*' coping style, but in doing so illuminates the form in which the bereaved male participants have utilised this coping style.

Both male and female bereaved participants have emphasised the importance of disclosure as part of the grief process, along with (most importantly) the availability of individuals with whom they feel they can comfortably disclose their personal grief-related experiences. However, bereavement-focused disclosure, of itself, has been cited as only one component of the process of grieving. This is not to downplay the value of disclosure and indeed no participant has done so, but more physically-inclined and/or activity-focussed tasks (such as paid employment, voluntary work, attending a gym) have also been pursued by participants. For instance, a workout at the gym could be seen as operating as a de facto anti-depressant. Similarly, paid work could be viewed as an 'escape' in that it requires concentrated thought in order for necessary tasks to be successfully completed. A number of bereaved participants, both male and female, emphasised that the work environment, even with its opportunities for socialising, was not an appropriate environment for disclosure.

In essence, the 'disclosure-activity' balance complements Stroebe's (1998) 'dual process model of coping with bereavement'. In general, there was a combination of traditional 'masculine' and traditional 'feminine' coping styles utilised by the bereaved participants; in general, that is, because half the male participants, while noting they felt 'disclosure' was an important part of the grieving process, rarely practised it on a social level, for instance, in disclosing with a peer or family member. Considering the persistence of the traditional link between emotional containment and 'masculine' social status (White 2002), coupled with the contemporary discourse of 'the sensitive man' (Lupton 1998), such a variation in male preferences for utilising social disclosure should not be entirely unexpected.

What is particularly notable here is that the individual can recognise or believe a course of social action can be personally beneficial and yet not feel sufficiently comfortable to test its potential. It is conceivable that such choices reflect a personal preference in social behaviour, but in the collation of data a number of contextual factors emerged that were suggestive of social influences on male behaviour. For instance, the majority of counsellors referred to the stoical nature of 'male culture', and how the repression of grief slots naturally into the dictates of this culture. Also, with the 'setting one's self up' orientation of young adult culture complementing 'masculine' active-ness, it appears that traditional notions of 'masculinity', and the social action they prescribe, have a significant and ongoing social influence. In any case with a number of the male participants, their belief that disclosure needs to be socially permitted rarely extends to such practice within their own social interactions. As White (2002: 276) observed, a rejection of hegemonic masculinity as a personal goal can create a form of psychological dissonance given that alternate forms of masculinity lack a comparable level of social legitimisation.

> DAVID: I think it is healthy to deal with grief both with other people and yourself. I don't particularly share it with other people, but in terms of [human] needs, I believe you may need to share it with other people.

9.2 Male 'presence' support & female 'disclosure' support

Counsellors have also noted that the 'setting one's self up' orientation – the sense of impatience with too much reflection at the expense of 'doing' – extends to women as well, but only to a point. Both the counsellor and bereaved participant interviews have emphasised the importance of bereaved women being permitted the opportunity for bereavement-related disclosure and reflective thinking within their interpersonal relationships. For these bereaved women, such qualities appear an essential component of what constitutes satisfactory social support.

Disclosure and reflection were occasionally cited by bereaved male participants, but it was more likely that they would consider the continuing presence of

supportive individuals as satisfactory and sufficient support. This 'presence-support' was found in supportive individuals' willingness to keep in contact with the bereaved man and invite his participation in a number of 'focussed' activities (such as participating in sport or seeing a film). The continuing presence was seen in itself as an expression of support.

> WARREN: When you're on your own, how do you deal with your grief? I reckon that's a really hard one. If you've got to spend 24 hours on your own and you're feeling grief, you're going to have a bad 24 hours. I definitely think you need to be around people, even if you're not talking about it.

For the bereaved young women, presence alone would not constitute a satisfactory level of support, at least not on an ongoing basis. For them, the opportunity for disclosure was also appreciated and often desired. The factors that constitute 'meaningful' support could therefore differ from individual to individual, or as the general trend suggested, from male to female. This difference between the sexes echoes Fox, Gibbs and Auerbach (1985, cited in Lips 1988) research on the development and/or maintenance of male friendships through shared activity, and the maintenance of female friendships through shared values and beliefs.

However, one criterion regarding supportive individuals' behaviours was shared by bereaved male and female participants. Any appraisal of the grief process that intimated impatience or underestimation was often stated by the participants as rendering the supportive relationship as untenable. For the bereaved young man, if the individual's presence-support is found to be judgemental in nature, the intrinsic benefit of his/her *presence* is reduced in value.

9.3 Relationship 'meaningfulness' & the bereaved man

As referred to in Chapter 2, Vandervoort's (2000) overview of 'social isolation and gender' research came with the caution for researchers to be particularly cognisant of male self-evaluations of loneliness. This related to the fact that in the various studies reviewed, the men tended to focus on the density of their

social networks as indicative of the levels of loneliness they commonly experienced. That is, a high density denotes a low level of loneliness. It was assumed by Vandervoort (2000) that the men's focus on density might obscure for them the value of emotionally intimate relationships. Is the stated satisfaction with 'presence-support', a further example of the 'feminine' value of emotional intimacy being overlooked by young men (in this case, bereaved young men)?

The response of two male participants, MARK (22 years old at the time of the interview: 2 years since his sister's death) and ALISTAIR (31 years old: approaching 10 years since his brother's death) did imply that 'presence-support' would not always constitute satisfactory support for men. MARK mentioned that throughout his life he had successfully nurtured long-term friendships with peers, both male and female, and was comfortable with emotional disclosure within these relationships. Furthermore, he mentioned that he was not afraid to cry in front of his close friends. In terms of his statements regarding emotional 'openness,' MARK provided a sharp contrast to the observations and assertions of the other male participants. However, as the days (and months) since the day of his sister's death continued to widen, MARK said that he had increasingly come to feel that any further emotional disclosure on his part might be socially unwelcome. He felt that new events and goals in his friends' lives would have superseded for them the immediacy of his sister's death, and as more time passed, empathetic support would be even less forthcoming.

NICHOLAS (counsellor) also noted that, like the bereaved women, the bereaved men had a tendency to believe that the passage of time would negatively influence the level of empathy and tolerance of supportive individuals.

> NICHOLAS (counsellor): …males will often talk about their having good mates or friends who they still see, but they don't feel that they're able to talk about private feelings relating to [their bereavement-related] experiences…males would tend to say, "I won't talk to my mates about that now because it was a year

ago or two years ago" a bit more often. It's more common with males saying that than females. I think the whole "I should be over it" ties in with the whole stoic idea.

For ALISTAIR, it was not the sense of a closing down of avenues for disclosure, but more a disappointment with people's awkwardness relating to any discussion of his brother and the personal reality of his ongoing grief. This social awkwardness crossed social-interpersonal and social-occupational lines. In the case of both ALISTAIR and MARK, 'presence-support' had value, but experienced on its own, it did not constitute adequate social support; it could only extend so far in providing these bereaved participants a sense of social (or communal) connectedness. These particular bereaved men did not state that they felt social expectations necessitated a suppression of emotion. The issue was more that supportive others would only engage with them in a particular fashion – 'presence-support' (and by extension, engagement through shared activity) – especially after a significant time had passed since the sibling's death.

As emphasised in Chapter 4, a social permissiveness towards a variety of coping responses appears necessary. At the same time, the suggested importance of relationship 'meaningfulness' for both men and women (Wheeler, Reis and Nezlek 1983) emphasises the importance of continuing to promote positive socio-cultural associations with 'femininity'. Both these points-of-view have been supported in the results and analysis chapters.

9.4 Protecting male social status

In Chapter 4 as well, the question was posed as to whether 'one's containment of feelings of grief is an attempt to preserve social status (particularly for men) or whether it functions principally as a personal coping style'. Based on the data collated, preservation of social status does appear to regulate the social actions of bereaved men. For instance, comments from two of the three male counsellors who participated in the study suggested that their bereaved young

male clients would utilise the counsellor's services as a safe base for emotional disclosure.

> NICHOLAS (counsellor): Even though [the experience of social isolation is] often still there for females I think there are a few other levels there for males centring on those stereotypes of what it is to be a male in society…the stoic ideal where emotions are something a bit foreign. Usually in counselling sessions, males tend to talk about emotions and things like that, and they're quite open, but when they talk about turning out into the rest of society there seems to be a lot of discomfort around that. And often there is more discomfort about even coming to a counselling session or being seen by a counsellor. There is something not quite right about that, for a male.

> JOHN (counsellor): Bereavement is one of the only areas where I would see more young males than females…one impression I have is that some of the females I've worked with seem to act it out more in the social scene. It has a different feel with males…I would think that males do behave as one might expect them to on the basis of cultural stereotypes or convention.

Could the counsellor's office provide an ongoing emotional 'fix' for bereaved young men that then enables them to continually return to their respective social arenas with the capacity to uphold a certain 'masculine' stoicism? The 'healthist' perspective (Crawford 1981) refers to the individual's utilisation of therapeutic services as a public indicator that one is responsibly tending to one's 'recovery', albeit from within a private domain. The comments of the male counsellors in relation to the bereaved young men they had counselled inverts this perspective; the utilisation of therapeutic services constituted a private act that ultimately served to support a more traditional 'masculine' social expression of self. The privacy of the counsellor's office facilitated loneliness-reducing 'meaningfulness' – that Wheeler, Reis and Nezlek (1983) believes is of benefit to both men and women – without unsettling the traditional notions of male social status.

However, the level of personal fulfilment this counsellor-provided 'meaningfulness' creates (for example, in providing a sense of social connectedness) may be limited in effect. To reiterate Gordon (2003: 2) the "provision of services…does not bridge this gap [the traumatised person's sense of separation from the untraumatised] since [the services] are provided by people not integral to the person's [social] network." Also, while traditional notions of male social status (such as emotional containment) may be upheld through using the counsellor's office as a *base* for emotional disclosure, one's self concept as a man may still be unsettled. Even for the men who did seek counselling assistance, NICHOLAS (counsellor) noted the following;

> NICHOLAS (counsellor): There is more discomfort [from males than from females] about even coming to a counselling session or being seen by a counsellor. There is something not quite right about that, for a male."

However, the social action that could be considered as 'right' (sic) for maintaining a socially and personally acceptable 'traditional' male identity may have debilitating effects on bereaved young mens' health and wellbeing. The consumption of alcohol and the public expression of anger were two factors commonly identified by the counsellors and the bereaved young men alike as predominantly male avenues for providing some 'release' (however temporary) from grief-related thoughts and feelings. Each factor alluded to the experience of social isolation; overcoming a sense of separateness from other people through the consumption of alcohol, and becoming physically isolated on account of one's expressions of anger.

JOHN's (counsellor) observations of differences between male and female responses to bereavement highlight anger and alcohol usage as distinguishing factors.

> JOHN (counsellor): [Bereaved young males] are prone to angry reactions which serve to further isolate them. They may withdraw from their families a bit. The females I can think of have tended to actually work it out a bit more, out there in their social group. I don't think I have nearly enough experience with them to

make a generalisation, but I'm just talking about impressions here...[the males] are often angrier about the bereavement and are less likely to talk to their friends about it, if at all. They drink more and are more likely to withdraw. So they don't actively process their grief in a public way.

LORRAINE's (counsellor) comments, on the other hand, note how anger can constitute a particularly 'male' expression of grief.

LORRAINE (counsellor): Boys get into "angry sadness" – that's what I call it with them. They're acting out physically and angrily, whereas a girl might not present as readily that way. So I still think it's a bit of a socialised gender difference there, but it might be everyone responds more to a boy's acting out that way – I don't know – but I would find I talk about that issue quite a lot with boys and how they can be misunderstood as angry and difficult.

In light of such comments, emotional disclosure (and its potential to produce relationship 'meaningfulness') would appear to be situated well outside the general bereavement-related social experiences of young men. However, the bereaved male participants' accounts of alcohol usage often illustrated a desire to 'escape' grief-related feelings and the sense of social separateness these feelings could evoke. Alcohol usage may not have equated with relationship 'meaningfulness', but what it could provide was a sense of social connectedness. The effects of the alcohol consumption were often seen as tempering feelings of grief and this in itself contributed toward helping the bereaved man feel more socially 'normal'.

JOHN (counsellor) has referred to such action as 'self-medicating' and 'therapy on the run'. While the 'psy' complex concentrates primarily on the contemporary phenomenon of individuals "[framing] their problems in professional [and therapeutic] terms" (Williams & Bendelow 1998: 148) its underlying theme of normalising one's self has some connection to the issue of alcohol usage. Specifically, it is in the contemplation of whether the concerted effort to 'normalise' one's self ('pretending normalcy') for the purposes of

promoting social cohesion and a sense of belonging, can have maladaptive effects for the bereaved individual. In this case, alcohol consumption may provide for the bereaved young man an opportunity to appreciate the 'presence-support' without an accompanying acute awareness of grief-related feelings. However, at what future cost for the individual (for instance, stress on the body, the possible postponement of grief, and issues of dependence)?

In essence, the male participants' comments on alcohol usage illustrate how the experience of sibling bereavement could make the bereaved young adult feel socially 'abnormal'. For the men who did report a high level of alcohol consumption, they noted the 'normalising' effect alcohol could provide; a release of sorts from the intensity of grief. The participants who reported this were commonly located within the timeframe of three years since their sibling's death.

Interestingly, the male participants' responses suggested that emotional disclosure would occur at a later date – most commonly, two years after the sibling's death – when they had recognised/perceived some level of reduction in the intensity of their grief-related feelings. When episodes of grief were felt as being 'too intense' in nature, they refrained from emotional disclosure because they feared the possibility of social displays of emotion. So, when the 'intensity' reduced, the sense that it was safe to disclose increased. Subsequently, a reduction in their alcohol consumption would occur. Usually, disclosure would occur in their interactions with a close friend or a family member, but rarely would they disclose to a number of individuals from a wide range of social networks. The question still remains as to what level of influence alcohol will continue to have in tempering experiences of grief in future years – and at what cost?

'Turning to alcohol' was reported by a minority of bereaved female participants. Most typically it was reported by female participants residing in a metropolitan

environment (rather than an urban or rural one) who had experienced the breakdown of a number of close relationships with peers. In short then, 'turning to alcohol' constituted a common response for the bereaved male participants, and an uncommon one for the female participants.

LORRAINE'S (counsellor) mention of 'angry sadness' and JOHN's (counsellor) observation that "[bereaved young males] are prone to angry reactions which serve to further isolate them" suggests the bereaved young men's public expression of anger would limit their access to a wide range of potential support networks. In Crawford, Kippax, Onyx, Gault and Benton's (1992) feminist overview of the interplay between emotion and gender, the authors cite the factors that distinguish anger in men from anger in women. In relation to male social power, the authors assert that "if you have power, anger can be regarded as a way of attempting to ensure it; [in this context, anger can be] an empowering thing" (Crawford et al. 1992: 182). The authors stress that 'powerless' men construct anger in a similar fashion to that which women do; it is anger that derives from a continual and long-lasting sense of frustration borne of a sense of powerlessness (Crawford et al. 1992: 183).

The notion of the 'powerless' man is reflective of Franks' (1989) assertion that the emotional expression of a lower status individual is not taken as seriously or accorded the same weight as the emotional expression of a 'higher status actor' (cited in Freund 1990: 466). As had been speculated in Chapter 4, if very few men between the ages of eighteen and thirty have had the time or opportunity to acquire significant socioeconomic prestige, then a consistent display of masculine stoicism and emotional containment would be perceived as necessary. That is, a means of elevating male social status when one's socioeconomic status is relatively low. So, anger is conceivably emotional expression that denotes male social power, but the young man's age and general lack of accompanying socioeconomic achievements undermine the power he perceives in this expression.

In terms of this study's bereaved male participants, the reported consequences of a continual public expression of anger suggests that failure to uphold a regular display of emotional reserve generates negative social responses. The negative outcomes are particularly salient in relation to the procurement of social support. It is a fair assumption that a 29-year old will have acquired more 'prestige' than a 20-year old from a similar socioeconomic background. However, even the older participants reported the social costs of their anger. GRAEME provided perhaps the starkest example of this. Despite having a supervisory position in his paid employment, the combination of a lack of motivation and an 'increased level of anger' had made relative isolation a preferable and sensible option. For example;

> GRAEME: I've been off work since the day it happened. I went back to work after seven months and they said "We haven't got a job for you here anymore." Since then I haven't had the motivation. I couldn't be bothered. I have a short temper too, so that doesn't help. I've been a supervisor – second-in-charge – so I've got a lot of people working under me. I don't think I could handle telling people what to do. You know, having smart-arse apprentices to deal with – that sort of thing.

