QUALITATIVE EXPLORATION OF THE NATURE OF GRIEF-RELATED BELIEFS AND EXPECTATIONS*

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ABSTRACT
Societal expectations of grief impact the experience of bereavement. The congruence of societal expectations with current scientific understanding of grief is unknown. Therefore two qualitative studies explored community perceptions of grief. In study one, three small focus groups (N = 9) examined grief-related expectations associated with hypothetical scenarios of bereavement. In study two, the impact of grief-related perceptions on the lived experience of bereavement for 11 individuals was explored through semi-structured interviews. Across both studies, elements of a traditional stage model view of grief were evident, with participants viewing emotional expression of grief as important. An avoidant coping style in the bereaved was considered problematic. Findings of study two suggested that grief-related beliefs may impact the bereavement experience via appraisal of the grief response and willingness to support bereaved individuals. The studies suggested that stage model assumptions in the beliefs of the general population persist, although there was a recognition of diversity in the grief response.

INTRODUCTION
Positive social interactions are an important resource for coping with bereavement (Vachon & Stylianos, 1988). More often than not, however, bereaved individuals receive negative critical and judgmental comments from others in their social environment.

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network, which can have a greater impact on coping than positive social exchanges (e.g., Ingram, Jones, & Smith, 2001; Kaunonen, Tarkka, Paunonen, & Laippala, 1999). Individuals develop expectations about how others should react in specific situations, such as bereavement (Miller & Turnbull, 1986; Wortman & Silver, 1989). These expectations, influenced by the dominant professional and cultural discourse on bereavement, may impact the provision of effective social support to bereaved individuals (Wortman & Silver, 1989). Given the well-documented importance of positive social reactions during bereavement, examining expectations about bereavement is important, as inaccurate bereavement-related expectations may lead to negative social exchanges.

Within the professional literature, current understanding of bereavement has changed from a traditional stage model view of grief, as a series of distinct stages, to an empirically-based view of grief variability. How this shift in understanding has influenced societal views of bereavement is unknown, as lay perceptions of bereavement have not been examined. Given the recent shift in thinking within the professional literature regarding bereavement and, as individual expectations about grief are partly informed by professional understanding, examining bereavement-related expectations within the community is necessary. The current research is a first step toward that end.

**Traditional Stage Model Perspective**

According to the psychoanalytic stage model perspective of grief (Freud, 1917; Lindemann, 1979; Sanders, 1999), bereavement consists of a uniform series of distinct stages, ranging from shock, to intense distress, and ending with recovery. This pattern of grief is commonly termed a “normal” grief response. Failure to move through these stages in a timely fashion was viewed as pathological, and assumed to lead to subsequent physical and/or psychological symptoms. Wortman and Silver (1989, 2001) identified five fundamental assumptions of the traditional perspective: a) intense distress or depression is experienced following bereavement; b) working through thoughts and feelings of grief facilitates resolution of grief; c) making meaning from bereavement is important; d) breaking down the bond to the deceased person is an important task; and e) recovery from grief is achievable.

Although the stage model perspective was advanced as a heuristic device to conceptualize the normal course of the grief response, some people outside the scientific community have interpreted it as prescriptive of the grief response (Small, 2001; Stroebe, van den Bout, & Schut, 1994; Wortman & Silver, 1989).

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1 The term normal grief is used throughout this article to refer to the traditional conception of the grief response, advanced by the stage model perspective, of intense distress which diminishes over time. The original use of the word normal in relation to bereavement is based in the clinical perspective of grief, which distinguishes between an adaptive grief response and other, maladaptive, reactions to bereavement.
According to Bonanno and Kaltman (1999), the stage model perspective has received uncritical acceptance within the bereavement field, and is used as a framework for working with bereaved individuals. For example, in one study, an international sample of 77 bereavement practitioners and researchers, from America, the United Kingdom, Australia, Israel, Canada, South Africa, and other unspecified countries, endorsed the traditional “normal” view of grief as intense distress which diminishes over time (Middleton, Moylan, Raphael, Burnett, & Martinek, 1993).

Recent Empirical Findings

A large body of empirical research on the grief process conducted since 1990 has failed to support the assumptions of the traditional stage model perspective (e.g., Bonanno & Field, 2001; Carnelly, Wortman, & Kessler, 1999; Davis, Nolen-Hoeksema, & Larson, 1998; Nolen-Hoeksema, McBride, & Larson, 1997; Schwartzberg & Janoff-Bulman, 1991). Instead, more recent research suggests that grief responses are characterized by individual difference (Wortman & Silver, 2001). Four general patterns of grief have been identified: “normal” grief (typified by the traditional view), chronic, absent, and delayed grief patterns. In a selective review of five methodologically rigorous, longitudinal studies, the assumed “normal” stage model pattern of intense distress which decreases over time was not found to be a prevalent grief response across studies (Wortman & Silver, 1993). The occurrence of this “normal” grief response ranged from 9 to 41% of the samples across the individual studies reviewed, while alternative grief patterns, such as a low level of distress across both early and later stages of bereavement (an absent pattern), were more frequently reported.

The traditional assumptions of grief have been challenged by recent research. For example, not all bereaved individuals report experiencing intense distress shortly after bereavement and, in one study, an experience of positive emotion was reported by a sample of 30 men following their homosexual partners’ AIDS-related death (Stein, Folkman, Trabasso, & Richards, 1997). Furthermore, actively avoiding thoughts and feelings of grief has been found to lead to positive adjustment rather than to maladjustment through the first five years after bereavement (e.g., Bonanno & Field, 2001; Bonanno & Keltner, 1997; Bonanno, Keltner, Holen, & Horowitz, 1995). Making sense of one’s loss does not appear to be an important task for all bereaved individuals, nor is it necessarily achieved by all who seek it (e.g., Davis, Wortman, Lehman, & Silver, 2000; Schwartzberg & Janoff-Bulman, 1991). Research suggests that, through the grief process, the bond with a deceased person is sometimes transformed into a symbolic, continuing relationship (e.g., Silverman, Nickman, & Worden, 1992). Finally, some individuals do not recover from their grief, but instead, accommodate grief into their lives (e.g., Rubin, 1996).
Expectations of Grief and Bereavement

When interacting with another person, we hold specific expectations about how the other person will behave (Miller & Turnbull, 1986). In relation to bereavement, individuals hold expectations about how a bereaved individual should react (Kubitz, Thornton, & Robertson, 1989). Grief-related expectations may impact interactions with bereaved individuals, as well as their bereavement-related functioning. If an individual possesses specific and overly rigid expectations about the course of bereavement, based on the stage model of grief, they may harshly judge an individual whose grief response does not conform to the “normal” pattern of intense distress which diminishes over time. This may lead to a negative social interaction. Alternatively, expectancies centered on the current scientific understanding of grief variability may be associated with a greater acceptance of bereaved individuals who display different grief patterns. This more flexible expectation may lead to empathic and supportive interactions with a bereaved individual. Further, if bereaved individuals hold rigid, inaccurate, grief-related expectations, they may be self-critical of their own grief response if it fails to match their expectancies (Wortman & Silver, 1989). This may exacerbate their bereavement-related distress. For these reasons, examining expectations of grief is warranted.

