

INTRAPERSONAL AND INTERPERSONAL MEANING-MAKING:  
THE PROCESS OF IDENTITY RECONSTRUCTION AFTER THE LOSS OF A SPOUSE

BY

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DISSERTATION

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## Abstract

Mourning the loss of a loved one can be a life-altering experience. Grief survivors are at risk for both physical (e.g., decreased sleep and weight) and psychological (e.g., increased depression and anxiety) changes, and symptoms can be short-term or permanent (Parkes, 1998b). Additionally, individuals can also experience significant shifts in their identity after the loss of a close loved one (e.g., Hastings, 2000). Previous research has proposed that reconstructing identity after a major loss is an important element of managing grief. Current scholarship, however, has yet to explore how people deal with shifts in the way they see themselves during grief. Using the context of spousal loss, the goal of this study was to understand how people manage identity changes after bereavement. Utilizing elements from both identity theory (Stryker, 1980) and the meaning reconstruction model of grief (Neimeyer, 2001a, 2001b), this project explored the role of (a) aspects of grief, (b) sense-making and benefit-finding, (c) communication, and (d) identity fractures and role conflicts within identity reconstruction processes after spousal bereavement. Interviews with individuals who had lost a spouse within the last five years before data collection ( $N = 35$ ) were analyzed using grounded theory procedures. The results supported a model of how people made sense of their changing identities following loss. More specifically, survivors underwent a process of reconciling their past and present, which included managing changes to both their personal and social identities. People had to find a way to make sense of the significant changes to how they viewed themselves without the presence of their spouse. Meaning making experiences were interrupted by several stressors and then facilitated through the receipt of social support from others. To reconstruct identity and to reconcile their past and present, individuals utilized six strategies that reduced stressors and built sources of social support. Theoretically, these findings add explanation to how

people reconstruct their identities after bereavement and highlight the importance of communication during grief processes. Practically, these findings offer important strategies for how practitioners, family, and friends can facilitate meaning-making in bereaved individuals following the death of a spouse.

*For Nana, my first editor*

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## Chapter 1: Introduction

Over 2.5 million people pass away every year in the United States (Kochanek, Murphy, Xu, & Tejada-Vera, 2016). On average, each death leaves behind five grieving survivors (Shear, Frank, Houck, & Reynolds, 2005). Mourning the loss of a loved one can be a particularly debilitating experience. Survivors face many challenges including being at risk for anxiety, anger, and depression (Asai et al., 2010), as well as having to make emotional decisions such as how to manage the deceased's belongings (Lang et al., 2011; Saunders, 1981). Additionally, many bereaved individuals undergo changes in identity due to the loss (e.g., Hastings, 2000). For example, after the death of a spouse, wives and husbands are forced to relinquish their spousal role and take on a new widow or widower identity. Parents who lose a child must negotiate a new identity as former or non-parents. Changes in identity can be particularly challenging since identity is the core element of how people understand themselves (Josselson, 1996). Unresolved identity disruptions are associated with higher rates of depression (Jung & Hecht, 2008) and can lead to increased feelings of being misunderstood and decreased levels of communication satisfaction (Jung, 2011; Jung & Hecht, 2004). Unfortunately, most death and dying research has concentrated on elucidating the specific stages and symptoms that accompany grief, and little scholarship exists to understand the impact of identity management processes or how they occur.

*Identity* is an understanding of the self that is negotiated between individuals and their interactional partners (Josselson, 1996). More specifically, identity refers to a person's self-concept that is defined by social roles and enacted in communication encounters (Stryker, 1980). Identity is not only how people see themselves, but also how they perceive they are seen by others (Stryker, 1980). Scholars from multiple disciplines have outlined the dimensions of identity differently, although a few common elements permeate most research. A primary



assumption is that identity is multi-dimensional. Identity can include personal elements such as traits and biographical information (Erikson, 1968), as well as social roles (e.g., Stryker, 1980) and group memberships (e.g., Hecht, Jackson, & Ribeau, 2003; Tajfel & Turner, 1986). Research germane to the communication discipline argues that identity is created and maintained in social interactions (Blumer, 1969; Gudykunst & Lim, 1986; Hecht et al., 2003; Scott, Corman, & Cheney, 1998; Stryker, 1980; Tajfel, 1978). More specifically, identities are performed through communication (Jung & Hecht, 2004). As a result, identity and behavior are intrinsically linked. People will generally act in accordance with the social roles and groups with which they identify (Stryker, 1980). When an identity is lost or removed (like after the death of a spouse), then, people might feel uncertain about how to act. Individuals may no longer be able to enact important parts of their identity without the social partner. The social element of identity means that a person's sense of self is constructed and managed through interactions.

The loss of a loved one can create an identity shift by denying a social relationship required for an identity to be fulfilled. Identities are composed of roles that exist in relation to other people (Stryker, 1980). For example, the role of mother requires someone else to play the role of a child. A spouse can only exist in connection with someone else enacting the marital partner role. After the death of a loved one, some people find that they can no longer continue their current role and its related behaviors. Survivors must make sense of their identities without the ongoing connection to the deceased (e.g., Titus & de Souza, 2011). As a result, individuals simultaneously grieve the loss of their loved one while also grieving the loss of their identity (Hastings, 2000). Individuals may also be forced to take on new roles (e.g., widow or widower) while attempting to make sense of their changing identity. These various identity changes can lead to inconsistencies in a person's self-concept whenever that person is unwilling to give up or

accept a role (Titus & de Souza, 2011). Additionally, the death can cause further role-related stressors due to the loss of roles performed by the deceased, adding to the already numerous stressors inherent in the grief experience (e.g., making funeral arrangements or finding meaning in the loss; Neimeyer, 2002). As an example, widows may be forced to take on the roles that were performed by the deceased husband. Even simple daily tasks such as balancing finances, driving, or cooking must now be completed by the surviving partner. Widows might need to alter their identities to make sense of these new responsibilities. The bereaved may also experience the loss of future identities since specific goals and plans that might have been in place are no longer possible without the deceased (Haase & Johnstone, 2012). Not only do grieving individuals lose an important family member, but they also lose a part of how they understood themselves.

*Grief* is the psychological and emotional reaction to loss (Cutcliffe, 2002; Weiss, 2008). Although grief can occur in response to any type of loss (e.g., job loss, physical losses, or relational losses), it is generally used interchangeably with the term *bereavement*, or the death of a loved one (Cutcliffe, 2002; Weiss, 2008). Additionally, grief is a relational process. People mourn the loss of an important interpersonal relationship within their close support networks (Rosenblatt, 2012; Traylor, Hayslip, Kaminski, & York, 2003). Within a group, such as a family, each person's reaction to the loss affects the others. How individuals respond to others' grief expressions influences upcoming communication encounters, as well as how people mourn in the future. In particular, supportive communication during bereavement facilitates coping by providing emotional validation for the bereaved (Kubler-Ross & Kessler, 2005). Evidence suggests that strong social support can help individuals manage loss and may be associated with a decrease in depressive symptoms (Ogrodniczuk, 2007; Traylor et al., 2003). In particular,

family members are often the most important sources of support since their proximity to the event allows them to share a better understanding of the loss (Kaunonen, Tarkka, Paunonen, & Laipala, 1999). Families commonly grieve together and offer each other support (Golish & Powell, 2003). In fact, a shared loss can actually strengthen family bonds. For example, families who are highly cohesive and expressive of emotions after a loss have greater feelings of closeness with each other (Nelson & Frantz, 1996). Furthermore, support systems offer other useful types of care such as tangible aid (e.g., cleaning or making meals; Toller, 2011), thus providing additional help to the bereaved.

Communication is clearly an important aspect of both identity management and grieving processes. Mourning individuals simultaneously manage their identities and their grief in their social encounters. Although scholars have concluded that bereaved parents use communication to enact new identities (Toller, 2008) and that communication from others can help to support damaged parental identities (Giannini, 2011), several gaps still exist in the grief and identity literatures. First, limited research has addressed how people adjust to new roles after the loss of a loved one. Identity change is an important element of most grief models (e.g., Neimeyer, 2001b; Worden, 2008), but empirical work has not examined how the process occurs. Understanding identity management after bereavement is imperative for adding depth to grief theories and our knowledge of the changes caused by loss. Second, little scholarship has attempted to elucidate the connection between identity and communication during bereavement. Since both grief and identity management are relational, interactive processes, it is likely that communication plays a unique role in how people are able to make sense of themselves after loss. Understanding the role of communication during identity management processes is important for clarifying how others influence grief. Finally, since changes to identity during bereavement are common and

can dramatically impede a person's ability to cope (Brierley-Jones, Crawley, Lomax, & Ayers, 2014), understanding what issues play a role in identity management processes after loss is essential. Grief experiences are impacted by a number of factors including gender (e.g., Hayslip, Pruett, & Caballero, 2015), age (e.g., Parkes, 1998a), the relationship to the deceased (e.g., Parkes, 1998a; Rubin, Malkinson, & Witztum, 2003; Stroebe & Schut, 2001a), social support (e.g., Stroebe & Schut, 2001c), and conditions of the death (e.g., Parkes, 1998a). It is likely that several aspects of grief play a vital role in how people manage identity changes following bereavement. My dissertation project attempts to address these major gaps by investigating the identity management processes after the death of a spouse.

Findings from my study help to extend grief research by adding to our understanding of the interpersonal nature of grief. Early grief scholars focused on bereavement as something that was primarily personal and cognitive (e.g., Freud, 1917/1997). More recently, however, researchers have acknowledged that grief is a social process influenced by interactions with others. For example, family members can alleviate or exacerbate grief emotions by reacting in different ways (Golish & Powell, 2003; Nelson & Frantz, 1996). My project helps to add to our knowledge of how people grieve relationally by examining how friends and family members influence the identity-specific elements of the grieving process. Additionally, my results also support identity scholarship by examining how people manage a context where social roles are forcibly removed. Theories of identity focus on the basics of how people come to understand themselves by interacting with others (e.g., Hecht et al., 2003; Stryker, 1980). Research, however, has not yet clarified what happens when people suddenly can no longer enact a role to identify themselves. Examining how people reorganize after loss is important for understanding

how people overcome major shifts in identity. My project attempts to study how people manage changes in identity by examining a context where role losses are common.

Extending knowledge on grief and identity processes is also vital for offering practical recommendations for family, friends, and grief practitioners. Often, social network members struggle to offer helpful support to grieving loved ones and instead rely on inadequate cultural scripts (Basinger & Wehrman, 2016). Negative interactions with others can further complicate grieving experiences (Hastings, 2000; Toller, 2008). My dissertation study seeks to add to scholars' knowledge of how others influence the grief process in constructive and non-constructive ways. Findings from my project aid how families, friends, and others manage communicating about loss. Practitioners can use this information to design effective social programs and therapies to improve outcomes for individuals managing grief.

This project is situated within theoretical frameworks from both grief and identity literatures. To illustrate the complex and social nature of how people manage loss, this dissertation recognizes the influence of concepts from the meaning reconstruction model of grief (Neimeyer, 2001a, 2001b). According to the model, grief refers to the process by which individuals try to make sense of and find benefits in the loss of a close loved one, while also undergoing changes to their identity (Neimeyer, 2001a, 2001b). The meaning reconstruction model is useful for framing grief as unique and intricate. Second, elements from Stryker's (1980) identity theory help to conceptualize identity, including a person's identity after loss, as a composite of the various social roles people enact during communication encounters. Identity theory argues that identity management processes are socially performed. As a result, interactional partners can impact how other people construct their identities (Stryker, 1980).

Individuals managing identity after loss, then, might have to reinterpret themselves through conversations with their social groups.

My objective in this dissertation is to examine how people manage their sense of self after bereavement by interviewing individuals who have recently experienced the loss of a spouse. To explore my objective, in the following chapters I outline my dissertation project. In Chapter 2, I review relevant research on grief and identity and outline the theoretical literatures that frame my study. In Chapter 3, I describe the methods I used to examine identity in the context of grief. Chapter 4 includes an in-depth description of my findings, including a visual of the model and exemplar quotes. Finally, in Chapter 5, I discuss the theoretical and practical implications of my results.

## **Chapter 2: Literature Review**

Bereavement is a complicated and personal experience. Scholars have attempted to explicate the process of grief by identifying specific and universal trajectories, but more recent work has acknowledged an array of normal grief reactions. Nearly all bereavement models, however, acknowledge identity change as a primary component of most grief experiences (e.g., Kubler-Ross & Kessler, 2005; Neimeyer, 2001a; Worden, 2008). Shifts in identity are common after a variety of losses including injuries (e.g., Beadle, Ownsworth, Fleming, & Shum, 2016), health diagnoses (e.g., Majeed-Ariss, Jackson, Knapp, & Cheater, 2015), and, of course, deaths of loved ones (e.g., Worden, 2008). Life-altering events force individuals to make sense of themselves in new ways. People may alter their identities by eliminating some roles while taking on new roles (Parkes, 1998a). Grief survivors not only mourn in a social context but also manage their changing identities within interactions. Despite the normative nature of identity transitions during bereavement, limited theoretical research has examined how people manage changes to their sense of self after loss. In the following sections, I review literature relevant to identity management during grief, emphasizing spousal loss. First, I describe the complex elements of the grieving process, particularly the components that influence identity. Second, I outline influential theories from both the grief and identity literatures and then highlight the applicability of two primary theoretical frameworks for studying identity changes after loss.

### **Grieving the Loss of a Loved one**

Grief includes both cognitive and behavioral components (Cutcliffe, 2002). Since most individuals will experience the death of a loved one at some point during their lifetime (Ringler & Hayden, 2000), scholars have been interested in mapping out the processes and outcomes of grief particular to bereavement (e.g., Kübler-Ross, 1969). The resulting theories have

conceptualized grief in various ways, ranging from specific stage theories (e.g., Kübler-Ross, 1969) to broad meaning reconstruction models (e.g., Neimeyer, 2001b). Although early researchers focused on explicating the symptoms indicative of grief, more recent scholars have acknowledged grief as a complex, individualized process (Neimeyer, 2006b). To understand bereavement and its influence on individuals, the following sections are broken into three overarching categories: the grief process, the effects of grief, and grief factors.

**The grief process.** Models of grief diverge on how grief progresses, but each suggests that mourning is a lengthy process that changes over time. Grief may begin before the death of a loved one, as in the case of anticipatory grief during serious illness (e.g., Bouchal, Rallison, Moules, & Sinclair, 2015), or may begin the moment a person discovers news of the loss (Kübler-Ross & Kessler, 2005). Grief emotions are the most intense after an initial period of shock, and then decrease over time (Bonanno & Kaltman, 2001). The “end” of grief is ambiguous. Some scholars focus on resolution or acceptance as the conclusion of grief (Kübler-Ross & Kessler, 2005), although evidence suggests that many individuals may continuously or periodically grieve for extended periods or for the remainder of their lives without negative consequences (e.g., Sanger, 2009). The following sections outline the process of grief from initial responses to later progressions.

**Initial responses to loss.** Initial grief reactions include emotional, psychological, physiological, and behavioral changes. Emotionally, individuals may experience painful and difficult feelings (e.g., Worden, 2008). Some individuals experience shock or numbness, which help to block the emotional suffering for a short period of time. Others react with immediate feelings of sadness or episodes of depression (Bowlby & Parkes, 1970; Kübler-Ross & Kessler, 2005). Aggressive responses are common and can include feelings of anger, rage, resentment, or



even envy (Kübler-Ross, 1969). People sometimes feel hostility towards themselves or the person who died when attempting to determine blame for the loss (Kübler-Ross & Kessler, 2005). Other normal emotions include intense anxiety, guilt, and loneliness (Lindemann, 1944; Parkes, 1998b; Worden, 2008). Emotional pain generally recedes over time, but some emotions and cognitive experiences may continue throughout bereavement (e.g., sadness; Kübler-Ross & Kessler, 2005).

Psychologically, the recently bereaved sometimes also become preoccupied with memories of the deceased (Freud, 1917/1997; Lindemann, 1944; Tay et al., 2016). Survivors commonly question how they could have stopped the death and generally yearn for the return of the individual (Kho, Kane, Priddis, & Hudson, 2015; Lindemann, 1944; Parkes, 1998b). In some circumstances, people report being able to sense the continued presence of the deceased. Visual and verbal hallucinations of the loved one can occur throughout the grieving experience (Parkes, 1998a, 1998b; Worden, 2008). Overall, general happiness levels decrease following bereavement (Parkes, 1998b).

Physically, individuals report changes to their health and well-being following bereavement. Symptoms can manifest in unique ways including declines in mental concentration, appetite, sleep, and weight (Freeman & Ward, 1998; McCabe & Christopher, 2016; Parkes, 1998b). Additionally, some people experience physical pain including throat tightness, muscle fatigue, and even digestive pains (Lindemann, 1944; Patrick & Henrie, 2016). Individuals commonly experience physical and physiological symptoms alongside other psychological reactions (Parkes, 1998b).

Behaviorally, individuals may also act differently when processing the initial shock of loss. For example, crying is a common grief behavior (Waldrop, 2007). Additionally, survivors

might withdrawal from social situations (Bowlby & Parkes, 1970; Hanschmidt, Lehnig, Riedel-Heller, & Kersting, 2016) or even act hostile towards others (Kübler-Ross & Kessler, 2005; Lindemann, 1944). Once individuals move beyond the shock of loss, they might enact new roles to compensate for the lost relational partner (Parkes, 1998a), communicate directly with the deceased (Ho, Chan, Ma, & Fields, 2013), or share memories of the loved one with others (Klass, Silverman, & Nickman, 1996). Negative behaviors are also common initially and include actions such as avoiding reminders of the deceased, overly idealizing or criticizing the deceased, or using drugs and alcohol (Worden, 2008). The various reactions to grief illustrate how bereavement experiences are diverse and idiosyncratic.

***Progressing through grief.*** Initial reactions to loss begin to diminish over time to make way for later grief experiences. New emotions, goals, and behaviors might develop (e.g., meaning reconstruction; Neimeyer, 2002), which can be unique among different individuals. To understand the grieving process, two major perspectives have emerged to explain what people go through after the loss of loved one. One perspective describes grief as a series of identifiable stages with specific symptoms, whereas the other viewpoint conceptualizes grief as an individualized process of making meaning. Both perspectives emphasize the need for individuals to successfully orient to painful and challenging changes but diverge on how people progress through the grief experience.

The first perspective argues that individuals advance through predictable stages and phases after the death of a loved one. The terms *stage* and *phase* are used interchangeably by bereavement scholars and refer to a series of distinguishable periods during grief (Rutjens, van Harreveld, van der Pligt, Kreemers, & Noordewier, 2013). Researchers advocating these models conceptualize bereavement as a temporary status or illness. Individuals must engage in grief

work to return to pre-loss levels of functioning. Grief work includes completing tasks and processing emotions to accept and move on from the loss (Freud, 1917/1997; Parkes, 1998b). Each phase advances the person closer towards completing grief.

Stages are defined by specific emotions and behaviors that people must work through before being able to accept the loss and return to normal. Kübler-Ross and Kessler (2005) outlined five general stages, which built on work from early grief scholars including Freud (1917/1997), Lindemann (1944), and Bowlby and Parkes (1970). Individuals begin with the first stage, denial, when they refuse to acknowledge the reality of the death. Denial turns into later stages of anger, bargaining, and depression. After successfully navigating the first four emotional stages, people generally move to the final stage of acceptance. Most scholars argue that acceptance is accomplished by breaking or redefining the attachment between the survivor and the deceased and “moving on” from the loss (Freud, 1917/1997; McCabe, 2003). Although stage models suggest a specific linear order to grief experiences, recent updates have suggested that people sometimes skip or repeat phases (Kübler-Ross & Kessler, 2005).

A second perspective of bereavement describes grief as a personalized process. Scholars forgo stage explanations in favor of recognizing the wide range of normal grief experiences. Evidence suggests that grief trajectories vary widely in terms of symptoms and outcomes (e.g., Lotterman, Bonanno, & Galatzer, 2014; Maccallum, Galatzer, Bonanno, 2015). As such, alternative models focus on explaining bereavement as a period of meaning reconstruction and continuing bonds with the deceased (Holland & Neimeyer, 2010; Neimeyer, 1999, 2002). The loss of a loved friend or family member can disrupt the way people view themselves and the world. As a result, grief is a period of finding significance in the loss and rebuilding self and relational narratives (Neimeyer, 2002). End goals are not to accept the loss, but to adjust to life

without the loved one. Grief involves coping with the death itself and managing related stressors (Stroebe & Schut, 1999).

Personalized grief models suggest specific tasks or coping goals that people generally complete throughout loss. For example, people may need to work through the pain of loss and form a new relationship with the loved one (Worden, 2008). Additionally, people may oscillate between grieving and managing other life crises (Stroebe & Schut, 1999). Tasks help people to slowly make sense of and cope with the death. Essentially, grief occurs when people react to the changes caused by loss. Individuals begin to make sense of their new lives and their new relationship with the deceased. Experiences of denial, anger, bargaining, depression, and acceptance might exist, but will not occur in specific stages (Neimeyer, 2002; Stroebe & Schut, 1999; Worden, 2004). Instead, people can experience any kind of emotional, cognitive, or physical responses at any point during the grief process. Elements of grief might never end for many people, but symptoms might diminish once a person is able to understand the loss (Neimeyer, 2002).

**The effects of grief.** The loss of a loved one can cause major changes in the lives of survivors. In particular, grief is associated with declines in psychological health. Compared to non-bereaved samples, survivors experience lower self-esteem as well as greater emotional distress and more loneliness (Lund & Caserta, 2002; Van Baarsen, 2002). Grief can also influence mental health issues. For example, family members bereaved through suicide have an increased risk of also committing self-harm (Agerbo, 2005). Bereaved samples consistently rank higher on rates of depression, although levels tend to decline over time (Carr, Sonnega, Nesse, & House, 2014). Similarly, survivors of violent deaths often experience post-traumatic stress disorder (PTSD; Murphy, Johnson, & Chung, 2003). Other thought processes may be impaired

when grief emotions are high. For example, decision-making abilities are greatly diminished during periods of mourning (Fernandez-Alcantara et al., 2016).

Health complications are also common in the weeks and months following loss. Bereaved individuals, especially widows and widowers, experience higher rates of illness, disability, and health complications than their non-bereaved peers (Hughes & Waite, 2009; Stroebe, Schut, & Stroebe, 2007). Since the late 1950s, health professionals have documented a ‘widowhood effect’ where bereaved spouses experience increased mortality rates in the months after bereavement (e.g., Kraus & Lilienfeld, 1959; Manor & Eisenbach, 2003; Moon, Kondo, Glymour, & Subramanian, 2011; Shor et al., 2012; Sullivan & Fenelon, 2014). For individuals who suffer from prolonged or overly distressing grief, commonly referred to as *complicated grief*, mental and physical health issues are significantly amplified (O’Conner & Arizmendi, 2014). For most individuals, however, the influence of grief on health outcomes tends to diminish over time.

For widows and widowers, the death of a spouse can also affect the amount of resources available. A major element of conjugal bereavement (i.e., spousal death) is the simultaneous loss of both the partner and the partner’s roles. Individuals must balance their grief for the loved one while also balancing taking on additional chores and responsibilities (Stroebe & Schut, 2010). Widows and widowers frequently suffer from a reduced socioeconomic status due to funeral and related expenses, which is exacerbated by the additional loss of the spouse’s income (Angel, Jimenez, & Angel, 2007; Ghesquiere et al., 2016; Weaver, 2010; Wilmoth & Koso, 2002; Zick & Holden, 2000). Furthermore, bereavement reduces social and emotional resources. In marital dyads, spouses are frequently a major source of support for each other. Bereavement removes a primary confidant, which means widows and widowers must search for support elsewhere

(Donnelly & Hinterlong, 2009; Ha, 2008). Emotional resources and support are major components of healthy grieving, but research on support after loss is inconsistent. For some individuals, support increases during grief. Many bereaved spouses experience greater contact from children, friends, and relatives (Ha, 2008; Stelle & Uchida, 2004). Research suggests that although support initially increases in the days after loss, it decreases gradually over several months (Guiaux, van Tilburg, van Groenou, 2007; O'Connor & Barrera, 2014). Conversely, other findings suggest that survivors generally receive less support from others than desired and, in some instances, they lose some of their social relationships (Breen & O'Connor, 2011; Pinquart, 2003; Van Baarsen, 2002). In general, regardless of levels of support, bereaved spouses report feeling much lonelier after loss (Pinquart, 2003).

Alternatively, grief can also elicit positive individual and relational changes. Survivors claim a greater appreciation for life and increased self-confidence after the loss of a loved one (Frantz, Trolley, & Farrell, 1998; Oltjenbruns, 1991). The process of managing grief can allow people to realize their self-worth and see the positives within personal changes (Calhoun, Tedeschi, Cann, & Hanks, 2010). For example, some people may notice their emotional strength appears to be greater after undergoing bereavement (Oltjenbruns, 1991). Grief can reinforce relational bonds, as well. Individuals report feeling closer to their families and others after the loss of a loved one (Frantz et al., 1998; Oltjenbruns, 1991). In general, grief can highlight the importance of personal and relational changes (Calhoun et al., 2010).

***Changes to identity during grief.*** Bereavement also affects the identities of survivors. During the grief process, people realize that life can no longer continue in the same way without the loved one. Relationships, tasks, and roles involving the deceased must be renegotiated within a new familial context. More specifically, people must adjust how they define and understand

themselves without the loved one (e.g., Hibberd, 2013; Zheng & Lawson, 2015). Whereas early grief scholars argued that survivors must sever the relationship with the deceased to move on (e.g., Freud, 1917/1957; Lindemann, 1944), more recent work has discovered that the relationship is simply transformed (Holland & Neimeyer, 2010; Neimeyer, 1999, 2002; Saito, 2014). Individuals adjust their lives and their environments to compensate for the removal of the family member. Specifically, people must reorganize their identities and relationships so that they no longer include the same connection to the loved one (Kübler-Ross & Kessler, 2005; Lindemann, 1944; Neimeyer, 2001a, 2006b; Stroebe & Schut, 1999; Worden, 2008). Whether the attachment is severed or altered, the goal for grief is to allow the survivor to move on with life without being impeded by the relational identity (Worden, 2008).

Identity can change in various ways after loss. External and internal adjustments force individuals to manage new identities and accompanying roles (Damianakis & Marziali, 2012; Naef, Ward, Mahrer-Imhof, & Grande, 2013; Wilson & Supiano, 2011; Worden, 2008). *External* adjustments include changes in the daily lives of the bereaved. More specifically, people must adjust to the loss of all the roles the deceased enacted. For example, bereaved spouses might have to take on additional roles or learn new skills to adapt to living alone (Stroebe & Schut, 1999). A newly bereaved spouse may have to enact roles, such as breadwinner or financial manager, which were originally completed by the deceased partner. Families manage vacant roles by allowing them to go unfilled, by allowing someone else to take on the role, or by ending the familial relationship to avoid the role (Parkes, 1998a). As a result, individuals' identities are influenced by taking on new roles or abandoning old ones.

*Internal* adjustments refer to how people must redefine who they are without the loved one. Individuals alter their identities to no longer include the connection to the deceased. For

example, widows report transforming their identity from being a part of a couple to being a single person (Haase & Johnston, 2012). Both Naef et al. (2013) and Saito (2014) found that individuals had to adjust to life as widows or widowers after the loss of their spouse. Similarly, bereaved parents deal with a nameless role and must make sense of themselves without the parental identity (Brierley-Jones et al., 2014; Giannini, 2011; Hastings, 2000). For individuals whose identity and self-esteem are tied directly to a membership dyad, the loss of the partnership can be particularly difficult and may require extensive change (O'Connor & Barrera, 2014; Worden, 2008). Other identity changes, especially if the death was expected, may be less severe.

Individuals make sense of their identity and their grief within social contexts. Although some scholars have focused primarily on intrapersonal elements of each construct (e.g., Erikson, 1968; Freud, 1917/1957), researchers have recognized that both identity and grief are negotiated in interpersonal relationships (Hayslip & Page, 2013; Stroebe, 2010; Stryker, 1980). People grieve and, in doing so, elicit responses from individuals in their social networks (e.g., family and friends; Titus & de Sousa, 2011). Responses directly impact grieving behaviors and outcomes. For example, the way parents grieve affects how their children enact mourning behaviors (Ryckoff & Perlesz, 2001; Silverman & Silverman, 1979). Similarly, people negotiate their identities in social contexts. Identity may include personality traits, social roles, or group memberships (Blumer, 1969; Gudykunst & Lim, 1986; Hecht et al., 2003; Stryker, 1980; Tajfel, 1978). Individuals portray identity by acting in specific ways during communication exchanges. Responses from interactional partners then affect how people continue to view themselves (Jung & Hecht, 2004; Stryker, 1980, 2002). For example, others can reinforce a person's role as a comedian by laughing at jokes. Since both identity and grief are negotiated through communication, friends and family members likely influence how people manage their identities



after loss. Currently, however, little research has explicitly examined how identity is influenced by communication during grief.

Bereavement can lead to identity fractures. A fracture occurs whenever there is a split in a person's identity. Splits force individuals to occupy two incongruous identities simultaneously (Hastings, 2000; Scarduzio & Geist-Martin, 2008; Wainwright, Williams, & Turner, 2005). For example, parents who have lost a child sometimes experience a fracture due to the loss of their parental identity (Hastings, 2000). A split occurs since the parents occupy two conflicting roles as both parents and non-parents at the same time. Fractures are common in ambiguous situations where people have difficulty making sense of themselves. For example, bereaved spouses may experience a tension between being both a spouse and a widow or widower (Saunders, 1981). Events can disrupt identity by challenging how people think about themselves. Until individuals can negotiate how experiences fit into their personal narratives of self, the identity fracture may continue. A lingering identity fracture can be distressing, especially during grief (Hastings, 2000). Research suggests that interrupted identities might negatively influence how well people cope with bereavement (Brierley-Jones et al., 2014). Understanding identity's role in bereavement more clearly might provide scholars a better idea of how to mitigate stressful grief experiences. When individuals are unable to make sense of their new roles, relationships, and sense of self, they may be more likely to experience negative grief symptoms (Parkes, 1998a).

**Factors of grief.** Individual qualities, relational characteristics, aspects of the death, and interactions with other people can all affect how individuals react to the loss of a loved one. Some of these factors help people to manage grief, whereas others make mourning more difficult. Currently, no research has examined what variables specifically influence identity-related elements of grieving. Since identity is a major part of the grieving process, however, it is

likely that these factors might also influence identity outcomes. In the following sections, I outline variables that are established (a) before, (b) during, and (c) after loss that impact grief experiences, particularly emphasizing factors that might also influence identity.

***Variables before loss.*** Individual and relational variables that exist before grief can affect how a person manages later bereavement. Several of these variables might additionally influence identity changes during loss. *Sex and gender* may play a unique role in dealing with grief. Hayslip et al. (2015) found that women had more difficulty adjusting to the loss of a parent compared to men. Similarly, Meshot and Leitner (1993) concluded that women had higher scores of negative grief symptoms (e.g., intrusive thoughts and avoidance behaviors) that worsened over time following the loss of a loved one, and Neria et al. (2007) found that mothers experienced more negative grief outcomes than fathers after the death of a child. Parkes (1998a), however, argued that although women report more psychological effects, men actually experience increased mortality rates after the loss of a marital partner. As such, it is possible that a combination of other factors explains the majority of gender-related variance (e.g., social expectations; Creighton, Oliffe, Butterwick, & Saewyc, 2013). Since social roles are often associated with specific genders (e.g., wife, mother), men and women might also experience identity changes in different ways after loss (Doka & Martin, 2010). For example, Simon (1992) found that mothers experience more parental identity distress than fathers since they have more social commitment to the role. Roles more centrally associated with sex and gender roles (e.g., parental roles) might be more difficult to manage when lost.

*An accumulation of stressors* can also inhibit coping with grief and identity changes. The death of a loved one can be an additional stressor that exacerbates other problems. Issues can include people's history of losses (e.g., unemployment, financial losses, or homelessness), as

well as existing mental health problems (e.g., depression or anxiety). A person not only loses the loved one but also the roles the deceased enacted, money (e.g., funeral expenses), friends, and shared activities (Kübler-Ross & Kessler, 2005; Parkes, 1998a). Older adults face aging related losses as well (e.g., less muscle functioning or illness; Rycroft & Perlesz, 2001). When stressors pile up, grief can be harder to manage. Individuals who experience more issues report worse grief symptoms (Gamino, Sewell, & Esterling, 1998). People diagnosed with depression before loss are forced to cope simultaneously with both grief and the illness, which can complicate coping processes (Bruinsma, Tiemeier, Hemst, Van der Heide, & Rietiens, 2015). The combination of stressors can make it harder to manage death and might influence how well a person is able to undertake new roles or make sense of their adjusted identity.