What GRAEME had cited as an 'increased level of anger' reflects a theme which has run through the majority of bereaved participant interviews, and was detailed in Chapter 6. Namely, that grief exacerbates self-identified personality traits, such as a quick temper, a socially anxious nature, and/or the tendency to be a loner – and this can have a detrimental affect on receiving a wide range of 'meaningful' support.

9.5 The fear of burdening others: male-female differences
As Freund's (1982/1990) notion of 'dramaturgical stress' proposes, the individual's regulation of emotions in order to meet the assumed norms of a social situation place conflicting demands on the individual. The bereaved

young adult's apparent fear of burdening others with grief-related disclosure and/or emotional display is suggestive of distinct personal conflicts in social interaction; conflicts between personal need and the sense one is required to regulate one's behaviour socially. Drawn along the lines of sex differences, these personal conflicts become more distinct in character. Both men and women may fear to be a burden to others, but the principal reasons stated by bereaved male and female participants in this study suggested a gendered interpretation of the social costs of emotional display and disclosure.

For the majority of bereaved women interviewed for this study, the need to disclose and talk openly of the sibling who died was tempered by the fear of being socially categorised. This categorisation referred to their social identity being classified – and consequently limited – by others as a 'touched by grief' friend (or words to that effect). When applied to this study, 'postemotionalism' (Mestrovic 1997; Williams and Bendelow 1998) suggested that expressions of grief would need to be regulated to a carefully managed, socially acceptable level. The regulating agent for the bereaved women overwhelmingly appeared to be the possibilities of social categorisation.

For instance, with CLAIRE, the difficulties of enduring what she termed the 'trivialities' of peer interactions were coupled with a sense that emotional displays and disclosure would unsettle those interactions. A consequent wariness of being 'categorised' arose from this sense.

> CLAIRE: See I have this thing where I like a big group of friends together and you all go out, but in practice it's not really much fun. They could crap on for hours, and it would be "But what have you actually talked about?" It's all so superficial, so I found it largely irritating. Then if you're feeling down or whatever, you bring everyone else down – you know, the 'touched by grief' friend. You know, it kind of follows you around.

For the majority of bereaved male participants, the belief that society should be more tolerant of bereaved individuals' emotional displays was tempered by their perceptions of the social costs of their own emotional displays. Talking openly

of their grief-related feelings and experiences could bring forth emotional displays (such as crying, physically shaking, and/or stammering in conversation) that were often deemed as 'humiliating' and were also recognised as having a negative impact on one's self- and social-esteem. Particularly with the male participants for whom less than two years had passed since their sibling's death, it was cited that a principal social task was to improve their ability to control such emotional displays. Socially isolating one's self from other people for an extended period of time was seen to play an important role in realising this goal.

For STEPHEN and JASON, both of whom were bereaved within the last two years, the interrelationship of two factors – emotional control and self-esteem – was evident.

> STEPHEN: Just as naturally as opening my eyes I couldn't stop myself from crying. That was for the first couple of weeks.   After a few months I felt pretty normal – normal-ish, I still didn't feel one hundred percent. To get away from it, get away from all the surroundings, I went travelling for a little bit with my uncle…I felt I had humiliated myself in a lot of ways by being so emotional in public and not being able to control myself. In a way it sort of lowered my self esteem a bit…I don't believe grief should be hidden as such, but I do believe there is appropriateness – if you are at work you shouldn't be miserable and not have your mind on the job. That's part of the reason I took six months off work…I think grief should also be dealt with privately because there are a lot of triggers [in public] – a song, a smell, objects could trigger emotions that are hard to control.

> JASON: Mood – that's the main thing [the bereavement has affected]. At any time, I can go from being really happy to really sad. I could cry or could feel I have to walk away from somewhere because all of a sudden I just change mood…I've had times where I'd be at a club on a Friday night…everyone wants to go out and I'd be there, especially just after [the death] happened, a couple of months later…I'd find if I got really upset, I'd go to my friends, "I've got to go. I can't handle this." …this is the biggest thing I'm working on – that is, if I think about him, it's about trying not to get upset.

In the case of BEN, his memories of the early years following his brother's death, revealed the establishment of a pattern of social behaviour that, while upholding a form of 'masculine' social status, ultimately created for him a destructively dichotomous existence. That is, a publicly acceptable 'façade' seemed to divert and exacerbate grief-related feelings in private settings.

> BEN: I didn't want to burden people with [my relating any experiences of grief]. It was embarrassing to some extent because when I started talking about [my brother's death and the circumstances surrounding it] I couldn't control my emotions. I'd shake, I'd cry. I was a blubbering mess and it was very graphic. If you have a friend, someone you hold in esteem, and you show weakness…(voice trails off)…trying to go back to work and behaving at the "norm", controlling your emotions…I think that did more damage to me because you had to act. It was a good act because lots of people saw a very nice Ben, a very helpful Ben. Little did they know all I wanted to do was get them out of my sight. My anxiety level was that high I thought it would have been coming out through my pores. When I got home it was sort of like a "release." At the time I retreated to the bottle. I was like a raw nerve, and my wife copped that too. She always wondered why I was so nice to my friends and so grumpy and nasty to her.

It is, of course, conceivable that men too can fear categorisation and women likewise can fear a loss of social status as a result of emotional displays, but respectively there were no statements that suggested such fears.

It is interesting to contextualise the female fear of categorisation and the male fear of the social costs of emotional display in relation to a 'broadened scope' of gendered expression. In this study, the 'broadened scope' has emerged principally through consideration of the 'sensitive man' (Lupton 1998) and 'modern woman' (Lindstrom 1999) archetypes, while the social costs of emotional expression have emerged particularly through Lupton's (1998) linkage of 'emotionality' and 'femininity' (see Chapter 4).

For instance, in the discourse of the 'modern woman', there is greater social acceptance of more multi-layered female social identities. This is referring to female social identities that are inclusive of both 'masculine' and 'feminine' traits, in contrast to the 'traditional woman' who is characterised by the social expression of predominantly 'feminine' traits. Within these contexts, the bereaved woman's sensitivity towards being categorised as the 'touched by grief' friend could be reflective of wider collective frustrations experienced by Western women, such as experiencing restrictions on the scope of one's social expression. Certainly, any regulation of emotion appeared less related to 'masculine'-defined ideals of maintaining or acquiring social status, such as that which is gained through emotional containment, than it did to fear of categorisation. However, as mentioned, a 'postemotional'-type management of emotions was more evident in the bereaved women's accounts.

On a side note, the question was asked in Chapter 2 as to whether a bereaved young woman whose gender role identification (Lindstrom 1999) reflected the 'traditional woman' archetype – economically dependent, home-centred – would be more socially isolated, on a more negative level, than a bereaved young woman who identified with the 'modern woman' archetype. Based on the accounts of fifteen bereaved female participants, this question could not even be contemplated, given that the gender role identification was overwhelmingly 'modern'. This may of course be due to the age range of participants – only two female participants had children – where generally the financial and physical demands of children have not yet been experienced. Furthermore, some level of employment (casual or part-time) was referred to by the two female participants with children.

In a fashion similar to that of the 'modern woman', the discourse of the 'sensitive man' promotes contemplation of male social identities that are more inclusive of the social expression of 'feminine' traits. However, the question remains as to what level of social expectation is retained in contemporary Western society towards men upholding traditional 'masculine' emotional reserve. That the fear to burden others is linked most explicitly by bereaved

male participants to the fear of losing control of one's emotions suggests that the 'traditional' concept of maintaining male social status through emotional containment retains a significant level of social influence. The persistence of traditional 'femininity' – and the associated pressure to uphold social expectation – was less evident in the accounts of the bereaved female participants, although social costs of moving outside traditional 'feminine' traits were sometimes referred to (such as in relation to 'assertive' behaviour).

On the basis of the expressed opinions of the bereaved male participants in this study, it would appear the social consequences of emotional display produce a considerable amount of anxiety, as well as a sense of uncertainty, for the bereaved young man. (MARK is the one exception; see below). Interestingly, in most cases reported by the bereaved male participants, the experience of 'losing control' in a social environment had ultimately functioned as a motivator for maintaining 'emotional control' in all subsequent social encounters. So, while emotional containment did appear to function as a form of preserving male social status, it did not necessarily close off future possibilities for emotional disclosure and reflective talk. However, it would appear to limit the scope of their enactment, in that emotional control is the primary objective within any social interaction.

MARK ultimately became the one representative of a man who displays 'feminine' traits without reportedly experiencing feelings of status-related anxiety, at least in the company of close friends.

> MARK: The friends I have around are kind of around because I "get things out there" and they are there because they're used to how I'm like. It's hard to explain – they've hung around. I don't go through friends quickly. I tend towards more in-depth friendships…the best friends I have now have been the best friends for a long time. [My sister] used to say to me "You have such great friends."

At the same time, MARK was well aware of the social awkwardness other men could experience in relation to emotional displays.

> MARK: …I've got a mate who if I talk to him…(voice trails off)…I talk to him quite openly. One time I went on holiday with a few of my friends. I was having a really hard time with things, and I think I was crying because I couldn't really handle it any more and I just said "I miss my sister a lot. I can't even explain it." Everyone kind of didn't know what to say and he came down and sat next to me – and tried to guess [what to say]. Like he said, "I don't know what it's like, but I can think that it would probably be like this." That was really good, but the funny thing I found out about him was that he himself tries to cover up emotions as much as he possibly can himself.

However, it would seem that to MARK the social costs of his own emotional displays had not been significant enough to motivate a modification of his behaviour. Furthermore, he related what he saw as the personal consequences of controlling emotional displays.

> MARK: With the whole male pride, 'get on with it' thing – I've noticed that people who try to think that way for a while they start saying things like "That's just the way things are." I feel like it breeds really negative thoughts about the world because you're not getting your own personal thing out. I don't know why it is, but I've noticed that.

MARK's concerns, as stated in the earlier subsection of this chapter – 'relationship 'meaningfulness' and the bereaved man' – relate more to the perception that the passage of time will reduce social tolerance and empathy towards the continuing effect of his sister's death on himself and his family.

> MARK: I feel like they've all got their own stuff going on. I'm not sure how much they realise how much it's still a real issue and it's still quite difficult.

Therefore, MARK's experience suggests that if a bereaved young man (or a bereaved young woman, for that matter) is emotionally 'open' within close relationships, a sense of isolation can still gradually develop over time. Principally, the passage of time is manifest in the bereaved young adult's observation of other people's lives 'moving on' (as discussed in Chapter 6) or in

the statements of close friends or relatives that imply he or she should be 'getting over (the death)' and/or 'moving on with life' (discussed in greater detail in Chapter 10).

These potentially isolating factors are reminiscent of the application of Parson's (1951) 'sick role' theory to the experience of grief (see Chapter 3). By extending the theory's definition of illness to include grief, it can touch on the issue of where social expectations of a recovery time (from 'illness') do not coalesce with the bereaved individual's ongoing experiences of grief. In this regard, the 'sick role' highlights the value and importance of supportive individuals who possess some level of insight and/or empathy towards the ongoing impact of bereavement on individuals. As will be discussed further in Chapter 11, the occurrence of 'meaningful' support from a wide-range of support networks (such as family, peers, work colleagues, social services) is particularly beneficial for the bereaved young adult, male or female.

9.6 Female assertiveness

The fear of burdening others indicates a 'dramaturgical'-like hesitancy towards jeopardising the 'interactional order' of a given social situation. So, in conversations the bereaved young adults' refrained from mentioning the sibling who died or the ongoing nature of his or her grief; a case of 'pretending normalcy' for the purposes of social acceptance (Balk, Tyson-Rawson & Colletti Wetzel 1993). Likewise, the anxiety and anticipation regarding emotional displays, such as tearfulness or crying could motivate a retreat from numerous social situations. However, in a paradoxical sense, this 'fear to burden others' – burdening others as a precursor for social exclusion – tended to co-exist with a new found social assertiveness, which in itself could operate as a precursor for social exclusion. NICHOLAS (counsellor) provided a particularly detailed outline of what this assertiveness entailed and the factors that commonly motivated its expression.

> NICHOLAS (counsellor): I often hear males and females saying how they feel
> they're more assertive socially [since the bereavement occurred] – not always in

the long-term, sometimes short term. They are less tolerant of things that irritate them, whereas previously they were more likely to sit back and not say anything. However, since the bereavement they feel the tolerance level is down and therefore they are often more assertive in a social situation. [This is evidenced in examples] such as [where they say to other people] "Look I don't really want to hear that right now" or "That's incorrect what you're saying." That's a reasonably common response…they feel empowered to say what it is they think because they think the consequences couldn't be worse than what they've experienced. Some people, very early on after the bereavement – and sometimes it may be attached to a bit of anger – find themselves being extremely assertive about what they think and what they ought to do, whereas with others it kind of brings up other ground. Now they might go through a time of being passive about things and withdrawing, but then over time may feel sort of removed from that and feel stronger and feel the need to assert themselves...it's a shift or a change that, on the basis of what I've seen, seems to be long term.

From the perspective of gender, it is interesting to note that the counsellors reported an increased level of social assertiveness over time in both bereaved young men and bereaved young women, but in the bereaved participant interviews, assertiveness was only reported by the female participants. Is it that in most cases, assertiveness is included within the men's reports of angry behaviour (such as NICHOLAS' (counsellor) comment that assertiveness can be 'attached' to the expression of anger)? Or is it more that assertiveness, as a form of social expression, rarely betrays the presentation of 'masculine' stoicism?

In light of this study's historical-theoretical contemplation of gender roles, it would seem largely inevitable that assertiveness – in both the form of its expression and the social consequences of its expression – would emerge as a salient issue in the bereavement experiences of the young women interviewed. One of the primary questions in this study's theoretical application of gender has been to ask what level of social acceptance of the 'modern woman' actually exists (or is perceived to exist by the bereaved young woman) in contemporary Western societies. The social behaviour of the 'modern woman' encompasses

'masculine' and 'feminine' traits; where assertiveness and nurturance, for
instance, can co-exist in female social behaviour. Within a society that is
clearly accepting of and comfortable with, women's enactment of the social
model of the 'modern woman' (Lindstrom 1999), assertive expression would
seem unlikely to upset the interactional order of most social situations.
Assertive behaviour would seem more likely to upset the interactional order if it
was expressed within a society that overwhelmingly prescribes the 'traditional
woman' (that is, where social behaviour is dictated within the boundaries of
'feminine' traits) as the appropriate model for female social behaviour. In
contrast to the men then, the social benefits and costs of assertive expression
appeared more at the forefront of the social conscience of the bereaved young
women interviewed. Given the socio-historical juncture they are located within,
such anxiety was expected.

It is also interesting to consider the prominence of assertiveness in women's
bereavement experience in light of Fox et al.'s (1985, cited in Lips 1988)
findings on the maintenance of female friendships. To reiterate, the authors
stated that a successful friendship was largely predicated on shared values and
beliefs. NICHOLAS' (counsellor) further comments on assertiveness, illustrate
how the bereaved young adult's alteration in values can often render existing
relationships as untenable, although he is (assumedly) referring to men's
experiences as well as women's.

> NICHOLAS (counsellor): People have talked about being around a person they
> considered a good friend who has said something that is quite hurtful. The
> bereaved person has said "Well, I'm not going to sit here and listen to you say
> that because that is not how it is" or something like that. And a situation like that
> has actually fractured that friendship where the bereaved person has made the
> decision "I don't want to be around that person because they seem to lack any
> sense of empathy or understanding of my situation." They will talk about "I
> always thought they were really good friends, but I don't want anything to do
> with them anymore." In that sense the assertiveness can contribute to that
> isolation. Or I guess it could happen that a friend may no longer feel comfortable

around a person who suddenly seems more outspoken about what they're thinking or feeling, and they may distance themselves from that person.

The reported assertiveness of the bereaved young adults certainly provides some variation to the hypothesis proposed in Noelle-Nuemann's (1984) theory of the Spiral of Silence (SOS). The bereaved individuals' social behaviour does not necessarily conform to the SOS hypothesis that individuals are so preoccupied with external indicators of social acceptance that they modify their public opinions in order to maintain or attain this acceptance (Shoemaker, Breen & Stamper 2000: 65). The perception that "the consequences couldn't be any worse than what [he or she has] experienced" can motivate social behaviour that, it would seem, increases the likelihood of social rejection. A personal account from CLAIRE highlights the tension in maintaining and optimising the acceptability of one's social self, in light of the growing perception that the gravity of one's grief and loss is being socially underestimated.