Previous research addressing lay perceptions of grief is limited to only one identified study of 172 university students (Kubitz et al., 1989), in which type of death, gender of the griever, and intensity of grief, were found to mediate the attractiveness of hypothetical bereaved individuals. Bereaved men who displayed a lack of intense grief following both sudden and expected deaths were rated as more attractive than bereaved men who displayed intense grief symptoms, regardless of type of death. Among hypothetical bereaved women, a lack of intense grief following an expected death, and an intense grief response following a sudden death, were both associated with high attractiveness ratings. While this study suggested that individuals may hold specific expectations about the grief response of men and women, it was limited to a young adult sample, and did not examine expectations of grief in relation to the traditional stage model perspective. Furthermore, Kubitz et al.’s (1989) study was conducted more than a decade ago in America. Investigating the extent to which traditional grief work assumptions have become embedded within contemporary Australian community expectations of grief was warranted. Further, how individuals’ expectations of grief influence the experience of bereavement from the perspective of bereaved individuals had not yet been addressed.

The Current Studies

Although a previous study (Middleton et al., 1993) had examined grief practitioners’ and researchers’ views of the grief response, and had found endorsement of the traditional perspective of grief, research investigating community
expectations of grief was limited to one identified dated study (Kubitz et al., 1989). Furthermore, the impact of grief-related expectations on the bereavement experience had yet to be explored. Therefore, the current qualitative research was undertaken in order to explore a) community expectations of grief among an Australian sample, for evidence of traditional stage model assumptions of grief; and b) the impact of grief-related expectations on the lived experience of bereavement.

An exploratory qualitative approach was selected as the most suitable for the current studies, as this approach allowed the researcher to elicit in-depth, rich data regarding the “meaning of social phenomena” (Berg, 2001; Steckler, McLeroy, Goodman, Bird, & McCormick, 1992). In relation to the bereavement experience, qualitative methods can uncover the unique meanings different individuals attach to grief and grieving, and which underlie bereaved individuals’ grief reactions (Stroebe, Stroebe, & Schut, 2003).

STUDY ONE: COMMUNITY PERCEPTIONS OF GRIEF: A FOCUS GROUP STUDY

Purpose of the Study

The main aim of study one was to explore perceptions of bereavement, in order to identify whether, and to what extent, the traditional grief-work perspective of grief was embedded within societal expectations of bereavement. Study one qualitatively investigated the beliefs and expectations of different individuals regarding the process of grief following the death of a significant person.

Method

Study Design

Focus groups were conducted in order to explore a range of different perceptions of grief, and to provide a forum for a discussion around bereavement issues. The format involved group discussion around four hypothetical scenarios depicting bereaved individuals manifesting different grieving styles, in addition to questions related to elements of the grief-work assumptions. The presentation of hypothetical bereavement scenarios provided a means of tapping relevant beliefs and expectations based on markers of putatively successful and problematic grieving, evaluations of different grieving styles, as well as unique grief-related beliefs associated with different bereavement situations. Four descriptions of various bereavement situations were presented. For two of the descriptions, two related bereaved individuals were presented. The scenarios were derived from descriptions of bereavement situations within the literature, and were designed to display contrasting grieving styles, of a) an emotional expression with intense distress, and b) a practical grief expression with avoidant coping. For example:
Two young parents lose their only son. The mother cries night and day, and has lost all her energy for doing anything. She has a strong need to talk about their child, how he died, and how she is feeling. The father finds it difficult to talk about what happened, and finds it uncomfortable when his wife tries to get him to talk to her. He spends his time building the billy-cart that he and his son had planned to build together.

The remaining two descriptions depicted a bereaved individual who was characterized as being either overly independent or dependent. Following the presentation of each hypothetical situation, participants were asked to evaluate the grieving style of the bereaved individuals, and to comment on their evaluation. Questions used as probes included, “How worried would you be about each individual in the scenario?” and “What is the best way that each individual in the scenario could grieve?”

**Sample Characteristics**

The self-selected sample consisted of 9 participants (7 women, 2 men), aged between 19 and 62 years of age (\(M = 36\) years, \(SD = 13.64\)), who were recruited via an advertisement placed on university noticeboards and a local council e-mail discussion list. Previous bereavement experience varied among participants, and ranged from none to a “lifetime” of grief. Only one individual had not experienced the death of a significant person in their life. One participant stated that they had worked in the funeral industry.

**Procedure**

Three separate focus groups were conducted over a three week period. The size of the focus groups ranged from two to four participants each. While six to eight participants are often recommended as the optimum size for focus groups, a smaller size may be more appropriate when discussing sensitive topics, such as bereavement (Bloor, Frankland, Thomas, & Robson, 2001). The focus groups took between one and one and a half hours to complete, and were audio tape recorded. Prior to the commencement of the group discussions, due to the sensitivity of the research topic, participants were reminded that they could take a break or terminate their participation at any time. No participant chose to terminate their participation. At the completion of the discussions, each participant was provided with a list of local grief support contacts.

**Analysis strategy**—Following the focus groups, the data were transcribed. Categories and themes relating to perceptions and expectations of the grief process were extracted from the data through a thematic analysis. This process was conducted using NVivo (Qualitative Solutions and Research [QSR], 2002), a qualitative data analysis computer program. Initially, the data were coded into 14 broad categories identified from the data. Within these broad categories,
specific themes were subsequently identified. The transcripts were read and reread, during which time the categories and themes were refined. In the final stage of the analysis, there were eight broad categories related to beliefs and expectations regarding the bereavement response.

Inter-rater reliability of the data was established by a second researcher, who was naïve to the aims of the study, independently categorizing a random 20% of the data. An inter-rater reliability criterion of greater than 80% was achieved. In the case of disagreement regarding categorization of the data, the matter was discussed until consensus was reached.

Results

The final categories and themes from the data are presented in Table 1, along with a frequency count of the number of times each theme was mentioned across the three focus groups. The first two categories (variability of grief and normal grief) related to evaluation of the grief response, while the remaining categories (expression, coping, time, make sense, recover, and circumstances influencing bereavement) were concerned with specific aspects of the grief process. Each of the broad categories and the themes within each category are described below.

Category One: Variability of Grief

Theme one: No standard grief experience—Consistent across the group discussions was a perception that grief is an individual personal experience characterized by variability. In addition, participants acknowledged that there is not a single best way to experience bereavement:

... being of different cultures and backgrounds and personalities, we actually express ourselves in really a large variety of ways. So that no one particular way is necessarily going to be right or wrong.

