NARRATIVES OF ORPHANED ADULTS:
JOURNEY TO RESTORATION

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Research on the communication of grief and loss has overlooked the stories told by adults who have lost one or both of their parents. This research applies narrative analysis to the stories told by twenty orphaned adults in search of narrative form and function. Three sets of narrative coding revealed consistencies among the narrative events, people, and themes. Most notably, the story form consisting of seven narrative constructs appears to serve the function of managing a guilt-innocence dialectic providing the narrator with a restorative story end. Conclusions suggest that the form and function of these loss narratives of orphaned adults might be compared to other loss narratives as researchers seek to identify a universal loss narrative schema.

Approved:

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Acknowledgments

I am profoundly grateful to the men and women who participated in this study. As they invited me to share in their stories of loss, I learned about depth of grief, the power of narrative, and the generosity of strangers. This research is written in memory of all of our lost parents.

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Dedication

This dissertation is for my sisters Gwen, Kim, and Lynn, my brother John, my sister through marriage Stacey, my niece Allison, my nephew JD and our extended family. Each of our stories has been shaped by the loss of John and Jean Carusi. I embarked on this project for all of us and dedicate it to the memory of Mom and Dad.
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First of all:

I am tired.
I am true of heart!

And also:

You are tired.
You are true of heart!

-David Eggers

David Eggers lost his mother and father to unrelated cancers five weeks apart. After their deaths, David and his siblings sold their childhood home and moved across country for each to start new life chapters. David, in his early twenties, serves as a guardian to his seven-year-old brother Toph. With this new responsibility, David drops out of college and continues to pursue a career as a writer.

In 2000 David Eggers published his first book, *A Heartbreaking Work of Staggering Genius*, a memoir that chronicled the cumbersome journey of mourning his parents while serving as partner, friend, and parent to Toph. The book garnered critical success, including a Pulitzer Prize finalist, as well as popular acclaim as the #1 national bestseller. The book is praised for its unique narrative form. Eggers begins the book by speaking directly to the reader in the above quotation, and continues with over 60 pages of a humorously self-conscious, reflexive narrative critique. Included in these precursors
are “rules and suggestions for enjoyment of this book,” notes on dialogue and characters, “narrative themes,” and an “incomplete guide to symbols and metaphors.” After the opening comments, Eggers begins his story with death of his parents.

Eggers is applauded for the painfully honest account of the mistakes he makes in the caring for and grieving for his parents. The self-conscious ironic forms of his writings function by enabling him to share the most unsavory details of his story. He writes in the acknowledgments:

The author doesn’t have the energy or, more important, skill to fib about this being anything other than telling you about things, and is not a good enough liar to do it in any competently sublimated narrative way. At the same time, he will be clear and up-front about this being a self-conscious memoir, which you may come to appreciate. (LV)

He does not fib. Instead, he tells us that he uses his parents’ deaths to garner sympathy, he uses Toph to attract women and as an escape route for ending relationships, and he admits to not giving his parents a proper burial and leaving his mothers’ ashes for years before retrieving them from storage. Eggers sees the world as being full of enemies; he is furious at others and at himself. On the first page he writes in all capital letters, “THIS WAS UNCALLED FOR.” *A Heartbreaking Work of Staggering Genius* portrays moods, feelings, and views that evoke a verisimilitude that resonates with its readers.

*A Heartbreaking Work* is praised for its unique form, but it serves a function beyond its aesthetic. Eggers (2001) writes that putting this narrative down is a tool for
stopping time, collapsing time, vindicating his self-worth, exploiting and exalting his parents. Eggers, like all of us, constructs his world through the story he tells.

Walter Fisher’s (1984, 1985) seminal argument for the narrative paradigm contended that we all construct our social worlds through the creation of stories. The reader comes to know Eggers not for the events he experienced but for the way he constructs those events through his narrative. In the words of Rosenwald and Ochberg (1992):

How individuals recount their histories – what they emphasize and omit, their stance as protagonists or victims, the relationship the story establishes between teller and audience – all shape what individuals can claim of their own lives. Personal stories are not merely a way of telling someone (or oneself) about one’s life; they are the means by which identities may be fashioned. (p.1)

Eggers story and identity are shaped by the life altering events of parent loss. He is mistaken, misguided, and at times misanthropic. His role of parentless child is cumbersome. As the baby-boomer generation ages towards life expectancy, many will perform the same parentless child role.

In this dissertation, I seek to better understand the bereavement narratives of men and women who have lost one or both parents during adulthood, or as Angel (1987) referred to them, “orphaned adults.” Each of us is likely to experience the loss of
someone of great importance several times during our lives (Bonanno, 2001); I aim to interpret the storied construction of that loss. The bereavement narrative is a largely overlooked genre within narratology from the communication perspective; a large proportion of that narrative research within the communication field investigates the health narrative, but not the bereavement narrative. The orphaned adult population is an under investigated group. Despite the lack of attention, we will soon be a society largely comprised of adult orphans. In the following sections, I will provide an overview of the dissertation, followed by a justification for researching this population through narrative.