> CLAIRE: I had been friends with [this girl] since kindergarten. She knew my family very well. I knew her family very well. My friend – when my sister was sick – never asked after her at all. She wasn't interested in listening and I remember I said "She's having chemotherapy this week." And she said "Oh yeah, I'm going to the hairdresser this week." So that made me really, really angry. I was at her place last year, she was with all her friends and I didn't know any of them. I was uncomfortable to begin with, but she wasn't making any allowance for that at all. She wasn't adding any conversation or offering any support and one of her boyfriend's friends was just yattering at me all night long. I was talking to someone else, and he interrupted and it was like "Say something decent or shut the fuck up." And then of course the whole group falls silent. And then she had an engagement party and she didn't invite me because she thought it would be awkward.

Given the personal demands of 'pretending normalcy', does the isolation associated with assertiveness constitute a more tolerable personal circumstance? Certainly, in the early years of bereavement, it would appear that choice rarely enters the equation. For instance, the social experiences recounted by DENISE

(1 year since her brother's death) suggest that the impact of grief is too personally demanding for much consideration or concern to be given the acceptability of one's social behaviour.

> DENISE: I think that people think that after a certain amount of time you should be better. I just grieve in the way I feel, and if people don't like it, it's bad luck. Over time I think people believe you should be better…that you should be back to being your 'old you', who can go out to tea and have drinks, be cheery and acting the fool like you used to be – and I'm not like that. If I go out to tea, I usually just sit there. I'm fairly quiet. I'm a bit more reserved now…I don't feel a great need to get up and be the fool like before. Before I would get up and have a good time. Now I don't have the incentive. Now it seems there's not a hell of a lot to party about.

Certainly, DENISE's comments echo a viewpoint of Osterweis, Soloman and Green (1984), that the bereaved individual could perceive that the nature of his or her grief – emotionally, intellectually and physically – amounts to a social 'deficit'. Whether perceptions of social 'deficits' are experienced by bereaved individuals whose coping response is 'masculine' in nature, is unclear. Conceivably, the perception of one's bereavement status as a deficit could motivate a 'diversionary' response as a means towards attaining (or retaining) wide-ranging social acceptance.

By contrast, within the dictates of the 'feminine/*masculine*' coping style, bereaved participants consciously recognised a personal realignment of life values (such as the value of relationships over material values), and thus might have articulated these values within the social arenas they were participating. Thus, social rejection could occur and/or a perceived need to isolate one's self from a substantial number of one's social contacts emerged. For bereaved women, the possibilities of social exclusion appeared to be amplified by any assertive behaviour that stepped outside the boundaries of traditional 'feminine' behaviour.

On the basis of the interviews with both the bereaved male and female participants then, it would appear that men's anxieties were linked more with the social costs of emotional displays, while women's anxieties were linked more with the social cost of assertive displays. However, as each preceding chapter of this study has suggested, the discomfort of others may relate as much to any discomfort they feel towards the subject of death and grief as it does to the assertiveness or the emotionality of the bereaved individual.

9.7 Trivialities

One of the most common sentiments articulated by the majority of the bereaved female participants was their frustration and disappointment with what they perceived to be an excess of 'trivial' discussion within their interpersonal interactions. Typically, they were referring to interactions with peers.

> CLAIRE: I don't want to sound patronising or anything, but [the lives of my peers] just seem more lightweight in a lot of ways. Their topics of conversation are such lightweight, superficial waffle, and if you said to me afterwards "What did they talk about?" Well, I can't tell you. It's just nothing. It's "Remember the time when we used to do this?"

The bereaved women's stated impatience with 'trivial' discussion is suggestive of a) a realignment of personal values since the bereavement occurred, and b) the difficulties in sustaining friendships (particularly with other women) when one's beliefs and values become markedly different from the majority of others one commonly interacts with. JANE's (counsellor) comments below are illustrative of these factors;

> JANE (counsellor): Girls often found social events a real challenge because they didn't want to talk about the curtains, the trivialities of life. It didn't matter at that point in time – they were dealing in the big issues. I suppose that would be so for men as well, but certainly women would often say "Look, I just didn't want to hear her going on about how she's decorating her house." It's really not important in the scheme of things.

The social preoccupation with the developmental 'markers' of young adulthood particularly exasperated and frustrated a significant number of the female participants. For example;

> CATRIONA: I just couldn't be around their conversations last year. A lot of my work colleagues are around my age so there's all this wedding talk, engagements, buying houses, saving up for holidays, 'Oh, I haven't got enough for this holiday', 'I haven't got enough for the deposit', 'I'm so depressed. Look at the price of this' – all this sort of stuff. It's so insignificant. They have no idea. It's not their fault, but I was so angry that those things were an issue, when my issues were a bigger problem for me…I couldn't cope with people just chatting about day to day things. I felt I was going insane, like I was going to scream out and say 'Shut up! Get a perspective on life.' How can they not realise how stupid these things are when I'm sitting here. I thought they were so insensitive and unaware.

On the basis of both the bereaved female participants' observations and those of the counsellors, it would appear these 'trivial' interactions could operate as a form of group bonding. That is, the articulation of common interests, shared understandings and shared vernacular operates as a means of creating a sense of social belonging. It is a form of bonding where the accompanying demands of emotional disclosure, such as trust and loyalty, are largely absent. As a principal form of social interaction, the bereaved women had rarely found it conducive to satisfying the particularities of their social-interpersonal needs since the bereavement occurred.

However, on the basis of the bereaved female participant interviews, there do appear to be a number of support-related factors that contribute towards a greater tolerance of 'trivial' discussion within daily interactions. The minority of female participants who did not refer to a frustration with 'trivialities' provided few examples of people 'closing off' their avenues for emotional disclosure. They rarely perceived or received from others the sentiment that 'they should be over it'. They did receive ongoing reference to the sibling who had died, and ongoing recognition of the reality of their grief. Therefore, a

tolerance of 'trivial' discussion seemed closely related to the wide-spread social recognition of the ongoing impact of sibling bereavement and the social allowance of grief-related public expression.

In some cases, trivial discussion could even be appreciated as an opportunity for 'diversion', but it needed to be complemented by the aforementioned social recognition. For instance, with DIANA, the quality of support her peers provided, both 'meaningful' and 'diversionary', was felt to be more personally beneficial than what was provided within the familial environment, which was more consistently bereavement-focused.

> DIANA: Close friends helped me. [I felt I could share my experiences of grief with them because] they weren't living with the situation everyday. They could take my mind off [the bereavement]. I didn't feel I could share with family members because they were a little too close to the situation…I have had great support [from my close friends] so I have had no need to cover up any feelings at all.

DIANA's experience was not a common one; the 'distance' of peers from the immediacy of the sibling's death was found by the majority of bereaved participants to be problematic in nature, particularly in terms of empathy and recognition declining over time. In this regard, DIANA's example was indicative of the benefits of continuing empathy and recognition of peer group members, as well as how membership in a peer group could operate as a release from the stresses of familial grief. The uniqueness of her example was suggestive of the relative elusiveness of this type of peer support.

Where talk of grief and sibling death was regularly denied the bereaved young adult, social isolation was experienced, manifested in a sense of disconnection from others and/or in a physical isolation. BROOKE's experience alluded to the sense of disconnection;

> BROOKE: I could go to work and I could concentrate. It was the only time I could block Martin's death out, but say, when I was in social situations then I

could find it hard to concentrate. I would find myself thinking – say, when I was at a dinner party – I would find myself thinking, "All this talk is so trivial, so irrelevant." So then I would end up thinking more about Martin, the fact that he died, and all these people were talking about all these light and frothy topics and not realising I was sitting there and feeling so bad…it had such a profound effect on me that it consequently affected every relationship, and for a while I judged people on the basis of how they reacted to Martin being killed and how they reacted to my reactions. I really did not pursue friendships with people who made me feel bad about Martin or ignored Martin.

On the one hand, it seemed the sense of disappointment in others would dissipate to some degree over the first 1-3 years of bereavement. However, the residual effect of the lack of wide-ranging support networks was the bereaved young adult's ongoing sense of disconnection. This disconnection was most evidently manifested in an 'us' and 'them' outlook where 'bereaved' individuals were felt to be compassionate and empathetic in nature, while 'nonbereaved' individuals were felt to lack such qualities.

In contrast to BROOKE's social disconnection, DENISE's experience was suggestive of a more physical isolation;

> DENISE: You hear people whining about there little dramas, which they think are pretty huge in their life, and I sort of think "Oh help, who do you think you're kidding? It really doesn't matter." Sometimes it's easier to be at home than deal with other people's stuff…I don't mean that in a selfish way, but you realise that worrying about the lawnmower or something simple is kind of shallow.

On the basis of such accounts, the following questions can be posed 'Where do bereaved women find satisfactory social support? Where are opportunities for emotional disclosure found?' Or does grief – at least until the 'waves of grief' become significantly wider – confine bereaved women to a social isolation of the mind and/or body?

9.8 Female support: the person who listens

With bereaved young men and their avenues of social support, the value of 'presence-support' appears particularly pertinent in their bereavement experience. Bereaved male participants may have mentioned an alteration in values from those of their peers, but the *sufficiency* of 'presence-support' for the majority of the bereaved males was significant in terms of helping them sidestep any interpersonal tensions that value-differences might attract.

For women, it is far more likely that 'presence' needs to be accompanied with the opportunity to articulate feelings and concerns relating to the bereavement. In this regard, the value of the supportive individuals who are prepared to 'just' listen cannot be underestimated. Even if the person or people listening are not similarly bereaved, their 'action' of listening can contribute towards the "break[ing] down [of] those social isolation barriers", as the comments of NICHOLAS (counsellor) illustrated.

> NICHOLAS (counsellor): [Bereaved young people] talk about a person who – while he or she may not have had a similar experience – he or she seems just willing to listen if they want to talk. Or sometimes not necessarily say anything much at all, but just offers…they keep up regular contact, they might be offering "Do you want to catch up for a coffee or go out for dinner?" or something like that where the bereaved person feels a bit like they're being offered support, even if the person doesn't quite know how to talk about it, at least the person is willing to break down those social isolation barriers. That's fairly rare, but when people report that it has happened that is considered a fairly special friendship or relationship.

One of the greatest benefits for the bereaved young adult in the act of listening is that it appears to minimise the sense one is being judged.

> ELIZABETH (counsellor): Most of the young people I have spoken to who have had great support from friends have been talking about friends who let them talk. Friends who encourage them to talk, and don't regard any of their behaviour as odd.

However, as recounted by the counsellors, the most significant obstacle to the action of listening was the anxiety the supportive individuals experienced when they assumed they were providing little help in easing the bereaved young adult's experiences of grief. Such a view suggested the importance of recognising the 'action of listening' as a proactive act in itself, rather than seeing it as indicative of inaction or passivity. Compounding this anxiety would be the lack of a template the supportive individual had in terms of articulating empathy and concern for the bereaved young adult. However, the difficulty for supportive individuals in 'finding the right words to say' was an issue to which the bereaved participants had displayed sensitivity towards. For example, in their contemplation of 'What can anyone say about the enormity of a death?' In this regard, supportive individuals' willingness to listen, coupled with their knowledge of the value of listening, would actually provide a respite from the problem of devising suitably empathetic sentiments – on an ongoing basis - for an issue that often defies satisfactory articulation. At the same time as easing the supporter's 'burdens', the act of listening provides substantial support for the bereaved individual, as JANE's (counsellor) comments suggested;

> JANE (counsellor): I love that [the person who just listens to the grieving individual, and who keeps in regular contact]. That's the most important thing – just being able to be with someone who's grieving. There are no answers. The sibling is not going to come back. Just be with them and let them express is such a gift. When good things happened [to bereaved young adults in a social setting] that was the sort of thing that was reported [in the sibling support groups].

CLAIRE's comments below similarly emphasised the active nature of a combined 'listening-presence' support. Her comments also suggested how knowledge and recognition of the value of 'listening-presence' support could substantially decrease the fear that difficulties with maintaining a series of consoling sentiments will render one's methods of support as insubstantial.

> CLAIRE: A friend of mine, her sister died a couple of months ago. It was a similar kind of thing – a long hospital stay – I've been through that sort of thing

and yet I didn't know what to say to her. What can you say? I think the important thing is just being there. A female friend said to me, 'Just call when you feel like it', but a guy I knew, he called and said 'Let's go for a coffee.' He took the reins. I really appreciated that. It wasn't exactly 'How are you feeling? How was the funeral?' It was 'I'm here and I have time for you.'

The counsellor's concern that the value of listening may be discounted (against perceptions of it as passive and inactive in nature) was compounded by the probability that the benefits of their listening would not manifest in the short-term. That is, the supportive individual would receive little short-term indication of the value of his/her supportive action for the bereaved young adult. Such indication would be especially elusive in the early years following the sibling death, where the episodes of grief occurred in closer proximity to each other. In this sense, the supportive individual's patience would be tested and any sense of achievement mostly delayed. On the basis of his clients' reports, NICHOLAS (counsellor) noted the rarity of individuals prepared to listen. Given the factors above, the rarity of such individuals is not surprising, particularly if those beliefs and perceptions are coupled with a discomfort with issues surrounding death and grief.

The flipside to the act of listening was offering advice or 'words of hope' that ultimately, and more than likely, often inadvertently undermined the strength and persistence of grief. For instance, time may well heal, but such sentiment was often felt indicative of a wish for any further bereavement talk to cease. Such a sentiment was more likely to be tolerated if it was spoken by a similarly bereaved individual. For the most part, the expression of such sentiment, which superficially would appear a more active approach to reducing the level of another person's grief seemed to instigate or build upon any resentment towards individuals not similarly bereaved. By extension, it exacerbated any existing sense of social disconnectedness the bereaved young adult experienced.

So, having their bereavement-related issues heard provides both acknowledgement of the sibling who died and recognition of the consequent grief. For the supportive individual, there is less performance stress, but

without the accompanying feeling that one is providing inadequate support. The problem of affirming words being interpreted as advice giving is also avoided. In this sense, the perceived judgemental attitudes that can mar support attempts and serve to alienate both the bereaved young adult and the supportive individual could potentially be minimised. Also, JAMES (counsellor) stressed the importance of supportive individuals offering 'open invitations' to the bereaved young adult (such as invitations to a movie, to have a coffee, or go for a walk), and not 'giving up' if a number of the invitations are not accepted. REBECCA's example below provided some insight into why a supportive individual should not be deterred too quickly when an invitation has been declined. The example was suggestive of how, in the short term, a supportive individual's relationship with a bereaved young adult appeared to lack a give-and-take dynamic, and as such, a certain level of tolerance would often be required from the supportive individual. The combination of social outings and opportunities for disclosure was also reflective of a 'dual process'-type balance of activity and emotional work.

> REBECCA: I had one friend…she wasn't a really good friend, but she was a friend. Within a couple of weeks of his death, I arrived at the cemetery and she called on the mobile to say "If you need anything I'm here. If you ever want to go for a walk or have a chat, I'm here." Which was a lovely gesture. I thought it was beautiful, and then I heard she went back to a mutual friend who said she was upset because I never rang her back. Well, it's going to take six to twelve months to think about ringing back because I'm in shock and I'm paralysed by the death of Jay. So people just don't understand, unfortunately. What can you do? You just feel like you're separated. You feel as though your grief separates you from the rest, so to speak…I think people like that [who are prepared to listen] are few and far between. It's hard to find really compassionate people that really think that way. There's nothing in it for them and they're not going to bring up the fact that they're going to do it for a reason. They're just going to do it to help that person because they're selfless. I don't think there are too many people out there that do that sort of thing.

9.9 Disclosure-with

One of the benefits of listening is that it enables nonbereaved individuals to provide support without entering the problematic domain of advice-giving. In this regard, listening has positive ramifications for bereaved young adults in terms of their procuring and receiving satisfactory support from a range of social networks (such as peer network, work environment, sporting team). In enabling nonbereaved support, it should minimise perceptions of a limited social tolerance of young adult's ongoing grief.

However, the bereaved female participants' disclosure needs also encompassed interaction with individuals whom they felt they could *disclose with* as well as disclose to. In Chapter 2, the positive experience of relationship 'meaningfulness' was cited as including both self-disclosure and other-disclosure (Wheeler, Reis & Nezlek 1983). Likewise, the concept of 'partner attention' emphasised the personal and interpersonal value of conversational behaviours that display and communicate a positive interest in the person one is interacting with (Kupke, Hobbs & Cheney 1979, cited in Jones, Hobbs, & Hockenbury 1982: 683). As mentioned, discussions of bereavement with nonbereaved individuals are fraught with the associated difficulties of how each interpreted the other's behaviour and reactions, so the question emerges as to what type of individual the bereaved woman seeks out for 'disclosure-with'.