The *relationship with the deceased* also affects a person's ability to cope. Individuals who were closer to the deceased tend to experience worse grief outcomes since they require more reorganization due to the loss of the relationship (Parkes, 1998a; Rubin et al., 2003; Stroebe & Schut, 2001a). Identity is likely also impacted by how close the connection was since individuals who are more deeply invested in a relationship have more difficulty making sense of changes caused by the loss (O'Connor & Barrera, 2014; Worden, 2008). First-degree relatives (i.e., parents, siblings, grandparents, aunts/uncles) are more likely to suffer from grief symptoms (especially negative symptoms) than other relatives (Mitchell, Kim, Prigerson, & Mortimer-Stephens, 2004; Neria et al., 2007). Klass (1988) argued that the loss of a child is possibly the most difficult kind of bereavement since the parent-child relationship is often very close and the death is considered untimely. As a result, identity change for parents can be very difficult (Hastings, 2000). Furthermore, the climate of the relationship before death may also impact grief. Gamino et al. (1998) found that individuals who experienced a troubled relationship with a

recently deceased loved one reported more grieving difficulties than people who experienced a peaceful relationship. Individuals who are less close to deceased family member might not undergo as much identity change after loss. Characteristics of the relationships may influence how well people are able to make sense of themselves without the loved one.

Furthermore, spiritual resources can affect how people manage loss. *Religiosity* or *spirituality* can provide people with the framework to comprehend death more easily (Stroebe & Schut, 2001b). Bereavement often reinforces religious identity, which helps people to understand and manage the loss (Johnson, 2014). Religious beliefs, however, can be either beneficial or detrimental to coping, depending on the affective stance. People with positive religious beliefs (e.g., loss as going to heaven or a better fate) and strong connections to God tend to have lower levels of depression as well as lower levels of grief (Kelley & Chan, 2012). Negative religious beliefs (e.g., loss as punishment or God's wrath), on the other hand, can actually inhibit grieving (e.g., Jacobsen, Zhang, Block, Maciejewski, & Prigerson, 2010; Lee, 2016). Gamino et al. (1998) found that individuals reported faith and church communities as particularly helpful with dealing with grief. As such, it is possible that religious identities, especially those reinforced by spiritual communities, might help people to make sense out of a loss. Religion might assist or inhibit how individuals reorganize their identities after loss by providing a framework of values and beliefs (e.g., Hogg, Adelman, & Blagg, 2010).

***Aspects of the loss.*** Specific aspects of the loss can influence how well people are able to cope. The *sudden* nature of death can be a particularly burdensome hurdle for those dealing with grief and identity changes. Individuals who are able to reach acceptance before the loss of a loved one report more resilience after the death (Bonanno et al., 2002). It might be possible that deaths that are less sudden give people more time to adjust their changing identities. Suddenness

relates to the age of the deceased (Parkes, 1998a). When elderly loved ones die, coping is easier since the natural life course is not disrupted (Davis & Nolen-Hoeksema, 2001). Deaths of older individuals are generally less unexpected due to their age. When children and young people die, however, friends and family members might have more difficulty accepting the loss. Gamino et al. (1998) found that the age of the deceased was negatively correlated with the amount of negative grief survivors experienced. The age of the griever might also play a role in the impact of the loss (Parkes, 1998a). Hayslip et al. (2015) found that young adults were impacted more than middle-aged individuals by the death of a parent. Similarly, Meshot and Leitner (1993) concluded that young adults had higher levels of shock, disbelief, and a sense of loss than older groups who had also lost a parent. A third factor related to suddenness might be the length of the relationship. Shorter relationships are more likely to be composed of younger partners, and thus death might be less expected (Middleton, Raphael, Burnett, & Martinek, 1998; Parkes & Weiss, 1983). At the same time, however, older individuals may be more likely to be set in their roles, which might make grief and identity changes more difficult (Middleton et al., 1998). Such findings suggest that when deaths are sudden or unexpected, individuals have a harder time coping. Conversely, when individuals have high levels of acceptance before a dying loved one passes, they experience lower levels of complicated grief and depression, as well as greater personal growth (Metzger & Gray, 2008).

The *cause of the death* can also affect bereavement. In particular, individuals cope easier with losses triggered by natural causes compared to traumatic circumstances. Parkes (1998a) argued that unexpected, traumatic, or stigmatized losses (e.g., murder or suicide) are the most difficult causes of death to manage and might result in unique grief experiences. Similarly, Hibberd, Elwood, and Galovski (2010) suggested that deaths by homicide, suicide, and accidents

impact the grief process in negative ways. Some scholars even argue that traumatic grief is a unique syndrome (Prigerson et al., 1999). When details of the loss emerge and suggest that the person suffered painful or horrific circumstances, survivors are generally less able to cope. For example, individuals grieving homicides, suicides, and traumatic deaths are more likely to have negative grief symptoms than individuals who are bereaved by natural deaths (Parris, 2012). When elements of the loss are shrouded in uncertainty, individuals seek closure, often to no avail (Powell & Matthys, 2013). Identities are additionally impacted by traumatic circumstances since suicide or homicide are stigmatized losses. The stigma commonly extends towards the loved ones, preventing normal expressions of grief (Silvén Hagström, 2014). Bereaved individuals may find certain types of losses more difficult to cope with and adjust to than others.

*Ambiguous loss* can also influence grief and identity. Ambiguous loss occurs when there are lingering uncertainties regarding a loved one's status. A person may be lost or assumed dead, but without verification of death, loved ones will lack the ability to achieve closure over a lifetime (Boss, 1999). Survivors may experience ongoing or even life-long grief since resolution may not be possible (Boss, 1999, 2013). Compared to other forms of life-long grief, however, ambiguous loss is not considered abnormal or complicated grieving (Hollander, 2004).

Individuals face uncertainty regarding the loved one, who may or may not actually be dead. Identity might be difficult to change in ambiguous loss situations since closure remains open-ended. Boss and Carnes (2012) suggest that people can still work through ambiguous loss by finding meaning even in the uncertainty. It is likely that identity processes are unique for ambiguous losses.

*Variables after loss.* Coping and identity change are also influenced by a primary factor after loss: the availability of *social support*. Kübler-Ross and Kessler (2005) argued that

individuals thrive when they are able to share their loss with others who validate and listen. Supportive conversations allow people to confirm that the loss mattered and to begin revising their identities. Social support is especially important for families dealing with invisible or unclear losses. For example, couples who deal with premature babies often grieve the loss of a normal birth experience; however, these individuals are able to cope through reassurance from friends and families that their loss was real and important (Golish & Powell, 2003). Positive social support predicts healthier recovery (King, Taft, King, Hammond, & Stone, 2006; Stroebe & Schut, 2001c), and allows individuals to manage their grief more easily and reconstruct their identities more effectively (Powell & Matthys, 2013; Titus & de Souza, 2011).

Grieving individuals report that social support from friends, family, and support groups is a key element for coping with loss (Gamino et al., 1998). For example, peers and parents are the best sources of support for adolescents after the death of a friend (Ringler & Hayden, 2000). Additionally, Hayslip et al. (2015) found that married couples managed the death of a parent better than non-married individuals, suggesting that marriage is a significant source of social support. Aside from close family members, individuals report that a significant source of social support includes people who share a similar experience (Basinger & Wehrman, 2016; Kaunonen, et al., 1999; Ogrodnickzuk, 2007). In fact, practitioners consider a lack of family support as a risk factor towards complicated or maladaptive grief (Parkes, 1998a).

Support from close relationships helps to improve grief outcomes and facilitate identity change (King et al., 2006; Ogrodnickzuk, 2007). Ha and Ingersoll-Dayton (2011) found that frequency of social support is not as important as congruence between preferred and actual contact. Individuals who received as much support as they desired had less psychological distress, anger, and intrusive thoughts than people who wanted more support than they received.

Effective social support is related to fewer depressive symptoms (Newsom, Prierson, & Schulz, 2003; Stroebe, Stroebe, Schut, & Abakoumkin, 1996), a decreased likelihood of prolonged grief (Vanderwerker & Prigerson, 2003), and healthier recovery (King et al., 2006; Stroebe & Schut, 2001c). Social support can also be helpful to families needing other types of assistance. Parents who have lost a child report that the most helpful support came in forms of tangible aid (e.g., making meals), emotional support, and network support (Toller, 2011). Social support is especially important for helping others to reconstruct fractured identities caused by loss (Giannini, 2011). Friends and family members can support and reinforce changing identities, making them a significant part of the grief process.

Coping can also be affected by whether the grief is *recognized*. Many individuals suffer from poor grief outcomes when they are not allowed to mourn. Doka (1989) labeled unrecognized grief as disenfranchised grief. When individuals are unable to grieve in public, they may be forced to mourn in secret. Since identity is managed in communication, unrecognized losses may complicate identity change during bereavement. Loss may go unrecognized when the relationship or type of loss is not accepted or validated by others. For example, parents who experience a miscarriage or stillborn birth (i.e., stigmatized losses) are often discouraged from openly grieving. Often times, they are unable to see the child or engage in mourning rituals (e.g., funerals). Being able to participate in ceremonies that acknowledge the loss, however, are important for healthy grieving. Holding a stillborn child is related to lower anxiety and fewer symptoms of depression (Cacciatore, Radestad, & Frøen, 2008). Similarly, people who lose a family member to gun violence often experience invalidation from others due to the stigma surrounding homicide and violence (Lawson, 2014). Widows and widowers may experience unrecognized grief in instances of stigma or if the partnership was not approved by



others. When there is little recognition or support, individuals may experience poorer health and grief outcomes and may be unable to reorganize their identity (Mills, Ricklesford, Heazell, Cooke, & Lavender, 2016). In order to cope effectively, it is helpful for people to be recognized by others.

**Summary.** Understanding grief requires examining how people manage their identities following loss. Currently, however, our understanding of the identity processes people experience after the death of a loved one is limited. Given the complex nature of grief reactions, it is likely that identity changes and identity management are also intricate and unique processes. Various factors (e.g., age or social support) might also play a unique role in grief and identity experiences. As such, this study is positioned around a central research question: how do individuals experience identity changes after the loss of their spouse? To answer this broad question, I utilize frameworks from two different disciplines that provide sensitizing concepts for evaluating identity changes after bereavement. Each framework brings to light specific research questions that will help to explore identity management processes and ideally offer support for aspects of the grounded theory that will be developed from the data. Additionally, the sensitizing concepts that come from each framework will help to develop aspects of the interview protocol (see Chapter 3). In the sections that follow, I outline relevant theories from the grief and identity literatures, highlight two theoretical frameworks in particular, and offer specific research questions to answer the central question of this research study.

### **Theoretical Frameworks**

The grief and identity literatures have been well-studied separately, but little research has examined how each area of scholarship can inform the other. This study is situated within two primary theoretical frameworks that offer guidance for examining identity after loss: the meaning

reconstruction model of grief and identity theory. Neimeyer's (2001a, 2001b) meaning reconstruction model of grief illustrates how grief is a period of finding benefits and adjusting identity. Identity theory, as based on structural symbolic interactionism, takes an interpersonal approach to identity and argues that a person's sense of self is constructed through relational and social roles (Stryker, 1980). Together, the meaning reconstruction model and identity theory might provide a helpful lens for examining grief and identity processes. In the following sections, I overview common frameworks utilized for grief and identity research, and then provide a rationale of each theory that will frame the findings of this study. Additionally, I offer research questions for each framework.

**Theoretical frameworks of grief.** Grief stage models (e.g., Bowlby & Parkes, 1970; Kübler-Ross & Kessler, 2005) and task models (e.g., Worden, 2008) offer frameworks for understanding grief as a process. Stage models outline specific stages or phases that individuals experience after the loss of a loved one. Bowlby and Parkes (1970) outlined a series of four predictable phases people progress through during mourning (i.e., shock and numbness, yearning and searching, disorganization and despair, and reorganization and recovery). Later, Kübler-Ross and Kessler (2005) expanded Bowlby and Parkes' work into a five-stage model (i.e., denial, anger, bargaining, depression, and acceptance). These stage models have been beneficial for acknowledging grief as a changing process. Grief is not merely a period of sadness, but instead an active and fluctuating experience that includes different emotions and goals. Individuals enact *grief work* in order to progress through various stages. Grief work includes various tasks that allow people to return to a pre-death state of functioning (Freud, 197/1997; Granek, 2010: Lindemann, 1944). The final phase in each stage theory suggests a return to normalcy by

accepting the death and recovering. During the final stage, grief is considered complete (Kübler-Ross & Kessler, 2005).

Similarly, Worden's (2008) task model stipulates specific kinds of grief work that individuals must achieve in order to progress through loss. Rather than focusing on specific stages or phases, however, Worden (2008) emphasizes four basic tasks that define grief experiences. People are considered no longer grieving once the tasks are complete (Worden, 2008). Tasks include accepting the reality of the death, processing and working through the pain of mourning, adjusting to a new world without the loved one, and forming a new relationship with the deceased while moving on (Worden, 2008). These tasks may occur in any order and may be revisited or completed simultaneously.

Stage models and task models are useful for situating grief as an active process but feature several weaknesses for studying loss. Primarily, they do not fully acknowledge the idiosyncratic nature of grief. Scholars have critiqued the rigid nature of phases and tasks, arguing that grief is rarely as cut and dry as the theories suggest (Stroebe, 2001). Although some researchers have updated the models to suggest that the order of stages is flexible (e.g., Kübler-Ross & Kessler, 2005), the theories still suggest that a general trajectory for grief experiences exists. However, individual and cultural elements can influence how people experience loss (Rosenblatt, 2012). Stage models have rarely been empirically tested (e.g., Maciejewski, Zhang, Bloch, & Prigerson, 2007), and research that does exist has provided mixed support (e.g., Barrett & Schneweis, 1980; Holland & Neimeyer, 2010; Maciejewski et al., 2007). Furthermore, stage models potentially pathologize normal grief experiences. For example, unresolved grief, where a person continues to grieve for years or a lifetime without completing the final stage or task, is considered a symptom of maladaptive grief (Bonanno et al., 2002; Klass et al., 1996). Many

scholars, however, have noted that not all grief can achieve a resolved status despite having otherwise healthy outcomes (e.g., Klass et al., 1996; Neimeyer, 1999). Research suggests that different bereavement trajectories and patterns exist, and many lead to positive and healthy outcomes (Bonanno et al., 2002; Bonanno, Wortman, & Neese, 2004). The strict nature of stage and task theories makes them unable to acknowledge the wide variety of normal grief experiences. To address these weaknesses, Neimeyer (2001a, 2001b) offered his meaning reconstruction model which proposes a more encompassing perspective on grief.

***Meaning reconstruction model of grief.*** Neimeyer (2001a, 2001b, 2002, 2006a) and Gillies and Neimeyer (2006) argued that grief is a process of meaning reconstruction rather than a predictable trajectory. They suggested that impactful losses, such as the death of a close friend or family member, undermine people's abilities to make sense of themselves and the world around them (Neimeyer, 2002). As a result, grief is a process where individuals attempt to search for meaning in a death. The progression of making sense of the loss is then, ideally, incorporated into an adapted self-narrative that allows people to understand themselves and the world again. Neimeyer (2001b, 2006b) described his approach as a social constructivist model, where meaning is created in relationships with others.

Humans construct stories, or *narratives*, which convey meaning about people, society, or life in general (Neimeyer, 2004). Narratives are cognitive structures that are coherent in both structure and meaning, and they have plots, characters, climaxes, and resolutions (McAdams, 2006). People create narratives to link together various events into a clear, connected plot (Polkinghorne, 1991). Individuals design self-narratives to make sense of their own identity and their place in the world. People author (and co-author) narratives that link together the various parts of their lives in meaningful ways (Neimeyer, 2001b; Polkinghorne, 1991). Such stories

provide a framework of how people should behave, what goals they might have for the future, and how they belong (Neimeyer, 2004). Additionally, narratives can include other individuals and relationships who become integrated into the story (Polkinghorne, 1991). Narratives are continuously being revised as new events occur, especially when experiences challenge the assumptions upon which people form their life stories (Neimeyer, 2001b; Polkinghorne, 1991). People use constantly changing personal and social discourses to develop stories. As a result, narratives vary over time (Neimeyer, 2006a), but share socially-based values and assumptions (Neimeyer, 2011). Neimeyer (2001a) suggested that narratives are like miniature ecologies. Similar to how each organism has its important role within an ecology, each element of a narrative serves some function for representing the person's identity. Over time, elements may lose their function and may be eliminated, while others stay consistently. When there are large environmental changes or events, the ecology as a whole must adapt (Neimeyer, 2001a).

Self-narratives can be interrupted when people experience loss. Disruptions can occur due to disorganization (e.g., traumatic events), dissociation (e.g., stigmatization), or dominance (e.g., enforced marginalization; Neimeyer, 2004). Devastating losses, such as the death of a loved one, can undermine a person's ability to create a coherent narrative. Not only do people lose the loved one, but they also experience narrative damage including the loss of a major character in the narrative (e.g., spouse) and the loss of narrative expectations (e.g., how the world works; Neimeyer, 2002). For example, widows report several meaning reconstruction themes after the loss of a husband, including challenged assumptions and changes in perspective (Danforth & Glass, 2001). Suddenly, a narrative might no longer be coherent without the existence of the loved one. Life trajectories might be impossible without the deceased (e.g., plans for the future). Similarly, people might feel their identities challenged since they no longer have

an important witness to identity-affirming events (Danforth & Glass, 2001; Neimeyer, 2002).

Loss can interfere with a story's coherence, making it difficult for both the narrator and listeners to accept (McAdams, 2006). Neimeyer (2001a, 2002) argued that when narratives are interrupted, individuals face the difficulty of adapting their story to assimilate the loss into a coherent new narrative. Sometimes these are small changes, but other times, such as when the death challenges core beliefs (e.g., children grow old), the person might require a complete revision to accommodate the loss. When successful, the new narrative will give meaning to the death (Neimeyer, 2004, 200b).

Individuals may vary in how they reconstruct meaning in their experiences. Neimeyer, Burke, Mackay, and van Dyke Stringer (2010) argued that bereaved individuals take one of two approaches for making sense of changes: assimilation or accommodation. Assimilation occurs when people challenge the way they evaluate the loss so that it fits into their pre-loss views of themselves. People will alter how they make sense of the loss so that it supports their core values and beliefs. Accommodation, however, occurs whenever people change how they see themselves, as well as their values and beliefs, in a way that incorporates the grief experience. Both options alter the way people make sense of their identities, but assimilation strategies appear to be more meaning-making focused and thus require smaller identity changes than accommodation strategies.

Making meaning of loss requires several parts: sense-making, benefit-finding, and identity reconstruction (Neimeyer, 2001b). *Sense-making* involves finding logic in the death of a loved one. People may search for logic relationally (e.g., who am I now?), practically (e.g., were they in pain while dying?), or spiritually (e.g., why, God?). Lichtenthal, Currier, Neimeyer, and Keesee (2010) found 14 different sense-making themes that parents gave to the death of their

child including how it was God's will and how the child was no longer suffering. Answers to questions will ultimately determine how the person's narrative will be construed (Neimeyer, 2011). Meaning can also be constructed through cultural traditions and rituals, including viewing the body and holding funerals (Neimeyer, 2001a). Making sense is generally easier for people to achieve when the deceased is older (and thus more expected to pass away), when the survivor holds religious beliefs, and when the survivor experiences less distress in the time before the death (Neimeyer, 2000, 2011). In contrast, sense-making is generally more difficult if the death was non-normative, unexpected, or traumatic (Neimeyer, 2011), as well as when the survivor and the deceased were very interdependent (Davis, Wortman, Lehman, & Silver, 2000). Coleman and Neimeyer (2010) found that when people made sense early in the grief process, they had more positive affect two years later. Grief complications can occur, however, when individuals were unable to make sense of the loss (Neimeyer, 2001b). For most people, seeking meaning occurs less often over time, possibly as the death becomes more integrated into one's narrative. Bonanno et al. (2004) found that making meaning decreased significantly from six to 18 months post-loss. As time goes on, people may feel less of a need to make sense of the death.

Individuals also benefit from finding positives in the loss. *Benefit-finding* involves seeking out constructive reasons for the loss to have occurred. Lichtenthal et al. (2010) found 18 beneficial themes parents identified after the death of a child including being able to help others and experiencing increases in compassion, spirituality, and appreciation for life. Holland, Currier, and Neimeyer (2006), Lichtenthal et al. (2010), and Keesee, Currier, and Neimeyer (2008) all found that people who were able to make sense or find benefits in the loss of a loved one had less severe grief symptoms and less maladaptive grief (e.g., excessive yearning,

depression). Sense-making and benefit-finding are often used as a two-dimensional measure for finding meaning.

Narratives (and thus identities) are reinforced by audience members (e.g., friends and families). When a loved one passes away, narratives may no longer have an audience to affirm them. As such, *identity reconstruction* becomes a third important part of making sense of the loss and re-authoring narratives. When identity is challenged, people may choose to continue the identity by finding a new audience for it (e.g., performing the role with a new group) or by taking on a new role or identity (Neimeyer, 2001a, 2006a). For example, bereaved spouses adjust their identities from being half of a couple to being a single individual (Haase & Johnston, 2012). The new narrative, then, must be validated by social others (Neimeyer, 2001b). Neimeyer, Baldwin, and Gillies (2006) found that grief is more painful when a larger identity disruption occurs (e.g., the loss of an integral role). When people report having a positive identity change and finding benefits in the loss, however, they experienced less separation distress. Identity changes are more difficult, however, the longer a couple has been together (Haase & Johnston, 2012).

Results have been mixed regarding the importance of all three constructs (i.e., sense-making, benefit-finding, and identity reconstruction). Although most people do tend to make some kind of meaning from a loss, findings have consistently shown that people who *do not* search for meaning are nearly as resilient as people who do search successfully (Bonanno et al., 2004; Davis, Nolen-Hoeksema, & Larson, 1998; Neimeyer, 2000). Both parties, however, fare much better on grief outcomes (e.g., depression) than people who do search but are not able to find meaning (Neimeyer, 2000). Other research has concluded that many people report never having searched for meaning, and if they do, it is usually resolved within six months (Davis et



al., 2000). Such research may not discredit the theory, however, but does suggest that more refined measures are needed, or else that meaning reconstruction may be more intricate than currently outlined. For example, people might not feel compelled to find meaning when the death already fits into their narrative, such as when a dying, older grandparent passes away. In other cases, the death might actually be a release from a more difficult stressor, such as a long, drawn-out illness (Bonanno et al., 2004; Davis et al., 2000). Other findings suggest that the different dimensions might serve different functions at different times. For example, Davis et al. (1998) found that individuals who engaged in making sense had less stress, but only in the first year post-loss. People who found benefits, however, had better adjustments at 13 and 18 months post-loss. It might be possible that people engage in different kinds of meaning-making over time. Currently, the relationship among the three constructs is still uncertain. Each, however, is an important part of adjusting to the loss of a loved one.

This study utilizes the meaning reconstruction model as a foundation to further explore grief as an active period of making sense, finding benefits, and changing identity after the death of a loved one. During grief, individuals deal with intense emotions, as well as psychological, physiological, and behavioral changes, all while coming to terms with a newly adjusted sense of self. Limited research, however, has examined the specifics of identity change following bereavement. Understanding how identity changes occur after loss is vital for advancing grief scholarship. Identity adjustments are an important part of dealing with the loss of a loved one. By understanding these changes in detail, scholars can provide better support to people managing grief. Additionally, grief models can use this information to better conceptualize the specifics of the grief process.

My goal is to address this gap in the literature by examining how people manage their identities after loss. A primary step in understanding identity and grief processes is investigating what the identity change process looks like for bereaved individuals. As such, my first research question asks about identity during grief:

RQ1: How do individuals manage their identities after the death of a spouse?

Additionally, multiple circumstances potentially influence bereavement experiences (e.g., cause of death, relationship with the deceased, social support) and might disrupt or facilitate how people are able to find meaning in their loss. Factors can be social (e.g., social support; Stroebe, 2010) or individual (e.g., meaning-making; Neimeyer 2001b). Currently, little research has examined which aspects of grief might play a role in identity management processes after loss. Understanding these conditions is important for helping to add nuance to grief models and to explain the diversity in grief experiences. Findings might help to identify why some people manage grief in different ways than others. As such, I offer the following broad research question:

RQ2: What aspects of grief, if any, play a role in identity management processes after the death of a spouse?

Finally, the meaning reconstruction model suggests that grief is a period of making sense of and finding benefits in grief, all while adjusting to a new identity (Neimeyer, 2001b). Research is still unclear as to how all three constructs (e.g., making sense, finding benefits, and managing identity) interrelate. As a result, the following research question explores the role that the three elements might play during grief:

RQ3: What role, if any, do sense-making and benefit-finding have in identity management processes after the death of a spouse?

The meaning reconstruction model provides a useful framework for conceptualizing grief as a period of adjustment and change. Rather than focusing on specific stages or required tasks, the model argues that grief is unique for each individual. Additionally, it adds a lens for examining identity change as an integral part of losing a loved one. The model, however, does not outline the role of social others in the grief process. It is primarily a grief theory and does not explicitly specify the nature of identity and identity management. An additional framework that might contribute towards examining grief and identity is Stryker's (1980) identity theory, which is based on the structural symbolic interactionism paradigm. His theory argues that identity is constructed and exists in social interactions, making identity a communicative process. Identity theory adds a clear social element to explaining how people make sense of themselves. In the following section, I describe identity theories in general and then highlight the usefulness of identity theory as it relates to understanding bereavement.

**Theoretical frameworks of identity.** Theories of identity provide useful information about how identity is constructed in interactions. Social identity theory (SIT; Tajfel, 1978) suggests that identity is constructed primarily through intergroup encounters and social categories (Gudykunst & Lim, 1986; Tajfel, 1978). More specifically, social identity is the image people create of themselves based on the social groups they belong to (Tajfel & Turner, 1986). Behavior is determined by acting in accordance with that group's image (Ng, 2005). SIT assumes that people have a natural desire to maintain positive self-concepts and self-esteem. Individuals use group memberships to define themselves by identifying with groups that enhance positive identity (in-groups), while distancing themselves from groups that decrease positive identity (i.e., outgroups; Giles & Newbold, 2013; Grant & Hogg, 2012; Tajfel & Turner, 1986). People will compare their in-group to out-groups and assign each group a high or low status

based on rewards and prestige. When the in-group is evaluated to be lower in status than the comparison group, individuals will experience a decrease in positivity regarding their self-concept (Tajfel & Turner, 1996). To manage undesirable evaluations, people might (a) leave the less prestigious group and/or (b) join a new group with a more positive evaluation (Tajfel & Turner, 1996). Individuals compare themselves to others, and form their social identity based on what groups they feel similar to or different from (Tajfel, 1978).

SIT's primary emphasis on social identity is its main limitation for understanding identity, particularly from an interpersonal communication perspective. Tajfel and Turner (1996) described social behavior as occurring along a continuum between interpersonal interaction and intergroup interaction. SIT focuses primarily on psychological processes and intergroup interactions, while ignoring interpersonal encounters (Gudykunst & Lim, 1986; Hogg, Terry, & White, 1995; Tajfel, 1978). As such, the theory does not speak well to identities created and maintained through interpersonal roles (such as identities related to the loss of a loved one), individual characteristics, or other non-group connections. Since SIT is a cognitive group theory of identity, it is limited in its use for interpersonal communication identity research. It would be difficult to ascertain how identities are impacted by day-to-day interactions with others or how identities are influenced by social roles from a SIT perspective since such identities might not align with a specific group category.

The communication theory of identity (CTI; Hecht et al., 2003) argues that identity is primarily constructed through communication. Rather than being a product of communication, however, identity *is* communication. Internalized identities become performed in interactions (Jung & Hecht, 2004). CTI conceptualizes identity as existing on several interacting frames: personal (how people cognitively define themselves), enacted (how identity is constructed

through communication), relational (how identity is constructed through relationships), and communal (how identity is constructed through group memberships). Whereas other perspectives might view identity as a static point on a continuum between the personal and the social, CTI recognizes the importance of each category of identity on that continuum. During communicative exchanges, people can reinforce or deny an identity, forcing individuals to reevaluate their self-concepts (Hogg et al., 1995). Communication and identity function reciprocally: communication helps to mold a person's identity, and identity prescribes certain behaviors that mold communication (Jung & Hecht, 2004).

A limitation of CTI is its focus on a multi-layered design. Although the four frames of identity are important and exist as a strength to previous theories that do not account for all of the layers (e.g., SIT), it is difficult to empirically examine how they interpenetrate one another, a critical claim of the theory. Hecht et al. (2003) argued that the four layers, although distinct in some ways, cannot truly be separated. In research, however, scholars examine two or more frames separately. The results lack the ability to illustrate the impact of interpenetration on a person's overall identity. Specific identities that span across multiple layers (e.g., parent) might be misunderstood by examining each layer separately. Currently, CTI's detailed structure may not serve identity research well in every circumstance.

The structural model of identification (Scott et al., 1998) argues that people's identities are impacted by (and determined by) the kinds of work-groups and discourses they associate with. Scott et al. (1998) outline three elements of the structural model: identity-identification duality, identity regionalization, and situated activity. *Identity* refers to how people define themselves. Individuals use a variety of resources to compose their identities including values, beliefs, and rules. *Identification* refers to how people actually enact identity. More

specifically, identification is the process of doing identity by showing attachment in an interaction. By engaging in identification, people reveal their associations to identity targets including groups or other collectives that compose part of an identity (Scott et al., 1998). Identity and identification exist as a duality or a reciprocal relationship: identity provides people with the information regarding what they can and cannot do when they engage in identification, and identification (or behavior) reproduces the identity or attachments to identity targets. This relationship between identity and identification is referred to as the *identification process* (Scott et al., 1998). The second element of the structural model of identification suggests that people have multiple identities enacted in different times and places, and these identities are grouped into similar categories. *Regions* of identities vary how much they overlap or conflict. Scott et al. (1998) outlined four primary regions of identity: individual (or personal), group, organizational, and occupational/professional. The final component of the structural model of identification is that identity is a situational construct. Scott et al. (1998) proposed that identities are negotiated in a specific time and space. Unlike other scholars who focus on identity as a somewhat stable construct (e.g., Erikson 1968), the structural account suggests that identity is unique in each situation depending on the context and interaction.

A primary weakness of the structural model of identification is its focus on work groups. Similar to SIT, the structural model emphasizes groups as the primary identification target (Scott et al., 1998). Although it also claims that people can associate with discourses (e.g., rules and values), it gives little recognition for the identities that are given to individuals based on their interpersonal roles. Additionally, individuals might not choose specific identity targets, but rather are prescribed specific targets by others (e.g., gender-related expectations). People's overall identities might be more defined by the roles they enact with others than specific work

groups or discourses (e.g., Stryker, 1980). With a few exceptions (e.g., Miller, Shoemaker, Wilyard, & Addison, 2008), the theory has been applied primarily to organization work group contexts (e.g., Agarwal & Buzzanell, 2015). To mitigate the weaknesses provided by SIT, CTI, and the structurational model of identification, Stryker's (1980) identity theory provides a structurally based and communication focused perspective on identity.

***Structural symbolic interactionism.*** Structural symbolic interactionism argues that identity is created and maintained through social interactions. As such, people make sense of themselves and society through their exchanges with others (e.g., Blumer, 1969; Stryker, 1980). Identity emerges in the roles and relationships individuals have with others. Simultaneously, however, identity is influenced by larger societal structures. People are born into social expectations about roles, norms, and relationships. As a result, identity is created by the self and by members of society during interactions but is also influenced by existing expectations. Structural symbolic interactionism informs several different perspectives on identity and the self, including identity theory.