Theme two: Factors contributing to variability—Reasons given for grief variability included gender, age, and religious background. The quality and length of the prior relationship with the deceased person were also considered important influences on the expression of grief.

Theme three: Other people allowing individual expression of grief—Participants believed that it was important for other people in the support network to allow a bereaved individual to express grief in their own way, without imposing expectations.

Category Two: “Normal” Grief Response

There was a high frequency of words relating to a “normal” grief reaction. For example, there were 18 instances in which the word normal was spoken, while healthy was mentioned on three occasions, and the words common, natural,
Table 1. Categories and Themes Related to Grief Extracted from Three Focus Groups (Study One)

<table>
<thead>
<tr>
<th>Categories</th>
<th>Themes within categories</th>
<th>Frequency count</th>
<th>Example comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Variability of grief</td>
<td>No standard grief experience</td>
<td>20</td>
<td>Different paths for everyone to go through.</td>
</tr>
<tr>
<td></td>
<td>Factors contributing to variability (e.g., gender, age)</td>
<td>6</td>
<td>Gender defines how we grieve in a way.</td>
</tr>
<tr>
<td></td>
<td>Other people allowing individual expression</td>
<td>6</td>
<td>Allowing the individual to do it the way they want to.</td>
</tr>
<tr>
<td>&quot;Normal&quot; grief</td>
<td>(Not applicable)</td>
<td>30</td>
<td>Not thinking much about it, that doesn’t seem quite normal.</td>
</tr>
<tr>
<td>response</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Expression of</td>
<td>Need to express</td>
<td>15</td>
<td>You need to do something.</td>
</tr>
<tr>
<td>grief</td>
<td>Emotional expression (e.g., anger, sadness)</td>
<td>26</td>
<td>In this big castle of despair.</td>
</tr>
<tr>
<td></td>
<td>Male expression</td>
<td></td>
<td>It’s life, keep moving on. It seems to be a more male way of dealing with it.</td>
</tr>
<tr>
<td>Coping</td>
<td>Social support (functions, negatives)</td>
<td>77</td>
<td>If she’s trying to talk about it, then yeah, it seems like she’s trying to work through it.</td>
</tr>
<tr>
<td></td>
<td>Avoidant coping (e.g., delayed grief pattern)</td>
<td>37</td>
<td>Just ignoring it, just trying not to deal with it and push it down.</td>
</tr>
<tr>
<td>Time</td>
<td>Concern with time</td>
<td>10</td>
<td>As time goes by it gets easier.</td>
</tr>
<tr>
<td></td>
<td>Grieving for too long</td>
<td>5</td>
<td>Long term, for a long time it could be a danger.</td>
</tr>
<tr>
<td>Make sense</td>
<td>Finding benefits from loss</td>
<td>13</td>
<td>There might be some positives come out of it as far as life is concerned.</td>
</tr>
<tr>
<td>Recovery</td>
<td>Non-recovery from grief</td>
<td>13</td>
<td>I don’t know whether grief is anything, something that you get over.</td>
</tr>
<tr>
<td></td>
<td>Deliberate effort to recover</td>
<td>6</td>
<td>. . . conscious decision just to get on with living your own life and not grieving the past experience.</td>
</tr>
<tr>
<td></td>
<td>Descriptors of grief recovery (e.g., accommodate loss into life)</td>
<td>20</td>
<td>Learn to live with it.</td>
</tr>
<tr>
<td>Circumstances influencing bereavement</td>
<td>Expected death</td>
<td>19</td>
<td>Maybe that grief process is much easier than if she was to suddenly die.</td>
</tr>
<tr>
<td></td>
<td>Child death</td>
<td>13</td>
<td>The word recover just isn’t appropriate I think when it’s the death of a child.</td>
</tr>
<tr>
<td></td>
<td>Late adulthood bereavement</td>
<td>16</td>
<td>Experienced that stuff before. So maybe he may be a little better at it.</td>
</tr>
</tbody>
</table>

*Frequency count refers to number of times each theme was mentioned across three focus groups (N = 9).*
and typical were each mentioned twice. For example, one participant commented that “Not thinking much about it, that doesn’t seem quite normal.”

Category Three: Expression of Grief

Theme one: Need to express—There was a strong belief that it was important for a bereaved individual to express their thoughts and feelings associated with grief, rather than ignore or deny them. This need to express one’s grief seemed to require a deliberate effort on the part of the bereaved individual:

To experience it, to understand it, and to move through it and to work through it. You need to own it and you need to accept it and hold on to it because it’s a part of what’s going on.

Theme two: Emotional expression—Participants believed that grief could be experienced through a range of different emotions, including anger, depression, sadness, despair, and denial. Expressing emotions, such as by crying, was perceived as a positive means of working through grief. In contrast, failing to express emotions was thought to be problematic.

Theme three: Male expression of grief—There was a belief that men had difficulty confronting and expressing their feelings around grief and loss. Furthermore, men were thought to often consciously repress their emotions, rather than openly experience them. In contrast, the perspective of a male participant suggests that men may express their emotions in private. This tendency may be associated with wanting to embody the public image of men as being strong and as the protector of others.

There was an acknowledgment that, while men find it difficult to express their grief emotionally, they may express their emotions in a very physical, practical way. For example, a father may build a monument to honor his relationship with his son. However, there was a belief, among some participants, that engaging in a practical task is merely a way of denying one’s feelings and emotions. Further, in order to adjust to bereavement, it was felt that an emotional expression of grief needs to be experienced.

Category Four: Coping with Grief

Theme one: Social support—There was a strong view among participants that social support is an important resource in coping with bereavement. Social support was thought to come from many sources, including informal close network members, such as family, friends, spouses, and neighbors. Additionally, it was felt that social support could come from less close, more formal networks, including a counselor, support groups, meals on wheels, and a cleaning lady.

While social support was thought to provide “care” and “comfort” to bereaved individuals, this was also associated with the assumed importance of verbalizing
one’s thoughts and feelings of grief. Deliberately seeking out social support was regarded as an indicator that an individual was actively confronting and working through their grief.

Being able to talk about thoughts and feelings of loss was thought to lead to a positive bereavement outcome, and ultimately, facilitate resolution of grief. Participants believed that through social support, a bereaved individual was “able to recover,” “learn to cope,” and “survive.” In contrast to the benefits of having others to talk to about one’s grief, a lack of adequate social support was believed to be “socially isolating,” causing the grief process to be “very difficult,” and bereaved individuals to “have a hard time” coping.

Some participants indicated a perception that there can be negative aspects of social support, for both the bereaved individual and for support providers. Negative responses and callous off-hand comments from others were thought to be particularly difficult for bereaved individuals.

