GRIEVING TOGETHER:

AN ETHNOGRAPHY OF RELATIONAL GRIEF IN COMMUNITY

by

BEN BENTUM

A THESIS SUBMITTED IN PARTIAL FULFILLMENT OF THE

REQUIREMENTS FOR THE DEGREE OF MASTER OF ARTS

in

THE FACULTY OF GRADUATE STUDIES

GRADUATE COUNSELLING PSYCHOLOGY PROGRAM

We accept this thesis as conforming to the required standard

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Abstract

This study makes an initial foray into the study of community relational grief by addressing how community members grieve together and reciprocally interact during bereavement. The question guiding this project was, *how does a religious community grieve the death of members together?* A focussed ethnography was used as the plan of inquiry and included additional triangulation and data collection techniques. The data was analyzed using the constant comparative method and was presented back to the community in a performance ethnography for confirmation and further data collection. The result of this iterative research process was a contextually situated description of how this religious congregation in western Canada grieved the deaths of three community members. The four main themes that were constructed out of the research process were that: (a) community members desired to care for the bereaved, (b) community members assessed relational proximity to the bereaved and the deceased to inform action according to role expectations in bereavement, (c) community members grieved together, being impacted and impacting each other reciprocally, and (d) community members grieved, and interacted, according to their own unique characteristics and experiences. The description of multidimensional reciprocal grief interactions between community members and the bereaved was novel. The description of community members' contextualized internal experience of a member's death was also unique. The results of this study add to the growing body of literature surrounding a relational understanding of grief. The implications for bereavement theory, research and practice were discussed.

Preface

This project received approval from the Trinity Western University Research Ethics

Board on July 10, 2016 (file# 16G12).

Table of Contents

List of Tables and Figures

Acknowledgements

This project represents a milestone in my journey of personal, academic and professional growth. It is a contextually situated time capsule, representing the voices of a "great cloud of witnesses" who have influenced the personal posture out of which I research and write. Though I do not list all of you here, I am deeply grateful for your influence in my life, and in this project.

Derrick, the grace and space you afforded me while studying, grieving, and growing was transformational. Thank you for your encouragement, direction, and your belief in me.

Greg, Matt, and the Bereavement Lab: Janelle, Tammy, Marnie, and Chantel, thank you for joining in creating a space where I felt safe to face my grief with you. Thank you for modelling this by sharing with me your own suffering. You have been a blessing beyond words.

Alina and Nathan, thank you for journeying through data collection and analysis with me. Your courage to voluntarily enter into the exploration of such a sensitive and deep project, and your willingness to hold me to truth was sustaining.

To those who grieved with me, Charlene, Elliot, Dad, Mom, my brothers, in-laws, nieces and nephews, thank you for supporting me in the best ways you knew how, with the resources you had, and in your own unique ways. Your roles were not glamorous. At times, our relationships were messy and confusing, and at other times beautiful and divine. Know that I cherish what you gave. I look forward to continuing to learn how to grieve with you, how to learn from you, and maybe even becoming comfortable with the chaos. Thank you.

The Bereaved Community, thank you for giving me this opportunity to learn from you your experience of grieving together. Thank you to the leadership for allowing me to enter into your 'family' at such a vulnerable and painful time. Thank you to the congregation, for your courage to share your loved ones with me, to share your stories with me, and to share your grief with me. I pray that your journey in grief is honoured by the representations in these pages.

Dedication

This project is dedicated to all those who know the sacredness of grief, including:

My Father, Jake

My Mother-in-Law, Audrey

My wife, Charlene

Elliot

Our family and friends who have walked this journey alongside of us

In Memory of:

My mom, Janet Bentum

My dad (in-law), Wilco VandenBorn

Our miscarried children

The one who loved owls

Michael Voskamp

Brian VandenBorn

"Jim," "Anne," and "Hank"

"There is one advantage to having your life cut through to the bone. It swiftly eliminates all the distractions and all the illusion. The clarity of my sight is fierce. I see what matters and what does not. And if I am going to encounter God, he will encounter no resistance. No games. No asking for signs. Just come. I am split open. God will come all the way in, if he is out there at all." (Paula D'Arcy, *The Gift of the Redbird*, p.32)

Chapter 1: Introduction

The profound human suffering incurred through the death of a loved one is experienced in relationship with other survivors (Klaassen, Young, & James, 2015; Neimeyer, Klass & Dennis, 2014). Our social context has an immense impact on our journey of grief (Bowlby, 1980; Kübler-Ross, 1969; Neimeyer et al., 2014; Stroebe & Schut, 1999; Walter, 1996). Thomas Attig captured the interactional reciprocity of bereavement in community when he wrote:

> "We grieve with fellow survivors. We receive and give support and comfort. We depend on one another or make demands. We find and make meaning alongside others who are themselves struggling to find and make meaning. Often we must contend with their finding or making meanings that differ from, and even conflict with, those that we find or make. They may or may not tolerate or respect our individual needs and preferences. We may more or less tolerate or respect theirs. What they do or say affects what is possible for us, and vice versa. They, or we, may make decisions or take actions that block paths that others would have chosen. They, or we, may or may not negotiate, compromise, or cooperate, in joint efforts to reshape and redirect family or community life patterns and histories." (2001, p. 44)

Not only is the study of bereavement important for understanding human experience and suffering, it is vital for the helping profession in aiding the bereaved through these difficult journeys (Attig, 2001, 2004; Klaassen, 2010; Kübler-Ross, 1969; Neimeyer et al., 2014). The study of the social context within which this powerful experience is housed is also paramount (Attig, 2004; Klaassen, 2010; Neimeyer et al., 2014).

The field of bereavement research is over a century old, and early theory and research has been heavily focused on the intra-psychic nature of human grief (i.e. Bowlby, 1980; Folkman, 2001; Freud, 1917/2005). Bowlby's attachment model (1980), Folkman's coping model (2001),

expanded by Stroebe and Schut in their dual process coping model (1999), and Neimeyer's

meaning making model (Gillies & Neimeyer, 2006) are all intra-psychic models of bereavement.

These are the most prominent models in bereavement literature today (Archer, 2008) and will be

discussed in further detail in chapter two of this paper.

Recently, however, research in the area of interpersonal bereavement has begun to

increase. Bereavement theorists have acknowledged the impact of social relationships on

grieving journeys (i.e. Attig, 2001, 2004; Neimeyer et al., 2014; Walter, 1996). Theories are

being researched practically. Areas of interpersonal bereavement study include parental grieving

(Hooghe, Neimeyer, & Rober, 2011; Klaassen, Young, et al., 2015; Wijngaards-de Meij et al.,

2008), dyadic coping (Bergstraesser, Inglin, Hornung, & Landolt, 2008), perinatal loss

(Gallagher, 2013) and family bereavement (Nadeau, 1998; Shapiro, 1996; Hays & Hendrix,

2008).

Though many of these studies are ground-breaking in the field of bereavement and add

significantly to the formation of an understanding of relational grieving, a gap exists in the

literature (Klaassen, 2010). First, interpersonal bereavement is often conceptualized as the

bereaved being impacted by outside social forces (i.e. Bowlby, 1980; Folkman, 2001; Neimeyer

et al., 2014) as opposed to social reciprocal interaction (i.e. Attig, 2001, 2004; Klaassen, Young,

et al., 2015; Nadeau, 1998). Secondly, the interactional experience of grieving in community, as

opposed to parental dyads or families has been neglected.

The Current Study

This study aimed to provide an initial foray into the shortage of community relational

bereavement. As has been shown, relational bereavement research is in its' infancy and there is

a need to understand how communities grieve together. In studying communal grieving

experiences, focus was directed on the reciprocal interactions between community members. As

such, physical, social and relational outcomes were not studied in this project, though, subjective experiences and judgements of interpersonal interactions were discussed with participants. The outer boundaries of the community were defined by community members themselves, whether they identified as members of the community or not (VandenBos, 2007). The type of death was not defined in this study, but it is acknowledged that different types of death have different impacts on bereavement (Archer, 2008; Nadeau, 1998). The purpose of this study was to gain an understanding of how communities grieve together, and focused on the reciprocal social interactions of members in a bereaved community.

Chapter 2: Literature Review

The purpose of this chapter is to give an overview of the current landscape of bereavement research as it relates to grief in communities. Towards this end, the chapter begins with a definition of the relevant terms in bereavement literature. Next, the development of the current understanding of bereavement, including theory, models, and research, will be discussed. The chapter is finished by highlighting recent research in relational bereavement to show the need for a study of grief in community. For a more detailed overview of the field of bereavement readers are referred to Klaassen (2010), and Rothaupt and Becker (2007).

Definition of Relevant Terms

Words can have multiple debated meanings, so for the purpose of clarity, terms used in this project will be defined before continuing the literature review. The definition of these terms is important so as to provide understanding of the nuance of such a deep and intricate a topic as bereavement.

Bereavement. The editors of the most recent American Psychological Association Handbook of Bereavement Research (Stroebe, Hansson, Schut, & Stroebe, 2008) distinguished between bereavement, grief and mourning. Bereavement was defined as the "objective situation of having lost someone *significant* through death" (Stroebe et al., 2008, p. 4). They suggested that a significant person could be a parent, a sibling, a partner, a friend, or a child. Weinstein (2003) submitted that bereavement can be inclusive of all that comes with the experience of losing a loved one, including grief and mourning. In this paper, bereavement will be referred to as the designation that the bereaved has experienced the death of someone in their social network, as well as the assumption that these people are grieving and mourning. This writer encourages the reader to be reminded of the pervasiveness of the experience of the death of a

significant person upon reading the word bereavement: the fact, the holistic experience and the public expression of this experience.

Grief and grieving. Grief can be defined as the "normal, natural response to loss" (Stroebe et al., 2008, p. 5). Continuing, these authors described grief as an emotional "syndrome" with "symptoms" (p. 5) which seems to indicate that grieving is pathological. In contrast, Thomas Attig distinguished between passive and active grieving (2004). He wrote, "…grieving is an active response to emotional, psychological, behavioural, social, intellectual, and spiritual challenges entailed by loss" (2004, p. 246). Further, Attig promoted that grieving is not just persistence in, or managing of, uncontrollable natural processes, but also a choice to engage the world again through the lens of suffering (2004). This type of grieving is a 'turning towards' grief, instead of a distraction from, an attempt to master, or merely endurance of pain (Klaassen, Gallagher, Drisner, & Bentum, 2015).

Relational grieving. As a relatively new concept, relational grieving has not been defined in recent literature. The concept is meant to address the type of grieving that happens between people. One compelling definition from a recent presentation at the Canadian Psychological Association Convention is: "relational grieving is the personal decided engagement with the loss of life-relevant values in which we share our turning towards with another person" (Klaassen, Gallagher, et al., 2015). To elicit this definition in short hand, the terms *relational grieving*, or the idea of *reciprocal interaction* (Attig, 2001, 2004; Walter, 1996), will be used in writing in this study. This is opposed to the term *interpersonal bereavement* which has tended to describe the impact or influence of a community on a bereaved member.

Mourning. Mourning is the public display of grief (Stroebe et al., 2008). These authors described mourning as often being shaped by the culture or group of which the bereaved is a part. They discussed that often mourning and grief are hard to distinguish as contextual societal

influences cannot be removed from a grieving individual. As this study attempts to discuss grieving in community, mourning will include the ritualized or traditional expressions of grief as opposed to the personal decision to 'turn toward' grief in a social situation.

Community. The American Psychological Association defined community in four parts (VandenBos, 2007). First, human communities can be gathered around common interests, attitudes and values. Second, a community may be organized around a communal feeling. Third, members can self-identify as part of a community. Finally, a community can be described as having a system of governance, communication, education or commerce. For the purposes of this study, membership in the community will be defined by the self-identification of a person as a member of the bereaved community. However, the full four-part definition was described here as it is necessary for understanding literature surrounding culture, religion and online communities.

Bereavement Theory and Models

In the Western understanding of bereavement over the past 50 years, several dominant perspectives have emerged. Archer (2008) identified three main contemporary conceptualizations of bereavement. The first of which is based heavily on the emotional process of what Freud (1917/2005) called 'grief work,' but taken in a different direction and expanded and modified through stress and coping theory (Lazarus & Folkman, 1984) to produce a coping model of grief (Folkman, 2001). The second major theory, more closely connected to Freud (1917/2005) is attachment theory as proposed by Bowlby (1980). The final major conceptualization described by Archer (2008) is the meaning reconstruction model proposed by Neimeyer (Gillies & Neimeyer, 2006). Each of these understandings will be briefly discussed below.

In addition to these three main ways of understanding grief, several other theories are noteworthy. Continuing bonds has gained a footing in the recent research as a response to the 'grief work' hypothesis (Klass, 1993; 2015; Klass & Walter, 2001). Thomas Attig's existential-phenomenological model of grieving proposed a holistic view of aspects of bereavement (Attig, 2001, 2004). Finally, Stroebe and Schut (1999) have developed a dual process model of coping with bereavement as an attempt to consolidate some of the previously mentioned models and theory into one comprehensive bereavement model.

Each of these theorists have increased the understanding of bereavement and aided in working with those who are grieving, yet have been focused intra-psychically. In remedying this bias, research has only recently augmented intra-personal bereavement theory with studies into interpersonal bereavement and relational grieving (i.e., Hooghe et al., 2011; Klaassen, Young, et al., 2015; Wijngaards-de Meij et. al, 2008). Though no widely accepted relational grieving model exists as of yet, this research has been vital in broadening our understanding of grief as contextually and interactionally situated. More attention will be given to research on relational grief and interpersonal bereavement below.

Freud's decathexis model. Sigmund Freud's *Mourning and Melancholia* (1917/2005), is most commonly agreed to be the foundational work in the field of bereavement (Archer, 2008; Rothaupt & Becker, 2007). In his paper, Freud (1917/2005) conceptualized grief as decathexis, which is the process of disconnecting so as to reinvest libidinal energy in a replacement object. Reinvesting energy requires the bereaved to engage in grief work by which a person disengages from another person, essentially 'letting them go.' Though Freud first wrote about grief work, the depth of the subsequent meaning of this term has been compiled over the past century. Summarizing Fraley and Shaver (1999), Rothaupt and Becker (2007) gave this definition of grief work: "Grief work is described as the process of acknowledging the permanent absence of the

person who died while attending to the feelings and memories of the deceased while not suppressing or isolating them" (p. 7). Stroebe and Schut's (1999) description is a little more forceful: "…one has to confront the experience of bereavement to come to terms with loss and avoid detrimental health consequences" (p. 199).

The purpose of grief work is detachment from another person (Freud, 1917/2005). Freud (1917/2005) initially wrote about the reluctance of a bereaved person to fully detach from the deceased as "hallucinatory wishful psychosis" (p. 244). When full detachment does not happen, pathological grief is present. Though Rothaupt and Becker (2007) indicated that Freud may have thought differently after losing his own daughter, disengagement of energies from the deceased is still a foundational understating of grieving in many theories (i.e., Bowlby, 1980). This is not a universal point of view, however, as continuing bonds theory has gained traction in current bereavement theory and practice (Klass, 2015).

Freud's initial conceptualization of mourning is not universally accepted, yet his ideas continue to be influential in shaping the field of bereavement. Each of the following models and theories have had to address the concept of grief work. Some have modified or expanded the idea, and others have opposed all, or portions, of it. In any case, Freud's work has been formative.

Bowlby's attachment model. Building on Freud's (1917/2005) decathexis hypothesis, John Bowlby (1980) asserted that grieving is the breaking of attachment bonds. Bowlby differentiated from Freud in changing the focus from libidinal energies to attachment relationships. He found that bereaved individuals seem to display attachment behaviour similar to the separation anxiety of young children who are parted from a caregiver: "clinging, crying and perhaps angry coercion" (p. 42). For many children, this behaviour restored the relationship and distress was relieved. For the bereaved, reunion was no longer possible. Bowlby observed

that the response of bereaved persons was then to progress through four phases. First, the phase

of numbing occurs in the initial hours and can last weeks. This period of denial or disbelief can

include expressions of intense distress and anger. Second, is a phase including yearning and

searching for the deceased that can possibly last years. The bereaved may be preoccupied with

thoughts about the deceased, may be restless or may focus on events indicating the deceased are

present in some way. The third phase is one of disorganization and anguish. In this phase, the

bereaved grasp the realization that the departure of the deceased is final, and struggle with the

thought of life without their loved one. In the final phase Bowlby indicated bereaved persons

begin varying degrees of reorganization. The bereaved person begins to restructure life, making

changes in relation to the death of a significant person. He clarified that this process is not

necessarily linear nor is it exclusive. People may oscillate between phases, and exist in more

than one phase at a time. The overall goal of grief, as was Freud's hypothesis, was to detach

from the deceased person by expressing internal distress.

    Though Bowlby (1980) more explicitly indicated the importance of relationship to

bereavement, his theory was still intrapersonal in nature. He specified that the people with

whom a bereaved person interacts can have an impact on the trajectory of grieving. However, he

noted that the importance of this influence is from the community *to* the bereaved person, and

made no mention of any reciprocal impact. The overwhelming emphasis was on what was

happening for the person who is grieving, including whether the community was supportive or

created more distress.

    Continuing bonds. In the past two decades, Freud's (1917/2005) and Bowlby's (1980)

assertion that relinquishing connection to the deceased was necessary for the bereaved, has been

challenged (Klass, 1993; 2015; Klass & Walter, 2001). In many cases the living continue to stay

connected to the deceased through sense of presence experiences (e.g., sensing the spiritual

presence of the deceased person), linking objects, memory, visions, or identification with the

deceased (Klass & Goss, 1999). These connections can be symmetrical where "the happiness

and health of the living depends on the status of the dead, just as the status of the dead depends

on the living" (Klass & Goss, 1999, p. 552). Klass and Goss wrote that connections could also

be asymmetrical where the dead impact the living, but the living cannot impact the dead. In

these instances, the dead may encourage the living to become better persons, though sometimes

the intent is more hostile (Klass, 2015). Klass (2015; Klass & Goss, 1999) asserted that at this

particular time in history our Western focus is more on an asymmetrical understanding of

relationship with the dead.

Klass (2015) described the cultural importance of continuing bonds practices. He argued

that connection with the past can be a matter of social identity. In one way, rituals remembering

the dead have provided a way for the bereaved to connect to a community through their cultural

traditions. In another way, integration into the community can come from appeasing or

vanquishing hostile spirits. In other cultures, he continued, belief in continuing bonds and

interaction with the dead are seen as pathological. Finally, political or social agendas can dictate

community beliefs about the influence the dead have in our everyday lives.

Kübler-Ross's stage theory. Drawing from Freud's grief work hypothesis, attachment

theory, and her own observations, the psychiatrist Elisabeth Kübler-Ross (1969) developed a

model of the experience of a person who is dying. Her observations took the form of formal

public interviews with palliative patients, as well as private visits. Though this was not a strict

research program, her stage theory has become famous and has been applied to grieving as well

as dying (Kübler-Ross & Kessler, 2005). The five stages that Kübler-Ross (1969) identified are,

(a) denial, (b) anger, (c) bargaining, (d) depression, and (e) acceptance. The author added a

caveat that these stages are not necessarily experienced linearly, nor is it necessary to go through

each stage. Acceptance is the end goal for those who are dying, which means detachment from all relationships with this world. Once this is achieved the person can die peacefully.

This model focused on intra-psychic experiences, though the impact of significant others on those who are dying is noted (Kübler-Ross, 1969). The community that interacts with palliative patients can inhibit the acceptance stage and even prolong death. Kübler-Ross posited that western society is terrified of death and attempts to avoid all reminders of human finiteness. When confronted with a palliative patient, anxiety about death can increase in a community and inhibit them from supporting this patient. If this happens, the dying process may be experienced with more distress. Though Kübler-Ross acknowledged the reciprocal relationship between a community and a dying person, she did not account for this, or describe it, in her model.

Folkman's stress and coping model. Based on the stress and coping model advanced in 1984 by Lazarus and herself, Susan Folkman (2001) developed and revised a stress and coping model for grief. Coping is an alternative conceptualization of grieving compared with the grief work hypothesis. Folkman (2001) defined coping as "the changing thoughts and acts that an individual uses to manage the external or internal demands of stressful situations" (p. 565). She continued by saying, "it is a descriptive, process-oriented approach, the evaluation of which depends on constraints and demands that are inherent in the context and the kinds of outcomes that are examined" (p. 565). The stress and coping model specified for grief has both of these elements in it: (a) individual experience and appraisal, as well as (b) contextual impact and evaluation.

Individualized and contextualized experiences are described in four main steps of the model (Folkman, 2001). After the event has happened (i.e. a significant person has died), the first step is appraisal. During appraisal, an individual decides whether the event was threatening or benign. If it is determined to be a harmful event, the person engages in the second step:

coping. Coping can be problem focused or emotion focused and leads to the event outcome, which is the third step. The event outcome can be (a) favourable, (b) unfavourable, or (c) unresolved. The final step is the emotional outcome. Obviously if the event outcome was favorable the emotional outcome will be positive emotion. If the resolution was negative or inexistent, distress occurs and the person begins the process again or tries to make sense of the experience by creating meaning out of it. If meaning can be made, positive emotion is elicited and coping continues.

As is evidenced here, the coping process is highly individualized. In Folkman's (2001) model, there is no provision made for relational impacts on the grieving journey. It is important to note that coping theory is one of the most widely used theories in understanding, researching and describing bereavement (Archer, 2008). This has two consequences. First, grieving is conceived as primarily intra-psychic, as opposed to balanced relationally (Stroebe & Schut, 1999; Walter, 1996). Second, grieving health is measured in terms of distress relief (Folkman, 2001; Neimeyer et al., 2014, Stroebe & Schut, 1999), instead of turning towards and sharing grief (Klaassen, Gallagher, et al 2015).

The dual process model of coping with bereavement. Drawing heavily from stress and coping theory, Stroebe and Schut (1999) offered their dual process model of coping with bereavement (DPM). This is opposed to building on the grief work hypothesis where the bereaved person allows distress and works towards detachment from the deceased (Freud, 1917/2005). The DPM includes an oscillation between problem-oriented coping and emotion-focused coping (Stroebe & Schut, 1999). That is, a person attempts to manage the problems resulting from the death or attempts to manage the ensuing emotions. Stroebe and Schut (1999) named these two processes restoration orientation and loss orientation respectively. Additionally, they add that loss orientation includes grief work and active detachment processes,

whereas restoration orientation includes distraction from grief. In this way, the DPM is an

integrative model and is a description of *coping* with grief, not a model of holistic relational

grieving. Though this model is integrative, the focus is still on intrapersonal processes (Stroebe

& Schut, 1999). The authors stated that "this dynamic process of coming to terms with death

does not take place in isolation. The bereaved are surrounded by others, some of whom are,

likewise, grieving for the deceased. …Neglected so far… is the analysis at an interpersonal

level" (p. 202).

      Meaning reconstruction model. Viktor Frankl's (1962/2006) existential perspective,

and the grief work hypothesis (Freud, 1917/2005), attachment (Bowlby, 1980) and coping

models (Folkman, 2001; Stroebe & Schut, 1999) seem to have influenced Neimeyer's

constructivist meaning reconstruction model of bereavement (Gillies & Neimeyer, 2006). Gillies

and Neimeyer (2006) based the model on three processes used by bereaved people that, they

argued, are common. These processes include: (a) making sense of death, (b) finding something

good in bereavement, and (c) changing in identity. These are necessary components because

death has the ability to destroy the assumptive schemas of the bereaved person and create

distress. When a person engages in the three processes, distress is reduced due to the

reconstruction of new, helpful, meaning structures. If a person is unable to find meaning they

will continue to search, in a state of distress, until favorable meaning can be found. These

authors proposed a constructivist approach to understanding bereavement which attempts to

address an interpersonal dimension of grieving. They noted that meaning making processes

occur in relational contexts, not just intrapersonally. They stated explicitly that social contexts

impact our meaning structures, how we grieve and how we make sense of death. They stopped

short of talking about the reciprocal impact of grieving together, but laid some groundwork and

called for more research into interpersonal bereavement.

Religious coping. Connected to both Folkman's (2001) stress and coping model, and the meaning making model (Gillies & Neimeyer, 2006), an understanding of religious coping has been described (Gall & Guirguis-Younger, 2013; Hays & Hendrix, 2008; Pargament, 1997). After appraisal of a stressful situation, a person may employ religious coping strategies to mediate distress (Gall & Guirguis-Younger, 2013; Hall & Hendrix, 2008). Describing the multidimensionality of religious coping strategies, Gall and Guirguis-Younger wrote, "religious and spiritual resources can function at the level of personal or dispositional factors (e.g., belief in God), primary and secondary appraisals (e.g., God attributions), coping behaviour (e.g., prayer), coping resources (e.g., religious support), and meaning making (e.g., spiritual reappraisal)" (2013, p. 350). As is noted by Gall and Guirguis-Younger (2013), the authors Siegel, Anderman, and Schrimshaw (2001) argued that these resources affect health and well-being through (a) providing a lens through which to interpret events, (b) helping with coping efforts, and (c) connecting to social support (p. 353). Religion, then, provides a framework to experience, understand and potentially moderate life events.

Of particular interest is the use of religion for connecting to community. Hays and Hendrix (2008) noted that emotional disclosure and social sharing may be adaptive. They also noted that religious belonging is an important factor in coping. They wrote, "…outcomes may be associated with either the subjective perception that sufficient support is available or the instrumental support that is actually afforded by the religious community – either of which may decrease withdrawal and feelings of isolation" (p. 338). So, in one way, the fact that someone is part of a community is important for support.

Another aspect of being a part of a social group is the lens the community offers through which to see life events (Gall & Guirguis-Younger, 2013). Englehardt and Itlis's (2005) study illustrated the impact of Christian tradition on end of life decisions and post-death attitudes. That

is, community and individual practices and attitudes that are more integrated and flexible, rather than rigid and peripheral, ease the grieving journey.

The community, then, seems to have two impacts on grieving. The first is that the religious community[1] provides a framework to view the stressful event and the grieving process (Gall & Guirguis-Younger, 2013). The second impact is that the community may provide relief from isolation, and that different forms of support come with this relief (Hall & Hendrix, 2008).

Phenomenological model. Thomas Attig (2001; 2004) articulated a 'relearning the world' model to address the lived experience of bereavement. The world must be relearned during bereavement because the core experiential assumptions that were held about the world have been shattered. Attig (2004) wrote:

> "Bereavement shakes our "assumptive world" far more deeply than simply causing us to question beliefs we have long held or to rethink plans of action. Rather, bereavement uproots our souls: It takes away from the shape of life where we have come to experience ourselves at home, and it makes us aware of how much we have taken for granted. Bereavement shakes our spirits: It disrupts the life patterns within which we have found meaning, it confronts us with an unexpected future, and it challenges us to find the courage, hope, and faith we need to stretch into the inevitably new." (p. 350)

He posited that bereavement requires responses in two areas. First, the bereaved must relearn the world as having integrity in the wake of a painful loss. Second, the bereaved must learn to hold and experience their pain, without fixating on, or being defined by, their suffering. As there is overlap between Attig's theory and the meaning reconstruction model, the end goal is similar in

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[1] Religious community is used in the broad sense to include congregants and attendees at a local religious institution. This definition can include all those who self-identify as being part of a church community, or common religion and those who are identified by the community as being members. It is not limited to those of a common religion that have taken vows for that religion, or who live together.

both: (a) find meaning in suffering, (b) learn to experience wholeness in the world, and (c) to

redevelop the shape of personal life stories (p. 347; Gillies & Neimeyer, 2006, p.32).

Of all of the models representing our current western understanding of bereavement,

Attig's (2001) model is most overtly relational. He writes:

"…when we lose someone dear, we experience loss of our wholeness…it is as if our

families, communities, and all of humankind are joined as webs of webs. Our life stories,

and those of our families and communities, are filled with weaving and reweaving of

webs of connection, patterns of caring within which we find and make meaning.

Bereavement strikes a blow to those webs, to our person, family, and community

integrity. The weaves of our daily life patterns are in tatters." (p. 36)

This interpersonal reality has largely been missing from the research literature. Especially

unrepresented is a truly relational reality: "we grieve not only as individuals but also as families

and communities. Family and community relearning are themselves complicated, collective,

interactive processes" (Attig, 2001, p. 42). Though research is beginning to grow in relational

grieving (i.e., Gallagher, 2013; Klaassen, 2010; Nadeau, 1998), much focus is still on the one-

way impact of community context *on* those closest to the deceased (i.e., Neimeyer et al., 2014),

instead of the "interactive processes" that Attig (2001) indicated.

Interpersonal Bereavement

With an overview of the historical models of bereavement discussed, a foundation for

further discourse on interpersonal bereavement theory and research has been laid. Though in its

infancy, the experience of bereavement and grieving in relationship has begun to be researched

(e.g., Gallagher, 2013; Hooghe et al., 2011; Klaassen, Young, et al., 2015; Umphrey &

Cacciatore, 2014; Wijngaards-de Meij et al, 2010). Due to the fact that there is little

understanding about relational bereavement in a community setting with an emphasis on the

interactional nature of grieving, relevant theory and research in the area of relational grief as it is connected to, or points to, relational grief in communities will be outlined. This will begin with a brief overview of parental relational grieving, and then move to grieving as families. Finally, the literature on the cultural and social context of grief including religious communities, cultural influences and online communities will be addressed.

Parental bereavement. Several studies have focused on the experience of joint grieving with parents, following the loss of their child (Bergstraesser et al., 2015; Hooghe et al., 2011; Klaassen, Young, et al., 2015; Toller & Braithwaite, 2009; Umphrey & Cacciatore, 2014; Wijngaards-de Meij et al., 2008). Researchers in this area have documented the devastation that parents experience and how they have journeyed together (Gallagher, 2013). The definitions that have come out of parental grieving have pointed to the importance of reciprocal interaction in grief (Gallagher, 2013; Hooghe et al., 2011; Klaassen, Young, et al., 2015).   Klaassen, Young, et al. (2015), defined relational grieving in the context of their study as "the experienced and intentional emotional and/or physical presence and supportive actions between bereaved parents" (p. 84). They wrote that this could be planned or it may occur spontaneously. Further, it could be supportive, when one person aids the other's grieving, or joint, where both parents engaged in grieving together.

The communicative aspect of grieving has also been studied (Hooghe et al., 2011; Toller, 2005; Toller & Braithwaite, 2009). These studies found that parental grieving is the co-construction of a new reality through speaking their narrative. Hooghe et al. (2011) noted that, importantly, even the listener is considered involved in the process as a "co-narrator" of the grief story as they respond with an "opened" or "closed" posture to hearing parts of the story (p. 913). These authors noted the significance of the bereaved telling their story. This sometimes is encouraged and sometimes resisted by their family atmosphere or personal emotional state

(whether the bereaved themselves are seeking isolation or communion). Toller (2005) as well as

Toller and Braithwaite (2009), had come to the same conclusion.

Parental grieving experiences have also been studied through a coping lens (Bergstraesser

et al., 2015; Wijngaards-de Meij et al., 2008). Parents grieving together were referred to as

dyadic coping which is "the efforts by one or both partners to manage stress and to create or

restore prior physical, psychological, or social homeostasis within both of the partners"

(Berstraesser et al., 2015, p. 129). Though this definition suggests a 'turning away' (Klaassen,

Gallagher, et al., 2015) from grief as opposed to Attig's (2001) understanding, the authors listed

the same types of experiences and activities that fell under the Klaassen, Young, et al. (2015)

definition of relational grieving put within Folkman's (2001) coping with grief framework. In

the studies of parental or dyadic coping, the researchers found that parents who allowed for and

supported different coping styles adjusted better to the loss of their child (Bergstraesser et. al,

2015; Gilbert, 1989; Wijngaards-de Meij et. al, 2008;). This theme was found when the

language of bereaved parents was analyzed for metaphors as well (Umphrey & Cacciatore,

2014).