Overview

Chapter one introduces the problem that this study seeks to remedy. Both bereavement and narrative have been explored from virtually every standpoint in the humanities and social sciences. Psychologists, sociologists, theologians, anthropologists, and clinicians have gleaned a wealth of knowledge about bereavement; however there is an apparent gap in the communication literature’s treatment of this significant life event.

The second chapter of this manuscript reviews extant literature significant for a thorough understanding of communication and bereavement. Since this is an exploratory study, the review considers conception of grief and narratives from a wide range of perspectives. The chapter is divided into five sections: bereavement, orphaned adults, the relational dialectic perspective, narrative form and function, and bereavement narratives. The chapter begins with an overview of bereavement research beginning with Freud and coming full circle back to Freud’s use of the narrative to council “non-normal” responses to grief. The chapter follows with the specific literature on the orphaned adult. Next, a
review of narrative will promote the importance of an analysis that encompasses both narrative form and function. The final area, bereavement narrative, will draw from literature primarily derived from clinical psychology. The clinician co-creates the narrative with the patient to readjust to a new meaning of the loss.

Chapter three details the grounded theory method used in this study. Twenty participants were interviewed for approximately one and a half hours at a place of their choosing. The goal of the interviews was to elicit full stories or narratives regarding the parental bereavement experience. To achieve this goal, the participants were initially asked to “tell me the story of losing your parent.” In the final phase of the interviews, the participants were asked if they experienced dialectical contradictions during their bereavement. The chapter then explains the grounded narrative theory approach used to code and analyze the stories.

Chapter Four provides both an analysis and discussion of research findings. The initial analysis provides an understanding of the narrative form, including the characters, plot, and dialogue. When questioning the function of narratives, form appeared in a seven construct narrative schema. Participants’ narratives are used to explain and support the narrative schema. Chapter five summarizes the finding of this project, identifies limitations and discusses the implications of this research.

Justification for Population

The parents of the baby-boomer population are currently reaching the age of life expectancy. The 76 million people in this population bubble either have mourned, or soon will mourn, the death of a parent. In turn, the boomers’ children, another population...
bubble known as the echo generation, will experience the death of their parents’ in decades to come. The reality is that death is inevitable. Each one of us is destined for orphan adulthood. Attention to adults surviving a parental loss is still minimal in bereavement research (Sanders, 1980; Douglas, 1991; Jordan & Ware, 1997). Lund and Caserta (1998) explain that most of the research on adult bereavement focuses on spousal loss, followed by studies on the loss of children. Lund and Caserta go on to encourage a focus on adult loss of parents. Even within the modicum of literature on adult-parent bereavement, much of the research centers on the mid-life bereavement of elderly parents (e.g., Douglas, 1991; Kalish, 1989; Moss, Resch & Moss, 1997; Scharlach & Fredriksen, 1993). Although this “midlife” distinction might account for a majority of the adult population, some of this research fails to include younger adults. Hence, existing bereavement research lacks thorough consideration of parental bereavement throughout adulthood.

Several authors offer reasoning for the under examined population. Sanders (1980) proposes the following:

The death of a parent in adulthood can be regarded as part of the natural order of universal dynamics. Therefore, there is apparently little research devoted to the theoretical or empirical aspects of the death of a parent upon the surviving adult child. (p.322)

Parental death is described as “expected” (Moss, Resch, & Moss, 1997, p.44) and “common and usually anticipated” (Jordan & Ware, 1997, p.362). The following passage
from *The Last Dance*, DeSpelder and Strickland’s (1999) popular thanatology textbook helps further illuminate an attitudinal barrier:

As a general rule, for adults, the death of a parent is likely to evoke less intense grief than, say, the death of a child. This phenomenon is probably related to the fact that an adult child is involved in his or her own life; feelings of attachment to parents have been redirected to some extent toward others, such as spouse and children. (p.401)

The advocates of adult child bereavement research suggest that, due to the normalcy of parental death, we mistakenly assume that it is a minor event.

It is taboo to discuss one’s grief after losing a loved one (Doka, 1989). Doka argued that the death of a parent, particularly a parent who was elderly, terminally ill, or living in a nursing care facility, is socially recognized as an expected death that results in a minimal socio-physiological response. Because we construct the loss of a parent as a low-grief experience, Doka claimed that many adult children grieving their parents are “disenfranchised grievers.” They mourn without social recognition of the impact and with few avenues for support and discussion. Without the opportunity for self disclosure and story creation, the would-be narrator might suffer from lack of catharsis. The level of expectation of parental death does not necessarily diminish the impact on the surviving children or the necessity for some survivors to talk about their experiences of loss. Hence, the exploration of this population’s storied grief is warranted. Given the potential limitations for self disclosure, I approached this project wondering who will answer my call for participants and will I be the first to witness their narrative construction.
Narrative Turn in Bereavement Research

A narrative turn is occurring in bereavement research. Over the past eighty years, researchers have used scientific and social scientific methodologies aimed to measure the intensity of grief, describe “normal” responses to grief, classify types of grief, and predict one’s ability to cope with grief. Since much of the bereavement research emanates from psychology, we can understand why the problematization of grief has been a dominate theme. However, we are beginning to see a turn away from traditional methodologies to investigate grief pathology and a focus on humanistic, narrative approaches in an effort to understand how an individual constructs the grief experience.