For some support providers of bereaved individuals, listening to people talk about their loss, particularly circumstances of the death, was recognized as difficult. Additionally there seemed to be a view that other people may feel burdened by a bereaved individual’s need for support.

Theme two: Avoidant coping—There was a perception among the sample that not thinking about grief, keeping excessively busy, or not showing emotions was indicative of defensively denying one’s thoughts and feelings of bereavement. Engaging in avoidant coping strategies was thought to be “dangerous” and maladaptive to the grief process. There was a strong belief that avoidant coping would ultimately lead to a physical or psychological manifestation of grief, such as cancer, or a nervous breakdown:

Walk away from it and put it into the too hard basket and slam the door.
And just leave it there. And it usually catches up with them in one way shape or form.

Category Five: Time

Theme one: Concern with time—The length of time since bereavement was considered important when evaluating the coping style of a bereaved individual. Furthermore, there seemed to be a belief among some participants that time was an important element of the grief experience. This perception suggests an expectation of the traditional “normal” grief pattern of intense distress which diminishes over time.

Theme two: Grieving for too long—Displaying signs of grieving for an extended period of time was believed to be maladaptive. For example, one participant offered a specific time which they considered to indicate grieving for too long:
If it’s six months down the track, and she’s crying every day, then I think there are real issues there that need to be dealt with.

**Category Six: Make Sense of Grief**

Some participants indicated a belief that bereavement does not make sense, and therefore, an individual who experiences the death of a significant person would find it difficult to come to terms with their loss:

It’s hard to make sense of why a person’s gone and where they’ve gone and you know, why they’ve gone at that time. Because it’s all this big mystical unknown.

However, other participants believed that making sense of loss was a very important aspect of the grief process. These participants seemed to view the making of sense as coming to an acceptance of loss.

**Theme one: Finding benefits from loss**—An aspect of making sense of loss, mentioned in the group discussions, was finding benefit from the bereavement experience. It was thought that being able to find positives from the situation facilitated the process of adjustment. Positives that can come out of bereavement included gaining perspective on life, increased religious faith, and making changes in one’s life.

**Category Seven: Recovery**

**Theme one: Non-recovery from grief**—Some participants questioned the ability to ever recover from grief. Another belief evident in the group discussions was that recovery from grief was an ideal outcome which not all bereaved people are able to achieve.

**Theme two: Deliberate effort to recover**—Other participants seemed to believe that bereaved individuals need to make a deliberate effort to stop grieving and recover from their loss.

**Theme three: Descriptors of grief recovery**—Participants in the group discussions offered different terms to describe grief recovery. Within these descriptions, there appeared to be two separate perceptions of recovery. The first perception related to accommodating loss into one’s everyday life, and being transformed by the experience of bereavement—“building it into your life” and “learn to live with it.”

Other descriptions of recovery seemed to indicate a perception of getting over grief and returning to pre-bereavement functioning, which is similar to the traditional grief-work assumption of recovery—“move on,” and “get over it.”
Category Eight: Circumstances Influencing Bereavement

Theme one: Expected death—Expected deaths which occur following a terminal illness were thought to be “easier to accept” and resolve than more sudden deaths. This was associated with a theme of anticipatory grief; an individual was thought to begin to grieve for their terminally ill relative before death had occurred.

Additionally, there was a belief that the circumstance of a terminal illness would allow an individual to share their experience of grief, and to resolve any issues within the relationship, with the dying person before their death. For example, one participant provided a personal account of the impact of an expected death on their bereavement experience:

My brother died of cancer when he was 48. They had told him at first that he had six weeks to live and they operated on his bone . . . and he had six months. But if he died in six weeks, he would have died a healthy 47 year old. But he died six months later as a very old, frail man. And it was terrible. But looking back now, we had so much quality time in that six months. We talked about things . . . And we just sat and talked, and we talked about all sorts of stuff. And our parents, and things we had never talked about. He was just my kid brother. And we never sat and talked. And that was a really really good time. It was terrible. But looking back now, it’s about 12 years. It was a great time.

Some participants felt that physically supporting a terminally ill relative would be very difficult to cope with and, in such cases, bereavement would be a relief. This was expressed as “I can live the rest of my life,” and “a release.”

Theme two: Child death—The experience of grief following the death of a child was viewed to be especially difficult. Making sense and being able to resolve grief were believed to be hard to achieve when grieving the loss of a child. Furthermore, it was expected that a bereaved parent would experience long-term effects of grief.

Participants indicated a belief that when a child dies, particularly a young child, a parent grieves not only for the child themselves, but also for the loss of the child’s future and loss of their own future with that child:

Because you’re not only losing the child. You’re losing the child’s future. Losing what should have been, what’s coming. So that’s, that’s probably the real grieving. The future that you had with that child.

Theme three: Late adulthood bereavement—Due to their age, older adults were assumed to have had a greater experience of death and bereavement than younger people. A few participants believed that because of this greater loss experience, older adults would cope better with the death of a significant person, and experience a less intense grief reaction, than a younger person, expressed as; “Experienced this stuff before. So maybe he may be a little better at it.”
After many years of marriage, it was believed that the death of a spouse would be extremely distressing and lead to difficulties in bereavement. However, there appeared to be different beliefs regarding how the current cohort of older men and women cope with widowhood. For older men, a life-long dependence on women to provide care was thought to exacerbate the grief reaction. In contrast, widowhood was viewed as a liberating experience for older women, who were thought to have been previously restricted by their care-giving role.

**DISCUSSION**

The aim of study one was to explore the beliefs and expectations individuals hold regarding the bereavement response, particularly with respect to the extent to which the traditional grief-work perspective of grief is located within societal perceptions of grief. The qualitative study generated rich data which contained evidence of particular grief-related beliefs and expectations.

Consistent with Wortman and Silver (1993), there was a strong awareness, within the sample, of the variability of the grief response, including the influence of individual factors, such as gender and age, to this expression of loss. Furthermore, participants acknowledged the negative impact of placing rigid expectations about the grief process upon a bereaved individual’s grief response. However, participants simultaneously perceived certain grief responses to be more appropriate than others to the bereavement experience. These findings suggest an expectation, within the current sample, of a set of specific bereavement responses, which reflect elements of the traditional grief-work perspective.

In relation to making sense of loss and recovering from one’s grief, participants indicated more flexible beliefs. It was acknowledged that making sense was not achievable in all bereavement situations. This belief is consistent with recent findings in the literature (e.g., Davis et al., 2000; Downey et al., 1990; Schwartzberg & Janoff-Bulman, 1991). For example, Downey et al. report that a third of the 124 bereaved parents they sampled were unconcerned with finding meaning from their child’s death, and those bereaved parents experienced less distress across 18 months of bereavement than parents for whom attributional concerns were important. Participants in the current study also acknowledged that a bereaved individual may not recover from their grief. This is supported by a body of research which suggests the importance of a continued attachment to a lost loved one, at least for some bereaved individuals (e.g., Bonanno et al., 1999; Silverman et al., 1992). For example, some individuals transform their relationship with the deceased, incorporating “symbolic, internalized, and imagined relatedness” in order to maintain an ongoing connection (Shuchter & Zisook, 1993, p. 34).