Structural symbolic interactionism suggests that identity influences behavior. Behavior is organized according to social structures (i.e., rules, norms, and relationships) that regulate how people are expected to act (Stryker, 2001). Additionally, individuals are embedded within multiple frames of structure (Stryker, 1980). In a single encounter, a person's identity is simultaneously influenced by several distinct roles. For example, a woman may enact a primary role as a customer in a restaurant, but she is still constrained by expectations regarding her roles as a woman, parent, community member, or U.S. citizen. Expectations about roles are socially constructed based on each person's unique experience with interactions (Stryker, 2001). Individuals bring their own definitions, labels, and beliefs to every social encounter. These

expectations define each person's roles and acceptable behaviors and are further negotiated in the situation (Stryker, 1980). Social structures are relatively consistent across interactions, allowing identity to be somewhat stable across different contexts. Not all roles and labels, however, are available for people to draw from in every situation (Serpe & Stryker, 2011). For example, the role of parent might not make sense to be enacted during a job interview. Identity, then, is based on how people act and vice versa.

***Identity theory.*** Identity theory emerged from the structural symbolic interactionism perspective (Stryker, 1968, 1980, 2008). The theory focuses on multiple identities that compose the self in interactions. In particular, Stryker (1980) outlined three primary concepts of identity theory: identity, identity salience, and commitment. *Identities* are the internalizations of role identities (Stryker, 1980), which refer to how people picture themselves enacting a certain social position (e.g., parent, teacher, peacekeeper; McCall & Simmons, 1978). For every role a person has, there is a corresponding identity that prescribes the expected behaviors the person believes are necessary to enact that role (e.g., a good student attends class). Stryker (1980) focuses on the normative components of identity that are formed and upheld by social structure (e.g., societal expectations and roles). According to identity theory, people naturally categorize themselves and others using social structures to know how to behave accurately (Burke & Stets, 2009; Stryker, 1980).

Identities are ranked according to a hierarchy, which influences how likely a person is to enact a specific behavior. Stryker (1968, 1980) and Stryker and Burke (2000) argued that humans are motivated by an *identity salience hierarchy*, where identities are ordered based on how central and important they are to the person. Higher ranked identities and their corresponding behaviors are more likely to be enacted in any given context. For example, a



person whose identity as a good student is prominent in the hierarchy will be likely to enact behaviors of a good student, even outside of the classroom. Additionally, commitment increases an identity's ranking in the hierarchy. *Commitment* is based on a cost-reward calculation, with roles connected to more favorable social ties as being more rewarding (Stryker, 1980; Stryker & Serpe, 1982). Stryker and Serpe (1984) labeled the amount and strength of social ties as the interactional and affective dimensions of commitment. Identities that enable participation in an extensive range of social situations and incur minimal costs have high interactional commitment and salience rank. Similarly, hierarchy order is also higher for identities that are strongly or emotionally connected to others, or have greater affective commitment (Stryker, 2004). People will then act in accordance to the identities they see as rewarding and central to their overall self.

Identity theory also describes how roles can contradict each other. Role conflicts occur whenever expectations or performances are incompatible. Stryker (1980) described two kinds of role conflicts: intra-role and inter-role. *Intra-role conflict* occurs when individuals have conflicting expectations of how to enact a role (e.g., how to be a good father). The person enacting the role may have different expectations for the identity than other people. *Inter-role conflict* occurs whenever a person experiences conflict between two or more roles (e.g., employee role versus parental role). Demands of one role, for example, might prevent the other role from being performed accurately (Stryker, 1980; Stryker & Macke, 1978). Whether a role conflict can be resolved depends on how intense the conflict is. For example, major incompatibility between demands may prevent a conflict from ending (Stryker, 1980). Since most people enact multiple roles at any given time, role conflicts are not an uncommon experience. Grieving individuals might experience conflicts as they attempt to understand their new identities. Bereaved spouses, for example, might feel conflicted about how to correctly

perform the role of widow or widower. Their expectations could be challenged by others and might change over time (Bennet, 2010). Similarly, bereaved parents may be unsure how to enact their new roles (Hastings, 2000). Currently, however, grief research has not explicitly examined role conflicts. Instead, scholars have focused on understanding identity fractures.

Both role conflicts and identity fractures refer to instances when individuals manage incompatible identities or expectations (e.g., Hastings, 2000; Stryker, 1980). Although the two constructs are used in different disciplines, they appear to be equivalent. Since identity fractures refer to instances when people occupy two incongruous identities at the same time, they can be classified as a type of inter-role conflict. Currently, however, no research has linked the two constructs together. Examining identity fractures during bereavement as specific instances of role conflict might add credibility and structure to the grief literature.

During bereavement, identities change in unique ways. Parents who have lost a child may no longer be able to enact behaviors relating to the parental role (Hastings, 2000). Similarly, bereaved spouses might experience a change in the rankings of their salient identities since some roles are lost (e.g., spousal role) and new ones are enacted (e.g., widow or widower role). Individuals may find that some identities can no longer be enacted without the social partner, which can lead to identity fractures and role conflicts. Since identity theory situates identity construction and management within a social context, social network members likely influence changes to roles and the self. Other people can support, deny, or alter roles during interactions. Supportive communication is likely an important factor for renegotiating identity for bereaved individuals. Friends can acknowledge the existence of a deceased child, for instance, which can reaffirm a person's parental role (Giannini, 2011). When support is not available for identities, individuals sometimes find new audiences and social situations. For example, people use online

platforms to seek social recognition of a deceased loved one and the loved one's roles (Canary, 2008; Finlay & Krueger, 2011).

Identity theory frames this study by conceptualizing identity as one's sense of self as created and enacted through communication. The interactions that people experience after the death of a loved one likely facilitate and/or hinder identity management processes. People may not be able to enact their desired identities during interactions when others refuse to acknowledge a role or identity. Since grief is a period of meaning reconstruction (Neimeyer, 2001a, 2001b), communication from others might influence how well individuals are able to make sense, find benefits, or change identity based on the loss. Understanding how communication influences identity during grief will help to add to our knowledge of how loss is managed within interpersonal relationships. As such, the following question aims to examine the role others play after bereavement:

RQ4: What role, if any, does communication with others play in identity management processes after the death of a spouse?

Additionally, identity fractures and role conflicts might interfere with healthy coping during grief (e.g., Hastings, 2000). People who have lost a spouse likely experience unique conflicts in how they see themselves versus how others see them. These fractures might influence grief experiences in various ways. Understanding how bereaved individuals manage incompatibilities in their identities is vital for expanding our knowledge of the circumstances that affect grief. To better conceptualize identity fractures and role conflicts, I propose the following research question:

RQ5: How, if at all, do individuals manage identity fractures or role conflicts after the loss of a spouse?

## **Summary**

Identity change is a vital element of the grief process. Bereavement and identity literatures might benefit from an investigation that connects the two separate fields of study. To better understand bereavement, the meaning reconstruction model of grief might help to explain how identity changes relate to making meaning in a grief situation. Similarly, identity theory offers a framework for evaluating how social network members influence personal processes. This study synthesizes elements from both literatures to better understand how people reevaluate themselves based on their social interactions after the loss of a spouse.

### Chapter 3: Method

The goal of this study is to examine the central question regarding the identity management processes people experience after the loss of a spouse, specifically in relation to communication with others. To investigate the context of identity after loss, I offer five specific research questions: How do individuals manage their identities after the death of a spouse (*RQ1*)? What aspects of grief, if any, play a role in identity management processes after the death of a spouse (*RQ2*)? What role, if any, do sense-making and benefit-finding have in identity management processes after the death of a spouse (*RQ3*)? What role, if any, does communication with others play in identity management processes after the death of a spouse (*RQ4*)? How, if at all, do individuals manage identity fractures or role conflicts after the loss of a spouse (*RQ5*)? These questions are designed to add depth to the central question and to help build a model representative of the identity changes people experience after loss. Given the exploratory, process-oriented nature of the research questions, this study utilized qualitative research methodologies. I collected data through in-depth interviews with individuals who had lost a spouse. Participants were recruited from online support groups and in-person care centers. Additionally, I analyzed transcribed interviews using grounded theory procedures.

Interviews are beneficial for collecting sensitive or highly personal information since they allow researchers to gather data directly from the interviewee in a private format. Participants can reveal important details about personal experiences that might not be observable through other methods (Lindlof & Taylor, 2011; Paulhus & Vazire, 2007). Furthermore, interviews are able to gather in-depth data on understudied or unfamiliar topics (Charmaz, 2006). Other researchers have also found success using interviews to investigate experiences related to identity and grief (e.g., Bennett, 2010; Creighton et al., 2013). As such, interviews were an ideal

method of data collection to help advance the literature on grief, identity, and communication in meaningful ways by exploring experiences in detail with participants.

Grounded theory is advantageous for examining personal and understudied experiences since it focuses on discovering important processes relevant to the lived experiences of participants (Charmaz, 2006). Since mourning the loss of a loved one and constructing one's identity involve a great deal of nuance (e.g., Barnhart & Peñaloza, 2013; Finlay & Krueger, 2011), grounded theory helped to develop theory that considers the various complexities inherent in managing identity after bereavement. Theory developed through grounded theory methods is specific to the unique context and situation. The theory is developed directly from the data, and then can be tested in later studies to better understand the experiences that people go through. In the grief literature, more emphasis has been placed on quantitative findings (Naef et al., 2013). As such, qualitative grounded theory procedures add to the literature by examining data through a systematic, abductive approach (Charmaz, 2006; Corbin & Strauss, 2008; Glaser & Strauss, 1967). In the following sections, I outline the details of the current study, specifically focusing on participant recruitment, data collection, data analysis, and reflexivity and trustworthiness.

### **Participant Recruitment**

**Recruitment procedures.** Recruitment began after securing IRB approval from the University of Illinois at Urbana-Champaign. Advertising efforts focused on reaching individuals who had experienced the loss of a marital partner. I sought out eligible participants from areas across the nation by sending recruitment materials to online forums and face-to-face support groups, as well as related care centers. First, I compiled a list of online sources by identifying forums and related websites that (a) focused on grief and (b) were in English. I then directly contacted the administrator of each website to ask permission to post or send advertisements to

potential participants (see Appendix B). If no such person existed, I abided by the community's rules and standards and only posted materials if allowed. After permission was granted, I posted and/or sent a flyer with details about the study as well as my contact information (see Appendix A). Additionally, I sent advertising materials to in-person support groups, care centers, and therapists across the country (see Appendix C). Any person who was interested and met the inclusion criteria was invited to contact me directly through email.

**Inclusion criteria.** Participants had to meet several criteria to participate in the study. First, they had to have experienced the death of their spouse within the past five years. Although widows and widowers have been well-studied within the grief literature, most research on identity and communication during bereavement has focused on bereaved parents (e.g., Hastings, 2000). The loss of a spouse, however, can be a debilitating experience that affects a large portion of grieving individuals. Middleton et al. (1998) compared bereaved parents, widows(ers), and adult children mourning the death of a parent. They argued that bereaved parents experienced the most role changes, followed by widows(ers), and lastly bereaved children. Additionally, Ha (2008) advises that romantic partners are the best sources of support for each other, which suggests that when one partner is lost, the other faces major adjustments. As such, this study addresses a gap in the literature by specifically examining widow(er) role changes, where at least moderate role changes are likely. To increase memory recall, a period of five years since the loss acted as a cutoff date. Although other grief studies use smaller time frames (e.g., two years; Zisook, Paulus, Shuchter, & Judd, 1997), research on identity after grief is not clear about when changes occur. A longer period (i.e., five years) might help to avoid missing details vital for understanding grief experiences (e.g., Bennett, Gibbons, & Mackenzie-Smith, 2010).

Second, participants had to be between the ages of 18–75. The intended age group was designed to be broad to solicit a variety of different grief experiences. A cut off age of 75 is consistent with previous research in order to avoid specifically targeting elderly participants who might be institutionalized or have decreased mental capacity (e.g., dementia; Middleton et al., 1998; Parkes & Weiss, 1983). Older widows(ers) have been well studied within the grief literature and are more likely to experience additional stressors including declines in physical and psychological capacities (e.g., Anderson & Dimond, 1995; Bennett et al., 2010; Bent & Magilvy 2006; Parkes & Weiss, 1983; Wilson & Supiano, 2011). Recruiting participants younger than the cutoff age was useful for helping to minimize age-related memory and similar issues.

Finally, participants had to be willing to participate in an audio-recorded interview in person, over the phone, or through Skype. After participants first contacted me and confirmed their eligibility (see Appendix D for screening email), I then scheduled an interview based on our mutual availability, followed by a reminder email (see Appendix E). I later sent participants a second reminder email 24 hours before their time slot. Following the interview, I sent eligible individuals a \$20 gift card for their participation. Data collection continued until data saturation (i.e., no new categories emerged from the data) and theoretical saturation (i.e., all coding categories were fully developed) were approached (Guest, Bunce, & Johnson, 2006; O'Reilly & Parker, 2013).

**Participants.** The sample contained 35 individuals who had lost their spouse at some point during the past five years before data collection. Participants included 28 females (80%) and 7 males (20%). Individuals ranged from 32 years to 73 years old ( $M = 58.9$ ). Most interviewees identified their race/ethnicity as White/Caucasian ( $n = 33, 94.3\%$ ), and others



identified as African American/Black ( $n = 1$ , 2.8%) and Haitian ( $n = 1$ , 2.8%). Participants included individuals from 15 states representing all regions across the United States ( $n = 34$ , 97.1%) and one person from Canada (2.8%).

The length of marriage before bereavement ranged from 2 years to 48 years ( $M = 26.7$  years). The majority of the sample reported the loss of an opposite-sex marital partner ( $n = 34$ , 97.1%). Most participants reported having children with their partner ( $n = 25$ , 71.4%). Spouses primarily passed away due to various health related issues, including illnesses and medical emergencies, ( $n = 31$ , 88.6%). Others died as a result of accidents ( $n = 2$ , 5.7%) and unknown causes ( $n = 2$ , 5.7%).

### **Data Collection**

Individuals interested in participating emailed me through contact information posted on advertising materials. I invited eligible participants to partake in an in-depth interview. Interviews are commonly utilized in grief research (e.g., Bennett et al., 2010; Haase & Johnston, 2012), as they provide a method for exploring emotional topics and new areas of inquiry. To help participants feel more comfortable and to increase the likelihood of a successful interview, I granted interviewees the choice of communicating in-person, over the phone, or through Skype. I scheduled in-person interviews at public locations that were comfortable to participants but private enough to discuss sensitive topics (e.g., University of Illinois office space or coffee shop). After scheduling an interview, I emailed the participant a link to an electronic copy of the informed consent form to review (see Appendix H). Interviews ranged from 38–130 minutes.

I began interviews by first verbally going over the informed consent form. After collecting written (in-person interviews; Appendix J) or verbal (Skype or phone interviews; Appendix I) consent to participate, I started the interview questions. The protocol followed a

semi-structured schedule. I designed the questions to be broad and included multiple possible probes. Consistent with grounded theory, the semi-structured nature of the interview schedule afforded participants greater control over the flow of information and allowed the interviewer to ask both planned and unplanned follow-up questions.

I developed the interview protocol based on related studies that have examined identity and/or grief (e.g., Giannini, 2011; McBride & Toller, 2011; Rowe & Harman, 2014; Toller, 2011). Questions were also derived from the sensitizing concepts as provided by the theoretical frameworks (i.e., identity theory and the meaning reconstruction model). The protocol was divided into three parts (see Appendix K). The first set of questions oriented the participant to the focus of the study while building rapport between the interviewer and interviewee. Items included demographic questions, as well as broad questions that asked interviewees to describe their deceased partner and the marriage. The next set of questions delved into identity changes after loss. Prompts asked participants to describe how they saw themselves after the loss compared to beforehand and to identify any sense making that has occurred since the death. Finally, the third section featured questions that asked about communication with others before and after loss. Participants were asked to describe communication encounters that they had experienced. Specifically, questions examined what communication changes or challenges people experienced after the death of their spouse.

Special consideration was taken to ensure the well-being of participants given the personal and sensitive nature of the research topic. Although interview participation is commonly described as a cathartic experience for bereaved individuals, it can cause emotional distress (Gekoski, Gray, & Adler, 2012). To minimize risk to participants, I reminded interviewees during the informed consent overview that (a) they were welcome to skip any

question desired and (b) they could terminate the interview at any time without repercussion.

Additionally, I offered breaks and ended interviews when participants appeared distressed. At the conclusion of each session, participants were given a list of local and national support resources to contact if more care was needed (see Appendix F).

Each interview was transcribed verbatim following completion resulting in 1,117 pages of double-spaced data. To ensure confidentiality, all identifying information was removed (e.g., names), and pseudonyms were used for writing the results of this study. Written materials (e.g., signed consent forms) were kept in a locked cabinet. Electronic materials (e.g., electronically signed consent forms) were stored on a password-protected website. Additionally, information needed to pay participants (i.e., name, email, and address) was collected through a separate survey link that kept identifying information confidential on a password-protected website (see Appendix G). Digital interviews and their corresponding transcripts were also stored in a password-protected file.

### **Data Analysis**

Data analysis procedures were conducted concurrently as data was collected. Qualitative grounded theory methods guided the analysis of the data. Throughout my analysis, I utilized the constant comparison method whereby data was collected, analyzed, and compared simultaneously (Charmaz, 2006; Corbin & Strauss, 2008; Glaser & Strauss, 1967). Collection and analysis continued until both data saturation and theoretical saturation were approached after 35 interviews. Analysis procedures included several elements: (a) systematic coding, (b) memo writing, (c) diagramming, and (d) examining negative cases.

**Coding.** Transcribed interviews underwent systematic coding in accordance with grounded theory methods. Coding occurred in four important steps. First, a colleague and I

engaged in line-by-line open coding of approximately 10% of the available data. In this step, we worked separately to describe the actions that occurred in each line of the data using gerunds (Glaser, 1978; Glaser & Strauss, 1967; Strauss & Corbin, 1998). Using the constant comparative method, we noted frequent codes (e.g., labels depicting concepts in the data) and concepts as they appeared in the data (Charmaz, 2006). After independently engaging in line-by-line open coding, we then met to compare and discuss prominent codes. We discussed our evaluations of the data and characteristics of each code. I then developed a codebook that contained the 16 recurring codes we agreed upon, a definition of each code, and example quotes. My colleague then reviewed the codebook for accuracy.

Next, a trained undergraduate assistant who was blind to the goals of the study and I engaged in focused coding by applying the codebook to the remainder of the data (Charmaz, 2006). Initially, we examined an overlap of 5% of the data whereby we identified passages of participants' text that exemplified the various codes. We then met to ensure a mutual understanding of the codebook and to refine code definitions. We then divided the remainder of the dataset between the two of us to continue focused coding. Throughout the process, we met on a regular basis to discuss the data and to refine the codebook. One new code emerged during this second step (i.e., *finding benefits*) and was added to the codebook. I then re-coded previously coded data with the revised code. Additionally, codes and categories were refined as new details and description appeared in the data. Codes became categories whenever they represented larger and more detailed ideas and concepts that represent the data (Charmaz, 2006). For instance, the original code of "*changing roles and responsibilities*" was broadened to "*changing identity*" to reflect participants' experiences more accurately. Additionally, the initial codes "*dichotomizing self versus others*" and "*comparing grief experiences*" were collapsed into a larger category of

“*comparing grief experiences*,” and the initial codes of “*distracting*” and “*taking care of business*” were merged into a single category of “*staying busy*.” Focused coding was useful for examining larger sections of the data and for synthesizing concepts that appeared during open coding (Charmaz, 2006).

Third, I engaged in axial coding. In this step, a colleague and I focused on determining the connections among the codes, categories, and processes in the data. We both read through the dataset and met to start piecing together elements of the theory by developing a higher level of conceptual abstraction regarding how the parts of the model work together (Corbin & Strauss, 2008). Axial coding benefited from examining three aspects of the categories and their relationships: conditions (i.e., elements and parts of the categories), actions or interactions (i.e., how participants react to a phenomena), and consequences (i.e., outcomes based on participants’ reactions; Charmaz, 2006; Strauss & Corbin, 1998). Within this stage, we identified the primary category, “*reconciling the past and the present*,” and began to outline the properties and details of each category to understand how they related to each other (Charmaz, 2006). We were able to identify several important relationships among categories in the data during this stage. For instance, we recognized that “*being alone*,” “*losing more than spouse*,” and “*managing multiple stressors*” were all related under a larger conceptual label of “*internal stressors*.” Additionally, we recognized several subcategories that were related under a larger category of “*strategies for reconciling the past and the present*.” Within this latter step, the theory that came from the data started to take shape.

Finally, I conducted selective coding. Selective coding involves examining the categories and relationships that were established in axial coding to understand the story of how the data fits together (Charmaz, 2006). During axial coding, I identified “*reconciling the past and the*

*present*” as the central category for the process of reconstructing identity following bereavement. In the final coding stage, I compared the primary category to the dataset to confirm that the emerging model connected to the participants’ experiences in a meaningful, theoretical way. Selective coding procedures helped to explicate categories to better understand the data and to add depth to the emergent theory as it attempted to describe the identity management processes experienced by participants. During this stage, I refined the dimensions of the subcategories of the main category to depict individuals’ experiences more accurately. For instance, “*changing identity*” was refined to be more accurately “*changing personal identity.*” The final stage of coding aided in refining a more accurate model of identity change.

**Memo writing.** Memo writing was an integral part of my data analysis. I wrote memos frequently during data collection and analysis. Memos act as a record in qualitative research. They help to keep track of and understand interview details that might be missed during transcriptions (e.g., crying or showing emotion), as well as major theoretical decisions made throughout the analysis processes (e.g., collapsing categories; Charmaz, 2006). Writing about important ideas and decisions can help scholars organize their thoughts when later typing up data results. As such, I wrote memos following (a) every interview, where I described the interview, notable observations, and short quotes or meaningful content, and (b) every coding session, where I included information about notable constructs, recurring categories, and decisions made about the data. Memos were dated and labeled for future reference.

**Diagramming.** Diagramming is a helpful tool for analyzing data. Qualitative researchers use diagramming to create a visual representation of categories and connections (Charmaz, 2006). Codes and categories can be written down on paper or notecards or typed on a screen, and the researcher can draw arrows, circles, and other symbols to indicate how phenomena interact. I

utilized diagramming extensively throughout axial and selective coding to examine how items related to each other and how. Creating a map with various codes and categories helped our research team to better understand which category was primary to the process of identity management during grief and how the various codes and categories related. We used notecards and electronic diagrams to compare our visualizations of the data, which allowed us to visually see the structure of the emerging model. I also utilized diagramming when I grappled with ideas throughout other parts of the data collection and analysis process, especially when I engaged in memo writing. Diagramming was useful for identifying various aspects of the grounded theory of how individuals manage their changing identities following bereavement and how the various parts of the model fit together to explain the identity management process.

**Examining negative cases.** Throughout my analysis, I paid careful attention to negative cases in the data. Negative cases include “alternative hypotheses” to data concepts (Glaser & Strauss, 1967, p. 230). They appeared as items in the data that did not fit into the overall pattern of ideas or as examples that contradicted theoretical categories and concepts. Examining negative cases was important to refine and develop the emergent theory that came from the data analysis (Charmaz, 2006). For instance, my undergraduate research assistant and I searched the dataset for examples of participants who described very little identity changes following the loss of their spouses. We were able to compare their experiences to other individuals who acknowledged major identity shifts. After determining the cause of the negative cases, we refined the emerging theory to include the discrepancy in a meaningful way. More specifically, for participants who admitted limited identity changes, we acknowledged the role of internal and external aspects of grief in their sense-making processes. More specifically, people who had

strong social support and limited internal stressors experienced less changing identity. These negative cases added depth and nuance to the theory.

### **Reflexivity and Trustworthiness**

Reflexivity and trustworthiness are vital components of qualitative research and grounded theory methods. Scholars develop reflexivity by being reflective and transparent about their own interpretations that might influence the data analysis (Charmaz, 2006). Reflexivity is important for developing trustworthiness, or the degree to which the findings are accurate based on the experiences of the participants (Lincoln & Guba, 1985). I took several steps to have reflexivity and trustworthiness in my research study. First, I sought to be aware of my own potential biases and assumptions. As an individual who has not lost a spouse, I know about grief from research studies and from my experiences with other losses. As such, throughout data collection and analysis I tried to reflect on my perspectives that could shape the outcome of my findings. Second, since my study is situated within two theoretical frameworks that provide sensitizing concepts that may or may not be representative of the actual experience of bereaved spouses, I paid attention to the biases that these concepts might bring to the interpretation of the data. As I moved through analysis, I reflected on these potential biases and removed frameworks that did not appear to be accurate of individuals' experiences. Additionally, my research team and I wrote descriptive memos that included our thoughts, ideas, and observations relevant to the study. I also noted potentially useful quotes that came from participants, since quotes offered evidence to support the findings. I examined previous memos throughout the data analysis process to make sure that the data were always driving the analysis rather than my own biases. Finally, to reduce my biases even further, I worked with others throughout data analysis. The colleague was unfamiliar with the theoretical background of the study and the undergraduate research assistant



was unaware of the goals of the study, which helped to confirm the accuracy of the analysis and findings. By using the help of others who have different backgrounds, I tried to reduce biases and to build trustworthiness into the findings.

## Chapter 4: Results

Participants described bereavement as a meaning-making experience filled with intense emotions and significant changes. Reconciling the past and the present, particularly in regard to participants' personal and social selves, emerged as the central category that influenced identity reconstruction after the loss of a spouse. Figure 1 depicts the process of how participants made sense of themselves after bereavement. The data reveal that individuals had to reconcile past and present forms of two parts of their identities: (a) personal identity and (b) social identity. Two major elements influenced the sense-making process: stressors, which made it more difficult for participants to make sense of the changes they were experiencing, and a facilitating component, which helped participants to better reconcile changes. Internal stressors, which were intrapersonal experiences, included (a) being alone, (b) losing more than the spouse, and (c) managing multiple stressors. An external stressor, which was experienced interpersonally, was managing competing expectations between the bereaved and their social networks. Additionally, receiving social support acted as an external (or interpersonal) facilitating component that positively influenced how individuals were able to reconcile and make sense of changes. Finally, individuals used several strategies for minimizing stressors and reconciliation past and present identities: (a) staying busy, (b) continuing the relationship with the deceased, (c) rationalizing tensions, (d) comparing experiences, (e) seeking similar others, and (f) buffering. The following sections explain each element of the model in detail. Additionally, each section contains exemplar quotes to illustrate the categories.

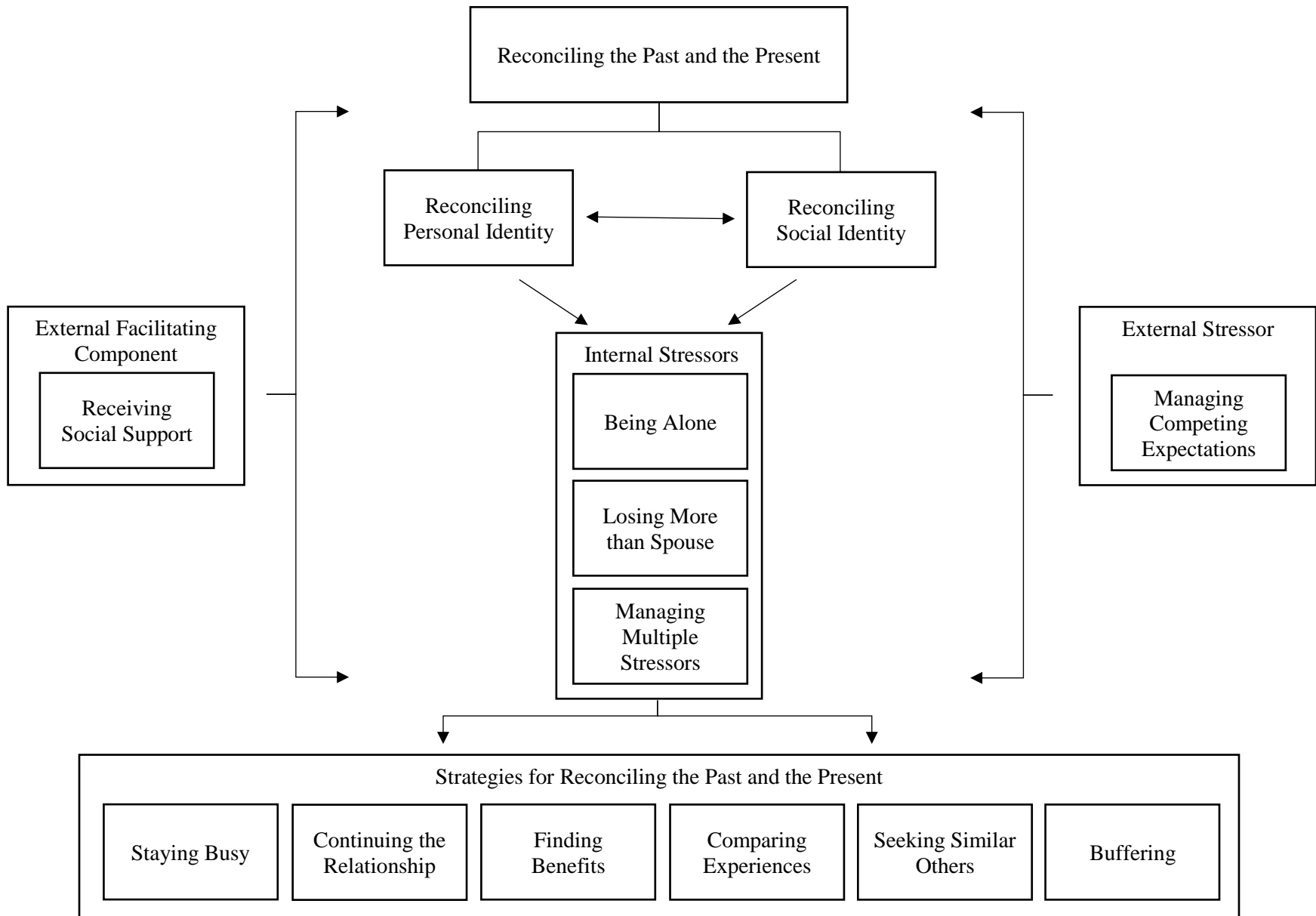


Figure 1. The process of reconciling the past and the present identities after the loss of a spouse.

## **Reconciling the Past and the Present**

The central category that shaped how people made sense of themselves after the loss of a spouse was *reconciling the past and the present*. Participants described how their lives changed in ways that disrupted how they were able to understand themselves. Before bereavement, individuals defined a significant portion of their identity through their relationship with their spouse. Consequently, when the spouse passed away, people struggled to make sense of changes to themselves on both personal and social levels. Bereaved individuals recognized that their identity had transformed (and continued to transform) in various ways. As a result, bereaved participants had to find a way to manage a tension between who they were before the spouse passed away and who they were without the physical presence of the marital partner. Managing these changes, both wanted and unwanted, was significant for individuals to start reconstructing their identities.

Reconciling the past and the present is a meaning-making process. More specifically, participants *recognized* changes in themselves and, when possible, worked to *make sense* of those changes. The loss of a spouse forced individuals to reevaluate and negotiate the roles they played, the beliefs they held, and the relationships they were a part of. The death of a marital partner was rife with uncertainty and significant changes, however, making the management process difficult. Furthermore, interactions with other people helped individuals recognize changes in their identity. Participants realized that others saw them in new ways and tried to navigate through those new perceptions. Participants dealt with a great deal of ambiguity following the loss of their partner regarding who they once were, who they were after bereavement, and what their futures looked like.

Participants had to reconcile changes between their past and present selves for both their (a) personal identity and (b) social identity. Personal identity changes included transformations in how participants internally saw themselves and understood their worldviews. Changes in social identity encompassed how individuals perceived they were seen by family, friends, coworkers, and others. Participants had to make sense of who they were without their spouse both personally and socially. Individuals evaluated these various changes as significant for altering how they saw themselves and their roles within the world around them. The following sections overview each category in detail.

**Reconciling personal identity.** Participants acknowledged that the loss of their spouse influenced a change in how they saw themselves and life around them. Their personal identities, or how they internally understood themselves and their views of the world, shifted after bereavement. People adapted their roles and recognized that they made sense of their inner selves in new ways. As such, participants had to reconcile the differences between who they once were and who they are after the loss of their spouse. Individuals' perspectives changed from a pre-loss view to a post-loss view that altered the way they examined their identities, other people, and events. Several participants described changes as seeing the world with "fresh eyes" and evaluated the differences in how they understood themselves in both positive and negative ways. Reconciling personal identity included managing changes in (a) how participants saw themselves and (b) how they viewed the world and others.

***Changing views of self.*** Bereavement challenged the way participants understood their personal identities. Before the loss, individuals defined significant parts of their identity through their marital relationship and roles such as wife or husband. Without the connection to the spouse, individuals recognized that they struggled to coherently make sense of who they were.