One example here was the support in 'loss' individual. The common factor that connected the bereaved woman with this person was the shared experience of 'loss', but 'loss' did not necessarily denote the death of a close family member. It could also encapsulate the breakdown of a marriage or relationship. The shared experience was the cessation, however manifest, of a close relationship and the consequent removal of hopes, plans and ambitions associated with the relationship. Is this seeking out similarly affected individuals indicative of a narcissistic world-view (Sennett 1977: 4)? That is, does it reflect a seemingly tunnel-visioned objective towards attaining self-understanding? After all, given that shared disclosure with a nonbereaved individual lacks a similarly significant experiential connection, disclosure may not be considered worth the

effort and risk. However, the motivation towards seeking out individuals with similar experiences[19] appeared not so much due to a narcissistic focus as it did to a lack of confidence in the levels of empathy and tolerance of individuals not similarly affected.

> NICHOLAS (counsellor): [The bereaved young adults] feel a bit isolated because they feel like they can't fully touch on what they might be thinking or want to talk about with anyone else. It often seems all too difficult to work out who there is available to share your thoughts with…where there's some understanding…say, they have personally experienced the death of someone close to them. Those people might say, "I now really get on well with someone at work or at uni or wherever who has been through a situation where their parents separated or some other grief they've found there." They often talk about…they feel like, you know it's a different circumstance, but there's a certain empathy or understanding there… [the bereaved young adult's mentioning of an "understanding" individual occurs] nowhere near as commonly as the opposite situation does.

'Disclosure-with' was also reported as occurring with individuals who were found to hold similar life-values and beliefs to the bereaved woman. For instance, these supportive individuals similarly emphasised close relationships over a more materialistic and/or diversion-oriented world-view. Or they were more contemplative and reflective in nature. While this tendency could be displayed by young adults, it was more commonly displayed by 'older' individuals. CHRISTINE's example below was reflective of these relationship values;

> CHRISTINE: I think my job…is just a job. I don't want to spend any more time there than I have to. I would rather spend time with my dog…take her out to the park or something like that. Or see my friends. I guess I place more emphasis on meaningful relationships. Like my close friends, my family. That's not to say I don't get into the routine of going to work, coming home, doing the hours. It's

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[19] Support-groups are valuable therefore for the opportunities they can provide for 'disclosure-with'. BRIAN (counsellor) did caution however that the benefits of support groups can be compromised by personality differences too considerable to overlook, as well as the structure of the meetings (ie. little opportunity for attendees to interact with each other).

been like that week after week, and I just get into the mindset of going to work, coming home, doing what I have to do…then when I catch up with my friend – I've got a friend who lives close by. I don't see her all that often because we're both so busy. So when we do catch up it is really good, and that kind of reminds me. I've got two really close friends…they have the belief that time with important people is the most important thing. That's why we get along so well I guess.

The supporters' similar values could have developed from a loss experience, but (less commonly) they could also have developed from a 'nonbereaved' perspective. In these admittedly few cases, the bereaved women would note that the nonbereaved supporters held family relationships and close friendships in high regard, and thus possessed a greater capacity to recognise the extent of their loss. This was a value that, if not pronounced for the bereaved individual prior to the bereavement, became so after its occurrence, even in cases where it seemed familial relationships had been strained. The nonbereaved supporters were typically peers, but as mentioned, their existence was less commonly cited than that of the 'loss-experienced' individual.

More commonly cited than nonbereaved individuals with similar values were relatively 'older' individuals; that is, people in their late-thirties and beyond. As alluded to in Chapter 6, older individuals were often found to be more empathetic and easier to talk with than the majority of those found within peer groups. They were also appreciated for their (presumed) greater levels of exposure to life's adversities. Their lack of a need to 'establish' or 'prove' themselves socially was likewise noted. These factors were viewed as contributing towards a more bereavement-empathetic individual.

However, there were also notable and consistently-cited exceptions to the perceived rule. For instance, one of the bereaved women's most common sources of interpersonal tensions was extended family members. For instance, an 'achievement-oriented' aunt or uncle was cited as a common source of interpersonal tension for the bereaved woman; such individuals articulated a frustration with the ongoing nature of the immediate family's grief. Or, if one

of the family member's grief trajectory was especially 'masculine' in nature, the extended family member would highlight his/her trajectory as the preferable and/or appropriate response for handling grief in a personally and socially responsible manner.

9.10 Conclusion

The participants' accounts of the costs, real or imagined, of stepping outside societal expectations of gender suggested the significance of gender in the bereavement experience of bereaved young adults. The possibilities of social rejection were salient in their accounts, although the possibilities of newfound support and compassion were also evident. However, the question remained as to what extent newfound support could satiate the experience of a more general social disconnection.

CHAPTER 10

GENDER AND SOCIAL CONTACT

This chapter is the final results and analysis chapter to focus on gender. It continues to explore the avenues where bereaved young men and women experience support, and also where they do not. However, whereas the previous chapter examined avenues where support was 'found', this chapter focuses more on relationships that were well-established before the bereavement occurred (ie. familial, partner relationships) and how the bereavement has affected those relationships. Within those relationships, a gender component was often observed to be operating.

The subsections of this chapter are: *10.1 people who knew the sibling; 10.2 gender and immediate family; and 10.3 partner support and 'getting on with it'.*

10.1 People who knew the sibling

The influence of one's social circumstances at the time of the bereavement was apparent with bereaved participants who had lived in a particular geographical area, rural, urban or metropolitan, for an extended time (for example, for three to twenty years). In their cases, the individuals they commonly interacted with were more likely to have had regular contact with the sibling prior to his/her death. Indeed, these individuals may have been close friends with the sibling. In most scenarios, there needed to have been a relatively small age-gap between the siblings in order for them to have interacted within the same social circles. There could be exceptions; CATRIONA noted that her sister possessed a maturity that belied her years and enabled her to socialise on a similar level with CATRIONA's peers.

As mentioned, one of the unexpectedly prominent issues for the bereaved participants was the importance of ongoing social acknowledgement and recognition of the sibling who died. Or, in other words, within one's social life-

world there needs to be clear evidence of widespread appreciation of the significance of the loss. In cases where individuals whom the bereaved participants commonly associated with had known the sibling, this need for recognition could, at least on an *intermittent* level, be satisfied. ALANA's example suggests how;

> ALANA: [My friends] also grieve for her. They were there when it happened. There's that unspoken thing, I can just allude to a particular event in our collective memory without having to elaborate, and they know. They know and appreciate how resplendant and amazing she is. I don't have to translate or explain.

The term 'intermittent' alludes to the fact that social acknowledgement of the sibling did not necessarily extend to social permission for bereaved participants to 'disclose'. For instance, the preparedness of peers to talk about the sibling often only extended as far as sharing stories, and those were stories with an emphasis on amusing anecdotes. For the majority of the bereaved male participants, shared reminiscences about the sibling could build upon the stated appreciation for 'presence-support'. For the majority of the bereaved female participants, reminiscences from friends and colleagues were likewise appreciated, especially as a form of celebrating the sibling's life. However, given that the associated subject of bereavement would often produce uncomfortable responses in those same individuals this type of social recognition was viewed as only partially satisfactory. On this note, ALANA provided a counterpoint to her previous comments.

> ALANA: I cover up pretty much all of my bereavement in social settings, except with my friends from before, who have gone through it [experienced the sibling's absence] themselves. Even with them, there is a feeling that I should talk about it less, now that 5 years have passed. There is a feeling that I should not keep twisting the knife for them; that I should let them heal in a way I never will.

ALANA's comments emphasised a tension particularly referred to by the bereaved female participants; even if friends had known the sibling quite

closely, the fact that they are not family members limits their levels of empathy in the long-term. Perhaps this is as much a perceptual issue on the part of the bereaved participants as it is an 'external' issue of social tolerance and empathy. In any case, SARAH's (26 years old when her brother died 5 years and 9 months ago) comments below suggest where these perceptions emanate from;

> SARAH: In social situations with people I know I feel like I have to be extremely careful about what I say and how I say it. I have to be extremely conscious not to dwell – even though I don't believe I do dwell. Not because my friends or family think I'm fragile or anything, but because it's like they're tired of it and the look on their faces tells me that they think I should be well 'over it' by now. I feel like if I mention anything to do with death now, there's a gasp and everyone stops and then the conversation awkwardly but purposefully changes topic. With people I don't know however, it's very different. If it ever comes up then there's an element of intrigue and curiosity so it's easy to talk.

It would seem that the perceived intolerance over time is relative to the quality of the relationship the friends had with the sibling. To reduce the bereaved individual's perception of increasing intolerance, the friends would need to have had a much-valued relationship with the sibling. From such a level of connection would presumably arise a similarly prolonged grief response to that of the bereaved sibling.

Still, in a comparative sense, having friends and/or acquaintances who had a significant level of interaction with the sibling can be viewed in a largely positive light. In cases where bereaved participants had been relatively new to a geographical area – or the sibling had been living in another state, for example– their grief could be further complicated by feelings of social disconnection and disappointment associated with the population's lack of firsthand knowledge of the sibling. However, even if one is fortunate to have friends 'with firsthand knowledge', the perceived limits of social empathy might ultimately undermine the experience of social connectedness.

Interestingly, there was less stated anxiety about the long-term tolerance levels of 'older' individuals or 'loss'-experienced individuals than there was with nonbereaved peers who had known the sibling. With 'older' individuals, the bereaved participants held the general perception that they were more consistent in their empathy due to their presumed greater experience of adversity and/or more secure sense of 'self'. With 'loss'-experienced individuals, the perception of long-term empathy was stronger because their similarity of 'loss'-experience was felt to favour a long-term tolerance.

10.2 Gender and immediate family

Interactions with immediate family members would presumably encompass more satisfactory social encounters for bereaved young adults in that there is a shared appreciation of the extent to which the sibling/child's death can impact upon family members. Of course, as mentioned, there could be difficulties in the realignment of family roles. Also, as some bereaved participants mentioned, their observations of parental grief (or even the grieving of other siblings) often proved too confronting for them to feel comfortable in soliciting familial support. If these difficulties are overcome, or at least adapted to, then one could assume that they would be sufficiently unburdened to then benefit from familial understanding and (for bereaved women especially) subsequent opportunities for 'disclosure-with'.

However, on the basis of the bereaved participants' responses, the interaction of gender and personality within the familial environment could produce interpersonal difficulties that ultimately obscured shared understandings. Immediate family was not always an environment where individuals with similar values were found, particularly values relating to coping styles. While very few participants provided a pre- and post-bereavement 'snapshot' of family dynamics, the participants who made particular mention of post-bereavement family relationships often noted family members responded in different ways to the bereavement. Typically, the mother was 'open' in her grief. This was illustrated in expressing the need for 'disclosure-to' and 'disclosure-with'. Typically, the father was 'closed' in grief expression. He tended to centre

himself on work and/or activity, physically and mentally isolating himself from family members, particularly when issues of bereavement were raised. Where differences in parents' coping styles were referred to, the opposite scenario was not referred to; as described, the mothers' coping responses were overwhelmingly 'feminine', and the fathers' 'masculine' in nature.

This difference could create familial estrangement; not an estrangement that necessarily signified parental divorce or separation, but a separation where family members with similar coping styles gravitated towards one another at the expense of 'meaningful' interaction with other family members. This is not to preclude any of the bereaved participants' praise or tolerance towards family members and their different coping styles, but there was a reported greater ease in interacting with those who had similar coping styles. Different coping styles could also impact on sibling relationships, but interestingly, at least from a generational perspective, sisters did not always respond in a largely 'feminine' style or brothers respond in a 'masculine' style. Having more than two siblings could be beneficial in that one potentially had a greater number of supportive individuals to interact with, as WARREN's example below illustrated. However, within his interactions, he was referring more to shared recollections than 'disclosure-with'.

> WARREN: If it was just me and Amy in the family and Amy died, it would be a whole different thing. It's not like "You've lost one, you've got more [siblings]" – it's not like that. You've got them there to talk to and you've got the memories there with them as well. I think having a big family has made it so much easier for me.

The quality and range of social support appeared a far more reliable predictor of the nature of a bereaved young adult's experience of social isolation, than the number of siblings, and the associated quality of sibling relationships. Also, there appeared a limitation in familial support, if indeed it was the only support a bereaved young adult received. The 'meaningful' support from a wide range of networks appeared to help guard against bereaved young adults developing an 'us and them' perception of social relationships.

Support from siblings was also not always forthcoming. As CATRIONA's example suggests, sibling relationships can bring into sharp relief the differences in coping styles, although in her case the differences in coping styles may have evolved in part from sibling dynamics prior to the bereavement. The coping style of her sister, Jennifer, had followed a more 'masculine' trajectory; as such, CATRIONA experienced Jennifer as being highly critical of her more 'open' displays of emotion.

> CATRIONA: Jennifer knows that Georgina and I had something special and she didn't have that…when Georgina died, for the first few months there was huge tension between us…we had some terrible emotions between us. She'd go down one end of the house and I would go down the other. She got very angry with me. She'd say "Stop throwing your grief in everyone's face. You're not helping matters by being so grief-stricken, so depressed." I would say "I can't help this. This is me. I can't pretend I'm not this Rachel, like you are." And so we had all this angst and hostility between us.

For the above reasons, the familial environment did not always prove conducive to bereavement-related disclosure, or even shared stories and recollections, for the clear majority of bereaved participants. On the other hand, even if family members were 'in sync', a sense of social connectedness was not necessarily the outcome. As JOHN (counsellor) noted, while bereaved young adults might receive a 'hearing' from immediate family members, such courtesies might not extend from the wider community; the wider community assuming that "someone else is taking care of [the young adult's struggle with bereavement]." ELIZABETH (counsellor) observed that in the support group she facilitated, the participants (aged between 12 and 25) with satisfactory familial support were more socially confident, at least within the support group context, than participants with unsatisfactory familial support. However, with the bereaved participants interviewed for this study, a confidence in the empathy of family did not necessarily extend to a confidence in community support; a sense of familial connection did not guarantee a follow-on sense of connection to the wider community.

As has been alluded to within this chapter and the previous results and analysis chapters, the value of wide-ranging, 'meaningful' social support became prominent in the bereaved participant and counsellor interviews. Its value crosses gender demarcation, and is detailed in the next chapter.

10.3 Partner support & 'getting on with it'

JAMES (counsellor) felt that if wide-ranging support was not forthcoming for a bereaved young adult, then he/she would not necessarily lack relationship 'meaningfulness' (or 'disclosure-with') as a consequence. Even though a close relationship with a single individual, usually a partner, might not have removed a sense of social disconnectedness, the value of receiving empathy and support in this relationship was considerable. For instance, ISABELLE (28 years old when her sister died 7 years and 3 months ago) referred to where the support of a partner (along with a sister) had been of considerable value and comfort for her.

> ISABELLE: I talked constantly with my husband and sister at the time, and together we tried to make sense of my sister's death. They were both terrific, and they still are my refuge.

She was also one of the very few participants who expressed the opinion that dealing with grief was unavoidably a largely isolating process.

> ISABELLE: I worked out very quickly that I was supposed to be moving on quick smart…I wasn't angry with anyone, just lonely. I realised quickly that this grief was something that I – and I alone – was going to have to find a way of learning to live with.

On the basis of participant examples such as this, the value of 'meaningful' support from a single person, or a small number of people, was evident. However, with the bereaved female participants in particular, it was observed that the support a partner could provide was often undermined by the stresses associated with grief. For instance, the majority of the female participants who

were within a partnership at the time of the bereavement, or soon after, recounted a series of disappointments with boyfriends' supportive behaviours.[20] The male participants were more likely to report the attempts of partners to 'understand' their grief,[21] although this did not ensure that the relationship prospered in the face of grief-related stresses. As a number of female participants noted, unless the partner had an attachment to the sibling, akin to that of a close friend (or indeed a sibling), there would be limitations in the partner's appreciation of their loss and grief. For all that, the attempt to 'understand' was still appreciated for the care it was felt to signify. While it alone might not sustain the relationship, its enactment at the time would consequently appear to reduce levels of residual tension and disappointment in future years.

For the female participants, a common complaint of male partners was their tendency to express frustration and/or bemusement with the ongoing reality of their grief. Such expression typically included the sentiment that 'one should be getting on with life'. This complaint of the female participants reflected the earlier counsellor observations regarding the lack of a bereavement-related template for both bereaved and nonbereaved individuals, particularly in relation to contemplating the 'ongoing-ness' of grief. Less commonly a boyfriend could exhibit jealous behaviours (as in LISA's example below), the jealousy apparently related to how the sibling's death continued to consume the bereaved young woman's thoughts.

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[20] No same-sex partnerships were referred to by either the bereaved female or bereaved male participants.