While recognizing the variability of the grief response, participants also believed that emotional expression as a particular way of working through grief, was an integral stage of the grief response. These beliefs suggest that the grief
process is not viewed in a rigid traditional way, and the views may represent
the beginning of a change in societal perceptions of grief, from a traditional stage
model view to a more flexible view of grief which acknowledges individual
differences.

The traditional grief-work assumption relating to the need to actively work
through grief, by confronting one’s thoughts and feelings associated with loss, was
evident in participants’ perceptions. The expectation of an emotional expression
and verbalization of grief marginalizes other means of working through one’s
grief. Doka and Martin argue that grief can be processed in many different ways,
including physically and cognitively, as well as affectively. A more masculine
approach to bereavement focuses on the engagement of a physical or practical
task associated with the loss (Doka & Martin, 1998). Consistently, participants in
the current study indicated a belief that a practical expression of grief was a way
that men may cope with bereavement. However, it was also perceived that
engagement in a practical expression would not resolve grief, and at some point,
such individuals would need to emotionally articulate their grief.

While having supportive people to turn to was viewed as an important resource
for coping with bereavement, it was also acknowledged by participants that
social support can entail negative experiences. The perception that bereaved
individuals may receive unhelpful comments from others is consistent with
previous research findings (e.g., Lehman, Ellard, & Wortman, 1986; Range &
Calhoun, 1990; Thompson & Range, 1992-1993). Negative social interactions,
such as giving advice, encouraging recovery, and minimizing the bereaved indi-
vidual’s feelings, are reported by a significant proportion of bereaved indi-
viduals across studies. Participants in the current study indicated a belief that
social support providers may have negative experiences when confronted with a
bereaved individual. According to the victimization perspective (Silver, Wortman,
& Crofton, 1990), witnessing another person’s grief may arouse feelings of
anxiety, distress, and helplessness, which, in turn, may inhibit the provision of
effective social support. Further research is necessary to examine social support
from the perspective of the support provider.

According to the traditional view, failing to confront one’s loss, through
avoidant coping strategies, is pathological, and the repressed grief will even-
tually surface in a delayed grief reaction (e.g., Rando, 1984; Worden, 1991). An
expectation of a delayed grief reaction, following a lack of adequate grief-work
was evident among a group of bereavement professionals (Middleton et al.,
1993), as well as the current sample. However, there is a lack of empirical
evidence within the literature for the existence of a delayed grief reaction
(Wortman & Silver, 1989, 2001). In fact, findings from longitudinal studies
(e.g., Bonanno & Field, 2001; Bonanno & Keltner, 1997; Bonanno et al., 1995;
Stein et al., 1997) suggest that engaging in avoidant coping strategies can lead
to a positive outcome, rather than a delayed reaction. Therefore, the identified
belief in the current study, that actively confronting loss-related thoughts and
feelings is a necessary stage of grief, is not supported, and even contradicted by recent empirical findings.

This study has qualitatively explored the beliefs and expectations held by a small sample of adults with respect to the bereavement response, following death of a significant other. Most participants had previously been exposed to bereavement; only one individual indicated that she had not experienced the death of a close person in her lifetime, but her responses did not differ from those of the previously bereaved participants. While most of the sample had previously experienced bereavement, it is not known whether participants had sought formal support for their grief from a bereavement practitioner. If they had, it is possible that exposure to a health professional model of grief may influence the results and reflect professional, rather than community, perceptions of grief.

Despite an acknowledgment of the variability of grief, some evidence of a traditional stage-model perspective of bereavement was found in participants’ perceptions, relating to the belief that certain grief responses are more appropriate than others during bereavement. This suggests the continued dominance of empirically unfounded grief-work assumptions within societal perceptions of grief. Given the preliminary findings of study one, whether, and to what extent, grief-related perceptions impact the actual experience of bereavement, from the perspective of bereaved individuals was explored in study two.

STUDY TWO: GRIEF-RELATED EXPECTATIONS AND THE LIVED EXPERIENCE OF BEREAVEMENT: A QUALITATIVE INTERVIEW STUDY

Purpose of the Study

Study one identified elements of traditional stage-model assumptions regarding the process of bereavement within the grief-related perceptions of a small community sample. Based on these findings, the purpose of study two was to qualitatively explore how grief-related beliefs and expectations impact upon the actual experience of grief, from the perspective of bereaved individuals. Of primary interest was exploring: a) bereaved individuals’ evaluation of their own grief response; b) whether individuals’ beliefs and expectations of grief are changed by the experience of bereavement; and c) the perceived beliefs and expectations of others in the bereaved individuals’ social environment, embedded in the comments made or behaviors enacted towards the grieving individual.

Method

Study Design

A semi-structured individual interview format was adopted for this study. The interview schedule focused on three main areas of interest: participants’
own experience of bereavement and self-evaluation of their grief response, participants’ beliefs and expectations of the process of grief, and perceived reactions of other people to the participants’ grief. Probing questions were used to follow up any relevant points of interest, for example “Can you tell me more about that?” and “How did you feel about that?”

Sample Characteristics

The current sample consisted of 11 adults, recruited via an advertisement printed in three local newspapers, and included nine women and two men. The current sample was independent of the study one sample. The age of participants ranged from 41 to 52 years. In the interviews, seven participants discussed a single bereavement, while two, three, five, and six bereavements were discussed by the remaining participants. All participants had experienced the death of family members, including: husband (4), mother (4), wife (2), father (2), siblings (2), siblings-in-law (2), child (1), and great nephew (1). A range of bereavement circumstances were discussed, both sudden and expected, and included: cancer, brain tumor, multiple myeloma, lung infection, pneumonia, stroke, heart attack, drug overdose, car accident, suicide, and disability-related death. Two participants had shared caregiving of their relative, prior to their death, while one participant had been the primary caregiver of her relative before death. The time since bereavement ranged from one month to 14 years ($M = 4.5$ years). While the initial requirement for participation was having had experienced bereavement at least six months previously, one participant had experienced bereavement only one month prior to the time of the interview. Due to the nature of the individual’s recent bereavement experience, which was an expected on-time death, and following a careful discussion with the individual regarding the nature of the interview questions, it was decided to include the participant in the study.

Procedure

Eleven individual, face-to-face, semi-structured interviews were conducted over a three month period. Each interview took three quarters of an hour to one and a half hours to complete. The interviews were audio tape recorded and subsequently transcribed verbatim. Before the commencement of each interview, participants were reminded that they could terminate the interview at any point if participation became too distressing. No participant chose to terminate their interview.