One study with parents by Dyregrov (2003) took the impact of community specifically as

the object of interest. Dryregrov studied the experience of bereaved parents in community. She

termed the inability of community members to provide meaningful support despite a desire to

alleviate suffering as "social ineptitude" (p. 31). She noted that there were three areas of

ineptitude: "(1) anticipated support fails to appear (non-communication), (2) people suddenly

withdraw from the bereaved (abrupt communication), and (3) unhelpful support and advice is

offered (unsuccessful communication)" (p. 31). Additionally, she argued that lack of support is

not necessarily experienced because the message was communicated in a certain way, but that

both the bereaved and the support person were not in a common place of understanding and

communication. She wrote: "…accepting the perspective that social support is fundamentally a

relational communication process implies that social support must be explored as an interactional

phenomenon" (p. 25). In her study, Dyregrov highlighted the impact of the community on the

bereaved, and how some of the internal positions of the bereaved impact the experience of

support. The extension of this research is to study the internal processes of the community

members, and how they are impacted by the bereaved, as well as how the bereaved are impacted

by the community members in this context. Dyregrov's (2003) research comes the closest to

studying reciprocal interactions in community as has been identified by this author at the time of

writing.

       These studies pointed clearly to the interactional nature of grieving among parents.

Though much has yet to be understood about parental grieving (Hooghe et al., 2011), these

researchers have uncovered important information that augment the largely intrapersonal bias in

bereavement research and theory (Klaassen, Young, et al., 2015). These understandings of the

relational nature of grieving between parents is significant as it is unrepresented in the literature

on grieving in community. The definitions and nuances that have been described in the

presented studies may be useful guideposts in the study of communities journeying through

bereavement together.

       Family bereavement. Another turn from the intrapersonal focus of bereavement

research has been towards family bereavement. In her book, *Families Making Sense of Death*,

Janice Nadeau discussed her study of families grieving together from a systemic perspective

(1998). She found that families attempted to re-balance the family system together, by making

meaning of the death. Further, Nadeau writes "…meaning-making is an interactive process and

… family interactions create meanings" (p. 72). She referenced participants in her study who

evidence this interactional process. Nadeau also addressed different levels of relationship from

couples, to siblings, to slightly more distant dyadic relationships, highlighting the multiple levels of interaction that exist within a family. This is helpful, as communities may also have multiple levels of connection. Though this study was not about relational or interactional grieving, it highlighted the relational aspect of bereavement.

Kissane and Lichtenthal (2008) outlined "Family Focused Grief Therapy", arguing that "…grief that is shared can begin to be healed, and the family unit is the most natural and generally available social group to permit this sharing" (p. 505-506). The underlying premise that is clear from this quote is that families who share their grief are using adaptive grieving processes. Communication between family members is important in this model, as well as a focus on accepting different grieving styles. Prevention of isolation is one of the benefits of joining in reciprocal communication. Though these authors did not explicitly talk about relational grieving as defined earlier, they offer a view of the family as a unit which fares better when sharing grief and supporting each-other's varied grieving styles.

One of the areas that Kissane and Lichtenthal (2008) addressed is the impact of the larger social context on the family unit. This includes religious rituals, traditions and expectations. The fact that a family is contextually situated was acknowledged and was a focus of communication and conflict resolution that was a part of the Family Focused Grief Therapy.

The family system view of relational grieving promoted a view of bereavement as shared (Shapiro, 1996). This lens encourages family members to accept differences in grief styles and lean on each other (Kissane & Lichtenthal, 2008). Meaning is created together and homeostasis is returned (Shapiro, 1996). Though this focus is less explicit about the impact of the reciprocal interaction of grieving family members, it still highlights the importance of research into interpersonal contexts. The acknowledgement and processing of social factors in therapy calls for more understanding into communal grieving.

Cultural and community context. Within the field of bereavement, cultural and community processes have been of interest to theorists (e.g., Neimeyer et al., 2014), but have not been thoroughly studied (Walter, 1996; Weinstein, 2003). Following is an overview of the types of published literature that have been undertaken in the area of bereavement and community. The main bulk of research falls generally under three overlapping headings: (a) religious communities, (b) cultural community influences, and (c) online communities.

Religious communities. Observations have been made about the impact of religion, religious practices, or connection to a religious congregation (Klaas, 2015; Klaassen, Young, et al., 2015; Neimeyer et al., 2014; Weinstein, 2003). Some studies have overtly addressed religious community and bereavement (Weinstein, 2003) while others have only discussed the religious community peripherally (Cacciatore, Lacasse, Lietz, & McPherson, 2013; Vandecreek & Mottram, 2009).

Authors such as Walter (1996) and Weinstein (2003) provided anecdotal observations of the impact of religious community during bereavement. They did not focus specifically on grief or grieving but on the experience of the influence of community through mourning. Tony Walter (1996) detailed his own experience of bereavement in community and noted the narrative nature of interpersonal grieving. In comparison with other studies, Walter was the most explicit in describing the reciprocal interaction of bereavement in community. He noted that in the traditional Jewish community, members meet the bereaved in their home and talk about the deceased. Walter wrote that "sometimes this entails formalities and pleasantries, but on other occasions differing perceptions of the dead person may be discussed animatedly with one person's view of reality being tested against another's…" (p.14). He later called for empirical research into the area of relational grieving.

Weinstein (2003) gave examples of the bereavement experience in Orthodox Jewish populations including the rituals and traditions that surround mourning and grieving. Some of these practices fall closely under the theory that Neimeyer et al. (2014) called the "policing of grief" (p. 493). That is, "…society polices bereavement. It controls and instructs the bereaved how to think, feel and behave…" in two areas: "first in how grief's emotions are expressed, and second in how continuing bonds with the dead are managed" (Neimeyer et al., 2014, p. 493). Weinstein (2003) desired that health care professionals would understand and respect the cultural and religious context of the bereaved while working with different communities.

Vandecreek and Mottram (2009) interviewed widows bereaved by suicide ($N = 10$) for their perspectives on religion and bereavement. Of the ten themes emerging from the study, three focused on social support and four on experience specifically from within a religious community. The social themes dealt with (a) the perception of family and friends' discomfort, (b) survivors' contributions to isolation, and (c) close support from some family and friends. The religious themes were: (a) congregational support, both positive and negative, (b) long and short-term clergy support, (c) the funeral service, and (d) difficulty returning to church services. Since this data was derived from interviews with widows, the community aspect was only studied from this one dimension. Though this study outlines the importance of community, this is a clear example of the lack of a reciprocal and multi-dimensional perspective of bereavement in the literature.

Cultures. The topic of cultural communities can overlap with the study of religious communities, but has also been researched distinctly. An example of overlapping research is the study of Australian-Italian Catholics by Ata (2012). The author surveyed participants ($N = 269$) on their experience as bereaved persons. The results indicated that different religious and cultural groups had different experiences as to: (a) feelings of shame at expression of emotion,

(b) length of grieving, (c) death anxiety, (d) funeral practices, and (e) communicating with the deceased. This matches with Neimeyer et al.'s (2014) understanding of policing mentioned above.

Interestingly, a study by Chow, Chan, and Ho (2007) indicated that cultural influences can be ignored. These authors studied bereaved Chinese residents of Hong Kong ($N = 140$), who's traditions dictate that sharing emotion outside of the family is unacceptable. This study showed that many of the participants were indeed sharing, and they were experiencing better health as well. They suggested that the study of sharing emotions during grieving may be important and call for more research in the area of the benefits of emotional expression in this population. Though they did not talk about the reciprocal nature of sharing emotions, this study highlighted the navigational processes of individuals within their communities; both those who share grief and those who encourage sharing.

Granek (2014) argued that grief is often harnessed for political reasons, and that this has an impact on the grief trajectories and experience of the bereaved. The cultural context of the individual then, is important for understanding grief. Granek wrote: "The expression of grief is always mediated by one's social context and is always political" (p. 61). Granek posits that cultural contexts have shaped grieving in western contexts in three ways. First, that grief has been individualized and pathologized to promote productivity and consumerism. Second, that national governments use grief to fuel war policies. Third, Granek argues that grief is harnessed culturally by social activists in the service of social justice. Granek's discussion of higher level reciprocal interactions between cultures, organizations and the bereaved highlights the different levels of influence on grief in communities. Though this paper does not research community grief, the observations contained within highlight the need for a broad understanding of the reciprocal impact of different forces and levels of context with the bereaved.

Online communities. In an era of technological advances, the boundaries of community have been expanded to include online communities. One study of the demographics of a bereaved parents' online community (*N* = 503) found that most participants where white and female (*n* = 431 and *n* = 478 respectively) with a college degree or more (*n* = 424) (Cacciatore et al., 2013). Another study aimed at discovering member demographics found that users of online communities were often less connected to social support, or a religious community (van der Houwen, Stroebe, Schut, Stroebe, & van den Bout, 2010). Neither of these studies researched relational grieving.

Smartwood, McCarthy Veach, Kuhne, Kyung Lee, and Ji (2011) studied the helping skills and content of online grief communities (*N* = 564). They found that most people primarily self-disclosed online with the central theme of exchanging hope. Participants self-disclosed mostly by telling their own story. Members then (a) validated the grief experience of others, (b) offered resources, and (c) gave psychosocial support. In this study, the authors analyzed the online responses of a helper to a bereaved person. This marks a shift from researching impacts *on* the bereaved to the processes or methods of aiding the bereaved using online communities. Though this is still not a study of the reciprocal nature of relationships in community it is an acknowledgement of the personhood and individual impact of the 'listener' (Neimeyer et al., 2014) or the helper.

Theoretical Limitations

Current western theory and research in bereavement have developed on a strong intra-psychic foundation and are heading into new and exciting relational arenas. Freud began the western conceptualization of grief with his decathexis, and grief work hypotheses (1917/2005). John Bowlby (1980) built on this foundation using his theory of attachment. These two theories posit that individuals must relinquish bonds with the deceased in order to adapt to bereavement

in a healthy way. The intrapersonal focus of both of these theories has continued to this day

(Klaassen, 2010). Folkman's coping theory (2001), religious coping (Pargament, 1997) and

continuing bonds (Klass & Goss, 1999; Klass 2015) have opened the field of bereavement up to

expanded understandings of grieving, but have continued to focus on intrapersonal factors. The

meaning making model proposed by Gillies & Neimeyer (2006) is also intrapersonal, but

subsequent social constructivist renditions of it (Neimeyer et al., 2014), move the focus more

towards the social context and interpersonal features than previously found in the literature.

Thomas Attig's (2001, 2004) phenomenological theory is discussed mainly intrapersonally, but

he posits that reciprocal interactions are a key part of relational grieving. Recently Attig's

suggestions have been heeded as parental (Hooghe et al., 2011; Klaassen, Young, et al., 2015;

Wijngaards-de Meij et al, 2008), and familial (Bartel, 2016) grieving have begun to address truly

relational aspects of grieving.

In the area of community bereavement, research has focused primarily on the impact of

communities *on* the bereaved, instead of the reciprocal interactions of the community members.

Included is the 'policing' of grief (Neimeyer et al., 2014, p.594), through rituals and traditions

(Weinsteing, 2003; Klass, 2015), shame for expressing emotions (Chow et al., 2007), as well as

positive experiences of support (Vandecreek & Mottram, 2009). The lack of research into

reciprocal interactional grief is a significant shortfall, because communities are made up of

collections of people (VandenBos, 2007) capable of overriding these social conventions (Chow

et al., 2007), or acting supportively within them (Klaassen, Young, et al., 2015; Nadeau, 1998;

Hays & Hendrix, 2008). This vacancy warrants research into community bereavement from a

relational grieving perspective.

Conclusions

The purpose of this chapter is to situate this study within the context of bereavement

theory and research. The chapter began with the definition of relevant terms, moved to appropriate historical and current bereavement models, and ended with a presentation and critique of recent interpersonal research and theory. As is clear from this overview, significant understanding is absent in the area of relational community bereavement. This represents a substantial gap and considerable opportunity. For this reason, this study was designed to answer the question: "*How does a religious community grieve the death of members together?*" The outcome of this study shows promise in developing an understanding of how community members interact reciprocally in grief. This understanding is useful for helping community members walk alongside each other, providing support as they grieve together.

Chapter 3: Plan of Inquiry

In this chapter ethnography is outlined as the plan of inquiry. This discussion begins with the paradigm assumptions underlying this study, and resulting impact on knowledge claims. Next the participants will be described including recruitment strategies. Following this, a discussion of data collection and analysis will ensue. Accounts of rigour, quality and ethical considerations will then be discussed.

This chapter is framed by the background of the previous chapter. In the literature review, current bereavement theory and research were discussed and the necessity of the study of relational bereavement in community was identified. The question: *How does a religious community grieve the death of members together?* was presented as an initial foray into the study of relational community bereavement.

Ethnography

Several authors have offered an account of the task of ethnography as the description of a culture (Gobo, 2008; Hammersley & Atkinson, 1983; LeCompte & Schensul, 1999a). This definition is broad, covering the sweeping history of ethnography from early anthropologists (see Wolcot, 1999) to sociologists (Deegan, 2001) and psychologists (Simonds, Camic, & Causey, 2012). The common features of ethnography across perspectives are identified as being "…grounded in a commitment to the first-hand experience and exploration of a particular social or cultural setting on the basis of (though not exclusively by) participant observation" (Atkinson, Coffey, Delamont, Lofland, & Lofland, 2001, p. 4). Early ethnography involved living with a community for upwards of two to three years, attempting to gain as comprehensive an understanding of the community as possible (LeCompte & Schensul, 1999a). Contemporary versions tend to be more focussed on a certain problem or aspect of a group of people, and participation in a community can be shorter in duration (Deegan, 2001; LeCompte & Schensul,

1999a; Simonds et al., 2012; Wolcot, 1999). Due to the multiplicity of perspectives ethnography is able to accommodate, and the wide range of research situations using ethnography, the following discussion outlines the particular paradigm underlying this study on relational bereavement in community.

Ontological assumptions. Originally built on the philosophical position of interactionism (Aldiabat & Le Navenec, 2011), the underlying ontology of ethnography is now more broadly defined by the assumption that reality is contextually situated (Atkinson et al., 2001). There are differing views on how this plays out, but interpretive, phenomenological or constructivist understandings indicate that reality is negotiated between participants within their contextual environment (LeCompte & Schensul, 1999a). Examples of context can include physical space, as well as political and historical settings (Simonds et al., 2012). In a research setting, then, reality cannot be separated from the environment nor the participants.

A relational ontology (Slife, 2004) guided the specific understanding of contextual factors in this research project. This specificity was necessary due to the breadth of ontological positions that include the impact of context in understanding reality (Atkinson et al., 2001). Slife and Wiggins (2009) give a compelling summary of a relational ontology:

> "An ontological relationality postulates that the most basic reality of the world is relationship. Things, events, and places are not *first* self-contained entities that *later* interact and relate to other things, events, and places. All things, events and places are *first* relationships – already and always related to one another. Hence, the best understanding of something is in relation to its context…. In this relational sense, nothing can be truly understood apart from the context in which it is embedded. People, especially, are best understood in relation to their contexts." (p. 18-19, emphasis original)

This obviously fits with the underlying assumptions of ethnography and provides a deeper sense

of the importance of relationships within a bereaved community. The description of

bereavement presented in Attig's (2004) phenomenological model, and discussed earlier, seems

to fit within this ontology as well. Attig (2001) describes the "webs of webs" that are broken in

bereavement (p. 36) which connects with Slife's (2004) description of each person as a "nexus of

relationships" (p. 159). This ontological assumption supports that a community is best studied in

its context with a focus on the interconnections of relationships that combine to form the whole.

Epistemological assumptions. The nature of knowledge, then, is that knowledge is

bound up in context and relationship. LeCompte and Schensul (1999b), for example, open the

first chapter of their book *Analyzing & Interpreting Ethnographic Data* with this assertion:

"Ethnography takes the position that human behaviour and the ways in which people construct

and make meaning of their worlds and their lives are highly variable and **locally specific**"

(1999a, p. 1, emphasis original). From a constructivist ethnographic point of view, knowledge

comes from shared understandings, negotiation, and the historical and social context. As the

researcher participates in this context, the researcher also becomes a part of this negotiation

(Hammersley & Atkinson, 1983). The values and bias of the researcher are acknowledged and

the subsequent cultural description is recognized as contextually bound (Atkinson et al., 2001;

Gobo, 2008; Hammersley & Atkinson, 1983; LeCompte & Schensul, 1999a). In summary,

knowledge is contextually situated and relationally negotiated. This understanding is evident in

the practical decisions that took place while planning and conducting research for this project.

Boundaries of knowledge claims using ethnography. A relational ontology and

epistemology underlying ethnography specifies that the knowledge claims of this study are

contextually situated (LeCompte & Schensul, 1999a). The benefit of ethnography is that the

specific view of the participants can be described with depth, and located within the day to day

understandings of the participants' lives (Hammersley & Atkins, 1983). This means that a

researcher who uses ethnography gains a thorough or "thick" description of the experiences and

views of the participant community (LeCompte & Shensul, 1999a). Hammersley and Atkins

(1983) write: "The search for universal laws is rejected in favour of detailed descriptions of the

concrete experience of life within a particular culture and of the social rules or patterns that

constitute it" (p. 8). This quote highlights the advantage of ethnography, as well as the limit.

What is gained through ethnography is a deep description of the experience and understanding of

participants – including at a cultural or community level – that is contextually bound.

As participant-observation is a key component of ethnography, the researcher's context

impacts the knowledge produced (Hammersley & Atkinson, 1983; LeCompte & Schensul,

1999a). All of the relationships that Slife (2004) describes as the basis of reality, which impact

the researcher, are brought to the research site and are a part of the negotiation of knowledge

with the research participants. As a participant in the community, the researcher is a coauthor in

creating the knowledge that was sought in this study (LeCompte & Shensul, 1999a). Several

methods used in this study for ensuring the integrity of the research and the knowledge

negotiated with regards to participant-observation, will be discussed later in this chapter.

The boundaries of knowledge claims are tied to the contextually situated research

paradigm (Hammersley & Atkinson, 1983). In this study, this includes the limit that the

resulting knowledge is bound to a lavish description of a specific group of people, in

geographical context and at a certain time in history. Some readers may find similarities with the

experiences described below, so discernment should be used when applying implications from

this study to different community contexts. The limits of these boundaries extend to include the

impact of the researcher's context on the knowledge negotiated. This means that research

conducted by a different researcher, or the same researcher at a different time, will likely yield results that are, at minimum, slightly different.

       Appropriateness of research method for research question. The following discussion outlines the appropriateness of using ethnography to study relational bereavement in community. Answering the research question, a "how does" question, implies the production of description as the end result. As has been noted, the task of ethnography is to *describe* a culture (Gobo, 2008), making this an ideal fit. Many authors note that ethnography has been developed for the specific purpose of studying groups of people (Deegan, 2001; Gobo, 2008; Wolcot, 1999). Hammersley and Atkinson (1983) argue that to study groups of people ethnography is the "…pre-eminent, if not exclusive social research method" for those who view knowledge as context specific (p. 9). This also points to the suitability of ethnography for this study. The relational inquiry residing in the research question is also satisfied by the use of ethnography, specifically through a relational ontology. The emphasis on the relationships between people, and between people and context (including the culture and history of the group), corresponds to the gap in literature on relational bereavement in community. Finally, given the profound experience of bereavement (Attig, 2004), it is this author's conviction that a research method sensitive to human experience is required. Simons et al., (2012) write: "The ethnographer is trying to see and understand the world from the insider's view…" (p. 157), which allows the researcher to be delicately involved in this experience. Ethnography, then, was an appropriate method for the study of this research question, given the descriptive nature and sensitivity in relationship that is possible through this method.

Community of Focus

The community of focus for this project were selected from a religious congregation in Western Canada (*N=between 500 and 1000)*[2], recruited from the denomination titled the Christian Reformed Church in North America (CRCNA). This denomination was chosen because this writer, as member and former clergy, is an insider and had knowledge of, as well as access to, the community. Leaders of seven western CRCNA churches were contacted via email (Appendix A) with information about the study. The email was sent to the pastors and administrative assistants of the selected churches, and addressed to the council of the church who is the decision-making body for the community. A request for an opportunity to speak to the church council, and subsequent to approval, the congregation, was made within the email. The email also included the researcher's contact information, the benefits of this research to the community, and the safeguards that were developed to protect the health and anonymity of the research participants, within reasonable boundaries. Four churches responded to the emails, three leadership presentations were arranged, and two presentations where given before a death occurred in a community that agreed to participate. Since only one community was required for this study, the other communities were notified that the research would not be taking place in their community and were thanked for their willingness to consider the research request.

Upon a council's acceptance of the presentation, a notice (Appendix B) was written in the bulletin, informing congregational members about the ways to opt out of the study. Withdrawal took place via communication with a council member, pastor of the church, the principle investigator or via a written request placed in a secure box in the church foyer. The bulletin announcement was present throughout the research period except for one Sunday when the

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[2] This range was chosen to represent the size of the church while maintaining the anonymity of the participant community.

bulletin was too full and the executive decision was made to remove the announcement for that Sunday by the administrative assistant of the church. No participants formally requested withdrawal from the study. It is assumed that participants who did not want to participate avoided researchers and research related events. In addition, some participants communicated their desire not to participate in extra data collection opportunities, but did not request removal from observation.

Inclusion criteria for the observation portion of research were set as a member or affiliate member of the participating church. Members designated as "baptised members" did not have voting rights whereas "professing members" over 18 years of age have full membership rights including voting. Most children are baptised members. Affiliate members are those who regularly attend and are involved in the church, but have not become formal members. As the initial observation period took place in a public setting, baptised members and visitors to the community during the research period may also have been observed. These people were considered part of the community within the temporal context.

During triangulation of observations through group interviews, community members were invited to contact the researcher about their experiences. A participant was excluded if they (a) currently self-report suicidality or self-harming, indicating psychological instability and/or (b) report the need for ongoing psychiatric or psychological support due to a non-stable psychiatric condition (i.e. depression, anxiety, PTSD). This exclusion criterion safe-guarded those who may have trouble regulating distressing emotions or memories that could lead to psychiatric crisis. This study included interviews in which participants were asked to remember significant interactional events during grieving, and their experiences and the meanings they ascribe to these events and experiences. This had the potential to arouse distressing emotions. Participants, then, must have been able to self-regulate during and after the interviews. Self-

regulation was evaluated conversationally by the researcher upon contact from the participant.

No research participants that volunteered for involvement in extra data collection methods were

ineligible for participation. Observations of the whole community took place, but participants

self-selected or were referred for participation in additional data collection techniques (*N=56*).

All participants who volunteered for additional data collection involvement were

Caucasian, and of western European descent. There were equal numbers of male and female

participants. All but three participants had experienced bereavement themselves or were a close

social support for the bereaved. The three participants who did not identify as having any

connection with bereavement were part of a group interview at a community event in which they

were taking part. Participants ranged in age from mid-20s to mid-80s. Exact ages and

demographics are not available as these were not necessarily deemed appropriate information

gathered in informal interviews. Informal interviews accounted for 24 participants, whereas 32

community members participated in formal data collection opportunities.

Data Collection

The data gathering procedures for ethnography can be malleable to many situations

(LeCompte & Schensul, 1999a; Hammersley & Atkinson, 1983; Knoblauch, 2005). Primary

data collection took place via participant observation by the research team at the funeral and at

eight weeks of community events. Secondary data collection and triangulation methods are

common when conducting ethnography (Hammersley, & Atkinson, 1983; Knoblauch, 2005) and

included an audio-visual recording of the three funerals, individual and group interviews, self-

report journals, and an analysis of community bulletins. This writer assumed the role of the

principle investigator, and coordinated and trained the research team.

In addition to the principle researcher, the research team included two research assistants.

Both research assistants had Master of Arts degrees in counselling psychology. This training in

listening attentively, comfort with emotional expression, and attention to interactional patterns was imperative to this research project. These research assistants were in their late 20's and early 30's. One research assistant was female and the other male. Both research assistants had extensive experience with Christian church communities in different denominations. This familiarity with Christianity helped the research assistants understand members of the community, and the denominational diversity allowed for unique perspectives in observation of the community. One research assistant experienced the death of a loved one during the research process which brought a depth of personal understanding and connection with community members' grief. As the topic and method were relationally situated it was fitting that the research was conducted by a team of researchers.

This ethnographic project used a *compressed ethnography* (LeCompte & Schensul, 1999a) also called *focussed ethnography*, *microethnography* or *applied ethnography* (Simonds et al., 2012). This methodological approach is used with "specific subsets or segments of a group in limited contexts, usually for limited amounts of time, and with a specific predetermined topic in mind" (Simonds et al., 2012, p. 157). The conditions necessary for using a focussed ethnography as described by LeCompte and Schensul (1999a) were met. These included: (a) the researcher is familiar with the cultural context, (b) the focus is narrowed to one aspect of the culture, and (c) the researcher works with cultural experts (p. 90-91). They advised that the data collection methods should be conducive to the shortened time allocated for the study. Simonds et al. (2012) noted that the methods should be able to collect a large amount of very detailed data in a short amount of time. Data collection procedures will be discussed in depth later in this chapter.

Participant observation. The main method of inquiry used in any ethnography is participant observation (Atkinson et. al, 2001). This method requires the researcher to become a

participant in the community (Hammersley & Atkinson, 1983). In doing so, the researcher can begin to understand the 'lens' through which the community views the world (LeCompte & Schensul, 1999a). Meaning can also be negotiated with the community, and access to community experiences is gained (LeCompte & Schensul, 1999a). The researcher is required to take the somewhat awkward position of straddling the line between participation in the community and academic observation (Wolcott, 1999). The researcher's observations and experiences (thoughts, feelings, body sensations) become the primary written data for the study (LeCompte & Schensul, 1999a).

The researcher's attention is directed precisely during participant observation in a focussed ethnography. Knoblauch (2005) writes that "focused ethnography…typically analyses structures and patterns of interaction…" (p.11). This fitting concentration connects with a relational ontology and the relational nature of grieving. The participant observer records notes on subjective feelings in addition to interactional observations. Appendix C includes an organization of the target observations used in this study which were adapted from Hammersley and Atkinson (1983, p. 156), and LeCompte and Schensul (1999a, p. 128). The main areas that researchers in this study focussed their attention was towards the (a) the time, actors and acts of an event, (b) the activities, events and sequences at this event, (c) The setting, participation structures and physical objects present, (d) the behaviours of people and groups and potentially identifiable goals of these people, (e) the content of conversations and (f) interactions between people. In addition, researchers took note of their own experiences at an event including (a) information collected by the five senses, (b) emotional responses and reactions, and (c) cognitions that arose while observing these events. Participant observation requires keen awareness of the researcher's experience as well as acknowledgement and attendance to both roles of the participant observer. Reflexivity and thorough note-taking were crucial at this stage.

It has been recommended that the researcher journals all decision-making processes and thoughts

(Charmaz, 2014; LeCompte & Schensul, 1999b).

Participant-observation was used at 11 community events (Table 3.1). The first event

was the church service where the congregation was informed of the project and invited to learn

more about it after the service. The second event was the first funeral that took place in this

community. The next events included seven more Sunday church services as well as two more

funerals. Adverse effects on the community due to the presence of the research team at

community events were not expected, nor reported, likely due to the fact that the funeral and

church services are public events where relatively unknown visitors are common. The research

team was briefed on CRCNA culture by the primary researcher and in connection with a

community expert.

Table 3.1

Community Events Attended by Researchers

Event Number	Service Type	Observation week #
	Worship	Presentation to Community
1	Funeral #1	1
2	Worship	1
3	Worship	2
4	Funeral #2	2
5	Worship	3
6	Funeral #3	3
7	Worship	4
8	Worship	5
9	Worship	6
10	Worship	7
11	Worship	8

Ethnographic interviews. Interviews in ethnography can take several forms (LeCompte

& Schensul, 1999a). For this current study, representative experts were initially interviewed for

cultural knowledge, community histories, and description of traditions in the community as

suggested by LeCompte & Schensul (1999a). Experts in this study were church leaders, past or

present, who had either specific training in community perspectives or who had lived extensively

in the community. The interview with the gatekeeper, who was a community expert, was

approximately 60 minutes in length, semi-structured, and used the interview guide found in

Appendix D. Table 3.2 shows the number of community members who participated in the

different data collection methods.

Table 3.2

Number of Participants by Data Collection Method

Data collection method	Number of participants	Number of Interviews
Formal Individual Interviews	6	5
Gatekeeper Interview	1	1
In-formal Individual Interviews	24	20
Group Interviews	12	2
Participant Journals	4	-
Performance Ethnography	9	1

Second, informal interviews (*n=24*) took place as community members approached the

research team during community events. Informants were questioned using "non-direct"

interviewing as described by Hammersley & Atkins (1983). This means that the topic of grief

was brought up conversationally and gently as opposed to pointedly asking the participant about

community grief interactions. The main focus of informal interviews was to gain insight into the

experiences of the participants, at that moment, with relation to interpersonal grieving and the

meaning they associate with their experiences. The questions, however, were not pre-written and

were both direct and indirectly connected with grief as recommended by Hammersley &

Atkinson (1983). Both small groups and individuals were interviewed as is appropriate

according to LeCompte & Schensul (1999a). In the CRCNA, conversations normally happen around coffee or snacks, before and after community events, and this was the case for interviews in the context of this research project as well.

Thirdly, semi-structured group interviews were conducted (*n=12*). One group of 4 participants and another group of 8 participants invited the principle researcher to their organized social event and created space for an interview on relational grieving. One of these groups was audio-recorded and transcribed. The location and atmosphere of the other group was not conducive to audio recording, so notes were taken instead. Networking recruitment (LeCompte & Schensul, 1999a), as well as general advertising recruitment were both employed. Networking was preferred and was found to be most useful in gaining participants. Group members were asked to reflect on and discuss their experiences, perspectives and the meaning they attribute to interactions with other community members surrounding their own grieving and with those who they knew to be grieving. The interview guide found in Appendix E was used to facilitate conversation.

Audio-visual recordings. To aid in the collection of intensive data, audio-visual recording was advised (Knoblauch, 2005; Simonds et al., 2012) and was implemented in this study. The funeral services and the performance ethnography were recorded audio visually and the church services were audio recorded only. Funeral and church service recording was unobtrusive as these services were recorded as a matter of common practice by church volunteers. These recordings were available to community members upon request. The research team stored this information in encrypted files to protect the community, though the public nature of these events did not require this. Portions of these recordings were transcribed and referred to during the process of analysis.

Participant journals. Several participants agreed to keep a journal of their experiences of interactions with other community members for one week (*n=5*). Of these, one person failed to return the journal, resulting in four journals being available for analysis. Participants were given a journal with the information in Appendix F. These journals were collected, analyzed and used to inform themes, triangulate observational data and inform the performance ethnography. These reflection journals were kept in a locked case.

Community documents. Community bulletins, such as newsletters, church membership emails, service bulletins and funeral service pamphlets, were collected and analyzed. This collection of documents helped to triangulate observations (LeCompte & Schensul, 1999a). Documents also gave insight into key community information holders and disseminators (Hammersley & Atkinson, 1983).

Performance ethnography. Near the end of the data collection phase, a performance ethnography was created and presented to the community (Smith & Gallo, 2007). In this case, performance ethnography was a written script prepared by the primary researcher that synthesizes the information gathered up to that time. The date was scheduled within one month of the end of data collection as an opportunity for the community to gather and interact with the analyzed data. It was presented in such a way as to invite the community to connect to the story of grief and find themselves in it (Smith & Gallo, 2007). This tailored story served as a member check to verify the information that the research team had collected, analyzed and categorized. Community members (*n=9*) were given the opportunity to give feedback as to the impact of the research so far. Unfortunately, the night of performance ethnography a blizzard prevented some interested community members from attending, and the timing of the presentation several weeks before Christmas may have had an impact on low attendance as well. This was the final method of gathering data in an interpersonal fashion (Smith & Gallo, 2007). This event was recorded via

audio/video as was noted earlier. Participants were able to express their experience in group

format. This information was kept in a locked briefcase and encrypted file.