Niemeyer’s (2001) edited book, Meaning Reconstruction and the Experience of Loss, explains and forwards this turn towards humanistic, communicative methodologies as “the new wave of grief research and theory” (p.5). The chapters in Niemeyer’s book are dedicated to breaking away from both previous methods of bereavement research, such as measuring the reaction to loss, and prior theory, including the various stage models that describe an eventual “end” to grief. Instead, the book argues for the understanding of how the bereaved individual constructs the meaning through communication.

The change that is occurring in grief research likely began with Wortman and Silver’s (1989) controversial article, The Myths of Coping with Loss. Here, the authors argue that society maintains strong assumptions about how one should respond to loss. Concurring with Neimeyer (2001), the authors indict prior theory and “clinical lore”
(p.349) for producing unrealistic expectations for grievers and viewing normal grief experience as pathology. As such, Wortman and Silver appealed for an investigation of individuals' complex interpretation of their own experience.

This new era in bereavement research is ripe for the induction of communication scholars. Questions regarding the communication of death, dying, and loss are being asked and answered from scholars representing a wide-range of disciplines, but there is limited consideration within the nationally and regionally recognized communication journals. For example, in 2001, clinician Nadeau called for more research utilizing symbolic interactionism and family systems theory to discover how family members co-create the meaning of loss. Similarly, Psychologist Ester Shapiro (2001) argued for increased attention to the interpersonal perspective for bereavement research and therapy. In Shapiro’s words, “A loved one’s death shakes the foundation of this interpersonally created and maintained self, disrupting relational systems of affect regulation, attachment, identity, and social role” (p.301). These calls for a deeper understanding of communication’s function in the creation of meaning, identity, and relational systems are a clear invitation for the entrance of communication scholars.
Chapter Two: Review of Literature

Bereavement

Sigmund Freud first developed what is refereed to as the standard psychoanalytic model of mourning in his 1917 article, “Mourning and Melancholia.” Although Freud’s writings on bereavement were few in number and brief in length, they have influenced bereavement research throughout the century (Hagman, 2001). Several authors interpreted Freud’s work as indicating that to break the bond between deceased and griever, achieving attachment withdraw, was the goal of grief (Lieck & Davidson-Nielson, 1991).

Following Freud’s lead, Lindermann (1944) was the first to describe the signs and symptoms of grief, somatic distress, and preoccupation with the image of the deceased, guilt, hostile reactions, and loss of conduct patterns previously influenced by the deceased. Since Freud and Lindermann, clinical psychologists and researchers have attempted to operationalize and distinguish the constructs of bereavement (Vargas, Loya, & Hodde-Vargas, 1989).

A great number of the research interests seem to center on the quest for an empirical measurement or test of grief and/or bereavement. Many researchers, including Bowlby (1961) and Clayton, Desmarais, and Winokur (1968), also developed empirically derived subscales that characterized normal and non-normal reactions to loss. Important questions became apparent: What behavior can be characterized as normal grief and bereavement? What behavior can be characterized as pathological, or acute?
Sanders, Mauger, and Strong (1979) took an important step in answering the questions of normal bereavement and grief behavior. Sanders and colleagues developed the first empirically derived scale that reflected the multidimensionality of grief reactions. The scale measures both of the intensity and the range of reactions to grief. Their scale, The Grief Experience Inventory (GEI), is an accepted standard for the psychology field (Gamino, Sewell, and Eastering, 2000) and is used as a basis for many other grief scales. Researchers have used the long indexes and its many subscales as a method to select certain behaviors that reflect particular aspects of grief.

Unfortunately, according to Vargas, Loya, and Hodde-Vargas (1989) the GEI was used to characterize much of grief behavior as pathological or something other than normal. To illustrate the blurred line between pathological and normal grief, Vargas and colleagues applied the pathological measure to a large population of those in grief. The survey included depressive symptoms, preservation of lost object, suicidal ideation, and decedent-directed anger. They found that most of the population had a fairly high response to the pathological measurement. This study highlighted the weak distinction between normal and non-normal grief. The researchers suggested the intensity and frequency of these feelings to be the yardstick for measuring the non-normal grief.

Prigerson, Bierhals, Karl, Reynolds, Shear, Newsom, and Jacobs (1996) attempted to, and in their view, succeeded in eliminating depression and anxiety from complicated grief reactions. There was little correlation between those who felt depression and anxiety, and those who had difficulty letting go. Hence, the researchers limited “complicated grief” to the experience of difficulty letting go and accepting the
death. Zisook, Devaul, and Click’s (1982) early study took steps to explain such grief reactions as normal. The researchers found that, regardless of how long ago the deceased passed away, some aspects of grief were still present.

Models of Grief

As the latter half of the twentieth century progressed, two thematic threads dominated bereavement research, the development of scales to delineate between normal grief and pathological responses to grief, and the creation of normal stage models of the mourning process. Frequently, the models of grief include beginning, middle, and ending stages. These linear models indicate that grief eventually ends. However, Lindermann (1944) developed a multi-dimensional grieving scale containing three areas: accepting the fact of the loss, adjusting to life without the deceased, and forming new relationships. Linderman’s model, based on Freud’s work, requires the griever to relinquish his or her attachment to the deceased and form new relationships in order to complete the grieving process.