Bereavement effectively removed a part of participants' identities. For instance, Sarah mentioned feeling separated from her marital role after the loss of her husband: "I'm just missing being a wife. It's like part of me was a wife. I'm not a wife [anymore]." Similarly, Michael mentioned the change of no longer being a part of a couple by saying, "There's definitely an identity crisis. Before, I was Michael and [wife's name]. Now I'm just Michael." Other participants associated parts of their personality and emotions with the marital relationship. Aubrey, for instance, felt her happiness taken away after the death of her spouse: "The thing that brought me happiness is gone, and I'm not going to be able to replace that. And I still have a big void and nothing will fill that up." Aubrey's experience illustrates how people saw themselves as happy or care-free before loss, but after the death of their spouse, individuals could no longer comprehend these aspects of their identities. Since participants defined themselves partially through their marital roles, the loss of their spouse forced individuals to find a new way to understand who they were.

Bereavement led to uncertainty in individuals' understanding of their identities. Without the spouse, people experienced ambiguity and questions when trying to determine how they internally made sense of themselves. Devon, for example, mentioned, "I don't even know who I am," when describing his current identity. Devon's experience highlights how people felt unsure about how to see themselves following the death of their marital partner. Similarly, Mandy labeled the experience of losing her husband as a crisis period: "I guess you can say I had a major identity crisis afterwards trying to figure out who I was. Still trying to build that right now." These individuals experienced the unknown about who they were in the wake of tragedy. Their losses challenged them to re-conceptualize who they were, which was not an easy journey. Joel described the process of moving from certainty to uncertainty:

Before I lost my spouse, I knew who I was because I was [name of wife]'s husband and [name of son]'s dad. You know, that's kind of how I saw my role and that's what was important to me. That was the job I wanted, and now I have no idea who I am, and that's a big part of my struggles right now is trying to figure out what I am without my wife...

Individuals like Joel tried to reduce the uncertainty they were experiencing around themselves by trying to figure out who they were without their loved one. Uncertainty was a major issue that participants had to manage in order to make sense of their experiences.

Individuals also experienced a change in viewing themselves as whole or complete. The death of a marital partner forced individuals to reevaluate their identity as a part of a couple. More specifically, people acknowledged that without their spouse, they considered themselves incomplete. For example, Tamarah described significant changes following the loss of her husband: "I see myself as half of a person, half of a couple. You know, I'm not complete. Even though I'm very strong and I can make sure everything is taken care of, I don't see myself as a whole person." Participants like Tamarah expressed a view of themselves that was missing an integral element. This experience was mirrored in the experiences of participants like Ariel who said, "I just don't feel like a whole person anymore," and Emma, who mentioned, "I'm not the complete person I was before with him. I've lost some of myself." Individuals struggled to make sense of themselves without the participation of their living marital partner.

Changes in personal identity ranged from mild to major after the death of a marital partner. In general, bereaved individuals' experiences of identity uncertainty and incompleteness were rooted in how central the spouse was to their understanding of self. As such, people's experiences varied on a level of intensity. For individuals whose identities were deeply rooted in their marital relationship and roles, changes were significant and reconciling them was a

substantial process that overhauled their entire identities. Allie, for example, described experiencing a major change in how she understood herself: “I don’t even know who I am because I was so tied up with [husband’s name] so I don’t quite know who I am.” Joel had a similar experience and said, “I’m still the get up and go to work guy and I’m still [name of son]’s dad. I don’t feel anything else is really the same.” Other people, however, experienced a much smoother transition. These latter individuals’ identities were ingrained with their spouse, but the participants also acknowledged that parts of themselves were unique from the marital relationship. As such, their identity management journeys were less extensive. For example, Rachel described understanding herself in relatively the same way, but with something missing: “I don’t really see myself as that different. I just see myself without my spouse.... Just, part of me is not there.” Similarly, Hannah, mentioned less dramatic changes to how she made sense of herself: “I think I am the same person, but I’ve morphed a little bit.” She went on to use a metaphor to describe the new parts of her identity: “It’s like... you got initiated into a new club.” For participants like Rachel, it was not that every part of their identities changed, but that something was simply “missing.” Similarly, Aubrey described that she did not lose her entire identity, but recognized changes in the parts of her that were connected to her husband. She said, “There are parts of my personality that existed before I met [name of husband]. And they’re still there. But the parts of me that were created or came about knowing him and being with him... they’re gone.” Individuals like Rachel, Hannah, and Aubrey did not recognize the same degree of identity change as other participants. Learning to acknowledge what was missing and making sense of that hole drove identity reconciling experiences.

***Changing views and perspectives.*** Participants also recognized a shift in how they viewed the world. Individuals’ perspectives were an important element of how they made sense



of their personal identities, influencing how people orientated themselves as carefree, empathetic, patient, and more. The death of a spouse caused people to reevaluate how they viewed things in their lives in both positive and negative ways. People were exposed to new experiences and challenges, which emerged from living through the life-changing loss of a marital partner. As such, bereaved individuals changed their outlooks on life and reevaluated what they considered to be important after grieving their loved one. New perspectives were incorporated into participants' personal identities and acted as an element of how they made sense of their changing selves. Individuals identified with perspectives towards life that included understanding loss and avoiding trivial things, which caused participants to identify new qualities in themselves.

*New perspectives towards grief.* Participants recognized that they had no idea what spousal bereavement was like prior to the death of their partner. Enduring the grief experience, however, provided participants with unique insights about what people *really* went through after losing a loved one. Sarah, for example, explained not comprehending the reality of grief until she went through it:

I don't think there's any way you could know what this is like until you've gone through it. I didn't know. I had no clue. I was living this content, nice little existence. I was happy. I was satisfied. I was so satisfied with life. How could you possibly know?

Similarly, Ruth mentioned that, "It was nothing what I expected or what I thought it would be. It was completely different. I had no idea and when they say you just can't understand it until you're there is really true." Comments like Sarah's and Ruth's reinforced how living through loss provided people with insights into the spousal grief experience. Their identities shifted from being individuals who did not understand grief to people who did. In particular, participants

emphasized how their experiences allowed them to develop an understanding of how quickly and dramatically life can change. Paige stated, “Going through something like this changes your perspective... Life is joy and sorrow, great joy and great sorrow. And that we all, anyone, at any time, can experience loss.” Paige’s comments reflect how bereavement permitted her to see the reality of how life is neither stable nor predictable. In some ways, these lessons provided the bereaved with a unique perspective of how bad life can get. Participants compared past and future stressors to their grief experiences and recognized, as Hannah mentioned, that “it just really takes you to a new level of maturity as far as dealing with any kind of loss in life. Whether it is a loss of a job or whether it is someone, a family member or a loved one.” Participants recognized that the way they viewed the world changed after the loss of their spouse and incorporated the change into a better understanding of their personal identity.

*New perspectives towards priorities.* Participants also described shifting their priorities. Individuals recognized that losing their spouse was one of the greatest losses they could ever experience. As such, other stressors were deemed as trivial or unimportant. Individuals’ identities shifted in terms of how they viewed themselves as carefree or relaxed in regard to managing difficult situations. Kelly reflected this idea by mentioning, “There’s certainly nothing in this world that matters to me anymore. I don’t mean that I’m depressed but, like, nothing is a big deal.” Kristen spoke more specifically about this by saying he was “not letting small things bother me as much because I’ve been through the very worst so you can’t, you can’t cry about the little things, I guess.” Participants recognized that situations that were once frustrating or irritating were not always important after losing their loved one. Things that they worried about before bereavement were deemed as irrelevant. Individuals adjusted their perspective of priorities, recognizing that few things could match up with the lost spouse. Some people even

talked about how they saw things that once fulfilled them in a different light. For example, Aiden stated, “Before, I was very happy and content with my work. Now, I don’t really care. It almost seems inconsequential.” His description supports a perspective shift in his work priorities.

Additionally, shifts in individuals’ understandings of their personal identities influenced the way they expressed their social identities and communicated with others. Tamarah described how she wanted to speak to her coworkers, who were stressed about workplace issues: “I’m like, ‘Yeah, well...’ you know? ‘Suck it up, buttercup. It could be worse by far.’” In general, participants like Kristen, Aiden, and Tamarah no longer worried about trivial things in the same way following the loss of their spouse.

*Identifying new qualities as a result of changed perspectives.* Participants’ changing perspectives influenced other shifts in how people made sense of themselves. The grief process allowed individuals to grow in new ways and, in some cases, see themselves with fresh eyes. More specifically, participants’ new outlooks on life altered the way they saw themselves in terms of patience, confidence, and compassion. Patience was considered an important element of how people interacted with others. After realizing how short life can be, bereaved individuals shifted in the amount of patience they had for others. Participants who struggled with the fact that others did not share this view felt a decrease in their levels of patience, especially for people who took things for granted. Allie realized that she had far less patience after her husband passed away, but tried to make up for it:

My first reaction is not to be [patient] and my first reaction is to like shake them and make them realize that we’re all not here forever and this time is not promised and please don’t complain to me about your mother, your husband, your whatever. I have less

patience, so I am less patient with people, but I make an extreme effort to be more so almost to compensate.

Others took the opposite approach and saw themselves as being more patient than they were before. Lois mentioned simply, “I am more patient.” Patience grew for individuals because they realized that life is short (i.e., change in priorities) and did not want to waste time on negative situations. For instance, Nathan described how his patience grew following the loss of his wife: “I think I’ve got a lot more patience now than I had before. Things don’t bother me as much. I live a slower paced life.” Nathan’s experience exemplifies how people no longer allowed trivial things to bother them in the same way, which helped them to develop a greater degree of patience. Patience was an important attribute change that people saw within themselves.

Changes in perspectives also influenced how individuals understood themselves as confident and capable. Following the death of their spouse, people occasionally felt a transformation in how they were able to approach their daily lives. When perspectives towards understanding grief were more negative, individuals like Emma felt a drop in their confidence: “Somehow, not having to do things for him [husband] any longer and stuff, I feel like I’ve lost a lot of self-confidence in my general life.” Confidence decreased for individuals like Emma because they no longer were able to successfully complete tasks and roles (e.g., caregiving) after their spouse died. As such, they held a more negative view towards the reality of bereavement. Whereas some people felt a decrease in their abilities, some people saw an increase in their confidence. Participants described how confidence grew because they were able to recognize their own abilities and important qualities. Their priorities shifted to a more self-positive approach. For instance, Naomi described her new outlook on herself and her life on her own: “I have more self-esteem, more self-confidence, and I can do this, you know? I don’t have to have a

man in my life to survive.” A similar sentiment was expressed by Leah, following the death of her partner: “I’m probably a more mature version of the same person I was before I met her other than a little better. Little better, a little more capable, a little more calm [sic]. Able to chase life.” Individuals were able to see themselves in a new light following the loss of their partner and recognized that they could successfully make it on their own.

Finally, individuals saw a change in their compassion towards others. Perspectives towards people evolved because participants understood that life is too short to worry about frustrations or to be cruel. Many bereaved individuals described feeling more generous after going through loss. Lois illustrated her changed compassion simply by saying, “I am more generous.” People recognized how short life was and how important it was to be kind to others. As such, participants saw themselves as growing up and become less selfish. Allen felt a change in himself: “It’s still like I’ve become more of an adult. Not as selfish. I’ve seen a side [of myself where I am] giving people breaks more often.” Going through a grief experienced allowed people to be more compassionate about others. Participants tried to slow down and see friends and family members with fresh eyes. Devon described how he attempted to really connect with people in new ways after his wife passed away: “Somebody would tell me their name and it would be in one ear and out the other. And now, I’m making an attempt to remember their names.” These kinds of qualities altered the ways that people saw themselves compared to before the spouse passed away.

**Reconciling social identity.** Participants also reconciled changes in their social identity. Individuals’ social identities were defined by how they were seen by others within their social networks. People enact certain social identities in interactions where they attempt to portray themselves in a specific way (e.g., a good person, a student, etc.). For bereaved individuals, their

grief status acted as an overwhelming part of their identity for many audiences. As such, after spousal loss, participants perceived a shift in how others viewed and treated them. Friends, family members, and acquaintances interacted differently with grieving individuals because of their new bereaved status, thus highlighting a change in their social identities. For instance, Mark said, “To some people, I’m not that same person that I was six months ago, or a year ago, or even two years ago. Things have changed.” Social network variations included changes due to the loss of the spouse (and thus the loss of an identity as part of a couple), as well as unexpected and undesired changes in how often people interacted with the bereaved. Naomi outlined how her social identity changed after the death of her husband: “I think they see me differently cause [name of husband]’s not around.” Similarly, Michael described the depth and breadth of how people interacted with him differently:

My grief support group counselor made a comment on how grief will completely rewrite your contact list, and it does. You’d be surprised at the number of people who were your best friends and now no longer have any contact with you. And then there are those people who you never dreamt would be there for you that come out of the woodwork.

The changes in social networks influenced how people saw themselves as a part of families, friendships, and other social groups, thus contributing to participants’ need to make sense of their changing social self.

Participants had to manage multiple changes in how others viewed and treated them. Individuals largely attributed these changes to people’s recognition that the bereaved was no longer physically associated with the spouse or the marital role. Tara, for instance, explained the changes she experienced as a cultural phenomenon:

I just feel like I've been put into a category here and I have been somewhat ostracized from society because everything in this, it's like Thornton Wilder said, "We go by twos—two by two..." Just thinking about that now, it's probably been embedded there for a while, but that's how our society is grouped. Whether you'll be two women, or two men, or two married couple—female, male, there's not much integration for widows and widowers.

Tara, like many others, felt ostracized from her social networks. She recognized that her social identity had changed in some of her interaction circles. Similarly, Allie described a slight change in how people acted towards her:

I think that people don't know how to treat me. I have some people who want to treat me with kid gloves and then I have those that want to smother me and then I have those who want to ignore me. And... that other me... wants to scream out and say I'm still here.

Naomi had a parallel experience of identity change, explaining, "I think they see me differently cause [name of husband]'s not here." Allie and Naomi's examples illustrate how bereavement altered their social identities, thus influencing how people interacted with them in minor ways. Individuals described how they felt disconnected from the groups to which they formerly belonged, such as groups of couples. In such cases, participants' changing social identities (e.g., no longer part of a marital dyad) prevented their inclusion in social interactions. Hannah described how she felt alienated from her couple friends by saying, "Because you don't have a spouse, you're not included in this group anymore." As a result of their bereavement experiences, participants recognized that some people saw them differently. No longer were they a wife or husband; rather, they were now widows and widowers. As such, others interacted with

bereaved individuals in changed ways. Mark explained how he understood why people treated him differently after he lost his wife:

I think I make them feel very uncomfortable. I'm a reminder of what they may face one day. Well, I shouldn't say may face—will face. One of them is going to die before the other and they will be alone, and that frightens people.

Participants acknowledged that their interactions with others transformed in various ways. Individuals had to reconcile two major categories of change: decreased communication and increased communication from others.

***Decrease in communication.*** Some social networks reacted to participants' changed social identity by decreasing interactions and topics. Bereavement acted as an event that partially defined individuals' social identities, which made other people uncomfortable or simply unsure of how they should interact. As a result, social network members treated participants differently by decreasing communication. Participants felt that the loss of their spouse was a major blow to their social connections and their social identities. For instance, Joel described how he disliked how people saw him differently: "Other people... I work with, they're very uncomfortable, some of them, and even talking to me, and I have to approach them and say you know 'It's still me... Just my wife died. That's all.'" The death left them without people who wanted to listen or offer support. Jodi described her experience as a major shift in her social identity by saying, "Once you're widowed or single your whole life is redefined. You lose friendships. You lose couple friendships. You're not invited to stuff." Declining communication from others reinforced participants' perceptions of identity change.

Social network members, including formerly close family members and friends, often avoided the bereaved spouse. Lois described how people simply disappeared from her life



following the death of her husband: “Lots of people also just fall away. Even people who are close to you, super close to you even, they will fall away. And that’s one thing that’s hard.”

Individuals sometimes experienced very literal avoidance in their daily routines, as well.

Michael, for instance, said after the loss of his wife that “I’ll see people I haven’t seen in a long time at the grocery store and they see me and they turn around and go running in the opposite direction.” Friends, family members, and others avoided bereaved individuals because they perceived a change in participant’ social identities. As a result, social network members felt uncomfortable or uncertain as to how to interact with individuals following the loss of the spouse and decided to avoid interactions. Allie described the thought process her friends went through and why they saw her differently: “We’re not quite sure if we say anything if she’ll break out in tears, which I never did, but they weren’t sure.” Similarly, Susan described how people avoided her due to negative perceptions that her identity had changed:

Family members don’t want to talk to you because you want to talk about your husband.

Couples don’t want to be around you because you’re single now and they don’t want you to take [their] husband. And you just become, you know, sometimes you become a recluse and just sit at home by yourself.

Susan went on to describe that “after 34 years of marriage and all of the relationships and friendships you acquire, you lose most of them.” Allie and Susan’s experience illustrate how social network members avoided bereaved individuals after seeing them in a new way. For most participants, this avoidance was evaluated as a negative occurrence. Devon mentioned, “There’s a little bitterness in the friends that we had as a couple that are no longer available to me.”

Individuals like Devon wanted more communication and did not like that people treated them differently. For a few, however, the decrease in communication was both wanted and self-

inflicted. Aiden, for example, said, “I’m tending to isolate myself more. I don’t want to talk to people a whole lot... I just, I want to be alone and, and deal with this concept myself.” Aiden’s experience exemplifies how some people recognized that they *had changed* and wanted to remove their social presence so they could grieve on their own. As such, evaluations of the decline in communication and changes in social identity were different depending on the person.

Other social network members dodged certain topics when communicating with the bereaved. Friends and family members recognized a change in participants after loss and buffered their communication to avoid upsetting them. People avoided talking about three major subjects in conversation with the bereaved that were considered taboo when conversing with a bereaved individual. As Aiden mentions, “A lot of people... avoid the subject of [name of wife] or their spouses or death.” For most individuals, the avoidance of these topics extended throughout all parts of their social networks. First, people avoided bringing up the deceased. Rebecca described noticing the avoidance in her conversations with others: “I know people are avoiding. It’s like the white elephant in the room. People don’t want to bring him [Rebecca’s husband] up.” Similarly, Ruth noted that “nobody really brings [name of husband] up to talk about him. That’s kind of a taboo thing I guess.” When people did discuss the deceased spouse, they would only discuss positive topics. Naomi mentioned, “They don’t bring up any of the bad. They just bring up all of the good, about all of the good times and stuff.” Additionally, people avoided topics related to their own marriages or partners. Rebecca described how people avoided telling her both positive and negative things about their relationships: “I think that people even in my family have been reluctant to talk to me about good things happening in their families or their spouse.” Finally, people avoided talking about death when engaging in conversations with the bereaved. Joel recalled a conversation with his coworkers when one person used the word

'death.' After the person said it, Joel described that "he had this look like, 'Oh my God! I said the D-word!' It's like, 'It's all good. People die. It's what happens.'" Each of these examples illustrates how social network members changed their communication styles to buffer certain topics related to bereavement. Participants recognized that friends and family members saw them in a new way, which influenced how they interacted with the bereaved. As such, social circle members avoided subjects that they thought would upset the grieving individuals.

***Increase in communication.*** Participants also noted that social networks increased interactions as a result of their changed identity. Individuals described how distant friends and acquaintances started contacting them and inviting them out. Joel, for instance, mentioned how he started getting requests on social media from new people who had known his wife:

I started immediately just getting tons of Facebook friend requests... like, high school friends of my wife's... and they send me pictures of them with [name of wife] when she was young and stuff and I loved that and... tell me these great stories about... her life and that has been a very cool new thing... that has happened.

Similarly, Sarah described how people she was not close to offered her support: "people came that I never saw. Like, they started showing up." In Sarah's experience, people started showing interest and care towards her. Social network members reacted to participants' new bereaved status and tried to offer support in return. Others described getting closer to certain family members and friends. Hannah mentioned, "My older brother was always sort of distant, but we've been in touch a little more than we had been." Similarly, Devon described getting closer to his son's friends following the death of his wife: "his friends, we even became a little closer. His friends and I. Because they took it very hard." In general, bereavement was able to bring some relationships together, thus changing how people identified in their social relationships.

Specific communication topics and styles also increased from social network members. The grief experience acted as a catalyst for altering the behaviors people enacted around the bereaved. Friends and family members reacted to changes in social identity by trying to act more positive and caring. Participants described how some people would ask more questions about how the bereaved was doing in terms of life and grief. Aiden described how people close to him increased questions of care: “The closer they are to me, the more concerned they are and the more they seem to be asking, ‘What can I do to help?’ ‘What’s wrong?’” Positive communication styles also increased from individuals. Leah talked about how her social network members started being more positive in their interactions after she lost her spouse: “I think they’re a little nicer, actually. A little kinder. More forgiving.” Ruth had a similar experience, where communication became a little easier: “They’re a little bit more understanding with me I think.” Social network members altered their communication to be more caring and positive following a grief experience to support the bereaved individual.

***Degree of social identity change.*** Changes in social identities ranged from minor to major. Individuals’ degree of change was largely dependent on how much participants evaluated others as treating them differently. Participants who described minor social identity changes reported that friends, family, and others treated them in relatively the same way. Lydia, for instance, described how her friends saw her mostly the same: “I think I’m the same to them, just, you know, part of me is gone.” People like Lydia either experience few actual changes in how people interacted with them or else did not perceive interactions as different. Other participants, however, recognized that their social identities had changed based on their evaluations of the way others treated them. Mandy mentioned how her loved ones saw and interacted in new ways around her:

They definitely treat me different, but a lot of it is because I think I'm different, and they don't know. Some of them have known me for a long time, and they don't know [who] that 'me' is right now, without a spouse, and they're treating me different.

Participants like Mandy described how people were unsure about who she was after losing her husband. They shared her uncertainty regarding parts of her identity, which influenced new social behaviors towards her. Additionally, internal and external grief aspects played a role in the degree of identity change, which will be described in subsequent sections.

**The interaction of personal and social identities.** Participants did not reconcile their internal and external identities in isolation. Instead, changes to personal identity frequently influenced changes in social identity and vice versa. More specifically, as people saw themselves changing internally, they frequently also saw changes in their social identities. For instance, Sarah described how her personal identity changed and how she enacted the changes in her interactions with others:

Before he passed away, I was always upbeat... pretty jolly... I felt really secure and stable... After he died, I was much more emotional and broken about it... I felt like I was sinking... I felt like I was a drowning person and so I presented that to everybody.

Sarah experienced a change in her personal understanding of herself as a happy individual who had things under control. After bereavement, however, she chose to enact her uncertainty and frustrations in her social circles to seek out support and guidance. Participants saw that their changing personal identity provided them with a framework for how to treat others, as well.

Devon, for instance, described how he wanted to be a better person and to appear to be a better person to others:

I just try not to be such a jerk... I try to keep my mouth shut and not say something inappropriate because I have done that over the years, I've said things that weren't appropriate. And I don't wanna do that anymore. I wanna be more normal.

Devon's experience highlights how changes in personal identity influenced changes in social identity. Changes in social identity also influenced how people saw themselves on a personal level. For instance, Jesse described how her interactions with friends and family members helped her to see herself as someone who would no longer put up with negative behaviors:

I've found out who my real tribe is, and it's helped me realize... that... I will no longer tolerate things that I used to tolerate in the past. Like being spoken down to... I have no need for that anymore. I can't tolerate faults.

The way others acted around participants both reinforced and challenged their internal and social identities. The influence of others is discussed more in-depth in the subsequent sections on external issues.

### **Internal and External Aspects of Grief**

Reconciling the past and the present following the loss of a spouse was compounded by internal and external aspects of grief. Internal components, or intrapersonal influences, and external components, or interpersonal influences, played a role in how well people were able to make sense of the changes in identity they were experiencing. Stressors made the sense-making process more difficult for participants. When stressors were too great, individuals struggled to reconcile their changing identities. Participants identified a facilitating component, however, that helped them to work through the uncertainty and tensions that complicated identity after loss. The following section outlines internal stressors, an external stressor, and an external facilitating component that played a role in the identity reconstruction process.

**Internal Stressors.** Several internal stressors played a role in the way people were able to process identity changes following the loss of a spouse. These intrapersonal issues worsened participants' abilities to reconcile the changes to their personal and social identities.

Additionally, the circumstances increased the uncertainty and stress that people experienced, making it more difficult for individuals to deal with their grief. Three internal stressors were salient to participants: (a) being alone, (b) losing more than the spouse, and (c) managing multiple stressors.

**Being alone.** Participants described being alone as a prominent issue that exacerbated their experiences of change. Loneliness marked a major shift in how people made sense of themselves on a daily basis. Individuals mentioned coming home to an empty house and how that experience of solitude intensified their feelings of change and bereavement. Jesse mentioned the painful realization that she was alone by saying, "I'd wake up in the middle of the night expecting to hear him or see him getting up to go to the bathroom or something like that and you realize it's just you. And you're alone. And that's it." Jesse's experience illustrates the loneliness of realizing that the spouse was no longer physically there. Similarly, Mark described how feeling alone was a common experience among his peers:

The notion [of] coming home to an empty house I think was the most profound and what almost all of the people in my support group think sucked the most—was the notion of just there's nobody there. Everywhere you look, where she used to be, she's no longer there. And I think that's the hardest thing to adjust to.

The idea of being alone was central to the newness of participants' changed lives, and dealing with loneliness was complicated. Nathan mentioned that solitude was a major stressor for dealing with his loss: "The loneliness for one thing was... that was a big thing. Because I'd never

experienced loneliness before.” Others labeled loneliness as a painful process. Sarah described her experience by saying, “I [am] still confused to be alone. Like, it feels like someone’s skinning me alive. I can’t stand it.” Being alone provided individuals with extra time to think about their grief, their lost spouse, and the changes that they were experiencing. Linda, for example, recognized where her mind went when she was by herself:

I feel very lonely.... I find myself more than ever... when I’m not occupied doing work or doing things, thinking about stuff, kind of reminiscing. Sometimes, the bad stuff pops into my head. So those are the things that I sort of have to kinda be tough about.

Experiences like Linda’s show how being alone could bring up painful thoughts and memories, making it difficult to engage in sense-making processes.

Loneliness was oftentimes more complicated than the literal absence of people.

Participants also described a raw, emotional type of loneliness that emerged from the loss of a very close interpersonal relationship. For example, Hannah explained the following:

You do feel very much alone in and not in the respect that I guess I read about. Where it’s not social loneliness, but there is an emotional loneliness where you had a relationship with someone who has thought like you and acted like you and you were on that same wavelength, and now you stand alone on that.

Individuals like Hannah experienced a kind of loneliness that could not be solved by other people. Rather, feeling alone marked the absence of a deep, beloved marital relationship. Mark similarly described how loneliness could even exist in large groups: “Even though you go to a baseball game, you realize you’re surrounded by a lot of people, but you’re still alone.” The realization of loneliness frequently extended beyond the immediate moment. Some participants recognized that the future, too, was lonely in that future endeavors that were once shared with the



spouse were now disappointing. Deborah described her feelings by saying, “I try not to think too far into the future cause it scares me. I think if I try to think too far into the future. I just didn’t—I never imagined growing old alone.” Loneliness was something that permeated the lives of participants. It further complicated the changes people experienced to their identities by making them more aware of the loss of their spouse.

*Losing more than spouse.* A second internal stressor that influenced how people were able to reconcile changes to their identities was identifying losses other than the spouse. The physical loss of a partner was not experienced in isolation. Instead, people recognized the forfeiture of other things tangentially related to the passing of their loved ones. These losses exacerbated individuals’ perceptions of identity changes, forcing people to recognize the magnitude of how their selves and lives had changed throughout bereavement. As a result, participants had a more challenge time reducing identity uncertainty and making sense out of who they were without the spouse. Individuals described some of their losses as things they had previous taken for granted or considered inconsequential. Rachel summarized that “It’s not huge things, but it’s all kinds of little things.” More specifically, participants grieved several losses alongside the actual death of their spouse including the roles the partner played, future hopes and dreams, and daily experiences.

Bereaved individuals mourned the loss of their loved one’s roles. Without the presence of the spouse, participants no longer had the availability of a partner to perform important jobs. As such, not only did people lose their spouse, they also sometimes lost their confidant, their best friend, and their caretaker. Some of the lost roles were tangible in nature. Individuals described their frustration in no longer having someone to help perform chores and work around the house. Tamarah described her stress in having to take over her spouse’s roles:

I had to figure out how to get people to take care of the house while I wasn't there. I couldn't mow the lawn. I had to get underground sprinklers. I had to get snow removal, so like all the stuff that [name of husband] had taken care of.

Similarly, Anika reported how she missed her husband's help with taking in the groceries: "I miss having him to help me carry the stuff in." Taking on these extra tasks proved stressful, and, at times, overwhelming. Lydia, for instance, talked about having to take on extra work: "Now, it's like, well, got to do it on my own. So that's hard." Similarly, Hannah described the pain of having to sell her husband's family's land because she could not keep up with its maintenance without her spouse: "It was just too much work to keep up two places. In the beginning it was very painful for me to think that I would have to sell it. That someone else would have this place that was his." Having to take on extra roles was a stressful experience for individuals, especially whenever they could not complete the required tasks.

Individuals also lost roles that fulfilled more emotional needs. Participants reported the stress of no longer having a confidant and partner. Allie said, "I miss his guidance," in reference to the loss of her husband. Individuals relied on support and advice from their spouse, but after bereavement, people were suddenly in charge of determining their own choices without input from their loved ones. Lydia, for example, mentioned the challenge of having to make her own decisions after her husband passed away: "I always had someone to help me with decisions.... I wish he was here to help me with decisions. Now it's like ok, well, got to do it on my own. So that's hard." Additionally, participants described the frustration of no longer having someone to share experiences and conversations with. Jesse felt irritated with having lost the important confidant roles her husband played:

All the things we had, we used to have private jokes, we used to have jokes we would laugh at or movies we used to see that we would quote all the time and now I don't have anybody to share those jokes with me again. There's nobody to share those jokes with but us. Because we were the only two there and there was like all those experiences just mine now. There's nobody else on this planet that will share them.

Jesse mourned the loss of having someone with whom to share memories and jokes. Similarly, Aubrey missed being able to share her daily life with someone: "You know when you turn, and something happens to you and you want to share it with somebody and you can't. That's one of the hardest things to deal with." Rather than having a partner who serves certain roles within the family, participants had to perform the roles themselves or live without them.

Participants also recognized the loss of future hopes and dreams. Together, spouses built an idea of what the future would look like at various stages in life. Some individuals had plans for retirement or vacation. After the death of the spouse, these hopes were also lost. Tabitha described how her future was altered after her husband passed away:

You don't lose just him, which is bad enough, but you lose your life. We had, you know, plans of him retiring, and he wanted to move to [name of state]... Your whole life changes because the plans you had were us and now it's you.

Others experienced similar losses. Jesse mentioned how her plans changed: "Because now when I look into the future I don't see anything. My husband and I had plans for the future... It's like those dreams and those future plans died when he did." Participants grieved the loss of what had yet to come following the death of their spouse.

Individuals even lost part of their daily experiences and relationships. Some people described rituals that were now impossible without the existence of the spouse. Aubrey mourned a simple activity that she did with her husband and pets:

We have a swing in the backyard and I'd go out and sit on the swing. Well, he'd come walking out with a beer and come sit next to me and we'd talk to the dogs. Well, for a long time, I kept waiting for him to come walk out that door.... I mean I know he's not coming back. I know that it doesn't matter how badly I want it. How much I pray. How much I ask. How much I beg. That's one thing that I can't have back. And sometimes it's hard to deal with. To want something so much and not be able to have it.

Others described grieving the losses their children and grandchildren would bear. Nathan mentioned how he felt the sting of loss because his grandchildren would never get to know their grandmother by saying, "It probably brings up a little more grief pings than anything else. Is the fact that, you know, they're gonna be the ones that don't get to experience grandma." Many individuals grieved for the loss of the everyday experiences and relationships that were impossible without the living spouse. The loss of roles and experiences challenged the way participants tried to reconcile and make sense of their identities by exacerbating participants' perceived degree of identity change.

***Managing multiple stressors.*** A final aspect of grief that participants described as negatively influencing the sense making process was managing multiple stressors. Although the death of the spouse was recognized as individuals' primary source of stress, other issues caused anxiety and frustration for the bereaved. Rather than being able to focus on spousal bereavement, people were forced to handle other stressors. As such, having to deal with multiple problems often made it more difficult for individuals to grieve and to make sense out of the changes they

were experiencing. Participants described several stressors that they were forced to manage simultaneously: finances, deaths of other loved ones, difficult interactions, and the combination of multiple internal issues.

