The Isolated Search for Meaning: A Phenomenological Study of

Adolescent Grief and Bereavement

By: Sherri McKinnon

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APPROVED BY

Dr. Bruce Hardy, Thesis Supervisor, Counsellor Education Faculty

Dr. Glen Grigg, Faculty Reader, Counsellor Education Faculty

Division of Arts and Sciences

Abstract

This thesis reports on the findings of a phenomenological study that explored the experiences of loss, grief, and bereavement in adolescents. In light of the increased use of social media amongst young adults and the potential use of technology as a source of expression for grievers, this study focused on random collections of online grief blogs from various adolescents. Forty-two adolescent blog authors were selected between the ages of 13 and 18 years. Blogs were posted between the years 2012 and 2015. The selected authors varied in gender, demographics, socio-economic status, and lived experiences. The data was analyzed using van Manen's (1997) methods for isolating thematic statements: the detailed reading approach; the selective or highlighting approach; and the holistic reading approach. The themes of Isolation and Loneliness; Attachment and Quality of Relationship; Meaning and Purpose; and Guilt and Responsibility were identified as recurring throughout the blog transcripts and are discussed with reference to the literature and the philosophical underpinnings of grief and bereavement. It is evident from a number of the bloggers in this study that adolescents exhibit a reluctance to seek support from parents and other adults. In addition, bereavement appears to be something dealt with in isolation and hidden from peers. Adding further complication are feelings of guilt and uncertainties about the predictability and relatedness to the world. The article concludes with considerations regarding the future potential of cyber counselling.

Key Words: grief, bereavement, loss, complicated-grief, adolescents, teens, young adults, social media, blog, attachment, isolation, guilt, meaning, purpose.

DEDICATION

For my brother who continues to soar through heaven with everlasting light,

And

My husband, who unlocked the essence of my heart and soul.

"I know for certain that we never lose the people we love, even to death. They continue to participate in every act, thought and decision we make. Their love leaves an indelible imprint in our memories. We find comfort in knowing that our lives have been enriched by having shared their love."

- Leo Buscaglia

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Chapter 1: Introduction

Throughout the years I often find myself reflecting on the cognitive, emotional, and embodied impact from my own lived experiences of loss, grief, and bereavement. From a distance one can contemplate death at their own leisure and willingness, but when death strikes at a personal level life delivers a harsher invitation. Guilt, confusion, abandonment, and fear are some of the emotions I recall feeling as I reflect upon my own encounters with death, a number of them occurring during my child and adolescent years. One of the most significant losses being that of my younger brother. I endured responsibility for his death, questioned my own life expectancy and the probability of losing my parents, and probed for clarification surrounding God, heaven, and spirituality.

Throughout my career I have worked with many adolescents who have experienced the death of a loved one. Some share similar emotions, others vary in their sentiments. The following vignette of Kendra, along with other embedded vignettes, illustrates the experiences for many of these youth. To protect the identity of the youth, all names have been altered.

Kendra stared blankly at the assignment before her, the sound of the school bell suddenly startling her. Glancing at the clock she realized more than an hour had passed. The last thing she remembered was coming back from lunch with peers, an exhausting hour spent masking her pain and anguish. Two years have passed and the longing continues to consume her existence, prescribed anti-depressants doing little to alleviate the sorrow, misery, and desire to end life. Kendra knew she was going to have to ask her teacher for yet another extension, a familiar experience in all her classes. Suspensions for tardiness, after school detentions for missed assignments, and consultations regarding program needs for behavior modification continue to

persist amongst adults who lack awareness and understanding and continue to dismiss Kendra's mourning and traumatic encounter, after all, adequate time to weep has elapsed.

My own experiences with loss and grief combined with those of the youth I work with in an educational setting, like Kendra, raise the following queries for me personally: How do we examine grief to more clearly hear the voices of our bereaved youth? ; How do we better understand and support grieving teenagers? How does adolescent grief differ from adult grief?

Everyone loses someone they love during their lifetime. Grief is an unavoidable and normal reaction to this loss. Whenever someone suffers a serious loss that individual can experience a range of painful psychological and physical states. Bereaved people may feel sadness, anger, guilt, anxiety, and despair (Herberman, Fullerton, and Ursano, 2013, Shear, Monk, Houck, Melhem, et al., 2007). They may think constantly about the deceased person and about the events that led up to the person's death. They often have physical reactions to their loss—problems sleeping, for example—and they may become ill. Socially, they may find it difficult to see friends and family (Fajgenbaum, Benjamin and Gaines, 2012; Hall, 2011; Herberman, Fullerton, and Ursano, 2013;Shear, 2012; Smith, 2008).

In this thesis, I will be exploring the literature relative to grief and loss in adolescence, while at the same time telling some of the stories of grief. It is important to note that this thesis does not follow a traditional structure as the literature review has been interwoven into the chapters in a manner deemed pertinent and relevant. My interest in the topic of grief has been life-long and continues through my work today. I enter this topic in a less than unbiased way as I know the impact of grief; the inability to focus, enjoy life, and connect with peers; the fear of abandonment and the lack of skills to cope. In my adolescent years, many professionals, with the

greatest influence, dismissed the depth of my sorrow, avoided open dialogue about my experience, and were unable to provide suitable support.

Professionally, I continue to witness the same problematic responses among the adolescents I work with, many who are regarded to be "at-risk". According to Statistics Canada (2011), 242 adolescents, on average per year, between the ages of 10 to 19 die in car accidents. Of this same age category, 227 will die from self-harm undertakings. Correspondingly, the Canadian Mental Health Association (2015) reports suicide as the second leading cause of death among adolescents in British Columbia, with 34% being between 15 to 24 years of age. In Western countries, including the United States, United Kingdom, Western and Central Europe, and Canada, 4% of children and adolescents experience the death of a parent, and approximately 1 in 20 children and adolescents in the United States experience such a loss before the age of 18 (Balk, Walker, and Baker, 2010). According to The Emergency Response and Crisis Management Technical Assistance Center (2007) most children experience the death of a family member or friend by the time they complete high school. In addition, approximately 2 million youth in Canada and the United States will have lost a sibling prior to the start of college (Balk, Walker and Baker, 2010; Hogan & DeSantis, 1996).

The relatively high rate of loss in this particular age group deserves attention. Bereaved adolescents are at greater risk than their peers for a host of academic, social, and developmental issues (Fajgenbaum, Benjamin and Gaines, 2012). Furthermore, lack of grief support due to lack of knowledge, discomfort, and inexperience in assisting the bereaved, may complicate recovery from loss and produce a sense of isolation (Herberman, Fullerton, and Ursano, 2013). There are myths that assume all youth are resilient in dealing with emotional loss and have the capacity to overcome bereavement quickly and without intervention. To neutralize these myths, one must

understand the developmental stages of adolescent grief and the role of attachment (Balk, 2011). Consideration must be given to traumatic circumstances and notions of time duration, for healing, warrants elimination. To do so otherwise risks a misdiagnosis of the following pathologies; Major Depressive Disorder, Anxiety Disorder, and/or Post Traumatic Stress Disorder (PTSD). In addition, the review of the literature, as noted in El-Jawahri & Prigerson, 2006; Rosner, Kruse, & Hagl, 2010; Smith et al., 2009; and Wagner, Knaevelsrud, & Maercker, 2006, demonstrates that many adolescents are not being provided the necessary care needed to recover from their emotional losses. It is of paramount importance that further studies be carried out to ensure adolescents receive adequate care, if they are to mature and develop into healthy adults.

This thesis will address the following questions, "What prevents some adolescents from engaging in the process of grieving and what is required to complete the process when the process has been interrupted or delayed?" In order to understand the complexities of bereavement, one must have an understanding of the distinguishing features of loss, grief, mourning, and complicated grief. One must also comprehend the understandings that scholars bring from a psychodynamic perspective. Thus the literature surrounding the research in this paper is guided by the following questions:

1. What is loss?

2. What is grief?

3. What is mourning?

4. What is complicated grief?

5. What is the natural course of development for adolescents and how does this development affect the manner in which they grieve?

6. What interventions should adults, who work with grieving adolescents, be mindful of?

What is Loss?

Loss is an inevitable part of life, and grief is a natural part of the healing process that often follows loss. According to Smith (2008), loss is as much a part of human existence as breathing. It is an everyday event: a lost wallet, earring, investment opportunity. In most cases, individuals ponder what might have happened, get a little agitated, and then quickly move on. But then there are losses that can't just be shrugged off- that trigger a powerful kind of emotional response, such as getting a divorce, having a breast removed, or developing a chronic illness. Death is but one of the most dramatic losses and leads to some of the most intense grief responses.

The experience of loss is personal and significant to each individual (Hall, 2011; Shear, 2012; Smith, 2008). Hall (2012) concurs that life's most grievous losses disconnect an individual from a sense of self and can set in train an effortful process of not only re-learning about oneself but also the world. For many the desire to make sense and find meaning in the wake of loss is central (Cait, 2004); Neimeyer and Sands, 2011). However, there is also a growing awareness that losses can provide 'growth' as one integrates the lessons of loss and resilience. Personal growth following even seismic experiences of loss is common (Feigleman, Jordan, & Gorman, 2009; Hall, 2012; Shear 2012).

Tahlia, age 15, lost her brother in a house fire when he re-entered the home to save their family dog. She was devastated at having lost her older sibling. He was the one she turned to regarding issues she couldn't share with her parents. He protected her and kept her secrets. Tahlia sensed an outpouring of support for her parents as she often encountered, "I'm sorry for the loss of your brother. How are your poor parents doing?" However, there seemed to be minimal verification of her sentiments. Tahlia felt isolated in her anguish and robbed of her sibling identity.

Tahlia kept newspaper articles and online condolence messages in a scrapbook. She later added photographs depicting her brother's accomplishments and memorable moments they collectively shared. Tahlia titled the book, "The Loss of a True Hero". Sometimes she cried and looked through the scrap book. Sometimes she talked to her brother and told him how much she missed him. She wished he would be there for her graduation, her first day of college, and to scare off boys. She had to believe that he died for a greater purpose, and that, in one way or another, he'd always be watching over her.

Tahlia often felt isolated from her peers, she sensed that they didn't understand being in the middle of such a powerful loss. However, she also felt a new sense of purpose, as though her job was to ensure that everyone knew about her heroic brother. As part of a public speaking assignment, Tahlia brought her hero book to school. She defined heroism and spoke of various heroic qualities. She reached out to her classmates and encouraged them to acknowledge the valiant traits of people in their own lives. Slowly, with time, Tahlia assumed a new identity: that of a proud, surviving sibling.