Another pioneer theorist in the field of psychotherapy, John Bowlby, developed a model of grief that is founded in Freud’s work and is in accordance with basic concepts of attachment theory. According to Bowlby’s (1969) application of attachment theory, when the bereaved realizes that the loved one no longer exists, grief arises, along with a defensive reaction to withdraw energy, or love, from the lost loved one. By repeatedly engaging in “grief work,” or the process of practicing detachment from the deceased loved one, the griever eventually becomes detached from the lost loved one and becomes free to attach to a new person. Bowlby is not alone in his theory of grief work as a stage
model process; many other researchers have forwarded similar models of grief. For example, Worden’s (1991) model included accepting reality, adjusting to a changed environment, and emotionally relocating the deceased and moving on with life. In the most widely known model, Elizabeth Kübler -Ross (1969) wrote that the stages of grief included denial, anger, bargaining, depression, and acceptance. Like Bowlby’s model, each of these linear models includes an ending phase.

Until recently, acceptance and reattachment as an ending phase of grief has been a standard for understanding and helping people through grief (DeSpelder & Strickland, 1999); however, the ending phase models have been criticized for the apparent assumption that people can and should be replaced. As Murray-Parkes (1988) points out, “Each love relationship is unique, and theoretical models that assume that libido [or energy] can be withdrawn from one object [or person] in order to become invested in another similar object, fail to recognize this uniqueness” (p.376).

Stroebe (1993) points out many significant questions regarding these well-accepted models that indicate a need to work through grief by accepting and moving on:

Is it really necessary to work through grief in order to adapt to a loss?
Could suppression not lead to recovery?
Are there occasions when, or persons for whom, grief work is not adaptive?
And where does one draw the line between grief-work and unhealthy remuneration? (p.45)

These questions arise from the insight that the grief work models, although useful, fail to account for the varied ways that people actually respond to loss. As Kalish (1985)
explained, when the models are socially and scientifically accepted as the proper way to
grieve, many individuals are considered abnormal in their expression of grief.

George Hagman (2001) is another grief researcher who criticized the guiding
assumptions of the “standard model” (p.317) of grief research. As he explained, several
assumptions of the standard model are flawed. First, there is not an identifiable, normal
psychological mourning process; rather, mourning is a unique private, social, and
relational process. Since mourning is uniquely experienced by individuals, the emotions
are not limited to pain and sadness. Instead, mourning involves a range of affect.
Furthermore, Hagman argues that the function of mourning is a transformative one, rather
than a conservative and restorative one.

Hagman (2001) wrote that the standard model assumptions are erroneously based
on Freud’s early writings and no longer appropriately describe contemporary Western
society’s perspective. The most pronounced of the criticisms is his denouncement of
decathexis, or detachment from the love object. Many researchers (i.e., Hagman, 2001;
Klass, 1995; Klass, Silverman& Stevens, 1996; Stroebe & Stroebe, 1991), have replaced
the previously held belief that the bereaved must detach from the deceased with a new
understanding that the relationship with the deceased continues after death. Hagman calls
for bereavement research that focuses on the bereaved’s meaning of loss, and accounts
for a socially constructed, personally experienced, standpoint that considers a continuing
bond with the deceased.
Classifications of Unique Grief Experiences

The understanding that there are many ways in which an individual might experience bereavement spawned a form of research that has attempted to describe, identify, and categorize various grief experiences. Researchers have sought to discover the characteristic of grief that do not fall into a common pattern, and in doing so, have developed other categorizations for study (DeSpelder & Strickland, 1999). Each of the classifications, including disenfranchised grief, stifled grief, complicated mourning, and ambiguous loss, provides a place for those who experience grief in a way that deviates from the standard model of bereavement.

Disenfranchised Grief. The assumed relationship of a “grandparent” and the models of how grief “should be done,” supports Doka’s (1989) notion that society has rules and norms of grieving. In his important work, Disenfranchised Grief, Doka (1989) writes of the difficulty individuals undergo while experiencing grief under others’ rules (e.g., society, organization). Specifically, Doka (1989) used the term, “disenfranchised grief” to refer to losses that are not openly acknowledged, socially sanctioned, or publicly shared.

Some believe that disenfranchised grief is the most difficult form of grief to manage (Eyeteasmitan, 1998). The following categories fall into Doka’s (1989) concept of disenfranchised grief: a) relationships that are not socially sanctioned (e.g., extramarital affairs, cohabitation, and homosexual relationships); b) relationships between the bereaved and deceased that are not based on recognizable kin ties (e.g., friends and neighbors); and c) past relationships (e.g., ex-spouse, past lovers, and former friends).

Doka (1989) explained that “the concept of disenfranchised grief recognizes that
societies have sets of norms, in effect, ‘grieving rules’ that attempt to specify who, when, where, how long, and for whom people should grieve. These grieving rules may be codified in personnel policies” (p.4). Doka suggested that organizational policies that allow a week off for the death of a spouse or child and three days for the loss of a parent or sibling “reflect that each society defines who has a legitimate right to grief, and these definitions of right correspond to relationships, primarily familial, that are socially recognized and sanctioned” (p.4).