[21] An interesting insight into the maintenance of the bond between couples is outlined in the article 'Surviving Bali" (Wright 2003). It refers to a form of interpersonal communication that accommodates self-disclosure without the (potential) social awkwardness that can accompany the disclosure, for either the bereaved individual and/or the supportive partner:

> Like several of his Kingsley team-mates, Quayle is on medication to deal with the stresses of the explosion and its aftermath. Beyond that, his therapy has taken a solitary course. He carries a dictaphone with him everywhere. Its microphone is the ear into which Simon Quayle empties his heart. 'I've got 40 tapes, hours of sessions, just speaking about how I'm feeling, about what I'm going through.' (Wright 2003, para. 52)

> (Norelle, his partner, says) 'I've learnt more from listening to the tapes than from what he's told me,' she says. 'He might get up in the middle of the night, make a cup of tea and talk into the tape for 30 minutes. I'll listen to them every few days. Sometimes it upsets me, and then I wish he had told me that. That's part of the healing; to get this out, to get it off his chest and talk about how he's feeling to his little recorder.' (Wright 2003, para. 54)

LISA: I split up with my boyfriend a couple of months ago. He tried to be there for me, but at the same time, when Steven died, he got really jealous and didn't like the attention it got from me. Probably two years after Steven died, he said "How many years does it take? You should be over it."…he said to Mum that I need help. Maybe I do need help, but he hasn't lost anyone...he tried to understand, but he couldn't.

The difference in the responses of the male and female partners was interesting in light of the concepts of gender outlined in Chapter 4. Particularly relevant to their response-types was the notion that within the sphere of gender and social change, traditional notions of appropriate male and female social roles continue to retain some impact on social relationships. The attempts of girlfriends or wives to be 'understanding' would seem as much an indication of the continuing influence of traditional 'feminine' conduct, as boyfriend's or husband's expression of impatience with grieving would seem an assertion of the traditional notion of the resilient and active male social agent.

The expression of disappointment with male partners was especially notable for how the quality of the partnership could influence the bereaved female's perceptions of wider social tolerance towards bereaved young adults. It would seem that relationships with non-immediate family members (a partner in most cases, but also extended family members and/or close friends) played an instrumental role in bereaved women's development of a bereavement-specific 'generalised other'. CATRIONA's example effectively illustrates this.

CATRIONA: I would react in a way, and [my husband] would say "Why are you reacting like that?", "Why are you crying like that?", and "What's brought that on?" Remarks like that – I just couldn't handle that. "Because Georgina's dead." That's simply it. The counsellor has reassured him that everything I'm going through is normal. I'm not a freak who is way behind where she should be at. So that was really good for him to hear. She's given him some strategies to work with. But that has come from him, my husband. He has had that sort of mentality (to be over it). If that's him, then everyone else must be more so.

Wide-ranging, 'meaningful' support, in this regard, would almost appear to operate as a safe-guard against the potential development of a negative 'generalised other'. The influence of close relationships on bereaved young adult's social 'worldview' would appear substantial.

In relation to partnerships formed beyond the three to five years following a sibling's death, they were less likely to be experienced as stressful and more likely to be successful overall. On the one hand, this can be viewed in a positive light; the level of intensity associated with the sibling's death has more than likely reduced and thus has less effect on the quality of this new relationship. Also, the task of incorporating the sibling's death into everyday living has more than likely shown definite signs of progression by this stage, another factor that bodes well for reducing stress in new relationships.

On the other hand, the success of a later relationship could also be partially attributed to bereaved participants' accumulated experiences of social discomfort with death and grief. By this stage in the grief trajectory, he/she (she, in most cases) has realised that social connectedness is often jeopardised by more than an occasional reference to the sibling and one's associated grief.

There is, in any case, the possibility of new relationships to overtake the disappointments of old. However, a perception about the lack of possibilities for disclosure was established that would appear to take a substantial amount of disconfirming evidence to overcome. The aforementioned 'us and them' perception of social relationships did not appear borne of a sense of antagonism, but rather a sense of futility and disillusionment. The bereaved participants generally expressed an empathy with the discomfort of others towards the subjects of death and grief (for example, the question of 'How could anyone truly understand this grief?'), but they were understandably disappointed when a comparable empathy was felt to have not been returned.

As a sidenote, a question was asked in Chapter 4 as to whether social expectations of 'recovery' from grief varied between the sexes. For instance,

would a bereaved man be expected to 'get over it' in a shorter period of time than a bereaved woman would? By all the accounts of the counsellors and bereaved participants, there was no indication of a socially expected 'recovery time' as dictated by sex, although the bereaved female participants were more likely to experience 'recovery' sentiments from male partners. For both sexes, an expected 'recovery time' of six months was most commonly encountered The bereaved young adults' impressions of an expected 'recovery time' developed through experiencing the direct assertions of others and/or the increasing 'silence', or impatience, of others in relation to issues of bereavement. So, in terms of social expectations of a 'recovery time' from grief, gender did not appear to have a significant influence.

10.4 Conclusion

Based on the data collated, grief has the distinct tendency to undermine (or at the very least challenge) the sense of security previously found within the 'established' relationships of family, partners and close friends. Gender issues were observed within these tensions, particularly in how differing responses to bereavement can alienate individuals from each other. This weakening of close relationships can consequently undermine the level of empathy the bereaved young adult perceives the wider population has towards the ongoing grief of bereaved individuals. Conversely, in situations where the interaction with family, friends and/or partners did constitute 'meaningful' support, a wider sense of disconnection prevailed. These patterns may create the impression that wide-ranging social connectedness and the bereavement experiences of young adults are mutually exclusive entities. As the next chapter will illustrate, this situation may not necessarily be so.

CHAPTER 11

SOCIAL CONNECTEDNESS – NEEDS AND EXPECTATIONS THAT TRANSCEND GENDER

The principal theme of this chapter centres on the value of wide-ranging, 'meaningful' social support and the personal benefits of possessing a sense of social connectedness. While gender may colour the forms in which young adults experience bereavement on a social level, the necessity for a secure sense of social connectedness crosses gender lines. This chapter also links the theory of 'social capital' more explicitly to the data collated. In the process there will be some re-iteration of data trends outlined in the previous results and analysis chapters, along with the presentation of other trends that emerged during the analysis. So, while there will be the presentation of the 'old' and the 'new', it will be viewed primarily through the perspective of 'connections made between individuals' (Cox 1995: para.8).

These issues and findings will be examined in the following subsections: *11.1 from 'selective capital' to 'social capital'; 11.2 personality and 'representative capital'; 11.3 community and social capital; 11.4 'masculine' autonomy and 'feminine' empathy; and 11.5 spirituality, religion and community.*

11.1 From 'selective capital' to 'social capital'

To discuss the relevance of 'social capital' to the data collated, this subsection necessarily begins with a discussion of the general obstacles to social connectedness for the bereaved participants and the counsellors' clients. As both the counsellor and bereaved participant interviews have suggested, 'meaningful' social connections could prove elusive for the bereaved young adult. While the male and female bereaved participants tended to evaluate experiences of 'meaningful' connection on different levels (that is, 'presence-support' was often satisfactory for men, but added 'disclosure' was desired by women), their perceptions of barriers and enabling factors and 'meaningful' connection were often quite similar. For example;

1) Both sexes reported on the benefits of an empathetic workplace, in terms of promoting workplace productivity and psychological health for the bereaved individual.

2) Each believed that it would be difficult for 'nonbereaved' individuals to accurately comprehend the nature of their grief.

3) Each believed one could only talk so much about bereavement experiences without demanding too much of people's time and energy, and testing social 'interactional' boundaries.

4) Each feared being a burden on other people, albeit often for different reasons. At the same time, they still identified a desire to be understood, or at least tolerated by others, in relation to the ongoing reality of their grief.

The sentiments in points 2 - 4 help provide some insight into one of the central questions posed in the study's introductory chapter – *Why individuals amongst this group of people commonly perceive there are very few people within their social life-world whom they can "lean upon"?* On the basis of the above points, bereavement is perceived to be a difficult experience to comprehend (for those not similarly affected) and therefore levels of public empathy are limited. Also, the fear of burdening other people can stifle bereavement-related disclosure and expression.

Some bereaved participants mentioned that within the early months following their sibling's death, they had sometimes found themselves wishing supportive individuals would refrain from referring to their sibling's death or asking them about how they were coping. However, these participants typically were those who had a large number of supportive individuals 'on hand'. Their statements were qualified by the sentiment that it was personally beneficial to have had

people to go to when they felt they needed their assistance, particularly if that support remained in the long-term.

For the bereaved participants in general (as well as the counsellor's clients) a significant problem was how long-term available support could prove so elusive for them. The observation of 'life going on' soon became the chief characteristic in the participants' bereavement experiences, along with the growing evidence of social impatience with their, and their family's, ongoing grief. References to the sibling and questions about how one was coping would steadily decrease. For both male and female participants, the desire for diversionary activity co-existed with a desire for continuing acknowledgement of one's sibling and one's grief, and (particularly with the women) acceptance of bereavement-related disclosure.

For most, however, the establishment of 'balancing' relationships conducive to these needs was exceedingly complicated and/or unsuccessful. Partially, this was due to decreasing public empathy and the tendency of individuals who offered diversionary activity to be unwilling to engage in any bereavement-related discussion. Sometimes apathy was felt to develop over time, as was the case with DAVID.

> DAVID: No, [people have not suggested I should be 'over' the death] but they do forget what has happened – and you never do.

However, the influence of factors of a more personal nature was also apparent in attempting to establish 'balancing' relationships. Regardless of whether other people were receptive to discussions/disclosure relating to bereavement, the intensity of the bereaved participants' grief could also play a role in stifling their desire to achieve a 'dual-process'-type balance. They often found that the intensity of the grief following the sibling's death (particularly within the first year) deflated or overwhelmed any desire for pursuing 'balancing', diversionary activity. In light of these effects on individual initiative, the necessity for supportive individuals to periodically offer 'escape' options becomes evident.

> SARAH: I never thought that literal heartache was possible until my brother died. The pain of grief that I have felt has been absolutely all consuming, absorbing and numbing. I have never had any experience like it. The physical pain, uncontrollable sobbing and wishing and wanting to change it back so bad that it physically hurts. It's like wanting the world to stop so that I could just catch my breath. It comes and goes now because it has been some time since Michael's death, but there are still times when I feel like there's no life inside of me and I have nothing to give.

The intensity of grief could also make the 'regulation' of bereavement-related disclosure – and indeed feelings – difficult to continually enforce.

Situated against these self-regulation issues was the participants' view that protracted periods of reflection and disclosure diluted the very benefits that reflection and disclosure could otherwise bring. As for talking to others about bereavement-related issues for extended periods[22], there was the aforementioned concern that such action would be stepping outside social-interactional 'boundaries'. So, the difficulties in achieving a 'dual-process' balance were compounded by the sobering beliefs that 'excessive' reflection and disclosure would neither be socially tolerated nor personally beneficial.

Regardless of the apparent importance of 'meaningful' social connection, social isolation appeared an inevitable, if not essential, part of the bereavement experience. As Chapter 6 explained, the need to 'feel the loss' and remove oneself periodically from social situations for the purposes of reflection, were factors viewed as necessitating the isolation. Then there were the concerns about the social appropriateness of the intensity of their grief.

> CATRIONA: Probably for the first twelve months, I just couldn't cope. I felt emotionally unstable. Just the thought of being around other people stressed me out pretty much. I wouldn't know how to react. I felt like I wouldn't be able to

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[22] I use 'talking to' rather than 'talking with' to allude to a common concern of the bereaved participants; that the supportive individual may not be a willing participant in this interaction, but is merely enduring the situation out of a sense of obligation to be supportive.

talk…just talk about the weather or whatever because my whole thought pattern
was Samantha. That was all that mattered to me. And you can't go out and talk
about that.

The practice of 'regulating' bereavement-talk (or 'pretending normalcy') would
therefore, on occasion, appear a preferable course of personal and social action
in light of a) the bereaved participants' recognition of the personal limits of 'too
much talk/reflection', and b) their awareness/mindfulness of the limits of an
individual's capacity to provide support. As the intensity of grief decreased,
then presumably the need to 'regulate' discussion would follow suit; a 'dual
process' balance would be less burdensome to achieve, and more in line with
the individual's actual feelings and needs. However, in the process of this
reduction, the limits of public empathy would be becoming more pronounced.

Problematically, over time the bereaved participants found that the capacity they
believed they had to empathise with the anxieties of (potentially) supportive
individuals no longer corresponded with the empathy and understanding those
individuals directed toward them. In short, the bereaved participants felt that
the understanding they provided others increasingly failed to be reciprocated. A
lingering disappointment and wariness appeared to replace the intense grief; the
nature of their grief was transformed, and indeed the reasons for isolating
themselves were transformed. The failure of others to reciprocate meant that
the often valuable and necessary experience of social isolation could become
tinged with a 'socially-directed' anger, disappointment and sense of futility.
These feelings tended to linger regardless of whether a reduction in the intensity
of grief-related feelings had been identified by the bereaved participant (as
examined in Chapter 7).

Of course rather than signifying apathy, the supportive individuals may have
overlooked or underestimated the value of listening to, and maintaining contact
with, the bereaved young adult. They may have felt they had exhausted their
range – their available template – of supportive behaviours, and thus became
uncertain of how they could continue to assist the young adult. The signs of

ongoing grief may have obscured for them the long-term benefits of their support. Also, as the counsellors suggested, the bereaved young adults' observations of 'life moving on' could have contributed to their perception of public apathy, regardless of whether this impression was a representative one. In any case, a dwindling sense of connectedness appeared to be the outcome.

So, the bereaved young adults' capacity for self-regulation and their mindfulness of the limits of social interaction was situated against – or rather struggled against – the intensity of their grief. However, the good that could occur when a reduction in the intensity of grief took place (achieving a 'dual-process' balance, feeling more able to positively contemplate the future) was somewhat undermined by the 'social' (instances where 'meaningful' and wide-ranging support had not been forthcoming).

In relation to the strengthening of 'social capital', Cox (1995: para. 14) states that "Experiences which engender trust and a recognition of common ground, allow people to move from the defensive 'I' to the mutual 'we'." On the basis of what has been discussed so far in this subsection, the question can be asked: Is the experience of bereavement too extreme for bereaved young adults to feel able to transcend a sense of difference from others? The preoccupying tendency of grief makes the activity of locating common ground with nonbereaved individuals particularly demanding. With the bereaved participants, there was a 'selective capital' that could develop. That is, a partial sense of social connectedness was gained through relationships with 'loss'-experienced individuals, 'older' individuals and individuals bereaved of a parent or sibling (as discussed in Chapter 9).

However, 'capital' between bereaved and nonbereaved individuals would seem likely to be gained through the long term support strategies of nonbereaved individuals. For example, maintaining contact with the bereaved young adult, and being receptive to bereavement-related disclosure, if indeed it came their way. At first glance, such an approach toward building 'capital' – and by extension, strengthening a sense of mutual trust – would appear a fairly one-

sided relationship. Furthermore, supportive individuals may gain little short-term indication of the benefits of their support. However, the bereaved participants generally articulated an awareness of the one-sidedness inherent in such support-based relationships ('people can only hear so much bereavement-talk', 'no one wants to be around a continually grieving individual'). As such, the awareness contributed partially to the sense of necessity to periodically isolate oneself.

As discussed in Chapter 6, the counsellors' principal concern with periods of isolation was the potential development of, or increase in, a social anxiety borne of avoidance. The ongoing support from a range of individuals would help guard against such a development. Furthermore, the bereaved participants' appreciation of individuals who maintained contact had been particularly evident in their accounts. The capacity of support to strengthen perceptions of social connectedness reflects the values of 'social capital', as espoused by Putnam (1995) and Cox (1995).

In order to help allay the apparent one-sidedness of these supportive relationships, it is worth re-stating the cited characteristics of effective and comforting social support. In some respects, the harshness of grief alleviates individuals of some of the 'responsibilities' associated with the support role. That is, they are not expected to be vessels of information and advice and they would probably offend if they were. The support role encompasses more the ability to listen and the conscientiousness to maintain contact. The difficulties in the support role would appear related to one's attitude toward death and (ongoing) grief, the general lack of any short-term signs of the effectiveness of one's support, and the feelings that ongoing grief can evoke, such as a sense of powerlessness.

The ability of nonbereaved individuals to maintain contact with the bereaved young adult and listen to bereavement-talk would seem to reduce the need for 'selective capital' to occur. Wide-ranging, 'meaningful' support reduces the necessity for selectivity, and thus the process of accommodating the sibling's

death need not be accompanied with a significant upheaval in the bereaved individual's social circles.