What is Grief?

Grief is the psychobiological response to bereavement and the hallmark of grief is a blend of yearning and sadness, along with thoughts, memories, and images of the deceased person (Shear, 2012). It is a normal, natural, and adaptive response to loss in all of its totality- including its physical, emotional, cognitive, behavioural and spiritual manifestations. Put simply, grief is the price we pay for love, and a natural consequence of forming emotional bonds to people (Hall, 2011). Undeniably, grief has been described as one of the most painful experiences an individual ever faces (Young, Iglewiicz, Glorioso, Lanouette, Seay, Manjusha & Zisook, 2012).

Siblings Amelia and Amanda lost their mother after a long battle with cancer. Amelia was 17 years old and her sister was 20.Amelia had been close to her mother. They were similar in personality and interests. In many ways she considered her mom a friend. Even though her mother had struggled with breast cancer, the news struck Amelia. She cried and screamed when the doctor told her that they had done everything possible. She felt swept away by an avalanche of emotions, not knowing how she could go on with her life. She cried herself to sleep every night.

In addition to the loss, Amelia and her sister were left with the estate home. There was no father in the picture. The two sisters became responsible for numerous estate legalities and decisions. Amelia felt drained of every ounce of vitality. As the hours evolved into days, it became exhausting — even physically painful — to make any decisions. The ability to follow normal routines quickly eroded. She felt isolated and hopeless, especially since her sister seemed to manage and deal with things with greater ease. Unfortunately, Amelia could not just crawl into a hole and forget about life for a while. She took comfort, instead, sleeping in her mother's bed while clinging onto personal articles of her mother's clothing.

Family friends suggested the assistance of a social worker and suggested Amelia might benefit from seeing a bereavement counsellor. Amelia was quick to take up the suggestion as she felt that her friends were sick of hearing about her despair, and yet she really wasn't ready to stop despairing. She needed to talk about her mom, she needed to talk about her grief, and she needed to cry. Amelia met her grief counsellor, ,Jim, for the first time about three weeks after her mother's death and she continued to see him each week, for about 2 months. .Amelia felt able to talk freely about her fears of a life without her mom – fears about financial insecurity, fears

about the maintenance responsibilities of a home, fears of not being able to complete schooling

goals, and fears about loneliness.

During this time, Amelia's sleeping patterns calmed down, and she gradually became

used to sleeping in her bed alone. While it took her a long time to feel normal in a social

situation, she found she was able to find some joy again and even go out with friends to a movie

or girl's night now and again.

Much of the theoretical contribution on grief stems from Freud's influential paper on

'Mourning and Melancholia' (1917). His work profoundly shaped professional intervention for

nearly half a century. Freud viewed grieving as a temporary painful-passage that could and

should be navigated as quickly as possible. He believed that in order to put the loss behind, one

had to completely sever bonds with the loved one and work through the grief until some preloss

equilibrium was reached. Lindemann (1944) further emphasized the idea that the duration of the

grief reaction depended on the success with which a person does their grief work. This work

involved the liberation from the bondage of the deceased, a readjustment to the new environment

in which the deceased was missing, and the formation of new relationships (Granek, 2010). In

this way, Lindemann set up a paradigm of success or failure for the mourner. Several years later,

researchers such as Neiymeyer (2003) and Worden (2002) have argued that people do not detach

from the dead, but instead find ways to stay connected, even if it means that the individual's

quality of life is significantly diminished.

A crucial shift from Freudian ideas arose from the work of John Bowlby (1949)**.** Bowlby

became particularly interested in how separation from caregivers impacted children. He observed

that separated infants would go to extraordinary lengths (e.g., crying, clinging, frantically

searching) to prevent separation from their parents or to reestablish proximity to a missing

parent. Drawing on ethological theory, Bowlby postulated that these attachment behaviors, such as crying and searching, were adaptive responses to separation from with a primary attachment figure--someone who provides support, protection, and care. . According to the theory, an individual who is cared for in a responsive and consistent manner develops the expectation that others will be available and supportive when needed (Fraley, Vicary, Brumbaugh, & Rosman, 2011). Bowlby also believed the memories of such expectations form working models of self and others. Furthermore, Bowlby argued that the attachment system is active over an entire life span and is manifested in adults' tendencies to seek proximity and support when threatened or distressed (Ein-Dor, Mikulincer & Shaver, 2011).

Bowlby eventually took all his observations and theories about attachment and separation and applied them to grief and bereavement. When a loss occurs Bowlby suggested that grief was a normal adaptive response. He conceptualized grief as an irreversible form of separation anxiety and highlighted the distressing break of an 'affectional bond'. He felt the response was based on the environment and psychological make-up of the griever, and that there were normal reactions one might expect. In essence, when death occurs, that closeness cannot be regained leading to protest and anguish (Buglass, 2010). Bowlby later, with his colleague Colin Murray Parkes, broke down this natural adaptive grief response into four phases of bereavement: numbness and shock, yearning and pining, disorganization and despair, and recovery. It was noted that these phases were not always linear, but could be experienced several times as a result of reminders of the loss or a trigger such as an anniversary.

Kubler-Ross (1969) conceptualized grief as proceeding along a series of predictable stages, phases and tasks. Based upon her clinical work with the dying, her model was one of anticipatory grief; how an individual responds to a terminal diagnosis. Over time this model

transformed into the five stages of grief – (1) shock and denial; (2) anger, resentment and guilt; (3) bargaining; (4) depression; and (5) acceptance – and was subsequently applied to both the bereavement experience and many other forms of change. The model implied that failure to complete any of these stages would result in a variety of complications. Kubler-Ross's perspective, although widely capturing the imagination of both lay and professional communities, has been widely criticized for suggesting that individuals must move through these stages, and has been empirically rejected.

Today most experts have shifted away from the idea of a prescribed series of stages toward a view of grief as a transition that people manage in their own, individual ways and, for the most part, with relative ease (Hall 2012). Zisook and Shear (2009) affirm that no grief stage theory has been able to account for how people cope with loss, why they experience varying degrees and types of distress at different times, and how or when they adjust to a life without their loved one over time. Bonnano and Gupta (2011) sustain that most people go back and forth from intense states of sadness-a powerful yearning for the person lost-to stretches of feeling fine, but not necessarily in any kind of sequential order, and it doesn't happen within a prescribed time frame, despite what friends, relatives, and even therapists might suggest. It turns out that, for most, the grieving process occurs in fits and starts. And for an especially intense loss it can go on for much longer than might be expected.

What is Mourning?

Mourning is sometimes used interchangeably with bereavement and grief, usually referring more specifically to the behavioral manifestations of grief, which are influenced by social and cultural rituals, such as funerals, visitations, or other customs (Zisook & Shear, 2009). Hagman (2006) defines mourning as the ritualized practices that help assuage anguish. Shear

(2012) further affirms that it involves an array of psychological processes in which a bereaved person integrates the loss into his or her ongoing life and reorients to a world without our loved one in it. Much research supports Shear's views that mourning is a "process" and grief is a "reaction" (Fajgenbaum, Benjamin and Gaines, 2012; Hall, 2011; Herberman, Fullerton, and Ursano, 2013; Shear, 2012; Smith, 2008). Some Modern Western assumptions contend that grief is a private, internal emotion and mourning is an external, emotional behavior.

In 'Mourning and Melancholia' (1917), Freud argued that mourning was crucial in "working through" grief and that mourning was necessary in order for the grief stricken to free themselves from psychologically dangerous attachments to the dead. In earlier times, mourners were encouraged to detach from the person who has died in order to grieve in a healthy manner. However, more recently there is evidence that mourners often naturally find ways to develop "continuing bonds" with the deceased and are able to effectively move through the pain of their grief. A study by Polmear (2004) assessed Freud's main points and related them to the process of both normal and troubled adolescent development. Her findings substantiate the notion that adolescent development in the 'normal' young person involves successful mourning after a loss, while disturbed, or failed, adolescent development more closely resembles the process of melancholia. Hall (2011), reasons that how one adapts to deprivations shapes who they will ultimately become.

What is Complex Grief/Bereavement?

For most people, painful emotions and thoughts associated with grief gradually diminish, usually within 6 months or so of the death. (Prigerson, Harowitz, Jacobs, Parkes, Aslan, Goodkin, et. al., 2009) But for a few people, the normal grief reaction lingers and becomes increasingly debilitating. Throughout time, experts have referred to this as complicated grief

(CG), prolonged grief disorder (PGD), or what is currently recognized in the fifth edition of the

Diagnostic and Statistical Manual of Mental Disorders (DSM-V) as Persistent Complex

Bereavement Disorder (PCBD).

According to the DSM-V (2013), a diagnosis of PCBD can be made if following the

death of a significant other clients endorse at least one separation distress symptom (longing for

the deceased or intense pangs of separation distress) and at least six of the following twelve

cognitive, emotional and behavioural symptoms, experienced daily or to a distressing degree:

1. Marked difficulty accepting the death.

2. Feeling shocked, stunned, or emotionally numb over the loss.

3. Difficulty with positive reminiscing about the deceased.

4. Bitterness or anger related to the loss.

5. Maladaptive appraisals about oneself in relation to the deceased or the death (e.g., self-blame).

6. Excessive avoidance of reminders of the loss (e.g., avoidance of people, places, or situations associated with the deceased)

7. A desire to die in order to be with the deceased.

8. Difficulty trusting other people since the death.

9. Feeling alone or detached from other people since the death.

10. Feeling that life is meaningless or empty without the deceased or the belief that one cannot function without the deceased.

11. Confusion about one's role in life or a diminished sense of one's identity (e.g., feeling that a part of oneself died with the deceased).

12. Difficulty or reluctance to pursue interests since the loss or to plan for the future

(e.g., friendships, activities). (Diagnostic and Statistical Manual of Mental

Disorders V, 2013)

Dhillon is 16 years old. Almost 3 years ago, his father died in a motor vehicle accident at the age of 41. The accident occurred on his way home from a sporting event. Dhillon's father was so severely injured in the accident that Dhillon was not allowed to see his body prior to his cremation. Anguish and devastation have not lost their intensity since the loss took place. Dhillon still feels as if the loss occurred just recently rather than 3 years ago. He feels vulnerable and alone and finds it difficult to make plans for the future. Dhillon is frequently troubled by dreams of the accident. It is as though he witnessed the scene in person. Moreover, he avoids going places where he and his father visited, avoids talking about the loss with his mom and sister, and avoids attending family gatherings. Dhillon withdraws from hanging out with friends as he conveys it is difficult to witness father-son interactions and senses that peers do not understand his prolonged distress. Dhillon reports feeling trapped in a painful world and over powered by sorrow. He is unable to sustain focus on academics, engages in high risk activities as a means to mask memories, and repeatedly contemplates suicide.