Whereas first generation family relations (i.e., sibling, parent, spouse, and child) and close friends are considered the most difficult deaths (Pfost, Stevens, & Wessels, 1989; Sklar & Hartley, 1990), second generation deaths (such as grandparents) are considered “low-grief” deaths (Fulton, 1970). This research supports relationship as an indicator of grief intensity, but it neglects to analyze the perceived closeness of the deceased to the survivor. For example, an individual might be closer to a grandparent than a parent, but according to the current research, only the title “grandparent” is viewed as an indicator. The uniqueness of the bereavement experience has given rise to new categorizations of the grief.

Doka’s concept of disenfranchised grief has been used to explain the bereavement of several groups of mourners. For example, Scott (2000) argued that the grief following the death of a divorced spouse is a common event that is usually not understood, acknowledged and/or accepted by society, family members, or friends. In addition, disenfranchised grief is often used to describe survivors who lost significant others to HIV/AIDS (Holt, Houng, & Romano, 1999). Since an AIDS death is a socially taboo
topic, and the relationship between divorced spouses is not a socially recognized relationship, the mourners find themselves disenfranchised in their bereavement.

_**Stifled Grief.**_ Eyetsemitan (1998) extended Doka’s (1989) work to argue that when less sensitive to the bereaved role an organization might promote a form of disenfranchised grief he called stifled grief, denying the bereaved the full course of grief. Eyetsemitan argued that organizations may vary in how they choose to codify society’s grief “rules” in personnel policies. The limitations society and organizations might place on the griever are compounded by limited capabilities during grief. Harper (1995) explained that the detrimental effects of grief can impact different aspects of our lives, including our work life. He noted that grief impacts us socially, physically and mentally. Specifically, individuals experiencing grief can become physically exhausted, “even too exhausted to go to work” (p.18). In addition to physical exhaustion, the bereaved incur absent-mindedness, inability to accomplish tasks, and forgetfulness (Harper, 1995). Hence, it is likely that the repercussions of bereavement will invade one’s ability to be a fully functioning employee.

_**Complicated Grief.**_ Complicated grief is a classification housed in the standard model of grief research. Complicated grief may result when certain high-risk factors are present in the bereaved’s experience with loss. Rando (1993), who first conceptualized complicated grief, explained, “in all forms of complicated mourning, there are attempts to do two things: 1) to deny, repress, or avoid aspects of the loss, its pain, and the full realization of its implications for the mourner, and 2) hold onto and avoid relinquishing the lost loved one” (p.243). Although this research assumes that many mourners might
desire to hold onto and avoid relinquishing the lost loved one, Rando’s article on complicated mourning identified several factors affecting the mourning process, and therefore, can still provide insight for this project.

Rando (1993) summarized many factors that might especially complicate, or create a more difficult grieving process. First, a sudden death and unanticipated death, especially when it is traumatic, violent, mutilating, or random, might make grieving more difficult for survivors. The death from a lengthy illness, however, can also complicate grief. The bereavement process is affected by the relationship between the deceased and the bereaved. For example, bereavement can be particularly challenging if the relationship was markedly angry, ambivalent, or dependant. Concurring with Doka’s (1989) disenfranchised grief, Rando found that the bereaved’s perceived lack of social support can hinder the grief process.

*Ambiguous Loss.* The last category of bereavement, ambiguous loss, is emerging as an important area for study. Like disenfranchised grief, ambiguous loss centers on grief that does not have a socially prescribed method of bereavement. Boss (1999) coined the term “ambiguous loss” when studying the wives of pilots missing in action in Vietnam and Cambodia. The wives had no information and no official verification that anything had been lost, thus they were filled with conflicting thoughts and feelings. They experienced an ambiguous loss.

In a recent study, authors Powell and Golish (2003) used ambiguous loss to describe the dialectical feeling after the birth of a premature baby. Parents mourned the loss of the healthy child they had envisioned while simultaneously celebrating the birth of
the child they did have. The parents’ narratives include episodes of both happiness and
grief. The experience of ambiguous loss is somewhat paradoxical; the grievers often feel
they are limited in the amount and type of grief they can express.

Culture

People tend to identify with their cultural backgrounds during life crises more
than at any other time (Cook & Dworkin, 1992). This cultural connection during
bereavement requires attention to cultural influences on the grief experience.

Anthropologist Richard Kalish’s (1977, 1985) work centers on the intersection of death
and culture. His 1977 edited book combined studies, mostly ethnographic, investigating
mourning rituals from around the world. He noted that death is experienced by all people;
hence anthropologists are often drawn to the study of death rituals because they help us
gain insights about various cultures. As one author explains, “The anthropological
discourse on death rituals has generally centered around the notion that they are
performed to regain equilibrium that has been disrupted by the death” (Goldschmidt,
1977, p.37). Kalish notes that the folkways, or rituals, intended to help grievers, may
have harmful affects on some members of a society. For example, in one chapter
describing American bereavement Garrity and Wyss (1977) explained:

After death, survivors are expected to isolate themselves during the most severe
stages of grieving, show strength and stoicism during public appearances and
return as quickly as possible to a normal lifestyle. (p.100)
Garrity and Wyss further explained that a person’s inability to enact a ritual might lead them to be viewed as a deviant—a societal outcast. Stroebe and Stroebe (1994) provided additional support to the connection between identity, culture, and bereavement:

Grief is channeled in all cultures along specified lines [and] there are substantial differences in the rules laid down by cultures as to how long the deceased should be grieved over and how long mourning should last…What is sanctioned or prohibited in one culture may differ dramatically from what is or is not permitted in another. (p.197)

Thus far we have examined several approaches to studying bereavement, none of which is situated in the communication discipline, but all of which have communication and cultural implications. In summary, the research reviewed has taught us that there are socially accepted methods to experience and enact bereavement—if a person does not or can not grieve in those prescribed ways, they might be pathologized, or seen as a social deviant. Although the new characterizations of grief account for some individual experiences not included in classic psychological measurements of bereavement, those models consider relationship with deceased and cause of death as the variables influencing grief.

We are at a point where an investigation of the cultural communication perspective on bereavement is necessary. Cities throughout the United States have become sites of extraordinary diversity (Conquergood, 1991), and by the middle of the 21st century racial and ethnic groups in the U.S. will outnumber whites for the first time and “the browning [sic] of America will alter everything in society from politics and
education to industry, values, and culture” (Henry, 1990, p.11). Of course, since the population bubble of the aged is increasing, so must our understanding of grief.

**Culture, Gender and Emotion**

The communication perspective on culture enables us to gain meaning and describe the impact of culturally expressed grief. Sally Planalp (1998) deftly articulated the connection between emotion, communication, and culture. She explains that culture molds *what* and *how* we feel as well as how we communicate what and how we feel. Planalp explains that socially constructed notions of appropriate emotions determine our expression of those emotions. Planalp’s explanation of how culture influences emotion and uniting it with the expectation that mourning rituals are *supposed* to enact grief, provides a preliminary understanding of the gendered bereavement experience.

Early measures of grief showed no significant difference between men and women (Moss, Rubinstein, & Moss, 1997), but some argue that a man's voice is missing in descriptive bereavement research. Moss, Rubinstein, and Moss (1997) provided an insightful perspective on the male grief experience. The authors conducted a research project in which they interviewed middle age sons and middle age daughters about the death of their widowed elderly mothers or fathers. From their findings Moss and colleagues argued that, "the normative model of bereavement is feminized and does not adequately account for men's experiences. In the domain of bereavement, men are often 'the other'" (p. 259). The authors go on to outline four themes in men's bereavement: control, action, cognition, and privacy.
Moss, Rubenstein, and Moss (1997) explained that men’s reactions to bereavement are quite logical when contextualized within the social construction of gender. Starting with infancy, children are taught an appropriate, gendered way to feel and express emotion. Through rewards, punishments, and modeling, girls are taught to be connected with others, do the maintenance work on relationships (express care), and openly express emotion (as long as they aren’t aggressive or angry). Boys on the other hand are taught aggression, autonomy, and control of emotions and to be physical. The expression of anger is considered an acceptable masculine behavior (Thompson, 2001). In a study describing parents’ reactions to a prenatal death, Pepers and Knapp (1980) wrote that fathers reacted physically by hitting walls, screaming, and directing anger toward the person who brought the bad news.

The gendered expression of emotion and feminized research protocol call for a reevaluation of our research methods. As Wood (2001) explained “the male deficit model maintains that men are not adept at intimacy because they are less interested or able than women to disclose emotions, reveal personal information, and engage in communication about intimate topics” (p.195). The male deficit model is based on decades of research that considers self-disclosure and expression of emotion as relational building blocks. For example, Altman and Taylor’s (1973) Social Penetration Theory is based on the depth and breadth of self disclosure as relationship markers. Since men are less likely than women to express emotion and self disclose, our society often views men as less interpersonally competent. The alternate paths model, however, takes into consideration the ways men express closeness that are different than the paths women take to closeness.
For example, Swain (1989) discovered that men develop close same sex friendships through doing activities together. Hence, with the alternate paths model men and women might take alternate paths to the same destination. Given these separate routes, the following summary of male bereavement literature highlights the ways male grief is sometimes different to female grief.

One way in which many men respond to loss is by immersing themselves in, sometimes solution-based, activity (Staudacher, 1991). Most men become obsessive about activity. They diligently find things to occupy their time. They attempt to fill every waking minute with work, errands, and house activities. This immersion consumes time, energy and thought so there is no time for grief, no time for thinking of the loss and no time for feeling the grief. Men engage in activities which are often solution-based. For example, Doka and Martin (2001) explained how one male client whose son was lost and assumed dead after the crash of his airplane, found solace by being actively involved in the search. Another man expressed his grief by carving his son’s memorial stone. Men often focus on the problems caused by the loss, actively trying to find appropriate solutions. Solution focused bereavement is manifested by the male desire to stay active and in control (Staudacher, 1991). Like many researchers, Doka and Martin contend that although some perceive that men avoid the grieving process, they simply enact grieving in a sometimes private, often action oriented way.