Analysis strategy—Broad categories were defined a priori, based on the interview questions: grief-related beliefs before bereavement, reaction to own grief response, grief-related beliefs after bereavement, and reactions of other people to bereavement. Following transcription, the data were entered into NVivo. A thematic analysis was conducted. In the first stage of the analysis, the data were
read and reread, and coded according to the four broad pre-defined categories. Subsequently, the data was re-analyzed and themes within the broad categories were developed inductively from the data. Following the analysis, a random sample of 20% of the interview data was independently categorized by a second researcher who was naïve to the aims of the current study, to establish inter-rater reliability at greater than 80%.

Results

The final four categories and themes which emerged from the data appear in Table 2, along with a frequency count of the number of times each theme was mentioned across the interviews. Each of the categories and themes within each category will be presented descriptively.

Category One: Grief-Related Beliefs before Bereavement

Participants were asked to reflect on the perceptions of grief which they could recall having held prior to experiencing a close bereavement.

Theme one: Lack of awareness—Six participants indicated that they didn’t think about grief and bereavement until it happened to them personally. One participant echoed the sentiment regarding not wanting to reflect on death and mortality: “You don’t want to think ahead to that sort of thing really.” Another participant recalled being curious about what the experience of grief would be like.

Theme two: Naïve beliefs—When reflecting back on their previously held perceptions of grief, seven participants stated that these were naïve and lacked a real understanding of what the experience of grief was actually like. This was exemplified in the comment of one participant:

I had an idea. But compared to what I’ve actually been going through, I had no idea. I thought, oh yeah, this is what happens and you get over things. And, nah, it doesn’t really work that way.

Evident in some of the beliefs recalled by participants was an expectation of the traditional “normal” grief response of intense distress which diminishes over time.

Category Two: Reaction to Own Grief Response

Within participants’ discussions of their own bereavement experience was a self-evaluative component, which reflected a negative, surprised, or accepting reaction to their own grief response.

Theme one: Negative reaction—Seven individuals expressed concern regarding their own grief response. Negative self-evaluations were concerned with time, experiencing too much distress, and experiencing too little distress.
<table>
<thead>
<tr>
<th>Categories</th>
<th>Themes within categories</th>
<th>Frequency count</th>
<th>Example comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grief-related beliefs before</td>
<td>Lack of awareness</td>
<td>6</td>
<td>I didn’t have anything in the way of any expectation.</td>
</tr>
<tr>
<td>bereavement</td>
<td>Naïve beliefs</td>
<td>7</td>
<td>I didn’t understand either the mental or physical reactions to that degree of upset.</td>
</tr>
<tr>
<td>Reaction to own grief response</td>
<td>Negative evaluation</td>
<td>7</td>
<td>I feel guilty sometimes. Because I think I am being self-indulgent.</td>
</tr>
<tr>
<td></td>
<td>Surprise</td>
<td>2</td>
<td>It’s amazing how much emotion it can still evoke.</td>
</tr>
<tr>
<td></td>
<td>Acceptance</td>
<td>1</td>
<td>At the moment I’m a little bit up and down. And that’s okay.</td>
</tr>
<tr>
<td>Grief-related beliefs after</td>
<td>Flexible beliefs</td>
<td>9</td>
<td>Grief is something that never goes away.</td>
</tr>
<tr>
<td>bereavement</td>
<td>Philosophical beliefs</td>
<td>5</td>
<td>If nothing else, the grief process teaches you to think about life.</td>
</tr>
<tr>
<td></td>
<td>Greater understanding of</td>
<td>3</td>
<td>I’ve learnt a little bit more about dealing with other people’s grief.</td>
</tr>
<tr>
<td></td>
<td>bereaved individuals</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reactions of other people to</td>
<td>Positive reactions</td>
<td>10</td>
<td>Tried to empathize.</td>
</tr>
<tr>
<td>bereavement</td>
<td>Negative reactions</td>
<td>11</td>
<td>A lot of people felt that I should be getting over it a lot quicker.</td>
</tr>
</tbody>
</table>

*Frequency count refers to number of participants who mentioned each theme (N = 11).*
Four individuals who were concerned with time expressed a belief that their grief symptoms had gone on for too long:

I’m failing grief. Here it is, three years down the track and I still haven’t got it.

The two participants, who expressed a concern about experiencing too much distress, thought that they shouldn’t feel as distressed as they actually did feel. One participant negatively compared themself to another individual who had experienced multiple losses, but was perceived to cope better than the participant. The second participant believed that, because they had experienced an expected bereavement, such intense grief as they felt was not warranted.

One participant expressed a belief that they should be more distressed than they were: “maybe I should be a little more distraught than I am.”

Theme two: Surprise—Two individuals expressed surprise at their grief response. The first participant indicated that they weren’t prepared for the amount of distress that they actually felt when their relative died. This participant indicated surprise at their emotional response during the interview, despite it being 14 years since their bereavement. In contrast, a second participant was surprised that after having experienced multiple bereavements, they were still able to cope and function in their day to day life.

Theme three: Acceptance—Only one participant expressed an acceptance of their grief response: “I’ll have a cry and that’s okay.” This participant felt that being distressed about their grief response was not helpful, and wouldn’t bring back their deceased relative.

Category Three: Grief-Related Beliefs after Bereavement

Participants were asked about their perceptions of grief at the current time, after having experienced bereavement. Three changes in grief-related perceptions were mentioned: increased flexible beliefs regarding the process of grief, increased philosophical beliefs, and a greater understanding of other bereaved individuals.

Theme one: Flexible beliefs—While the beliefs held by participants prior to experiencing bereavement seemed to suggest a view of grief as a traditional “normal” response, the current beliefs of nine participants conveyed a more flexible perception of the grief process. There was an acknowledgment that the expression of grief differs between individuals. Additionally, participants’ expanded beliefs reflected their experience that grief doesn’t follow a standard trajectory:

I feel I’ve developed, yeah, a maturing in understanding that everyone’s got a different way of grieving. And that it takes different amounts of time for different people.
Theme two: Philosophical beliefs—Rather than viewing grief as merely a process of coming to terms with the death of a person, five participants developed a deeper philosophical understanding of grief through the experience of bereavement. Participants spoke of thinking more about life, gaining a greater awareness of their mortality, and realizing that life can be unpredictable.

Theme three: Greater understanding of other bereaved individuals—Three participants reported that their bereavement experience had given them a greater insight into the experiences of other grieving individuals. One male participant became more comfortable with outward displays of emotion, and felt better able to offer sensitive support to grieving individuals, than prior to his own bereavement experience. Another participant was able to understand the behavior of a grieving relative, which the participant previously found frustrating.