Researchers and clinicians in the field concur that PCBD is a unique and distinct phenomenon, which has a substantial negative impact on peoples' life (Bonanno, G. A., Neria, Y., Mancini, A., Coifman, K. G., et al., 2007; Dillen, L., Fontaine, J. R. J., & Verhofstadt-Denève, L., 2009; Field, N. P., & Filanosky, C., 2009). Furthermore, research has shown heightened risk of significant negative outcomes in relation to both physical and mental health associated with PGBD (Boelen,, Van Den Bout, & De Kiejser, 2003; Latham & Prigerson, 2004;

Mitchell, Kim, Prigerson, & Mortimer-Stephens, 2004; Prigerson, Harowitz , Jacobs , Parkes , Aslan., Goodkin, et. al. 2009; Ott, 2003; Silverman et al., 2000). This population is therefore representative of an important clinical need, which is not being adequately met within current practice owing to the lack of empirically supported therapeutic guidelines.

In considering the risk factors for PCBD it appears plausible that there are certain individual characteristics that have an effect on a person's ability to cope with their loss thus increasing vulnerability of developing PCBD. For a long time both attachment style and the attachment history between the deceased and the bereaved has been suggested to have a significant impact on reactions to loss and propensity to cope (Bowlby, 1973, 1980, 1982; Murray-Parkes et al., 1993). According to Welford (2014), unresolved issues in the family system, including previous generations, can interfere with effective grieving in the here and now. Factors related more specifically to the circumstances surrounding the death are also thought to be characteristic of elevated risk including the nature of the death (violent or not, expected or sudden), the recency of the death, and the age of the deceased with younger ages associated with higher risk for those bereaved (Wiles, Jarrett, Payne, & Field, 2002). Individual circumstantial factors associated with the bereaved such as insomnia, low serotonin levels, general aversion to lifestyle changes and low perceived social support have also shown to be significant predictors (Hardison, Neimeyer, & Lichstein, 2005; Ogrodniczuk et al., 2003). Gender differences have also been observed in this regard suggesting females to be more predisposed than males. However, an important gap is that much of the research on the risk factors and predictors of PCBD is focused on bereaved adults. Very few analyses have concentrated on adolescents.

The next chapter identifies the methodology and the relationship of the design to the research question.

Chapter 2: Method and Methodology

I began my work with this thesis by reflecting on my own adolescent encounters with loss and grief and paralleling them with my encounters in adulthood. Personally and professionally, a phenomenological approach makes sense to me. My experiences as a grieving youth varied from my encounters as a grieving adult. My perceptions of what it means to grieve and my preconceptions about supportive services are impacted by my own lived experiences. This individual experience was the starting point to inquiry. It then became my belief that the opportunity to engage in phenomenological understanding would likely challenge my presumptions and the aspects of loss I likely take for granted. Thus, this thesis aims to explore the lived experiences of adolescents who are grieving the loss of someone significant; how that grief differs from adult grief; and what responders can do to provide ample grief support.

I will begin this chapter with an explanation of phenomenological research followed by a more specific approach used in this study classified as hermeneutic phenomenology. I will describe the process of 'bracketing' judgements and will outline the 'fusion of horizons'. I will provide details of the data collection process and clarify ethical considerations. Lastly I will identify the application of Van Manen's (1997) six steps to data analysis and will address limitations of this analysis.

Phenomenology Research

The phenomenological movement was initiated by Husserl (1859-1838) as a new way of studying philosophy and the structure of consciousness. Heidegger (1889-1976) and Merleau-Ponty (1945), later expanded on Husserl's philosophical focus on consciousness and elaborated on existential and interpretive dimensions. Merleau-Ponty (1945) described phenomenology as a

method of describing the nature of our perceptual contact with the world and reasoned phenomenology provided a direct description of human experience.

Recent theorists, such as Van Manen (1997, 2014), have moved from phenomenology as a philosophy to its use in phenomenological research and theory development. Phenomenological study is now deemed a viable approach to conducting research in the field of social science (Van Manen, 2014). It is classified as a qualitative form of inquiry that provides researchers with a practical means of studying human phenomena or the lived experience. According to Van Manen (2014), lived experience is experience we live through before we take a reflective view of it (p.42). The focus is on the way things appear through experience or consciousness; it aims to focus on people's perceptions of the world in which they live. It implies that experiential, practical, and instinctive understanding is more meaningful than abstract, theoretical knowledge. According to Kafle (2011), it is a way to examine the essence or essential meanings of phenomena. Van Manen (2014) describes it as:

> More a method of questioning than answering, realizing that
>
> insights come to us in that mode of musing, reflective
>
> questioning, and being obsessed with sources and meanings of
>
> lived meaning (p.27)

According to Hein and Austin (2001), the majority of phenomenological methods can be classified into either of two broad categories: empirical phenomenology, which proceeds from the perspective that a scientific explanation is grounded in the meaning structure of those studied, and hermeneutic phenomenology, which proceeds from a stance, a way of being in the world, a willingness to undergo a process so that "what is" may emerge and show itself. For the purpose of this thesis I have chosen to utilize a hermeneutic approach.

Hermeneutic Phenomenology Approach

Hermeneutics originates from the Greek verb hermeneuein, meaning to interpret or decipher (Miles, Francis, & Chapman, 2013; Arnold & Fischer, 1994). Hermeneutic phenomenology is focused on the subjective experience of individuals and groups. It is an attempt to unveil the world as experienced by the subjects through their life world stories. Schleiermacher founded modern hermeneutics early in the 19th century by recognizing the potential for its use to understand human sciences (Crotty, 1998). Schleiermacher (1966), Heidegger (1982), and Van Manen (2014, 1991) postulate that through hermeneutics, researchers are able to develop empathy with text, a relationship similar to what occurs when listeners understand information conveyed by a speaker. Heidegger (1962) expanded these notions, stating that a researcher could never understand experiences as they actually had been lived because pre-understandings or fore-structures influence their interpretation. Heidegger (1962) suggested that understanding comes from a process of deconstructing and reconstructing, from not understanding to coming to a moment when new meanings and understandings are developed, merging both pre-understanding and new phenomena, to come to a significant new understanding of-being-in-the world. According to Van Manen (2003), this approach 'borrows' other people's experiences and their reflections on their experiences to provide a deeper meaning of the experience and to allow the reader to become more experienced themselves.

Kafle (2011) maintains hermeneutic phenomenology challenges the researcher to reflect deeply on what it is the texts of the field have to say and to get lost in conversation with them. According to Kafle (2011) and Bleiker (1980), the researcher is called to play with the texts. The task of the reader or listener is to re-experience, re-cognize, and re-think what the other originally felt or thought. Narratives touch and move the reader or listener when they shed light

on his or her own lived experiences. Through lived discourses the researcher participates in a world revealed by the text and through narratives the researcher becomes aware of his or her participation. Lindseth And Norberg (2004) contend being touched and moved by essential meaning leads us to the truth, to lived truth as opposed to correctness, and it connects us to the ontological level of life world. However, Lindseth and Norberg (2004) further acknowledge the importance of achieving truth and connectedness through meaning-a process that needs the authority of science to achieve something beneficial within the heavy traditions of discourse.

Bracketing or Phenomenological Reduction

According to Hein and Austin (2001,) hermeneutic phenomenology involves studying phenomena with concrete, experiential details, while avoiding as much as possible, prior assumptions and theories. In this approach the researcher aims to create a rich and deep account of a phenomenon through intuition, while focusing on uncovering rather than accuracy, and amplification with avoidance of prior knowledge. One of my reasons for choosing this method was that previous studies have been criticized for objectifying and pathologizing grief. The choice of the hermeneutic method allowed the experiences of the adolescents to be presented in an honest and evocative manner. The method also allowed me to reflect on the meaning of the experiences, thus providing an added dimension of understanding.

Hein and Austin (2001) maintain presuppositions, biases, and other knowledge of the phenomenon obtained from personal and scholarly sources be suspended or set aside. This process is referred to as *bracketing* or *phenomenological reduction* and rigorous self -reflection.

The process of bracketing occurs during the entire course of the research and involves making presuppositions, biases, and other assumptions explicit as they appear. Through this process, additional assumptions are revealed at the level of reflective awareness. The bracketing

of these newly revealed assumptions lead to the discovery of yet other assumptions, and the process continues in this manner (Hein and Austin, 2001). Bracketing also involves the researcher's articulation of his or her beliefs and assumptions so that the reader can be aware of the perspective from which the research was conducted.

Fusion of Horizons

Researchers such as Hein and Austin (2001) and Van Manen (1991) argue that hermeneutic researchers cannot bracket and place aside implicit assumptions and perspectives that are embedded in their own biology and history; rather, they need to acknowledge them and make them explicit.

The concept of *horizon*, as the scope of vision from a specific vantage point, is important. Both literally and figuratively, everything that is "visible" from a particular vantage point is the horizon (Gadamer 1989, p. 302). Both the interpreter and the text (representative of the other) have a horizon. It is in the fusion of horizons that the subject-object dichotomy is transcended (Arnold and Fischer, 1994).

In this method, something new and something old merges under a new perspective. This requires a comprehensive understanding of the total material and represents an event, in which the researcher comes to an understanding of the texts, which includes his or her own fore-understanding as it has developed and transformed throughout the process. The researcher is now in a position to agree or disagree with the text's assumptions (Austgard, 2012). To achieve this understanding, the researcher demonstrates the ability to incorporate the text's truths into his or her own life, situation or project. The text is then carefully read through to discover answers to the question; that is, significant expressions and quotations with common and distinguishing qualities. According to Gadamer (1989), we can't understand a philosophical text without

understanding how it can be a bearer of insights for us. Furthermore, we can't understand a text without engaging its claims. These points suggest that all understanding requires some evaluation of the insights of the philosopher's claims, independent of the justifications the author provided. There can be no disengaged interpretations; nor can interpretation be separated from critical evaluations (Vessey, 2014).

When the interpreter moves or changes position through developing understanding, his or her horizon moves as well. Fusion of horizons implies that the horizon of the interpreter comes to encompass or integrate the discerned horizon of the text. In the process, [fore-] understanding is changed until it is able to account for the sense of the text. [Fore-] understanding becomes understanding (Arnold and Fischer, 1994).