A common stressor that accompanied bereavement among participants was having to deal with finances. Participants were often in charge of paying for funerals and other death-related expenses. Additionally, most families lost a significant source of income when the spouse passed away. The combination of extra costs and the loss of the deceased spouse's income meant that many families struggled with debt after bereavement. Several individuals mentioned feeling stressed over having to pay for these extra costs on top of normal daily bills. Naomi described her financial stress by saying, "Finances is the biggest challenge. That is the major challenge." Similarly, Casey mentioned that it was "overwhelming... I've had a bill for \$40,000 and people threatening to do this, and I have an insurance company who says, 'No, no, we've paid for that already.'" Casey struggled to make sense of the bills she had to pay while trying not to be taken advantage of. Other participants echoed Casey's sentiments, acknowledging that financial challenges were somewhat unexpected and very frustrating. Aubrey mentioned, "My salary didn't increase any since he died. It can be stressful sometimes." The loss of a spouse included monetary expenses that increased individual's stress levels.

An additional stressor that participants often had to manage was the death or illness of other family members. Although these losses were unrelated to the death of the spouse, they amplified the grief experiences for the bereaved. Anika, whose son died not long after her husband, described the combination of the two stressors: "My son's death in September re-impacted my grief about my husband." Others reported similar experiences where losses happened in succession. Nathan, for instance, described his experience by mentioning, "The year

my wife died, she died in January, my father died in September and earlier in the year my sister was diagnosed with breast cancer.... So that was a terrible year for our family.” Several other participants mentioning losing pets, who they considered a large part of their families. For example, Emma discussed how the loss of her cat influenced her spousal grief: “I had to say goodbye to my cat. And we’d had her for many years and she was my comfort after he passed away.... And that it was like losing [my husband] all over again then, too.” The combination of grieving for the spouse and the death of a loved one was hard to bear for many individuals.

A third stressor was having to deal with difficult interactions with others. Several people described hard situations with family and friends regarding inheritance and the spouse’s belongings. It was not uncommon for families to be greedy following the death of the spouse. For instance, Allen’s family tried to sue him for inheritance from his wife. He said, “I only got the ashes back from the crematorium... and the next thing you know, I got this lawyer knocking on the door. I said, ‘Geeze, you guys. You picking the bones clean already?’” Leah had a unique experience with her life partner, as well. Although they considered themselves married, she and her partner never officially wedded. As such, the spouse’s sister tried to make a claim on the couple’s house, which was in the deceased spouse’s name. Leah described the following interaction with the sister:

When her sister found that out that the house was gonna go to [me], and [name of partner] was the one that called and set it up, her sister wagged her finger in my face and said, “[name of partner] has equity in that house and I want that number.”

Experiences like Leah’s expounded grief and challenged the ways people situated their identities within personal and social contexts. Rather than playing the role of the grieving spouse, participants had to enact social roles for taking care of frustrating encounters, like when people

tried to take advantage of them. Hannah, for instance, had a neighbor who tried to use part of her land as she was trying to sell it: “The next-door neighbor had his propane tank on the property and it took me almost a year with three letters from my attorney to get that off.” Similarly, Jesse dealt with a person trying to get her to sell her husband’s truck: “I had a vulture swarming around trying to get his hands on [name of husband]’s truck. Only a few weeks after [name of husband] died, he was knocking on my door.” These kinds of experiences, as well as others, were a major stressor for participants and challenged the way they saw themselves and how they perceived they were seen by others.

The combination of multiple stressors caused a great deal of stress in participants. Internal stressors (e.g., being alone, losing more than spouse, and managing multiple stressors) combined with each other and the external stressor (e.g., managing competing expectations), which amplified the anxiety that people experienced after loss. Individuals felt overwhelmed when problems began to add up, causing them to have an even harder time reconciling their changing identities while dealing with their grief. Nathan, for instance, declared, “It was everything kind of piled on us at one time.” Rather than just one stressor being the problem, it was the combination of stressors that caused issues. Tamarah, similarly, stated “the stress of losing [name of spouse], the stress of teaching, and it’s the combination.” Stressors were amplified by being in conjunction with each other. Participants described even happy events as causing stress. For example, Deborah talked about how a graduation was stressful in the grief context: “There was my son’s graduation. I mean there were all these things I had to go to, and my sister broke her ankle... All these things have come up.” Finances, in particular, could make a situation much harder. Linda dealt with having to pay for multiple things because she wanted to sell part of her land, but her husband could no longer help:

I needed new furnaces, I had to pay for the funeral, I had to pay for my son's wedding, I had trees that died and we had to cut them down, and getting somebody, paying somebody to cut my lawn, and landscape the house. The house looked crummy. I got new siding and new windows. So, I was doing a lot of that stuff.

Rather than dealing with a single stressor, participants had to manage multiple stressors—both internal and external—at the same time. The combination of these stressors exacerbated grief and made it harder for participants to deal with the changes they were experiencing.

**External Aspects.** External aspects of grief were sources of stress and facilitation that were rooted in interactions with others. Interpersonal and intergroup elements of social relationships influenced how well people were able to reconcile the changes they were experiencing following the loss of a spouse. An external stressor, managing competing expectations, caused participants more anxiety regarding their changes. A facilitating component, however, aided in reducing the impact of other stressors and helped individuals make sense of their identities. Two primary issues emerged from social networks, and both have the possibility of influencing the identity management process: managing competing expectations and receiving social support.

***Managing competing expectations.*** A major experience that influenced how people were able to deal with changes was having to manage competing expectations about how to grieve. Bereaved individuals had an idea of how they wanted to mourn, what they wanted to talk about, and how they wanted to be treated. Often, these expectations conflicted with what social network members expected. Competing expectations emerged from how others were not able to understand the grief process unless they had experienced a very similar loss in terms of who, what, how, and when. Participants acknowledged that people did not understand the experience



and thus had incorrect assumptions about what it was like. Lois mentioned that, in the case of death and dying, “nobody knows what to say and nobody knows what to do.” As a result, participants had to manage sometimes contradictory expectations in their interactions with others.

Social group members had opinions on what grief should look like and how long it should last. Often, these expectations did not match the reality of people’s bereavement experiences. As a result, people sometimes made rude and imposing remarks. These comments caused participants to experience intra-role conflicts about how to enact the bereaved role. More specifically, their expectations for their role as a bereaved individual did not match up with others’ expectations towards how to grieve. Role conflicts with social networks made participants feel angry and challenged the way they were making sense of their changed experiences. Allie remarked feeling frustrated with “those who want to tell me where I should be in the grieving process. And then I have to correct them and let them know it’s different for everyone.” Similarly, Paige described how she tried to reconnect with her siblings after the loss of her husband and instead received a poor reaction: “one brother didn’t even respond and the other brother responded by sending me an email that... it’s time for me to move on, it’s been six months—[name of spouse] was a nice guy but I need to move on.” Comments about the length of grief were common cause of identity conflicts among participants.

Bereaved individuals described how people tried to impose their own ideas of how to grieve properly on them. Such comments caused participants to experience role conflicts that provided stress and frustration. Allie mentioned how she received commanding remarks from social network members after she did not have a memorial service for her husband for personal reasons:

I had people that almost acted like a memorial service was a) something that you must have or b) we were crazy and I was doing horrible detriment because I didn't have it and they said my children would not have closure, and I said no, they were there. They know that their father died.

When people tried to tell the bereaved how to grieve, it made grieverers feel frustrated. Ruth said about her social network, "They're thinking I should be getting over this and getting past it. And I'm not there yet at all." Ruth then went into detail about how she was able to effectively manage the competition expectations that came from her friend who kept giving her advice to move on:

I said, "It doesn't work for me. You know why it works for you but it doesn't work for me?" And he said, kind of disgusted, "Why? Why does it work for me but it won't work for you?" I said, "Because at the end of the day, you go home and you still have your wife to hug and rub and kiss and talk to. Mine is gone. I do not have that anymore. It's gone." And his attitude changed completely after that.

Ruth's experience illustrates that when others made suggestions about how to grieve, participants managed the role conflict by either ignoring the comments or helping the person understand the reality of spousal loss.

Participants also managed competing expectations whenever the support they received from others did not match up with what they actually wanted or needed. Bereaved individuals evaluated messages as inappropriate because either they were unhelpful or hurtful in some way. Unsuitable messages included clichés and platitudes about loss. Such communication examples challenged the ways participants were giving meaning to their grief experiences and how they were reconstructing their changing identities. As Michael mentioned about others, "They've got so many platitudes and they don't understand it." Participants described a range of messages that,

while popular, were often meaningless and untrue. Michael continued his story with more examples of what people said to him: “‘At least you have the memories to look back on.’ ‘She’s in a better place now.’ You know. Excuse my French, the bullshit. The best for her is right by my side.” Aubrey described how she reacted to a common cliché: “they said that he was in a better place and I said, no, he wasn’t in a better place. His better place was with me and I walked away.” Platitudes were even more frustrating when people did not share the values conveyed through the common expression. Devon talked about the people he found the most frustrating after the loss of his spouse: “The people that said ‘she’s in heaven now,’ because both my wife and I were basically atheists, and I still am. ‘God has a plan and all that’—that would kind of just piss me off more than anything.” Sometimes, clichés came in the form of traditional forms of support. Sending flowers is a common gesture after loss, but, as Allie described, when unwanted by the griever, plants can actually be more frustrating:

When I said don’t send me flowers and stuff, somebody sent the plant. I didn’t have time to take care of the plant. Beautiful plant. The plant was dead within ten days. Didn’t have time to take care of the plant. So sometimes people do things for themselves and not what I need.

Although clichés and platitudes are common social expressions, participants described the messages as frustrating and unhelpful.

Participants also described more negative comments of support from others that were inappropriate. Social networks members, in an attempt to make the bereaved feel better, would try to offer rationalization or justification for the death. Naomi, for instance, recounted a conversation with her family member that did not go well: “My sister in-law said, ‘Well, you know, it’s for the best. You guys didn’t have a very healthy relationship anyway. So it’s for the

best....' I'm just, you know, like 'Really? Really?'" Bereaved individuals felt frustrated when others tried to offer meaning in someone else's loss, especially when the meaning was invalidating of the relationship. Such comments furthered identity conflicts for participants, who felt like their expectations for playing the bereaved role did not match up with how other people thought they should enact the identity. Individuals felt unfulfilled when people tried to give them advice or fix their problems. Deborah, for instance, discussed how others treated her at times:

I think some people are just a little bit more like, treating me a little bit more like a kid, wanting to fix things for me. Like they would for their own kids, trying to make me happy. But in trying to do that it, it makes it worse.

Experiences like Deborah's illustrate how social network members sometimes had their own thoughts of how to interact with the participants' changed identities (i.e., fix the problem), but these thoughts often did not match up with what the bereaved actually wanted (e.g., listen). Although people appreciated support at times, individuals disliked being treated like they were unable to handle their own situations.

Expectations also sometimes clashed over the amount of support or conversation provided. Many participants experienced an initial influx of support from others after the loss of the spouse, but then described how help dwindled over time. Jesse, for instance, mentioned being very irritated with how her husband's work family ignored her after he passed away:

Nobody was calling me to check up on me or to see if I needed anything done around the house and I'm like, where are all these brothers that were at the hospital and showed up to see [name of husband] and all this stuff? Once it's over, people leave you hanging.

Participants often expected more support from their friends and family members than what was given. Social network members would offer condolences and pledges of support around the time

of the spouse's death, but then would not actually follow-through. Devon mentioned, "They say they're gonna be there, but when you really need someone to talk to, they're not there." The disconnect between what people said they were going to do and what they actually did was a major source of frustration for bereaved individuals.

Participants had to find a way to manage competing expectations for how to grieve. For the most part, dealing with opposing desires was overwhelmingly stressful. Clashing expectations often caused the bereaved to feel guilty, frustrated, or worse about themselves. Having to manage how they actually grieved versus how others wanted them to grieve made it difficult for people to make sense of the changes they were experiencing, because they felt like they were not managing correctly. Sarah recounted a story of how a friend told her to not be so negative when she discussed her deceased husband. When Sarah told the friend that she did not want to talk about the issue anymore, the friend responded poorly: "She got mad at me and stomped out of the room and it was awful... Yeah, I felt horrible. I felt not only am I not dealing with grief well... but I've hurt her." Although individuals recognized that people meant the best when they said these things, the words and actions still hurt. Jesse described feeling very down by a very simple gesture of support from her neighbor:

She walked over to my dishes and started doing my dishes and putting them in the dishrack for me. And one of the things she washed was [name of husband]'s coffee cup. The last one he had used. I was not washing it. I was keeping it on the counter and she washed it. And put it up. And inside when I realized what she'd done, I was going ballistic and outside, all I could do was say "Thank you for being so helpful." And inside, I was "How could you?"

Overwhelmingly, participants felt worse about themselves after receiving comments or support that was not what they had hoped for.

Having to manage competing expectations reinforced people's observations that their perspectives were different from the perspectives of their social networks. Individuals recognized that others, who had not undergone the loss of a spouse, did not understand what the experience was like. Sometimes these differences in perspectives became apparent when others tried to offer support. Susan mentioned a frustrating example when talking with others: "I think the hardest part was when people want to tell you that, 'I know how you feel; my cousin's sister died.' Or 'my dog died last week...' No, you don't. You have no idea." Although others attempted to offer support, the bereaved were reminded of their new perspectives towards spousal loss. Social network members were simply unaware of the realities of bereavement. Jesse, for example, described the pain of realizing that the world around her was not mindful of the incredible changes she had experienced after her husband passed:

Everybody is going on about their business and your life as you've known it is over. And it's like there isn't one thing normal about your life anymore but everybody else... it's surreal. It's like you're watching a movie outside your window. It's like this surreal feeling of watching the world. You've seen it a million times outside that window and everything inside that house is nothing like it's been a million times before and it's just the worst feeling. It's hard to describe but it's the worst feeling to watch the world going on and you're stuck in this stage of suspended animation.

Other people were able to go on with their daily lives with no idea of the pain people like Jesse were experiencing. These kinds of experiences made people feel ostracized or different from others who did not share the same perspectives towards bereavement.

***Receiving social support.*** Social support helped to facilitate and relieve the identity changes that people experienced after the loss of a spouse. Most individuals reported receiving some kind of support from their social network members, although not always as much as they wanted. Helpful and positive communication helped participants to reconcile their changing personal and social identities by affirming components of their internal selves (e.g., traits or perspectives), their relationships, and their roles in their communities. Other people offered beneficial social support by expressing validating messages and by offering tangible support.

Social network members used several types of messages to validate the bereaved. Validating messages helped to reinforce participants' feelings, experiences, and relational roles. One way that social network members provided social support was being willing to talk about the deceased spouse. Participants reported that a major frustration was when people avoided speaking about the spouse. Bereaved individuals rationalized that people avoided the topic to dodge causing more pain or awkwardness. Talking about the spouse, however, was cathartic for most participants, who wanted to validate the existence and memory of their loved one. As such, when friends and family were willing to discuss the spouse, participants felt supported. Tamarah, as an example, talked about how she and her father would talk about their deceased spouses: "My dad is great because we always talk about [name of husband] and mom every single time." Kelly had a similar experience and discussed the positives of interacting with her support members: "I think my friends were very good in they would talk about [name of husband]." Talking about the spouse was a beneficial form of support that allowed participants like Tamarah and Kelly to remember their loved spouse and to talk about their grief.

Other types of validating support came in the form of reinforcing the roles and relationships of the bereaved spouse. Participants described conversations that included powerful

messages of support that helped them to feel better about their changing roles with their family and their deceased spouse. As an example, Devon discussed how his wife's sister reinforced his position within their family: "She told me that I'd always have family. That I'd always have someone. And she has been there for more, and I really do appreciate it. And, you know, I love her for that." Interactions like the one between Devon and his sister in law provided people with the validation that they needed to deal with the intense changes they were experiencing. Devon's family member helped him to still feel like a part of his family, even without the existence of his spouse. Joel recounted a similar experience with his friends:

It's been very affirming to talk with my friends and family and they were very explicit about, "You're important to us" and "We love you. We need you. We want you to do well." ... "Here's support. Whatever you need," kind of thing, and that kind of bolsters my self-limit a bit there... I'm more than just [name of son]'s dad and I'm my sister's and brother's brother and my dad's son and my aunt and uncle's nephew and, you know, I have all these other relationships that are valid, useful, important.

Whereas some helpful messages reinforced people's roles in their families and friend groups, other messages helped to support how much the deceased partner loved the spouse. Kelly, for example, described a message that she received from her husband's best friend:

He said to me... "I knew [name of husband] a long time. ... I never saw [name of husband] happier than when he was with you." He said, "He finally found the one." And he thanked me for that for making [name of husband] happy and that made me feel good.

These notable conversations helped participants to feel secure within their relationships despite the massive changes they were experiencing.



A third type of validating message offered support for participant's abilities and grief experiences. These conversations provided reinforcement that the individual's grief was normal or typical, which allowed people to feel better about themselves and their situations. Friends and family members could validate grief journeys by helping the bereaved feel like they were not crazy during grief. For example, Sarah, pointed out the messages that helped her the most: "‘You're normal.’ I can't hear that too much. That's what gets me through actually. Is having someone pat my back and say, ‘You're normal... You're okay. You'll get there.’ You know, ‘Don't worry. You're ok.’" Similarly, Aiden described how important validating types of messages were to him:

The close friends and my mother that I've been speaking with most about it have been very supportive and have pointed out the things that I'm doing well both for myself and for my daughter and with the arrangements. And that, that really helped because, like I said, I'm having issues with self-doubt, and having that reinforcement that I am doing the right thing is really helping.

Reinforcing grief experiences was vital, especially for people who were struggling to make sense of their grief and identity changes. Aiden went on to describe how he really felt helped by these positive messages, saying, "The friend that I mentioned said that he's never seen anyone deal with this as well as I have. ... It was just immediate... boost to my self-confidence and really picked me up at a low point." Such messages reinforced the positive qualities of participants' identities. People also found it comforting when people grieved alongside them. For instance, Rebecca felt at ease when her husband's brothers grieved with her, saying, "Having people grieve with me was really comforting to me. Knowing I wasn't alone in that." Hearing messages and grieving alongside others helped people to feel normal in their grief, which helped them to

feel better about playing the grieving role. Additionally, people felt like they were making positive choices for handling changes.

A final validating social support message came from individuals who simply listened. Participants valued friends and family members who were able to simply take the time to hear without judgement. Tamarah, for instance, said, “I have my one friend that I talk to and she’s good because she doesn’t give advice. She listens.” Individuals found support in people who were willing to allow them to vent or cry. The most helpful friends were able to listen and to recognize when support was needed or when people just wanted to be left alone. Aubrey found peace in the interactions she had with her friends who made her feel comfortable:

If I’m having a good day, they don’t make a big deal and say, “Oh you’re having a good day.” They just take it. If I’m having a bad, they offer a shoulder. They’ll give me a hug. ... They’ll listen.

Similarly, Kelly described how her husband’s best friend would invite her out to talk: “His best friend would call me weekly and invite me out to dinner. ... And he would just let me talk.”

Several participants mentioned the value of being able to talk about their grief with people who listened and cared. As Ruth said, “That arm around your shoulder, that chit chat... makes all the difference in the world.” Listening and empathy were helpful for bereaved individuals to feel validated in their identity and grief experiences.

Social network members also helped provide instrumental help to the bereaved.

Instrumental help included support for getting tasks done around the house or at work. Deborah, for instance, described the various types of help she received following the loss of her husband, saying, “People were bringing food and. ... I would go and see that somebody had trimmed my blueberry bushes. ... They just did it, you know, which was really sweet.” Such interactions

helped participants to take care of important roles that they struggled to complete themselves. Participants mentioned how people would come to their houses to help with tasks that the spouse used to do, and how helpful that was to them. Other people talked about how their work places collected money or made food for them. Aubrey mentioned how her coworkers helped her family when she needed it: “They took a collection and they paid for [name of husband]’s cremation. For me.” Rebecca had a similar experience, saying, “The place I was working had three different facilities and... each facility gathered food and money and stuff and brought them to the house. It was amazing how much people did.” Tangible support helped individuals avoid having to take on new roles while trying to grieve their loved one. As such, this kind of help facilitate identity change by relieving stressors. Participants felt cared for when people reached out to them. Instrumental support helped people to maintain their daily lives in the midst of dealing with the death of their spouse.

Instrumental support was often given in conjunction with emotional support. Although instrumental support primarily took care of tangible needs, it also helped people to feel validated. Often, when social network members offered to complete tasks or to help around the house, they explained how their actions were to help the bereaved feel better. For instance, Jesse described a particularly meaningful situation with a friend of her late husband. After the friend helped her with some chores around the house, she tried to pay him for his services:

And I said, “Please let me pay you for doing this.” And the guy said “Are you kidding me? Do you know how many credits [name of husband] has left behind? The credits are coming back to you.” And somebody saying something like that just made me feel so bolstered and I was so bolstered and lifted by that. Somebody does appreciate him as much as I do. Finally, I’m finding somebody who doesn’t mind talking about [name of

husband] and actually as loved and appreciated him as much as I did. You know, not the same way, but to say that to me was one of the kindest things that's been said to me since he's died.

Mandy summarized how important help was to her: "So many people try and reach out to take care of me and help check on me that never had to. And that's important to me." These kinds of interactions reinforced participants' identities as important parts of various loving relationships. Although instrumental help directly assisted people in everyday tasks, it also helped to meet some individuals' emotional needs since it demonstrated care and affection.

### **Strategies for Reconciling the Past and the Present**

Individuals utilized several strategies to reconcile their past and present identities. Additionally, techniques helped to mitigate the impact of stressors on the sense-making process. Some methods helped to increase the positive effects of social support, as well. Through various strategies, participants were able to find meaning in their changes and to reestablish their identities. Individuals used various combinations of techniques, ranging from using one to all of them. Participants employed six primary strategies for reducing stressors and making sense of change: (a) staying busy, (b) continuing the relationship, (c) finding benefits, (d) comparing experiences, (e) seeking similar others, and (f) buffering.

**Staying busy.** A major way that people dealt with the changes occurring to their perspectives and social networks was to stay busy. Staying busy was a method of distracting from dealing with grief and loss. Participants engaged in work and various activities to avoid having to process the changes and emotions that they were experiencing. Allie described how she attempted to stay busy during difficult days: "What I'll do is throw myself into things to keep my mind busy, especially when I am trouble dealing with it [grief]." Rather than having to

actively pay attention to the loss, individuals crafted ways to focus on something else. They were able to preoccupy their mind with something that was not related to the death of their partner. Sarah also mentioned that she did several things to keep from thinking about her husband: “The day he died, I took the dog to the van and then a three-hour hike. I just walked out the back door and started hiking and I never stopped. I started looking for a job, just kept busy.” Staying busy and distracted helped some people feel like they were able to make it through the day. Rather than weeping, staying busy gave participants a task to focus on. For instance, Tabitha described how she started taking care of their house and land: “I just did things that normally he would do, and... it just helped me to stay busy.” Staying busy was a frequent strategy for people to deal with the massive changes they were experiencing. By distracting themselves from what was going on, they were able to avoid having to deal with the pain of thinking of their spouse, the changes they were experiencing, or other internal or external stressors.

Distracting was only partially effective for dealing with changes. Some people were able to successfully integrate staying busy with meaning-making processes. Emma, for example, described how she kept busy by interacting with others. She said, “I’ve heard of people who’ve lost their spouses just... curling up and shutting themselves off from things, and I’ve really never done that. But like... I pushed myself to keep involved.” Unfortunately, staying busy sometimes only postponed having to deal with the loss. For instance, Aubrey mentioned how staying busy was only temporary for her: “My best friend spends Saturday with me and we go and do stuff. And I don’t think about not having [name of husband]. It alleviates some time, but it still comes back, because it doesn’t go away.” Although staying busy helped to avoid dealing with the stress in the moment, some participants still had to find a way to manage changes that they were experiencing in their identities.

**Continuing the relationship.** Individuals engaged in meaning-making that helped them to reevaluate their changing identities so that they could continue the spousal role and its accompanying behaviors. Rather than treating the death of the spouse as the end of the relationship, participants clarified that their marital partnership was still ongoing, albeit in a different way. As Aubrey mentioned in her experienced, “In fact, I still feel married to him now.” Individuals such as Aubrey acknowledged the actual death of the spouse but held an orientation towards grief that suggested that the partner still existed and was still an ongoing part of participants’ lives. People continued the relationship in two primary ways: continuing communication with the spouse and celebrating the spouse’s memories.

Some bereaved individuals maintained an ongoing relationship with their spouse. To these people, the spouse was still present, but in a much different way. For a few participants, the ongoing relationship was a very spiritual association. Aubrey, for example, described her current relationship by saying, “[Name of husband] and I have a very strong connection.” Similarly, Ariel stated, “I don’t know if he took a part of me or I kept a part of him, but I feel we’re still connected.” For individuals like Aubrey and Ariel, the marital relationship was still ongoing. Several participants told unique stories of finding the spouse’s presence through strange coincidences. For example, Aubrey and her husband had a special inside joke about roosters. When traveling with a friend to a part of the world her deceased husband loved, she had a unique experience in their hotel room:

So, we got into our room and it was decorated really nice and it had this beautiful roman shade in the window. Well I said... let’s pull the shade up so we can let some light in and see you know what we could see out the window. Outside the window, mind you the

room was on the fourth floor, there was a 20-foot copper colored rooster outside my window. Right outside my window.

Aubrey, like others who experienced similar situations, attributed the coincidence to their beloved spouse. A common metaphor used by participants was referring to their spouse being in the other room. Allen described a saying that had helped him manage losing his spouse: “What it says is that you’re not gone. You’re just in another room.” Similarly, Sarah mentioned how she thought about her husband by saying, “He can’t really be gone. He’s gotta be in the next room.” Participants felt that their loved one was close by, whether physically or spiritually. The experience of being spiritually tied to the spouse was not constrained to religion or spirituality, either. As Devon described, it happened for people with varying beliefs: “I know this sounds weird coming from an atheist, but I believe she exists somewhere in a different way and... that makes me feel good for her and for myself and for my son.” Regardless of spirituality, people continued to maintain a connection with the spouse.

Individuals sometimes directly communicated with their spouse. Participants talked directly to their spouse with the idea that the partner could hear them, even if he or she could not physically respond. Anika described talking to her husband’s picture: “So I talk to his picture a lot.” Additionally, Paige mentioned how she wrote letters to her spouse: “Our wedding anniversary I wrote a letter to him expressing my thankfulness for our time together and also talking, reflecting on our marriage.” Paige described how writing letters to her husband helped her to manage her grief and understand her changes, as well. For others, these conversations occurred through dreams. Naomi noted, “[Name of husband] visits me in my dreams. It sounds weird, but he does.” Individuals like Naomi were able to connect to their spouse in a unique way that maintained their relationship.

Others continued their relationship with the spouse by celebrating memories. Talking about the spouse helped to maintain their memory and celebrate their lives. Deborah mentioned that she often talked about her husband: “I don’t want to feel like my husband’s forgotten... And... he’s part of my life so of course when I’m telling a funny story about something a lot of them are about him or our life together.” Participants described how they would try to live for the marital partner in order to make him or her proud. Aubrey, for instance, tried to live her life based on how her husband would see her: “When I think of him watching me and know that he’s proud. That he would be proud of what I’ve done and how I’ve continued. It helps a lot.” Others tried to remember that their spouse lived on in new ways. Devon described how his wife was a part of his entire family: “She’s in each of us. She’s living on through what we remember her to be.” Making sure the spouse was remembered was an important part of the lives of participants. Still others continued their spouse’s memory by accomplishing the spouse’s hopes and dreams. Deborah, for instance, described traveling a place that her husband had always wanted to visit:

I spent two weeks there and I did some of the things that he was wanting to do with me. Like there’s this big huge hill called [name of landmark] that he wanted us to climb together and I climbed it. I just wanted to do that. To climb it for him and for me.

Through simple things such as talking about the spouse or doing things for the spouse, people were able to maintain a connection with their loved one and their memory.

Continuing the relationship with the spouse was an important strategy for people to make sense of the identity changes they were experiencing. This technique allowed individuals to recognize that their relationship was changed, but that it was not over. As such, participants could still incorporate the relationship into their personal and social constructions of themselves. In many ways, people still considered themselves as married. Rather than having to completely



lose the spouse's role, they were able to redefine it in a new way. Participants sometimes still maintained a strong bond with the spouse, looking towards him or her for advice and support. These interactions allowed participants to adjust to the many changes accompanying grief.

**Finding benefits.** A third way that individuals attempted to reconcile the changes in their identities and to manage grief was to find positives in the death of their spouse. People found themselves trying to find meaning in their loss experiences. Over time, participants could rationalize specific benefits in the loss of the marital partner and their experiences of bereavement. Often, however, these positive feelings were restricted by guilt about feeling happiness without their loved one. Finding benefits allowed people to make sense of the changes they were experiencing by giving meaning to the reconstructed identities. Participants found benefits in the details of their loved one's death, new activities, and positive lessons.

First, individuals found benefits in the details of their loved one's death. Participants discussed how important it was to them that their spouse passed painlessly and quickly. Recognizing that the loved one did not suffer helped participants to make sense out of the death and to reduce guilt for reconstructing identities without the spouse. Ruth mentioned of her husband's death, "He went fairly quick and fairly peaceful for him. Sucks on my end, but it was good for him." Others learned from medical professionals that their spouse felt very little pain. Lois, for example, said, "It was instantaneous, cause it just happened so fast. Which is good. That's a relief, you know. It was fast for him. Nobody wants it to be slow." Knowing that their spouse did not have to suffer was a point of relief for participants. Although they would much rather the spouse still be with them, bereaved individuals were appreciative that their loved ones did not have to suffer. Other people were happy that their spouse died doing what they loved. Tamarah, whose husband died on a motorcycle ride, mentioned the possible positives in her

loved one's death: "But out doing what he wanted to do on a beautiful day with no wind and 70 degrees, and... nobody else had caused the accident so that... is actually a good thing."

Participants acknowledged the positives of how their loved ones passed away compared to alternatives. For instance, Lois described how she preferred her husband's death at home as opposed to other possibilities:

I am so thankful that he was at home when he passed away, because I had always worried about his heart, and I'm really thankful that he was there, and wasn't at work. And he usually was up really high when he was at work.... And I'm really thankful it wasn't at a cub scout meeting in front of all the boys. I'm really thankful that God let him be home with us, because as horrible as it was to see that, it would have been worse to not see him when he passed away.

Similarly, Jodi was able to invite family and friends to say goodbye to her husband. This helped her feel better that her spouse was able to hear messages from his loved ones before he finally passed:

I'm so happy I did this... because I really do think he could hear us even though he was in the coma. I had each person, there must have been at least 50 or 60 people here in [name of city], each have a special time alone in the room behind closed doors to talk to him and tell him, you know, just talk to him. Say their last goodbyes to him individually.

Although the details of the death made participants sad, they were able to find some benefits in know that their loved ones did not have to suffer for long. These benefits acted as a buffer to help bereaved people see their identity changes in a positive way.

Individuals also found a positive in that they were able to pursue new things. For some people, the death meant having the time and money to be able to do follow new opportunities.

Participants often acknowledged the effort and the expenses related to a spouse who died from drawn-out illnesses. When the partner eventually passed, bereaved individuals could use their extra time and money in new ways. Joel, for example, described his bitter-sweet benefit following the loss of his wife:

The medical expenses have been killing us for 20 years, but I can actually start saving for retirement now, but... I'd be happy to trade all that in to have her back, but you know, I can think of my son and send my son to a better school now.

With the money that he saved from having to pay medical bills, Joel was able to consider a better life for his son and himself. Joel's experience highlights how people recognized new possibilities for themselves including their reconstructed identities. Others were able to move on from stressful roles as care takers. Naomi described her experience by saying, "At first it was a relief, because then he wasn't sick no more and... it sounds selfish, but I wasn't having to take care of him no more." Naomi went on to mention the relief of being able to make decisions for herself: "I only have to make decisions for myself. I don't have to worry about what anyone else thinks. It doesn't matter what anyone else thinks.... That's kind of nice." In turn, participants had the freedom to pursue new hobbies or goals, thus providing a positive outlook on their new selves. Hannah found herself able to do new things following the loss of her husband:

I feel maybe freer to pursue things that I always wanted to do, that maybe he didn't have an interest in... So, I'm actually getting involved in activities that I probably wouldn't because I was a married couple.... I have all this time by myself now, it's all mine. And that realization that you can do whatever you want is, hasn't quite registered with me yet.