11.2 Personality & 'representative capital'

As mentioned in Chapter 8, when a wide-range of 'meaningful' support existed for the bereaved young adult, he/she expressed a more accepting attitude toward the common 'trivial' discussions in social interaction. Also, with the range of support already established, there was less necessity to seek out more 'compassionate' individuals. As mentioned in Chapter 7, the range and 'meaningfulness' of social support tended to correspond with the capacity of bereaved participants to contemplate the future in a positive light. Also, in the chapter was some discussion of association between personality-types and attitudes toward social isolation (for example, extended periods of isolation might be positively regarded by a more introverted individual).

Interestingly, bereaved participants who identified themselves as 'loners' appeared to benefit as much from receiving a wide-range of 'meaningful' support as other participants who had received such support. As has been mentioned, one of the unexpected issues to emerge in the data was the importance of continuing acknowledgement of the sibling who died, and the ongoing reality of the bereaved young adult's grief. In this regard, the issue of social acknowledgement cut across any lines of differentiation based on personality and also context.

However, for the participants whose responses implied a greater degree of sociality, there was some suggestion that outgoingness and/or a steadfast commitment to one's friendships could optimise the possibilities of receiving the desired social acknowledgement. MARK was a prominent example of this (see Chapter 9), even though he expressed concern about the longevity of such acknowledgement.

In relation to the issue of social acknowledgement, some qualification of the nature of wide-ranging, 'meaningful' support is required. The bereaved

participant might have experienced 'meaningfulness' within a peer group, but this did not mean that he/she experienced it with each group member. Similarly, with extended family members and work colleagues, not all the members in each group were viewed as being supportive. Even in the case of grief support groups, JAMES (counsellor) and a small number of participants noted that it was rare for one to be comfortable with each and every personality within a group. However, connecting with a number of the individuals from each social network could still encapsulate the sort of wide-ranging, 'meaningful' support that has been referred to throughout the results and analysis chapters. In lieu of the importance of social acknowledgement, the supportive individuals of each group seemed to denote for the bereaved participants a wider social tolerance and empathy towards bereaved individuals. In this regard, the 'social capital' being displayed here could be termed more precisely as 'representative capital'.

The support of those from a variety of networks played a valuable role in mitigating the effects of any expressions of intolerance – or sheer apathy – from other individuals. Furthermore, experiences of wide-ranging, 'meaningful' support would contribute significantly to the perception of one's social life-world as being predominantly empathetic; a sense of social connectedness would ultimately prevail. As Osterweis, Soloman and Turner's (1984: 39) review of previous bereavement literature suggested, the perception of available social support may have as beneficial an effect on mental and physical health as the reality of available social support.

11.3 Community & social capital

In ELIZABETH's (counsellor) comments below, she refers to instances where a series of suicides had occurred in a relatively small geographical area within a short time of each other. The social dynamics that emerged from a series of such adverse occurrences pointed to the availability of wide-ranging, 'meaningful' support. On account, that is, of the fact that a large portion of the community was similarly affected by the occurrence of suicide. Based on ELIZABETH's account, a series of similar deaths paradoxically can help reduce

for the bereaved young adult, experiences and/or perceptions of societal judgement. In particular, negative attitudes towards the sibling's 'act' of suicide are reduced. Perhaps more importantly, the social circumstances appear to increase the probability of one receiving communal understanding and long-term support.

> ELIZABETH (counsellor): In the cases where we have had suicides and a lot of them in really specific areas, the community had community information sessions and there have been people talking to them. I think young people have been protected and focused upon by the community and would be comfortable talking about it because things tended to hit in specific communities about five times. So they would have gone to about four or five funerals for people in their peer group. So it would have been more discussed between them. Whereas not so much with the car accident or the drug overdose, although generally schools and communities are pretty good at having a level of display like a funeral for car accident victims. Not so much substance abuse – that has a bit of a hidden quality…[The spate of suicides have occurred] mainly in rural or outlying areas – not what I would describe as central urban areas. There have been isolated incidents of suicides within the town, and those in themselves would be quite isolating for those people. Where there have been groups of suicides – those have occurred in small towns…the urban ones tend to be isolated, and are tending to be very damaging to those people [affected]. A similar stigma is attached to suicide as is attached to a drug overdose.

Comparable to ELIZABETH's (counsellor) observations were those of bereaved participants, ROBERT and WARREN, both of whom had siblings die in the Bali bombings of 2002. As mentioned in Chapter 7, both participants found that the impact of the bombings had remained in the public consciousness for an extended time. With the coverage of court trials and the anniversary services in Bali, footage of the burning buildings continued to be televised, along with accounts of the physical devastation the bombings created. WARREN noted that he found the newspaper profiles on each of the Australian victims a welcome and significant extension of the social rituals relating to death, such as funeral and memorial services. ROBERT, on the other hand, mentioned that the occurrence of acquaintances or strangers approaching him in

public venues to offer their condolences and support had been quite common. Instances such as these constitute further examples of ongoing social acknowledgement, but their enactment appeared dependent on levels of public awareness (particularly as mediated by media institutions). So, when the sibling's death carried a significant social impact, this factor appeared to 'open up' the number of social environments in which the bereaved young adult would feel comfortable expressing feelings of grief.

ROBERT and WARREN were especially notable among the bereaved participants in regards to their contemplation of the future – and their social roles within it – in a positive light, even though a relatively short time had passed since their siblings' deaths. Other bereaved participants who had found social support to be satisfactory spoke of similar experiences, if perhaps in less detail. For example, they articulated a greater acceptance of the 'trivialities' that often characterised social interactions. The wide-ranging and personally 'meaningful' support these individuals received reflected the common trend in the data. That is, the extent and the nature of the social support one received overrode other comparative factors (such as type of death, personality traits, and time since death) in influencing the nature of one's experience of social isolation.

11.4 Initiative & productivity

How such social support could contribute towards a more positive social outlook – in the long-term at least – was reflected in the area of individual initiative and productivity. In the accounts of both the bereaved participants and the counsellors, workplace support and support from within tertiary institutions ultimately encouraged initiative and productivity, although not necessarily within a short-term trajectory. Two examples are included below.

> ELIZABETH (counsellor): You'll hear people say, "The boss has been really understanding, and they've told me to take my time."…but some people, having gone back to work, just find work pretty meaningless. They become really angry, especially where there is a lot of tension at work. Many people, I recall quite vividly, come in and say, "Well, I just left. I just couldn't stand it. I can't

stand that sort of pressure, and [the people at work] don't understand and they don't care."

BRIAN: With studying – when I'd ask for extensions…there was a particular lecturer – she was fantastic. I wrote a letter to the unit chair saying "My brother had passed away and I needed time." She took the time out of her day to respond to the email – it was really nice and touching…to have that understanding – when someone goes out of their way to think of you, you try to respond and do good work in that area.

The benefits of an 'open' communication with one's employer and fellow employees (or lecturers and fellow students) were such that the participants commonly expressed a desire to honour such support through the productivity and sincerity of their efforts. Existing with this motivation would sometimes be feelings of guilt when the extent of one's grief was felt to impact on the quality of one's work. More damaging to productivity however, was bereaved young adults' detection of others' impatience with the ongoing nature of their grief.

In his views on the autonomous individual, Sennett (2000: 284) argued that the "politics of autonomy arise…from a horror of dependency [on others]" and that this "horror of dependency is lodged deep in modern consciousness." The autonomous individual complements the dictates of a workforce that increasingly requires flexibility from its workers. Furthermore, the social practice of 'autonomy' reflects 'masculine' traits of self-sufficiency and initiative. However, it was apparent from the bereaved participants' accounts that an expression of 'autonomy', and with it, initiative and productivity, could rarely flourish independently of any 'feminine'-based empathy from the wider community. A reduction in social expressions of empathy, coupled with sentiments to 'get on with life', was where a principal source of community-directed resentment emerged. In the case of traditional notions of 'feminine' empathy and 'masculine' autonomy, a lack of the former cancels out the potentiality of the latter; the successful expression of 'autonomy' would co-exist with lingering anger and disappointment.

11.5 Spirituality, religion & community

Considering further issues of personal and social support, the bereaved
participants were asked about the potential comfort spiritual beliefs may have
provided for them since the sibling's death. To reiterate Webber's (2002) view,
the young adult's search for personally relevant religious and/or spiritual beliefs
and practices indicate that, within an individualistic social sphere, the need for a
sense of social connectedness prevails. In terms of this study, it was postulated
that this religious/spiritual search – or indeed the individual's established
possession of a belief system – could, to some extent, placate negative
experiences of social isolation.

However, except for two notable exceptions, the bereaved participants found
organised religions and their associated beliefs to provide only a minimum, if
any, level of comfort. A minority of participants did not have a religious
background, or did not classify themselves as belonging to a particular religion.
Some of those who did were irritated with, and often felt alienated by, what they
felt were 'judgemental' qualities inherent in some, but not all, religious
doctrines. The most prominent example of alienating doctrines surrounded the
sibling's acceptance into Heaven; what if the sibling had not been Christian?
What if the sibling had not renounced his/her sins before the moment of death?

Participant attitudes towards organised religions had also been notably affected
by exposure to fundamentalist strains of Christianity and/or Islam since the
events of September 11, 2001. This exposure was overwhelmingly attributed to
media presentations. For a significant number of the participants,
fundamentalism effectively 'blackened' the respectability and relevance of
religious institutions. However, regardless of recent world events, the chief
obstacle towards finding comfort in religious beliefs and/or spiritual beliefs
(whether they be affiliated with a particular religion or not) was the issue of the
'burden of proof'. That is, with the majority of participants' hope of an
afterlife, few had experienced events that they felt indicated the sibling's
existence within that 'domain'. Interestingly, approximately half the female
bereaved participants referred to having read literature (in some cases,

reportedly copious amounts) on the 'afterlife'. For most of them, they reported the literature brought some comfort and/or strength of belief in the sibling's continued existence, even though they sometimes yearned for more 'earthly signs' of this.

A minority of counsellors and two of the bereaved participants, VICTORIA and BEN, noted that a significant level of 'meaningful' support could be located within church groups and more spiritually-centred forms of counselling.

> JOHN (counsellor): I've also seen people who have seen a spiritual counsellor…a priest or a reverend that has actually developed their profession through their calling by having explored the notion of life and death…unfortunately these days psychologists end up doing a lot of things that pastors, priests, and ministers used to do, but no longer do. I think it would be better if there were more of those people – when I have seen it occur it has been very helpful. The helpfulness is sometimes because where the particular minister has a congregation or parish, then that person becomes involved in that community and so the actual ritual stuff therefore isn't as finite or closely defined. They are getting spiritual counselling from the minister, but they also go to the church and the people there seem to be prepared to have a longer acceptance and awareness of what that person has gone through and may still be going through. Again that may be because they've been educated by that particular minister.

A further observation of JOHN's (counsellor) was that the church community could constitute a more laid-back social group than most of the social groups the bereaved young adult would commonly come in contact with. Its ambience would be conducive to reflective thought, and its environment would provide the opportunity for such reflections to be discussed with other people.

> JOHN (counsellor): The helpfulness may also come through the sense of community. Even if they only enter the church environment once or twice a week, it transcends the day-to-day routines of work, money, TV, sleep. "Let's forget about things that get in the way of that community." The nature of the involvement is that it's reflective, it encourages that. It tries to put that

reflective-ness into a way of understanding things that transcend logic, facts and knowledge, and it accepts the existence of belief systems. I think a lot of individual problems these days are left to helping professions and yet they've got a lot to offer. They provide a different type of counselling. I think because there are smaller parishes and small congregations there are fewer priests and ministers.

The bereaved participants, VICTORIA and BEN, had both found negative social isolation a significant part of their bereavement experience. In this regard, their experiences with organised religion and the church community were particularly noteworthy for the opportunity these environments provided them to re-engage with a social group or groups. Perhaps instilling this desire to re-engage was the participants' newly-acquired faith, a faith whose strength was felt to be significantly comforting in relation to their bereavement experience. VICTORIA's (4 years and 7 months since her sister's death) experience of entering a church environment began two months prior to when her interview for this study took place. Although she felt she needed more time to actually be able to process and make sense of her experiences, she did note a dramatic and more-than-welcome change in her life. Her encounter with religion had provided great comfort which was a genuine surprise to her and her family, none of whom had had any previous religious affiliations.

> VICTORIA: My faith in God and my religion…it's been very comforting [for me] when I'm alone. I used to have a lot of anxiety and despair in me, but that seems to have lessened now that I have God in my life…maybe it's a present from my sister…I'm now sure she's up there with Him helping make a good place for me down here…I'm not so insecure [now]. All my underlying fears with my sister when I was younger seem to have healed. I [now] feel I can heal [from adversities in life].

To sum up then, organised religion was viewed with a considerable level of cynicism, detachment and/or disappointment by the majority of the bereaved participants. Local and global examples of religious fundamentalism appeared to influence their overall perception of organised religion. Also, while a

minority of female participants cited afterlife literature as having provided some personal level of comfort for them, a sense of conviction in the sibling's continued existence could typically be undermined by a lack of 'earthly signs'. However, in the admittedly few cases where religious faith and/or the dynamics of a church community had been experienced by bereaved participants to be personally and socially beneficial, the endorsements were notably emphatic.

11.6 Conclusion

The complications inherent in the relationship between bereaved and nonbereaved individuals are suggestive of the value of establishing social templates that explicitly address these complications. Concurrent with this, these should inform of the types of valuable support that, in the present social milieu, are often overlooked as being unproductive or unnecessary. Wide-ranging 'meaningful' support does not denote the unrealistic expectation that each and every individual the bereaved young adult interacts with will express a satisfactory level of empathy. However, in the goal of seeking to reduce experiences of negative isolation, and the accumulation of social disconnectedness, the value of support from within a wide range of social networks has been evident in the counsellors' and bereaved participants' accounts.

CHAPTER 12

CONCLUSION

This concluding chapter provides an overall summary of the findings addressed in the results and analysis chapters and relate these to the phenomenological theoretical framework of this study. The chapter will have a particular emphasis on findings that were unexpected on the basis of the literature reviewed for this study, the theories postulated and the influence of my own experiences. This emphasis is therefore designed to highlight where this study contributes to, and builds upon, previous literature on youth bereavement, social isolation, and gender. Furthermore, it examines implications for policy and services designed to support bereaved young adults.

Before commencing this summary, it should be reiterated that the study was ultimately too small to generate comparative data relating to socioeconomic status and ethnicity. Also, the study was lacking in representation of sexualities outside of the heterosexual 'norm'. However, in the creation of knowledge regarding the nature and the interrelationship of social isolation and young adult bereavement, future studies encompassing these factors would be valuable on a number of levels, including community awareness. The study's examination of the interrelationship of isolation and bereavement, as well as the influence of gender on the experience of social isolation, fills a gap in the young adult bereavement literature. Also, in conducting interviews with bereaved young adults and counsellors, both 'inside' and 'outside' perspectives on young adult bereavement have been provided.

The experience of social isolation was not necessarily a negative experience for all of the twenty-five bereaved participants. Likewise, the seven counsellors noted a certain utility and value in periodic withdrawal from social activity. The most prominent trend in the data collated was the significant personal and social benefits of wide-ranging and 'meaningful' social support. When social isolation moved into the realms of loneliness and considerable anxiety, the

value of this particular form of support was palpable. Situating the grief process solely in the realm of individual or familial responsibility is to overlook the benefits of social connectedness for the bereaved young adult. Reframing the 'private troubles' of bereavement as 'public issues' opens up opportunities for more wide-ranging, 'meaningful' support to be experienced by the bereaved young adult.

Based on personal experience and the literature reviewed, an expectation developed that 'meaningful' support would be essential for all the bereaved participants (and this would also be reflected in the counsellors' accounts). From the data collated there was strong evidence to support this. However, the analysis of factors that constitute 'meaningful' support revealed a gender dimension that cautioned against any simple assumptions of what effective support encapsulates.   Sex disaggregating the data and applying a gender analysis to sex differences that emerged, allowed for a differentiated approach to support (Broom 2005; Eckermann 1999).

Another assumption was that 'meaningful' support from peer group and family members would, in a sense, be 'all the support a bereaved young adult could need'. While such support was indeed substantial in its benefits, a wider range of support appeared to provide a greater sense of social connectedness. 'Wide-ranging' support did not necessarily refer to an all-encompassing social acceptance of the young adult's ongoing grief; the important factor was that supportive individuals could be found from a range of social groups. The study also found that the 'meaningfulness' that appears most suited to the needs of bereaved young adults challenges notions of productivity, 'autonomy', 'partner attention' and traditional/hegemonic 'masculinity'.

The question which guided the research was: What are the social consequences of bereavement for the young adult and does gender mediate these experiences? I address the gender impact first and then answer the question on the social consequences of bereavement, which include isolation and support.