Data Collection

Technology has become increasingly important in the lives of adolescents (Henderson, Keogh, Rosser, & Eccleston, 2012; Huffacker, 2006; Subrahmanyam & Greenfield, 2008; Webb, Burns, & Collin, 2008; Williams & Murten, 2008). Adolescents are heavy users of communication forms such as instant messaging, e-mail, and text messaging, as well as communication-oriented Internet sites such as blogs, social networking, and sites for sharing photos and videos (Subrahmanyam & Greenfield, 2008).Evidence suggests that young people feel empowered online and are provided a degree of anonymity which means they are more confident talking about sensitive or embarrassing issues (Webb, Burns, & Collin, 2008).

According to Statistics Canada (2010), 81 per cent of children, aged 6-16, access the Internet from home; 66 percent from school; 35 per cent from a friend's home; 19 percent from a public library; 9 percent from a parent's workplace; and 5 percent from a community access point. According to Webb, Burns, & Collin (2008), one in five young people experience mental

health difficulties and less than 30% of those seek professional help. According to these researchers,   the Internet has the potential to reduce the stigma associated with mental health problems and facilitate help seeking.

Researchers including Henderson et al. (2012), Hookway (2008), and Williams & Merten (2008), claim blogs offer substantial benefits for social scientific research providing similar, but far more extensive opportunities than their 'offline' parallel of qualitative diary research. First, they provide a publicly available, low-cost and instantaneous technique for collecting substantial amounts of data. Further, blogs are naturalistic data in textual form, allowing for the creation of immediate text without the resources required for recording and transcription. Blogs also enable access to populations otherwise geographically or socially removed from the researcher.

In light of the above research, social network profiles for this study were collected from online grief forums such as: GoodTherapy.org; thelightbeyond.com; and griefbeyondbelief.org. These are free online sites with administrators and moderators who oversee the communication activity. If the tone of a forum becomes hostile or starts to move in the direction of personal attacks, the forum moderator usually has the authority to lock the discussion and prevent further exchanges. These sites were all developed by licensed therapists who encountered their own personal experiences with loss and grief. Admittance to these sites involves a registration and/or log in procedure and members are required to accept terms and conditions of authenticity. All three sites provide disclaimers indicating that all services are used at the individual's own risk.

Forty-two adolescent blog authors were selected between the ages of 13 and 18 years. Blogs were posted between the years 2012 and 2015. Though the term "participants" is used to refer to profile authors, there was no contact, interaction, intervention, or interference between researcher and subjects as all content studied was publicly available without any special

knowledge, fee-based subscription or membership, or authorization. Per regulations outlined in

the host site's terms of use and privacy agreement, all website participants were required to

acknowledge and consent to unlimited public access of any information posted to their profile by

themselves or by anyone else.

      The selected authors vary in gender, demographics, socio-economic status, and lived

experiences. For example, one 14 year old male posts the following blog about the long term

anguish of losing his grandmother:

> My granny passed away almost eight years ago and i (*sic*) still
>
> cant (*sic*) get over it. Now though, my other grandma has died
>
> and her dying just brings everything that happened to my granny
>
> back and sometimes I (*sic*) just cry uncontrollably. Even though i
>
> (*sic*) am only 14 years of age, i (*sic*) have been through a lot in
>
> my life including these 2 deaths. The problem is my mum and
>
> dad aren't (*sic*) the people to talk to because they don't (*sic*)
>
> really know how to deal with it.

A female adolescent, from an alternate site and vicinity, publishes her discern and confusion

surrounding the death of her father:

> I am 15 years old and it's almost been a year since I lost my dad.
>
> I was not told what was wrong with him but the doctors said that
>
> it was undiagnosed luikemia (*sic*). I didn't really have a
>
> relationship with him but I still miss him like crazy. I cry myself
>
> to sleep every night and can't seem to concentrate on anything for
>
> longer that a few minutes because it always gets interrupted by

the thoughts of my dad actually being gone. I don't know if I can

get any answers to my questions about this.

While a third female adolescent, again from an alternate site and vicinity, reveals the

pain and means of coping with the passing of her boyfriend:

His best friend texted me and told me that my boyfriend of two

years was found dead. He followed it up with a link to news

article about it. He died on Halloween. He was found a few days

later dead in the bushes. He told me he was gonna be out for the

night but not to worry, he won't get in any trouble. He said he'd

call me in the morning. I told him to have fun and be careful and

that I loved him. The next day came. I never got that call. I have

spent the last few days kicking and screaming and crying and

drinking and listening to old voice mails, looking at all of our

pictures, and reading old text messages. I don't know if it's

comforting or agonizing but I can't stop. I can't get out of bed. I

can't do anything but miss him. I wish I could explain or put into

words exactly how I feel right now but I can't.

Ethical Considerations

One could argue that archived material on the Internet is publicly available and therefore

participant consent is not necessary .This position often rests on an analogy between online

forums and public space, where the observation and recording of publicly accessible Internet

content is treated like research on television content, a piece of art in a public gallery or letters to

the editor (Hookway, 2008). Some researchers claim that online postings, though publicly accessible, are written with an expectation of privacy and should be treated as such (Elgesem, 2002). There is a strong case for blog researchers to adopt the 'fair game–public domain' position. Blogs are firmly located in the public domain and for this reason it can be argued that the necessity of consent should be waived. Further, blogs are public not only in the sense of being publicly accessible, but also in how they are defined by users (Hookway, 2008). Blogging is a public act of writing for an implicit audience. The exception proves the rule: blogs that are interpreted by bloggers as 'private' are made 'friends only'. Thus, accessible blogs may be personal but they are not private. A member from the Ethical Review Board was consulted and confirmed it was not necessary to seek approval from the board prior to conducting this research.

Data Analysis

There is no particular way to conduct hermeneutic phenomenology research. Rather, the specific method used depends, to a large extent, on the purposes of the researcher, his or her proficiencies, and the nature of the research question and data collected (Hein & Austin, 2001). However, Van Manen (2003) established a methodological structure and identified six research activities that were utilized in the analysis of this study: (1) Turning to the nature of lived experience; (2) Investigating experience as we live it; (3) Reflecting on essential themes; (4) The art of writing and re-writing; (5) Maintaining a strong and oriented relation to lived experience; (6) Balancing the research context by considering parts and whole (pp. 30-34)

Activity 1 is concerned with the nature of lived experience, where the researcher considers his or her personal experiences and converses with others who have lived the phenomenon of interest or collects personal stories. In this stage the researcher examines the words that are used to describe the experience and all action is directed toward interpretation,

understanding and discoursing about things that matter to him or her as a human being. Van Manen (2014) would argue that this stage leads from a sense of wonder. According to Van Manen (2014):

> Phenomenology does not just pose a problem to be solved or a question to be answered. A good phenomenological study almost always starts with wonder or passes through a phase of wonder (p. 37)

The second activity focuses on investigating the experience as it is lived. Phenomenological research is predicated on the understanding that we "care" about our own state of existence and that of others (Magrini, 2012). This step involves the gathering of experiential data through a variety of media, all of which emerges from and finds its way back to the researcher's personal experience. The assembled content allows the researcher to engage in an interpretation of an issue or question in a way not otherwise contemplated. As the examiner in this study, I found I was guided into a discourse that allowed me to reflect with greater depth on the way I made interpretive sense of the lived experiences.

Reflecting on the emerging themes that characterize the phenomenon is carried out in activity 3. This activity involves asking questions about what it is that gives the experience its special significance. The formulation of "themes" allows the researcher to control and give order to the investigation and its written expression. In this study I aimed to orient myself to the interpersonal or collective ground that brought the significance of the phenomenological question into view. In other words, I attempted to interpret the significance of the preliminary themes in light of the original phenomenological question. Statements, words and phrases that were felt to be of significance were selected while reading and re-reading the data; and these

formed the early themes and sub-themes. Tabulated examples of this process will be provided in the next chapter.

Activity 4 involves describing the phenomenon in writing and bringing the experience 'into speech'. Through writing, the researcher provides form to that which is made apparent through the thematic analysis. The writing of phenomenological description "strives for precision and exactness by aiming for interpretive descriptions that exact fullness and completeness of detail, and that explore to a degree of perfection, the fundamental nature of the notion being addressed in the text" (van Manen, 1997, p.17). Throughout this process, I made a chart of all the thematic statements and themes and then wrote notes and paragraphs in an attempt to capture them. The findings were frequently discussed at regular intervals with my thesis advisor to test if the themes had been captured appropriately. I frequently wrote, reviewed, and rewrote in an attempt to capture the real meaning of the experience as described by the social network authors.

Activity 5 requires that the researcher attempt to understand the phenomenon in a full and human sense; to maintain a strong and orientated relationship with the phenomenon of interest. When considering step five, the researcher must strive to remain focused on the research question at hand.

> To establish a strong relation with a certain question, phenomenon, or notion, the researcher cannot afford to adopt an attitude of so-called scientific disinterestedness. To be orientated to an object means that we are animated by the object in a full and human sense. (Van Manen, 1997, p. 33)

It was often easy to become immersed in the stories of the social networking authors and the literature and become distracted from the study as a whole. To avoid

being sidetracked it was necessary to have ongoing systems, for example a journal of reflections, which was used to refocus attention on the research question.

The final activity, activity 6, entails putting everything together by stepping back and attempting to look at the whole picture to ensure that all the different parts contributed to generating a complete picture of the phenomenon (Van Manen, 2003). While these steps are sequential there is a back and forth movement between the steps throughout the research process. An unfolding and infolding occurs as the data is read and re-read, considered and re-considered, examined and re-examined. Potentially, there is no beginning or end, no top or bottom to this circular process. For the sake of this study, I endeavoured to identify 3 or 4 reoccurring themes. These themes will be acknowledged and supported by additional research in the following chapter.

Limitations

A limiting factor in doing the analysis is the inability to gain further insight by questioning participants and directly verifying assumptions. Everything included in online social networking profiles is limited by what the authors choose to disclose or their subjective depiction of themselves (Williams and Merten, 2008). However, these limitations are not dissimilar from the trials faced with any type of self-report data collection that is reliant on honest disclosure of participants. In addition, the lack of further inquiry prevents the researcher from influencing the participant's responses.

It is also important to note that the terms of use and privacy agreement may not be a legally binding agreement as a minor's agreement often stands void ab initio.

Chapter Summary

This chapter concentrated on the process of phenomenological research, more specifically hermeneutic phenomenology. It explored measures deemed central in the researcher's effort to suspend judgement and described the terms 'bracketing' and 'fusion of horizons'. Details of a data collection process utilizing online forums was communicated and ethical considerations were elucidated. In closing, Van Manen's (1997) six research activities were identified along with its application to this study. This was followed by statements of limitations.

The following chapter outlines the findings of this study and highlights empirical and pertinent literature.