Similarly, Deborah mentioned, “You really do have more time to do the things that you personally love to do.” Participants found meaning by recognizing the positives in being able to make their own decisions and pursue new hobbies and goals.

Some individuals recognized the beneficial lessons that they learned following the loss of their spouse. People used their experiences to remind themselves to be better than they were before. For example, Kelly described working hard to give her life purpose:

I try to make his death have a purpose. And that purpose is for me not to give up and for me to wake up every day and realize that [name of husband] died. I didn't... That's the purpose I try to give it... to live every day to the fullest.

Individuals like Kelly worked towards reconstructing their personal identities by making the most out of life and not waste it. In some cases, people worked to become more faithful and spiritual in hopes of making sense out of their experiences. Lois described how the loss of her husband brought her closer to God:

I put on the Christian music, and that was the day I started reading the bible from the beginning.... and I knew that God was in control of the situation, and that this time around I had to do it right.... I knew that God had something really, really great for me.

Individuals like Kelly and Lois focused on seeing the positives that came out of their loss. In their cases, they were able to start living life more purposefully.

Many participants also recognized the positives in their social networks. People acknowledged that the death of the spouse brought them close to others, thus expanding and reinforcing their social identities. Deborah, for instance, described a positive that she experienced following the loss of her husband: “I sure hate to have my husband die in order to experience it, but... I wasn't aware of how beloved we both were to people.” Others had similar

experiences of finding benefits in realizing how much others cared about them. Jesse described making a new friend she otherwise would not have: “So I do have a new friend in the neighborhood who I didn’t have before, so it was kind of like a blessing in disguise.” Some individuals saw benefits in much larger areas of their social groups. Paige, for instance, had a very positive reaction from her new community:

One of the gifts out of the tragedy was that a new community for us, cause we only lived here two years, really responded to the tragedy; there was a core group at his work who supported us in unbelievable ways, and my neighbors, they put up friends who came from out of town and picked up from the airport and the train station, you know offered food and all those things. And then I have a book club that I am a member of, you know, and I was a new member, and they just did similar things. So, the gift at the end of this tragedy was that I had a much tighter community then what I started with.

Participants dealt with the changes to themselves and their social networks by viewing the differences in a positive light.

**Comparing experiences.** Individuals compared their experiences with others to make sense of their own situations. Some people would compare themselves to others who had lost a spouse, and then use that evaluation to illustrate the benefits that came from their own experience. Others would compare to people to explain why their own situation was more difficult. Each of these assessments was an attempt to better understand individual circumstances and to normalize grief. Bereaved individuals made comparisons to (a) other people’s situations and (b) their own experiences with different types of losses.

Participants frequently compared themselves to others to better understand or normalize their personal circumstances. Examining other people’s situations helped bereaved individual

feel better about their own situations. For example, Rebecca compared herself to a person in her grief group: “There’s one guy... [and] they don’t know why his wife died. She just died. And they still don’t have any answers and I thought, gosh, how horrible would that be? To not even know.” Rebecca was able to understand the positives in her own experience by comparing herself to others who did not have answers about the deaths of their spouse. As such, she was more easily able to find meaning in her own changes. Support groups were an effective source of comparisons for many people. Nathan described the usefulness of being able to compare himself to others in his grief group: “You find out that you’re not as bad off as you thought you were and... a lot better off than some of them.” Similarly, Nathan mentioned that hearing stories from others allowed people to feel normal and to make sense of their changing situations and identities:

It puts everything in perspective to the point that you feel like you are absolutely at the bottom of the world and you find out, well, maybe I’m not, you know? There’s a lot of people in this group that are a lot worse off than me.

By comparing themselves to others, people were able to recognize that their experiences with managing grief and identity change were normal.

Comparing experiences also helped some individuals develop a sense of meaning and understanding behind their losses. People could liken themselves to others and find reasons or benefits for the circumstances of their spouse’s deaths. As such, comparing to people helped individuals to find benefits in their own situations. Rachel, for example, had an experience of relating herself to others within her support group:

Listening to some of the other circumstances of other widows and widowers and it has made me realize that even though [name of husband] is gone, we had some time to do

some preparation.... I think about the women that are there whose husbands had massive heart attacks: there one minute and gone the next. I mean, I just cannot even wrap my head around that.... So, in that way I'm grateful.

People like Rachel who dealt with drawn-out illnesses compared themselves to others who experienced very quick losses and were able to see the positives in their own circumstances. On the other side, however, people who dealt with quick losses saw the silver lining in their own experience by comparing themselves to others. Rachel, for example, described listening to a story of a woman having to put up with rude family members: "Her family [was] telling her everything she did, 'Don't do that.' 'Don't do that... ' I cannot even imagine what that poor woman went through. So, in some ways... he [name of husband] wasn't sick for long is maybe a blessing." Participants compared themselves to others to make sense and find benefits in their own situations. Comparisons also gave individuals goals for how they wanted to grieve. For example, Allie described how she wanted to do things differently than the people she met in an online grief forum: "I read that people say that all that people do is go to work and come home.... And I want to make sure that I still connect with my friends or even make new friends." Comparing themselves to others helped participants to understand the positives in their own grief experiences.

Comparisons were also made to separate the experiences of participants from others. Individuals did not consider losses that did not involve the death of a spouse or did not involve the same circumstances as relatable to their own. As such, participants used comparisons to illustrate why their identity changes and experiences occurred in different ways from others. Being able to distinguish themselves from other people helped the bereaved recognize the unique nature of spousal loss and its associated identity changes. Participants recounted stories of people

trying to relate to them by talking about losses of parents, grandparents, pets, and others. For participants, however, these losses were not comparable. As such, individuals tried to distinguish themselves from people who had not experienced similar situations, and thus could not understand the complexities of spousal loss. As an example, Susan described her frustrations with individuals who came to her support group with different types of losses:

When someone came there to talk about the loss of their grandparents. All right, everybody's grandparents die. It's inevitable. They're much older than you. They're going to die. It is sad, but it's not the same as losing the man you're supposed to be living the rest of your life with. It's really a whole different apples to oranges kind of thing.... I'm not comparing your grief to make mine worse or better or. I'm just saying you don't understand. Don't tell me you empathize with me because you don't. It's not the same kind of grief.

Other people had similar experiences of comparing their grief to others. Irene also had a difficult time connecting with people in her support group who had not experienced spousal loss: "I have nothing—there's no identity connection here at all. There was somebody else that'd lost an uncle and it was just like these people they don't have a clue." At times, participants even distinguished themselves from their own family members. Leah, for example, talked about her loved ones and their attempts at empathy:

They said "Well, we miss her too..." It felt like it was minimizing almost, although I could appreciate that they were grieving too. But, I thought, my loss and your loss are pretty different here. My loss is a whole life change.... You lost a dear friend but it's real different when you have to recreate your whole life, you know.



Bereaved individuals used comparisons to understand how situations were different. This technique helped people to recognize that the ways they were managing changes to their identities were unique and not abnormal. Rebecca described coming to this realizing after comparing how she was not ‘moving on’ like her friends and family members:

I just came to realize that this is my journey alone because I was his only spouse. I was the wife. That’s a totally different experience from what everyone else is experiencing. My life was him... tied up with him. And the kids are grown and have their own families... They all have their own lives going on but separate from us.

Comparisons helped people to understand and make sense of the situations they were going through, which were often much different than what their friends and family members were experiencing.

Comparisons, however, were sometimes ineffective and could cause the bereaved to feel worse about their situations. Some participants recounted encounters when they felt like they were not grieving correctly because their experiences were different. People then imagined that the changes in their identities, or the way they were managing the changes, were atypical or wrong in some way. Anika, for example, described feeling alienated from her support network: “Apparently, a lot of people spend hours and hours crying. I said, “Gee, I feel so bad. I haven’t spent hardly any time crying.” Similarly, Mandy questioned herself after comparing her situation to those of her peers:

One of the things I struggle with... is some of the people I hang out with are... they’re not over it, not over it at all. And so is it ok that I’m going on? Is it ok that I’m at a point where I feel like I can be happy about him? Or should I just be that sad person still? Am I being disloyal or am I letting the memories go or something like that?

Some comparisons could make people feel uncertain about their situations. People like Mandy struggled to figure out if their behaviors matched up with who they wanted to be as a spouse and a griever. Others felt stress in not experiencing similar circumstances. Paige described comparing herself to a woman in her support group: “her husband was a minister... and she had very strong premonitions of his presence with her, and I’ve been disappointed because I’ve never had any feeling of [name of husband] being here or coming to visit me.” Comparisons were not always effective at managing grief, especially when they pointed out a perceived flaw in the griever’s experiences.

Participants also compared the loss of their spouse with other losses they had experienced. By evaluating the similarities and differences among the grief episodes they had lived through, individuals were able to better understand why their spousal bereavement experiences were unique or more difficult. Mark, for example, compared losing his mother to the loss of his wife:

I could compartmentalize that off and say, “Okay she’s [Mark’s mother] gone, I don’t have to go visit her out in the Alzheimer’s unit. I can focus now on my regular life over here.” But when my wife died... I kept getting into that notion that everywhere I look there’s a hole.... Every time I had a death, whether it was her parents or my parents, she was there. She was there to comfort me, or me her. But there was nobody here to kinda comfort me. So, I was kinda like stuck with the notion of I’m really alone now.

Mark was able to understand why the loss of his spouse was different compared to the loss of others. Similarly, Jodi described the end of her first marriage to the loss of her husband:

I’ve gone through the loss of a relationship... and you go through the same kind of grief process I think.... But there are obviously differences, because... he didn’t choose to

leave me like my first husband chose to leave me and replace me and all that kind of stuff. So... that was a different kind of pain.

Although losses were comparable in that people experienced grief, the death of a spouse incurred unique and unmatched experiences, especially related to identity change.

**Seeking similar others.** Individuals frequently sought out people who had experienced a similar loss. Participants acknowledged that other individuals did not understand spousal grief unless they had been through it themselves. Spending time with others who could relate helped to provide bereaved individuals with the best kind of social support. Conversations allowed participants to make sense and understand the changes that enveloped their lives. Additionally, seeking similar others helped to reduce having to manage competing expectations that came from individuals who did not understand the grief process.

Participants looked for people who had also lost a spouse. Individuals who had experienced similar losses were able to connect with and understand each other more than people who had not gone through the death of a partner. Hannah described the connection that people felt when they shared a similar experience: “When you make a connection with someone else who’s had a loss, then they feel comfortable talking to me... and I feel comfortable talking to them.” Other participants echoed Hannah’s sentiment, including Deborah who argued for finding people who have similar experiences: “I think that the people that I can talk to the best are probably people who’ve been through something similar.” Some individuals were able to find local individuals who shared their experiences. Aubrey, for example, sought out a new friend at her workplace:

I call it the “meeting of the widows” when we go hook up in the hallway. You know, “How are you doing? What’s going on?” And she’ll tell me if she’s struggling with

something and we're friends by association because we're widows.... Because of anybody that I know, her and I are on the same page. We know. We've been on this road. We understand it. More than somebody who hasn't.

When people had limited local resources, they found local support groups to connect with. Irene, for instance, talked about going to grief classes with similar others by saying, "It's fun to go to those classes cause you... talk so honestly. You talk more honestly and... everybody understands the situation you're in because they're in the same situation." Participants also sought out others through online forums and websites, especially when local resources were not available. Susan describe going online to find support by mentioning, "I went online, and I found the widows' [website], and I started actually having conversation with other widows, which made me feel so much better." Online and in-person support both helped people to make sense of their situations. Jesse, who looked for an online support group due to a lack of similar others in her day-to-day life, said the following:

I found people that I could tell them what was going on... and they echoed me, and they said, "Yes." They said, "You are normal. You are okay. This is what we went through." And I'm like, I'm not alone. So, the way I was spoken to and treated actually caused me to stand up on my own two feet.

Finding similar others helped people to make sense of their situations because they were able to normalize their grief experiences. Additionally, looking for people who shared similar losses helped people to avoid unhelpful communication and having to manage competing expectations from people who did not understand the reality of spousal grief.

**Buffering.** Finally, participants used buffering strategies when in conversations with others. Buffering refers to communication techniques people use to protect their relational

partner and themselves from stressful topics and situations (Langer, Brown, & Skrjala, 2009). Bereaved people avoided talking about their sadness, their grief, or other negative experiences in order to avoid making others and themselves feel uncomfortable. Adjusting who they disclosed to and about what topics allowed participants to have more control over their social identities and to mitigate the stressor of dealing with rude or unaware people. Buffering also allowed participants to protect their loved ones from having to deal with the emotional weight of grief, which helped to preserve social networks. This final strategy permitted bereaved individuals to either deal with identity changes internally or to build stronger connections in other places where their identities could be validated. Individuals selectively discussed certain topics with specific people who were not uncomfortable with the information and/or emotions.

Participants described avoiding specific topics around some individuals. In general, talking about death or grief made others feel uncomfortable. As such, many bereaved individuals stopped talking about loss or their spouse around some people in order to protect both themselves and the conversation partners. Irene, for instance, mentioned about her social group, “It’s not that it’s [grief] off limits, but it’s just that I wouldn’t want to bore everybody... I know people don’t want to be around you when you’re just a sad, sappy mess.” In Irene’s case, she avoided certain topics because she thought that others truly did not want to hear it. Allie echoed a similar sentiment, saying, “I don’t talk about him to everybody though. Cause I don’t... [like] that look. That look of pity. That look of poor you.” Participants avoided certain topics around certain people who reacted in ways that made them uncomfortable. Lois had a comparable experience and described how she did not reveal what she really wanted to say in greetings with others:

They ask how you're doing, and I mean what do you say? "Well, let's see, I'm completely heart broken and devastated, but you know I'm pulling my boot straps up every morning and I'm finding joy in the Lord so, there's that!" I mean how you explain to them that you're completely heartbroken but at the same time God has given you hope? It's really, really hard to explain that so you basically stick with the same answer that everybody does, "Oh, I'm okay, things are going okay."

People buffered their true feelings because they recognized that it would make others feel uncomfortable. At times, people avoided talking about sad topics or emotions to meet expectations from others. For example, Deborah described acting around other people:

I don't like to be a downer... I think before this happened... that a lot of people thought I was... pretty happy and pretty optimistic... I think I still am that way to a large degree around most people... but it's not necessarily how I always feel. Sometimes I'm play-acting a little bit.

People like Deborah buffered their true feeling but were able to remain seen in a way that they wanted to be seen.

Individuals buffered to protect and help their loved ones. Since topics like grief and loss made people feel sad, avoiding certain conversations allowed participants to take care of others in small ways. Tamarah stated her goal for buffering by saying, "I protect people by not really talking about it." People like Tamarah wanted to avoid making others bear the pain of their loss. Similarly, Rebecca mentioned that "people who are closest to him [husband] and closest to me are the ones I have the hardest time talking to. I just don't want to add to theirs [grief]." It was common to see parents buffering to protect their children, as well. Paige described talking often with her children about the loss of their father, but she would avoid certain issues: "I am very

aware of not sharing boundaries. I am the parent, and it's not burdening them with some of my harder feelings." Staying quiet helped to avoid causing others pain or grief.

Buffering helped some individuals to preserve their existing social networks and to reduce the negative reactions that people enacted towards participants' changed social identities. Since certain topics made people uncomfortable, avoidance of those topics helped people to maintain social support and to reduce how differently people acted around them. Sarah buffered to keep her connections going:

You just got to see that they're uncomfortable. And the last thing you want to do when you're someone like me is push people away cause that's your whole... thing is connection.... I don't want to push people away, so I moderated what I do.

Several other participants recounted similar stories of trying to avoid making others uncomfortable to preserve their social networks. Occasionally, friends and family members would instigate the buffering process by making remarks about individuals' changed social identity. Susan, for instance, described how a friend made a blunt comment to her. "At one point she told me that people don't like to talk to me anymore cause I make them uncomfortable because I talk about [name of husband] too much." To maintain current relationships, people like Susan kept the reality of their experiences quiet by buffering certain topics.

**Summary.** Participants described an intricate process of reconciling the past and the present following the loss of a spouse. Without the existence of the marital partner, people had to find new ways to understand themselves. Individuals reconciled changes to both their personal (i.e., how they saw themselves) and social (i.e., how they believe they are seen by others) identities. Several aspects of grief complicated the identity reconstruction process. Internal stressors (i.e., being alone, losing more than spouse, managing multiple stressors) and an external

stressor (i.e., managing competing expectations) exacerbated changes, making it more difficult for participants to make sense of their experiences. Receiving social support from others, however, helped to facilitate identity management processes by providing individuals with a source of validation.

People utilized several strategies to minimize stressors and to reconstruct their identities. Staying busy allowed individuals to postpone dealing with stressful changes. Continuing the relationship permitted participants to redefine their connection with their spouse and to develop new roles. Finding benefits was a helpful technique for bereaved individuals to see the positives in their painful situations, which allowed them to see helpful change in themselves. People also utilized strategies that helped them to better manage their identities in social contexts.

Individuals compared experiences with others to validate and normalize their own situations. To bolster supportive networks, participants sought out similar others in both face-to-face and online formats. Lastly, people buffered around others to avoid situations that further challenged their evolving identities. These techniques helped participants to make sense of their changing identities and to minimize stressors that were exacerbating grief experiences.



## **Chapter 5: Discussion**

The purpose of this study was to explore how people manage their identities following the loss of a spouse. In particular, this project examined the nature of the identity management process (RQ1), including the role of various aspects of grief (RQ2), the role of sense-making and benefit-finding (RQ3), the role of communication (RQ4), and the management of identity fractures and role conflicts (RQ5). Findings indicate that people undergo an intricate process of meaning-making and identity reconstruction after the death of a spouse. The results of this study suggest a grounded theory of how bereaved individuals reconcile past and current identities. Participants recognized changes to both their personal and social identities, and they identified several elements that impeded or facilitated their ability to reconcile the changes. As a result, people enacted several strategies that allowed them to make sense of their experiences and their shifts in identity. These results have important implications for the literatures on grief, identity, and communication. The following sections discuss the findings of the present study, review theoretical and practical implications, and overview limitations and directions for future research.

### **Discussion of Results**

The findings of this study indicate that identity reconstruction after loss is a complex process that includes both intrapersonal and interpersonal elements. The proposed model, the process of reconciling the past and the present after loss (Figure 1), builds upon established grief and identity literatures to extend knowledge on identity reconstruction following bereavement. More specifically, these results add detail and clarification to current understandings of the grief process. In the following sections, I discuss each research question in turn, as well as connections to current and future research.

## **Identity Management Process (RQ1)**

The first research question examined the nature of the identity management process following the death of a marital partner. Findings indicate that the loss of a spouse evoked unique changes to bereaved individuals' sense of self. As a result, participants experienced a complex process of reconciling changes to both their internal and social identities. The proposed model supports previous studies that suggest how grief disrupts the ways people view themselves and their roles within the world (e.g., Danforth & Glass, 2011; McAdams, 2006; Neimeyer, 2002). After a major stressor such as spousal loss, people have to adapt their self-narratives, or the stories they construct to make sense of themselves, in order to create a coherent understanding of the changes in their lives (Neimeyer, 2002, 2004). Consistent with the meaning reconstruction model of grief, individuals sought out meaning to find a way to incorporate the bereavement event into their narratives (Holland & Neimeyer, 2010; Neimeyer, 1999, 2001a, 200b, 2002). Participants described a process of actively reconstructing their identities in ways that allowed them to make sense out of their changing past and present identities.

Findings provide support for the importance of examining identity reconstruction as a part of the grief process (Neimeyer, 2001a, 200b; Neimeyer et al., 2006). The meaning reconstruction model argues that meaning is made in three primary ways: sense-making, benefit-finding, and identity reconstruction. Many grief scholars have utilized a two-dimensional measure for finding meaning (i.e., sense-making and benefit-finding) rather than considering all three constructs (Holland et al., 2006; Keesee et al., 2008; Lichtenthal et al., 2010). Evidence suggests, however, that the third dimension of identity management might explain some of the variance in individual outcomes (Neimeyer et al., 2006). Participants in the current study indicated that identity reconstruction was a major element of how they made sense of their loss

experiences. As such, these findings, alongside other recent research (e.g., Neimeyer et al., 2006), provide evidence for the importance of considering identity management when examining grief processes and outcomes. Additionally, results imply that two-dimensional measures of meaning-making might not be adequate for conceptualizing grief.

Contemporary scholarship argues that the grief process does not occur in stages or phases. Rather, bereavement is a period of meaning-making and reorganization (e.g., Holland & Neimeyer, 2010; Neimeyer, 1999, 2002; Stroebe & Schut, 1999; Worden, 2008). This point is supported by participants' descriptions, which did not portray grief in a stage-oriented way. Instead, bereaved individuals described an ongoing and complex process of making sense out of their changing past and present identities, which ebbed and flowed constantly. Although stage models remain popular in lay culture, they do not appear to be representative of people's actual experiences. Some elements of the grief process might be consistent among individuals (e.g., most people experience an initial period of shock and intense emotions; Neimeyer, 2002; Stroebe & Schut, 1999; Worden, 2004), but people undergo unique grief trajectories. As such, it is important to continue building scholarship that helps to normalize the personalized nature of the grief experience. Unlike stage models, which describe how grief "ends" in a final resolution stage, the findings of this study (as well as related research) imply that grief might never completely go away. Instead, symptoms appear to lessen over time once meaning is achieved (Neimeyer, 2002). Grief scholars should continue to acknowledge the personalized nature of bereavement to fully capture the reality of loss experiences.

The findings also extend knowledge on loss processes by identifying which issues are specific to identity reconstruction. The strategies that participants used to reconcile the changes to their identities hold important contributions to both the meaning reconstruction model of grief

and the bereavement literature in general. *Staying busy* supports previous research that argues how keeping occupied is a common technique for people coping with crises and stressors (e.g., Henderson, Roberto, & Kamo, 2009; Sin, 2015), including grief and bereavement (e.g., Schwab, 1990). Working, completing chores, and volunteering can be passive but healthy coping measures where people can delay having to deal with the powerful emotions and changes that accompany grief (Henderson et al., 2009). Previous results imply that keeping busy might act as a protective buffer for individuals dealing with stress and ambiguity (e.g., Sin, 2015; Sternas, 2016), leading to lower levels of negative symptoms (Frazier & Burnett, 1994). The findings of this study indicate that people dealing with spousal loss also use distraction to manage identity changes. Keeping busy allowed participants to temporarily postpone having to engage in meaning-making processes. Rather than focusing on unwanted changes to their identity, individuals could engage in other activities. Participating in distracting activities (e.g., work) might be an indirect strategy for helping people to make sense of their experiences. Although meaning-making is an important process for individuals reconstructing their identities, constant attention to aspects of the loss might be overwhelming. The dual process model (DPM) argues that people oscillate between two types of coping when dealing with stressors: the loss orientation (i.e., coping with the actual stressor) and the restoration orientation (i.e., coping with secondary issues related to the loss; Stroebe & Schut, 1999). Staying busy could be a strategy for the restoration orientation, which allows people to take a break from the intensity of focusing on the death of a loved one. Being distracted by work or other activities might help to facilitate meaning-making by providing a needed break for the bereaved. Alternatively, although staying busy might work as an effective distraction, it might also prevent people from working through necessary sense-making processes. Although previous research suggests that avoidance can lead to healthier grief

outcomes, the results may or may not be the same for the use of distraction when specifically managing identity.

*Continuing the relationship* is consistent with a growing body of grief literature that argues how maintaining a connection with the deceased is an important part of coping with loss (Holland & Neimeyer, 2010). Although early scholars claimed that the bereaved needed to end the relationship with the dead in order to move on (e.g., Freud, 1917/1957; Lindemann, 1944), current research acknowledges the continuation of the relationship with the dead as a generally healthy coping strategy (e.g., Holland & Neimeyer, 2010; Neimeyer, 1999, 2002; Saito, 2014). Researchers have found that many bereaved individuals talk to their deceased loved one (Ho et al., 2013) and share memories of the beloved with social groups as a way to honor and continue the relationship (Klass et al., 1996). The findings of this study extend knowledge of the ongoing spousal relationship by suggesting that people use the strategy to try to make sense of their identities and the changes they are experiencing following a marital partner's death. Bereaved spouses must adjust their present identities to no longer include their married partner (Haase & Johnston, 2012), but most individuals choose to form a new relational role with the romantic partner rather than to remove the connection entirely. Identity theory argues that new roles contain a set of behaviors required to enact that role (Stryker, 1980). As such, participants who changed their roles from wife/husband to bereaved spouse started enacting new behaviors for their altered roles. Behaviors for the updated marital relationship included telling stories about the bereaved, reminiscing, or talking directly to the loved one. This new relational role is then validated or ignored by social others in interaction with the bereaved (Neimeyer, 2001b). Participants indicated that maintaining the marital relationship was an important part of reconciling their past and current identities.

*Benefit finding* also plays a significant role in coping with major stressors. Participants described finding benefits in their loss experiences, which helped them to integrate their identity changes into their overall self-narrative. This finding is consistent with previous research that supports how acknowledging positives is a healthy coping behavior. Searching for benefits in stressful situations is associated with increased levels of positive affect and life satisfaction (Langston, Edwards, & Lyvers, 2018). Similarly, Harper, O'Connor, and O'Carroll (2014) found that families who lost a child had higher levels of grief symptoms when they did *not* engage in a meaning-making process. On the other hand, results are mixed about the impact of searching for benefits and depressive outcomes more specifically. For instance, Langston et al. (2018) concluded that people who found benefits in their experiences after being diagnosed with hepatitis C had higher levels of depressive symptoms. On the other hand, Lee, Song, Zhu, and Ma (2017) concluded that women who were diagnosed with breast cancer could moderate depressive symptoms by finding benefits. Such discrepancies may be due to other factors. For instance, Gardner et al. (2017) found that families with fewer coping resources profited more from finding benefits in stressful situations than families with abundant resources. As such, benefit-finding depends on the availability of other social and tangible resources individuals possess. The results of the current study, however, indicate that seeking out positives is a normal part of dealing with the loss of a marital partner. Grief scholars should pay careful attention to how people find benefits in the changes to their identities in order to understand sense-making processes following bereavement.

The other three strategies that people used to make sense of their changing identities provide insights into how grieving individuals deal with interactions. Participants described *comparing themselves to others* in an attempt to better understand their own situations.

Individuals evaluated other people as having an easier or more difficult set of circumstances, which helped participants to feel normalized in their own expressions of grief. When participants saw other people as having “easier” experiences, they could rationalize their own grieving behaviors. For instance, participants justified feeling overly emotional compared to others because they were not able to say goodbye to their loved one. Similarly, when individuals evaluated others as having a harder time, they recognized the positives in their own situations. Social comparisons are a common technique utilized by stressor survivors. Individuals compare their own experiences with people who have experienced a different set of conditions as a way to better understand themselves and their identities (Buunk, 1994; Wellman, 2014). Participants in the current study also used comparisons to help them engage in other meaning-making strategies. For example, participants compared their lives to others to find positives in their own lives. As a result, bereaved individuals were more easily able to find benefits in their loss experience. This finding helps to extend the literature on social comparisons by suggesting that people engage in comparison processes simultaneously with other types of strategies to rebuild identity.

Comparing grief experiences might relate to how often people engage in *seeking similar others* and *buffering*. Previous scholarship has described how individuals coping with a specific stressor will intentionally seek out people with similar experiences but buffer themselves around other individuals (e.g., Basinger & Wehrman, 2016; Basinger, Wehrman, & McAninch, 2016; Kaunonen et al., 1999). Findings of the present study build on this burgeoning body of research in multiple ways. First, results provide insights regarding *how* people actually seek out similar others. In general, individuals looked for others by establishing new support circles and by searching in their current social networks. Participants described how they specifically tried to grow their support connections by going to face-to-face groups or by going online. Other

individuals reconnected with old friends or acquaintances who had also experienced spousal loss. Second, findings help to add more nuance as to *why* people seek out similar others and/or engage in buffering. Participants sought out similar others as a way to find likeminded people and to reduce competing expectations. In a sense, finding similar others allowed people to grieve and express their identities in a way that made sense to them. Buffering, however, was used in most instances when people did not want to lose their current support networks. Rather than abandoning their friends and family, they built closer networks by avoiding topics that made people uncomfortable. Seeking similar others and buffering both worked to build systems of social support.

### **Aspects of Grief (RQ2)**

The second research question examined what aspects of grief played a role in identity management processes after the death of the spouse. Limited research has explored the specifics of the meaning reconstruction process, particularly identity reconstruction (e.g., Neimeyer, 2001b). The data identified several experiences salient to bereaved participants that made reconciling identities either more difficult or easier: being alone, losing more than the spouse, managing multiple stressors, managing competing expectations, and receiving social support. The first four issues acted as stressors and made the changes that people experienced more intense, whereas the final component helped to alleviate stressors and assist with meaning-making. Consistent with previous grief research, multiple individual and relational elements play a role in the bereavement process. These findings, however, add to our understanding of which aspects of grief play a role in identity reconstruction following the death of a spouse.

Feeling lonely is a common experience following the loss of a marital partner and other loved ones (e.g., Lindemann, 1944; Parkes, 1998b; Pinguart, 2003; Worden, 2008). People



recognize the loss of physical presence of the partner, which can be compounded by limited social interaction (Worden, 2008). Loneliness might be particularly salient to the identity management process because it represents a shift in the griever's role as part of a couple. Before loss, although spouses might not be actively spending time together, they still have the potential for enacting marital partner roles (e.g., conversational partners) at any time. After loss, however, those roles are no longer possible without the loved one (Hastings, 2000). Being alone could reinforce realizations of the loss of the partner and the roles the loved one played.

Participants grieved not only the death of their spouse, but also the loss of the roles the partner played, future hopes and dreams, and changes in their daily experiences. Consistent with previous research, individuals deal with both external and internal adjustments to identity after loss (e.g., Damianakis & Marziali, 2012; Naef et al., 2013; Wilson & Supiano, 2011; Worden, 2008). External adjustments require the bereaved to manage the loss of the roles the partner played (Stroebe & Schut, 1999), whereas internal adjustments force the bereaved to redefine their internal identities (Haase & Johnston, 2012). Externally, after the loss of the spouse's roles and the loss of everyday experiences, bereaved individuals had to find a way to manage the roles that the spouse enacted. Similar to findings from Parkes (1998a), participants frequently managed the roles the partner played by avoiding or removing the role (e.g., selling family land because the spouse could no longer take care of it) or by finding someone else, including themselves, to play the role (e.g., performing the spouse's chores). Internally, the loss of future goals and plans also affected individuals. Several participants described their identities for the future (e.g., retiree) as no longer possible without the loved one. As such, the death of the spouse influenced both the present and future forms of their internal identity. This stressor made it more difficult for participants to make sense of their experiences, thus complicating the identity

management experience. The findings here add knowledge regarding how loss can challenge both present understandings of identity and goals for future identity.

Managing multiple stressors can inhibit coping processes. Individuals who experience an accumulation of stressors tend to have reduced adjustment abilities during crises (e.g., Skerrett, 1998). Participants in the present study experienced multiple and accumulating stressors, such as financial struggles, deaths of other loved ones, negative communication encounters, and the combination of several internal issues. These findings are consistent with previous research that suggest how having to manage multiple stressors can complicate coping and grieving processes (e.g., Bruinsma et al., 2015; Gamino et al., 1998; Kübler-Ross & Kessler, 2005; Parkes, 1998a; Rycroft & Perlesz, 2001; Stroebe & Schut, 2010). Coping with several problems at the same time can reduce the amount of energy a person has to devote to the grief process. The findings of present study help to extend knowledge on how people deal with multiple, accumulating stressors while trying to make sense of their identities following the loss of a spouse. Participants who experienced multiple stressors had more difficulty understanding their identity changes. Individuals' experiences suggest that identity reconstruction is a complex process that takes a significant amount of energy and resources. Individuals may choose to attend to other issues before completely dealing with changes to their identities. Hence, meaning-making processes might come second to more prominent problems.