Saturation. Saturation as described by Charmaz in her book on grounded theory (2014)

is clear and nuanced. As grounded theory and ethnography overlap in many ways (Aldiabat &

Le Navenec, 2011; Deegan, 2001), it is appropriate to use Charmaz's work here. Charmaz

(2014) writes: "Categories are 'saturated' when gathering fresh data no longer sparks new

theoretical insights, nor reveals new properties of these core theoretical categories" (p. 113). She

also noted that saturation depends on the research question, claims made by the researcher

(bigger claims need more support), and resource constraints. Charmaz points out that saturation

may be misleading as it depends on the integrity of the researcher in reporting the data. Due to

the newness of this area of study, it was not possible to commit to certain categories and define

saturation in numbers of participants. Saturation, then, was decided with consensus with the

research team, advisors, and supervisors and the process was journaled. The main criterion was

sufficient depth of description for the proposed categories, acknowledging that this is subjective

and negotiated within the research team and participant community. Category sufficiency

depended on resources such as time, community participation, number of categories developed

and connection of the performance ethnography with the community. Participants reported that

the performance ethnography matched with their experiences of grieving and supporting the

bereaved in the community. Both community gatekeepers and community members were

present at the performance ethnography, and both agreed on the accuracy of the description

given their perspectives. This adds some amount of confidence to the findings, despite the low

numbers compared to the community.

Analytical process

The analytical process was iterative, intersubjective, recursive and reflexive (Charmaz, 2014; LeCompte & Schensul, 1999b). Members of the research team were involved in analysis to complement the perspective of the principle researcher. Research assistants helped with initial coding, and were presented with the codes for verification and as a quality check. As there were several different methods for gathering data in this study, there were several different analytical processes. These processes began once the data was beginning to be collected, and informed further data collection (Charmaz, 2014; Hammersley & Atkinson, 1983; LeCompte & Schensul, 1999b). Described below is a more linear version of the analysis that took place so as to easier describe the analytical processes that were interwoven throughout the project data collection and analysis periods. Some of the themes were clearly definable early on and followed this linear process. Other themes were more difficult to disentangle from other themes, or emerged when gaps became evident, and new questions were asked. By the time the performance ethnography was presented, most of the data had been collected and broadly analyzed, however some data was collected during and after the performance ethnography.

Observations. Notes that were gathered from observations in the field were processed at three levels as outlined by LeCompte and Schensul (1999b). These authors describe the first step as writing down the notes when time allows in the field, using whatever methods the researcher finds useful for recalling information later (i.e., mnemonics). Occasionally notes were taken during observation, but most notes were recorded immediately following the time of observation. LeCompte and Schensul (1999b) explain that the next step is elaboration of these notes as soon as possible after leaving the field. The outcome should be what they call "thick" description of the observational notes (p. 17). In line with these author's suggestions, the notes recorded in this project included some transcriptions, some verbatim script of a participant's words or actions,

and also included organization via the researcher's historical context and educational

background. These notes were then coded according the process described below.

Transcription. Most of the transcription took place using a trained transcriptionist and

some of this work was done by the principle researcher. Transcription of the community expert

interview, individual interviews, group interview, and performance ethnography were completed.

Only portions of the services were transcribed as they pertained to mourning or grieving.

Coding. Coding proceeded from broad to narrow (Charmaz, 2014; Hammersley &

Atkinson, 1983; LeCompte & Schensul, 1999b) and included individual and community level

interactions and observations. Coding began with the collection of data as the researchers'

preconceived categories, experiences, and the research question guided the recording of initial

data (LeCompte & Schensul, 1999b). Next the data was read through and memos (Charmaz,

2014) were written on that which the researcher noticed (Hammersley & Atkinson, 1983).

Things that stood out, that fit into potential categories, that were repeated, or that did not seem to

fit at all, as well as colloquialisms were all noted (Hammersley & Atkinson, 1983). This initial

observation of collected data allowed for an overview of what has been collected (Hammersley

& Atkinson, 1983). From this broad overview of themes, the performance ethnography was

created, including preliminary theme containers and quoted examples of community voices.

Deeper analysis took place after confirmation from the community of the preliminary and

broad analysis. NVIVO 11 Windows for students was used as a tool to help organize the data

and to hold different transcriptions into themed containers. All of the transcriptions, journal

entries and appropriate community document selections were entered into the emerging themes

as were identified by this researcher, confirmed by the research assistants and eventually

affirmed by the community in the performance ethnography. Problems with themes, and data fit,

as well as notes about decisions and the creation of themes and containers were logged in

research notes. These notes themselves informed the themes and highlighted potential

community processes surrounding grief that were harder to observe from the content of the data.

Categories were built from broad to focused as Charmaz (2014) suggested. The data was

coded by summarizing each statement with a word or phrase or dropping the phrase into already

created containers. Charmaz wrote: "Coding means categorizing segments of data with a short

name that simultaneously summarizes and accounts for each piece of data. Your codes show

how you select, separate, and sort data and begin an analytic accounting of them" (p. 43). These

codes developed based on the researcher's context as articulated in the relational ontology as

described earlier, keeping in mind that the basis of all reality is relationship contextually situated

(Slife, 2004). This means that as the research team coded the data, acknowledgement of the

imposition of the researchers' context on the data was appropriately considered (Charmaz, 2014).

As the data was being simultaneously collected and coded, the emerging categories were

compared with the different forms of incoming data (Charmaz, 2014). This constant comparison

effectively identifies, what Hammersley and Atkinson (1983) describe as, differences. These

differences, or negative cases, highlight areas that need more research or where the categories

needed to be redefined. As the data continued to be collected and the categories continued to be

expanded with thick descriptions, these categories were grouped together and coded more

abstractly (Charmaz, 2014). These categories were, again, compared with the incoming data and

with different data types and sources which enhanced the descriptive ability of the research. The

general categories that emerged from the data were combined into more abstract categories

(Charmaz, 2014). The result of this analysis was the thick description presented in Chapter 5 of

this project, as well as the description of context described in Chapter 4.

Rigour and Quality

As many authors have noted, the quality of ethnographic research depends on the integrity of the researchers (Aldiabat & Le Navenec, 2011; Deegan, 2001; Hammersley & Atkinson, 1983). Addressing this, the current research project includes several built-in checks and balances according to Mertens' (2015) criteria for judging quality in qualitative research. Mertens argued for the following criteria: (a) credibility, (b) transferability, (c) dependability, (d) confirmability, (e) being transformative. Each will be discussed as they relate to this study.

Credibility. Several characteristics were encouraged for credibility to be established or claimed as dictated by Mertens (2015). First, prolonged and persistent engagement is suggested by Mertens. This means "staying long enough to get it right" depending on the complexity of the issue (p. 269). Due to the focussed nature of this study, a shorter amount of time was warranted (Simons et al., 2012) and the actual project time was extended due to the unanticipated additional deaths. Second, member checks and peer debriefing were encouraged by Mertens (2015). These would allow the participants to verify that the researcher is representing their experiences saliently. In this study, this was accomplished via the use of performance ethnography most noticeably, and through consultation with research assistants and supervisors. Third, negative case analysis was recommended to determine if the categories/theory needs to be revised due to opposing data. This was fulfilled using the constant comparative method in this research project. Fourth, the researcher journaled decision making and discussed this with a supervisor and research assistants. This helped the researcher keep an open mind, and be aware of bias. The memo writing process resolved this concern. Finally, triangulation was a necessity for credibility. As has been demonstrated in the research design and data analysis sections, data in this study was thoroughly checked against other data collected through differing methods.

Transferability. Mertens (2015) explains that a thick description is necessary for transferability of knowledge to other contexts. As has been discussed, in this research project it is assumed that knowledge is context specific and relationally bound. This might suggest that, paradigmatically, transferability is not necessary. However, thick descriptions are inherent in ethnographic research. The descriptions negotiated in this study may allow those in other contexts to judge how closely, and in what areas if any, the knowledge represented here matches their own context. The second criterion for transferability is using multiple cases according to Mertens (2015). This is beyond the scope of this study, as resources do not allow for the study of multiple religious communities. The impact of engaging many people from within the community should not be overlooked, however, as this added to the thickness of the description of the culture.

Dependability. As a relational ontology suggests that context includes time (Slife, 2004), the study should address this particular aspect of the environment. This allows for comparison between this study and research at another date and in another context. This research report includes a description of the particular contextual reference of time as it relates to the culture surrounding bereavement in this community. This description is found in Chapter 4.

Confirmability. A relational ontology acknowledges the intersubjective and negotiated nature of reality (Slife, 2004). Confirmability (striving for objectivity), does not fit within this paradigm. For the purposes of this study, and given the underling assumptions of this author represented within, the word objectivity will be replaced with integrity. As has been mentioned, researcher integrity is vital when using ethnography (i.e. Hammersley & Atkinson, 1983). Creating memos and reflexive journals, working as part of a research team, ensuring supervision, and accessing peer review all point towards accountability to integrity. Beyond this, the data will be made available for an audit until the completion of the study.

Transformative criteria. Several aspects of the impact of this study on the community must be addressed in evaluating the quality of the research project (Mertens, 2015). Some of these overlap with criteria already mentioned. In addition to having integrity with the previous points, a study must (a) inform the community in some way, creating change, and (b) represent all voices, including the marginalized (Mertens, 2015). The community was impacted through the process of this study on relational bereavement. One participant noted that he had never been given opportunity to discuss grief in a group before, for example. Through conversations and questions, the participants were encouraged to consider their assumptions, understandings, and experiences of grief. Bringing awareness through relationship changes the community. Participants were also given opportunity to share their grief story with another person, and often a number of other people. This can help the grieving process and can help to reconnect isolated peoples with support.

To represent all voices, the researchers engaged in reflexivity, intersubjective data collection and broad community invitation to participation. In this project, it is clear that some marginalized voices were represented in this study. Some of the bereaved were marginalized, for example. By being aware of marginalized voices and being intentional about the impact on the community, the transformative criteria was satisfied.

Ethics

"Ethnographers can harm the individuals or groups they study. Research participants may experience anxiety, stress, guilt and damage to self-esteem during data collection," wrote Murphy and Dingwal (2001, p. 340). These authors identify four areas of ethical concern. These areas are: (a) non-maleficence, (b) beneficence, (c) anonymity, and (d) justice (p. 340). Each of these will be addressed with regard to ethnography in the following paragraphs.

Non-maleficence and beneficence. Murphy and Dingwal (2001) suggested that these principles are often combined by attempting to assess whether the benefits outweigh the costs to participants. The difficulty, they assert, is that researchers cannot know the long-term impact they have on a person or community. They note that perception of participants about the researcher, research and the written report is uncontrollable and unpredictable, yet an attempt to account for these perceptions and reactions must be made. They write that ethnographers may have direct impact (i.e., participants may feel embarrassed if they have no opinion, or a different opinion than the researcher), or indirect impact (i.e. participants may feel dissatisfied with their current situation when encouraged to reflect on it in a certain way). Being aware of these personal impacts is essential. In the current study, these risks were addressed through the provision of counselling resources for those who experience distressing reactions to interviews, conversations, consciousness-raising, or shifts in community behaviour. Written grief resources, as well as a list of potential counsellors specializing in grief were provided.

Murphy and Dingwal (2001) suggest that compared to interpersonal distress, "[t]he greatest risk in ethnography…arises at the time of publication" (p. 350). They note that misuse of the findings by authority or media, and feelings of injury at what was said or what was left out, can cause the most damage. The authors also suggest that a way to mitigate against this is to provide the community with an opportunity to respond to the written research report. Built into this research project was the performance ethnography, which will give participants the chance to respond to the preliminary data. Though this was not the full written report, it did outline the categories and quotes that were presented in the study, giving participants a chance to voice their concerns.

Confidentiality/anonymity. Confidentiality, anonymity, privacy, and self-determination are major concerns for any research project, including those using ethnography (LeCompte &

Schensul, 1999). Several significant areas emerge in Murphy and Dingwal's (2001) account of

anonymity in ethnography. First, the participants should be introduced to the purpose of the

study so that they can decide whether they will participate or not. The challenge, the authors

state, is that unforeseen changes in research direction cannot be accounted for. The way that the

participants understand and interpret the purpose of the study cannot be guaranteed either. For

this reason, in the current study, continual openness with the community was maintained. The

researcher was available via email for any questions, comments or concerns that the participants

may have had. Also, the researchers made themselves available for meetings should there be a

request for this. Written accounts of the purpose of the study, benefits and risks were distributed

to the community along with a congregational presentation. In the case of potential adverse

effects of the research, written resources and a list of counsellors were prepared. No adverse

effects were reported. Through these intentional relational avenues, an attempt to allow

participants to feel comfortable with their decision to participate or to decline participation was

endeavored. There was a recognition, however, that it is not possible to mitigate all risks to

participants. Risks to participants that remained unaccounted for were minimal, if any.

Another major concern for anonymity regards the written report (Murphy & Dingwal,

2001). Murphy and Dingwal (2001) stress that the written report must conceal the identity of the

participants as they were informed, or to the extent they requested. Beyond identity, they argue

that even the researcher's representation of the participants, and the participant community may

be ethically challenged. In the case of this study, given the relational ontology and contextual

nature of knowledge, this is less of an ethical issue. From the beginning of the study until the

final product, the researcher's context and interaction was acknowledged. However, in order to

give the community a voice in the final product, the use of the performance ethnography allows

the community to engage the extent of their anonymity. Even nearing the end of data collection,

a participant may choose to be removed from the study. No participants requested removal from this research.

      Justice. The final ethical principle identified by Murphy and Dingwal (2001) harmonizes with some of Mertens' (2015) transformative principles. Equality of voices, fairness and integrity are all a part of justice in ethics (Murphy & Dingwal, 2001). As was discussed earlier, through interaction with several groups the researcher was held accountable to researcher integrity in this project. Marginalized voices given as much weight as, and presented alongside, mainstream voices in this project. Murphy and Dingwal note that an overrepresentation of either voice may be unwanted and unjust.

Conclusion

      The study of interpersonal bereavement in community from a psychological perspective was new to the field of bereavement research. To study this, then, required innovation in methodology which has been outline in this chapter. A relational ontology, matching this writer's paradigm orientation and the underlying assumptions implicit in ethnography, was also briefly discussed. The varied data collection methods and the iterative coding design allowed the information collected to be used to help care for the bereaved in a holistic way.

Chapter 4: The Context of Grief

The church community that was investigated in this project is part of the Christian

Reformed Church in North America (CRCNA) and has a unique and specific context. This

context shaped the community's interactions in grief, as well as the knowledge that has been co-

constructed in this research project. The purpose of this chapter, then, is to briefly outline the

contextual factors that have had a significant and noticeable impact on the description of how

this community grieves together represented in Chapter 5. The information presented below is

drawn from community members, CRCNA denominational documents, researcher observations,

and my understanding as an insider in this denomination.

To begin, an outline of important historical events impacting grieving assumptions and

actions will be discussed first. Second, implicit community values, and how these may impact

reciprocal grieving interactions, will be outlined. Next, the context of the death in the

community, including the relational context of the deceased, will be explored. Fourth, the

observed context of community interactions will be given description. This account will contain

the actors in the observed scenes, the physical layout of the space where observed community

interactions took place, and the sequence of events that were observed around community

interactions. Finally, my experience of growing up and living as a current member of the

CRCNA, serving as clergy in the CRCNA, and grieving personally as well as alongside this

community during this project, and processes relating with the community in the role as

researcher, will be explored.

Historical Context: The Great Grief

The Christian Reformed Church in North America (CRCNA) as a denomination

developed out of the reformation, through John Calvin, and then through the Reformed Church

in the Netherlands (Christian Reformed Church in North America [CRCNA], 2017). Through a

series of seceding actions from larger organizations due to theological differences, the CRCNA

was born (to read a more elaborate history of the CRCNA, readers are referred to CRCNA,

2017). The people who formed the CRCNA were originally of Dutch descent, and immigrated

to North America due to religious persecution in their home country (CRCNA, 2017). When in

North America they experienced hardship:

> "It wasn't easy. Inexperienced and crippled by disease, the settlers faltered under the
>
> grueling task of extracting a living from the untamed ground. Only the steady trickle of
>
> new immigrants kept their ranks replenished and even allowed for some modest growth
>
> in their numbers. Through these first terribly difficult and painful years, the settlers
>
> tenaciously clung to their most prized possessions: their faith and the freedom to live out
>
> that faith in their daily life." (CRCNA, 2017, "Coming to North America," para. 2)

So, the denomination began out of religious suffering and entered into physical suffering, which

brought emotional stresses. This had an impact on the community and community members

relationship with their emotions. Further, grief processes, sharing and expression were changed

by this intense suffering while attempting survival. In addition to the death and despair

experienced by this community in moving across the ocean, for example, the experience of world

wars was believed to have had an impact on suppressing active grieving practices. As I talked to

members of the community some were surprised that I would study grief in the CRCNA because

the community was seen as "stoic" and they were concerned that I would be hard pressed to get

people to talk about such an emotional topic. However, a church leader surmised:

> "…I don't see stoic anymore, so much. I used to see stoic with the generation that first
>
> immigrated and had gone through the war, and some of them for two wars. That's where
>
> you saw stoic. And that was, I guess, in a time of war – which I've never been part of, I
>
> can only learn from them – that that's the way you get through a war, there's no other

way. Because the losses and the grief are just too great, too immense, and you have to keep living. So, I saw stoic in that generation. I haven't seen it since, I really haven't… In fact, I've seen anything but. People … know that you're not supposed to say, "It's God will, dear." They know that. They know that God can work through it and God can work around it and God can do all sorts of good stuff in it, but I think that that traditional predestinarianism and almost a fatalism…I find that I've seen a whole lot more CRC people in the churches…who rail and carp against that [stoicism] than I've seen people actually try to maintain it." (Individual Interview)

Another participant noted that her family does not share information about health issues readily, and she has to investigate to find out how the health of family members are faring. She shared that her mother would say "quit your [y]unking," which meant "stop complaining." She noted that not talking about negative issues may have come from the environment in the early days of immigration where there were no resources to change the situation anyway, so there was no use in grumbling.

This community, then, which was born through persecution and according to deep convictions, has within its members an early historical storyline that emotional expression was a luxury that could not be afforded in hardship. Some members continued to experience the effects of reduced emotional expression due to these early extreme circumstances, while others encountered more space for emotional expression. In either case, there is an underlying understanding in the community that 'stoic' is part of the CRCNA historical identity that impacts the experience of grieving in this community. This influence included both what is experienced as oppression of personal grieving styles, as well as members' intentionality in trying *not* to oppress the bereaved and instead create space for grieving.

Contextual Values: Work, Think, Commit and Believe

Perhaps resulting from the history of immigration from Western Europe, and in addition to a post-world-wars and post-great-depression western context, there were several pervasive and implicit community values that impacted interactions between community members around the emotional expression of grief. The first value was that of high expectations for work ethic and productivity. Given what I was taught in this denomination, I believe this was based on the theological assertion that God works in all domains of life (called: God's Sovereignty), and that God can be served by working to a high standard of personal effort in everything that a person does. Work ethic impacted activities not limited to, but including occupation, volunteering, schooling, and recreation. In addition, members of the CRCNA community were encouraged to be productive and industrious so that they could serve those who were less able to access resources. This was expressed in the following statement:

> "Despite the variety of different positions and viewpoints held by members of the CRC, the denomination is still bound together by a deep commitment to respond to the good news that our world belongs to - and is being redeemed by - our faithful God. In the unity and empowerment of that conviction, CRC members join together in an amazing variety and scope of ministries." (CRCNA, 2017, "Called to Serve")

A second value within the community was reason. Logical, reasonable, controlled thinking and understanding is prized. One example of this value in action is that in decision-making the mind and logic were given much greater weight than feelings. If someone *felt* like making a certain decision, he or she may be critiqued for not using his or her brain. This is not to say that emotions are not given a voice, but that reason is trusted more than feelings.

The impact of these implicit values is that members were encouraged to *do* their best in all things. As Granek (2014) points out, where production is a main goal, the process of grief

directly interferes with this goal. Grieving reduces productivity and is emotion based, and

therefore it is difficult to integrate with the implicit values of the community.

The third value impacting grief and community relationships is a commitment to family

and community. For many people, family responsibilities are given priority to other

relationships. Those regarded as immediate family are often, but not solely, those who were

biologically, or legally related. In grief, the family were expected to be primarily responsible for

interacting with the needs of the bereaved. Second, commitments to the community are valued.

One example of this was that church attendance and participation were sometimes equated with

emotional functioning. Someone who attended and participated in church activities, such as

volunteering in a ministry of the church, would be assumed to be *doing well*. In this way those

who were grieving had to navigate social relational expectations of familial obligations and

attendance at community events.

The final significant value that impacted grieving in the community was religious faith.

This is further explored in the next chapter from a community grief perspective, however, there

were several community messages that were more contextual and are explored here. Consistent

with the discussion of religion and grieving in the literature review, the community's religious

values shaped thoughts about death and grief. The first implicit religious understanding that

impacted grief was what one participant called 'predestinarianism.' This is the belief that God is

controlling and planning all events, even those that humans experience as negative. Trust is

given that these negative events will be used by God for a greater and positive purpose. Under

this belief, community members are encouraged to submit to the designs of God rather than

question God or feel despair. This particular belief was reported as becoming more historical

than purported currently, but was still an implicit identity of the community.

Grieving with hope was one of the main religious messages asserted in the community. This value drew on the belief that there was life in heaven, with God, after death. With assured reconnection with the deceased for all those who die and believe in Jesus Christ, community members who had experienced the death of a significant person felt hope. This hope was not meant to dissuade members from feeling grief, but it was designed to frame the grief experienced in a way that prevented descent into despair. In this way, the message of hope in grief was expressed to bring comfort to members who were in the chaos of their grief.

Similarly, God's presence was emphasised as comfort during grief. Both community leaders and members of the community expressed that a relationship with God brought comfort in sorrow. The way that God was experienced, or what relationship with God looked like, was not explored. Moreover, it was stated as fact that God's presence was comforting, and some members advised that, without God, they would not have experienced hope or moved through grief.

Service to others was an additional religious message communicated to and by community members. The belief is that out of thankfulness to God for salvation through Jesus Christ, and in following the model that Jesus Christ lived, community members are obligated to respond by serving others. Service to others is mainly focussed on caring for the most vulnerable, those without access to resources, and for people who are suffering. The bereaved, then, were automatically assumed to be in need of care and service. The way that this service was carried out in grief in the community is discussed further in Chapter 5, however it is important to understand that care was sometimes based, to a large extent, on religious values.

Community values of productivity, reason, commitment to groups of people, and faith, impacted the grieving of community members. Sometimes these implicit values matched with the experience of those who were grieving, which brought hope and comfort. At other times, the

values were experienced as being constraining or oppressive and resulted in anger and

disconnection from the relationships in the community. These underlying values, however,

shaped interactions between community members and were part of the identity of the

community.

Context of Death

As Archer (2008) noted, the context of the death impacts the grieving trajectory of the

bereaved. Therefore, the context of each of the deceased, including age, illness, suddenness of

death, and familial and social relational roles will be outlined. During the observation period

three deaths occurred in the participant community. Though this was not the first time that

multiple deaths happened in a relatively short period of time, community members expressed

that these particular deaths were significant for them. Various community members joked with

researchers that perhaps it was the researchers' presence that had something to do with several

deaths in quick succession. This indicated the substantial impact of these deaths on these

community members. The first contextual factor of death, then, was that there were three deaths

in a short amount of time.

The second feature of the deaths occurring in this community at the time of observation

was the state of the three deceased members. All three members of the community were in the

later years of their lives, and none of the deaths were considered traumatic by community

members. All three deaths were experienced by the family and community as freeing the

deceased from lives involving significant discomfort. In addition, all three deceased members

professed their faith in line with community beliefs. This brought comfort to the bereaved as

those grieving trusted that the deceased went to heaven. With the deceased in heaven, the belief

is that they are no longer suffering and that a reunion will occur when the bereaved die. This is

what brings some comfort to the bereaved.

After a brief battle with cancer Jim (pseudonym) died in his early 80's. He was involved in the trades during his professional career, and was a quiet, yet consistent, member of the church community. Of the three deceased members' contexts, Jim's death was the most unexpected and distressing in the community. He was an involved member of his family circle, died within months of his diagnosis, and his wife Joan (pseudonym) remained alive to grieve his death. Jim and Joan lived some distance from the church and the church retirement community, who were most likely to provide community support for Joan. Community resources, then, were less readily available to Joan. This made her more isolated, and this was noted by the community with concern. In addition to this, up until Jim's illness, he was quietly involved in the church community, and was a visible presence at worship services. His physical absence in the church community, therefore, was more obvious than others.

Anne died at almost 100 years of age. She was the oldest member of the congregation at the time, and had extensive connections, through her large family, to the community. She expressed a desire to 'go home' as she was no longer able to live as independently as she preferred. Though Anne's family and the church community grieved, there was a sense that Anne lived a long and fulfilled life. For this reason, her death was more easily accepted. Anne was predeceased by her husband and by a son, and her death released her adult children from continuing to care for her in a situation she did not favour.

Hank died in his late 80's, and suffered from dementia at the end of his life. His professional life included working in the trades. He was admired in the community for the way he encouraged his children to pursue the arts, and the way his children impacted the community using their abilities in the arts. Hank was predeceased by his wife and by a daughter. Hank's health was declining at the end of his life and, though his death was relatively swift, it was not experienced as traumatic. Though there was sadness at the death of Hank, his death was also

viewed as a release from suffering in this life and a reuniting with his loved ones who had already died.

These three deaths did not happen in isolation from other losses in the community, however, and these other losses impacted how grieving together was expressed during the research period. In addition to the three deaths described above, community members were grieving other deaths. These previous experiences of grief became intertwined with the bereavement experience of community members during the research period. The description of grief in Chapter 5, then, is not only a description of grieving after these three deaths, but includes the deaths of many significant people in the lives of congregational members, and even includes losses that were not deaths. The general events, causing grief, that have influenced grief in the community are outlined below.

First, community members remembered and were grieving the deaths of other senior members, who were not considered 'old,' who were not expected to die when they did, and who died prior to the research period. In most cases, the deceased were the first parent or spouse to die in the networks of the bereaved, which had an especially difficult emotional impact on survivors. Also, a teenaged member of the community died within the past year before research began. This had a significant impact on the community because the death of this child was seen as unnatural and particularly awful. Third, a middle-aged man died of cancer shortly after he married a member of the community. This was seen as a tragic situation because his widow, a long-time member of the community, had been unmarried for most of her life and the community rejoiced deeply with her at her marriage. Though these deaths did not occur during the research period, grief for these people impacted the way that community members grieved the deaths of the three members during observation.

In addition to these deaths, other types of losses were experienced or were anticipated in the near future. These losses included the loss of abilities due to chronic health conditions, the loss of abilities due to traumatic brain injury, and anticipated death due to declining health. Also, the death of siblings, children, and parents were also present in this community, though the time of death may have been years prior to research, or the deaths were not reported as unnatural. These stories of grief were not always spoken overtly, but were often referred to in passing, or through questions directed toward researchers. These generalized grief events also had an influence on the description of grief presented in this project.

Finally, complicating factors in grief, such as estranged relationships with the deceased, impacted how grief was experienced in community. These more complicated losses made grief confusing for some members and were factors in the way that members could support the bereaved. Due to the settings in which these conversations took place an opportunity to unpack these losses further was not available. These losses are mentioned here so that the reader is aware of the presence of previous and continuing grief for members, even though these stories are not discussed in the next chapter. The reciprocal interactional grief description presented in Chapter 5 is not only a result of the three deaths that occurred during the research period, but includes these other losses and deaths.

The Play: Stage, Actors, and Acts

So far, the history of the community, values held by the community and the context of the deaths have been outlined. Yet to be discussed are the physical space in which grieving took place as a community, a generalized description of the actors in this physical space, and the sequence of events in which public interactions took place. The stage, actors, and acts will, therefore, be described here.

The community interacted with, and constructed, the physical space in which they moved and related with one another. The community itself was set in a large metropolitan area in western Canada. Approximately between 500 and 1000 people are members of this church community. The church building was located in a middle-class neighbourhood, and this is where the majority of the observations took place. Some community members lived near the church, but many commuted to the church building for community events from up to 30 minutes away. The church building was well maintained, clean, and looked to have had additions at different times. The front doors led into a foyer area which included an information desk, coat room, library, and access to the sanctuary, offices, and the hallway to classrooms and to the fellowship hall. The foyer was anchored on either end by two symbols. The first was a water fountain representing the "water of life," that is Jesus Christ, and the second was a rock representing God's steady presence and unchanging character. The patterned carpet and light brick walls gave a warm stone feeling to the foyer.

At the far end of the foyer were the doors to the sanctuary. Through these doors, a large auditorium opened up which sloped towards the front platform. The wooden pews all faced the platform and the pews were separated by walkways into six sections, three in front of the main walkway and three behind. Most noticeable in the sanctuary is the organ, which imposed its' presence from the ceiling of the vaulted sanctuary to the back of the platform floor. In front of this was the pulpit, beside which was a grand piano on one side and an arm chair on the other. There was a large Bible on a table connected to the pulpit and in the top right corner of the front of the sanctuary there was a cross. Projection screens were located in the front on either side of the organ.

Leaving the auditorium, congregants would face a hallway through the foyer. Classroom and bathroom doors led off of this hallway, and at the end were doors to the fellowship hall.

This was a gymnasium-like room with a kitchen attached. Tables and chairs were often set up in the fellowship hall after services. There were doors leading to the parking lot from this space as well as from the foyer.

The people of the community played their different public communal roles within this defined space. There were several people, and groups of people, who took up significantly public roles on the stage. The first of these people were the three pastors. The pastors had three roles in the community. First, they created and delivered sermons at worship services. Second, they connected with the members of the church by providing emotional and spiritual support. Third, they had administrative duties. Pastors, however, shared administrative duties with other staff and volunteers, such as music leaders, and community coordinators. The administrative director was influential behind the scenes taking up duties such as, but not limited to, coordinating church activities such as room bookings, event planning, and community communication through the bulletin and website. The custodians cleaned and maintained the church as well as set up rooms and spaces for bookings and events. Each of these people were on the payroll of the church.

In addition to the paid staff, large numbers of volunteers were integral to the functioning of the church community. This writer estimates that there may have been more than 100 volunteers working within the community throughout the weeks of observation. People volunteered to run the sound booth during services, others volunteered to manage the projection system or the audio and video recording equipment. Musicians were mainly volunteers; however, some were paid staff of the church or hired from another community to fill in for events such as funerals. Community members also volunteered for such roles as greeting those entering the sanctuary, managing the information booth, decorating church spaces, running the library, teaching children's classes, and making and serving refreshments after church events. In

addition to these roles volunteers also took turns leading portions of the worship service such as

Bible readings and prayers.

Of those who came to community events, some were volunteers as was just described,

and others were general community member attendees. At any Sunday service between 300 and

500 attendees were present. At funerals, around 100 to 200 people attended. The great majority

of these actors were of western European descent, and either grew up in this church, or in

another church of the same denomination. There was a broad range of ages represented in the

church, with no clear overrepresentation of any particular age demographic apparent during

Sunday observations. The majority of attendees at funerals were seniors. Rarely did children

attend a funeral unless they were somehow related to the deceased or the bereaved family.