Chapter 3: Analysis and Supporting Evidence

A number of people access and utilize electronic technology on a regular basis. According to Breikss (2012), 24.7 million Canadians are online daily and 64% of this population have social network profiles. McKinnon (2014) contends that Canadians rank 12th in the World for the number of hours spent using social media each day. The US comes in 8th with 80% of their population being Internet users. Brown (2013) maintains that the majority of social media users are under the age of 30. Phones and other mobile devices have become a primary driver of teen internet use (Lenhart, 2007). This has been facilitated by the widespread availability of Smartphones.

Although the Internet may be used for information gathering, learning, and entertainment, the primary motivator for adolescents' usage involves interpersonal communication (Anderson-Butcher, Lasseigne, Ball, Brzozowski, Lehnert, & McCormick, 2010; Lenhart et al. 2007; Beebe

et al. 2004). Data show that 28% of adolescents create online diaries or journals, 27% have their own websites, and 55% have profiles on social networking sites (Lenhart et al. 2007).

Research on the use of technology in relation to grief and grieving is mounting. The Internet serves as a potential source of grief expression for grievers (Neiymeyer, Harris, Winokuer, & Thornton (2011). This form includes commemorative, expressive, and experiential functions that provide opportunities for grievers to describe personal stories, express thoughts and emotions, and create memorials. Examples of these kind of sites include poetry and prose sites, web memorials, and online blogs (Neiymeyer et al, 2011, p.368). According to Lenhart (2007), two out of five adolescents using social networking sites have blogs, while even more read the blogs of others and post comments to friends' blogs.

In light of the increased use of social media amongst young adults and the potential use of technology as a source of expression for grievers, this study focused on random collections of online grief blogs from various adolescents. This chapter begins with a description of the analysis process. It is followed with details about online blogs along with presenting data and themes that emerged from the phenomenological analysis of the online posts. The themes of Isolation and Loneliness; Attachment and Quality of Relationship; Meaning and Purpose; and Guilt and Responsibility have been identified as recurring throughout the blog transcripts and will be discussed with reference to the literature and the philosophical underpinnings of grief and bereavement.

Analysis Process

In order to attribute meaning to the data, Van Manen (1997) suggests three methods for isolating thematic statements. These methods are the detailed reading approach, the selective or highlighting approach and the holistic reading approach. In the detailed reading approach, van Manen (1997) proposes that the researcher looks at each sentence or group of sentences while asking, "What does this sentence,

or sentence cluster, reveal about the phenomenon?" (p. 93). The selective or highlighting approach asks which statement is most revealing about the phenomenon in question. In the third approach, the holistic reading approach, van Manen suggests looking at the text as a whole and asking which notable phrase captures the fundamental meaning of the text? These themes are then used as a framework around which to create a text, which aims to capture the essential meanings of the phenomenon that have become evident within the data. All three approaches were employed during the data analysis of this research.

Online Blogs

A blog is a personal online journal in which an individual writes opinions, shares ideas, and communicates with other users on the Internet (Herring, Scheidt, Wright, & Bonus, 2005; Liu & Chang, 2010). Blogs are predominantly sections of text, but may include images, media objects and data that is arranged chronologically in a HTML browser (Armstrong & McAdams, 2011). A blog entry or, more commonly known as a blog post, is a complete unit of content. Blog entries or posts appear in reverse chronological order so that the most recent post is the first post that readers see (Kumar et al., 2004). Posts have time stamps and can be assigned tags and/or categories for organizational purposes. The length of a post can vary widely within one blog and typically has its own headline (Armstrong & McAdams, 2011).

Blogs are akin to online diaries and serve as one type of online medium adolescents use regularly to communicate with others. Essentially, a blog is a personal website that serves as a traditional diary or journal. Blogs serve as forms of community building as individuals are able to chat, share pictures and connect via message boards. Instagram, SnapChat, Yik Yak, Whisper, and Facebook are popular examples of such networks.

Blogs provide bloggers with an opportunity to voice their opinions and share their personal stories (Burke & Oomen-Early, 2008). Various websites offer users the opportunity to explore and understand their own experiences in a safe, caring online community (Neimeyer et

al, 2011). Some appealing aspects of a blog community include anonymity, a degree of control over relationships, and ease connecting with others who have had similar experiences (Horsely, 2011; Raines & Keating, 2011). Blogs can be *closed* (private) or accessible to only certain people, or *open* which permits admission to anyone on the internet (Burke & Oomen-Early, 2008). Blogs are usually unstructured and unedited. For some bloggers, the ability to share their experience without having to make eye contact or witness the nonverbal responses of support providers may alleviate embarrassment associated with disclosing undesirable information, particularly in the case of stigmatized loss such as that experienced by suicide survivors (Rains & Keating, 2011) Furthermore, bloggers can converse about their experiences and needs without breaching general conversational norms associated with self- disclosure and appearing socially incompetent.

The social media findings and advantages listed above provided a distinctive forum for gathering data surrounding the thoughts, feelings, and opinions of bereaved adolescents. The following sections highlight the themes that materialized from the research.

Isolation

Among the bereaved bloggers, 60% (N= 25/42) referenced feelings of isolation and loneliness. Adolescence can be a challenging and perplexing stage of life for youth. It is a period of time of transition and new responsibilities. It is expected that teens will gain increased skill and competency to make career choices, enter into and maintain intimate relationships, and establish an autonomous identity (Balk, 2011). The death of a loved one or friend augments the daily trials of being a "normal" young adult and compromises their confidence in independent functioning, their emergence of intimacy with peers, and their connection with family members.

(Christ, Segal, & Christ, 2002). These concessions can lead to feelings of isolation and loneliness as illustrated in blog example 1 & 2.

Blog Example # 1

> I feel like i (*sic*) am falling apart, and i (*sic*) feel angry at everyone. Now i (*sic*) have pushed away all of my friends and have no one to talk to, except my mum (*sic*) who doesn't understand. I am left feeling empty and alone.

Blog Example # 2

> I don't know what to do or who to talk (to). I don't really like opening up to anyone because they don't know how I feel. I hardly talk to anyone, which includes my sister and my friends. I feel so alone in a world full of people.

Peer Network

Of the 60% who reported feelings of isolation, 44% (N=11/25) described a need to conceal and censor their emotions when in the accompaniment of peers. It is not uncommon for adolescents to camouflage their emotions in order to blend in with their peers. According to Neufeld and Mate (2004), youth will hide feelings, such as sadness, fear, loss, and rejection, from their peers to avoid exposing themselves to ridicule and attack. Bereavement leads to vulnerability (Balk, 2011) and while wanting to believe they can handle adversity, in reality the adolescent realizes how unstable they are. A sense of belonging is momentary for the bereaved adolescent and their more common perception is one of not belonging and a perceived sense of solitude (Balk, 2011). The following blog exemplifies such sentiments:

Blog example # 3

> I was always use to being at the top of the social hierarchy and loved to be around people, fed off it, it fired up my charisma. Nothing bothered me. I was

without flaw. But now every interaction is negative, people react almost in disgust and turn their backs on me, the rock solid self confidence that I always enjoyed is shattered. A year later and I still find myself alone in the world crying my eyes out every day trying to figure out how I could have fallen so far and ended up so alone.

According to Balk (2011), adolescents see themselves as ineffective when their feelings are deflated. Their sense of belonging becomes marked by anger and alienation when friends reject them or when peers they hardly know try to ameliorate their grief by fake showings of care (Balk, 2011). The situation overwhelms them, and they feel incapable of exerting mastery over how they feel (see blog example # 4).

Blog example # 4

No one wants to listen to me talk about her anymore. I can't let go. Little things make me burst into tears, like a death on a tv show, a David Archuleta song, a picture of her. I don't know how to cope. What do I do? Am I losing my mind? I hate when other kids come up to me and say they are sorry, half of them didn't even know her. I feel like I am going to have an emotional outburst in public. I always have to push it back down. Other than academics there was no part of my life I didn't excel in. Now I'm not myself. I feel lost, angry, confused, upset….I tell everyone I am over it but I'm not.

Sometimes assumptions are made that teenagers will find comfort from their peers. But when it comes to death, this may not be true. It seems that unless friends have experienced grief themselves, they project their own feelings of helplessness by ignoring the subject of loss, disregarding the bereaved acquaintance, and/or engaging in distraction activities. Lack of grief

support from peers, due to lack of knowledge, discomfort, and inexperience in assisting the bereaved, may complicate recovery from loss and produce a grander sense of isolation (Fajgenbaum, Chesson, & Lanzi, 2012; Herberman, Fullerton, & Robert, 2013; Balk & Vesta, 1998). In addition, suppressed expressions of grief and lack of peer support may be risk factors for prolonged, intensified grief, somatic grief symptoms, and persistent negative feelings (Herberman, Fullerton, & Robert, 2013).

Loss of a Parent or Sibling

When a parent dies, some teens may be told to "be strong" and "carry on" for the surviving parent (Balk & Corr, 2009; Charles & Charles, 2006). Sibling loss may be complicated by the parents' relative inaccessibility as they grapple with their own mourning process (Charles & Charles, 2006). According to Charles and Charles (2006), comments such as, "You are now the man in the house" and expectations to be "grown up" and support other surviving members of the family, such as younger siblings, are not uncommon. An online Hospice website from June 2015, emphasizes that adolescents do not have the opportunity—or the permission to mourn when they feel a responsibility to care for the family. Bereaved adolescents are frequently given messages to ignore and or postpone their own grief and ''remain strong for their parents or younger siblings (Packman, Horsely, Davies, &Kramer, 2006). Such is the position for 27% (N=6/22) of the bloggers who indicated a segregation mindset (see blog example # 5 and # 6). Correspondingly, adolescents may defer their own needs and refrain from burdening a parent with further concerns in the interest of serving and protecting their parents' needs (Charles & Charles, 2006; Jakobsen & Christiansen, 2011). According to Packman et al (2006), grief and fear may be compounded by witnessing parents' distress and vulnerability along with the explosive nature of their parents' feelings.

Blog example # 5

> The problem is my mum (*sic*) and dad arent (*sic*) the people to talk to because they have enough to deal with. They dont (*sic*) need to her about my problems or worry about me because they can't handle more. That is why i (*sic*) have come to this site.

Blog example # 6

> I can't tell my mom how I feel because she is too busy crying or too numb from the medication the doctor gave her. Why can't the doctor see I need medication too? I don't get along with my dad and he just seems angry all the time. My sister was the only one I could turn to. Yesterday I found my brother crying in my room. I know he needs someone and people keep telling me I'm the big sister now. I just want the universe to give my sister back.