The gender dimension of 'meaningfulness': Perhaps the most sobering observation made by counsellors in this study was that individuals may refrain from 'supporting' the bereaved young adult on the assumption that other people would be tending to him/her. Given the clear value of wide-ranging and 'meaningful' support in this study, such a perception is unfortunate and potentially damaging for the mental and physical health of the bereaved young adult. However, the lack of a gender sensitive template for dealing with grieving young adults also complicates the provision of support. This is where the study has provided insight into the bereaved individuals' expectations and hopes relating to support, and where those expectations and hopes may clash with the people with whom they interact. The gender dimension of 'meaningfulness' was shown in the relative preference of women for 'disclosure-support' and the preference of men for 'presence-support'. Presence alone was often felt to be insufficient for bereaved women, while the need for disclosure was rarely articulated by the bereaved male participants. In a reflection of the nexus between 'private troubles' and 'public issues' (Mills 1959), public tolerance levels towards a diversity of gendered expression appeared to interrelate with the level of social constraint bereaved young adults believed their expressions of grief required.

There was some suggestion that bereaved male participants might not have recognised the benefits of disclosure; that the dictates of traditional 'masculinity' might obscure recognition or deter the practice of disclosure. On the other hand, there was also the suggestion that disclosure would not suit every bereaved young adult as a form of processing and adapting to the bereavement. Regarding traditional 'masculine' social status, the observation of two of the male counsellors was that bereaved young men could utilise the counsellor's office on a continuing basis as a 'disclosure' base, and then return 'refreshed' to the instrumental duties and interpersonal dealings of their daily lives. However, for bereaved women, a wider social display of tolerance for bereavement-related disclosure was felt to be necessary.

The bereaved young adults' provision of 'meaningful' support was often complicated by their fear that expression of grief-related feelings would soon become a burden for the individuals with whom they interacted. Intriguingly, the data collated revealed that the sexes tended to differ in their perceptions of the social costs of such expression. For women, the fear was to be categorised, to have their social identity confined within the parameters of a 'touched by grief' friend. For men, the fear was related more to a loss of traditional 'masculine' social status, and consequently a loss of social esteem. In this light, gender sensitive approaches would need to be incorporated into health promotion programmes for bereaved young adults (Broom 2005; Eckermann 1999).

'Wide-ranging' support: As mentioned, the more unexpected component of beneficial social support for bereaved young adults was having a wide-range of ('meaningful') support. Even the participants who identified themselves as loners benefited from a wide-range of support. Its value points to the necessity for a supportive individual to resist the assumption that 'someone else' is taking care of the supportive role, and therefore his/her support would amount to little value.

An advantage of wide-ranging support is that it would appear to guard against the young adults developing an 'us' and 'them' worldview, a worldview borne of a sense of futility in the members of one's social circle/s. This is not to say that each member of a social group would need to be a provider of support and an effective friend; the dynamics of personality, in particular, would make the realisation of such a situation difficult. However, to have representatives of support from a range of social networks – such as immediate family, extended family, peer group, grief support groups, work groups, sport groups and so on – would appear greatly advantageous to the bereaved young adult's social outlook. Therefore, the perception of available support and a compassionate community is conceivably just as important as the actuality.

The use of terms such as 'the provision of social support' might create the impression of the bereaved young adult as an 'active' social agent seeking out supportive individuals. However, the characteristics of one's social situation prior to the bereavement – for instance, how socially established the young adult was in his or her town/suburb/city, the level of interaction close friends had had with the sibling – would appear to significantly influence the level of post-bereavement support the young adult receives. This was likewise in situations where a substantial number of members of a community have been affected by a death, or a spate of deaths (such as suicides in a small town and the Bali bombings of 2002). The level of the social impact of the sibling's death appears to subsequently influence the extent of ongoing public recognition and empathy toward the bereaved. For instance, if the sibling's death was one of a series of suicides that occurred within a small town, or adjoining suburbs, then the wide social impact of the death would likely necessitate a more communal and public response. Concurrent with this would be greater communal emphases on 'understanding' the act of suicide. By contrast, the more 'limited' impact of an isolated suicide would a) reduce the opportunities for the young adult to experience a wide-range of social support, and b) increase the probability of his/her encountering negative judgements (towards the sibling's 'choice' and the family's grief).

The social challenge of satisfactory 'meaningfulness': Why does it matter if the bereaved young man or woman experiences significant levels of social isolation? As the grief will more than likely dissipate in intensity, so too will the necessity for isolating oneself presumably reduce? However, regardless of whether the bereaved participant was male or female, or was located one year or ten years 'down the track' since the sibling's death, the lack of 'meaningful', wide-ranging support corresponded with a sense of social disconnection and a general disappointment in people within one's social life-world. The lack of support contributes significantly towards setting in motion a socially, and often inwardly-directed, bitterness and anger that can become a significant component of the young adult's ongoing bereavement experience. The social response to

the bereavement can effectively offer the young adult positive options for social engagement or it can embitter him/her.

On a 'reflexive' level, the bereaved participants with wide-ranging, 'meaningful' support articulated a more positive and future-oriented outlook. In light of patterns such as this, societal expectations for the bereaved young adult to exercise initiative and engagement in his/her daily living need to coexist with a communal sense of responsibility toward supporting him/her. Or, from the perspective of gender, a traditional conception of 'masculine' *autonomy* cannot comfortably operate without the societal existence of a traditional conception of 'feminine' *empathy*.

The provision of satisfactory 'meaningfulness' for the bereaved young adult reflects 'the sociological imagination' (Mills 1959), in that the need to address private troubles on a public level becomes evident. The phenomenological approach of this study revealed that effective support for a bereaved young adult would require certain actions and a certain mindset of supportive individuals. In a summarised form, these actions and mindset are –

- To recognise that maintaining contact with the young adult carries weight as an acknowledgement of the bereavement (and guards against the bereaved young adult developing an 'us' and 'them' worldview).

- To display a preparedness to listen – and be available for – bereavement-related disclosure, if the young adult approaches him/her. Alternately to offer opportunities for disclosure, particularly if there has been little bereavement-talk in previous weeks. (The young adult may have disclosed to others, but a supportive individual would not necessarily be aware of this.)

- To not be discouraged if a social outing and/or opportunity for 'bereavement-talk' is turned down. Also, to resist interpreting the decline of an invitation as indicative of the young adult's support needs.

- To view listening as an 'active' and ultimately productive act.

- To recognise that the intensity of the young adult's grief may well disguise any short-term indication of the benefit of one's support. The benefits of support need to be contextualised in the long-term, rather than as a short-term 'get up and go'.

- To be aware that advice-giving can contribute to a sense of social intolerance with – and negation of – the young adult's grief.

- To recognise that the optimal 'two-way' dynamic of a dyadic relationship may periodically need to give way to a 'one-way' dynamic.

In general, the bereaved participants articulated the awareness that the requirements of a two-way relationship, reflected in the concept of 'partner attention', were not always upheld, that the consuming nature of grief could sometimes impair its achievement. This in itself could create social anxiety, and consequently periodic isolation could be viewed by the bereaved individual as a 'release' for him/herself and the people he/she interacted with. The need for isolation displays a conscientiousness, on the bereaved young adult's part, towards the potential boundaries and limits of social interaction, and how the consuming nature of grief may unsettle these. It is another example of where social isolation is at once seemingly unavoidable, but also valuable. What remains essential is that the young adult's seeking of support is accepted, and/or supportive individuals provide the young adult opportunities for bereavement-related disclosure. So, on an individual support level, this acceptance and provision can be considered as protection against the bereavement having an overwhelmingly negative impact on the young adult's self-identity and social outlook.

At the level of public policy and programmes, the summarised list alludes to the need to address and challenge notions of what 'productivity' and 'partner

attention' entail in the support of bereaved young adults. To address and challenge these notions is to optimise the possibilities of bereaved young adults receiving both wide-ranging social acceptance and wide-ranging, 'meaningful' support. In this regard, the 'private troubles' of such individuals – the sense of social disconnection, the sense of being a burden on others – are never more evidently 'public issues'. Furthermore, the emergence in the data of 'appropriate and/or desired' social support has been a particularly significant example of where academic research and analysis is inextricably linked to the 'human' development of community.

Appendices

APPENDIX A

Victoria Emery (vemery@deakin.edu.au)
To: a_mcness@hotmail.com; "'Liz Eckermann'" <lizeck@deakin.edu.au>
Cc: "'Dr. John Donald'" <jdonald@deakin.edu.au>
Subject: EC 165-2003

Dear Andrew

I am pleased to inform you that your application for ethics approval for your project 'Is gender a key differential in bereaved young adult's experience of social isolation?' (EC 165-2003) was considered at the DU-HREC meeting of 8 September and approved subject to the following amendments/clarifications.

- Clarification is needed on the procedures by which individuals are to be recruited through The Compassionate Friends, taking into consideration both the privacy laws, and any possibility of coercion.

- Clarification is needed on the procedures by which counsellors are to be recruited, again ensuring that there is no coercion.

- A copy of the promotional flyer should be supplied.

- Evidence of approval from The Compassionate Friends should be supplied.

- Serious consideration should be given by the applicant and supervisor as to whether there is need to ensure that recently bereaved young adults are excluded from the research. If so, then the recruitment procedures and the Plain Language Statement would need to reflect this criterion.

- There is reference to religious denomination in the identifying information. This should be noted as optional rather than 'if applicable'.

Please send your responses to me by email, letter or fax, so that approval of this project can be finalised.

Best wishes,

Victoria

Victoria Emery
Human Research Ethics and Grants Officer
Research Services
Deakin University
Burwood Victoria 3125 Australia.
E-mail: vemery@deakin.edu.au   Deakin University Website: <http://www.deakin.edu.au>
Deakin University CRICOS Provider Code 00113B

APPENDIX B

Thursday, 12 February 2004 5:42:49 AM
Victoria Emery (vemery@deakin.edu.au)
To: a_mcness@hotmail.com; "'Liz Eckermann'" <lizeck@deakin.edu.au>
Cc: "'Renate Howe'" <rth@deakin.edu.au>
Subject: EC 165-2003

Dear Andrew

Thank you for your clarifications/amendments received 15 December . I am pleased
to confirm ethics approval for your project 'Sibling bereavement, social isolation and
the influence of gender' (EC 165-2003) . You will be sent a formal notification of this
approval, but in the meantime you are authorised to proceed with the project.

Best wishes,

Victoria

Victoria Emery
Human Research Ethics and Grants Officer
Research Services
Deakin University
Burwood Victoria 3125 Australia.

Phone: 03 9251 7123   International: +613 9251 7123
Fax: 03 9244 6581   International: +613 9244 6581
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Deakin University Website: <http://www.deakin.edu.au>
Deakin University CRICOS Provider Code 00113B

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APPENDIX C

27th November 2003

Mr. Andrew McNess
mcness@deakin.edu.au

Dear Andrew

RE: RESEARCH PROJECT

The Compassionate Friends Victoria Inc is prepared to place an advertisement in our Magazine calling for participants in your Research project..

The advertisement will be placed in our bereaved parent's magazine February/March issue due for release in the first or second week of February, in addition we will place this advertisement in our Siblings Newsletter at the same time.

Yours sincerely

Barb Summers

President

267 Canterbury Road, Canterbury 3126
PO Box 171 Canterbury 3126
Telephone: (03) 9888 4944 Administration Line: (03) 9888 4034
www.compassionatefriendsvictoria.org.au
email:cfriends@ozemail.com.au

APPENDIX D

Bereaved young adults and their experience of social isolation

---

Have you suffered the death of a sibling, or siblings?

Would you be prepared to be interviewed (or alternately answer an email questionnaire) for a postgraduate research project examining the social experiences of bereaved young adults?

Andrew McNess (bereaved brother of Jeremy) is studying the levels and types of social isolation bereaved young adults can experience, as part of a PhD. Andrew is a student at Deakin University in Geelong, Victoria.

The criteria for participation is –
a) you were between the ages of 18 and 29 when the sibling's death occurred, and
b) no less than 1 years and no more than 10 years has passed since the bereavement occurred.

If you are interested in participating in a phone interview (lasting approximately 45 minutes), or alternately you would like to answer the questions in an email questionnaire format, please contact –

ANDREW McNESS
Phone 0432 860 691 or email:
mcness@deakin.edu.au

APPENDIX E

**Faculty of Arts
Deakin University
Geelong Vic. 3217
Australia**

PLAIN LANGUAGE STATEMENT

Student Name: Andrew McNess

Email Address: mcness@deakin.edu.au

Contact Number: (03) 5227 1479

**Project Title: Bereaved young adults, social isolation and the
 influence of gender.**

Supervisor's Name: Dr Elizabeth Eckermann

Supervisor's Location: Deakin University - Waurn Ponds campus

(Room GE62)

Supervisor's Tel. No. 613 5227 1026

Supervisor's Fax No. 613 5227 2018

Supervisor's E-mail: lizeck@deakin.edu.au

My name is Andrew McNess and I am studying for my Doctorate. A
research project is an important component of the course and I am
undertaking it under the supervision of Dr Elizabeth Eckermann. I invite
you to consider participating in this project, the details of which appear
below.

The aim of the project is two-fold: a) to explore the nature and
characteristics of social isolation that bereaved young adults might
experience, and b) to examine whether one's gender produces different (or
similar) experiences of social isolation.

With the term bereavement, I am referring to the death of a sibling. Social
isolation can be more than the bereaved person removing him or herself
from other people. For instance, feelings of isolation may be experienced
when the person keeps feelings of grief to him or herself, covering up
emotions so as not to burden others. Similarly, the person may feel
separate from their peers in terms of what he or she now values in life. I
believe the findings of this research project will be useful in contributing to
knowledge in the area of youth bereavement and gender studies.

I am seeking people who were a) between the ages of 18 and 30 when the
bereavement occurred and b) for whom no less than one year and no more
than ten years have passed since the bereavement occurred, *and* would be
prepared to be interviewed for this project. The interview would take

approximately an hour of your time, and would be undertaken at your home (or at another location you specify) at a time that was convenient for you. Alternately, the interview questions can be answered in a Word document format (sent via email or mail) or the interview can be conducted by phone.

An example of questions you will be asked are "Since your bereavement have you found that the issues that concern you are significantly different from those that concern your peers?" and "Do you have family members and/or friends with whom you feel free or able to talk about your experiences related to the bereavement?" If the interview causes you distress at any time, you are free to suspend or end your participation. If you wish I am able to refer you to the Bereaved Parent Centre, which is situated in the Sydney CBD. The carer at the centre can put you in contact with a bereaved sibling support group or with a trained counsellor at the Bereavement Care Centre, also located in Sydney.

The interview will be tape-recorded, unless you would prefer otherwise. A number of measures will be taken to ensure your confidentiality should you participate in this research. You will be referred to during the interview by your first name only and a false name will be used to identify you in the research paper. The tape recording or your interview will then be numbered. (I will keep a list of corresponding tape numbers and first names / false names of participants.) Interview tapes are then to be transcribed; only snippets of the interview will be used in the research paper. The interview tapes, transcripts and consent forms will be stored in a locked filing cabinet at Deakin University – Waurn Ponds, and access to these is restricted to my supervisor and myself. In line with the university's Code of Good Practice, these materials will be destroyed approximately six years after the research project's completion.

Participation in this research is entirely voluntary, and if you agree to participate, you may withdraw your consent at any time by suspending the interview, or you may decline to participate in any part of the procedure by simply not making a response.

If you would be interested in participating and/or have any queries (or would like to be informed of the overall research findings), please contact me at the above contact details.

Yours sincerely,

ANDREW McNESS

APPENDIX F

DEAKIN UNIVERSITY HUMAN RESEARCH ETHICS COMMITTEE

CONSENT FORM: SURVEYS, QUESTIONNAIRES

_____

I,   of

hereby consent to be a subject of a human research study to be

undertaken by   Andrew McNess

and I understand that the purpose of the research is to examine the occurrence of social isolation in the lives of bereaved young adults, and whether gender may be a significant contributing factor in the 'types' of social isolation that bereaved young adults may experience.

I acknowledge that

1) Upon receipt, my questionnaire will be coded and my name and address kept separately from it.
2) Any information that I provide will not be made public in any form that could reveal my identity to an outside party, ie. that I will remain fully anonymous.
3) Aggregated results will be used for research purposes and may be reported in scientific and academic journals.
4) Individual results will not be released to any person except at my request or authorisation.
5) That I am free to withdraw my consent at any time during the study in which event my participation in the research study will immediately cease and any information obtained from me will not be used.