Peggy Anderson (2001), author of critically acclaimed *Wife After Death* has an interesting perspective on male grief. Anderson’s work used a feminist perspective to study the widow’s narrative. During publicity tours for the book, she was frequently
asked by male reporters and interviewers why she did not include the stories of men. They would ask, “Where is the book like this for men?” (Anderson, 2001). Inspired by the men’s question, Anderson began an eighteen-month project in which she worked with the same group of men investigating their grief narratives. At the end of the project, she concluded that these men had indeed repressed stories of grief throughout their lifetimes. In her words:

> By avoiding the whole and repressing a part of their immediate and distant past, they prevent themselves from ‘knowing themselves’ fully. Not to know fully who you are makes it almost impossible to share one self fully. Perhaps men’s biggest loss in ignoring their grief is the loss of a very important part of themselves.

(p. 322)

Men and women might not only experience and narrate bereavement differently, they also might communicate friendship and support to the bereaved differently. Rawlins (1992) explained that women see meeting friends’ needs as an opportunity to "give and care for another" (p.182). Men, on the other hand, prefer to seek autonomy and try to avoid too much dependency on friends. In regard to cross-sex friendships, both men and women feel more nurtured by female friends by their male friends. Given the differences between men and women friends, we might speculate that women serve as better supporters during a crisis like bereavement; however, what we come to expect is not always what actually occurs.

In our search for difference, however, we must not ignore the similarities that transcend our cultural, gendered influences. In the introduction of his edited book, *Men*
Coping with Grief, Lund (2001) cautions researchers that a continued overemphasis on both the individuality and the gendered expectations of the grief experience will bring us further away from describing the shared characteristics. To exemplify his point, Lund shares the following two transcript excerpts:

You know, I got tired of looking in the mirror and seeing how depressed I was. I felt like I deserved better. I started to look at it as a challenge. You can’t expect others to change it for you…to take away the pain. People need to be responsible for themselves. It is something you have to do alone, so you just do it. (p 3.)

The second excerpts follows:

This is the most horrible thing that has ever happened to me. Nothing could compare with it. It’s been terrible. The only thing that has kept me going is to know that when I feel sad and need to cry and to talk to someone about how I feel, I can turn to my daughter. Without my daughter, I could not have made it this far. We have always been close. She’s been there when I needed her. I love her and I’m so thankful that I have her. (p.3)

Some find it surprising that the first quotation was from a woman and the second was from the man. Both were coping with the death of their spouse, but their comments are not consistent with the expected norms.

Orphaned Adults

Loss of a parent is a life altering event (Angel, 1987; Douglas, 1991); and therefore, examination of parental bereavement is warranted. In a pivotal article calling for adult-parent bereavement research, Jordan and Ware (1997) detailed several ways adults are
impacted by their parents’ deaths. They explain that because a parent plays many roles in an adult child’s life, the loss of the parent includes the loss of the roles. Jordan and Ware’s article serves as the foundation for this discussion of parental role loss. The roles are divided into two broad categories, “social” and “intrapsychic functions” (p.363).

Parents play a broad range of social roles in an adult child’s life. For some, parents are involved in the day-to-day life of their children. They commonly perform roles of advisor and confidant, providing their adult children with advice regarding finances, family problems, and career choices. Parents may provide practical assistance, including money, shelter, and child-care. In addition, parents often become important members of their children’s families, particularly as grandparents, or become members of a child’s social life as a companion. The surviving child must, in some way, attend to the loss of a parent in these multifaceted social roles (Jordan & Ware, 1997).

Even if a parent does not play an active social role in the adult child’s life, almost all parents hold complex and conflicting meanings for adult children on an intrapsychic, level (Jordan & Ware, 1997). First, parents still serve as attachment figures for their adult children. Adults can feel “orphaned” at any age (Angel, 1987). The feeling of security that many parents strive to instill in their children when they are young can become shaken when a parent dies, even if the role has not been activated in many years (Horowitz, et al., 1984). When a parent dies, the soothing belief that “my parents will always be there to protect me,” must be reexamined and renegotiated to fit in the new reality. Closely associated with the loss of safety and the symbolic “home base,” adult children are confronted with their own mortality when a parent dies (Douglas, 1991).
The death of a parent quickly accelerates the adult child’s awareness of his or her own limited, unpredictable life trajectory (Scharlach & Fredriksen, 1993).

A second and closely related intrapsychic role that parents play is that of a potential source of emotional support. Although the extent to which an adult turns toward a parent for affirmation greatly varies by culture, gender, and family dynamics, almost all adults retain some wish for validation and approval from their parents (Jordan and Ware, 1997). When a parent dies, many suffer the irrevocable loss of a particular form of “unconditional” love unique to the parent-child relationship. Jordan and Ware note that mourners often express this realization in comments such as, “no one will ever love me like my parent did” (p.363).

The complex emotional loss is often further complicated in strained parent-child relationships. Adults who harbor unresolved conflict with their parents, even if that conflict originated in childhood, lose the opportunity to restore the relationship. Hence, the child loses the parent that they had and the parent that they could have had (Jordan & Ware, 1997). Moreover, children who assume a “parental” role as their parents’ caregivers, often feel responsible for their parents’ health and well-being. For these adult children, a parental death often results in feelings of guilt. The loss of the emotional support role, either experienced or anticipated, is a significant loss.