According to Charles & Charles (2006), the inability of a parent to attune to and attend to a youth's needs at an effective level impedes self- and relational knowledge. Furthermore, they contend lack of parental availability can lead to hypervigilance, decrements in problem solving, and increased sense of being alone and abandoned in the world. Although it is developmentally appropriate to separate from parents, Balk (2011) and Charles and Charles (2006) contend adolescents need a solid anchor to keep them on the path of healthy development, this becomes particularly imperative when impacted by grief. More importantly, emotional isolation from caregivers inhibits the type of meaning making so essential for constructive mourning to occur (Wortman & Silver, 1989). Among the identified risk and protective factors for complicated grief are parenting, home conditions, and social support (Brown et al., 2008). Brown et al. (2008) found an association between complicated grief and caregivers' emotional reactions, sadness in

the home, and anger. Factors identified as protective in relation to loss included increased levels of support, child-centered parenting, and adaptive functioning.

Attachment and Quality of Relationship

According to attachment theory, the loss of an attachment figure is a profound blow that triggers intense distress (Mikulincer & Shaver, 2007). In this study, 45% (N=19/42) of the adolescent bloggers mentioned an inability to move forward due to the loss of individual with whom they felt a secure attachment. 47% (N=9/19) of these secure attachments were to a parent, 32% (N=6/19) were a sibling, and 21% (N=4/15) were someone other (i.e. grandmother, aunt, and boyfriend). See blog examples 7, 8, and 9.

Blog example # 7

> He was my father, my friend, my closest confidante. He and I were always together like bread and butter.

Blog example # 8

> My brother and I were very close and shared everything. We had a rough past, and went through it together. We needed each other and now I don't know how to go on without him.

Blog example # 9

> Me (*sic*) and my mom were so close. Closer than anyone else. I could tell her anything. Now I don't know what to do with myself…I fell (*sic*) lost, confused, and angry. She was my rock and I can't live without her.

Attachment figures can be identified as individuals to whom we seek proximity, from whom we resist separation, to whom we turn when in anguish, and from whom we acquire support and encouragement as we explore the world, engage in meaningful activities and endeavor to conquer new challenges (Fraley & Davis, 1997; Shear, Mon, Houck, Melhem, Frank, Reynolds & Silowash, 2007). The following sections will describe the theory of attachment and attachment style, the trials of losing a parent, and the impact of sibling loss for young adults.

Attachment Theory and Attachment Style

Attachment theory was first proposed by John Bowlby (1907-1990) and Mary Ainsworth (1913-1999). Bowlby observed that separated infants would go to extraordinary lengths (e.g., crying, clinging, frantically searching) to prevent separation from their parents or to reestablish proximity to a missing parent. Drawing on ethological theory, Bowlby postulated that these attachment behaviors, such as crying and searching, were adaptive responses to separation from with a primary attachment figure--someone who provides support, protection, and care. . According to the theory, an individual who is cared for in a responsive and consistent manner develops the expectation that others will be available and supportive when needed (Fraley, Vicary, Brumbaugh, & Rosman, 2011). Bowlby also believed the memories of such expectations form working models of self and others. Furthermore, Bowlby argued that the attachment system is active over an entire life span and is manifested in adults' tendencies to seek proximity and support when threatened or distressed (Ein-Dor, Mikulincer & Shaver, 2011).

While conducting a study in Uganda, Ainsworth developed a technique called the strange situation--a laboratory paradigm for studying infant-parent attachment. In the strange situation, 12-month-old infants and their parents are brought to the laboratory and, systematically,

separated from and reunited with one another (Fraley, 2002). Out of this study she concluded that there were three major styles of attachment; securely attached, ambivalently attached, and avoidantly attached (Bretherton, 2003). Securely attached children are said to use their attachment figure (AF) as a "secure base", from which they explore, but return to in times of stress. Children who are said to have an anxious-ambivalent attachment style display dependent and clingy behavior and are difficult to console at the reunion stage. They lack the sense of a "secure-base" which is manifested as difficulty moving away and exploring the environment. Finally, children exhibiting an insecure avoidant attachment style tend to seem oblivious to the presence of their attachment figure, not seeking them out when distressed, showing little or no separation anxiety and lack response upon the AF's return ("A Brief History of," 2012).

Attachment style predicts ways of dealing with emotions and handling stressful situations, in particular ways of coping with bereavement (Neimeyer, Harris, Winokeur, Thornton, 2011; Stroebe, Schut & van den Bout, 2013, Shaver & Tancredy, 2001). Appendix A summarizes

Keskin and Kam (2010) contend there is a higher incidence of emotional problems, including anxiety and depression, conduct problems, suicidality, drug use, aggressive and antisocial behavior, attention deficit disorder and hyperactivity when there are problems or with attachment style relationships or severed attachment relationships in the adolescence period. (See blog example # 7). Shear et al. (2007) suggest proximity seeking is triggered by bereavement and can be a part of an adaptive grief process. If relational support is blocked the bereaved person is caught in an endless state of acute grief, complicated by thoughts, feelings, and behaviours that impede progress (Shear et al., 2007; Mukulincer & Shaver, 2013).

Blog example # 10

> I have spent the last few days kicking and screamin (*sic*) and crying and
>
> drinking and getting high and listening to old voice mails, looking at all our
>
> pictures, and reading old text messages. I don't know if its (*sic*) comforting or
>
> agonizing but I can't stop. The unnaturalness of his absence makes me want
>
> to rip my hair out.

Parental Loss

One blogger shares, "I lost my dad 2 years go. It feels like months have gone by…why does it

still feel like a dream? why (*sic*) does time go by slower? will (*sic*) it always be like this?"

According to Bonanno et al. (2002) most young people will show good long- term adaptation

after the loss of a parent. However, Jakobsen & Christiansen (2011) and Cohen, Mannrion,

Greenberg, Padlo, & Shipley (2002) contest a small group takes another course and develops

serious social and psychological problems.

Jakobsen and Christiansen (2011) conducted a study on a population of individuals

between the ages of 10-23 who lost one or more biological or juridical parent. The major finding

of their study indicated that the death of one or both biological parent increased the risk of

suicide attempts in young people regardless of the cause of parental death. They further

ascertained an increased risk in youth who were left with low income fathers after the death of a

mother. They attributed this to the negative impact of having few available resources. These

findings coincide with the posting from an adolescent in blog example number # 11.

Blog Example # 11

> The pain is too much to bear and I can't stop it. It hurts so much. Sometimes I
>
> want to overdose or drink myself to death. I know I need help but my dad
>
> can't afford it and I don't want to burden him. Life was so much easier when

> my mom was still alive. She always knew what to do. She knew how to make
>
> me feel safe. I know my dad loves me but he doesn't show it. Sometimes I
>
> feel he cares more about his job. If I ran away it would make it easier on him.
>
> But what would I do? Where would I live? Who would help and protect me
>
> from things? I don't know what to do. I need my mom. I miss her badly.
>
> What do I do?

Early adolescents face the task of separating emotionally from their parents and managing the conflict of leaving the protection and predictability of the family (Balk, 2011). The death of a parent appears to fragment assumptions of the predictability of the world and, similar to the above bereaved blogger, leaves them questioning the foundation to support their ability to move forward.

Quest for Meaning and Purpose

The death of someone close during adolescence often forces an adolescent to reflect on and restructure his or her meaning-making system, world view, and sense of self (Cait, 2004); Neimeyer and Sands, 2011). 38% (N=16/42) of the bloggers in this study posted comments in which there was a quest for understanding, an exploration of perception, or a query about faith. One blogger asks, "Was it ment (sic) to happen? Do you think everyone has a date to die?" while a second probes, "Why? Why me? Why my brother? Why my family? and a third solicits, "Does anyone out there believe in life after death? I'm so scared that wherever he is he's lost and alone and confused. It hurts so much not knowing if he is okay."

Neimeyer and Sands (2011, p. 9) maintain that how or whether an adolescent engages in these questions and resolves or stops asking them shapes how they accommodate the loss and constructs their identity in light of it. This aligns with Leighton's (2008) view. She argues that

the establishment of a new identity during this period is a central task. Leighton (2008) asserts that adolescents have the ability to think in abstract terms and they are able to think hypothetically about death and mortality. (See blog example # 12 & # 13)

Blog example # 12

> I lost my dad to a sudden heart attack. I had no idea he was sick. He showed no symptoms. Remembering back to the night where I had to call the ambulance and seeing my mom screaming over his body still gives me nightmares. I think about dying all the time now and how I will die. I know it could be today or tomorrow. I could get hit by a car or drown or choke or get sick like my dad. I wonder what heaven is like. I can't seem to stop. Are these thoughts normal? Does anyone else out there have these thoughts?

Blog example # 13

> I was raised Christian and I know she is in a better place but I cant (*sic*) help wondering about her final days. Was my grandma there with her? I picture her entering this beautiful place with colour and water and the things she likes. I feel her presence sometimes. I think she is happy and there's no more pain.

According to Cait (2004), adolescents can turn to religious beliefs held or previously discarded as a way of meaning-making. Cait further argues religion and a sense of spirituality can offer answers about death and it can help the bereaved make sense of their experience. Others such as Brown, Nesse, House and Utz (2009) conclude that greater religious/spiritual beliefs pre-loss can predict less grief at 6 and 18 month loss. This contradicts findings from

Kersting et al. (2007) who ascertain that those who place higher significance on faith grieve harder. In light of the postings from adolescent bloggers in this study, it would appear religion and spirituality requires further consideration in adolescent bereavement research.

Guilt and Responsibility

Guilt has been held to be a critical factor in distinguishing pathological grief from normal grieving (Charles and Charles, 2006). In this study, 27% (N= 11/42) of the bereaved adolescent bloggers indicated feelings of guilt and responsibility. Of these, 36% (N=4/11) felt remorse for failing to visit or communicate sentiments, 27% (3/11) shoulder liability, 18% deem weakness in preventing or impeding the incident and the remaining are conscious of their ability to still exist or criticize their lack of ability to express sadness.

This study revealed that some adolescents feel preoccupied by guilt feelings and self-accusations as a means of compensating for past disagreements and ill wishes or for being alive and well (see blog examples # 14 & # 15). This theme is consistent with a study by Melhem, Day, Shear, Reynolds and Brent (2003) who determined major depression was significantly associated with subjects' feeling that they could have done something to prevent the death.

Blog example # 14

> I feel deeply guilt about my brother's death. What if his death was a punishment for all the times that we fought over the good spot by the television, the front seat in the car, sharing treats in the house, or whose turn it was to do dishes? Sometimes I thought life would be easier if he was dead but I didn't mean it. I was just angry. I never got to say sorry. Why did I fight with him so much?