Community members occupied different roles at community events based on the

relationship between those people and the event. As an example, both bereaved and community

members attended a funeral and these two groups had different relationships with the funeral

event. Community members acted differently than the bereaved in that they showed respect and

gave priority to those who were family of the deceased. At a Sunday worship service, however,

most people were equally involved and there was less hierarchical deferral in the sanctuary

between attendees. Special regard was given to those running, organizing, or leading the event.

Depending on the event the actors had different roles in the community. The main events

observed were church services and funerals.

So, there were three main groups of people acting at community events. The first group

are those who are planning the event. These include both staff and volunteers. In general, these

people have the most authority during a community event. The second group of people are those

for whom the event is held. At a funeral, the bereaved are the second group of people. These

people are given a special respect, and are treated with sensitivity. The third group of people are

the congregational members in attendance. The role of these people is to participate in the event

as has been organized. At funerals, the third group is present to show support for the bereaved,

or to honour their own relationship with the deceased.

Sequences of activity took place in the setting described above and by the groups of

people just discussed. These sequences of activity can be called 'acts,' some of which were

regular activities and some of which were unique, given the actors involved. Here a broad

overview of sequences is described, whereas in Chapter 5, funeral service sequences relating to

important themes is detailed in greater depth. Before an event, and often behind the scenes,

people prepared for the event. This included such activities as making coffee, practicing music,

creating bulletins, and writing sermons. Two main events were observed, these were the Sunday

worship service and the three funerals. The general sequence of events was similar for both

events. General processes are described below, while differences between the Sunday services

and funerals are highlighted.

One hour to 30 minutes before any service began people began arriving. A bulk of

people arrived within 15 minutes of the service, and a few continued to arrive within 10 minutes

of the service starting. The period of time approximately 15 minutes prior to the service

beginning was called the 'pre-service,' which included informal musical performances.

Community members entered the sanctuary during this time, and often conversed with each other

quietly or sat in silence.

A leader began the service by welcoming the people in attendance and by giving

necessary directions and announcements. The service followed a relatively stable structure from

Sunday to Sunday and during the three funeral services attended by researchers. For Sundays,

this included (a) a time of reconciliation with God, (b) an explanation of a biblical passage

through a sermon, (c) a time for expressing thankfulness to God for the message, and (d) a time

for preparing to apply the learning in service of others. During a funeral, this structure was not

followed, but there was singing, Bible reading, a sermon, a representation of the deceased's life,

and often a time of unique sharing based on the interests and abilities of either the family or the

deceased. At the end of services, music was often played as the congregational members filed

out of the sanctuary. The pastor left first during a Sunday worship service and stood at the exit

doors shaking hands with community members as they exited. At a funeral, the family left the

sanctuary first, while the rest of the congregation stood in silence as they left.

After any service, refreshments were served for those in attendance. Many community

members stayed for these refreshments, but a few left immediately after the service. It was noted

by one participant that "a funeral without food is incomplete," which points to the importance

and prevalence of these post service refreshments for community relationships. Post-service

activities on Sundays also included such gatherings as further classes for interested parties, and

information or recruitment for church community events. For this research, for example, the

principle investigator was given space and time after a Sunday service to give more information

about this study and participation in it, to those who were interested. After a funeral service,

some community members stayed for up to an hour, while other people chose to leave as soon as

within minutes of expressing condolences to the bereaved family.

Prior to a funeral service, an additional act called the interment occurred. Before the

interment, the family gathered at the church for briefly shared memories of some of the positive

aspects of the deceased. The casket with the deceased's body was brought into the church for

this time of sharing. This more informal family time happened before entering into a time of

more intense and structured mourning with the community. Following the time of sharing, the

interment took place at the cemetery before the funeral service at the church. There was a

funeral procession of vehicles from the church building to the cemetery. The interment act

generally only included funeral home personnel, church staff (i.e., a pastor or pastors) and immediate family. Sometimes a very close family friend was invited to this more private event as well. I was invited to one interment early in the research process, which was I felt was a rare privilege. After the interment, and before the funeral service, the family gathered together informally.

The stage, actors, and acts have been briefly outlined. Main contextual factors of this community have been highlighted as they relate to community grief. It is within this context that community members experienced the loss of a member and shared their experiences of grieving together.

Sharing My Grief: Context of Researching

An overview of the community context has been described, and now my experience as a researcher in this community will be given voice. In this way, two of the major knowledge generators, the community and the researcher, will be contextually situated. Also, this discussion may give some insight into, or aid in creating a thick description of, what some other community members may be experiencing as they grieved in their community. The focus will be on the myself as the principle researcher, and will not include a description of the research assistants, though it is worth noting that their own contexts also impacted their collection and interaction with the data. So, first my own experience of grief throughout this project, and in relation to members of the community, will be discussed. Second, my experience of collecting data in this community will be explored.

I have been drawn to community grief research due to my own experiences of grief and also because of my experiences of living in community. I grew up in a Christian Reformed Church of North America (CRCNA) community, and lived the joys and struggles of a small community with strong boundaries and convictions. I felt the potential for the community to

support its members, and the potential for the suppression of emotional expression. Through my early adulthood struggle with independence and community, I experienced my community as relationally oppressive and ethnocentric. I also learned a self-sacrificial model of caring for those who are vulnerable and suffering, through activities including donating money, expertise and time, as well as food. My early experience of the Christian Reformed community in my home-town, then, gave me a taste of the positive and negative potential of living in a religious community.

In response to my conviction that community has the opportunity to bring healing, I became a Youth Pastor in the CRCNA after gaining a bachelor's degree from a Christian university with reformed ties, majoring in psychology and minoring in theology. As clergy, I saw how the leaders of the church in which I served cared deeply for those in the community. It was evident to me that they sought to provide a space that was safe for the different comfort levels, preferences, and experiences of those in their community. The leaders of the church taught me that they were doing the best that they knew how, with the resources they had, in accordance with their own convictions and beliefs, to create a safe place for the community to encounter God. In some ways, my service in this community was a redemptive experience and an introduction into beginning to understand what may have been happening for those in my childhood church community. I am grateful for the experience of learning a perspective of grace from this experience. This perspective is reflected in Chapter 5 of this project as I sought to reframe some of the critical language present in bereavement research with regard to community "policing" and "ineptitude," and include the perspective of community members as they attempt, in the best way they knew how, to support and care for the bereaved.

Second, throughout this project, I have also been grieving the deaths of loved ones in my own life. While writing the thesis proposal for this research project, my father-in-law died

suddenly at the age of 67, due to complications with what was thought to be effectively treated

cancer. Less than a year later, my mother died in palliative care at the age of 61, after slowly

deteriorating physically and mentally through months of fighting intestinal cancer. Within a few

months of my mother's death, I grieved the death of a psychotherapy client through suicide.

These three tragic deaths, have impacted this thesis in many ways. I found that I became

familiar with my own grief, as every time I turned to this project I was reminded of my own pain

and of those who died in my own network. I cried on most days of writing. I needed to take

breaks from this work. I could not keep up with common time lines for thesis preparation and

completion. I faced people from my own social network who were concerned that my extended

timeline would negatively impact my occupational life. I was invited to consider quitting the

project, or at the very least to regret taking on the intimate subject of grief as a thesis. I felt

pressure to work faster, to ignore my grief and complete the project. I felt angry at this

misunderstanding. At times I felt isolated, and alone in my grief.

Through all of these feelings and experiences, I had significant voices of connection and

encouragement in addition to some voices of disconnection. I had joined a research group on

relational bereavement in the beginning stages of research preparation. The other researchers in

this group had experienced death in their own networks, and not only shared their grief, but

allowed me to share mine. Through the experience of grieving these deep and painful deaths

with people who created and held space for these emotions, I began to change emotionally. This

group of people, willing to face the emotions of grief with openness, acceptance and

understanding, allowed me to experience acceptance of my own emotional process through grief.

They created a safe place in which I could face my own grief, and share this facing of my grief

with them. Experiences in this group continue to impact my grieving journey positively.

With a new experience of group safety and connection, I found similar stances of openness with community members in the participant community. My grieving was impacted as I connected with experiences of the bereaved. My grieving was impacted as I encountered community members who showed their care for the bereaved through a deep desire to alleviate their suffering. There were times throughout the research process that I felt alongside community members. We felt anger at miscommunication, love for those who were suffering, a longing to relieve the pain of the bereaved, and a wholesome sadness for the deaths that had impacted this community.

As may be evident, one of the prominent feelings I had while working on this project was anger. At times, this anger was strongly directed towards my home community for relational complications which I believed had an impact on my mother's declining health and my own personal emotional state. This anger made its way into the research proposal and my initial research journal. I noticed that, as I connected with church leaders while recruiting a participant community and heard the concern leaders had for their community, I began to soften and see my anger as related to my own grieving. With encouragement from the research lab, I did not suppress my anger but journaled it. This experience of decided emotional engagement was not something I was accustomed to. The comparison between my experience of openness around grief in the research group, and my expectations of the community in which I was entering, was startling. With some participants, I felt connection with them through the anger present in their grief, which was directed towards miscommunication[3] in the community. As I processed through my own anger, I began to notice that I could look more openly at the attempts of community members to connect the best way they could, with the bereaved. I also began to

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[3] See Chapter 5 for an expanded definition of *miscommunication* as it is used to delineate a certain type of interactional pattern found in this community.

notice that community members had their own individual experiences, personalities, and

preferences with managing intense emotion, and this gave me compassion and connection,

instead of only holding judgement. This change came as my own grieving journey shifted

because of growth in and with a new community, as well as shared experiences with participant

community members.

As was noted earlier, during data collection, analysis and writing, I experienced

reconnection with my own feelings of grief. Each of the tasks of research was emotionally

exhausting. This may have been because as I heard the experiences of the bereaved, I felt a

renewed link with my own story. I also felt connected with community members as I watched,

and heard them talk about, their struggle to bring relief to the bereaved in a significant way. In

these ways, I felt my own pain in their experiences and in their acknowledgement of suffering in

the community. I did not anticipate that I would feel my own grief so deeply as I worked with

this community, even though I intentionally presented my recent experiences of grief as giving

me unique access to the experiences of bereaved participants.

The *process* of collecting data in this community had unexpected elements as well. First,

the participant community self-selected people who had lost a loved one. With only a few

exceptions, the participants that connected with this research had experienced the death of

someone they loved. Also, when I introduced myself in conversations as "the one doing

research," people quickly opened up with their own grieving stories, or appeared to become

much more opened with me. To myself, and the research assistants, this change in attitude after I

shared my role in the community was striking. A third component that was observable was that,

aside from a few sentences in each service, and a note in the bulletin, the deaths of members and

the grief of the community did not take up a significant part of the Sunday services. This is

noticeable because this is the primary way that the community gathers together. A large part of

the observational period took place at major community events which primarily included the

Sunday morning worship services. The amount of grief-focussed data collected at these events

was minimal, even though there were, which was unusual for the community, three deaths in a

relatively short span of time. It was the absence of public communal expressions of grief beyond

the funeral that was surprising, in addition to the freedom with which people who experienced

grief shared their stories in more private conversations.

Conclusion

The context of the participant community, as well as the context of myself as the

principle researcher, were discussed in this chapter. This gives the necessary background

information to situate the description present in the following chapter appropriately. It is

important to note that the discussion of context has not been exhaustive in including all possible

unique characteristics of this community or of the researcher. Main points, however, were

outlined. First, a brief history of the CRCNA denomination, in which this community is

embedded, was presented. Second, values present in this community were explored. Third,

characteristics of the deceased were described and possible contextual factors impacting

participants were given. Next discussed were the stage, actors, and acts. Finally, the grief

context of this researcher and prominent relational processes while collecting data were noted. It

is with this background information that the ways the community grieved together can be

described.

Chapter 5: Findings

"Maybe the best way to describe it is: it's hard to know my role in a congregation like

ours, especially with some people who I'm not that familiar with and I don't know what

their circumstances are. So, because I'm not necessarily a friend with them, what's my

role, what would be my effective role as a congregation member? And I don't know the

answer to that. I don't know how to grieve with them." (Individual Interview)

In this chapter, the findings constructed in relationship between participants and

researchers are presented using the voices of participants. The quotations presented in this

chapter are drawn from informal as well as formal interviews, public communal expressions of

grief, from participant journals, the observations of the researchers, and the responses and

reactions of the researchers[4]. These quotes are, of course, situated within the context outlined in

Chapter 4. Each section portrays a different and yet interconnected aspect of community

relational grieving. The observant reader will notice that many of the following passages

emphasise multiple aspects of grief in community at one time and could have been used as

examples for multiple themes. In an attempt to honour the experience of the many different, and

sometimes conflicting or overlapping, perspectives represented in the community, this writer has

taken care to organize the themes intentionally as follows.

In the first section, called *Drawn to Care*, the implicit value of individual community

members to support, and the expectation of the bereaved to be supported, is illustrated. *What are

Our Roles?* is the title of the second section in which a description of the community's

assessment of relationships, and the expectations associated with these relationships, are

explored. The third section, *Grieving Together*, discusses the reciprocal interactions between

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[4] The inclusion of the researchers' responses matches with the relational ontology, constructivist epistemology, and
ethnographic methodology described in Chapter 3. When appropriate these descriptions include the use of the first-
person perspective.

community members. This includes both those who were bereaved and those who did not

identify as being bereaved. It also encompasses the actions of the community, and the impact of

death in the community. In the final section, *Uniqueness in Community*, personal characteristics,

personal grief experiences, and personal values that impacted the experience of reciprocal

interactions are outlined as they were identified by the community.

In order to signify the grief context (i.e. relationship to the deceased) community

members are identified as 'bereaved' and as 'community member' or 'support.' Though the

community as a whole can be considered 'bereaved' because each member is exclaimed

'significant' as per the definition of bereaved given by Stroebe et al. (2008, p. 4), 'bereaved' in

this chapter will refer to the person in an interaction that had a closer relationship with the

deceased. The 'bereaved' then, were those that were assumed to be more deeply impacted by a

death in any interaction. A 'support' person was someone that had close ties and identified as

being in an intentionally supportive role for the bereaved. Supports were often family members.

Separating different relational roles in this way, is not to say that a 'community member'

or 'support' is not also grieving, but that there is an implicit agreement in the interaction that the

'bereaved' require more intentional or sensitive care in that particular context. The danger in

identifying parties dichotomously is that this may create the image of separation or opposition,

where joint and reciprocal interaction is in fact taking place. Even though this risk exists, it is

necessary to express the context and the role of each participant and therefore the identifications

of 'bereaved' will be used to describe those assumed to have been impacted most deeply by a

death.

Drawn to Care

To begin understanding and describing the reciprocal grief interactions of the community,

a foundational stimulus of the interactions must first be grasped. Even though participants were

not always able to identify the motivation explicitly, a genuine desire to respect and alleviate the

suffering of – and communicate this care to – the bereaved was unmistakably observable.

Outlined in this section are the following nuances in the desire to care: (a) self-sacrificing

community models, (b) intentionality in providing care, (c) emotional reactions demonstrating

care, and (d) the expectations of the bereaved.

Self-sacrificing community models. Given that included in the context of the

community are self-sacrificing role models, as well as clear and pervasive instructions from

leadership to provide care for those who are suffering, it is not surprising that many participants

displayed a desire to care for those who were perceived as being impacted by a death in the

community. Some participants impressed this verbally and explicitly. A male community

member said:

> "I think when I speak to someone in situations like that [after a death], it's my hope that it
>
> gives that person a sense that, "I'm not forgotten," as it was. No more than that. I don't
>
> think it gives me any particular feeling of satisfaction in any way, but I suppose I can feel
>
> good about it if it was well received, but that's not the reason I do it. Like, you're
>
> showing you care." (Individual Interview)

Intentionality in providing care. Others' desire to care was evident through the

purposefulness in which they attempt to provide support. One participant shared her intentional

experience which was received in a group with murmurs of agreement and laughter of the

incredulity of the experience:

> "I even find it hard sometimes, what do you write on a card, you know, that's
>
> meaningful? And sometimes the card says it all. Like, you pick a card, stand there for
>
> half an hour picking the right card and you need to add something else. I looked through
>
> 37 cards before I found this one." (Group Interview)

Another community member shared his intentionality this way:

> "Well, first of all, we have a birthday calendar, a typical Dutch birthday calendar. That
>
> helps, you know, 'cause you gotta pretty well look at it, certainly once a week but
>
> probably more often than that. Hangs in the bathroom. And you say, "Oh, who's
>
> birthday is it this week? Oh, okay, you know, John died which means we probably gotta
>
> talk to Mary." We *gotta* talk… It's not probably. We gotta talk to Mary this week, and
>
> tell her that we're thinking of her, and, but also of him, right? 'Cause it's that forgetting,
>
> right, that's what hurts people the most. "What do you mean you forgot my husband?"
>
> My wife, or my son or my daughter or whatever. So, it's that ongoing thing that's
>
> important." (Individual Interview)

At the funerals, this respect for the suffering of the bereaved was also observable. One example of this is that the congregation stood in silence as the family entered and exited the church auditorium before and after the funeral service took place. There was a solemnness in which the community acknowledged the suffering of those related most closely to the deceased. Another example of this shared understanding of the depth of suffering in death and an attempt to create a safe space for this happened during the service before the interment of the first funeral. The family and close friends were present in the church sharing memories of the deceased as was led by the Pastor. Outside the building and visible and quite audible to those inside, were two men with gas powered leaf blowers maintaining the landscape. The funeral directors motioned through the windows to the men to create space for 10 minutes for those who were grieving. The men responded by turning off their leaf blowers and leaving the area. In this way, the need for special care for the bereaved was evident.

In addition, intentionally distancing from a bereaved person was established as being motivated by an internal desire to care. A theme communicated in a group interview is:

"We do not want to impose on people who have a closer relationship with the bereaved. If someone in the community loses a loved one, we might assume that there are others who have closer relationships and would be taking care of the bereaved. We want to give space to those who were more intimately connected; we don't want to impose on the relationships that are closer to the bereaved." (Group Interview, Paraphrased)

Emotional reactions demonstrating care. Care was also expressed through an emotional feeling directed towards the bereaved. Often participants expressed sorrow *for* someone who was experiencing suffering. The following quotes are representative of many such community members' comments expressing feelings of sadness for the bereaved.

"I was struck that he went so quickly. I have feelings of sadness and sorrow for his [family]." (Participant Journal)

"I actually just listened and my heart broke for her… I never expected the conversation but feel it was a safe place for Rebecca to tell her story. We all prayed for Rebecca to feel peace in her life for all the sorrow, and will continue to pray for her." (Participant Journal)

Another emotion that was communicated repeatedly by participants and which points to a desire to care, was a feeling of guilt. Sometimes this regret was directed towards creating additional pain for the bereaved. A participant shared this experience of interacting with the bereaved:

"That really kinda hit me hard, you know, because you're doing it [talking about the deceased while helping with daily tasks] because you want to live alongside of them, if you will, as best as you can. But then in the meantime you're ripping open a wound in essence and then walking away. You know, and you don't know you're doing it. And that's, that's hard." (Group Interview)

Several days after an interview with a recently bereaved participant in which this participant shared that she felt the question "how are you" asked in public place was in-sensitive, I saw her in a public place and spontaneously asked "hey, how are you?" Given the conversation that had taken place in the interview I, as the researcher, felt regret at this common greeting because I felt I had not cared for her according to her wishes. My own desire to care and the guilt of failing at being sensitive mirrored that of the community members.

Feelings of guilt also surrounded ideas about not living up to personal or communal expectations of care. One participant shared this feeling of failing the bereaved:

"…if I've waited too long to say anything to them then it is too late... It can be more difficult to admit, but I probably didn't do my job as a fellow church member."

(Individual Interview)

Another participant shared this directive based on his experience with supporting the bereaved:

"Time makes us forget, but we need to remember." (Individual Interview)

Finally, there were the public displays of the desire of the community to care for those who are grieving. These will be discussed under the section *Grieving Together* and include expressions of sadness and a desire for comfort for the bereaved expressed in congregational prayers, pastoral exhortations and the actions of the community in public services.

Expectations of the bereaved for care. Interestingly, the bereaved also displayed a desire and expectation to be cared for by community members as well. This is most evident as the bereaved shared experiences of feeling that they have not been cared for appropriately. In informal conversations with the bereaved I became aware of those who felt the church was not appropriately supportive. Some used the words "frustrating" and "disappointing" to describe their experience in the church. It was clear that there was an expectation of care that was desired and not experienced. This expectation to be cared for is also evident as the bereaved readily

accepted and appreciated help from those closest to them. One bereaved person shared these
thoughts on her experience:

> "…and that actually is really significant to me in terms of what the church can do… but
> um, what I needed completely was, and what I got from my siblings, was people that
> would just offer to make decisions and, or offer, to narrow down the options or, would be
> there when you are going through that first week of… It's, I can't describe what that
> feels like to just go through such a loss, and then you don't even know how to separate
> your thoughts from that. You know, in that, you can't even think. Let alone make a
> decision, you can't, right? You just, you just can't. And ah, what really hit me hard is
> that, and, I've been reflecting a lot on this, is that, for people that aren't as, there are
> many people who, who aren't as connected to their family. That their family just
> wouldn't necessarily come in and make a decision about what casket to choose, or you
> know, now I have to talk about what plot or you know and that, and uh, I would guess
> that there may be more that really struggle with that than not. Right? and I am very, very,
> blessed to have siblings who are really my best friends and um I would want, I think the
> church should have a team, I think the church should have a team that check in when
> somebody passes and make sure that somebody has that support. You know, to make
> sure you are supported through those decisions." (Individual Interview)

What Are Our Roles?

Once the desire to care was experienced, and before this wish was realized in
interactions, an immediate and often implicit assessment of relational roles took place. Members
of the community conducted an appraisal of personal proximity to the deceased and the
bereaved, and evaluated the assumed relational resources of those deemed most significantly
affected. Participants communicated that the types and quality of grief related interactions were

based on this evaluation of relationships.   One participant theorized and generalized the

relationships this way:

> "I would argue that there are "circles" of grief, with each circle representing a different
>
> level of sorrow. The centre circle would be your immediate family, spouse, children,
>
> parents, etc., those that have the closest ties to you. From there the circle widens to those
>
> that are your closest friends, those you have shared life experiences with over many
>
> years. The next circle would represent those within one's church family and from there it
>
> would widen to those in the general community and then out into the world. Each circle
>
> would impact me in some level as it relates to grieving." (Participant Journal)

During a group interview, participants noted:

> "How we interact with others around grief really depends on the relationship we have
>
> with the person. If the person is close, like a sister for example, there is more
>
> responsibility or obligation to care for them. If the person is more distant a meal might
>
> be appropriate. It can be a bit easier when the person is more distant, a meal can be made
>
> and delivered and that is all that is necessary. If the relationship is more distant our lives
>
> are not really impacted long term." (Group Interview, Paraphrased)

Those who were assessed as having the closest ties to the deceased were expected to need

the most amount of support. A support person shared his experience this way:

> "But again if people come to say 'how are you doing?' my quick response is 'I'm fine but
>
> how about [the widow].' We have a pretty supportive environment within our immediate
>
> family, even our bigger family and so, I think especially in this particular situation I
>
> would certainly want to deflect any energy and resources [the widow's] way, in terms of
>
> comfort. Not that we don't, I am probably not recognizing enough how much if affects
>
> people like us [extended family]." (Individual Interview)

It was clear that immediate family had the greatest responsibility for providing immediate and direct care. Both implicitly and explicitly the participants acknowledged the importance of immediate family as providing emotional and physical support.

> "It's a different type of relationship with a lot of the church members than it is with your friends than it is with your family. Everyone is a little bit more guarded and a little less opened…The congregation isn't quite, they are the congregational family, but they are not your biological family." (Individual Interview)

A bereaved participant described the experience this way:

> "…I had a lot of help from the girls, and that really, really helps… My daughter that lives in [another town], she came once a week. And, uh, spent the day and we'd do our running around, getting done. Hmm. The one that lives here, well, uh, she comes here for supper Monday nights and I go to her place on Thursday nights. The younger one said, "You guys make sure you keep that up." She says, "I'll check on you." (Individual Interview)

The evaluation of relational roles was also an area that the bereaved identified as having the potential for experiencing increased suffering from the community. People who were assessed as being more proximal to the bereaved or the deceased seem to be expected to provide more support. When this care was not perceived as realized, feelings of isolation and anger resulted. One bereaved person noted:

> "I am now alone and I feel all our friends who came to say good bye also must have said good bye to me, in the months that I have been alone none of them have come over to see if I was all right. Of course, they ask me in the church "how are you doing"? What do they want to hear? They want to hear me say I'm ok. What if I were to say I am very sad and lonely and I miss him very much what would they do then? I don't know. Maybe

they feel asking me how I am is enough. But it isn't. I think that it would have been very

thoughtful to have some over and talked about how I feel, how it was for me to lose him

and talk about him and what he meant to us as a family." (Participant Journal)

The bereaved also noted that there were appropriate behaviours for those closest to them and the

deceased, that others should not be engaging in. One person shared this opinion of a support

person:

"Some of the things he has been doing just was weird. Telling me I have to remove

reminders of Karen "because it hurts his heart"… saying things to Karen's picture. I do it but he

shouldn't be." (Participant Journal)

Evaluating and understanding my role as a researcher was difficult as well. While

shaking hands with the bereaved in the receiving line after a funeral service, I was asked what

brought me to the funeral. The people in front of and behind me had connections to either the

deceased or the family and I did not. I gave a quick response and moved on. When I assessed

my relational role in this situation, I did not assess that I could be of support to the bereaved

which left me feeling uncomfortable.

It is important to recognize that for many people the assessment of roles does not give

concrete direction as to what action or interaction is required. The relational evaluation is an in-

between and important event, but not necessarily completely prescriptive. This quote gives

insight into causes for miscommunicated support:

"Maybe the best way to describe it is: it's hard to know my role in a congregation like

ours, especially with some people who I'm not that familiar with and I don't know what

their circumstances are. So, because I'm not necessarily a friend with them, what's my

role, what would be my effective role as a congregation member? And I don't know the

answer to that. I don't know how to grieve with them." (Individual Interview)

Grieving Together

Reciprocal interactions occurred between community members when a death took place in the community. It is imperative to remember that underlying these interactions was a desire to care, and that interactions took place following an assessment of relational proximity and assumed need. In this section, the reciprocal interactions that were observed and communicated in this community are explored more explicitly. First, giving and receiving emotional and physical support are considered. Second, this discussion includes the quality and behaviours of connections between those deemed closer to the deceased and those deemed to be more distally impacted. Third, reciprocal assumptions between and about the needs and desires of members are identified. Finally, changes in community activity or understanding, reminders of personal or communal suffering, and public expressions of grief are explored. As these themes are communicated in this section of this project, it is important to remember that community members are connected with "webs of webs" (Attig, 2001, p. 36), and that a person could be both bereaved and a support for the bereaved at the same time. Also, community members experience of roles in grief ranged on a continuum from proximal to distal relationships with the deceased and other community members.

Short-term material and psycho-social support. The most observable and explicit communicated interactions between community members directly after a death were the delivery of different kinds of support. These interactions were often immediate, short term and, as opposed to being reciprocal care, they were mostly a giving *to* the more closely bereaved. Support was observed as being provided intensely for the time surrounding the funeral and then dropping off in intensity shortly after the funeral service. A differentiation was made between formal church supports and informal social supports. The church officially provides care if it is wanted, and if the bereaved does not have an extensive personal support system.

Participant: "…on a formal level in terms of a church response, everyone in [church] is in

a fellowship group, usually placed there. Fellowship group leader and elder and deacon

are given the joint responsibility of responding in such situations. A lot of meals get

cooked and delivered at the door, usually a bit of a personal visit if people want it, or else

simply left if they're too busy with their family. Usually the elder will visit at some

point. The pastor will have usually been in on the process of the death anyway, unless

it's an unexpected death, in which case, you come in later. So, there's definitely a lot of

contact with the pastors, fellowship groups, and so forth.

Interviewer: "How long does that last?"

Participant: "Not very long. It usually goes 'til after the funeral, after which there are

often some follow-up visits, but everything kinda stops, other than the pastor who may

come and visit once in a while yet, or an elder who may show a little support. And by

and large, after that it's left to informal ways of dealing with it." (Individual Interview)

A participant who was grieving with a more closely bereaved family member observed this about

support immediately after a death:

"…initially when things first happen you are absolutely overwhelmed with the people

who really rise to the occasion in terms of just… You know on the day Terry passed

away all of a sudden we have [many] people here, and we have people around, and of

course people come from everywhere to be to… you know that is just a natural thing to

be together, and then you have the people from [church], friends, who are dropping off

food, and they are not visiting, they leave it on the porch. They recognize the type of

time it was and just sort of to help out with the physical stuff… you really recognize that

people are thinking about it a lot, especially initially, and you can't even field all of the

calls, and in this day and age I was telling people, 'text Janice, text a message and don't

necessarily expect a reply' and she would read all of her texts and we would get, it

actually sort of surprised me, [as extended family] we would get the odd card too… and

texts and so on…" (Individual Interview)

A bereaved person explained the psycho-social support this way:

"…lots of cards, people wishing you well. The people who showed up to the memorial

service, I was very moved by that…" (Individual Interview)

The physical or material support can be physical such as how this bereaved described her

experience:

"Another thing, and this is really interesting, and we do that, I suppose, I guess

everywhere, is that we can fix it with food. (LAUGHS)…Yeah, I think people don't

know what to do so they send over frozen soup. And, I got food from people I didn't

even know. I would have liked to know, would have liked to have had a conversation,

you know, at least acknowledged what was… But, yeah, I don't know if that's a rule, but

it's certainly a practice – if everything else fails, just send soup or cookies." (Individual

Interview)

The practical support can also be more than just physical. At each funeral there was a

receiving line where those who attended the funeral could express their condolences. Often

community members would express who they were and how they came to attend the funeral. At

one of the funerals in particular the widow hugged everyone as they came into the fellowship

hall after the service. In addition to connecting with community members in grief, she expressed

her gratitude for the support received through attendance.

In concert with the experiences of the bereaved the community articulated their intention

to provide this support. It is noteworthy that in providing immediate emotional and material

support the participants operated on communal assumptions. A community member expressed:

"Definitely a card, and even when I don't know the person very well I try to make it to

make it to most of the memorial services." (Individual Interview)

Another noted:

"I try…if I recognize that this person does need support more practically then it's an easy

thing to send a meal. My spouse does the cooking so it's easy for me to say '[Dear], we

need a meal!'" (Group Interview)

The formal short-term support included that which was provided by the church staff. The

facility managers and the administrative coordinator set up the church prior to the funeral. This

included tasks such as arranging stands and tables for holding flowers, the guest book, cards, and

display tables, as well as printing funeral programs. A participant described the pastor's role as:

"…in a structural way, we are connected, but we are connected not in a rigid way but in a

flexible way to provide for the family the pastoral care that is best for them. And that has

to do with funeral rituals, it has to do with follow up care and so forth." (Individual

Interview)

The "funeral rituals" described in this quote were events that were set and held, and which

allowed the closest bereaved people, often the family and close friends of the family, to focus on

their experience of grieving instead of having to think about organizing the proceedings. A

participant described that the pastor's role is in:

"…giving the family time to remember the person they were about to bury; to help them

connect to the next deeply painful event. This time gives the family opportunity, space,

and encouragement to connect the good memories with the deceased. It is organizing the

chaos. This is the job of a pastor or other leader on the funeral day. To lead the family

through the chaos of grief in the best way we know how." (Informal Interview)

In addition to the formal support provided by the church staff, on the day of the funeral a number of volunteers provided further practical support. This included volunteers who operate the community sound system, the sound and video recording system, and the projector system. There were also volunteers who organize, make, serve and clean up after a light lunch following the funeral service. Participants shared the reason for providing this kind of support by saying:

"I do this so that the family doesn't have to think about it, and it gives the family the opportunity to spend time with the community," (Informal Interview)

and,

"I enjoy being involved behind the scenes more than being involved in pastoral work." (Informal Interview)

With formal and informal supports directed towards the bereaved, and the bereaved expecting and accepting of these supports, it is important to note that this pattern of interactions was time-limited. As was observed earlier, the formal supports did not last very long. The community also reported that informal supports seemed to wane shortly after the funeral. The experience of some of the bereaved was:

"And, of course, the first little while, um, you get a lot of phone calls, you get a lot of visits, and there's an awful lot to do." (Individual Interview)

and,

"…well you get what you get. At the onset, a lot of that [emotional and physical support], not so much anymore, like cards and stuff." (Individual Interview)

For those in the community who were aware of the short-term nature of support, there seemed to be a sense of guilt around the limited time of support that is given. In a group interview this conversation took place:

Participant 1: "…I would start with the fact that people said, 'Okay, after the funeral's over and the cards have been sent then we never hear from you again,' so to speak.