The results of this study also bring to light the importance of social networks within the identity management processes following loss. Participants described how two situations involving other people influenced their grieving processes. Frequently, individuals' expressions of grief and their changed identities did not match what others expected. As such, people experienced having to *manage competing expectations* between how they wanted to express their

grief and how they managed their changing selves. The denial of grief expressions forced some individuals to experience disenfranchised grief, where grief goes unrecognized by social partners (Doka, 1989). Although most disenfranchised grief scholarship focuses on stigmatized losses (e.g., homicide or miscarriage; Cacciatore et al., 2008; Lawson, 2014), participants' experiences of having to hide their grief due to poor reactions from their support networks might signal the presence of disenfranchised grief in non-stigmatized contexts, as well. Most individuals described being allowed to grieve during a short period following the loved one's death, but then were met with expectations to resolve or hide the grief after a few months. This experience suggests that disenfranchised grief might be more widespread than previously indicated. People who are unable to continue expressing their grief may exhibit the same poor grief outcomes as individuals who are stigmatized from grieving for other reasons (e.g., Mills et al., 2016). Normal grief might evolve into disenfranchised grief following the loss of a spouse due to negative reactions from friends, family, and others.

Social support, on the other hand, acted as a protective aspect for helping people understand the changes they were experiencing. Participants described social support as a primary element for allowing them to normalize their grief and confirm the ways they were reconstructing their identities. Social support also relieved other stressors by adding both tangible (e.g., helping to plan funerals to reduce accumulating stressors) and emotional support (e.g., spending time with the bereaved to reduce loneliness). This finding adds to a large body of research that suggest social support is a vital aspect of coping and grieving processes (e.g., Basinger & Wehrman, 2016; Gamino et al., 1998; Golish & Powell, 2003; King et al., 2006; Kübler-Ross & Kessler, 2005; Powell & Matthys, 2013; Ringler & Hayden, 2000; Stroebe & Schut, 2001c; Titus & de Souza, 2011). Specifically, results enhance our knowledge of how

social support provides an opportunity for individuals to perform their evolving identities and receive feedback. Comments from other people helped participants to feel normalized in their grief and helped to reduce the uncertainty they were experiencing about certain roles. For instance, several participants described encounters where family members told the bereaved how important they were to the family, thus reinforcing their familial roles. This finding confirms previous claims that others can help facilitate identity processes following loss (Powell & Matthys, 2013; Titus & Souza, 2011), and specifically adds to research by outlining the role of others within the identity reconstruction process. The role of communication in the identity process will be discussed in further detail in a subsequent section.

### **Sense-Making, Benefit-Finding, and Identity Reconstructions (RQ3)**

Research question three examined the connection among the three constructs that compose the meaning reconstruction model of grief (i.e., sense-making, benefit-finding, and identity reconstruction), specifically seeking to understand the role of sense-making and benefit-finding in the identity management process. Results depict meaning-making as a complex and iterative process. Consistent with the meaning reconstruction model, individuals attempted to find meaning in their changing identities following loss (Neimeyer, 2001b). Additionally, finding benefits acted as an important strategy for discovering meaning specific to the identity management process. Rather than being a separate dimension, benefit finding provided an opportunity for people to make sense of their changing identities. Individuals strategically used the positives that they found in order to more easily accept major changes that they were experiencing. Previous research indicates that people frequently find positives in their traumatic experiences (e.g., Calhoun et al., 2010; Frantz et al., 1998; Oltjenbuns, 1991). These findings suggest that seeking out benefits is an integral part of the grief process. The results from the

present study, however, imply that benefit finding is interwoven into the meaning-making process. More specifically, searching for positives might be a part of identity reconstruction in addition to being a unique dimension of meaning-making. Treating the three components as separate, then, might not be the most useful approach for examining meaning-making processes. Instead, scholars should attend to how people might overlap in the ways they make sense, find benefits, and reconstruct their identities.

Participants did not describe significant engagement in the third dimension of meaning-making (i.e., sense-making). More specifically, individuals did not perceive finding any logic or comprehensibility in the death of their loved one. The lack of the sense-making (or logical) dimension might also have implications for understanding identity processes. Research has been mixed regarding how each meaning-making construct influences later bereavement outcomes. Results consistently find that people who do not search for meaning have similar grief outcomes as people who do search and find meaning, whereas people who search and do *not* find meaning fare the worst (Bonanno et al., 2004; Davis, Nolen-Hoeksema, & Larson, 1998; Neimeyer, 2000). Other studies have found that a large portion of individuals report never making sense of their grief experiences (Lichtenthal et al., 2010). The findings of the present study add to previous research that suggest that meaning-making is a complex process. One possible explanation for the diversity of these findings is that sense-making and benefit-finding are not conceptually different constructs. Both concepts, in addition to identity reconstruction, describe the processes that people use to find meaning in a life-altering situation to find coherence in one's life narrative (Gillies & Neimeyer, 2006). It may be likely that one way that people "make sense" out of loss is to find benefits or other positives that came out of the loss. Rather than

examining them as separate constructs, then, researchers might want to look more closely at how finding benefits might be one way that people make logical sense in negative experiences.

A second possible explanation for conflicting results might be the methods used to examine meaning-making. Scholars often use a single item each to measure sense-making, benefit-finding, and identity reconstruction. For example, sense-making has been evaluated by asking, “How much sense would you say you have made of the loss?” (Neimeyer et al., 2006, p. 724). These single items might not be able capture how people actually find meaning in their experiences. Scholars might focus on explicating meaning-making processes more carefully to design more valid measures. Alternatively, quantitative measures might simply struggle to tap into how people make meaning out of loss for several reasons. First, individuals might experience internal conflict when asked to think about meaning or positives in the loss of their loved ones. Participants in this study commonly expressed that finding meaning was difficult to admit, because it felt unfaithful to the beloved spouse. Perhaps such feelings can alter the accuracy of how people answer questions about the positive aspects of their experiences. For instance, individuals would often reply that they could not find sense or benefits in their loved one’s death when directly asked. Rephrasing the question, however, brought out significant meaning-making processes. Several people acknowledged that it was difficult to identify benefits in the loss without experience intense and overwhelming guilt. As such, individuals might struggle to admit actual meaning-making processes that could threaten their identities as faithful and loving spouses. Second, people might not actually think about sense-making. Meaning-making might be either (a) an unconscious process or (b) too abstract for some individuals to discuss. Measures that include questions about specific sense-making behaviors (e.g., have you found any spiritual meaning in the death of your spouse?) might help to clarify meaning-making.

Additionally, scholars might find measures that include open-ended questions or that ask about numerous forms of meaning-making might tap into the phenomenon more comprehensively. Researchers should pay careful attention to measures of meaning-making in order to examine the multiple dimensions that people experience.

#### **Communication and Identity during Bereavement (RQ4)**

Research question four examined the role of communication within the identity management process after the death of a spouse. Participants described communication as a salient element of identity reconstruction following loss. Social support acted as a protective buffer for participants. Individuals were able to negotiate and reconcile their changing identities within interactions with their loved ones, who provided validation for the reconstructed identities. Consistent with previous research, loved ones can offer support that helps to normalize grief experiences and generates healthier grief outcomes (Golish & Powell, 2003; King et al., 2006). On the other hand, however, social networks members can also challenge individuals' understandings of themselves by exerting unrealistic expectations on the bereaved. Participants frequently dealt with opposing perspectives of proper grief behaviors and experiences. As such, individuals felt frustrated and struggled to make narrative sense of their experiences. These findings add to the grief and identity literatures in a broad sense by confirming the importance of others during identity management processes of grief.

Findings support a growing body of literature that conceptualizes grief as more than just an intrapersonal experience. Instead, people mourn within their interpersonal relationships (Hayslip & Page, 2013; Stroebe, 2010; Stryker, 1980). Consistent with previous research, participants reported how communication helped to facilitate their identity processes after loss (e.g., Powell & Matthys; Titus & de Souza, 2011). Social network members can reinforce

bereaved individuals' relationships and roles (Giannini, 2011). People reported several ways loved ones helped to support identity management processes related to grief. For instance, family and friends strengthened individuals' roles by validating the bereaved person's importance in the relationship. These comments from social network members helped people feel reinforced in their identities as a part of friendships and families. Other loved ones offered support for identity processes by normalizing the changes the bereaved were experiencing. Positive feedback helped participants feel like they were grieving correctly. When individuals were not getting the feedback they needed, they sought social support by changing their approach (e.g., buffering or seeking similar others; Canary, 2008; Finlay & Krueger, 2011). These results build on identity and grief knowledge by identifying how people play a role in identity processes after the loss of a spouse.

Communication also impeded grief and identity processes, however. Results reflect previous findings of how supportive communication from others helps to validate individuals' grief experiences, whereas negative or unwanted communication can hamper bereavement (e.g., Hayslip & Page, 2013; Stroebe, 2010; Titus & de Sousa, 2011). The proposed model here provides a better understanding of how communication can be detrimental to grieving. More specifically, findings outline how people can escalate the difficulty of managing identity after a tragic loss. Participants described having to manage competing expectations towards grief as a major stressor and reported numerous instances where others challenged their relational roles (e.g., insulting their marital relationship) or their grief experiences (e.g., complaining about the participant's grief behaviors). Such instances made participants feel frustrated that they were not engaging in their grief roles correctly. Unhelpful and competing comments challenged how individuals made sense of their experiences. Having to manage people who forced their opinions



and advice on the bereaved complicated how well people were able to deal with reconciliation their identities. This is an important contribution for how scholars, practitioners, and lay people should pay careful attention to how grieving individuals evaluate messages from others.

Additionally, previous research found that bereaved individuals sometimes withdraw from social interactions or display aggressive behaviors towards others (Bowlby & Parkes, 1970; Hanschmidt et al., 2016; Kübler-Ross & Kessler, 2005; Lindemann, 1944). One reason for these changes in social behaviors might be related to how people are treated during their mourning periods. People who must manage opposite expectations regarding how they grieve might start to avoid individuals who want to force opinions on them. Several participants in this study mentioned wanting to attack rude social network members during these encounters. Individuals might experience these aggressive thoughts as a way to ward off identity-threatening acts. The present study adds further knowledge regarding how communication and identity are closely linked during grief.

### **Identity Fractures and Role Conflicts (RQ5)**

Research question five examined how individuals managed identity fractures and role conflicts following the loss of a spouse. Participants experienced role conflicts consistent with the identity literature. Fractures, or splits in a person's identity, occur when people occupy two incompatible identities at the same time (Hastings, 2000; Scarduzio & Geist-Martin, 2008; Wainwright et al., 2005). Participants experienced fractures whenever they still held their roles of spouse while also engaging in the role of griever. Bereaved individuals sometimes experienced intra-role conflicts when interacting with their social networks following the loss of their spouse. Competing expectations evolved into role conflicts when participants' expectations of how to perform the grieving role did not match social members' expectations. Friends, family

members, and others had their own ideas of how the bereaved should act throughout the grief processes. Additionally, people did not always welcome the person's new behaviors and new identity. Participants also experienced inter-role conflict (i.e., when two incompatible roles conflict) as they shifted from being a spouse to a widow/widower. These two roles were incompatible and could not be performed at the same time. As such, participants underwent identity management process to negotiate the role conflict.

Individuals negotiated role conflicts and identify fractures in the same way they managed other changes to identity. Participants used the six strategies to find meaning in the changes they were experiencing. Strategies such as buffering and seeking similar others allowed participants deal with intra-role conflict. Individuals would avoid certain topics with specific people to bypass conversations about mismatched expectations. Evading subjects such as emotions allowed participants to continuing communicating with loved ones while avoiding conversations that would conflict with their expectations and needs. Seeking similar others also helped individuals to be around people who understood the experience of losing a spouse. By using these strategies, participants were less likely to deal with opposing opinions about playing the bereaved role.

Individuals also used specific strategies for inter-role conflicts. In particular, participants used distracting, continuing the relationship, and finding benefits to make sense of the conflicts between their role as a spouse and their role as a widow(er). Distracting allowed people to avoid having to manage the role conflict for the time being. Individuals could focus on other issues in the meantime, and then resolve the conflict later when resources were stronger. Continuing the relationship allowed people to create a new role for themselves that addressed the needs of both the spousal role and the bereaved role. Rather than having a conflict between wanting to be a

spouse but having to be a widow/widower, people developed a relationship that acknowledged the ongoing marital relationship in a new, spiritual way. Their new spousal role encompassed both roles (e.g., wife and widow) simultaneously. Lastly, participants focused on finding benefits in their experiences of loss. Finding benefits helped people to understand *why* they were experiencing such dramatic role changes. Individuals sought out positives in their new bereaved spouse role (e.g., getting to do new things), which helped them to narratively construct a reason for the identity changes. Participants experienced multiple changes to their identity (e.g., identity uncertainty), and most changes were identity fractures (e.g., loss of important roles). These findings elucidate the identity management processes people experience after marital loss and highlight the major role conflicts people struggle to explore.

### **Theoretical Implications**

The process of reconstructing identity after loss provides unique insights into how people manage significant changes. Participants described an intricate process that both supports and adds to current research. The findings of the present study suggest important contributions for literature in the areas of communication, grief, and identity, and offer avenues for future researchers to examine. In the following sections, I outline several meaningful theoretical contributions from the current project.

### **The Meaning Reconstruction Model of Grief**

Participants' experiences provide significant implications for the meaning reconstruction model of grief. Consistent with Neimeyer's (2001a, 2001b) constructivist model for understanding loss, participants underwent a process of reconciliation and meaning-making following the death of a spouse. These findings offer support for Neimeyer's model and add specific knowledge of how people engage in identity reconstruction after marital bereavement.

More specifically, participants described an intricate process of meaning-making where they worked through intrapersonal and interpersonal stressors to reconcile changes to both their personal and social identities. Whereas other scholarship has examined the impact of meaning-making on grief outcomes (e.g., Bonanno et al., 2004; Coleman & Neimeyer, 2010; Holland et al., 2006), the current study provides an understanding of how people actually engage in making meaning following the death of a spouse. Results suggest several contributions for identity reconstruction processes after bereavement.

First, findings imply that identity reconciliation occurs on two levels: internal identity and social identity. Participants had to figure out not only how they understood themselves but also how they perceived they were viewed by their social circles. Little research has explored what identity management looks like within the meaning-making process (e.g., Neimeyer et al., 2006). Yet, identity reconstruction plays an important role in how people are able to grieve their loved ones (Neimeyer, 2001b). The findings from the current study expand our understanding of the meaning reconstruction model by suggesting that identity management is a complex, dual-level process. People's internal perception of themselves defines how people act in social settings (e.g., acting like a nice person around others), although individuals might not reveal all parts of their identities in every interaction. Participants, however, had a difficult time regulating how others saw them as bereaved individuals. As a result, individuals attempted to change their social identities by buffering or seeking similar others. These findings support a growing body of research that implies that grief is both an interpersonal and intrapersonal process (e.g., Hayslip & Page, 2013; Neimeyer, 2001b; Stroebe, 2010; Stryker, 1980). Internally, people manage emotions (e.g., Worden, 2008), while also dealing with changes to how they understand their personal identity. Interpersonally, individuals grieve within their interactions with others and

manage changes in how people see them differently (i.e., changes in social identity). Scholars should pay careful attention to how people experience changes to both their personal and social identities. Future research might find that the different levels have varying impacts on grief outcomes. For example, people who view very little change in their social identity might have a different grief experience than individuals who report a larger degree of social identity change. The finding of multiple levels of identity change help to add further nuance to our understanding of how people make meaning after the loss of a loved one.

Second, results from the present study provide evidence for the kinds of strategies people use to deal with stressors while reconstructing identity. Consistent with previous research, participants used a variety of techniques for managing grief (e.g., Stroebe & Schut, 2001c). These data enhance our knowledge of mourning processes and how strategies are utilized to make meaning during identity reconstruction. For instance, continuing the relationship with the deceased spouse is a recognized part of the grief process in recent work on grief (e.g., Holland & Neimeyer, 2010; Neimeyer, 1999, 2002). Results of the current study expand the importance of continuing the relationship into the context of identity management by suggesting that maintaining an ongoing relationship with the deceased can be a vital element for people adjusting to new roles. Rather than completing disregarding the spousal role, participants instead altered the relationship, thus allowing them to continue some aspects of the identity. Participants utilized each of the strategies to help them reorganize and find meaning in the changes to their internal and social identities. The various techniques add depth to Neimeyer's (2001a, 2002) conceptualization of identity reconstruction and suggest that individuals find meaning in multiple ways following the loss of a spouse.

## **Communication, Identity, and Bereavement**

The current study also provides insight into the role of communication within bereavement and identity processes. Although grief research has started to recognize the interpersonal nature of grief experiences (e.g., Golish & Powell, 2003; Rosenblatt, 2012; Traylor et al., 2003), most scholarship has focused on the availability and influence of social support (e.g., Golish & Powell, 2003; King et al., 2006; Stroebe & Schut, 2001c). Results of the present project suggest that others also play an important role in complicating grief experiences. The limited research on how *negative* communication can affect grief experiences has found that poor support is associated with higher levels of complicated grief following loss (Nam & Hyun, 2014). Findings presented here suggest that not only does communication play a central role in helping to mitigate stressors related to identity change, but it also can cause major disruptions in meaning-making processes when it does not meet grievers' needs or expectations.

Communication, even if intended to be supportive, can challenge individuals' views of themselves. Friends and family members who are not willing to listen or to validate people's experiences can cause further pain and anguish. Scholars should seek to not only examine the existence of social support but also the presence of negative communication. Latter encounters might hamper people's ability to find meaning in their changed identities.

Additionally, results of the present study broaden identity theory by illuminating the relationship between internal and social identities (Stryker, 1980). Stryker (1980) does not use separate names for internal and social identities but argues that individuals' internal conceptualizations of identity are formed by their understanding of their role identities (i.e., their social identity). In other words, people create an internal understanding of themselves based on the responses they receive from enacting their social identities. As such, a person's personal (or

internal) identity is strongly influenced by communication. For bereaved individuals, however, many of their former roles can no longer be enacted socially due to the loss of the marital partner. For instance, a spousal partner is required to enact the spousal role. As such, participants have to find a new way to make sense of themselves, and so they focus on internally reconstructing their selves.

Findings also help to explain the role of communication during identity reconstruction processes where the interactional partner is not available. Although parts of identity are created and enacted through communication encounters, research should recognize that people who experience loss might no longer have an interactional partner with whom to enact specific roles. This might explain individuals' desire to talk about the bereaved and their grief within their social networks. Such instances might help people to reconcile major changes between their past and present identities, even without the availability of the loved one to act as an interactional partner. Additionally, participants might choose to "talk" to the loved one through writing, praying, and performing other tasks. Instances of communicating with the deceased add to our understanding of how people make sense out of changing roles and responsibilities. Scholars using identity theory as a theoretical framework should pay careful attention to how identity can be constructed through communication in innovative ways. Additionally, theorists should focus more on how internal conceptualization of identity influence and are influenced by social enactments of identity.

### **The Bereaved Role**

Participants' experiences of managing competing expectations highlights the uncertainty regarding the bereaved "role." Findings support previous scholarship suggesting that there is no clearly understood bereaved role within modern western society (Hiltz, 1978; Kroger, 2007).

Whereas other cultures have specific traditions and customs for mourners (e.g., mourning for a very specific time period), current western culture has few consistent expectations for how people should enact mourning roles, especially for widows and widowers (Hiltz, 1978).

Mourners often have conflicting expectations regarding what is appropriate to talk about and how long is an acceptable grieving period following the loss of a loved one (Walter, 1996).

The results of the present study contribute an important finding to the understanding of grief and loss by suggesting that the ambiguity of the bereaved role causes further grief for individuals. Participants' experiences of competing expectations toward grief stemmed from how people have varying ideas of what the widow or widower role entails. Participants were stuck between a former role (i.e., wife or husband) and a new, unwanted role (i.e., widow or widower). Adjusting how they defined themselves without their connection to the loved one was a challenging task. As such, individuals' enactment of the bereaved role often conflicted with expectations from their social networks. Since people negotiate their roles within their relationships, competing expectations for how to act within that role can cause problems. This implication suggests that identity scholarship is an important component of grief research, since managing the loss experience entails a great deal of identity work. Researchers should be careful to examine identity related processes in future considerations of grief, paying attention to how uncertainty regarding the bereaved role influences grief outcomes.

### **Identity Theory and Hierarchy Reorganization**

After the loss of a spouse, individuals reorganize their identities to give meaning to the changes they experience. The degree of identity reorganization depended on how much people identified with their roles related to their marital partner (e.g., spouse, friend, confidant).

According to identity theory, people hold an internal identity hierarchy that includes each role



they play. Essentially, the hierarchy is a construction of their personal identity, or how they see themselves. The structure of the hierarchy provides a framework for how people should act (i.e., what roles they should enact) in various social situations (Burke & Stets, 2009; Stryker, 1980). Identity theory suggests that individuals who identified more with their spousal roles likely ranked those roles higher in their identity salience hierarchy. As such, the loss of the vital roles made reorganizing their identity hierarchies following death a considerable challenge.

These findings add clarification to identity theory by offering detail regarding how people deal with a sudden change to their identity hierarchy. The hierarchy does not appear to completely change. Instead, it shifts. Individuals lose important roles vital to their personal understanding of themselves, but other parts of the hierarchy still remain. Participants mentioned how elements of their identities that were developed before the marital relationships still existed. Additionally, individuals described how tangential roles were still very important to their identities, such as being a parent or a friend. After bereavement, people must figure out what roles make up their identity hierarchies, what takes the place of the spousal role, and how to restructure the order of the roles. Some individuals created a hierarchy that contained an altered spousal role (i.e., continuing the relationship with the deceased). People could then enact these roles in specific social situations by sharing memories of the deceased. Others, however, hid their spousal role and only selectively revealed it (i.e., buffered) to similar others or family members. Scholars should continue to examine how people reconstruct their identity hierarchies following major life disruptions to better understand how individuals engage in identity reconciliation processes.

## **Practical Implications**

The findings from the present study contribute to a growing body of evidence that grief is a complex process that plays out within interpersonal relationships (e.g., Golish & Powell, 2003; Nelson & Frantz, 1996). Individuals work to reconcile their past and current identities, at least partially, through communication with other people. As such, participants' experiences provide important implications for how others can assist with grief processes. Evidence from this study provides helpful suggestions for both practitioners who work with the bereaved and friends and family members close to grieving individuals.

Therapists, support group leaders, counselors, and other practitioners who work closely with bereaved people might benefit by focusing on facilitating meaning-making procedures. Participants indicated that understanding changes to their identities was a necessary process for dealing with their grief. In particular, individuals used six strategies for reducing stressors and finding meaning. This study provides evidence for the interpersonal nature of identity reconstruction and meaning-making. Practitioners may be able to promote the identity management process by facilitating meaning-making strategies. Individuals can act as a source of social support by encouraging open communication that includes listening and validating. Acting as a supportive base might allow grieving individuals to reduce their stressors and to work through the changes they are experiencing. During conversations with the bereaved, practitioners can help people to engage in other useful strategies such as building a new relationship with the deceased, staying busy during overwhelming moments, finding benefits in the changes, comparing to others, seeking out new supportive others, and buffering in difficult conversations. These suggestions build on previous calls to promote openness in grief discussions as a way to help people manage their grief experiences (e.g., Basinger et al., 2016).

Alternatively, facilitators might also be able to connect grieving individuals with support groups that can build participants' social networks. These techniques can help to increase the resources of bereaved people who are reconstructing their identities following the loss of a spouse.

Findings also have practical implications for social network members who are close to bereaved individuals. The present study adds to a growing body of literature that suggests that friends and family members of grieving people have the potential to provide affirming and helpful social support (e.g., Ogrodniczuk, 2007; Traylor et al., 2003). More importantly, findings imply that social network members can help individuals make sense of their identities following loss. Friends and family members should take care to promote positive social support strategies such as listening and validating, while avoiding negative strategies such as giving advice and criticizing to help individuals to better process their identity changes. Additionally, social network members should use communication strategies that help to validate the bereaved individual's existing roles and identities without coming across as patronizing. To do so, people might offer supportive messages while confirming that the bereaved is still an important friend or family member. Rather than excluding the person from social events that might be upsetting, friends and family members should invite the person after explaining the details of the event. Social network members should also be aware of the ongoing nature of bereavement to avoid assumptions of the duration of grief. Overall, interactional partners should follow the lead of the grieving individual to provide desired support.

### **Strengths, Limitations, and Directions for Future Research**

A primary strength of this project is how open and eager the participants were for telling their stories. Despite the personal and emotional nature of the interview questions, individuals were overwhelmingly enthusiastic to share their experiences. Although participants were

welcome to end interviews early if desired, not a single person chose to stop. In fact, most interviews went longer than originally expected. Individuals were welcoming towards the questions, and numerous people followed up after interviews with more thoughts and reflections. Several people articulated their hope of helping others who are undergoing a grief experience. The eagerness of participants suggests the data in this study are accurate and reflect the reality of losing a loved spouse. Participants' reactions and vivid detail added trustworthiness and depth to the findings. This important strength helps to illustrate the authenticity of the study.

The findings of this study should also be examined alongside certain limitations. First, the sample consists of participants who described high levels of closeness in their marital relationships. With a few exceptions, most interviewees described overall happy marriages. Previous research suggests that the climate of a relationship prior to bereavement plays an important role in grief outcomes. Individuals who are closer to the loved one before death report worse grief outcomes than individuals who are less close (Gamino et al., 1998; Parkes, 1998a; Rubin et al., 2003; Stroebe & Schut, 2001a). A self-selection bias might exist in that participants are above-average in terms of relational happiness and satisfaction. Individuals who are closer to the loved one, then, might have their identities more intertwined in relational roles associated with the deceased. The findings should be interpreted in light of participants whose identities might be more connected to their spousal roles than individuals whose identities are not so integrated into their marital relationships. Relatedly, the sample consisted of primarily educated and Caucasian women. As such, the results of the present study should be considered in the context of a homogenous sample.

Second, participants were recruited from online and in-person support groups. As such, the sample likely includes a self-selection bias of individuals who are willing and able to seek

support from others. Almost all participants described seeking some kind of support, both online and in person, with varied results. Additionally, a large portion of volunteers were active and regular participants in local and virtual support groups. Grief experiences likely differ between people who are willing and able to seek support versus those who are unwilling or unable. As a result, the findings of this study may be restricted to the high degree of support seeking in the sample.

Future research should seek out a wider breadth of participants and grief experiences. It might be likely that the identity management process is less severe for people whose central roles are not as associated with the marital relationship. The identity management process for those individuals might have its own unique stressors and strategies for meaning-making. Additionally, grief experiences might be unique across genders and/or culture. Furthermore, people who cannot or will not access social support resources might utilize different strategies for building their support networks and understanding their changes. Future research should seek the experiences of underrepresented populations to understand the full range of grief strategies and meaning-making processes.

A third limitation of the present study is the use of retrospective data. Participants reported on events that occurred since their spouse passed away, which ranged from several months to almost five years prior. Research suggests that grief emotions decrease over time for most people (Bonanno & Kaltman, 2001; Kübler-Ross & Kessler, 2005). As such, emotional reactions to identity changes might also lessen over time as people start to reorganize and make sense of their changing selves. Participants might have been reflecting more positively on their experiences than what really happened. Thus, findings might not be representative of participants' actual experiences.

Longitudinal work with bereaved samples is ideal for examining how identity and meaning-making progresses over time. The findings of the present study are consistent with previous research suggesting that social support is initially strong in the weeks after loss, but gradually dwindles over time (e.g., Bennet, 2010). Dwindling support might have numerous ramifications for grieving individuals. A longitudinal design might be able to dig into the nuance of how support and identity processes evolve together after the loss of a loved one. Future research should focus on examining the connections between identity management, sense-making, and other grief processes over time.

Finally, a fourth limitation is that the study did not examine the outcomes of the identity management process. Participants described several changes to their identities, as well as numerous strategies for reconstructing their identities following the loss of a spouse. Some of these strategies have been associated with positive grief outcomes in previous studies (e.g., staying busy; Frazier & Burnett, 1994; Sin, 2015; Sternas, 2016), but the entire process of identity management and meaning-making has yet to be evaluated in terms of well-being. Some identity reconstruction strategies might be less effective than others. Additionally, the degree or extent of identity change might play a role in sense-making outcomes. How much people perceive themselves as changing might influence (a) what strategies people use to reconstruct their identities and (b) how effective those techniques are. Future studies should focus on connecting the sense-making process with both positive and negative grief and identity outcomes. Findings might be able to provide further suggestions for helping people to better deal with grief.

## Conclusion

The present study supports a model for how people make sense of their changing identities following loss. Most previous research has examined grief from an intrapersonal lens (e.g., Erikson, 1968; Freud, 1917/1957), with little nuance to describe the identity changes that people experience (Neimeyer, 2001b). Participants mentioned an iterative process that was experienced both intrapersonally and interpersonally. Individuals felt significant changes to their personal selves and their social selves following the death of their spouse. People's experiences of meaning-making were interrupted by several stressors and facilitated through social support. To help reconstruct identity and give meaning to changes, individuals used six strategies that helped to reduce stressors and build support. These findings are interpreted using frameworks from the meaning reconstruction model of grief (Neimeyer, 2001b) and identity theory (Stryker, 1980).

Results provide important implications for current and future research. Participants' experiences were consistent with the meaning reconstruction model of grief, and the proposed model adds explanation to how people manage their identities after the loss of a spouse. More specifically, findings provide specific details regarding the parts of identity that change (i.e., personal and social), aspects of grief that play a role in identity reconciliation, and strategies individuals use to make sense of their changing identities. The process of reconstruction highlights the importance of communication within grief and identity processes, providing insights into how social network members both exacerbate and facilitate the grief process. Finally, results add to identity theory by suggesting that sudden changes in identity hierarchies require a shift in the hierarchy, but not a complete reconstruction. These findings support

important practical recommendations that practitioners, family, and friends can utilize to help facilitate identity meaning-making in bereaved individuals after the loss of a spouse.



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Appendix A: Study Advertisement Flyer



**Have you experienced the death of a spouse in the past five years? Are you between the ages of 18-75?**

If so, researchers from the University of Illinois are interested in hearing your story. We are conducting interviews with individuals who have recently lost a spouse.

Interested participants will engage in an audio-recorded interview about their experiences with loss. Interviews will take approximately 45–90 minutes and will remain confidential. Participants who are U.S. citizens, permanent residents, or resident aliens will receive a \$20 Amazon e-gift card in exchange for their involvement.

If you might be interested in participating, please contact me to learn more or to set up an interview:

Erin C. Wehrman, Doctoral Candidate  
University of Illinois at Urbana-Champaign  
[ewehrma2@illinois.edu](mailto:ewehrma2@illinois.edu)

**Thank you!**

## Appendix B: Recruitment Emails to Webmasters

### Initial Email

Greetings,

Thank you for your all you do to support individuals managing loss. My name is Erin Wehrman, and I am a doctoral candidate at the University of Illinois at Urbana-Champaign. I am currently working on a study to understand how people communicate after the death of a spouse. I was wondering if you might help spread the word to individuals who might want to participate.

I am seeking individuals to participate in interviews about their grief experiences. Interviews will take approximately 45–90 minutes and can be conducted in-person, over the phone, or through Skype. Individuals are eligible to participate if they (a) experienced the death of a spouse in the last five years and (b) are between the ages of 18–75. Participants who are U.S. citizens, permanent residents, or resident aliens will be compensated with a \$20 Amazon e-gift card for their involvement.

I would very much appreciate your help spreading the word. I have attached a flyer with information about the study, which includes my contact information. Could I have your permission to post the flyer in the [NAME OF FORUM]? Alternatively, you are welcome to post the flyer or circulate it in other ways (e.g., send it to listservs or Facebook pages) to potential participants as you see fit.

Information from this study will be useful for improving our knowledge of how people communicate about grief in their relationships. If you are willing to share information about the study, I would really appreciate it if you could reply to this email. If I can answer any questions, or if you would like to be removed from my contact list, you are also welcome to contact me. I appreciate your time and help.

Thank you!

Erin C. Wehrman, Doctoral Candidate  
University of Illinois at Urbana-Champaign  
ewehrma2@illinois.edu

## Follow up Email

Greetings,

Recently, I contacted you about a study that I am conducting about how individuals manage grief. I wanted to follow up on my initial email to ask for your assistance to spread the word to individuals who might want to participate.

I am seeking individuals to participate in interviews about their grief experiences. Interviews will take approximately 45–90 minutes and can be conducted in-person, over the phone, or through Skype. Individuals are eligible to participate if they (a) experienced the death of a spouse in the last five years and (b) are between the ages of 18–75. Participants who are U.S. citizens, permanent residents, or resident aliens will be compensated with a \$20 Amazon e-gift card for their involvement.