Blog example # 15

> My baby brother was four years old when he drowned, I was 7 at the time.
> Now I'm 13. i (*sic*) wasn't able to pull him out of the pool in time, i (*sic*)
> didn't know how to swim. i (*sic*) feel guilty that i (*sic*) still haven't learned.
> This has been haunting me, torturing me because ive (*sic*) blamed myself for
> his death. I'm not who I use to be. Why didn't God take me instead? Why did
> he leave me behind? ive (*sic*) cried all the tears im (*sic*) able to cry. ive (*sic*)
> been hurting for 6 years now.

Depressed subjects were also more likely to feel this way if they had spoken to the victim within the last 24 hours and to have had an interpersonal conflict with a parent, step-parent, sibling, peer or boyfriend/girlfriend (Melhem et al, 2003). Consistent with Wolfelt (2012), if a parent dies while the adolescent is emotionally and physically pushing the parent away, there is often a sense of guilt and unfinished business (see blog example # 16). Additionally, while the need to create distance is normal, this can complicate the experience of mourning (Wolfelt, 2012).

Blog example # 16

> Right now I have so much guilt and anger building up as the days go by that I
> wasn't there. I didn't get to tell him how sorry I am for every mean thing I've
> ever said that I never meant when we would fight. I didn't get to tell him
> what an amazing dad he is and how happy I am to have him. There is so
> much I never said. There is so much I want to tell him.

Youth with traumatic grief may blame themselves for the death of a loved one or feel intense guilt that their loved one died while they have survived (Mannarino & Cohen, 2011).

This is often termed *survivor guilt.* One blogger expressed, "It is not fair. I wasn't the best brother. I should have paid more attention to him and seen the signs. I don't deserve to be here. He was a better person than me."

According to online information posted by ValueOptions (accessed June 2015), survivor guilt may exist for a reason. It can help people find meaning and make sense out of their experiences. It may help survivors cope with the helplessness and powerlessness of being in a life threatening situation without the ability to protect or save others. It can also be one way to express a connection to those who have died and a way, for a time, of keeping them alive.

Shear et al. (2007) claim that survivor guilt, in the case of adolescents, can lead to restriction in specific kinds of satisfying activities to avoid guilt. They further argue survivor guilt is likely to be another motivation for avoidance of pleasurable activities and re-engagement in satisfying relationships (Shear et al, 2007). This is consistent with Mannarino and Cohen (2011) who also postulate some children and teens develop recue or revenge fantasies while handling unrealistic blame for their inability to save the deceased person. I postulate adolescent grief is anchored in egocentrism. Egocentrism is defined by traditional theory as a failure to differentiate between one's own thoughts and those of others (Artar, 2007). According to the theory developed by Elkind and Bowen (1979), adolescents construct and react to an imaginary audience which is always watching and evaluating them.

Chapter Summary

The research examined for the purpose of this study indicates that adolescents are utilizing blogging as a means to create their own identity and share their experiences with others. For adolescents who are grieving the loss of someone significant, this media outlet seems to be avenue for seeking solace and connection.

It is evident from a number of the bloggers in this study that adolescents exhibit a reluctance to seek support from parents and other adults. In addition, bereavement appears to be something dealt with in isolation and hidden from peers. Adding further complication are feelings of guilt and uncertainties about the predictability and relatedness to the world. These concerns, along with an understanding of the role of attachment, are imperative considerations for those working with this population as the difference between normal grief and prolonged grief appears to be dependent on adequate means of intervention.

The following chapter highlights considerations for professionals who provide support and treatment for grieving adolescents. It also features implications for further research and recommendations for supplementary professional action.

Chapter 4: Summary and Future Implications

This study endeavored to capture the thematic systems underlying the lived experiences of adolescent grief and the manner in which youth process and respond to loss. Online blogs permitted a unique opportunity to examine events and experiences in their natural and spontaneous context in a way that is not possible using traditional designs. The utilization of blog content also enabled myself, as the researcher, to avoid interjecting my own experiences into the content as there was no preplanned agenda influencing the participants' viewpoints.

In Chapter 3, I presented four themes that emerged from the collection of online postings: Isolation; Attachment and Quality of Relationship; Quest for Meaning and Purpose; Guilt and Responsibility. Each of these themes must then be considered in light of the original research questions: "What prevents some adolescents from engaging in the process of grieving and what is required to complete the process when the process has been interrupted or delayed?" In this chapter I will discuss the significance of each master theme as it is related to the original

research questions. This will be followed with possible interventions, limitations of the study, personal experience as researcher, and further research and recommendations for understanding grieving teens.

Isolation

The grief experiences of adolescents are unique as they include the developmental tasks and stages that we know to be occurring during this important time in a person's life (Balk, 2011; Balk & Corr, 2009; Cohen & Mannarino, 2011; Gewirtz, 2009; Morgan & Roberts, 2010). We also know that adolescents seek for identity, independence, and belonging (Collins & Collins, 2005; Herberman et al., 2013; Neufeld and Mate, 2010). Experiencing a loss clearly impacts this developmental phase as evidenced by a number of the participants in this study whose sense of belonging became marked by alienation, misunderstanding, and abstinence from appearing separate and distinct. Comments such as, " I have to push my feelings back down", "I tell my friends I am okay when really I am not", and "My mum (sic) and dad arnt (sic) the people to talk to", seems to tell us that adolescents do not have permission to grieve in ways more seemingly permitted for adults.

The ability to engage in the grief process appears to be further obstructed when expectations are placed on a teen to remain strong for those around them, or that they should be the one to care for other remaining family members. This appeared to be particularly true for participants who lost a sibling and felt their parents "had enough to deal with" or male youth who were given the new role of being "the man of the house". Although a teen may look like an adult, it does not mean that they are equipped to grieve as an adult. Morgan and Roberts (2010) corroborate this viewpoint:

We encourage adolescents to be responsible and accept reality at a time in their lives when they are confronted with a variety of temptations and avenues of escape. Teenagers are also expected to act as mature adults before they are ready for full autonomy. And they are encouraged to think of the future even as they have a strong desire to live for the moment. This paradoxical context in which they live can easily give rise to confusion, isolation, and loneliness. Superimpose on this scenario a significant loss, and teenagers become vulnerable to a personal crisis that may not be readily apparent to the adults in their lives (pp. 208-209).

Attachment and Quality of Relationship

A number of the youth in this study (45%) expressed a need and desire for continued connection with the loved one, particularly in cases where the loss involved a parent or sibling. Some reported the act of listening to old voice mails, reading old text messages, talking to them on a daily basis, feeling their presence, and reminiscing over pictures. Traditionally the bereaved have been encouraged to sever their ties with the deceased in order to achieve a healthy adaptation to loss (Charles & Charles, 2010 & Stroebe et al., 2014). Increasingly researchers have challenged this thinking and have proposed that a 'continuing bond' with the deceased can be a helpful and adaptive mechanism for the bereaved, and that it is not necessarily indicative of pathology (Balk, 2011; McCarthy, 2001; Shear et al;). However in a number of the cases in this study, bloggers posted time frames beyond a 6 month to a year time frame. One blogger shares, "It has been over 2 years", another states, "It has been a few years but it still feels like yesterday."

Upon analyzing the posts in this study, adolescents seem to develop new, altered, and continuing interactive attachments to the deceased: "It's like she's always with me;" "All through my exams I sat with a picture of him and listened to his words of encouragement;" "I ask him to help me every day;" "When I'm sad I go to the cemetery and I talk with my sister." Some of the bereaved revealed levels of distress amongst their pursuit to redefine the deceased's role in their lifestyle readjustment. References to kicking and screaming, heavy drinking and drug use, uncontrollable crying, and self-harm were some of the common stressful examples. Freud (1917) and Bowlby (1949) suggested that healthy grieving involved a process of cutting the emotional energy invested in a person and learning to live without them. Current researchers, such as Balk (1991 & 2011), Hogan & DeSantis (1992), and Stroebe, Schut, & Stroebe (2005) deviate from this view and concur that many bereaved adolescents maintain an ongoing attachment called a continuing bond. According to these researchers, this continuing bond results in a healthier adjustment to the death

Hogan and DeSantis (1996) conceptualized the construct of ongoing attachment as a type of motivational energy that assisted in transforming bereaved adolescent siblings into resilient survivors. They suggested that ongoing attachment was most apparent when adolescents' grief was the most intense and all the plans and expectations they had of a shared life with their sibling were permanently shattered. Through the phenomenon of ongoing attachment, the bereaved adolescents tried to replace their profound sense of helplessness, hopelessness, and meaningless with a sense of help, hope, and meaning by anticipating the possible reunion with their deceased sibling in heaven or the afterlife.

Findings from a study by Shipkey (2008), substantiated that adolescents go through a process of reconstructing reality through continuing bonds and recognized the process as being

fluid and cyclical. Maintaining and continuing bonds with their deceased sibling or parent helped

the bereaved adolescent redefine themselves and make meaning of their life after the death. As

adolescents experience developmental changes and form new relationships, the meaning of the

death of their sibling or parent in their lives may change (Shipkey, 2008). As they grow and face

milestones and change, they may need to negotiate and renegotiate the meaning of the loss and

the position of their loved one in their lives. (Shipkey, 2008)

The concept of a continuing attachment challenges the prevailing idea that there is a

limited length of time required to deal with the death of a loved one, particularly for adolescents

who have lost a parent or sibling. For siblings, the bereavement period may be considerably

longer. Research on adolescents who lost a sibling found that seven to nine years after the death

of a sibling this group had significantly more anxiety, depression, and guilt than their peers in a

control group (Charles & Charles, 2006; Huberman et al., 2013; McClowry, et al., 1987). This

seems to align with some of the participants in this study who identified intense emotions several

years after the loss of a sibling, mother or father. Adolescent sibling and parental bereavement is

a process that does not appear to be time bound; rather the experience appears to be on-going and

persistent and varies according to developmental stages (Charles and Charles, 2006, Huberman

et al., 2013; Shipkey, 2008). This finding differs from studies conducted on adults such as the

longitudinal research by Bonanno (2009). Bonanno uncovered evidence that 50% or of bereaved

adults do not experience a long and distressing period of coping, but actually in fairly short order

return to normal functioning. He further concludes that around 40% of bereaved adults

experience a prolonged period of difficulty but over approximately two years they are able to

gradually return to normal functioning.