Participant 2: "…I think that a lot of people, a lot of congregational members including me, you figured you showed your support by going to the funeral."

Participant 1: "or sent a card"

Participant 2: "or sent a card maybe, and say your condolences once in church, and you kind of trust, or are hoping, but never bother to check, if these people have a support group. You know I think of the last couple people who passed away in church who I knew, but you pretty quickly, if you are not really closely involved, don't have the triggers in my life, or they are overshadowed by the busyness of my own life. I haven't bothered to check on them, I haven't bothered to send another note after all the initial notes have been sent by everybody. And, I can only imagine if you got a card once or twice a year, or if somebody actually paid attention to when [the deceased's] birthday was and put a note in there saying, 'probably a tough day, thinking about you.' I am guilty of being one of those congregational members." (Group Interview)

Another participant observed:

"They end up not carrying it very far – and what I mean by that is that they will comfort those who are grieving as much as they can, and they stand with them, but they also heal up quicker than the people who are grieving, really grieving, really hit by tragedy and difficult situations and… So they'll get on with life much more quickly than the people that they're dealing with." (Individual Interview)

In this community, immediate support was accepted with gratitude by the bereaved, and was given with a desire to care responsibly by the community. The members of this community shared a knowledge and skill for providing emotionally and physically for the needs of those

closest to the deceased for the period of time directly surrounding the days after a death and the

funeral. As is evident, the time-limited nature of this immense effort seemed to be a concern for

both the bereaved and the church community.

   Connecting and missing connection in grief. After the outpouring of psycho-social and

material support around the days of the funeral, the community settled into grieving through

primarily informal relationships within smaller social circles. These interactions continued to be

dependent on the assessment of relationships described earlier in this chapter. I observed, and

experienced, in conversation with participants a forceful criticism of the community's ability to

actually connect in a meaningful way with the suffering of the bereaved. This was verbalized by

those bereaved who were acutely experiencing the absence of longer term support. Additionally,

community members conveyed this message in a somewhat self-conscious way, and the church

leadership shared with regret observations of missing connection. In this chapter, this type of

negative interaction will be referred to as "miscommunication" and "disconnection." I observed

significant negative emotional intensity around this generalized inability in the community to

connect with the experience of the bereaved over the long term.

   This explicit discouragement within the community, however, can be balanced with

observations of a more implicit and equally pervasive theme of connection within the

community. Remarkably, participants were observed connecting with one another – grieving

together – often. This was observed and reported to take place in participants' own personal

social circles, some of which overlapped with the religious community. The reader is

encouraged to hold both connection and disconnection in mind in the following exploration of

community voices of reciprocal interaction around grief.

   The bereaved were most acutely aware of miscommunication within the community.

Many of the bereaved reported instances of feeling misunderstood or offended at the attempts of

the community to communicate comfort or understanding. Participants reported feeling that community members were insensitive regarding the timing and location of grief interactions with the bereaved. One bereaved shared this insight based on these experiences:

> "I have a difficult time even now [going to church] because what happens is it's already an emotional thing to go on my own. But what will happen is that people who haven't had a chance to talk to me, they will pull me out in a crowd and they will talk to me about very personal feelings. One of my good examples, somebody wanted to come and talk to me about what a horrible way it was to die, you know, [the cause of death] and I don't want to talk about that in the foyer after church with people everywhere. So, what happens, and it happens every Sunday that I go, is that I will be reduced to tears in the middle of a crowd of people. They had a need to come and talk to me about that, but when they are done, they are done. I mean, they don't have to deal with it anymore, their need was to have that moment and then they are gone, and there I am. I can't just pick it up and drop it. And so, that to me is, something that I think we need to understand more as a community, is just to be respective of some of those boundaries, and if you do want to have that personal conversation, choose a time and a place for it." (Individual Interview)

From the community members' perspective, some desired to connect in a meaningful way with the bereaved and this was the reason for such an interaction. One participant described the experience this way:

> "I just had something to share with [the bereaved], about what it must be like for them. I was excited to connect and it bubbled up for me and I just had to say something. There wasn't really enough time before [the event started] to get into the emotion so it probably wasn't the best time, but I just had to share it." (Group Interview, Paraphrased)

In addition to the miscommunication and disconnection felt due to the timing and location of interactions between closer bereaved and more distally impacted community members, the messages communicated between participants caused misunderstanding and pain. Participants described a historical community message that used faith statements in a way that seemed to undermine the suffering of the bereaved. A participant described it this way:

"…other pat answers like 'it's God's will' or 'you know that there's a plan' and all that. I think 'ya, you know what? It's shitty, it's just shitty and it doesn't happen because that's what God wants for us' … And people are constantly trying to put these, well you know, these softeners on it. You know what? You can't soften it. There isn't anything soft about it. And that is frustrating because what I want to say is 'Really? Really? I would just like you to get into my head for a day and understand how this feels!' You know it is easy to say those things and it's not true. We have to recognize, and I think that is something that we don't do, is to just recognize… I don't know how to describe it, except shitty, to recognize that some things just are really awful, and it is ok to say that they are awful and to acknowledge that people are going through something awful." (Individual Interview)

Another participant said:

"One thing I don't like is, 'they're in heaven right now.' Or, I haven't heard that lately at all, years ago people would say, "Well, you know they're better off, in a better place." (Group Interview)

Though this message may be historically based, and may be less frequently used by the community at the present, the message is still a functioning entity in the community. Sometimes it is spoken to the bereaved, or used by the bereaved, and other times it is protested against, rejected, and criticized. In any case, participants communicated that a feeling existed that faith

based phrases were sometimes used in an attempt to provide relief from pain, but were experienced as increasing feelings of misunderstanding.

An interactional pattern between community members that was felt as equally distressing was relational distance between community members that was created in reaction to a death. As was explored earlier, some people chose to stop interacting with the bereaved to provide more space to care for, what were perceived as, more intimate relationships. Also discussed above was the experience of community members regaining the rhythms and routines of life more quickly than the bereaved. This led to a sense that the community had forgotten about the bereaved. A community member outlined this by saying:

> "…I would start with the fact that people said, 'Okay, after the funeral's over and the cards have been sent then we never hear from you again,' so to speak. And that's pretty typical, I think, because unless you know the person very well, you either feel reluctant to approach the subject, or you can forget about it…" (Group Interview)

A support person noted:

> "I think, for a lot of congregation members – and I'm saying that from personal experience – that I'm afraid that a lot of…it kind of goes back to assuming people are okay or people are taken care of, I can forget about too many grieving people in our congregation before I should be forgetting about them and forgetting about their need. And I'm not even sure what to do about their needs. Like, even at Nora's [emotional] point, if some people came up now and offered stuff, it would almost be awkward because they weren't, you know, depending who it was and how they did it… it's not that a person needs every member in a congregation to come visit them, share and… You don't need that, but it's hard…" (Individual Interview)

Another participant related this experience:

"It makes me very sad that people think that I have also disappeared. I am very sad and

alone. Not that I expect people to drop in all the time but once after he died would have

been nice. If I didn't have my [family and a] few people who care I would have been

inclined to think that I do not exist anymore, that I was my husband and that without him

I am no more." (Participant Journal)

This pattern of distanced interaction was seen as an undesirable occurrence from the perspective

of most participants. The underlying desire to care, then, was reported as being thwarted by

experiences of miscommunication and disconnection.

The community articulated that the cause of this miscommunication and disconnection is

knowledge based. The solution, then, as was seen by the community, would be teaching and

training oriented. The community wanted to be better prepared to grieve together. One

participant articulated and embodied this unfamiliarity:

"It's also hard to know the timelines. At what point is it past the point for those types of

conversations and you know, what are the next steps? It's hard for me to know, and I can

see in this situation it is hard for lots of people to know. You know, what's the, what's

the, I don't know the word I'm looking for, but what is the point in time when you move

on to the next type of conversation or the next type of activity… in comforting somebody,

at what point do the hugs get less and the encouragement to move on get more. I don't

know, but that can be in the way people talk to you too, in the hug talking versus the

moving on, not forgetting, but the moving on talking. You know what I mean, the levels

of relationship, levels of communication." (Individual Interview)

Another participant noted the need for more training for those giving formal church support:

"We need too many elders to visit too many people to be able to train them adequately.

We show them where to find that training, but often elders have young families of their

own, and they are busy, and they got work, and their spouse works, and so they just don't

have the time to actually get themselves educated sufficiently to be aware of how to deal

with a person who is struggling, for example, who isn't working through their grief in a

way they ought to…" (Individual Interview)

At an experiential level, a bereaved community member noted the same need:

"Nobody knows [what grieving is like], I wouldn't have had a clue, I wouldn't have had a

clue how it just impacts every part of your day, every piece of your life, how it changes

your, it changes your perspective, it's just, I don't know that there is anything more

profound. And people don't know, and I thought, how do we help people to know then?

How do you get people there, how do you share that?" (Individual Interview)

A few community members described their experience of having unintentional and

uncontrolled reactions when they intended to support the bereaved. These interactions may have

contributed to some of the felt miscommunication by those who are suffering. These people

reported having situationally inappropriate reactions to situations involving grief and death.

There seemed to be a similar understanding among these participants that it was unanticipated

and unfamiliar intense emotion that contributed to these actions. One participant shared that:

"I congratulated someone once, at the funeral. Feeling awkward I guess, I don't know

why, but I did… just about kicked myself. And I thought, "What did I just say?" (Group

Interview)

Another participant revealed:

"I don't trust myself to respond anymore. I was talking about a death that impacted my

friend group and I had a big smile on my face. My friend asked why I was smiling, I said

'I can't help it.' Sometimes I say things that are inappropriate, afterwards I cannot

believe I said that!" (Group Interview, Paraphrased)

Another participant shared that a medical condition causes crying that is sometimes misunderstood as emotion, and that this can create misunderstanding in the interaction. In this community, there are some who experience themselves as the cause of disconnection, but that they did not intend for disconnection or were not able to control their actions.

One way this community interacts, therefore, can be described as interacting in and through miscommunication and disconnection. The inability to communicate and provide the intended care, resulted in the bereaved experiencing offense, disconnection, isolation and rejection. There was a feeling of disappointment, for both community members and the bereaved, that care was not communicated clearly. Both were impacted, and ultimately changed, by these interactions. Each came into the interaction with some intent (i.e., to care or to receive care) depending on the relationship, and both left the interaction feeling connected or disconnected to varying degrees depending on the effectiveness of the communication given the context (i.e., time, location and relationship). In the cases listed here the majority of people had negative experiences of these communications.

Less overtly communicated, and yet strikingly and abundantly evident, were situations of experienced *connection*. Many times, this connection took place in smaller social circles such as with family or close friends and was reported in participant journals of daily events as opposed to being expressed in interviews. Interactions around grief took place initially as the community anticipated a death. One participant shared this experience:

> "Work day as normal, was reminded of Jim after my wife wondered out loud if the treatments would be effective. I mentioned to her that I doubted it would do much good given the [type of illness] and his history of heavy smoking and age." (Participant Journal)

The community then communicated with one another the fact that a death has taken place.

"Called my son and told him of Hank's passing. He was shocked and said that he had

recently spoken to Hank a few months back, while working near his home." (Participant

Journal)

Information about sickness and death was also passed along to me as the researcher

verbally. While attending one funeral I was told about the death of a second member and that

yet another member was ill. Given my purpose in the community as a researcher it seemed

appropriate to be invited into conversation about upcoming funerals and grief that was being

anticipated by the community. In one instance in particular, the illness was described as

"shocking" by several people with whom I talked. In this way, we were able to express our

emotion about grief that was anticipated. The funerals that I was invited to attend were more

expected and the conversations were more factual than emotional.

The community came together at the funerals and interacted with each other. Though the

purpose of the gathering was in response to a death in the community, community members did

not exclusively interact with grief related content. Some participants 'caught up' with the lives

of others, asking about such topics as health, children, vacations, and work. These connections

took place in a setting organized around grieving, but were not necessarily explicitly grief related

expressions. Others found connection to one another, the deceased and the more closely

bereaved. One bereaved participant noted that:

"…I think at the memorial service, was very significant for me, in terms of grieving

together with your church, because that's when… Well, it was important for me to say

something during the service, you know, to share some of my thoughts about what had

gone on, you know that's when people feel it, and that's when you can cry together and it

doesn't, and it's just, wow, for lack of a better word, it's opened season on: let's just feel

this really deeply." (Individual Interview)

The funeral service can be a point of connection for community members as well. One

participant noted that:

> "Is it possible to have a 'rich' funeral? Is it possible to be a more sensitive and helpful
>
> individual at the time of grief and loss? For the believer I think yes, at least from my
>
> personal experience. I realized that in both of these events and funerals I had been
>
> enriched not only because the lives of those who have died had impacted my life in a
>
> positive way, but that experiencing the celebration of their lives in Church was a "thought
>
> filled" time of reflection and it carried me to a deeper level of peace." (Participant
>
> Journal)

Attending the funeral, then, was a point of interaction between community members. The

activities of the funeral service described in chapter 4 (i.e. singing, standing, listening) were also

unified actions and expressions of community values. Joining in the activities of the funeral

service appeared to give reciprocal support to community members. A community membered

shared the experience of being joined with others who were grieving and knew the deceased in

different capacities directly after the funeral service. Another participant expressed the

experience this way:

> "At some of these funerals I see people who I know and do not see frequently. Coming
>
> together around a mutual friend's death is at times a meaningful way to reconnect. At
>
> times, I am surprised to see a particular person at a funeral, and I sometimes think and
>
> occasionally ask – "oh – you knew him or her too?". In the times I do engage with
>
> someone on how they knew the person who died, it has typically led to a deeper
>
> understanding. In some cases, I realize how interconnected the community is - by finding
>
> out so and so knew the deceased as well, and that somehow through connection, we who
>
> are reminiscing now have a shared bond of sorts." (Participant Journal)

Others who may be more distantly connected to the deceased or bereaved find their

relationships have drawn closer due to connecting at the funeral. One participant shared that:

> "The stories that are shared in the receiving line or while having a coffee after the service
>
> are usually enlightening too – hearing from an acquaintance or a friend about their
>
> experiences with the deceased creates for me an increased sense of who the deceased
>
> really was, like adding another piece to the puzzle, or walking around a sculpture to gain
>
> a different perspective. The grieving process, especially the coming together with those
>
> who are comfortable enough to talk about the loss of our shared friend has strengthened
>
> my relationship with some of those left on earth." (Participant Journal)

Sitting around a table after the funeral service with several participants we agreed that we had

learned something new about the deceased. One person noted:

> "I had it again that I didn't really know the person that well, you know, and attended
>
> church for many years, and then when you listen to the eulogies, you think, 'I wish I'd
>
> known that person a little better." (Group Interview)

Most of us were not closely connected with the bereaved or the deceased. We shared that some

of the new traits we learned were endearing, and caused us to wish that we had known the

deceased better. We found connection with each other as we expressed our feelings of being

drawn to the deceased in a new way.

After the funeral was over and time had passed, participants continued to connect around

grief. Some bereaved shared an experience of connection with community members during their

grief. First, this included conversations in the church building on Sunday mornings. One

participant shared that:

> "…[a person] who normally doesn't talk to you or… says hi, you're not close to them,
>
> you know, they're a different generation or whatever the case. That was, that was real.

And, you know, there was an openness about it. It wasn't, 'Oh, shucks, I better not talk

to them because they're goin' through a lot.' No, it was, 'How you doin'?'" (Individual

Interview)

Second, some experienced a positive change in community relationships after the death

of a loved one. One participant shared this experience of connecting with community members

at community gatherings:

"I think the majority of the people are caring. Like I said earlier, there was people that

never really talked to me that do now. I don't know why, but I guess that's their way of

sharing. They stop me and say, 'How are you?'… I guess that's their way of expressing

themselves or communication or… I don't know. That's what I've found, anyway, that

there's more people that, that say hello or, you know. So, they, they do sort of try and

feel what you're going through." (Individual Interview)

For less closely bereaved community members, later interactions appeared to happen

more frequently in the smaller social circles of participants as opposed to at the church building

or at general community events. Sometimes these conversations were planned such as is evident

in this reflection:

"Bert and I went for breakfast the week after my dad died. Bert and I work together.

We talked about the important roles that dads play in our lives…He invited me for

breakfast – an act which in and of itself was quite meaningful – his schedule is very

demanding. When I arrived, he shook my hand – he is not a hugger of men, looked me in

the eye and expressed his condolences. Over breakfast, he first asked about how I was

doing, how my family was doing, and what the funeral was like. We talked at length

about eulogies – he and I both delivered eulogies at our dad's funerals. We spoke of the

importance of telling the story of those that have died, as a way of connection with the

broader community. We also talked about the unique role that fathers play in our lives."

(Participant Journal)

Less intentional interactions around grieving took place as well and were more commonly

reported and observed. A participant shared this experience:

"I was having my daily talk over the fence with my neighbor who is not a Christian. She

feels she should get into heaven just by the good work she does for others. The

conversation drifted to our other neighbor Diane who died in September. (We as a

neighborhood went to her funeral). She talked about missing Diane and the memories we

had of going out for coffee and the change in our neighbourhood when someone dies.

Diane's birthday was close, so that stirred a lot of emotion. [My spouse] came outside

and came in on the conversation about the birthday. We went on to discuss the surprise

of our depth of emotion for grieving for a neighbor. We miss her. My neighbour and I

discuss our day at least five times a week over the fence so we know each other well…

The conversation was good because we share a loss and discussions about the loss of

someone we both knew well is healing. I was surprised how much we miss Diane. I feel

the conversation was great just everyday living and support for each other." (Participant

Journal)

As the identified grief researcher in this community I experienced the community

connecting around grief. I would often be approached because I was new to the community and

I was not immediately recognized as having the role of grief researcher. A community member

would introduce themselves and ask about what I did for work or where I was from and a short

friendly conversation would ensue. At some point in the conversation I would note that I am the

person who is doing research on grieving in the community. The community member would

then share some aspect of their own grief experience. The following comments note the topic of

informal conversations and exemplify the different kinds of connections around grief that took

place with researchers:

    "I am around death a lot in my work."

    "When my mom died it was a blessing."

    "I thought public speaking at this funeral was too long."

    "Wow, you must have a lot of work to do with all these funerals."

    "We were at another funeral this week in another community…"

    "I have found journaling to be very helpful."

    "Your work must be very difficult"

    "There may be another death soon"

    Assumptions in reciprocal grieving. The implicit assumptions that had an impact on

how these grief interactions were perceived, experienced and intended were evident in both

observation and conversation. These assumptions often guided the experience of, and the

intention behind, connection and misconnection. One assumption made by those grieving is that

the church community is uncomfortable with the suffering of the bereaved. One bereaved

participant shared this understanding of community members' intentions:

    "And people want to hear, from my perspective I don't even like the question, "how are

    you doing today?" People want to hear that it is ok. People are looking for healing.

    Sometimes I think that it is hard to acknowledge the hurt. It has only been [recent] for

    me so it is pretty raw, but I have to come up with the standard answer, that isn't… I am

    not going to say 'I'm fine, hey how are you?' or 'really good,' 'pretty good,' 'everything

    is great.' But that is what people want to hear in our communities. They want to see that

    you are better. That everything is going the right way, and all of that. And then it is

    almost like a reluctance to acknowledge pain or struggling. I think that is true. I think

that is true in our families, in our church, in our everyday life. That we just want

everything better all the time." (Individual Interview)

On one hand, a community member confirmed this discomfort with suffering by saying,

"and you know, I think it is in lots of things it is part of our society and culture. To me it

is sort of, "as long as you are getting better it relieves me," if someone is getting better in

the congregation it relieves me of some responsibility. If you are getting worse I have to

feel a little guilty about it, or help them, or feel guilty about how little I'm helping them."

(Individual Interview)

The observations I made, however, indicate that many community members had a desire

to care for the bereaved which included bearing the experience of the bereaved. One example,

that was discussed earlier, is that those who chose not to interact with the bereaved do not feel

relationally close enough to the bereaved and therefore remove contact in order enhance the

ability of those in assumed closer relationships to provide care. Though this may be an

unconscious excuse, it is opposed to the assumption that they are necessarily uncomfortable with

grief. Other community members showed care by inviting me to connect with people they knew

to be suffering, as they said that talking about the suffering brought on by grief may be helpful

for the bereaved. Others intentionally attempted to connect with the bereaved through text

messages, phone calls, or planned meetings.

So, the assumption made by some of the bereaved was that the community would rather

not be reminded that the suffering caused by grief is acutely experienced by the closely bereaved

after the community's life routines have resumed. On the one hand, this discomfort was

acknowledged by some community members, and on the other hand a group conversation

evidenced another explanation. As is represented in the following interaction during a group

interview, the community struggled to know exactly how to interact with the bereaved. The

community members also made some assumptions about what the bereaved may be offended by,

or what they would prefer. These assumptions guided behaviour and these behaviours led to

feelings of offense between the bereaved and the community members. This conversation

exemplifies communally working through some of the fears of community members:

Participant 1: "Cause I personally think it's important that, you know, on special days

especially, like someone's birthday, right, someone passes away but you know that

birthday's gonna be a very difficult day for the person that's left behind, and so I think

it's important to just talk about that."

Participant 2: "And sometimes you wonder whether it's better to do it on *that* day or

some time *around* that time."

(COMMUNAL MURMERS OF AGREEMENT)

Participant 3: "People respond so differently and, um, in this day and age with email and

that, sometimes it's just better to send an email than to actually call on the phone or…?"

Participant 1: "Yeah, there's another side to that idea, and that is that when you speak

with somebody face to face you can read them better and it's, it is possible to

misunderstand an email or a text and, um… So as long as we take time to make sure our

wording is good…But it is an easy way to connect with people, it's an efficient way to

connect."

Participant 4: "Or what you could do is, um, you could send an email saying, "I'm

thinking about you and maybe we can get together next week or something." So you get,

they pick the time and place, type thing. You leave it a bit, the ball in their court.

(COMMUNAL MURMERS OF AGREEMENT)

Participant 1: "And another thing is, I understand people – who either connected at the

time, like, say within a week of the death, or connected again after the death – were left

feeling a little bit uncomfortable or hurt because [grief] was brought up again, but I also

see that people that you would expect to hear from you and never heard anything from

them at all. And I would think that, you'd want to recognize there has been a loss instead

of choosing not to say anything at all for fear of saying the wrong thing."

Participant 3: "[I am familiar with a particular group of people and] there have been some

deaths that they've had to deal with, sometimes even across faiths, and they're petrified

of saying the wrong thing. And then I say it's way better to show up and say next to

nothing than to not show up at all. And you don't have to say a whole lot, a pat on the

back or a squeeze of the arm. But any kind of gesture that you make is way better than

nothing at all."

Participant 1: Yeah, I think those messages, the "I've been thinking about you," and…

                (COMMUNAL MURMERS OF AGREEMENT)

Participant 2: And those statements don't seem to call for a response, really, at all,

because it's not – you can just say, 'Thank you.'

Participant 4: "But it gives the option."

Participant 1: "Yes."

Participant 4: "It kind of opens the door, so if they wanna talk, they can."

Participant 1: "Right. Right."

Participant 4: "Because you don't know if they're this kind of person or that kind of

person. Create room for them to do that." (Group Interview)

As the group discussed how to interact with someone that is suffering, there was no

obviously clear method for the 'right way' to interact with the bereaved. Evident in this

conversation is the desire to find a way to care for the bereaved without causing more pain. Also

evident in this quote was the understanding that both interacting with the bereaved and avoiding

interaction have the potential to be offensive. Interestingly, the problem of how and when to interact with the bereaved, was solved by attempting to give the decision to the bereaved instead of making assumptions and deciding for the bereaved.

Whether these assumptions came from a desire to refrain from inducing more suffering on the bereaved, or out of disconnection for personal reasons, it is clear that these assumptions impacted connection in a negative way:

"I can assume, I can assume that lots more [people] are [assuming] too, but I can only speak for myself, so I can see that there's lots of…the congregation, some assumptions made, um, I think that are risky assumptions to make." (Individual Interview)

Remembering personal grief. When a death occurred in the community some community members were reminded of their own past losses. The fact that there had been a death was one of the triggers in the community, but the funeral seemed to be a poignant time for remembering the pain of the death of those significant to community members. This participant described it this way:

"…every funeral triggers memories of grieving of your own. And without triggering anything special, but you start thinkin' of others, especially if it's been within the last, well, if it's been recently or it's been a long time." (Group Interview)

Another participant noted that the recent death in the community:

"Brought back memories of the personal family funeral days I experienced and how that would be for [this] family." (Participant Journal)

Others grieved as they recognized the fragility of life through the funeral process. One participant outlined being reminded of his own impermanence:

"Seems whenever I go through this with someone that I know, it makes me realize that

I'm getting older as well, and think of my own mortality. Normal I guess." (Participant

Journal)

It is my experience, as a researcher studying grief in this community, that my presence

was an additional reminder of grieving for some members of the community. This has been

described in the section *Connecting around Grief*, and is also fitting to restate here. An example

of this is that as one participant was about to walk by me she hesitated, stopped for a moment

and said that her grief was "too much" to talk about. Another person shared how supportive the

church had been through her grief. Another shared the story of losing a sibling as a young

person. Creating space for the topic of grief, in addition to the death of a member of the

community, reminded community members of, or gave opportunity to speak about, the losses

they had experienced.

The community changes as a result of the death of a member. In addition to the fact

that a person is no longer physically present in the community, and above and beyond the

interactional impacts already described, changes occurred in the community as a result of the

death of a member. These changes were experienced by many in the community, but members

were impacted differently depending on the relational context of the individual. To begin, some

bereaved noticed a relational change within their social circles and with the broader community.

One example that has already been noted, is that some bereaved felt forgotten when their spouse

died. Community members were aware of the possibility for relational changes for the bereaved.

One participant observed:

"I've heard from many who said those relationships that we do have, people who are

more connected, they're saying it changes entirely when your spouse dies…because now

all of a sudden you're a different person. And that's a real challenge to keep those

connections going. So those are two kinds of interesting connections I thought: your

relationship with the community, then, before the loss, can be important. But the second

thing is that even if you do have good connections within the congregation before, and if

it's a spouse, then your situation does change inevitably." (Group Interview)

Just as the bereaved noticed a change in their relationships, community members'

relationships with other members changed too. Some people shared more emotion than they had

previously, and this changed what people knew about them. One participant noted:

"I was struck by how compassionate and understanding Barry was on [the topic of grief].

Part of my surprise was knowing that Barry is not a 'touchy feely' kind of person. In the

more than 10 years that I have known him, this is far and away the most deep

conversation we have ever had – most of our conversations are quite surface level – how

is work, what have you done with your man cave lately…etc. I walked home that night

thankful for that opportunity to discuss death with Barry – I think we both experienced

some healing." (Participant Journal)

Another participant shared that when he was with a group of bereaved people he noticed that

there was a lot more of emotion than he was used to expecting and the drastic change in

atmosphere caught him off guard. He reported being surprised at one particular person's

emotions and thinking "whoa, *that* guy is crying." (Informal Group Interview)

The relationship of community members towards the deceased changed too. Learning

about different perspectives of the character of the deceased was endearing for some community

members. One participant described the change this way:

"And then when you go to the memorial service you get to discover all kinds of things

about that person that you never knew. Sometimes *then* you feel the loss…" (Participant

Journal)

This was also my own experience as a researcher in the community. The deceased were

portrayed in such a charming way throughout the funeral service that I felt that I would have like

to have been in closer relationship to each of them.

The initial impact of a death in the community that surrounds the week of the funeral

seemed to be a catalyst for different internal experiences as life activities focused on death.

Some people were impacted with feelings of sadness that the deceased was no longer attending

services on Sundays. A participant wrote:

> "Missed seeing Jim in his regular spot. Read in the bulletin that he had gone into
>
> palliative care at home. Realized that there was no hope and felt a real pang of loss."
>
> (Participant Journal)

Others' intentions and decisions throughout the week were directed towards bringing care. One

participant shared this goal:

> "My intentions were primarily to let her know that her husband's death meant enough to
>
> me to get me to attend his service- to take the time mid day, mid week to go to his
>
> funeral. I sometimes think rather highly of myself and my work schedule, and convince
>
> myself that I should seriously weigh whether I can take the time to attend a funeral or not
>
> – especially if it is for someone that I don't have extensive ties or connections to. There
>
> were not many people at the service, so I thought it was important to convey the message
>
> that his life, and her grief, mattered." (Participant Journal)

Another participant noticed his thoughts directed towards making the funeral:

> "Worked quickly to-day, being constantly aware of the time. Needed to make sure I could
>
> get home in time to get cleaned up and attend the funeral..." (Participant Journal)

Volunteers prepared and set up for the funeral. Family members of these volunteers were

sometimes impacted as their personal schedules were changed.

Some found that their connection with others was strengthened through the communal grieving process. As a participant wrote:

"There is also something about being together in the fellowship hall or the sanctuary with others who I do not have the opportunity to directly interact with. I have a sense of connection through proximity, through sharing in the rituals of a funeral service: singing the songs, hearing the stories, aching together, feeling for ourselves and for those left to struggle on in life without our friend; through the process of waiting our respective turn in line to individually convey our respect. Sometimes no words are exchanged with these fellow mourners, perhaps not even a head nod or eye contact,…and yet I sometimes get a sense of connection – a feeling like "we are in this together" or "we are doing this grief thing together" or "I hope so and so feels somewhat comforted and supported by our collective efforts of mourning together." (Participant Journal)

After the funeral week was over, changes continued to take place. One participant shared that he learned a lasting lesson in how to interact with the bereaved over the long term. He learned that he wanted to respond different due to an interaction with his wife. Her experience of grief with family, and her personality in expressing when she is thinking of others, helped him to learn to reach out to the bereaved more intentionally. He said that he now sends a message to the bereaved when he gets the feeling to do so, or when it comes to mind, and his attempts have always been received well. He said that in fact, it felt like it was the "right" time.

Others showed changes in the focus of conversation topics. After a church service shortly following a funeral, a group of participants discussed with admiration the topic of how much the deceased sacrificed for the interests of his children. They then talked about how these children subsequently impacted the community. Their faces showed the admiration they were feeling, and their conversation had a positive tone.

Depending on the role of the deceased in the congregation, changes occurred to take over the tasks of the deceased in the community. One community member remembered when a man died in the community who was quite involved in the church. He noted that he felt excited about how the church pulled together to cover the jobs that the deceased used to complete. He said that people who were not involved before, now began to be involved. The death in the community was an opportunity for other people to gain a role in the church, and establish deeper connections to the community.

Another way that the church changed, was to make space for the funeral events during the week of the funeral. An announcement was made to the congregation that the church choir practice and the drop-in floor hockey game would be cancelled the week of a funeral as the church building was needed for funeral events. There was an observable sense of disappointment by organizers that these cancellations had to happen. This was mixed with a gracious understanding of the importance of creating space for mourning.