Category Four: Reactions of Other People to Bereavement

It was of interest to examine whether the efforts made by participants’ social network to provide support to participants matched the needs of the participant in the time since their bereavement. In order to explore this issue, participants were asked to discuss the comments or behaviors shown to them by other people, in relation to their bereavement, by individuals within their social environment, in the time since experiencing the death of their relative. In particular, participants were asked to identify the most helpful and the least helpful things other people had done for them. Reactions of other people fell under two broad themes, positive and negative reactions.

Theme one: Positive reactions—All but one participant recalled positive reactions from individuals within their social network following bereavement. Positive reactions took the form of emotional support, unconditional acceptance, acknowledging the individual’s loss of the deceased person, and the provision of practical support.

For seven participants, the receipt of emotional support was helpful for coping with their grief. Emotional support came via being with the participant in the first few days after their bereavement, regular phone calls, and being available when the participant felt like talking. In particular, having close friends and family who would sit with the bereaved individual and allow them to cry and talk openly about the deceased relative was an important part of coping with grief for these participants. The effect of receiving emotional support was to allow the participant to release their grief so that they would be able to carry on with their daily life. Emotional support was especially helpful when it came from individuals who had also experienced bereavement, as they were perceived to understand better than anyone else what the participant was going through. Individuals who had previously been through the grief process were able to validate participants’ experiences and feelings. This was extremely powerful for participants. When
participants knew other bereaved individuals, they were able to provide mutual support to each other.

Five participants indicated that they had experienced acceptance of their grief response from others. The unconditional acceptance felt by these participants was embedded in the emotional support they received. For some participants, acceptance centered on the length of time they grieved, including an acknowledgment that they may continue to grieve for a very long time. For example, one participant felt that emotional support was still available to them from two members of their support network, and will continue to be available in the future, despite the fact that it has been two years since they have experienced bereavement. Another way participants felt accepted was being allowed to behave in whichever way they wanted, such as staying away from social events, without being pressured into doing certain things before they were ready.

For three participants, having their deceased relative honored in stories shared by other people in their relative’s lives was a helpful way that others could be supportive. Participants recalled hearing anecdotes from aspects of the deceased’s life which the participant wasn’t involved in, such as a husband’s working life or an older parent’s friendships.

The receipt of practical support from others was mentioned by two participants as helpful in coping with their grief. The offering of food, flowers, and time off work helped ease some of the day to day demands of these participants during their grief.

Theme two: Negative reactions—All 11 participants in this study had received negative reactions in relation to their grief from other people. The four types of negative reactions mentioned included judgmental comments, lack of support, insensitive comments, and secondary losses.

Of the negative responses, judgmental comments were the most frequently discussed, with 10 participants describing instances of receiving such comments. Judgmental comments from others were perceived as unhelpful and unrealistic. Judgmental comments often centered on the concept of time, and suggested an expectation among support members that the bereaved individual should recover from their grief after a certain amount of time. Participants also mentioned receiving judgmental comments regarding the amount of distress they displayed. The implied expectation here was that the bereaved individual should be observed to publicly express their grief through crying or being visibly distressed: “they all wait for you to cry in front of them.”

Two participants expressly stated that they were not concerned about the expectations other people held about their grief response. In contrast, four other participants reported being concerned about the views of others.

Six participants described instances when individuals close to them had responded to the participants’ grief with a clear lack of support. This was found to be hurtful to the bereaved individual, who wanted to be supported.
Participants indicated that a small number of individuals made comments which were perceived as insensitive and seemed to come from a lack of consideration for the feelings of the bereaved individual. Such comments, received when the participants were acutely grieving, were distressing, and sometimes exacerbated their grief.

Four participants, three of whom had suffered the death of a spouse, mentioned losing friendships through the grief experience. The way in which some individuals responded to these participants changed after they had experienced bereavement. Previously close and intimate friendships became less close and more distant. One participant recalled a friend who failed to return her phone call after her relative died. The participant hasn’t spoken to the friend since that time.

One participant articulated their belief that their bereavement resulted in lost friendships because of the threat they posed to other non-bereaved people. This participant felt that her bereavement confronted others with their own mortality and that of their loved ones. Perhaps some people have difficulty coping with that and so break off contact with the bereaved individual. It may also be possible that individuals within the social network become overwhelmed and burdened by the bereaved individual’s grief, motivating them to reduce contact with the bereaved person. Regardless of the reason, participants grieved the loss of their previously close friendships.

**DISCUSSION**

The aim of study two was to explore how grief-related expectations may impact the experience of bereavement, from the perspective of bereaved individuals. Of specific interest was: bereaved individuals’ self-evaluation of their grief response; possible changes in bereaved individuals’ grief-related beliefs and expectations over time; and the perceived grief-related beliefs and expectations of support network members. In order to explore these three areas, semi-structured individual interviews were conducted with a small sample of bereaved individuals. The findings suggested that certain grief-related perceptions may be particularly relevant to the appraisal of one’s own and others’ bereavement-related coping, as well as the willingness to provide social support to bereaved individuals. Specifically, stereotypic or rigid expectations about the bereavement process may lead to observers making negative judgments of different bereavement responses and a lack of effective support being provided to grieving individuals.

**Perceptions of the Grief Experience**

Participants’ current perceptions of grief and bereavement were qualitatively different from those recalled as existing prior to, and at the time of, bereavement. Participants felt that before they had experienced the death of a significant person, their grief-related beliefs were limited and inaccurate; however, these
early perceptions were transformed by the bereavement experience. They recalled their previous belief that grief involved a sense of sadness which diminished over time, reflecting a traditional stage model view of grief. It is possible that before being confronted personally with bereavement, thinking about the grief process was not a salient concern for participants, and therefore, they may have relied on dominant societal grief-related beliefs gleaned from such sources as the media and popular culture. Among the current sample, these findings of inaccurate perceptions of grief, consistent with a stage model, support those reported in study one, as well as in Middleton et al.’s (1993) study of bereavement professionals’ perceptions of grief.

Participants expressed a greater appreciation of the variability of the grief response, including the belief that grief does not follow a narrowly defined trajectory of intense distress which diminishes over a limited amount of time. Thus, the personal experience of bereavement appears to broaden one’s grief-related perceptions. This finding, of more flexible beliefs following the personal experience of bereavement, contrasts with the traditional expectations of grief identified in study one. Within the first study, all but one of the nine participants had previously experienced the death of at least one close person in their lives. Despite this, however, a number of grief-related beliefs identified in study one were found to conform to rigid traditional stage model assumptions of grief. It is possible that the difference in findings between study one and two may be due, in part, to the point of reference from which participants thought about grief. Study one asked participants to consider grief-related beliefs in relation to hypothetical scenarios of bereavement, while in study two, participants discussed perceptions of grief in relation to their own personal experience of bereavement. Thus, when considering grief in general terms, individuals may rely on rigid stereotypical beliefs prevalent in society. In contrast, when thinking of grief from a personal perspective, individuals may form unique perceptions of grief, based on their own experience of bereavement. This possibility requires further study using larger, more representative samples.