Based upon the current findings, it is imperative for those working with young adults to consider the level and quality of closeness between the bereaved adolescent and the deceased and whether the manner in which they are seeking resolution can be considered a supportive and functioning secure base schema. Such regard plays a role in distinguishing a normal and adaptive coping process from a prolonged and complicated process. It is also vital to supervise the level of distress to manage harmful coping mechanisms.

Quest for Meaning and Purpose

One's philosophy of life, that is relied upon to understand the world and one's place in the world, can be shaken and challenged in the wake of bereavement (Tedeschi & Calhoun, 2006). This appeared to be true for a number of the participants in this study. Death of a loved one led some to ask questions about the purpose of life ("Why should I care? Or "What's the point in living? Is there a reason to life?"), future endeavours and possibilities ("What is going to happen to me now?" and "People say everything will be okay. How is it going to be okay?"), why certain events happen ("Why? Why me? Why my brother? Why my family?"), and what to expect from others ("Whose going to help me now? Or "Who can I talk to and trust in the same way?") . Adolescents expressed challenges with previously held assumptions about the world or sought confirmation about the existence of an existential realm and a life after death ("Do you think he is okay? What if he is lost and alone?" or "Do you believe in a heaven? Will I get to see my mom again?).

Meaning-making has been described by Park (2010) as a beneficial process since after encountering a traumatic or highly stressful event, individuals engage in coping mechanisms in an attempt to make meaning of the event. For some, faith, religion, or spirituality appears to buffer the effects of loss by reinforcing hope for reunion with their loved one in the afterlife,

offering a sense of divine consolation, and extending the support of a community of fellow believers (Burke & Neimeyer, 2014). Phillip & Stein (2007) and Schottenbauer, Rodriguez, Glass, & Arnkoff, (2006) differentiate between meaning-making coping and religious coping. They define meaning-making coping as a process of activating spiritual beliefs and experiences and religious coping as a meaning-making strategy. Schanowitz & Nicassio (2006) contend that religious coping provides a possible safeguard against the negative effects that stress has on psychological well-being by helping individuals view difficult situations as part of a divine plan and/or as an opportunity to grow. As a result, religious coping acts as a coping mechanism for overcoming obstacles that are difficult to control.

The role of spirituality, religion, and faith for the participants in this study is unknown as there was no opportunity to converse, clarify, or inquire in greater depth. However, creating space to openly explore schema's and worldviews warrants significance for those working with bereaved adolescents as it appears evident that spiritual and religious context may aid in the reconstruction of a new assumptive realm, that includes new information about the world and self, or it may elicit confusion, anger, and sorrow as adolescents journey through the grief process Muselman & Wiggins, 2012).

The results from this study warrant further contemplation. For adolescents who display negative religious or spiritual coping after bereavement, care givers should be attuned to the possibility of those clients developing depressive and/or anxiety symptoms and suggest appropriate coping skills. For those who use positive religious or spiritual coping, the integration of spiritual interventions may prove to be a powerful resource in the therapeutic endeavor (Muselman & Wiggins, 2012).

Guilt and Responsibility

Approximately 27% of the participants in this study expressed feelings of guilt for something they should have done or felt differently, or for being one of the survivors. Some believed they had the ability to prevent a suicide. Some felt shame for being angry that the deceased person abandoned them. Others felt a sense of onus for fighting with the loved one prior to the death or refraining from visitation while the deceased was ill. A small portion felt remorse for wishing the person dead or for experiencing a sense of relief that the person was gone.

According to the following researchers: Manarinno & Coehen (2011) ; Melhelm et al. (2003); and Pfeffer, Jiang, Kakuma, Hwang, & Metsch (2002), these thoughts are cause for concern as depression is a risk factor associated with subjects' feeling that they could have done something contrary. Melhem et al. (2003) further contend that guilt is a risk factor common to complicated grief. Statements from the adolescent participants in this analysis align with some of the bleak outcomes identified by these researchers: "This is eating me up and I don't want to face the world anymore"; "I want to regain my motivation"; I don't want to feel distant and aloof"; "It's better that I just hide away from my family. They know it's my fault too."

Feelings of guilt have been consistently reported among adults as well as children and adolescents (Pfeffer et al. 2002; Stroebe, Stroebe, Schoot, Schut, Abakoumkin, et al, 2014). Guilt in the bereavement context has been defined in the literature as a remorseful emotional reaction in bereavement, with recognition of having failed to live up to one's own inner standards and expectations in relationship to the deceased and/or the death (Li, Stroebe, Chan, & Chow, 2014). Although there is some evidence that remorse and blame has a detrimental impact on adjustment to bereavement, empirical investigation has been limited and results have so far been

inconclusive (Stroebe et al, 2014). Findings from a current longitudinal study by Stroebe et al. (2014) supported a correlation between high levels of self-blame and high initial levels of grief. Findings further highlight a relationship between responsibility and a slower decrease of grief symptoms over time. In spite of these results, the researchers were unable to generalize their findings beyond the bereaved cohort under investigation. Likewise, limited research material was available on the impact of guilt amongst bereaved adolescents during the commencement of this study, hence the need for further empirical research and replication.

Possible Interventions

Acute grief and the process of integrating the loss usually occur naturally and without the need for active effort (Bonnano and Gupta , 2011: Hall, 2012; Shear et al., 2007; Zisook & Shear, 2009). Once the loss is integrated, yearning and searching diminishes, grief intensity declines, and a feeling of connection to the deceased remains (Shear et al., 2007). This was not the case for 18 of the participants in this study who report feeling an intensity of grief two or more years post loss. Of these 18 participants, 7 lost a father, 7 lost a sibling, 1 lost a mother, and 3 lost someone other. According to Shear et. al (2007), the intensity and personal qualities of the relationship, the patterns of attachment and dependency, and the frequency of contact, justify some of the differences in the grief responses of these adolescents. Dillen and Fontain (2009) concur that kinship plays a vital role in the possible level of complicated grief development, however, they add that the nature of the death has equal ramifications. This is supported by Young, Iglewicz, Glorioso, Lanouette, et al., (2012) and Melhem, Day , Shear, Day, Brent & Reynolds (2003) who contend suicide survivors face unique challenges that impede the normal grieving process and place survivors at greater risk of complicated grief, concurrent depression, PTSD, and suicidal ideation.

In contrast to these beliefs, Lobb, Kristjanson, Aoun, Monterosso et al. (2010) argue that although objective circumstances of the loss carry weight, the survivor's subjective interpretation of the loss has a grander impact on the grief response and process. Regardless of the motives, intervention by professional care givers is necessary when individuals exhibit maladaptive behavioural patterns that prevent the resolution of grief. It is important to note that these interventions may be required at different stages of adolescent development as a major loss may be regrieved at a later time when the young person has established a more mature prospective (Balk, 2011; Leighton, 2008).

As per the adolescents in this study who exhibited a sense of guilt and responsibility or demonstrated a quest for meaning and purpose, there appears to be a need for cognitive restructuring and narrative reframing. This may be best achieved from Cognitive Behaviour Therapy (CBT) and Narrative Therapy techniques as both these methods enable adolescents to co-discover hopeful, preferred, and previously unrecognized and hidden possibilities contained within themselves and unseen story-lines. A more recent intervention discovery by McFerran, Roberts and O'Grady (2010) and Rosner, Kruse, and Hagl (2010) worth consideration is music therapy. These researchers contend that the existing relationship between young people and music serves as a platform for connectedness and emotional expression. In both these studies on bereaved young adults, music therapy had significant results on adolescent coping (McFerran et al., 2010 & Rosner et al., 2010).

Limitations of Study

The main limitation of this study is the inability to authenticate any of the information collected or understand it from the participants' perspectives. Everything included in online social networking profiles, or on the Internet for that matter, is completely subjective and limited

by what the authors choose to disclose or their subjective depiction of themselves (Williams &

Merten, 2008). These limitations, however, are not so different from the trials of obtaining

honest disclosures from questionnaires, interviews, and other self-report data measures.

Further limitations include the lack of cultural diversity awareness, the absence of

information pertaining to family configurations, and insufficient insight into the influences of

gender differences.

Personal Experience

In exploring and attempting to understand the loss experience of adolescents, the method

I used was effective in providing a clear and reflective picture of adolescent grief. At the

beginning of this project I had my own presuppositions based on my own personal experiences,

but the phenomenological process provided a forum for me to revisit an experience that was far

more complex than I had originally believed or imagined. I was touched by the heartfelt stories

of the bereaved participants and found myself living the loneliness, alienation, agony, and

suffering along with my bloggers. As a therapist, I feel this experience has enhanced and refined

my view on how attachment styles and coping skills are affected by loss. I have also gained

interest in the prospect of further research and implementation of cyber counselling.

Lindseth and Norberg (2004) maintain that phenomenological hermeneutics lies between

art and science. As the researcher, we use our artistic talents to formulate the naive

understanding, our scientific talents to perform structural analysis, and our critical talents to

arrive at a comprehensive understanding (Lindseth & Norberg, 2004). I believe I engaged all

these aspects in an effort to provide insight into the phenomenon of adolescent grief, but of

greater importance is what the reader brings. For it is only when the reader integrates

interpretation into his or her world that understanding lived experiences of others becomes productive in human life (Lindseth & Norberg, 2004; Van Manen, 1997, 2014).

Further Research and Recommendations

Today's adolescents will likely not remember a time when computers and technology were not present. Thus **t**he incorporation of technology into practice will be increasingly important and therapists will need to have technology competence to follow them. Real time chat rooms, video conferencing, and online communication have created a new genre of open contact and new forms of connecting. The anonymity available in some forms, such as blogging enables the prospective of greater honesty as participants are able to be relatively unselfconscious about what they write (Hoookway, 2008).

Rains & Keating (2011) contend that the ability to share experiences without having to make eye contact or witness non-verbal responses of support providers alleviates embarrassment associated with disclosing adverse information. This pertains particularly to adolescents who are conscious about the way they are perceived or for those who are dealing with stigmatized deaths such as suicide. Moreover, blogging support appears to be particularly vital in the processing of grief for those individuals lacking support from their strong-tie relationships. Clearly there is much to learn about the impact of Internet forums on the social and mental well-being of young adults. In light of this study, future research is needed to further examine the perceived benefits, risks, and ethical considerations associated with cyber counselling.

Subsequently, research is also required to determine the implications of guilt and sibling loss on adolescent interpersonal and affective development. Such studies would serve to enhance our conceptual understanding and clinical expertise in working with this youthful population of grievers. Finally, research on bereaved youth who show some kind of clinically significant

distress in terms of developing clinical symptoms beyond an acute grief reaction is very important (Rosner et al., 2010). Clear definitions of complicated grief in adolescence would help to identify young adults with a special need for intervention and support.

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