The church community changed when a member died. Relationships changed between the bereaved and the community, and between community members. Emotional changes occurred as the deceased was recognized as being absent from community events. Around the funeral, focus was given to intentionally preparing for the service. This included volunteers setting up for the service, and people re-organizing work or personal schedules to attend. After the funeral, the community changed by redistributing the tasks that were taken up by the deceased. Also, people learned how to connect around grief in deeper ways by experiencing grief in closer relationships. Finally, changes took place in the church as the community cancelled events to make space for mourning.

Public communal expressions of grief. So far only more private interactions and the personal experiences of different members have been discussed, however, there were several

main ways that the community publicly expressed grief. These public communal expressions of

grief took place on Sunday mornings during the weekly worship services when the entire

community gathered together. This was different from the funeral where the focus and structure

were particularly set towards mourning. The first was through the use of the community

bulletin. The physical paper bulletin was the primary method for communicating important

community events. The three deaths in the community were announced in the bulletin as

follows:

> "Last week the Lord called Jim to Himself. He died peacefully, following a short illness
>
> due to cancer. The memorial service for Jim took place in our church last Friday. We
>
> commend Jim's family to God's consolation, care, and keeping." (Community
>
> Document)
>
> "Anne passed away peacefully on Thursday afternoon, a few weeks after her 98th
>
> birthday. We thank God for her life and her witness, and we pray for comfort and peace
>
> for her immediate family at [church] (names of family), and her extended family
>
> everywhere." (Community Document)
>
> "Last Thursday evening, with his family around him, Hank was taken to be with the
>
> Lord. We pray for God's consolation and care for the family. At the time of writing
>
> funeral arrangements have not yet been finalized, but we'll receive an update during our
>
> Sunday morning worship service" (Community Document)

The community named the fact that a member had died and communicated a desire for comfort

for those closest to the deceased. The family was then entrusted to the care of God.

> The family of the bereaved also used the bulletin to communicate with the congregation.
>
> "**Words of Thanks:** Thanks to everyone for all the prayers, cards, and phone calls during
>
> Jim's illness. It is very much appreciated. – Joan" (Community Document)

"**Thank You!** The family of Anne is very thankful for all the support, prayers, and help

we have received from the [church] congregation in connection with her recent passing,

the funeral, and memorial services. In particular we wish to thank Pastors (named), staff

members [custodian and administrative director], technical support from [sound,

PowerPoint and video recording volunteers], the members of the [committee that prepares

the refreshments after the service], and our church members for their many signs of

caring and sympathy. You all helped make this time easier for us, and we sensed deeply

the communion of the saints that is so strong in our faith family. Thank you! And we

praise God for his faithfulness and strength in all our lives." (Community Document)

Thank You! "The family of Hank thank all the staff at [church] and the congregation for

their prayers, compassion and support for our families during our recent bereavement in

Hank's death. We live in hope and we are thankful that we also experienced the

"Communion of the Saints" at the visitation and memorial service for Hank at [church]."

(Community Document)

The second way of expressing communal grief was through a leader or speaker during the

Sunday worship service. A liturgist began the service by welcoming the congregation and

making announcements. One funeral was announced by the liturgist as the situation required:

"If you have already glanced at the bulletin you may have noticed that this week Hank

was taken to be with our Lord. And there will be a viewing in this church on [date and

time]. And the congregation is invited to attend that and the service will be on [date and

time] and you are also welcome to join us for that." (Public Service Transcript)

However, most references to death in the community were made during the

congregational prayer. The liturgist prepared a prayer and read this to the congregation at a

particular point in the service. Among other topics such as concern for world events and

community thankfulness, the prayer included a section where community suffering was addressed. In relation to grief one liturgist prayed:

"We miss those who have passed from this life. We trust that they are in your good care and we name them now because we remember them as they are part of our family and love them still." (Public Service Transcript)

Another prayed:

"This week we received the sad news that Jim and Anne have died. We lament those great losses with Jim's and Anne's families. Sustain them with your unfailing love and presence, give them strength and courage at this difficult time we pray. May they feel your care for them and our care for them. We pray also for Hank who has suffered a stroke, may he receive good and compassionate care. May he be aware and confident that God you are with him and may he find peace in that. We continue to pray for Pete and Judy as together they deal on a daily basis with Judy's MS. Protect Judy from serious falls we pray and bless both of them with abundant patience and endurance." (Public Service Transcript)

And another prayed:

"God our comforter, hold us close as we grieve the passing away of Hank. Sustain his family in this difficult time. Be also with Barry and his sister's family. Comfort us all as it reminds us of our recent losses, especially those who have passed away in the last couple of months. These occasions may reopen our thoughts to those close to us who have died. Fill the void with your peace, and may we be a comfort to those in need." (Public Service Transcript)

In addition to the liturgist, the pastor publicly expressed communal expectations around grief. In relation to the fact that this community experienced three deaths in short succession, the pastor said this:

"Over the past number of weeks, we have explored why the church matters. In fact, why the church is actually essential for our spiritual wellbeing, and we have looked at biblical images that try to show us how important it is for the church of Christ to gather together on a regular basis and to work together as an organism also during the week. Today the image that we explore from Scripture is the church as the flock of Jesus Christ. And with all the things that have been happening with our congregation lately somebody said, "pastor, you must be busy" and, ya, pastor is busy, fortunately pastor isn't just one pastor. The pastors of the flock of Jesus Christ, we really have only one pastor and that is Jesus. Secondly, ya we got pastors, but we have a lot of them, and you don't have to look any further than your own nose to see another pastor. Today we celebrate the reformation and the way in which the reformation brought us back to the word of God that so clearly speaks about the fact that we as the flock have one shepherd but we have many undersheperds. We take care of each other as well. And you know that is really comforting when you are a pastor. You have all those elders, you have all those deacons you've got all those congregation members who reach out with the love of Christ and help us with our challenges, our struggles, and our losses. So the flock of Christ…(Sermon Continues)" (Public Service Transcript)

The third public expression of grief that occurred in Sunday morning worship services was through the communal singing of particular songs. Not everyone was impacted by the same songs in the same way and so some experienced these songs as connecting with their grieving and others did not. Also, though most songs were not oriented toward grieving, there were some

songs that dealt with human suffering and mostly declared hope amidst pain. One such song is

titled: "God is Our Refuge and Our Strength" which includes the verse:

"God is our refuge and our strength,

our ever-present aid,

and therefore, though the earth be moved,

we will not be afraid -

though hills into the seas be cast,

though foaming billows roar,

though the mighty billows shake

the mountains on the shore." (Public Service Transcript)

Another example of this communal song of hope in suffering was: "My Hope is Built on Nothing

Less," which was sung as follows:

"Verse 1:

My hope is built on nothing less

than Jesus' blood and righteousness;

I dare not trust the sweetest frame,

but wholly lean on Jesus' name.

Refrain:

On Christ, the solid rock, I stand;

all other ground is sinking sand,

all other ground is sinking sand.

Verse 2:

When darkness veils his lovely face,

I rest on his unchanging grace;

in every high and stormy gale,

my anchor holds within the veil. [Refrain]

Verse 3:

His oath, his covenant, his blood

support me in the whelming flood;

when all around my soul gives way,

he then is all my hope and stay. [Refrain]

Verse: 4

When he shall come with trumpet sound,

O may I then in him be found,

dressed in his righteousness alone,

faultless to stand before the throne. [Refrain]" (Public Service Transcript)

There were several worship services a year where public expressions of grief were either the focus, or a segment, of the structure of the service. Though these did not take place during the observation period they were remembered or anticipated by the congregation. One of these services was a "Blue Christmas" service. In this worship service, the experience of the Christmas season as increasing suffering through the reminder that a loved one has been lost, or other reasons for suffering during the holidays was acknowledged and given expression. In addition, one of the events that took place during the service dedicated to recapping the past year and celebrating the new year, the names of those who have died in that year were spoken and their pictures were projected onto screens for the community to see. One widow described her experience of this by writing:

Christmas and New Years has come and gone. It was very hard thinking of a year ago getting the news that [the deceased] was going to die. Going to church was very hard.

Especially new Years Eve. Seeing [the deceased]'s picture I lost it. but that's OK."

(Participant Journal)

The most obvious and overt place and time for public expression of mourning in this

community was observed at the funerals. The reason for coming together was made explicit by

the pastor in the welcome. The funeral was for remembering the deceased, thanking God for

blessings of the deceased's life and comfort in grief, and it was for coming together in grief. At

one funeral, the welcome was stated this way:

"On behalf of the Jim's family, welcome to this place, and thank you for being here so

that we can together remember a life well lived, in which we can together give thanks for

God's precious blessings and promises, and also that together we can unite in grief and

sorrow as we know that death has taken a loved one from us..." (Public Service

Transcript)

With the purpose of the service established, the following elements within the service

were intended to invite the congregation to jointly attend to remembering, thanking, and

grieving. Readings from the Bible were one way that the congregation joined together in

suffering. The pastor noted:

"…the Psalms allow us to sing for joy, but they also allow us to grieve and to lament, and

to express our sorrow. The words are comforting because they are real, and they are said

by people who know what it means to have good times, and to have difficult times."

(Public Service Transcript)

The Bible passages that were read included these words entreating God to bring comfort in pain:

"Hear my prayer, Lord;

   let my cry for help come to you.

 Do not hide your face from me

when I am in distress.

Turn your ear to me;

when I call, answer me quickly." (Psalm 102: 1-2, NIV)

The Bible passages also included the hope for life after death, as is evident in the following

passage read at a funeral:

"I saw the Holy City, the new Jerusalem, coming down out of heaven from God, prepared

as a bride beautifully dressed for her husband. And I heard a loud voice from the throne

saying, 'Look! God's dwelling place is now among the people, and he will dwell with

them. They will be his people, and God himself will be with them and be their God. He

will wipe every tear from their eyes. There will be no more death or mourning or crying

or pain, for the old order of things has passed away.' He who was seated on the throne

said, 'I am making everything new!' Then he said, 'Write this down, for these words are

trustworthy and true.' He said to me: 'It is done. I am the Alpha and the Omega, the

Beginning and the End. To the thirsty I will give water without cost from the spring of

the water of life. Those who are victorious will inherit all this, and I will be their God and

they will be my children.' (Revelation 21: 4-7, NIV)

The second element that pointed community members towards sharing experiences, was

the choice of songs. The songs invited those gathered to experience comfort in grief through

relationship with God. The song "When Peace Like a River" is one example of this as it was

used in all three funerals:

"Verse 1:

When peace like a river attendeth my way,

when sorrows like sea billows roll;

whatever my lot, thou hast taught me to say,

"It is well, it is well with my soul."

Refrain:

It is well with my soul;

it is well, it is well with my soul.

Verse 2:

Though Satan should buffet, though trials should come,

let this blest assurance control:

that Christ has regarded my helpless estate,

and has shed his own blood for my soul. [Refrain]

Verse 3:

My sin oh, the bliss of this glorious thought!

my sin, not in part, but the whole,

is nailed to the cross, and I bear it no more;

praise the Lord, praise the Lord, O my soul! [Refrain]

Verse 4:

O Lord, haste the day when my faith shall be sight,

the clouds be rolled back as a scroll;

the trump shall resound and the Lord shall descend;

even so, it is well with my soul. [Refrain]" (Public Service Transcript)

Use of the sermon was the third way that the goals of the service for remembering, being

thankful, and grieving took place. At one funeral the pastor began the sermon in this way:

"[Addresses family members by name], you've gathered here together as family with your

friends, church friends, in order to celebrate and to remember Jim. Although his illness

was brief, his death reminds us nonetheless that our lives in this broken world are not

forever. Sin and its consequences, not least in the form of illness, disease, sooner or later

comes calling to claim us all. As fellow travellers with Jim in the faith, we believe that he

has gone home to God, to Jesus. And that connects with those words that I read from John

14. They tell us that Jesus was going to leave, he said "I'm going to leave you but I'm

leaving you only for a while to prepare a place for you and then I'm coming back to get

you so that we may be together in the father's house." It is hard. It's just hard, to leave

someone whom you've known, whom you've loved for as long as you have Joan, over 50

years together. Someone with whom you have lived and whom you have known as long

as you have [names Jim's children]. It not easy. It is not easy to let Opa go. No, it is not.

When you are that close, it's hard. It leaves a big empty place, space, and silences a voice

that no one else can fill. Our hearts go out to you. God carry you in your loss..." (Public

Service Transcript)

   The themes of thankfulness and comfort were expressed by one pastor who said:

   "…the victory of death, real as it is, is none-the-less only apparent. Because, well,

because, it is temporary. It is not permanent. You see, God holds on to people who turn, who

run to him, who seek refuge in him. He holds on to them through thick and thin and he even

sends angels, his angels, to protect, to deliver, to bring them to him… That's how Paul could pen

his famous words 1 Corinthians 15: 'death has been swallowed up in victory, where oh death is

your victory, where oh death is your sting? But thanks be to God who gives us the victory

through our Lord Jesus Christ." (Public Service Transcript)

   Prayer was also used to express grief publicly together. Even if grief was not

acknowledged overtly, the need for comfort was implicit in asking for encouragement during

prayer. One prayer included these words:

"Heavenly Father, you are our rock and our redeemer. In your presence there is neither darkness nor death, we are taught. We pray that you will bless us with faith and hope, in Jesus your son, who by his death conquered death, and by his life opened the doors to eternal life for all who confess him as Saviour and Lord. Bless each one of us Lord, in this service. Bless [Anne's daughter] as she shares a eulogy to her mother, and may the songs we sing, the scriptures we hear – have already heard, but also will hear and will meditate on – may that be an encouragement for us all. May it equip us to be a blessing to others. May it help us to live lives to glorify you. We ask in the name of Jesus our risen lord. Amen." (Public Service Transcript)

Another prayer was spoken this way:

"Almighty God, heavenly Father, our rock and our deliverer. We know that you are here with us, you uphold us, you provide for us, you care for us and, God, you love us. And we have seen that love so much through Jesus Christ your son. And we have seen your love so much also in Jim. Lord, as we come to remember his passing we also remember that your promises are true and real and sound and good. Lord, thank you for bringing us here. Give us your Holy Spirit. Unite us together in your love, in these times of parting. We pray, God, that we may also know and fully believe that we shall meet again around your throne of grace. So, God, to yours be the glory and the honour. And Lord we pray that your presence may be felt among us also in this hour of worship together. And Lord we pray it in Jesus name. Amen." (Public Service Transcript)

The bereaved had an opportunity to share about the deceased within the delivery of a eulogy. The eulogy at each funeral was unique to the relational context of the family members, the deceased, and the community. However, there were some similarities. It was through the eulogy that the bereaved shared their experience of the community member who died and, in

these funerals, the deceased were remembered in an endearing way. Personal characteristics and

interests were outlined, and minor character flaws where acknowledged with humour. The

relationship with, in these funerals, the 'loved one' were verbalized and expressed emotionally.

In some cases, this public expression of relationship included tears, and in others there were no

tears, but there were moments of silence or subdued enthusiasm. One bereaved person said:

> "We will miss his love, his laughter, his goodness. It was such a privilege to have had
>
> him as our father. He was deeply loved and will be dearly missed." (Public Service
>
> Transcript)

Another ended the eulogy this way:

> "...which leaves us with mom's greatest gift for all of us, the Bible. This (holds up an old
>
> book) is the Dutch Bible that mom and Dad took with them when they immigrated... In
>
> typical mom fashion, the cover is held together with electrical tape. Mom was a bit
>
> clumsy and careless and everything was held together by electrical tape, or glue or
>
> whatever she could find. While the cover is ragged the contents are solid. And that's
>
> what mattered to mom. And that's her eternal gift and hope for each one of us. Thank
>
> you, Oma, thank you mom." (Public Service Transcript)

At one of the funerals, three children of the deceased took alternating turns telling the

congregation about their father. The characteristics they shared were positive and they made

jokes at which the community chuckled. The different personalities and experiences of the

children corresponded to the different features they were each highlighting in their father.

As may be evident in the discussion of public expressions of grief in these funerals so far,

each funeral included elements of uniqueness within the service. These generally corresponded

to the passions and talents of either the deceased or the bereaved. One of the deceased enjoyed

poetry, and accordingly the family read poetry in remembrance of him. One poem was written

by Robert Luis Stevenson and was read this way:

> "Under the wide and starry sky
>
> Dig the grave and let me lie:
>
> Glad did I live and gladly die,
>
> Here he lies where he long'd to be;
>
> Home is the sailor, home from the sea." (Public Service Transcript)

Another family had in it accomplished musicians and these family members played and sang

during the service. The musical pieces included *Pie Jesu* by Gabriel Faure, and *Windows* by

John Burge.

In addition to the elements of the funeral service, there were also more material ways of

publicly expressing grief. One of these ways was through the funeral bulletin. Two of the

funeral bulletins had a brief overview of the life of the deceased. The story of the person who

died was described from birth to death with highlights about important events and relationships.

One reads this way:

> "[Jim] was born in [the Netherlands] [in 1933] to [his parents]. As a young man, he
>
> served… in the Royal Dutch Navy where he first began to see the world. He married his
>
> wife [Joan]…, after having met her a few years previously on a blind date. Soon after
>
> being married they emigrated to [western Canada] and subsequently built a home…where
>
> he lived for the rest of his life. He was a painter like his father and grandfather. When a
>
> broken leg sidelined him for a time, he took up estimating. He found he had a real talent
>
> and love for it and remained in that part of the business until he retired. Jim had a deep
>
> love of life and learning. He was intellectually curious and passed that on to his
>
> daughters... What we will miss the most is how much he made us laugh. During his

illness he spoke often of being ready to go home. We will miss him deeply but we know

   that God has gathered him up and has, indeed, taken him home." (Funeral Bulletin)

The other was written as follows:

"Hank was born [in 1930] in [Germany], to [his parents]… he married [his wife] and

immigrated to Canada. Hank was a devoted father and grandfather and will be missed by

[his immediate and extended family]. Hank was a plumber by trade and a self-made

naturopath and health researcher. He had many hobbies: hydroponics, woodworking,

photography and videography, and had great imagination for figuring most things out.

When mom was alive they enjoyed their place at [the] Lake and together they loved going

to [the] swimming pool for recreation. Hank was a gracious host and loved people. His

faith was strong and he was a devoted member of [his church]. After [his wife] died he

lived in [care homes]. He suffered increasingly from dementia in the past three years but

was patient and thankful. Hank will be missed by all, but we rejoice that he is at home

praising God with all the angels and saints including [his wife] and his beloved

daughter…" (Funeral Bulletin)

   The third funeral bulletin included the birth and death dates and places of the deceased, as

well as family members of the deceased who had already died. Also, included in this bulletin

were family members who were descended from, or most closely related to, the deceased.

In addition to these life stories, the bulletin included a thankyou from the family, the schedule of

elements and participants in the service, sometimes pictures of the deceased and bible verses, and

an invitation to join for refreshments after the funeral service.

   Finally, PowerPoint presentations and display tables were used to depict the life of the

person who died. For one funeral, a slideshow was set up in the fellowship hall to be viewed

while people gathered after the funeral. At another funeral, a table was set up in the foyer of the

church, just outside the sanctuary. On this table were reminders of the deceased, as well as a

slideshow of pictures. A community member who was watching with me noted how much

smiling was evident in the pictures. I was struck by the slideshow because every picture

included the deceased *with* another person. The relationships between people was abundantly

and clearly portrayed in these presentations.

Public expressions of grief, then, occurred at both Sunday morning worship services and,

more overtly, at public funerals. During these gatherings leaders spoke to the congregation from

the front of the sanctuary using welcome speeches, bible readings, prayers, sermons, eulogies,

and unique contributions of art to remember the deceased, thank God for the life of the deceased

and for comfort in grief, as well as to acknowledge grief together.

Uniqueness in Community

A major influence on the quality, shape and sequence of the interactions described above

were the personal characteristic of the people interacting. Though there were similarities

between participants there was also uniqueness in community. Factors influencing this

individuality, within the context of this specific community as described in Chapter 4, will be

explored in this section. The distinctness of members depended on the personal characteristics

of the individual as well as the grief experiences of the persons involved in the interaction.

Further, the particular expressions of both grief and faith were unique to the individual. It was

these individual differences that moderated the experience of connection and disconnection

explored above. One participant took a position of openness and grace and summed the idea of

differences up by saying:

> "So, there's no one way…We grieved very differently….and your friends grieve
>
> differently, too, you know? Some make it a bit lighter and some focus on the celebratory
>
> part of, "She's with God," "She's through her suffering," and "We look forward to the

same thing." Others would've been more, "how are you doing?" and make it a little heavier. So, you have to allow for that. It's very important that, like I said, none of us grieve the same way, I don't think…And that's okay, but you need to know it, you need to recognize it for what it is, and you just have to allow for it. It's as simple as that." (Individual Interview)

Personal grieving context. The different personal characteristics and current grief context of community members were evident as they took different positions on the ways of interacting that were experienced as appropriate for them, and the ways that were experienced as inappropriate. In a group interview, participants shared their perspectives and experiences this way:

"Participant 1: You really have to know the person in order to know what they would want. I would want space initially after the death. In the beginning the feelings are too big and I would want time to deal with them on my own first. It would be too much for me to be with other people with the intensity of the emotion.

Participant 2: "I agree"

Participant 1: "Once there was some relief from the pain of grief I would seek out conversations and connection."

Participant 3: "You would ask people to talk with you?"

Participant 1: "No, but I wouldn't say no anymore, I would say I am ready."

Participant 4: "As I grieve I appreciate that my family reminded me of positive memories. It gave me something happy to focus on instead of just negative. I was offended when some people told me to be over my grief in a month. That is not something that is appropriate to say to someone who is grieving!" (Informal Group Interview)

In talking to community members about their experience of grieving in the community it was strikingly evident that the same action (i.e. asking "how are you" at a church service), could be experienced as connecting or disconnecting by a bereaved individual. The differences in personal experiences around grieving are evident by comparing the following two experiences of being bereaved in this community. The first participant shared this reflection on her grieving journey:

"I don't know, some days are better than others. Uh, it's a very personal thing, I think. Everybody has different ways. Uh… Ya. You, you miss your partner. I mean, uh, we were married for [a long time], so… Sundays are not good. Evenings. You know. In the day time you can keep busy and keep your mind off, but when you relax then, yeah, then it can build up. But it's something that you have to go through. Uh, and then you think, well, I'm not the only one so I just better just keep goin'. Ya, some people are very different. They don't continue on with the things, they sort of hide into themselves, which I don't think is good. You know, uh, it's, just go on as normal as you can."

(Individual Interview)

And she shared this experience in the community:

"I think the majority of the people are caring. Like I said earlier, there was people that never really talked to me that do now. I don't know why, but I guess that's their way of sharing… [they] stop me and say, "How are you," and… [wave]. Well, you have that in every gathering, you have cliques, you know. So people from another clique or whatever, you know, now are much more open and friendly to me. That's what I've experience, anyway… Yeah, I guess that's their way of expressing themselves or communication or… I don't know. That's what I've found, anyway, that there's more people that, say

hello or, you know. So they, they do sort of try and feel what you're going through."

(Individual Interview)

Whereas the second participant shared this perspective on her grieving journey:

"There is one thing I do share, when I, when people ask me or I talk about it, when I

talked about how you just, you feel like such, so weak and needy. And [a family

member] sent me a card that said that grief, she wrote in it a quote from somebody, that

said "Grief is not a sign of weakness, and it's not a lack of faith, it's the price of Love,"

and that helps me, because it's just, you just have to trudge through. And ya, there is an

awful lot of lack of, there's a lack of control. I won't lie, I cry every day. I know it is

going to happen, and I don't always know when or why or what will trigger it, but um,

it's, you just, you just cry." (Individual Interview)

And experienced interaction in the community this way:

"I don't think even a [church leader] should approach me in the coffee room with 250

people about, and want to talk about where I am at. And that happens too. And I think

people just need to understand those sorts of boundaries. Because, I live it every

moment, and I work very hard every day, every moment to trying to stay on track, move

forward. There's not a moment that I don't. So, um, it just feels like a bit of an assault if

people just you know, throw you off that track." (Individual Interview)

The grieving context of these two people was different, and their experience of

interactions in the community was also dissimilar. As is clear from these quotes, and what was

observable in multiple conversations with other community members was, the context that

surrounded each member had an impact on how the interactions were experienced. This context

included the circumstances surrounding the death, the relationships with the deceased, the

bereaved, and the social network, as well as the personal psychological resources available at that time to meet the needs created by death.

Personal experiences of grieving. The second major variable that was understood by participants as impacting interactions was the extent to which a member of the community had experienced their own grieving. The idea was communicated that if people had gone through suffering, then they would be able to interact in a more effective way than those who had not had an experience of suffering. A participant shared this perspective:

> "You really cannot know what to do or what is needed [in grief] unless you have gone through something like this before. When you have experienced the pain, or been really involved with someone who is going through it, then you start to have an idea." (Informal Group Interview)

Another participant shared her own personal experience of learning what grief is, she said:

> "Well I really didn't have any idea what grieving was before this. And I couldn't imagine it because, um, through [the deceased's] illness you know, we, we, we went through what, excuse my language, we went through a hell of a lot in a year…" (Individual Interview)

In researching this community my own losses became an asset to the research process. I was introduced to the bereaved family before the first funeral and my loss history was a part of the introduction. This was done as a way of making connection and building trust to witness the family's grief that day. One participant commented, "well, you've been through this, you get it." Another participant said this about how he learned through his own grief experience:

> "That is true for me. A friend of mine is going through the same thing as I went through, I send a text message that I am sad for him and that I am thinking of him. I don't expect a response because I know what it is like." (Informal Group Interview)

So, in some ways experiences of suffering brought connection between community members, however, this was not an absolute rule. Just because a person had experienced loss, or had been close to someone who had experienced loss, they did not necessarily act in a way that connected with the bereaved. One bereaved person noted this experience as concerning:

"…but some of those people [the bereaved] will come to me and say 'Well, ya, I've been thinking about you, and now you know how lonely it is, and it is like that, it doesn't go away.' I never only heard that once, I heard that a number of times." (Individual Interview)

Going through the experience, then, did not necessarily mean having a full understanding of what another person is going through for these participants, or acting in a way that connected with the bereaved. Having a shared experience of suffering did create opportunity, however, to become a point of deepening connection between community members and an experience of personal growth.

Religious faith in grief. Community members differed in their personal grief context in the extent to which they experienced suffering, as well as in how their faith impacted their grief. For some community members, faith was important to bring relief from suffering. One community member wrote:

"All I know is we need the Lord and each other. The Lord brings the peace that passes all understanding and our family (church) help us grief." (Participant Journal)

Another participant wrote:

"My thoughts on grieving are mostly steeped in what my core beliefs are as they pertain to my Christian identity. Grieving by definition is deep sorrow or mourning mainly in light of someone's death. For the individuals that do not have a solid faith base I believe

"grieving" is an entirely different experience than for those who have a faith that includes

an understanding that God has in effect "taken one home." (Participant Journal)

And:

"In the end of the matter I conclude that Jim had a good life, knew the Lord as his Savior,

and was now at rest. Life for us goes on, and we will one day meet again" (Participant

Journal)

A pervasive theme that was communicated publicly during funerals and privately

between participants was "grieving with hope." Many community members believed that crying,

and feeling sad was a natural part of grieving. A church leader stated that:

"…tears, God gave us tears for a reason." (Public Service Transcript)

So, feeling and expressing the pain of loss was one part of how the community envisioned

responding to death.

The other part of responding to death from a faith perspective was to have hope for new

life in heaven. In a sermon after the three funerals, the pastor declared that in their dying the

three deceased "showed us the way" (Public Service Transcript) by trusting they were saved.

Belief in the afterlife, then, brought a hope that gave a particular shape to grief. This hope

worked in such a way as to take some of the fear and pain out of grief. One participant shared

this:

"You know, um, I used to think of death sort of as the last kind of enemy. I don't

anymore, you know. I mean, I'm quite okay. The end of life is death, you know, and, and

the end of that, uh, is the beginning of new life. You know, um, that's, that's okay."

(Individual Interview)

As was discussed earlier, however, the use of faith phrases was sometimes offensive to

those who were experiencing suffering. So, although faith brought comfort to community

members in their suffering, it was best experienced if it came from the person who was suffering and not from those connecting or attempting to provide support.

Conclusion

In this chapter, the themes that were identified by this researcher as emerging from community members during the research process were explored. Under the heading *Drawn to Care*, participants' desire to provide relief from comfort was discussed. The foundational understanding that those who were suffering required special care was underlying many of the interactions between community members around grief. In unpacking the second heading, *What is My Role?*, a description of how the community assessed relational proximity, and used that assessment to guide interactions was introduced. The bulk of this chapter discussed interactions between community members and was organized under the heading *Grieving Together*. This discussion centered around how community members support the bereaved, and how they felt connection or disconnection in interactions. It also included an exploration of some of the assumptions held by community members in these interactions, some of the ways that members' own suffering was remembered, as well as an examination of public communal expressions of grief. The final portion of this chapter, titled *Uniqueness in Community*, dealt with differences in grief which included the personal grieving context, personal experiences of loss, and faith in grief. Variances in these three areas where key to moderating interactions between members.

The findings in this chapter were illustrated using quotes from community members, community documents, as well as observations and experiences of the research team. The purpose of this was to honour the relational nature of knowledge, the relational nature of grief, as well as the experience of the bereaved and community. This chapter, then, represents a relationally constructed description of how this religious community grieved the loss of members together.

Chapter 6: Discussion

In the century since Freud began academic discussion on the psychology of bereavement, much grief research, theory and practice has focussed on the intrapersonal experience of the bereaved (Klaassen, 2010). Researchers and theorists of the past two decades have begun to add to this significant intrapersonal understanding of bereavement to consider the impact of contextual factors on the experience of grief and mourning (i.e. Dyregrov, 2003; Nadeau, 1998; Wijngaards de Meij et al, 2008). Most often this research has explored how the intrapersonal experience of the bereaved has been shaped or directed by outside social factors and influences (e.g., Ata, 2012; Umphrey & Cacciatore, 2014). Several recent studies expanded on this unidirectional research to explore the reciprocal relationship between bereaved partners (Gallagher, 2013; Klaassen, 2010), as well as bereaved families (Bartel, 2016). The current study adds to this important line of relational bereavement research by addressing the gap in the understanding of how community members interact reciprocally with one another following the death of a member.

This study was designed to provide a thick description of relational grieving while answering the question: *How does a religious community grieve the death of members together?* After the death of a member of a religious congregation in North America, a focussed ethnography was conducted. In addition to participant observation, data was collected using individual and group interviews, participant journals, and through the use of community documents. After a preliminary analysis, the data was presented back to the community using a performance ethnography. The community affirmed the preliminary themes presented, and a deeper analysis was conducted on the collected data.

Four major themes emerged from this research process and were presented in detail in chapter 5. The first theme was titled *Drawn to Care*. Under this heading, the expectation held

by both the bereaved and community members that support would be provided for more

vulnerable persons and those deeply suffering was described. In the context of bereavement,

those who were considered to be suffering most were those who were in closest relationship with

the deceased.

In the second theme, titled *What Are Our Roles?*, was explored the community's struggle

to identify who should provide care. In general, the community operated under the assumption

that those closest in relationship with the bereaved were most responsible for providing care.

Some of these people were themselves bereaved, but were at further distance in relationship from

the deceased than those for whom they were caring. Of course, there were exceptions to this, as

sometimes new relationships were developed through the provision of care for a bereaved person

by someone who was only distantly connected prior to the death.