I would very much appreciate your help spreading the word. I have attached a flyer with information about the study, which includes my contact information. Could I have your permission to post the flyer in the [NAME OF FORUM]? Alternatively, you are welcome to post the flyer or circulate it in other ways (e.g., send it to listservs or Facebook pages) to potential participants as you see fit.

Information from this study will be useful for improving our knowledge of how people communicate about grief in their relationships. If you are willing to share information about the study, I would really appreciate it if you could reply to this email. If I can answer any questions, or if you would like to be removed from my contact list, you are also welcome to contact me. I appreciate your time and help.

Thank you!

Erin C. Wehrman, Doctoral Candidate  
University of Illinois at Urbana-Champaign  
ewehrma2@illinois.edu



## Appendix C: Recruitment Emails to Care Centers and Therapists

### Initial Email

Greetings,

Thank you for all you do to support individuals managing grief and loss. My name is Erin Wehrman, and I am a doctoral candidate at the University of Illinois at Urbana-Champaign. I am currently working on a study to understand how people communicate after the death of a spouse. I was wondering if you might help spread the word to individuals who might want to participate.

I am seeking individuals to participate in interviews about their grief experiences. Interviews will take approximately 45–90 minutes and can be conducted in-person, over the phone, or through Skype. Individuals are eligible to participate if they (a) experienced the death of a spouse in the last five years and (b) are between the ages of 18–75. Participants who are U.S. citizens, permanent residents, or resident aliens will be compensated with a \$20 Amazon e-gift card for their involvement.

I would very much appreciate your help with circulating information about the study. I have attached a flyer with details about the project, which also includes my contact information. These materials can be printed and posted in common spaces or newsletters, forwarded to listservs or group emails, or posted to websites and/or Facebook pages.

Information from this study will be useful for improving our knowledge of how people communicate about grief in their relationships. If you are willing to share information about the study, I would really appreciate it if you could reply to this email. If I can answer any questions, or if you would like to be removed from my contact list, you are also welcome to contact me. I appreciate your time and help.

Thank you!

Erin C. Wehrman, Doctoral Candidate  
University of Illinois at Urbana-Champaign  
ewehrma2@illinois.edu

## **Follow up Email**

Greetings,

Recently, I contacted you about a study that I am conducting about how individuals manage grief and communication. I wanted to follow up on my initial email to ask for your assistance in spreading the word to individuals who might want to participate. My name is Erin Wehrman, and I am a doctoral candidate at the University of Illinois at Urbana-Champaign. I am currently working on a study to understand how people communicate after the death of a spouse.

I am seeking individuals to participate in interviews about their grief experiences. Interviews will take approximately 45–90 minutes and can be conducted in-person, over the phone, or through Skype. Individuals are eligible to participate if they (a) experienced the death of a spouse in the last five years and (b) are between the ages of 18–75. Participants who are U.S. citizens, permanent residents, or resident aliens will be compensated with a \$20 Amazon e-gift card for their involvement.

I would very much appreciate your help with circulating information about the study. I have attached a flyer with details about the project, which also includes my contact information. These materials can be printed and posted in common spaces or newsletters, forwarded to listservs or group emails, or posted to websites and/or Facebook pages.

Information from this study will be useful for improving our knowledge of how people communicate about grief in their relationships. If you are willing to share information about the study, I would really appreciate it if you could reply to this email. If I can answer any questions, or if you would like to be removed from my contact list, you are also welcome to contact me. I appreciate your time and help.

Thank you!

Erin C. Wehrman, Doctoral Candidate  
University of Illinois at Urbana-Champaign  
ewehrma2@illinois.edu

## Appendix D: Screening Email

Greetings,

Thank you for your interest in my study of how people communicate after the death of a spouse. Your involvement is incredibly important for contributing to research that can potentially help others manage the loss of a loved one.

I am seeking individuals to participate in interviews about their grief experiences. Interviews will take approximately 45–90 minutes and can be conducted in-person, over the phone, or through Skype. Individuals are eligible to participate if they (a) experienced the death of a spouse in the last five years and (b) are between the ages of 18–75. Participants who are U.S. citizens, permanent residents, or resident aliens will be compensated with a \$20 Amazon e-gift card for their involvement.

Before I schedule your interview, I would like for you to verify that you meet the following criteria:

- (a) You are between the ages of 18-75;
- (b) You have experienced the death of a spouse in the past five years; and
- (c) You are willing to participate in an audio-recorded interview.

Please reply to this email indicating that you meet all of the above criteria. All information provided within our communication exchanges will be kept confidential.

Thank you again for your interest!

Erin C. Wehrman, Doctoral Candidate  
University of Illinois at Urbana-Champaign  
ewehrma2@illinois.edu

## Appendix E: Reminder Email

### Reminder Email for Phone or Skype Interviews

Greetings,

Thank you again for agreeing to participate in an interview about your experiences. This is a reminder that your interview is scheduled for [TIME] on [DAY OF WEEK, MONTH, DAY, YEAR].

Additionally, I have included a link to an important document for you to review before our interview. It includes information about our informed consent policies, which we will also go over at the beginning of the interview. Please read the information and indicate whether you consent to participate by checking the appropriate box [LINK TO INFORMED CONSENT, Appendix H]. I am also happy to send you a copy of the informed consent document upon request.

If you have any questions or if you would like to change your interview time, please do not hesitate to contact me. Following our interview, I will send you a link that will allow you to submit information necessary to receive your \$20 Amazon e-gift card as a thank you for participating. Please note that compensation is only available to U.S. citizens, permanent residents, or resident aliens.

I look forward to meeting with you soon.

My best,

Erin C. Wehrman, Doctoral Candidate  
University of Illinois at Urbana-Champaign  
[ewehrma2@illinois.edu](mailto:ewehrma2@illinois.edu)

## Reminder Email for In-Person Interviews

Greetings,

Thank you again for agreeing to participate in an interview about your experiences. This is a reminder that your interview is scheduled for [TIME] on [DAY OF WEEK, MONTH, DAY, YEAR] at [LOCATION].

Additionally, I have included a link to an important document for you to review before our interview. It includes information about our informed consent policies, which we will also go over at the beginning of the interview. Please read the information and indicate whether you consent to participate by checking the appropriate box [LINK TO INFORMED CONSENT, Appendix H]. I am also happy to send you a copy of the informed consent document upon request.

If you have any questions or if you would like to change your interview time or location, please do not hesitate to contact me. Following our interview, I will send you a link that will allow you to submit information necessary to receive your \$20 Amazon e-gift card as a thank you for participating. Please note that compensation is only available to U.S. citizens, permanent residents, or resident aliens.

I look forward to meeting with you soon.

My best,

Erin C. Wehrman, Doctoral Candidate  
University of Illinois at Urbana-Champaign  
ewehrma2@illinois.edu

## Appendix F: Thank You Email and Resources

Greetings,

Thank you again for participating in an interview about your experiences with grief. As a reminder, your involvement is incredibly important for contributing to research that can potentially help others manage the loss of a loved one.

To thank you for your time, I will be emailing you a \$20 Amazon e-gift card. Please use the following link to enter your name and address in order to process your payment. Your information will be kept confidential and will not be linked with your interview answers. [LINK TO QUALTRICS SURVEY, Appendix G]. Please note that compensation is only available to U.S. citizens, permanent residents, or resident aliens.

In the future, I may have clarification or follow-up questions for participants. If you are willing to allow me to contact you in the future regarding the findings of this study, please send me an email. Your information will continue to remain private and confidential.

Lastly, if you experienced any emotional distress from participating in the interview, please reach out to a trained professional for help. Here is a list of nationwide resources to guide you:

- *Caring Connections – National Service*  
<http://www.caringinfo.org/i4a/pages/index.cfm?pageid=1>  
Phone: 800-658-8898
- *Grief Share – Find Local Services*  
<https://www.griefshare.org/>  
Phone: 800-395-5755
- *Online Grief Support*  
<http://www.onlinegriefsupport.com/groups>

If you have any questions about this project or your participation, please let me know.

My best,

Erin C. Wehrman, Doctoral Candidate  
University of Illinois at Urbana-Champaign  
[ewehrma2@illinois.edu](mailto:ewehrma2@illinois.edu)

## **Appendix G: Payment Information**

Thank you for your participation in my study of how people communicate after the death of a spouse. Your involvement is incredibly important for contributing to research that can potentially help others manage the loss of a loved one.

As a thank you for your time, I will be sending you a \$20 Amazon e-gift card. The following information is required by the University of Illinois at Urbana Champaign in order to process your payment. All information will be kept confidential and will not be linked with your interview answers. Please note that compensation is only available to U.S. citizens, permanent residents, or resident aliens.

Name:

Email:

Address:

I am a U.S. citizen, permanent resident, or resident alien.    Yes    No

Thank you!

## Appendix H: Informed Consent, Electronic Version for All Interviews

### UNIVERSITY OF ILLINOIS AT URBANA-CHAMPAIGN

#### Department of Communication

College of Liberal Arts and Sciences  
3001 Lincoln Hall  
702 South Wright Street  
Urbana, IL 61801



#### Identity and Communication in Individuals' Experiences of Grief

You are being asked to participate in a research study. Researchers are required to provide a consent form such as this one to tell you about the research, to explain that taking part is voluntary, to describe the risks and benefits of participation, and to help you to make an informed decision. You should feel free to ask the researchers any questions you may have.

Principal Investigator Name and Title: **Leanne Knobloch, Ph.D.**

Department and Institution: **University of Illinois at Urbana-Champaign, Department of Communication**

Address and Contact Information: **3032 Lincoln Hall, knobl@illinois.edu, (217) 333-8913**

#### Why am I being asked?

You are being asked to participate in a research study about how people communicate and manage identity changes after the loss of a spouse.

You have been asked to participate in the research because you (a) are between the ages of 18–75 years, (b) have had a spouse pass away in the past five years, and (c) are willing to participate in an audio-recorded interview.

Your participation in this research is voluntary. Your decision whether or not to participate will not affect your current or future dealings with the University of Illinois at Urbana-Champaign. **If you decide to participate, you are free to withdraw at any time without affecting that relationship.**

Approximately 30 participants may be involved in this research at the University of Illinois at Urbana-Champaign.

#### What is the purpose of this research?

The purpose of this research is to investigate how individuals communicate with friends and family after the death of a spouse. This research will hopefully contribute to our understanding of the grief process and potentially help others managing the loss of a loved one.



**What procedures are involved?**

This research will be performed in-person, over the phone, or through Skype. To participate in this study, you will be asked to engage in an audio-recorded interview with a member of the research team. The interview should last approximately 45-90 minutes. Questions will focus on the kinds of changes you experienced following the death of your spouse and the communication you engaged in with friends and family.

**What are the potential risks and discomforts?**

To the best of our knowledge, the things you will be doing have no more risk of harm than you would experience in everyday life. However, the nature of the study may cause you to think and talk about things that can be difficult or challenging regarding the loss of your spouse. You may choose not to answer any questions that make you feel uncomfortable, and you can end your participation in this research at any time without loss or penalty.

**Are there benefits to taking part in the research?**

Taking part in this research study may not benefit you personally, but our research team may learn new things that will help others grieving the loss of a loved one. In talking about your experiences, you might better understand your own grief experiences.

**What other options are there?**

You have the option to not participate in this study.

**Will my study-related information be kept confidential?**

Faculty, staff, students, and others with permission or authority to see your study information will maintain its confidentiality to the extent permitted and required by laws and university policies. Transcripts will be coded using pseudonyms rather than real names. The names or personal identifiers of participants will not be published or presented.

**What are the costs for participating in this research?**

Costs to you for participating (if you choose to complete an in-person interview) may come from transportation to and from the interview or parking at the interview location.

**Will I be reimbursed for any of my expenses or paid for my participation in this research?**

If you are a U.S. citizen, permanent resident, or resident alien, you will receive a \$20 e-gift card to Amazon for your participation. You will receive your payment through email within approximately 30 days after you submit your contact information following the interview. Individuals who are not U.S. citizens, permanent residents, or resident aliens are welcome to participate but will not be compensated.

**Can I withdraw or be removed from the study?**

If you decide to participate, you are free to withdraw your consent and discontinue participation at any time.

The researchers also have the right to stop your participation in this study without your consent if

- *They believe it is in your best interests;*
- *You were to object to any future changes that may be made in the study plan.*

telephone 217-333-2683 • fax 217-244-7981  
communication.illinois.edu

In the event you withdraw or are asked to leave the study, you will still be compensated as described above.

**Who should I contact if I have questions?**

Contact the researchers Erin Wehrman, M.A., at [ewehrma2@illinois.edu](mailto:ewehrma2@illinois.edu) or (417) 619-3010 or Dr. Leanne Knobloch at [knobl@illinois.edu](mailto:knobl@illinois.edu) or (217) 333-8913:

- if you have any questions about this study or your part in it;
- if you have questions, concerns, or complaints about the research.

**What are my rights as a research subject?**

If you feel you have not been treated according to the descriptions in this form, or if you have any questions about your rights as a research subject, including questions, concerns, complaints, or to offer input, you may call the Office for the Protection of Research Subjects (OPRS) at 217-333-2670 or e-mail OPRS at [irb@illinois.edu](mailto:irb@illinois.edu)

**Remember:**

Your participation in this research is voluntary. Your decision whether or not to participate will not affect your current or future relations with the University. If you decide to participate, you are free to withdraw at any time without affecting that relationship.

- I have read (or someone has read to me) the above information. I have been given an opportunity to ask questions and my questions have been answered to my satisfaction. I agree to participate in this research. I can print a copy of this form for my records or request a copy from the research team. I also assert that I meet the following requirements and voluntarily agree to participate in the study:
  - I am between the ages of 18-75 years;
  - I have had a spouse who has died in the past five years;
  - I am willing to participate in an audio-recorded interview.
- I decline participation in the study.

Name:

Date (MM/DD/YYYY):

**Contact information for Support Resources:**

*Caring Connections – National Service*

<http://www.caringinfo.org/i4a/pages/index.cfm?pageid=1>

Phone: 800-658-8898

*Grief Share – Find Local Services*

<https://www.griefshare.org/>

Phone: 800-395-5755

*Online Grief Support*

<http://www.onlinegriefsupport.com/groups>

telephone 217-333-2683 • fax 217-244-7981  
communication.illinois.edu

## Appendix I: Informed Consent, Oral Version for Phone and Skype Interviews

### UNIVERSITY OF ILLINOIS AT URBANA-CHAMPAIGN

#### Department of Communication

College of Liberal Arts and Sciences  
3001 Lincoln Hall  
702 South Wright Street  
Urbana, IL 61801



#### Identity and Communication in Individuals' Experiences of Grief

You are being asked to participate in a research study. Researchers are required to provide a consent form such as this one to tell you about the research, to explain that taking part is voluntary, to describe the risks and benefits of participation, and to help you to make an informed decision. You should feel free to ask the researchers any questions you may have.

Principal Investigator Name and Title: **Leanne Knobloch, Ph.D.**

Department and Institution: **University of Illinois at Urbana-Champaign, Department of Communication**

Address and Contact Information: **3032 Lincoln Hall, knobl@illinois.edu, (217) 333-8913**

#### Why am I being asked?

You are being asked to participate in a research study about how people communicate and manage identity changes after the loss of a spouse.

You have been asked to participate in the research because you (a) are between the ages of 18–75 years, (b) have had a spouse pass away in the past five years, and (c) are willing to participate in an audio-recorded interview.

Your participation in this research is voluntary. Your decision whether or not to participate will not affect your current or future dealings with the University of Illinois at Urbana-Champaign. **If you decide to participate, you are free to withdraw at any time without affecting that relationship.**

Approximately 30 participants may be involved in this research at the University of Illinois at Urbana-Champaign.

#### What is the purpose of this research?

The purpose of this research is to investigate how individuals communicate with friends and family after the death of a spouse. This research will hopefully contribute to our understanding of the grief process and potentially help others managing the loss of a loved one.

**What procedures are involved?**

This research will be performed in-person, over the phone, or through Skype. To participate in this study, you will be asked to engage in an audio-recorded interview with a member of the research team. The interview should last approximately 45-90 minutes. Questions will focus on the kinds of changes you experienced following the death of your spouse and the communication you engaged in with friends and family.

**What are the potential risks and discomforts?**

To the best of our knowledge, the things you will be doing have no more risk of harm than you would experience in everyday life. However, the nature of the study may cause you to think and talk about things that can be difficult or challenging regarding the loss of your spouse. You may choose not to answer any questions that make you feel uncomfortable, and you can end your participation in this research at any time without loss or penalty.

**Are there benefits to taking part in the research?**

Taking part in this research study may not benefit you personally, but our research team may learn new things that will help others grieving the loss of a loved one. In talking about your experiences, you might better understand your own grief experiences.

**What other options are there?**

You have the option to not participate in this study.

**Will my study-related information be kept confidential?**

Faculty, staff, students, and others with permission or authority to see your study information will maintain its confidentiality to the extent permitted and required by laws and university policies. Transcripts will be coded using pseudonyms rather than real names. The names or personal identifiers of participants will not be published or presented.

**What are the costs for participating in this research?**

Costs to you for participating (if you choose to complete an in-person interview) may come from transportation to and from the interview or parking at the interview location.

**Will I be reimbursed for any of my expenses or paid for my participation in this research?**

If you are a U.S. citizen, permanent resident, or resident alien, you will receive a \$20 e-gift card to Amazon for your participation. You will receive your payment through email within approximately 30 days after you submit your contact information following the interview. Individuals who are not U.S. citizens, permanent residents, or resident aliens are welcome to participate but will not be compensated.

**Can I withdraw or be removed from the study?**

If you decide to participate, you are free to withdraw your consent and discontinue participation at any time.

The researchers also have the right to stop your participation in this study without your consent if:

- *They believe it is in your best interests;*
- *You were to object to any future changes that may be made in the study plan.*

telephone 217-333-2683 • fax 217-244-7981  
communication.illinois.edu

In the event you withdraw or are asked to leave the study, you will still be compensated as described above.

**Who should I contact if I have questions?**

Contact the researchers Erin Wehrman, M.A., at [ewehrma2@illinois.edu](mailto:ewehrma2@illinois.edu) or (417) 619-3010 or Dr. Leanne Knobloch at [knobl@illinois.edu](mailto:knobl@illinois.edu) or (217) 333-8913:

- if you have any questions about this study or your part in it,
- if you have questions, concerns, or complaints about the research.

**What are my rights as a research subject?**

If you feel you have not been treated according to the descriptions in this form, or if you have any questions about your rights as a research subject, including questions, concerns, complaints, or to offer input, you may call the Office for the Protection of Research Subjects (OPRS) at 217-333-2670 or e-mail OPRS at [irb@illinois.edu](mailto:irb@illinois.edu)

**Remember:**

Your participation in this research is voluntary. Your decision whether or not to participate will not affect your current or future relations with the University. If you decide to participate, you are free to withdraw at any time without affecting that relationship.

I have read (or someone has read to me) the above information. I have been given an opportunity to ask questions and my questions have been answered to my satisfaction. I agree to participate in this research. I have been given a copy of this form. I also assert that I meet the following requirements and voluntarily agree to participate in the study:

- I am between the ages of 18-75 years;
- I have had a spouse who has died in the past five years;
- I am willing to participate in an audio-recorded interview.

Verbal answer:            YES (continue interview)            or            NO (end interview)

**Reminder of support resources:**

**Contact information for Support Resources:**

*Caring Connections – National Service*

<http://www.caringinfo.org/i4a/pages/index.cfm?pageid=1>

Phone: 800-658-8898

*Grief Share – Find Local Services*

<https://www.griefshare.org/>

Phone: 800-395-5755

*Online Grief Support*

<http://www.onlinegriefsupport.com/groups>

## Appendix J: Informed Consent, Written Consent for In-Person Interviews

### UNIVERSITY OF ILLINOIS AT URBANA-CHAMPAIGN

#### Department of Communication

College of Liberal Arts and Sciences  
3001 Lincoln Hall  
702 South Wright Street  
Urbana, IL 61801



#### Identity and Communication in Individuals' Experiences of Grief

You are being asked to participate in a research study. Researchers are required to provide a consent form such as this one to tell you about the research, to explain that taking part is voluntary, to describe the risks and benefits of participation, and to help you to make an informed decision. You should feel free to ask the researchers any questions you may have.

Principal Investigator Name and Title: **Leanne Knobloch, Ph.D.**

Department and Institution: **University of Illinois at Urbana-Champaign, Department of Communication**

Address and Contact Information: **3032 Lincoln Hall, knobl@illinois.edu, (217) 333-8913**

#### Why am I being asked?

You are being asked to participate in a research study about how people communicate and manage identity changes after the loss of a spouse.

You have been asked to participate in the research because you (a) are between the ages of 18–75 years, (b) have had a spouse pass away in the past five years, and (c) are willing to participate in an audio-recorded interview.

Your participation in this research is voluntary. Your decision whether or not to participate will not affect your current or future dealings with the University of Illinois at Urbana-Champaign. **If you decide to participate, you are free to withdraw at any time without affecting that relationship.**

Approximately 30 participants may be involved in this research at the University of Illinois at Urbana-Champaign.

#### What is the purpose of this research?

The purpose of this research is to investigate how individuals communicate with friends and family after the death of a spouse. This research will hopefully contribute to our understanding of the grief process and potentially help others managing the loss of a loved one.

**What procedures are involved?**

This research will be performed in-person, over the phone, or through Skype. To participate in this study, you will be asked to engage in an audio-recorded interview with a member of the research team. The interview should last approximately 45-90 minutes. Questions will focus on the kinds of changes you experienced following the death of your spouse and the communication you engaged in with friends and family.

**What are the potential risks and discomforts?**

To the best of our knowledge, the things you will be doing have no more risk of harm than you would experience in everyday life. However, the nature of the study may cause you to think and talk about things that can be difficult or challenging regarding the loss of your spouse. You may choose not to answer any questions that make you feel uncomfortable, and you can end your participation in this research at any time without loss or penalty.

**Are there benefits to taking part in the research?**

Taking part in this research study may not benefit you personally, but our research team may learn new things that will help others grieving the loss of a loved one. In talking about your experiences, you might better understand your own grief experiences.

**What other options are there?**

You have the option to not participate in this study.

**Will my study-related information be kept confidential?**

Faculty, staff, students, and others with permission or authority to see your study information will maintain its confidentiality to the extent permitted and required by laws and university policies. Transcripts will be coded using pseudonyms rather than real names. The names or personal identifiers of participants will not be published or presented.

**What are the costs for participating in this research?**

Costs to you for participating (if you choose to complete an in-person interview) may come from transportation to and from the interview or parking at the interview location.

**Will I be reimbursed for any of my expenses or paid for my participation in this research?**

If you are a U.S. citizen, permanent resident, or resident alien, you will receive a \$20 e-gift card to Amazon for your participation. You will receive your payment through email within approximately 30 days after you submit your contact information following the interview. Individuals who are not U.S. citizens, permanent residents, or resident aliens are welcome to participate but will not be compensated.

**Can I withdraw or be removed from the study?**

If you decide to participate, you are free to withdraw your consent and discontinue participation at any time.

The researchers also have the right to stop your participation in this study without your consent if:

- *They believe it is in your best interests;*
- *You were to object to any future changes that may be made in the study plan.*

telephone 217-333-2683 • fax 217-244-7981  
communication.illinois.edu

In the event you withdraw or are asked to leave the study, you will still be compensated as described above.

**Who should I contact if I have questions?**

Contact the researchers Erin Wehrman, M.A., at [ewehrma2@illinois.edu](mailto:ewehrma2@illinois.edu) or (417) 619-3010 or Dr. Leanne Knobloch at [knobl@illinois.edu](mailto:knobl@illinois.edu) or (217) 333-8913:

- if you have any questions about this study or your part in it,
- if you have questions, concerns, or complaints about the research.

**What are my rights as a research subject?**

If you feel you have not been treated according to the descriptions in this form, or if you have any questions about your rights as a research subject, including questions, concerns, complaints, or to offer input, you may call the Office for the Protection of Research Subjects (OPRS) at 217-333-2670 or e-mail OPRS at [irb@illinois.edu](mailto:irb@illinois.edu)

**Remember:**

Your participation in this research is voluntary. Your decision whether or not to participate will not affect your current or future relations with the University. If you decide to participate, you are free to withdraw at any time without affecting that relationship.

I have read (or someone has read to me) the above information. I have been given an opportunity to ask questions and my questions have been answered to my satisfaction. I agree to participate in this research. I have been given a copy of this form. I also assert that I meet the following requirements and voluntarily agree to participate in the study:

- I am between the ages of 18-75 years;
- I have had a spouse who has died in the past five years;
- I am willing to participate in an audio-recorded interview.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature of Person Obtaining Consent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Person Obtaining Consent

**Contact information for Support Resources:**

*Caring Connections – National Service*

<http://www.caringinfo.org/i4a/pages/index.cfm?pageid=1>

Phone: 800-658-8898

*telephone 217-333-2683 • fax 217-244-7981*  
communication.illinois.edu



*Grief Share – Find Local Services*

<https://www.griefshare.org/>

Phone: 800-395-5755

*Online Grief Support*

<http://www.onlinegriefsupport.com/groups>

## **Appendix K: Interview Protocol**

Thank you for agreeing to participate in this study today. First, let's go over the informed consent document.

- For in-person interviews, first provide the participant with a copy of the informed consent form. Verbally highlight the following sections of the document: Why am I being asked? Will my study-related information be kept confidential? Will I be reimbursed for any of my expenses or paid for my participation in this research? Can I withdraw or be removed from the study? Ask the individual to sign and date the last page to indicate his/her consent. If he/she declines, thank him/her for his/her time and then immediately end the interview.
- For phone or Skype interviews, verbally highlight the following sections of the document: Why am I being asked? Will my study-related information be kept confidential? Will I be reimbursed for any of my expenses or paid for my participation in this research? Can I withdraw or be removed from the study? Afterwards, ask the participant whether or not he/she she agrees with the final document statement. If he/she declines, thank him/her for his/her time and then immediately end the interview. Remind him/her that we are happy to send a copy of the informed consent document at any time.

Before we begin audio recording, do you have any questions?

In today's interview, I'm going to ask you questions about your experience with the loss of your spouse, as well as other experiences over the past five years. We'll start out by talking about basic demographic information and details about your marriage, then move to talking about the loss of your spouse, and finally discuss the communication encounters you've shared with others over the last five years. You are welcome to bring up anything you see as relevant at any point, though. Let's get started.

### **Questions about demographics and the romantic relationship**

First, I'd like to ask you a few basic demographic questions, and then I'd like to hear a little bit about your spouse and your relationship.

1. What is your age?
2. What is your race or ethnicity?
3. Can you tell me a little about your spouse?
  - a. What was he or she like?
4. What year were you two married?
  - a. How long were you a couple before you were married?
5. Could you briefly describe what your marriage was like?

### **Questions about the grief experience and identity**

Now, I would like to move to discussing your experiences around the time when your spouse passed away. Let's start by discussing yourself and your relationship immediately before his/her death.

6. I want you to think about the kind of person you were before you experienced the death of your spouse. How might you describe yourself to others about the kind of person you were?
  - a. What parts of who you were really defined you the most, do you think?
  - b. What responsibilities did you have that really meant a lot to you?
7. What was your relationship with your spouse like right before he/she passed away?
  - a. What things did each of you do in your relationship (i.e., roles, responsibilities)?
  - b. What was a regular day in your life together like?

Now, I'd like to ask you a few questions specifically about your spouse's death.

8. Are you comfortable talking about the circumstances surrounding your spouse's passing? [ask only if yes]
  - a. What was the cause of your spouse's death?
  - b. How long ago did he/she pass away?
  - c. How old were you at the time? How old was he/she at the time?
9. Can you describe what it was like to deal with the loss of your spouse?
  - a. What were the days and weeks like after he/she passed away?
10. What changes, if any, have you experienced since your spouse passed?
  - a. What challenges, if any, have you experienced since he/she passed?
  - b. What good things, if any, have you experienced since he/she passed?

In the next few questions, I'd like you to think about yourself before versus after you lost your spouse.

11. Tell me about the kind of person you are now.
  - a. How has the way you see yourself changed, if at all, from before to after your loss?
  - b. How does that compare or contrast to the person you were before your spouse's death?
    - a. How do you see yourself differently now, if at all?
    - b. What, if anything, has stayed the same about the way you see yourself?
12. How does the way you act around others compare from before your spouse passed until now?
  - a. What changes, if any, have you noticed about your behavior?
  - b. What, if anything, has stayed the same about the way you act?
  - c. Are there times when you feel caught between your roles or identities?

13. How has the way other people treat you since your spouse passed away compare to how they treated you before he/she died?
- Are there times when others treat you differently than before? What changes, if any, have you seen in the way people treat you?
  - Have you ever experienced someone treating you as someone you're not?
  - What, if anything, has stayed the same about the way people treat you?
  - How do the ways people treat you differently or the same make you feel?

Grief can be a very thoughtful time for some people. With that in mind, the next two questions ask about your experiences making sense of the loss of your spouse.

14. Since your spouse passed away, have you been able to make sense of or find meaning in his/her death?
- If so, how have you made sense of or found meaning in his/her passing?
  - If not, why do you think you haven't made sense of or found meaning in your spouse's passing?
15. Some people are always looking for the positives even in terrible situations. With that in mind, have you found any benefits in the loss of your spouse?
- If so, what benefits have you found?
  - If not, why do you think you haven't found any benefits?

### **Questions about communication from others**

Now, I'd like to ask you a few questions about how others communicated with you before and after the loss of your spouse. You can consider how people have talked to you in-person, face-to-face, or over the phone, email, texting, or anything else.

16. How did friends and family members talk to you or communicate with you immediately after your spouse died?
- What kinds of topics did they talk about?
  - How did you feel after having these conversations?
  - What were some things people said or did that were helpful, if anything, at the time you lost your spouse?
  - What were some things people said or did that were not helpful, if anything, after you lost your spouse?
17. How has communication with friends and family been different, if at all, from before your spouse passed away to afterwards?

In the final few questions, I'd like to ask about how your communication with friends and family impacts, if at all, how you feel about yourself.

18. How, if at all, has talking with friends and family affected how you see yourself or feel about yourself after the death of your spouse?

19. Can you describe a time when a conversation with a friend or family member made you feel better about how you see yourself after the loss of your spouse?
20. Can you describe a time when a conversation with a friend or family member made you feel worse about how you see yourself after the loss of your spouse?
21. How does the way your friends and family talked to you or communicated with you immediately after your spouse's death compare to how they talk to you now?
  - a. How likely are you to talk about the loss of your spouse to friends or family now?
  - b. To whom do you communicate about your loss most often?
  - c. Who are the people you do not communicate about your loss with? Why not?
  - d. What do you wish you could talk about, if anything?
  - e. Do you ever get a sense that people avoid certain topics around you?
22. What advice would you give to others who are dealing with the death of their spouse?
23. What advice would you give to someone struggling to come to terms with who they are after the loss of their spouse?
24. Since we are nearing the end of our interview, I'd like you to reflect on our conversation today. How, if at all, do you feel differently after this interview?
  - a. What did you discover about yourself today, if anything?

### **Concluding questions**

Those are all of the questions that I have for you. Is there anything else that you would like to add about this experience that you think would be important for us to know? Do you have any questions for us?

Thank you for your time, and please let me know if you have any questions.

## Appendix L: Training Guidelines for Undergraduate Research Assistants

### Data Use and Security Policy

Protecting participants' privacy and keeping their information secure is our number one priority. Because you are working remotely, we will take extra precautions to protect the data that is shared with you. Please abide by all of the following guidelines to ensure that our participants are protected.

1. We will store all of our data on UIUC Box (box.illinois.edu). Do **not**, for any reason, save data (audio files or transcripts) to your personal computer, a jump drive, or your personal email accounts. These are not secure locations and could be accessed by others. If you believe any breach of confidentiality has occurred, you must contact the graduate student who is supervising you immediately.
2. Always log out of UIUC Box when you finish each transcription section. Make sure you protect your passwords.
3. Always transcribe using earphones, so that others cannot hear the audio that you are transcribing.
4. Never discuss the content of an interview with anyone outside of the research team.
5. If you recognize a voice on an audio recording or you can identify a participant based on details he or she provides during the interview, you should stop the recording and transcription immediately and contact your supervising graduate student. The interview will be assigned to another research assistant.

Use common sense and good judgment when you handle participants' data. If you are ever unsure about data management, email your supervising graduate student.

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