In addition to the development of flexible grief-related perceptions, participants also spoke about changes in philosophical beliefs, and developing a greater understanding of, and greater compassion toward, other bereaved individuals. These changes may be attributable to the experience of personal growth following bereavement. Personal growth, or finding benefit from a significant loss, has been documented within the literature as a positive legacy of bereavement (e.g., Davis et al., 1998; Gamino, Sewell, & Easterling, 2000; Lieberman, 1996; Tedeschi & Calhoun, 1996).

Self-Evaluation of Personal Grief Responses

The current study supports Wortman and Silver’s (1989) suggestion that a bereaved individual’s expectations about grief influences how they appraise their
own bereavement experience. Many participants expressed a negative evaluation of their grief response following a significant bereavement. The limited naïve perceptions of grief held prior to personally experiencing bereavement may have contributed to their negative self-evaluation. The critical elements of the grief response, which concerned the current sample, related to the intensity of distress they experienced, and the amount of time they had grieved. These elements are fundamental to the traditional “normal” stage model view of grief, whereby intense distress is assumed to occur in the early stages of grief, and then diminish within a limited timeframe (e.g., Raphael, 1983; Worden, 1991). This finding suggests that expectations about grief which are based on the stage model may contribute to a negative self-evaluation if one’s grief response does not match one’s prior expectations. This may exacerbate bereavement-related distress.

Social Support and the Bereaved

According to Vachon and Stylianos (1988), the receipt of positive social support is one of the most important resources for coping with bereavement. The current sample readily recalled instances of supportive reactions from those within their support network, most often in the form of emotional support. This finding is consistent with two large qualitative questionnaire studies of bereaved adolescent siblings (Hogan & DeSantis, 1994) and Finnish bereaved spouses (Kaunonen et al., 1999), which found that the receipt of emotional support was considered particularly important for bereavement-related adjustment. A number of quantitative studies provide additional support (e.g., Ingram et al., 2001; Kanacki, Jones, & Galbraith, 1996; Vanderwerker & Prigerson, 2004). Vanderwerker and Prigerson (2004), for example, found that adequate perceived social support assessed at six months following the death of a partner, was associated with lower levels of depression and complicated grief symptoms at six months. Furthermore, bereaved individuals who reported adequate social support six months post-loss also reported a lowered level of complicated grief symptoms and greater well-being at 11 months post-loss, in comparison to those with inadequate perceived support.

In study one it was evident that bereaved individuals may sometimes receive negative responses from others in relation to their bereavement. Consistently, all of the bereaved participants within study two indicated that they had received at least some negative and unhelpful comments from other people. Judgmental comments, the most frequently reported form of negative support, related to the amount of time participants were grieving, as well as the level of distress they displayed. The bereaved participants themselves reported being self-critical of these elements of their own grief process. It is possible that having received judgmental comments from others caused participants to question their own grief response. However, it was not possible to ascertain if this was the case, based on the current small qualitative study. Nevertheless, the perception of receiving
judgmental comments from support network members suggests the existence of traditional stage model assumptions embedded within the grief-related beliefs of support network members. Holding inaccurate expectations regarding the process of grief is likely to contribute to the provision of ineffective and negative support responses to bereaved individuals (Wortman & Silver, 1989). Despite being conducted more than a decade ago, the qualitative studies by Lehman et al. (1986), Range and Calhoun (1990), and Thompson and Range (1992-1993) provide similar findings of negative support and judgmental comments.

Despite advancement within the scientific literature regarding the variability of the grief response, there appears to be a continued influence of unfounded traditional stage-model assumptions of grief among individuals’ perceptions of the grief process. Results of study two suggest that grief-related expectations can impact the experience of bereavement via appraisals of the appropriateness of one’s own and others’ grief responses, availability of positive social support, and adjustment to bereavement.

General Discussion

The qualitative studies presented in this article have explored the nature of grief-related beliefs and the impact of such perceptions on the bereavement experience. These studies suggest that traditional assumptions may still characterize the grief-related expectations which individuals hold. If this is the case, then support offered to bereaved individuals can sometimes be unhelpful, leading to a lack of adequate support being provided at a time when it is much needed. Further, bereaved individuals’ internalization of the traditional stage model assumptions may exacerbate the bereavement experience. Greater attention to increasing public awareness of the variability of the grief response following bereavement may be necessary to combat the dominance of the traditional stage model perspective of grief. Further, sensitizing people to the types of support responses which are perceived as most helpful by bereaved individuals may also be needed.

Studies one and two are limited in several ways. Firstly, they are based on small samples composed predominantly of women. The expectations identified in this research may reflect a female perspective of grief, rather than beliefs held by the general community. Further research based on a larger and more representative sample of both men and women is necessary before any conclusions can be drawn about the generality of grief-related beliefs. Additionally, most participants within study one had previously experienced bereavement. The grief-related beliefs of individuals who have not experienced a significant bereavement may differ in unknown ways. Recruiting a sample of individuals who have not experienced bereavement is difficult; even if sampling is restricted to a younger population, it is likely that at least some individuals in this age group will have already experienced the death of a close person in their lives.
Further, when recruiting a self-selected sample, individuals who have previously been bereaved, or who have had some experience with bereavement, are more interested in participating in bereavement-related research, compared to those individuals who have had no previous experience with death and bereavement.

A further limitation within study two relates to participants’ retrospective recall of the beliefs regarding the process of grief, which they held prior to experiencing bereavement. The fallibility and reconstructive nature of human memory renders the recall of past events and cognitions unreliable. The fact that bereavement can be traumatic may additionally hamper the ability to objectively recall previous grief-related beliefs. A prospective research design, whereby individuals’ grief-related beliefs are measured before the experience of bereavement, may be necessary in order to gain an accurate representation of the impact of bereavement on one’s perceptions of grief and bereavement.

Despite the limitations of studies one and two, this qualitative research addressed a gap in the existing bereavement literature. While Wortman and Silver (1989, 2001) first suggested, over 15 years ago, that traditional grief-related beliefs and expectations may have an adverse impact on bereaved individuals, research has not previously examined this possibility. The findings of study one suggest that elements of the traditional stage model perspective of grief may characterize individuals’ grief-related beliefs. Consistent findings in study two provided further support, while also suggesting that the grief-related beliefs held by both a bereaved individual, and a potential support provider, may impact how an individual’s grief process is appraised, as well as the willingness of support network members to provide effective support. Given these suggestive results, further research on the nature of grief-related beliefs in relation to bereavement is warranted.

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