The third theme bears the title of this project, *Grieving Together*, and contains the bulk of

the description of reciprocal interactions and the internal experience of those in the social context

of the bereaved. This included experiences of giving and receiving support, of connection and

missing connection between the bereaved and community members, as well as assumptions held

by both groups of people that may contribute to these experiences. Significantly, the

psychological and social context of some of the community members was described as they

interacted with the bereaved and their own past and present grief. These interactions were both

public and communal as well as private and intimate.

Recorded in the final theme, *Uniqueness in Community*, were the differences that were

evident between those interacting. Sometimes these differences were attributed to experience

with grief, and other times with personal characteristics and preferences in engaging emotion.

Still other times, the participant's beliefs and values were observed to impact interactions around

grief.

Taken together, the description of these themes gave a picture of how this community grieved the death of these members together. The interactions of community members were described using the observations and experiences of the researchers as well as the words of the participants.

Contributions and Implications

This study addresses a gap in bereavement research and adds to existing relational bereavement knowledge, research methodology, and practice. First, the contribution to knowledge is reflected in the description of how community members, both those who were and were not identified as "the bereaved," *reciprocally* interacted after the death of a member. Though research has included reciprocal interactions between parents (e.g., Toller, 2005), description of these multi-directional interactions in community is unique in this field of study. Second, the use of a focussed ethnography to observe the grieving processes of the community from a counselling psychology perspective is a unique contribution to bereavement research methodology. Third, with regards to the practice of bereavement counselling this study contributes by describing some of the process that impacted the ability of community members to interact with those deemed as vulnerable in a way that is experienced as supportive. The implications of these contributions will be discussed below as they relate to theory and practice.

Connecting with previous bereavement research and theory. First, the knowledge gathered in this study confirms earlier work in bereavement research and theory. Specifically, this research (a) highlights the assertion that bereavement happens not in isolation but within interconnected relationships and that bereavement impacts these relationships in such a way that relearning how they operate is necessary, (b) confirms declarations of community attempts to provide structure to the grieving of the bereaved, (c) underlines that the community desires to

care for the bereaved even when this care is miscommunicated, and (d) found that openness to

different grieving styles was a necessity for building relationships in the midst of bereavement.

      Bereavement impacts interconnected social circles. Thomas Attig (2001) describes the

interconnection of the human relationships as "webs of webs" (p. 36), and asserts that this

interconnected matrix of relationships is effected by the death of a significant other. Gilles and

Neimeyer (2006) also refer to the complexity of relationships between human beings as a "web

of connection" (p. 58), and also surmise that these relationships are transformed through the

experience of death. These authors assert that after death the social world must be relearned by

the bereaved (Attig, 2001; Gilles & Neimeyer, 2006). In addition, Vandecreek and Mottram

(2009) explored, from the perspective of widows, changes in relationships with the social and

religious community in bereavement. In their study, Klaassen et al. (2015) identify bereavement

as a relational process through their study of bereaved couples. In her article, Toller (2005)

explains how communication between bereaved parents and the community can impact grief.

Two assertions that were palpably observable in the accounts given by participants in the present

study and which confirmed these earlier studies were that (a) relationships are impacted through

bereavement, and (b) the bereaved must relearn their relational context.

      Bereavement involves the interconnected social webs of the bereaved and the deceased

(Attig, 2006). The participants in this project easily, readily, and sometimes spontaneously,

recounted the ways that those in their social circles were interacting with them in their grieving.

It was clear that relationships were of significant importance in mourning and grieving. As with

the findings of Vandecreek and Mottram (2009), one of the most prominent ways that the

bereaved recounted the days after the funeral was with the outpouring of support through the

provision of meals from those in their community, and support through cards, emails or phone

calls from those in closer relational proximity to the bereaved. Another significant way that the

social circle was involved with the life of the bereaved was in communal mourning at the funeral. Days, months and years after the funeral, the bereaved recounted the experience of the funeral and those who attended, and the impact of this event and those people on their current grief. People were remembered both for the positive and negative impact of these people on the journey of grief. Also, bereaved spouses noted the importance of family members and very close friends in managing day to day tasks surrounding the funeral and the first days of life after the funeral. The bereaved recounted the quality of this support and how it impacted, and continued to impact their experience of grieving. Even more noticeable for the bereaved were the people who removed themselves from relationship with the bereaved around, or shortly after, the death. This painfully clear example highlights what the participants in this study confirmed concerning previous research, that bereavement is *inherently relational*.

In addition, the participants' experiences exemplify that social relationships *changed* with bereavement. Many times, the expectations of these relationships were fulfilled in the support and connection given by community members to the bereaved. The relationships were strengthened and deepened. In other instances, the lack of support, or the miscommunication, was remembered due to the depth of hurt and betrayal that were experienced. In these cases, the relationships floundered and often ended or became superficial and obligatory. In addition, new relationships grew out of bereavement. Some participants noted that new friendships began as the bereaved were shown support and understanding by someone who was previously unconnected, or only peripherally connected, to the bereaved.

There were several other ways that relationships changed and needed to be re-learned. The bereaved reported that their role in relationships became new. First, they had to learn how to accept help, when previously they were the ones supporting others. Second, the bereaved had to learn what it was like to interact with those around them now that someone close to them had

died. For example, bereaved spouses found that re-entering old social circles was

uncomfortable, as they were partly defined in those circles as being married. Third, bereaved

spouses had to re-learn how to have the needs that were previously being met through their

spouse, met through other avenues. This included tasks ranging from changing light-bulbs and

taking out the garbage, to reducing feelings of isolation through social engagement. Often, the

bereaved would turn to the broader community for the fulfillment of these needs, when

previously only closer relationships were intentionally engaged vulnerably.

   The social network frames grief and mourning. As was explored in the literature

review of this study, several authors have written about the impact of community traditions,

norms and expectations on the grieving and mourning experiences of the bereaved. Neimeyer,

Klass, and Dennis (2014), for example, write, "[s]imply stated, society polices bereavement. It

controls and instructs the bereaved how to think, feel and behave" (p. 493). Gall and Guirguis-

Younger (2013), write about the social influence on the bereaved also, explaining that the

community provides a framework for the bereaved to view the stressful event and the grieving

process.

   Participants in this community implicitly and explicitly explained their experiences of

being encouraged to grieve in specific way. As was found in other studies (e.g., Ata, 2012;

Vandecreek & Mottram 2009), participants reflected that the length of time emotional expression

of grief was supervised. In this community, participants were judged as "doing well" if they

returned to regular church participation quickly after the funeral. If someone was absent or did

not participate regularly it was said that they "must not be doing well" and would be invited to

come to church events. The behaviour of the bereaved was watched and verbal suggestions were

made to the bereaved to change their behaviour within certain felt timelines of different members

within the community. Some participants spoke directly about feeling uncomfortable sharing

emotion with the community and feeling the need to employ emotional regulation strategies during community events so as not to show grief. So, in this study also, the impact of community pressure on the grief experience of the bereaved was demonstrated.

The community was also shown to frame mourning practices for the bereaved. One participant who organizes mourning practices, explicitly shared that the intention of this framing is to help the bereaved express their grief, and to feel supported on the day of the funeral. The participants in this community largely found the day of the funeral to have a positive effect on their grieving experience and their relationship with the community. Space for mourning was created on the day of the funeral, the bereaved reported that this framing was appreciated and remembered. During research, the day of the funeral was the only mourning period carved out for the bereaved. Private grieving practices were subsequently the only outlet for the bereaved. The topic of community framing of bereavement is covered in further depth elsewhere (i.e., Neimeyer et al., 2014). This practice of expressly framing mourning on the day of the funeral and inviting the rest of the emotional experience of the bereaved to be constrained to personal grief confirms previous research on the boundaries of grief and mourning enforced by communities.

Style of communication impacts the grief experience of the bereaved. Some authors have identified bereaved dissatisfaction at communication within social relationships, finding that some relational communication is experienced as offensive, oppressive, or hurtful (e.g., Dyregrov, 2003; Toller, 2005; Vandecreek & Mottram, 2009). Hooghe and colleagues (Hooghe et al., 2011) found that when a bereaved person was sharing an experience of grief with a listener, the position of the listener as opened or closed had an impact on the grieving of the bereaved. Wijngaards-de Meij et al. (2008) noted that when couples were accepting of the unique grieving characteristics and preferences of their spouse, the relationship continued and

the couples had a better adjustment to the death of their child. Toller (2005) suggested that

openness to the needs of the bereaved was more desirable for sharing grief. Openness and

emotional space for differences in grieving styles may be beneficial for relationships, while

misunderstand and miscommunication are experienced as hurtful and often lead to broken

relationships.

Participants in the current study provided further evidence supporting the concept that

intentional and sensitive communication was preferred. Bereaved participants also described

their experiences of being hurt or feeling misunderstood by people who interacted with them.

Dyregrov (2003) describes the phenomenon of feeling betrayed by the community as "social

ineptitude" (p. 31) and outlines many similar experiences as were expressed by the bereaved in

this study. Participants shared experiences of what Dyregrov (2003) calls "unsuccessful

communication" (p. 31). That is, community members interacted with the bereaved and the

bereaved felt unsupported, oppressed or offended in some way as a result of the interaction. The

bereaved shared that those who were experienced as more understanding and opened provided

better grieving support for them. Some participants also shared that an attitude of understanding

from the bereaved towards the unique attempts of the community to communicate support is

helpful for accepting their support. In this way, community members confirmed earlier research

that describe the stance of the social support as important for experience of relationship and

experiences of grieving in community.

Novel contributions in the psychological exploration of bereavement. In addition to

confirming themes and assertions made by earlier researchers and theorists in the study of the

social contextual impacts of bereavement, this study adds unique and new aspects of community

bereavement. These include (a) the reciprocal grief interactions between community members,

particularly the perspective, experience and motivations of community members interacting with

the bereaved, and the internal experience and reaction of community members more distally

impacted by the death of a community member, as well as (b) the novel use of a focussed

ethnography in the study of community bereavement.

Reciprocal grief interactions in community. Due to the historical context in which

bereavement research is embedded, the contribution of evidence for, and description of, the

reciprocal interactions between those identified as bereaved and those identified as community

members is perhaps most salient at this moment in time. As has been asserted multiple times,

the unidirectional focus of much bereavement research and theory on the internal experience of

the bereaved required expansion. Even as research has been expanding to integrate the social

aspects of grieving, these factors have focussed attention towards how the community impacts

the bereaved. It has been unidirectional. This is even evident in the ways that this study

confirms previous research, it confirms the experience of the bereaved in community. The

experience of community members, those in the social network of the bereaved, has yet to be

discussed. To this author's knowledge, this study provides a first look at the multidirectional

description of bereavement between people in community.

There are two main experiences that were described in this study that are particularly

significant. First, the internal experience of community members as they interact with the

bereaved, or the idea of the bereaved is important to outline. Even before community members

actually interact with the bereaved, participants in this community expressed an internal

decision-making process on how intentionally to interact with the bereaved. The community

member's relationship with the bereaved, the perceived social supports of the bereaved and the

assumed level of suffering of the bereaved were all evaluated. Then the time and resource

constraints of the community member were taken into account. All of these underlying

processes of providing bereavement support for the community member have remained under-

researched, even as the supports of the bereaved have been criticized. Perhaps most important,

and as connects with Dyregrov's (2003) findings, are the community reports of an underlying

desire to care for the bereaved. Participants in this study felt compelled to provide support, and

potentially even attempt to alleviate the distress of the bereaved. The implications of this will be

discussed later in this chapter, however, it is significant to remember that participants in this

community wanted to care, and assessed their roles before attempting to interact with the

bereaved.

The reciprocal nature of bereavement in community can be highlighted with regards to

the internal experience of the community members. Just as the community member desired to

provide care, the bereaved expected to be cared for. Between two people in the community was

a shared desire for the care of the person deemed to be suffering. A shared understanding was

also present when community members were deciding how to be involved, and by whom the

bereaved were expecting to feel supported. The shared understanding was that those with a more

intimate relationship before bereavement, would continue to be more intimately involved during

bereavement. When assumptions about 'who' and 'how' differed between the bereaved and

community members, or between community members relationships were strained and negative

reactions became evident. The description of shared understandings is novel in the field of

bereavement research and theory.

Second, the internal experience of community members more distally connected to the

deceased is described originally in this study. Reasonably, the experience of those most

intimately connected with the bereaved has been the focus of previous research and theory. This

has included the individual, couples, and then families. The logical expansion of this research is

to begin exploring this next expansion of the circle of connection with the deceased. In this

study, the impact of a death in the community varied from person to person, but the fact that

there was impact is important to consider. Some participants reported feeling the empty space

left by the deceased. These people actively grieved for the deceased by attending the funeral, by

talking about the deceased with intimate people in their own social network, and through

religious practices. Others, were reminded of their own experiences of grief over the death of

someone intimately related to themselves. These people also sought out people within their

social networks to share their grief. For some participants, the impact was only reported as

noticing the name in the bulletin. Still, the important fact is that in this community, when a

member died community members had an internal response to the death and the bereaved.

This internal experience of community members, as has been described in this study, is

novel in the field of bereavement research and theory. The focus has largely been on the internal

experience of the bereaved, even when studying the bereaved within their social context.

Understanding that there is reciprocal interaction with community members, which includes

shared assumptions, traditions and practices is important. This understanding must include the

internal experience of community members, and the impact of the death in the community

beyond those most often identified as bereaved, and most often identified as suffering.

Focussed ethnography in bereavement research. A second major contribution of this

study to the field of bereavement is methodological. The use of a focussed ethnography to study

grief in community was, to this writer's knowledge, novel in bereavement studies. Additionally,

the use of a focussed ethnography within counselling psychology contributes to an increasing

understanding of the influence and importance of context in understanding and helping human

beings.

First, using a focussed ethnography is unique in studying communal grief. Due to the

intrapersonal focus of much bereavement research, bereavement study has largely been pursued

using methods such as individual interviews, autobiographical accounts, and literature surveys to

try to gain access to the internal processes of the bereaved (e.g., Ata, 2012; Bergstraesser et al., 2015; Walter, 1996; Weinstein, 2003; Wijngaards-de Meij et al., 2008). Ethnographic observation of interactions between people who are part of a bereaved community, triangulated with the aforementioned intrapersonal methods, has not been conducted. This may be the case because community relational grieving has not been studied until now, and therefore the need has not arisen to use an anthropological method in studying grief.

Using a focussed ethnography to study, specifically, relational grief in community has contributed both suggestions and cautions for future relational grief research using this methodology. A major benefit to using a method in a novel way is that this provides future researchers with an understanding of some of the highlights of using this method with this population studying this topic. One of the main benefits of using a focussed ethnography in studying community grief, is that bereaved community members can be observed as opposed to self-report. As Simonds et al. (2012) explain, recounting past experiences months after the event often gives a different perspective than observing or reporting current experiences of events. In this study observations of community events often encompassed mourning as opposed to grieving, but informal and formal interviews of, as well as journal reflections from participants during the initial period of bereavement did give in the moment internal representations of participants' experiences.

In addition to obtaining immediate reflective participant experience, another fruitful method of data collection in this community was being present at community events. People who did not sign up to be officially contacted for a formal interview or for a journal had easier access to the researchers. The fact that the researchers were present consistently for two months allowed for participants to build courage in sharing their grief experience in the church hallway or foyer, when they may not have been able to share these experiences in a more formal or

structured way. So, this method allowed for access to perspectives that may otherwise have

remained hidden. It is worth mentioning that this method may have been particularly beneficial

in this community as many participants self-selected out of participation based on their

perceptions of "not grieving." By being present and visible in the community for an extended

period of time the researchers were able to reassure participants that their experiences were

valuable even if they felt they were not grieving, or a good fit for the study.

Though these examples highlight the benefits of this method, there are downsides to

using an established method in a novel context. Through the process of gathering data,

analysing, and writing, several cautions have emerged with regards to using a focussed

ethnography in a bereaved community. First, the scope of observation was quite broad, and the

community was large. This means that the results of this study are necessarily general and

broad. Participants shared their experiences and several over-arching themes emerged, however

there is much room for subsequent research to explore and describe the experiences of

participants in more depth.

Second, gaining consent from the community presented with several problems. First,

because the method included several different ways of collecting data, which was good for

triangulation and assuring quality, informing the community of the project was difficult. A

longer presentation was possible to the leaders of the community, however to the general

congregation a much shorter presentation was required along with an invitation to attend a

special presentation. The short presentation to the congregation may have been responsible for

miscommunication and the passive self-selection out of participation by community members.

Taking time to explain the project, the different opportunities for participation and how to opt out

of the study, did not allow time for defining grief in terms of the study, and led to participants

deciding they did not fit the criteria when in fact their experience was valuable, as well as a large

proportion of participants identifying as being recently bereaved. Clearly defining what was meant by grieving for the purposes of the study, may have been one way of preventing this misunderstanding and the subsequent effort to recommunicate.

Not only has this method contributed to bereavement research methodology, it has also added to counselling psychology by giving an example of the use of focussed ethnography for the purposes of a psychological understanding. Ethnography has been used with an exploration of community within the field of counselling psychology (e.g., Bezanson, 2008) and Simonds et al. (2012), explain that employing a focussed ethnography may be of use to researchers in psychology. However, there are few studies exemplifying this method and therefore this study gives illustration of one way of applying a focussed ethnography for the purposes of research in counselling psychology.

One contribution this study provides to research in counselling psychology is in the exploration and description of the internal experience of two people interacting with one another. In this study, the reciprocal interactions between participants are described as these events were experienced by both bereaved participants and community members. The fact this method opened the door to observed and describe both perspectives, and how these perspectives are connected to and housed within community processes allows for new explorations of how to work with people and their context.

This study has contributed new information to the field of the study of bereavement. First, the description of reciprocal interactions between community members in a bereaved community is novel. This includes the perspective of the bereaved in community, but especially adds the internal experience of community members as they interact with the bereaved, and as they deal with a death in their community, to bereavement literature. Second, the use of a focussed ethnography in bereavement research is unique. This adds a potential example for

future research using this method to study communal grief. The use of a focussed ethnography is also relatively scarce in the field of counselling psychology, and so this project contributes to this field methodologically. In these two ways, this study adds an important description to the fledgling study of community relational bereavement.

Theoretical implications. This research project has implications for bereavement theory and research. Noticeably, previous relational bereavement theory is confirmed as this study has uncovered processes and experiences that have already been documented. Also, it is clear that earlier models of bereavement must be expanded in light of the descriptions presented in Chapter 5. Discussed first in this section are the ways this study bolsters assertions that bereavement is contextually situated, relational, and interactional, and what this means for the field. Then how the current model of bereavement can be expanded to include reciprocal interactions related to bereavement in community, is outlined.

The relationality of grief has been clearly presented in this study, following previous researchers' assertions and investigations (e.g., Klaassen, Young, et al., 2015; Neimeyer et al., 2014; Toller, 2005; Walter, 1996). The fact that grieving takes place within a relational context, and that those within this relational context impact the grief of the bereaved, is abundantly clear through this and other studies (e.g., Dyregrov, 2003). This study, then, adds more evidence to the fertile ground out of which a truly relational theory and model of bereavement may emerge and be supported. It is not that relational ideas have not been discussed, but that through the addition of this study more force may be given to a focussed effort to develop a primarily relational model of bereavement. The ways that interactions between people within networked groups, be they parental, familial or in broader communities, can begin to be mapped so that healthier ways of grieving in these systems will be promoted. This study points to the importance of developing a model that accounts for the experience of bereavement on people

within the social network. It highlights the need for a relational theory and model of

bereavement that is interactional and shows the reciprocity of bereavement between those

deemed bereaved and those identified as support for the bereaved.

Not only has the relationality of bereavement been supported in this project, but the

process of both active grieving and coping with grief, within and between community members,

has also been indicated. In their presentation, Klaassen, Gallagher, et al. (2015) wrote that

"relational grieving is the personal decided engagement with the loss of life-relevant values in

which we share our turning towards with another person." Participants in this study clearly

described moments where they intentionally created space for facing their grief with another

person. Additionally, community members also described times when they intentionally created

space for the bereaved to share their grief. The carving out of emotional time and space for the

express purpose of approaching suffering caused by death, and how this is done within the

context of social networks of differing levels of intimacy, can now be discussed more openly and

accounted for in theories and models of bereavement.

In their attempt to bring together the different theories of bereavement into one model,

Stroebe and Schut (1999) describe the oscillation between coping and grieving, which is also

indicated in this study. Though there is potentially the argument that as opposed to oscillation

between the two poles of facing grief and coping with grief, the bereaved can hold both the pain

of grief and the distraction of coping at the same time, both of the processes are evident in this

study. Participants in this study talk both about wanting to share about the deceased and have

reprieve from the chaos of emotions accompanying grief. This is important as it appears that the

balance of facing grief and coping with grief, sometimes at the same time, is necessary for the

sharing of the pain of death with another person. Theory can now begin to account for the

relational dimensions of grieving and coping with grief.

The other aspect of relational grieving that is highlighted in this study is the posture of openness as was described by Dyregrov (2003). Some bereaved participants described preparing themselves to interact with the unique perspectives and styles of others' grief that may be experienced as offensive. As Dyregrov (2003) theorized, participants in this study verbalized the disconnect between the intent and desire of community participants and the messages received by the bereaved. Some of the bereaved described their perspective towards community members as feeling offence at miscommunicated support, while others reported that they made space for differences in communication style, and emotional ability, of community members to connect with the suffering of the bereaved. This study, then, adds support for, and calls for more thorough research into, theory addressing miscommunication between the social network of the bereaved and the bereaved themselves.

In addition to reinforcing current directions of theory development, the implications of this study include the development of a new dimension of bereavement theory. It is clear from the descriptions of and by participants in this study, that community members have their own experiences, motivations, reactions and characteristics that influence how they are impacted by death in their community. This in turn impacts the way they interact with the bereaved in the community. This study contains broad evidence that a model accounting for these processes of reciprocal interaction may benefit research and practice in relational bereavement.

Theories exist that describe the process of contextual factors on different aspects of human experience. For example, Bronfenbrenner's (1979) ecological model describes the different layers of interaction in a social environment and how these, in turn, interact with the biological characteristics of a person to shape an individual's development. In his model, layers are shaped by, and shape, characteristics of other layers. With the expanding focus of bereavement theory to account for such areas as, but not limited to, public policy (Granek, 2014),

history (Klass & Walter, 2001), religion (Kissane and Lichtenthal, 2008), family dynamics

(Bartel, 2016; Nadaeu, 1998), parental bereavement (Gallagher, 2013; Klaassen, Young, et al.,

2015), and now community bereavement, a model is necessary to begin to connect these areas of

discovery in one place. Without necessarily engaging Bronfenbrenner's (1979) developmental

theory, we can use the depiction of the ecological model to house these broad categories of

bereavement theory and research as is briefly described in Figure 6.1. One major implication of

Figure 6.1. Example Model of Interactions Contributing to Grief Experiences

Time and History:
Immigration, Settler
Life, World Wars,
Great Depression

Broader Cultural
Beliefs and Values:
Individualism,
Happiness,
Productivity

Larger Social
Systems: Financial
system limiting time
off for grief, War
Policies

Resources and
Challenges Caused by
Interaction Between
Social Network and
Other Systems

Social Network:
Community Member's
Experiences,
Characteristics, and
Preferences

Time and History

Cultural Beliefs and Values

Social Systems

Interaction

Social Network
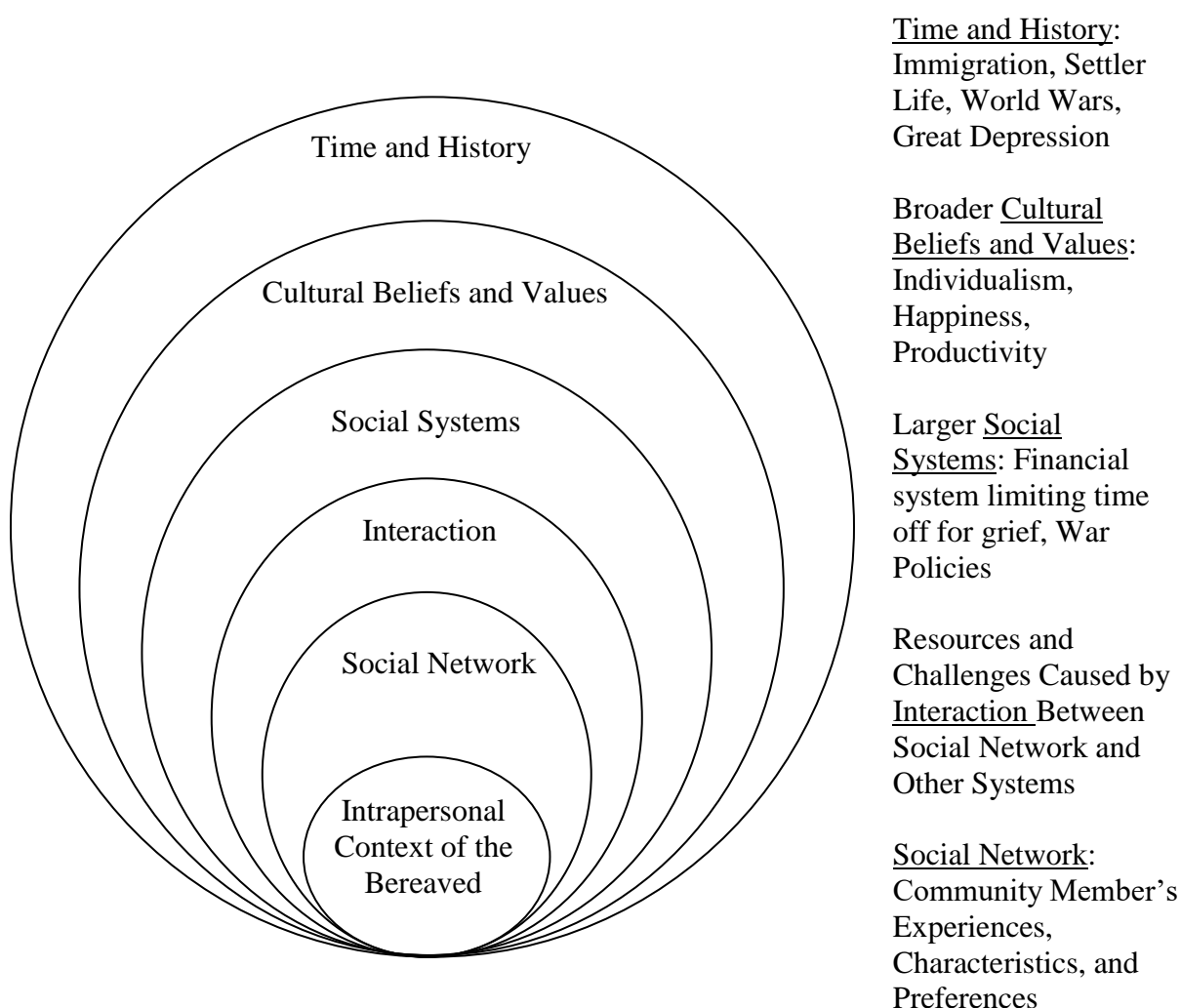
Intrapersonal
Context of the
Bereaved

Figure 6.1. Bronfenbrenner's (1979) ecological model visual depiction adapted to
organize contextual factors of bereavement and account for reciprocal interactions between
community members and the bereaved.

this study is that the further development of a model accounting for, at the very least, these contextual factors reciprocally interacting with the bereaved. In this study participants described their own experiences of the influences from their context. Specific individual, social, geographical, and chronological contextual factors were reported. The context of the death, as another example, was also described as important. The context of the location, in western North America, was described as having an impact on grief. The historical context and the influence of such factors as immigration, living as settlers, and the world wars were all discussed as historical factors impacting the current context of bereavement. In addition, the way that these factors were specifically represented in individuals' experiences in this community and how these came to bear on interactions with, and expectations of, the bereaved were expressed by participants. Having a model to describe the impact of levels of the particular context may bring more understanding to bereavement, and aid in promoting healthy ways of grieving and supporting the bereaved.

John Berry (2003) proposed a model of acculturation, where two groups of people with different cultural assumptions and experiences come together and impact one another resulting in psychological change for one or both parties. This may also be a helpful tool for describing the experience of the bereaved and to consider merging with the model of contextual factors mentioned above. Berry (2003) describes different levels of interaction and change when people with different experiences relate with one another. This could also describe the experience of reciprocal interactions between the bereaved in, and with, which they grieve. Berry's (2003) model can further illuminate how the interactions between the different layers mentioned above, takes place bringing understanding to reciprocal interactions.

A second dimension that is unaccounted for in current bereavement literature is that of community timelines of expression, experience, expectations of, and support for, bereavement

and the bereaved. In this study, there seemed to be a period of intense support for the bereaved

in the week following the death. After this time period, support seemed to wane. Intentionally

created communal space for the bereaved seemed to follow a similar pattern of decrease after the

first week of bereavement. An implication of this study is backing for the research and

development of a model of common community timelines around grief.

One potential model for describing this process can be found from community disaster

management responses (Myers & Wee, 2005). This model describes communities who are

impacted by a disaster such as a flood. The community went through the different phases

described in Figure 6.2. As was presented in the current study, the community tended to pull

together directly after the disaster, engaging intently in relationship. After this, the community

drifted away from the bereaved. The bereaved described their experience of relationships in the

community, at times, as more distant than before the death. More research is necessary to

understand if the rest of the model fits relational bereavement, but some bereaved expressed their

re-connecting with the community after some time. Other bereaved described their experience as

continuing to be distant following the death. Understanding these processes, and being able to

depict them may help educate the bereaved-on expectations, and the community on potentially

helpful support processes. This could also point toward areas of future research.

There are implications for bereavement theory and research as a result of this current

study. First, a model inclusive of relational aspects of bereavement, such as reciprocal

interactions, grieving and coping, and openness is further substantiated through this project. In

addition, the development of a model connecting different aspects of relational bereavement is

warranted. This may follow the pictorial depiction of Bronfenbrenner's (1979) ecological

model, or the development of a completely new model. Inclusion of a timeline of community

bereavement in the model will also be necessary given the importance of time in the experience

of participants in this study.

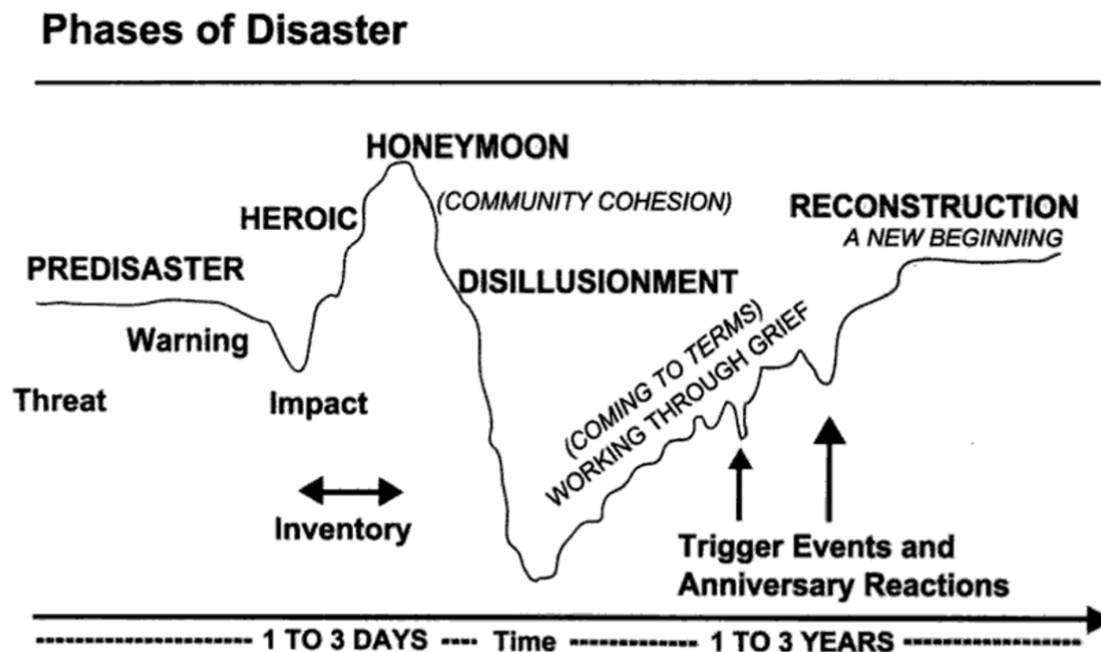Figure 6.2. Phases of Community Response to Disaster

Figure 6.2. Depiction of community psychological responses to disaster for comparison to community psychological responses to bereavement. From "Disaster Mental Health Services: A Primer for Practitioners by D. Myers and D. Wee, 2005, p. 18. Brunner-Routledge NY, New York.