Signature: Date:

APPENDIX G

DEAKIN UNIVERSITY HUMAN RESEARCH ETHICS COMMITTEE

CONSENT FORM

I,   of

hereby consent to be a subject of a human research study to be

undertaken by   Andrew McNess

and I understand that the purpose of this research is to examine the
occurrence of social isolation in the lives of bereaved young adults,
and whether gender is a significant contributing factor in the 'types'
of social isolation that bereaved young adults may experience.

I acknowledge

1) That the aims, methods, and anticipated benefits, and possible
   risks/hazards of the research study have been explained to
   me.

2) That I voluntarily and freely give my consent to my
   participation in such research study.

3) I understand that aggregated results will be used for research
   purposes and may be reported in scientific and academic
   journals.

4) Individual results will not be released to any person except at
   my request and on my authorisation.

5) That I am free to withdraw my consent at any time during the
   study, in which event my participation in the research study
   will immediately cease and any information obtained from me
   will not be used.

   Signature: Date:

APPENDIX H

Faculty of Arts
Deakin University
Geelong Vic. 3217
Australia

PLAIN LANGUAGE STATEMENT

Student Name: Andrew McNess

Email Address: a_mcness@hotmail.com

Contact Number: (03) 5227 1479 (day), (03) 5243 6906 (night)

Project Title: Bereaved young adults, social isolation and the
influence of gender.

Supervisor's Name: Dr Elizabeth Eckermann

Supervisor's Location: Deakin University – Waurn Ponds campus

(Room GE62)

Supervisor's Tel. No. 6 13 5227 1026

Supervisor's Fax No. 6 13 5227 2018
Supervisor's E-mail: lizeck@deakin.edu.au

_____

My name is Andrew McNess and I am studying for my Doctorate. A
research project is an important component of the course and I am
undertaking it under the supervision of Dr Elizabeth Eckermann. I invite
you to consider participating in this project, the details of which appear
below.

The aim of the project is two-fold: a) to explore the nature and
characteristics of social isolation that bereaved young adults (aged 18-30)
might experience, and b) to examine whether one's gender produces
different (or similar) experiences of social isolation.

With the term bereavement, I am referring to the death of a sibling. Social
isolation can be more than the bereaved person removing him or herself
from other people. For instance, feelings of isolation may be experienced
when the person keeps feelings of grief to him or herself, covering up
emotions so as not to burden others. Similarly, the person may feel
separate from their peers in terms of what he or she now values in life. I
believe the findings of this research project will be useful in contributing to
knowledge in the area of youth bereavement and gender studies.

As part of the research, I am seeking to interview counsellors, who have counselled young adults who fit the above criteria. A semi-structured interview format would be employed to ask you of your general observations of the nature and/or types of social isolation bereaved young adults can experience and what influence you feel gender has in determining the types of social isolation individuals' experience. Some examples of the types of questions that would be asked are "In your conversations with bereaved young adults, has social isolation emerged as a significant issue in their bereavement experience?" and "Have you observed gender differences in how grief is handled by young adults?" The interview would take approximately an hour of your time, and would be undertaken at a location that was convenient for you.

The interview will be tape-recorded, unless you would prefer otherwise. A number of measures will be taken to ensure your confidentiality should you wish to participate in this research. In the research paper, you will not be referred to by name. Details such as your sex, age range (ie. 45-54), and profession (ie. social worker, cognitive psychologist) will be provided instead. Snippets of the interview, along with a general overview of the themes and issues that emerged in the interview, will be used in the body of the research paper. The interview tapes, interview transcripts and consent forms will be stored in a locked filing cabinet at Deakin University – Waurn Ponds, and access to these is restricted to my supervisor and myself. In line with the university's Code of Good Practice, these materials will be destroyed approximately six years after the research project's completion.

Participation in this research is entirely voluntary, and if you agree to participate, you may withdraw your consent at any time by suspending the interview, or you may decline to participate in any part of the procedure by simply not making a response.

If you would be interested in participating and/or have any queries (or would like to be informed of the overall research findings), please contact me at the above contact details.

Yours sincerely,

ANDREW McNESS

APPENDIX I

QUESTIONS FOR BEREAVED PARTICIPANTS
----

1) Do you feel the bereavement you have experienced has had an effect – positive or negative – on your;

a) ability to concentrate?

b) energy levels?

c) your mood and mood fluctuations?

d) sleep patterns?

In what ways?

If the bereavement *has* had an effect on these factors…has this ever made you feel wary or unsure of how you might cope in social situations, work situations, or with everyday relationships?
Or do you feel you can interact on an equal footing with other people in these situations?

2) Do you believe grief is something you deal with privately? Away from peers, family, work colleagues, etc.?

Or do you believe grief is something you need to share with other people?
Or a combination of privacy and open expression?

If you do feel the need to share, who would you share with?
Why do feel you can share with them?

Who do you feel you cannot share with?
Why do you believe this is so?

3) Since your bereavement have you found that the issues that concern you are significantly different from those concerning your peers? Or have your interests remained similar to those of your peers?

4) Since your bereavement, have you ever deliberately removed yourself from social activities? What types of social activities? For what reasons?

Can social activities provide an "escape" from grief-related experiences? In what sense? To what extent have you felt the necessity to "cover-up" any grief-related feelings in social settings?

5) Based on your own experiences, do you think that it is acceptable for young people to show their grief in our society?

6) Have you ever felt/ perceived that
   a) family
   b) friends
   c) work colleagues
expected you to be 'over' the death?

If yes, how much time had passed since the death?

Has it felt to you that it was too soon to expect you to be getting over it? Or did the expectation have beneficial aspects?

7) Have you had any spiritual and/or religious beliefs that have provided some consolation or comfort since the bereavement occurred?

If yes, what might these beliefs entail?

8) Have you any beliefs – that have emerged from your particular ethnic background – that have provided a particular approach or way of viewing death and dealing with bereavement?

Have they – or have they not – provided some level of personal consolation?

APPENDIX J

EMAIL QUESTIONNAIRE

"BEREAVED YOUNG ADULTS, SOCIAL ISOLATION and the INFLUENCE OF GENDER"

Some general points about answering questions…

o Feel free to refer to specific bereavement-related experiences if you feel they might help illustrate a point you are trying to make (as opposed to "Generally, I found…")

o There is a possibility that while working through the questionnaire, you may find you have answered a question in the context of a previous question *(ie. the themes and issues of question 2 may intersect with the central issues of question 4)*.
Therefore, unless you wish to emphasise a point, please indicate you have covered the topic in an earlier question.

o Your answers can be as long as you feel is necessary; whatever you feel provides a sufficient overview of your experience. A short paragraph – ie. 4-5 lines – would be a sufficient response for a question.

o An example of an answer to a question –
If I was male I probably wouldn't have expressed feelings at all. That's a generalisation. I think that men have less of a desire to talk things through and they're happy to – no, they're conditioned to – keep their own counsel on anything that's going to make them emotional or make them break down. If there is any chance something might make them break down, they're reticent to enter into a discussion. They're not going to be as hurt and infuriated if people will not provide them the room to speak because they're probably not going to speak. They're not going to mind if nobody gives them an opening or cuts them off mid-conversation. Well, not that anyone likes to be cut off, but if the subject matter is cut short, it's not necessarily a problem.

IDENTIFYING INFORMATION

Your age:

Number of siblings in your family
(including yourself and the sibling who died):

Birth order for yourself *(ie. middle child)*:

Birth order of person who died:

Sex of the sibling who died:

The number of years and
months since the death
occurred *(ie. two years, four months)*:

Religious denomination *(if applicable)*:

1) Do you feel the bereavement you have experienced has had an effect – positive or negative – on your;

a) ability to concentrate? (ie. affects reading/working, taking part in conversations)

b) energy levels? (ie. feeling tired during the day)

c) your mood and mood fluctuations?

d) sleep patterns (ie. sleeping less at night , sleeping during the day)

   In what ways?

If the bereavement *has* had an effect on these factors…has this ever made you feel wary or unsure of how you might cope in social situations, work situations, or with everyday relationships?

Or do you feel you can interact on an equal footing with other people in these situations?

2) Do you believe grief (*over the death of a sibling*) **is something you deal with privately? Away from peers, family, work colleagues, etc.?**

Or do you believe grief is something you need to share with other people (*ie. through talking about bereavement-related feelings and experiences, talking about the person who died, crying together*)?

Or a combination of privacy and open expression?

If you do feel the need to share, who would you share with?

For example, family members, close friends, etc.?

Why do feel you can share with them?

Who do you feel you cannot share with?

ie. close friends, peers, work colleagues, immediate family, extended family.

Why do you believe this is so?

3) Since your bereavement have you found that the issues that concern you are significantly different from those concerning your peers *(ie. travelling overseas, employment, money, dating)***?**
Or have your interests remained similar to those of your peers?

4) Since your bereavement, have you ever deliberately removed yourself from social activities? **What types of social activities? For what reasons?**

Can social activities provide an "escape" from grief-related experiences? In what sense? To what extent have you felt the necessity to "cover-up" any grief-related feelings in social settings?

5) Based on your own experiences, do you think that it is acceptable for young people to show their grief in our society?

6) Have you ever felt/ perceived that

    a) family

    b) friends

    c) work colleagues

expected you to be 'over' the death?

If yes, how much time had passed since the death?

Has it felt to you that it was too soon to expect you to be getting over it? Or did the expectation have beneficial aspects?

7) Have you had any spiritual and/or religious beliefs that have provided some consolation or comfort since the bereavement occurred?

If yes, what might these beliefs entail?

8) Have you any beliefs – that have emerged from your particular ethnic background – that have provided a particular approach or way of viewing death and dealing with bereavement?

Have they – or have they not – provided some level of personal consolation?

APPENDIX K

QUESTIONS FOR COUNSELLORS

On the basis of the bereaved siblings you have seen, do you feel that social isolation is a significant symptom of bereavement? Or is it one of many?

In relation to the experiences of bereaved siblings, do you believe there are both positive and negative-types of social isolation? Or does it tend toward the negative?

When social isolation has figured in the day-to-day lives of bereaved young adults, would they believe it had come about due to individual choice or external pressures/difficulties? Or a combination of both?

Have you observed gender differences in relation to how grief is dealt with and experienced? Also, gender differences in the types and nature of social isolation?

What types of social situations are often difficult for a) bereaved young females, b) bereaved young males?

What effect does bereavement tend to have on the social skills of a) females, b) males?

Where social support is commonly found? Within family, peer groups, support organisations, work environments, etc.? In what environments is it often difficult to sustain?

Do bereaved young adults report a post-bereavement alteration in life goals and values?

Do bereaved young adults report a social expectation to "be over" the death sooner than they believe is reasonable?
In what areas of society would they commonly gain that impression?

Do young adults articulate a view about the nature of the society they live in? How compassionate or understanding it can be towards the experiences of bereaved young adults?

Can particular cultural practices or spiritual/religious beliefs be of benefit in terms of helping the individual avoid social isolation or temper the experience of social isolation?

APPENDIX L

*BEREAVED PARTICIPANTS'
IDENTIFYING INFORMATION -*

Age:

Sex: Male / Female

Number of siblings in your family
(including yourself & your sibling who died):

Birth order for yourself (ie. Middle child):

Birth order of person who died:

Sex of the sibling who died: M / F

The number of years and
months since the death
occurred (ie. Two years, four months):

Religious denomination (if applicable):

APPENDIX M

COUNSELLORS'

IDENTIFYING INFORMATION -

Sex: M / F

Age: 25-34   35-44   45-54   55-64   65-74   75+

Job title:

APPENDIX N

BEREAVED PARTICIPANT DETAILS

a) Name, *b)* Age, *c)* Time since death, *d)* Sex of sibling who died,
e) Number of siblings (including participant and sibling who died),
f) Birth order of participant, *g)* Birth order of person who died, *h)*
Religious denomination.

FEMALES

1 a) **BROOKE**   b) 33   c) 9 years, 9 months
d) MALE   e) 3   f) MIDDLE
g) ELDEST   h) ANGLICAN

2 a) **CATRIONA**   b) 27   c) 1 year, 6 months
d) FEMALE   e) 3   f) YOUNGEST
g) MIDDLE   h) *"Spiritual"*

3 a) **DENISE**   b) 28   c) 1 year
d) MALE   e) 2   f) YOUNGEST
g) ELDEST   h) N/A

4 a) **AMELIA**   b) 25   c) 1 year, 8 months
d) MALE   e) 5   f) ELDEST
g) SECOND ELDEST   h) CATHOLIC

5 a) **CHRISTINE**   b) 29   c) 6 years, 11 months
d) MALE   e) 2   f) YOUNGEST
g) ELDEST   h) N/A

6 a) **CLAIRE**   b) 29   c) 6 years, 3 months
d) FEMALE
e) 4 (2 older step-sisters)   f) SECOND YOUNGEST
g) YOUNGEST   h) N/A

7a) **MIRANDA**   b) 20   c) 2 yrs, 1 mth; 2 yrs

d) MALE; FEMALE   e) 3   f) ELDEST; YOUNGEST

g) MIDDLE   h) *"Believe in God, but don't go to church"*

8 a) **REBECCA**   b) 30   c) 4 years, 8 months

d) MALE   e) 3   f) YOUNGEST

g) MIDDLE   h) CATHOLIC

9 a) **SARAH**   b) 31   c) 5years, 9 months

d) MALE   e) 4   f) ELDEST

g) SECOND ELDEST   h) N/A

10 a) **KIRSTEN**   b) 23   c) 5 years

d) MALE   e) 2   f) YOUNGEST

g) ELDEST   h) N/A

11 a) **LISA**   b) 27   c) 9 years, 6 months

d) MALE   e) 3 (including half sister)   f) YOUNGEST

g) MIDDLE CHILD   h) N/A

12 a) **DIANA**   b) 29   c) 10 years

d) MALE   e) 3   f) YOUNGEST

g) ELDEST   h) ANGLICAN

13 a) **ALANA**   b) 27   c) 5 years

d) FEMALE   e) 2   f) ELDEST

g) YOUNGEST   h) N/A

14 a) **ANNA**   b) 31   c) 8 years

d) MALE   e) 3   f) MIDDLE

g) YOUNGEST   h) CATHOLIC / ANGLICAN (on account of

parents' religious backgrounds)

15 a) **VICTORIA**   b) 31   c) 4 years, 7 months

d) FEMALE   e) 3   f) YOUNGEST

g) ELDEST   h) BAPTIST

MALES

1 a) **MARK**   b) 22   c) 2 years
d) FEMALE   e) 3   f) YOUNGEST
g) MIDDLE   h) N/A

2 a) **STEPHEN**   b) 22   c) 2 years, 6 months
d) MALE   e) 7 (including 2 younger half-siblings) f) FOURTH CHILD
g) FOURTH CHILD (identical twin)   h) N/A

3 a) **BRIAN**   b) 24   c) 2 years, 11 months
d) MALE   e) 7   f) FOURTH CHILD
g) YOUNGEST   h) CATHOLIC

4 a) **BEN**   b) 36   c) 6 years, 6 months
d) MALE   e) 2   f) ELDEST
g) YOUNGEST   h) CHRISTIAN

5 a) **JASON**   b) 22   c) 1 year, 1 month
d) MALE   e) 4   f) SECOND CHILD
g) ELDEST   h) N/A

6 a) **WARREN**   b) 27   c) 2 years, 8 months
d) FEMALE   e) 5   f) MIDDLE CHILD
g) ELDEST   h) N/A

7 a) **ROBERT**   b) 32   c) 2 years, 8 months
d) MALE; MALE   e) 3   f) ELDEST; MIDDLE
g) YOUNGEST   h) N/A

8 a) **GRAEME**   b) 27   c) 2 years, 10 months
d) MALE   e) 2   f) ELDEST
g) YOUNGEST   h) N/A

9 a) **ALISTAIR**   b) 27   c) 9 years, 9 months

d) MALE   e) 3   f) YOUNGEST

g) ELDEST   h) ANGLICAN

10 a) **DAVID**   b) 26   c) 2 years, 5 months

d) MALE   e) 2   f) ELDEST

g) YOUNGEST   h) CHRISTIAN

APPENDIX O

COUNSELLOR DETAILS

a) *NAME* **b)** *AGE RANGE* **c)** *JOB TITLE*

1a) JOHN b) 55-64 c) Counselling Psychologist

2a) NICHOLAS b) 35-44 c) Social Worker/Counsellor

3a) JANE b) 55-64 c) Counsellor & Group Training

4a) ELIZABETH b) 55-64 c) Social Worker/Counsellor

5a) TONI b) 45-55 c) Counsellor

6a) LORRAINE b) 45-55 c) Counselling Psychologist

7a) JAMES b) 55-64 c) Counselling Psychologist

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