Implications for counselling psychology. The description presented in this study also

has implications for assessment and treatment in counselling practice. The first proposition that

arises out of this study is that counsellors can assess for the impact of a death in the community

with community members who may only be distally connected with the deceased. The second

suggestion, that is supported by this study, is that healthy support for the bereaved from the

community requires intervention and advocacy within the community. A third impact of this

study is the knowledge that counsellors working directly with the bereaved may benefit from

helping the bereaved to express and direct anger appropriately, which may increase access to social support.

As the main contribution of this study is the addition of the community members' experience of bereavement within their community, a major implication of this research is the assertion that community members are impacted by bereavement even if distally related to the deceased or the bereaved. The changes in clients' environments when a death occurs in their community, then, can be assessed and explored. These changes may increase stress levels for clients. Given that participants in this study shared that death in their community reminded them of their own past losses, and that they wrestled with their roles as supporters to the bereaved, the impact of either grief or guilt respectively can be discussed. For some clients, minimal impact on presenting concerns will be perceptible. For other clients, however, these types of reminders or stressors may significantly, and negatively, shift their emotional stability. In addition, how clients respond to the grief of the bereaved as recounted in sessions may indicate their own comfort levels and characteristics of tolerating suffering. These situations may present powerful opportunities for interventions and treatments focussed on growth in emotional regulation strategies and the facing of loss related emotions.

These assessments and treatments can help clients grow in therapy, but the underlying assumptions may benefit whole communities as well. Participants in this study noted that at times they felt frustration toward the community for not being able to interact with them positively in their suffering. With the description presented in this study of the experience of community members providing a position of understanding, community level interventions focussed on compassionately encouraging community members growth in their emotional capacity to tolerate suffering may impact the support experienced by the bereaved. Groups, for example, can be created for the support system of the bereaved that teaches emotional awareness

and regulation, as well as how to intentionally create space for the suffering in bereavement. Workshops can focus on educating communities on common experiences of grief for the bereaved as well as for community members. Using the perspective presented in this study, that community members desire to care for the bereaved, exploring the roles and personal stances of community members may be possible in workshops on supporting the bereaved. Through this study, communities may begin to learn how to interact with the impact of bereavement in their context.

　　As this study describes the reciprocal interactions in bereavement, the bereaved may also experience benefit from this study, in therapy. This third implication must not be taken out of context or the vulnerability of the bereaved may be exploited in service of community members avoidance of suffering. In some cases, bereaved participants in this study expressed grief related anger directed at the community for failing to provide support tailored appropriately to their preferences. This situation was described in this study under the section of assumptions, and, though counsellors are expected to care for the most vulnerable, the assumptions of the bereaved may also be inhibiting their own access of social support. As Dyregrov (2003) also points out, the perspective of the bereaved can help them interact with community members intentions positively. If appropriate, and in safe environments, the bereaved may be invited to explore whether their pain is being directed unjustly as anger towards a community. In some cases, teaching the bereaved how to express anger in a healthy way, or exploring the deep pain of sorrow expressly, may allow the bereaved to interact with those in the community who may be meaning well, but not expressing well. Again, this is one side of a two-sided intervention. The bereaved may be invited to another perspective, but the community must be invited to change as well.

The influence of this study, then, includes an impact on counselling psychology. First, therapy with clients who experience a death in their community may include exploration of the impacts of this death as well as the use of this opportunity to explore and expand emotional regulation and tolerance. Second, community advocacy and intervention can include groups or workshops focussed on expanding the community's ability to tolerate and create space for bereavement related suffering. Finally, in work with the bereaved, the bereaved may be invited to explore whether their pain is directed unjustly as anger at their community. These are three implications of this study in the area of counselling psychology.

Limitations

This study was designed as an initial foray into an area of bereavement theory, research and practice that had yet to be explored. For this reason, it was not expected to be, nor was this study exhaustive in the area of community bereavement. The limitations of this study are discussed below and include (a) the method and circumstances limiting transferability, (b) a small sample of the community, many self-selecting out and an over representation of bereaved, (c) this study did not include children who are an important part of the community and (d) a shortened timeline.

First, a focussed ethnography limits transferability to the particular context explored (Simonds et al., 2012). This was a calculated limitation, as the method fits both the assumptions of this researcher as well the underlying assumptions inherent in relationally defined bereavement. However, the downside to using an ethnography is that the results are limited to a description of this particular community and not necessarily transferable to other communities. The preliminary results of this study have been presented at several different venues ranging from conference presentations to small groups, and have been received with communicated connection to the descriptions. It is also anticipated that, at the very least, parts of this

description will connect with other communities. Due to the limit of transferability, these

connections should be used discerningly instead of prescriptively.

A second limitation was the relatively small number of community participants who

presented for the study. The community that participated ended up being a subset of the full

population of the church community. These people self-selected into the study for participation

while others selected out. This means that many of the participants' experiences making up the

description were themselves bereaved and somewhat comfortable with discussing the topic of

grief. The results are believed to be representative of the people who participated in the study,

but without talking to each, or even most, people in the community it is not possible to

generalize these findings to the whole community. Some perspectives are likely to have been

missed.

In addition, the small sample size only included four journal participants. The daily

journal was relied upon to provide insight into what happens for community members who are

not identified as bereaved when they are not at a community event. Due to the low participation

rate of this data collection method, limited information from this method was available for

description of how community members grieve with each other outside of church events. The

data collected from these four journals corroborates interview data which indicates that many

community members do interact around grief when they connect with each other between

community gatherings. More journal participants would have been ideal, and would have

provided more thorough description of these intimate connections.

Third, and of significant importance, is that this study did not include children as part of

the study. Due to logistical restrictions, the focus of this study was with adults in the

community. However, children are substantially regarded as participants in this community and

the absence of their perspective is regrettable. Several participants shared the impact of

interactions with children and lamented that their perspective was not explored in this study.

Also, the impact of community death on children may be theorized to contribute to how reactions

to grief are shaped in the future perspective and experience of these community members. Also,

the exploration of how adults in the community communicate death and grief to the children in

the community may give insight into community values and practices.

Finally, this study took place over the course of two months which is a short-term study.

The limits of time are significant for several reasons. First, grief is experienced as a long-term

experience with the effect of change over time having significant impact (Klaassen, 2010).

Second, in the study period three deaths took place which was reported as uncommon by

participants. This may have extended the periods of interaction around grief, and likely could

distort the regular community patterns of grieving. Being in the community over a longer period

of time may have given a more consistent representation of bereavement over the course of a

year or years.

Future Research

As has been noted numerous times in this study, and by other authors (e.g., Klaassen et

al., 2014; Walter, 1996; Neimeyer et al., 2015), there is room for much more research focused on

relational bereavement. Though this study has begun expanding into the area of community

relational bereavement, the surface has merely been scratched and further research opportunities

for study are plentiful. In this section future research opportunities will be outlined. First, the

further inquiry required to describe in more detail the social network of community members

will be discussed. Next, an exploration of the role of children in the community will take place.

Third, an outline of questions raised in this study about how comfort levels with negative

emotions may impact the ability of community members to support the bereaved, will be

presented. Finally, the research area of the impact of history on community relational

bereavement is reviewed.

As this study is broad, research into the details of reciprocal interactions between

community members is required to more fully understand the reciprocal impact of bereavement

in community. Specifically, more research is needed to uncover how a community member, not

identified as bereaved, is impacted by a death in the community. An in-depth exploration of the

emotional impact of the death, as well as the impact on the community member of interacting

with the bereaved, is required to better understand the relational impacts of bereavement.

Secondly, a description of the way that community members, who have an expected supportive

role interacting with the bereaved, share their experiences with, or rely on, their own social

network would benefit understanding of relational bereavement. A study exploring the day to

day life of those in the community of the bereaved, and tracing the sharing of grief throughout

social networks, can give insight into (a) how community members are impacted and how to

better support those who are impacted by a death, yet not identified as the bereaved, and (b) what

barriers exist for community members who desire to support the bereaved, but miscommunicate

their intent.

Second, and as was noted in the limitation section of this chapter, future study

opportunities exist in exploring the role of, and impact on, children in a bereaved community.

Several bereaved participants shared concern for the perspective and experience of children who

interact with the bereaved in their social networks. As was stated earlier, children were valued in

this community, and the missing reciprocal interactions between children in the community and

community members is itself a loss. Also, the way that adults interact with children around grief

may be telling as to implicit community values, assumptions, and traditions. This area of study

requires sensitive researchers and methodology, but may be enlightening for both the community

and the field of bereavement.

Third, one of the questions that is raised out of an understanding of bereavement, as well

as psychology surrounds the role of emotional tolerance of suffering by community members.

One way of theoretically explaining the miscommunication of support by community members is

by describing their position as having an unfamiliarity, discomfort, or intolerance of their own

internal feelings of distress or suffering. Detailed research into the emotional space available to

community members when interacting with the bereaved may be helpful in identifying how

miscommunication takes place. Emotional experiences of role-confusion, lack of knowledge

about expectations in grief, as well as guilt for limited actions, were all expressed by participants

in this community. This points to internal emotional experiences that may be preventing

community members from following through with support in a helpful way when interacting

with the bereaved. Understanding what is going on for individual community members, both

those who were experienced by the bereaved as helpful and those that were experienced as

hurtful, will benefit communities, and the bereaved.

Finally, and related to understanding the internal experience of community members, is

the opportunity for future research to explore how historical experiences may have shaped

communities. In this study participants shared their understanding of community traditions as

shaped by immigration, hardship and world wars. In this community, history was reported as

influential, so a thoughtful understanding of, and a clear description of, how history has shaped

emotional expressions, experiences, and expectations may benefit this community.

Understanding history may also help counsellors or others working with support systems to have

compassion on community members. This may benefit relationships and allow for growth in all

relationships, instead of anger, creation of further barriers, and the reduction of the social

networks of the bereaved.

Briefly presented here are four potential areas for further research. Describing the social

network and experience of the bereaved was described first. The importance of exploring the

perspective and experience of children was also outlined. Researching the emotional space

available to community members when interacting with the bereaved may benefit community

relationships. Finally, the role of history in community relational bereavement can be studied.

Due to the broad nature of this study, there are other questions that are raised by this description.

This is, however, only the beginning of studying relational bereavement in community.

Conclusion

Describing grieving as relational is a more recent development in the field of

bereavement (Klaassen, Gallagher, et al., 2015; Walter, 1996), and to which this study adds

additional support. The research question that was explored in this study was: *How does a*

religious community grieve the death of members together? A focussed ethnography was the

methodology used, which included observations, informal interviews, the collection of written

data, journals and a performance ethnography. What resulted from the analysis of this data was a

description of how community members and the bereaved reciprocally grieved together.

This description confirmed previous research and theory which asserted that bereavement

is not experienced in isolation but within a social network that Attig (2001) described as "webs

of webs" (p.31). It also adds new information to the growing field of relational bereavement,

and draws further attention to the impact of bereavement on people within the social networks of

the deceased and the bereaved. Specifically highlighted in this study, is the fact that community

members are impacted uniquely by bereavement in the community and respond in ways that are

defined by their own experiences of emotion, relationship, and grief. Further, uncovered through

this study are additional opportunities for research in this field. Not least of which is further

study into the impact of bereavement on community members, including children, and the study

of the history of grief in a community.

       One way of describing how the bereaved in this community experienced their own grief

is that their experience of grief is sacred. When this sacredness is realized by those in their

social network, relationship is built. When time and space are not considered when interacting

with the bereaved, barriers to relationship and grieving are raised. This causes further rupture in

social connections, isolation for the bereaved, and further suffering in both community members

and the bereaved. Not only does "bereavement [strike] a blow to … our person, family, and

community integrity," (Attig, 2001, p. 36), but reciprocal interactions after bereavement have the

ability to further fray relational connections. As disastrous as this can be, these reciprocal

interactions can also bring healing, relationship, and beauty, mending the webs, building new

connections and holding space for human suffering and beauty as we grieve together.

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Appendix A

Introduction Letter for Communities

(*Name)* Christian Reformed Church
(*Address*)
(*Date*)

Dear Council of (*Name*):

      My name is Ben Bentum and I am a member in good standing of the Christian Reformed Church in North America (Langley Immanuel), the son of a dairy farmer, a former youth pastor at Cornerstone CRC in Chilliwack, and currently a Master of Arts candidate in counselling psychology at Trinity Western University. As part of my training as a counsellor, I have chosen to complete a thesis and am wondering if your community would consider participating. The question I am pursuing is: *How does a religious community grieve the death of members together?*" I would be grateful for the opportunity to present more information on my study directly to council, and answer any questions you have as you decide whether your community could participate.

      If, after the presentation, you decide that this may be an opportunity for your congregation, I would require making a presentation to members of the congregation giving them the freedom to decide whether or not to participate. Due to the sensitive and painful nature of this research topic, it is my commitment and responsibility to inform of potential harm, allow freedom to refuse to participate, and provide resources should anyone need them on account of my work.

      My personal grief with the loss of close family members and friends, my experience within the CRCNA, and my training and research have caused me see a need for a deeper understanding of how communities grieve together. If you decide you are willing to hear my presentation, there is no obligation to commit to the study. If you have any questions please feel free to contact me. If you have any concerns they may be directed to me [email address] or [telephone number] or to my supervisor, Dr. Derrick Klaassen, RPsych, at: Derrick.Klaassen@twu.ca

Thank you for your consideration.

Blessings,

Ben Bentum

Appendix B

Bulletin Announcement

Dear (*Name*) congregation, towards completion of my Master of Arts degree in Counselling Psychology at Trinity Western University I have chosen to complete a thesis through which I hope to gain a better understanding of how a religious community grieves the loss of one of its members together. To gather this information, I will be participating in the (*Name*) community for a short period of time to collect observations. I will also be inviting those who are interested to participate in interviews and/or a journal. I personally understand the pain of grief, and if at any time you want to choose to not participate in this study you are welcomed to do so. Please contact Pastor (*Name*), (*Name of congregational contact*) or myself at [email address] if you have any questions or concerns. You can also opt out by writing your name on a paper at the back of the church and putting it in the box labelled "Grieving Together." All communication by participants during the study, including a request to be removed from participation, will be kept anonymous. This project is research ethics board approved and is supervised by Dr. Derrick Klaassen. Thank you. Ben Bentum

Appendix C

Ethnographic Observations Template

<u>Observations</u>

Time, actors, acts,   Activities, events and sequences

Settings, participation structures, objects   Behaviours of people and groups, goals

Conversations

Appendix C (continued)

Interactions

Personal Experiences

Five senses: Sight, Smell, Taste, Hear, Feel

Emotions   Cognitions

Appendix D

Individual Interview Guidelines

Grieving Together: An Ethnography of Relational Bereavement in Community
(Individual Interview Guidelines)

Preliminary
Give brief overview of interview schedule (Introductions & Warm-up questions leading to more focused questions)
Lead interviewer explains consent & gets signatures from community leader; administers demographic questionnaire

Warm up – approximately 10 min.
As we mentioned in the consent forms, we will be video- and audio-taping everything, to make sure we have accurate records of what is going on. I'll just turn on the equipment now.

* remember to turn on BOTH video-cameras, and the audiorecorder *

Rapport-building:
Ease into the process with questions / comments related to weather, work, etc.

Priming for topic (conversational style)

So our study is about the experience of grieving in community. Often we understand grieving as something that we do on our own or privately. We think this is an important part of grieving. However, in this study we are interested in understanding how this community grieves together and how grief works itself out in relationships here.

At this time, I would like to remind you that your participation in this study is voluntary and at your own discretion. If you do not want to answer a particular question or feel too overwhelmed by talking about something either in or after the interviews, you are free to stop the conversation, take a break, or withdraw from the study altogether. Doing any of these things will not cause you to be penalized, in that you will still be provided the gift card for participating in the interview even if you choose to withdraw at any point during the interview. Do you have any questions about this? Feel free to ask at any time or let us know if you are feeling uncomfortable talking about your grief or this community.

But before we go onto these things, I would like to take some time to get to know you.

Interview – approximately 1 hour (in conversational style)
Opening: 1) How would you describe your role in this community?
Introductory: 2) What is one word you would use to describe this community?
Transition: 3) What do I need to know about this community's understanding of grief, what are the rules? Follow up: Where does this community get these rules of grieving?

Appendix D (continued)

Key Questions: 4) How do the religious beliefs of this community shape how people
grieve together?
5) How does the community respond when someone dies?
6) How do people share their grief with one another?
7) What do you appreciate about how this community grieves?
8) What changes would you like to see in how this community grieves?

Ending Questions: 9) Summarize: How well does that capture what we have talked about?
10) We are interested in find out how people in this community grieve
together – about what happens *between* members of this community –
after a someone has died. Have we missed anything, is there anything we
should have talked about but didn't?

<u>Debrief – Approximately 10 min</u>

   11) Finally, do you have any questions for us about our study or the things
we asked you to talk about today? (if necessary give a summary of the study)

We hope to have collected all the information we need, and all have it all analyzed by the
summer of 2017. Would you be interested in getting a summary of our overall conclusions?
[If yes, ask for contact info for that time.]

Plus you can always e-mail me at ____ if you don't hear from us soon enough.
Thanks again for being willing to share this part of your community's life with us.

Appendix E

Group Interview Guidelines

<u>Grieving Together: An Ethnography of Relational Bereavement in Community</u>
(Group Interview Guidelines)

<u>Preliminary</u>
Give brief overview of interview schedule (Introductions & Warm-up questions leading to more focused questions)

Lead interviewer explains consent & gets signatures from all people first; administers demographic questionnaire

<u>Warm up – Approximately 10 minutes.</u>
As we mentioned in the consent forms, we will be video- and audio-taping everything, to make sure we have accurate records of what is going on. I'll just turn on the equipment now.

* remember to turn on BOTH video-cameras, and the audiorecorder *

<u>Rapport-building</u>:
Ease into the process with questions / comments related to weather, finding the interview space, etc.
<u>Priming for topic</u> (conversational style)

So our study is about the experience of grieving in community. Often we understand grieving as something that we do on our own or privately. We think this is an important part of grieving. However, in this study we are interested in understanding how you grieve together and how your grief works itself out in your relationships.

At this time, we would like to remind you that your participation in this study is voluntary and at your own discretion. If you do not want to answer a particular question or feel too overwhelmed by talking about something either in or after the interviews, you are free to stop the conversation, take a break, or withdraw from the study altogether. Doing any of these things will not cause you to be penalized, in that you will still be provided the gift card for participating in the interview even if you choose to withdraw at any point during the interview. Does anyone have any questions about this? Feel free to ask at any time or let us know if you are feeling uncomfortable talking about your grief or this community.

At the beginning of this group interview I will be asking some questions and may be more involved. But as we continue, I hope to take more of moderator role and allow you to talk with each other. I may still ask questions or be involved, but I want to invite you to talk with others about what comes up for you.

So as we begin, we would like to take some time to get to know you.

Appendix E (continued)

Interview – Approximately 1 ½ hours (in conversational style)

Opening: 1) Tell us who you are, and how you became connected to this community?

Introductory: 2) What is one word you would use to describe this community?

Transition: 3) What does grieving look like?

                4) How are you impacted by (*name of deceased)*'s death?

Key
Questions: 5) How have you shared your grief? (i.e. who have you talked to, what did you
                say, what have you done?)

                6) How do you feel about grieving in this community? (What is good/difficult
                about grieving in this community?)

                7) What are some of the rules about grieving that you have felt or notice?

                8) How do people in this community respond after someone dies?

Ending   9) Summarize: How well does that capture what we have talked about?

                10) We are interested in find out how people in this community grieve together –
                about what happens *between* members of this community – after a someone has
                died. Have we missed anything, is there anything we should have talked about
                but didn't?

Debrief – Approximately 10 min

                11) Finally, do you have any questions for us about our study or the things we
                asked you to talk about today? (if necessary give a summary of the study)

Thank you so much for participating in this Interview. Your experiences are very valuable to our
study! You will likely see us around for a few more weeks, and we invited you to talk with us as
you feel comfortable, but we will leave this up to you. We hope to have collected all the
information we need, and all have it all analyzed by the summer of 2017. Would you be
interested in getting a summary of our overall conclusions?

[If yes, ask for contact info for that time.]
Plus you can always talk to us when you see us, or e-mail me at _____ if you don't hear from us
soon enough.

Hand out Gift Card
Thanks again for being willing to share this part of your community's life with us.

Appendix F

Journal Participant Forms

<u>Community Bereavement Study (Journal Participant)</u>

Principal Researcher: Ben Bentum, Counselling Psychology, Trinity Western University

Supervisor: Dr. Derrick Klaassen, Counselling Psychology, Trinity Western University

Contact info: If you have any questions about the research project you may call Ben Bentum at [telephone number] or email at [email address]
If you have any concerns about your treatment or rights as a research participant, you may contact Ms. Sue Funk in the Office of Research, Trinity Western University at [telephone number] or [email address].

Dear Participant,

Thank you for agreeing to participate in the study of how a community grieves together. For this portion of the study you will be reflecting each day for one week on how you experience grieving with others from the community. The purpose of this study is to better understand how community members interact with one another around grief.

You are invited to fill out one journal page each day. There are no right or wrong answers. We are interested in hearing about events that were meaningful for you each day. These events can be positive, negative or neutral. You may write about your experience of grieving and how you interacted with another person (or how they interacted with you). You can also write about how you interacted with a person who you know to be grieving, or how they interacted with you. You may talk about how you felt, what you thought, what you (or they) said or did that was impactful. You can mention anything about the interaction that stands out to you. You may fill out the journal at your earliest convenience after the interaction, or at the end of the day.

Please contact us (before, during or after the study) us using the information above if you:
- Have any questions about the study, or the things that we asked you to do.
- Have any thoughts that you would like to share with us about your involvement in the study.
- Have concerns that emerged for you that relate to the process of the study or any feedback that you have for us as researchers about this study.
- Would be interested in getting a summary of our overall conclusions. We hope to have all the information analyzed by the summer 2017.

Thanks again for being willing to share this part of your life with us.

Appendix F (continued)

Grieving Together: An Ethnography of Relational Bereavement in Community

Participant Journal

Remember that these reflections are a record of events and interactions that are meaningful to you. This can include positive, negative and neutral events. There is no right or wrong answer. You can think about your experience of grieving or your interaction with a person who you know to be grieving. You may journal immediately after an interaction or at the end of each day.

Please use the following questions to guide your journaling.

Date: _____   Time of day that you had the interaction:_____

What were you doing when the interaction/conversation happened?

What was the main thing you talked about (or if it was an activity, describe what you did)?

What were you thinking during the interaction/conversation?

What feelings came up for you?

What were you trying to do (what were your goals in this interaction/conversation)?

What did the activity/conversation mean to you?

What, if anything, prevented you from completing the activity?

How did this interaction relate to your grieving process more generally (e.g., how did it help you or interfere with this process)?

What, if anything, do you wish could have gone differently?

Appendix G

Performance Ethnography Script

Thank you all for coming this evening, I have spent 6 weeks with you observing the community and talking with members. I am grateful for this opportunity and the warm welcome and participation I have encountered.

My purpose for this evening is to give you a taste of what I have heard so that you can tell me if I am on the right track or if I have missed a perspective.

As you listen tonight, I am hoping that you will either hear your perspective clearly, or you can alert me to the fact that your perspective is not represented. So, as you listen, you can take notes about what you think and feel is on the right track, what does not sound right, and what may be missing.

Are there any questions?

By the time the [period] came to [City], the [Church] had felt the impact of those who had died already in the year. During the conversations in which I have been privileged to participate, the hearts of this community have been evident. I am honoured to be a witness to one part of your story, and I invite you to join with me in hearing perspectives you may be familiar with, as well as those you may not have yet considered.

1) INITIAL RESPONSE BY BEREAVED

"My family is wonderful, they have taken care of everything."

Appendix G (continued)

"I mean initially when things first happen you are absolutely overwhelmed with the people who come out of the woodwork, who really rise to the occasion… You know on the day my loved one passed away, and all of a sudden we have people here, and of course people come from everywhere… then you have the people from [church], friends, who are dropping off food, and they are not visiting, they leave it on the porch. They recognize the type of time it was and just sort of to help out with the physical stuff…

"lots of cards, people wishing you well. The people who showed up to the memorial service, I was very moved by that"

"Yeah. And, of course, the first little while, um, you get a lot of phone calls, you get a lot of visits, and there's an awful lot to do… Yeah. And, well, I had a lot of help from my family, and that really, really helps"

2) REFLECTIONS BY FAMILY

"I think it is for sure different for us, for the family. So obviously we miss our loved one and miss having them around and you know, you miss them, for sure. But I would dare say, we focus mostly on how the closer bereaved is doing. Right? and how they are going to deal with it, and how are we going to help *them* through... I think there seems to be something intuitively natural about that: that you try to identify the person in the room who is most affected by what has just happened and care for them.

Appendix G (continued)

"When my sister's loved one died we flew to support her and I called biweekly for one year to see how she was doing. We had many great discussions."

"The kids are from all over, and so we spent a lot of time together (during the week of the funeral). It became, really, a family event."

3) REFLECTIONS BY THE COMMUNITY

"I come to the funeral to show my support to the family."

"I volunteer so the family doesn't have to think about this on top of everything else they are dealing with."

Coming together around a mutual friend's death is at times a meaningful way to reconnect. I am surprised to see a particular person at a funeral, and I sometimes think and occasionally ask – "oh – you knew him or her too?" In the times I do engage with someone on how they knew the person who died, it has typically led to a deeper understanding. In some cases I realize how interconnected the community is- by finding out so and so knew the deceased as well, and that somehow through connection, we who are reminiscing now have a shared bond of sorts."

"Coming to the funeral is a part of being a member of this community, especially for those of us who are aging. You start to realize ours is the next generation in line."

Appendix G (continued)

4) IMPACT ON COMMUNITY

"Heard the announcement this morning in Church that a community member passed away…I realized again that they are gone from this earth and that another empty place was left in the Church pew to fill. I was left feeling sad, again, at the fleeting of time."

"And I wanted to let her know that I felt for her – that I was sorry that their loved one died, that I would miss his jokes and his questions – he often asked how my work was going, how the kids were doing – he showed interest and concern for our family."

"I went to work as per usual but I had the deceased and family on my mind through-out the day of the funeral. It brought back memories of the personal family funeral days I experienced and how that would be for this family."

5) IMPACT ON THE INDIVIDUAL

"So, in the day time I really don't dwell on it, you know. Just don't have time to think. And in the evening it's kinda lonely, boring. You know, nobody's there to talk to."

"…some days are better than others…. You, you miss your partner. I mean, we were married for a long time, so… Sundays are not good. Evenings. You know. In the day time you can keep busy and keep your mind off, but when you relax then, yeah, then it can build up."

"I live it every moment, there's not a moment that I don't."

Appendix G (continued)

6) BACK TO 'NORMAL'

"As much as we want to be there for each other, we end up not carrying it very far – and what I mean by that is that we will comfort those who are grieving as much as we can, and we stand with them, but we also heal up quicker than the people who are grieving, really grieving, really hit by tragedy and difficult situations and… So we'll get on with life much more quickly than the people that we're dealing with."

"I am now alone, and I feel all those who came to say goodbye also must have said goodbye to me. If I didn't have my family and a few people who care, I would have been inclined to think that I do not exist anymore."

"I think, if I think of this past year, I think that a lot of people, a lot of congregational members including me, figured you showed your support by going to the funeral or send a card maybe, and say your condolences once in church. You kind of trust, or are hoping, but never bother to check, if these people have a support group. I think of the last couple people who passed away in church who I knew, but you pretty quickly, if you are not really closely involved, don't have the triggers in my life, or they are overshadowed by the busyness of my own life. I haven't bothered to check on them, I haven't bothered to send another note after all the initial notes have been sent by everybody.

"but some of those people will come to me and say 'Well, ya, I've been thinking about you, and now you know how lonely it is, and it is like that, it doesn't go away" I heard that a

Appendix G (continued)

number of times. Are we in tune with people that feel so alone? And I suspect that we are not. I

suspect that we don't really know how people feel."

"So what I think is missing is follow-through. Often we think of the people who need

care, and we want to help them, but we don't take action on those thoughts and those feelings of

care."

7) GRIEF STANCE

"So there's no one way…We grieved very differently….and your friends grieve

differently, too, you know? Some make it a bit lighter and some focus on the celebratory part of,

"She's with God," "She's through her suffering," and "We look forward to the same thing."

Others would've been more, "how are you doing?" and make it a little heavier. So you have to

allow for that. It's very important that, like I said, none of us grieve the same way, I don't

think…And that's okay, but you need to know it, you need to recognize it for what it is, and you

just have to allow for it. It's as simple as that."

"You also have to know the person who is grieving. I wouldn't want people talking to

me too soon after a death, I would want space, it is too much right away. Other people found

talking about shared memories with close family was really helpful."

"So what happens, and it happened every Sunday that I went, that I was reduced to tears in the

middle of a crowd of people and they had a need to come and talk to me about *THAT*, but when

Appendix G (continued)

they are done, they are done. I mean, they don't have to deal with it anymore, their need was to

have that moment and then they are gone, and there I am. I can't just pick it up and drop it. And

so, that is something that I think we need to understand more as a community, is just to be

respective of some of those boundaries, and if you do want to have that personal conversation,

choose a time and a place for it."

"…Of course they ask me at church "how are you doing?" What do they want to hear?

They want to hear me say "I'm ok." What if I were to say "I'm very sad and lonely?" What

would they do then?"

"You know, if I'd want to emphasize anything at this point, it's the follow-through after

the death, after someone passes away. How do you, keep supporting, and that's not being in

their face, you know? You can have that too, you can also be in their face too much. But it's,

how do you just stay in touch?"

"I knew some of my friend's extended family – nephews, nieces, inlaws…etc and knew

they were hurting because of the loss. I wanted to be in a different space, a more intimate setting

where I could be with those who I knew that were deeply affected – I wanted to be able to sit

close to them, hug them and be with them in a setting where we could interact – a less formal

setting."

"He invited me for breakfast – an act which in and of itself was quite meaningful – his

schedule is very demanding."

Appendix G (continued)

8) EXPERIENCE WITH SUFFERING

"We really don't want to offend anyone, we especially don't want to add pain to someone who is already suffering. You really don't know how to respond unless you have experienced grief. You have to go through it to 'get it."

"I didn't say anything for a long time because I didn't want to make it worse, I regret that …and NOW I send a message when I get the feeling, or when it comes to mind: "Hey I'm thinking of you" and it has always been received well."

"I'm on a, I'm on a fine edge, just about any time you can find me any day and depending on what we talk about I might start crying… And that prompted me to think, how grieving people feel, I've heard it from others and I shouldn't speak from everybody, in fact I talked to a lady today who lost her son, and yesterday I was with somebody who lost their husband young… no body knows, I wouldn't have had a clue, I wouldn't have had a clue how it just impacts every part of your day, every piece of your life, how it changes your, it changes your perspective. I don't know that there is anything more profound. And people don't know, and I thought, "how do we help people to know then." Right?...How do you get people there, how do you share that?"