Lastly, parents serve an intrapsychic role as the repository of the child’s past, and with it a crucial component of the mourner’s identity (Jordan & Ware, 1997). In most cases, the parent functioned as a participant in the child’s life and an observer of the child’s developing identity longer than any other person. Although other individuals,
such as an adult child’s spouse, take part in the ongoing process of identity transformation, the parents experienced their child’s early years of identity formation. The best resource of a child’s oral history passes away with the parent. Again, the orphaned adult is confronted with the impermanence of what was once felt to be forever.

An adult grieving a parent might also grieve the various social roles a parent might have assumed (e.g., confidant, money-lender, advisor, and friend). Those social roles are tethered to the intrapsychic roles of attachment, emotional supporter, and keeper of history. For many, the relationship with a parent is the first, most significant, and longest lasting relationship. Lieberman (1993) wrote, “a parent’s passion for his or her child retains its many nuances of emotional intensity, ranging from rapture and delight to impatience and even rage, that no other relationship in the child’s life can match” (p.227).

**Narrative**

The roots of narrative scholarship, however, can be traced back to pre-sophist Greek and Roman philosophers such as Aristotle and Quintillion. Narrative research continued up until the scientific age when narrative inquiry became less popular (Fisher, 1984). Today, narrative research is once again an important epistemological avenue. In fact, scholars have been noting the surge of narrative research, often referred to as the narrative turn, for over twenty years (Lucaties & Condit, 1985).

Narrative is approached from a wide range of perspectives and disciplines. Linguists often focus on the narrative grammar and cues. Anthropologists investigate narrative performance as a cultural ritual, literary critic employs the poetic-aesthetic of written fiction, clinicians utilize narratives to fix “non-normal” reactions to grief, and
communication scholars, in particular, study the form and function of the narrative. The study of narratives’ form and function is “narratology” (Prince, 1982). Narratology examines what all narratives have in common—narratively speaking—and what allows them to be narratively different.

Scholars from a wide range of disciplines recognize the capacity of stories to organize our experience (Foss, 1996) and contribute to the field of narratology, the study of narrative form and function. Because of narrative’s wide-range origin, narrative research varies in its conceptualization. The literature contains considerable discussion regarding the definition of narrative, the importance of narrative structure, as well as the form function of narrative. The following section aims to review those discussions beginning with rhetorical narrative research, following with varied perspectives on form, and concluding with current scholarship utilizing narrative methodology.

Walter Fisher’s (1984, 1985) articulation of the narrative paradigm emphasized the interrelated dynamic of narrative form and function. Fisher (1984) explained that the narrative paradigm tied two traditional strands of rhetoric, “the argumentative, persuasive theme and the literary, aesthetic theme” (p.2). The two traditions were synonymous through the Renaissance and the rise of the scientifically oriented thinking. However, after the emergence of scientific thinking as the dominant trend, in the late 17th and early 18th centuries, the analysis of truth and knowledge in a message separated from the analysis of the literary beauty of a message. Fisher’s argument is that together, narrative function, or argument, and the narrative form, or aesthetic, are necessary for us to gain a more complete understanding of the human narrative.
John Lucaites and Celeste Condit (1985) also explained the separation of the two narrative research trends and argued for a more functional approach to narrative research. In 1985, like today, narrative research could be found in virtually every genre of human discourse. Lucaites and Condit explained that, in spite of the embrace of narrative to explain human conscience, “the dominant contemporary theoretical explanation of narrative are drawn almost exclusively from poetic models of discourse…” (p.90). They argued that scholars turned attention towards the creation of stories, including which characters we choose, the temporal sequence, and the included events. In doing so, have turned away from analyzing why we tell the stories and what function they serve.

Through a rhetorical investigation of narrative, we can further understand how the story serves a purpose for the narrator and audience. Quintilian taught us that our stories do not simply function to inform the audience or judge, but to persuade them. The narrator uses verisimilitude, or the appearance of truth, of propositions and proof to convince the judges (Lucaties & Condit, 1985). The rhetor’s message is directed outward to the attention of others who then “judge its quality and performative dimensions” (Farrell, 1985, p.116). The poetic narrator, on the other hand, advocates self and beauty, but need not be truthful (Lucaties & Condit). Although Lucaties and Condit aim to separate different types of narrative, they concur with Fisher’s argument that we do not need to separate narratives as either poetic or rhetorical for analysis; an investigator can conduct a cross examination of poetic form and rhetorical function.

Lucaties and Condit’s (1985) consideration of narrative forms highlights the considerable disagreement about the precise definition of narrative (Riessman, 1993;
Foss, 1996). Some contemporary scholars continue to return to classic rhetoricians to define narrative. As Chatman (1978) interpreted Aristotle’s view of narrative as the imitation of actions in the real world seen as forming an argument, logos, from which were selected (and possibly rearranged) the units the formed the plot, mythos. In Chatman’s (1981) re-articulation, narrative has three elements, story, narrative, and narrating. The story is the sequence of events, narrative is text in which the story manifests—film, novel, oral narration, etc.—and the narrating is the telling of the story.

Other scholars depart from praxis, logos, and mythos, and instead use the number of events and sequencing to define and describe narrative. For example, sociolinguists Labov and Waletzky (1967) argued that when we narrate, we not only communicate events, but also our stances and dispositions towards those events. However, to fit into their definition, communication must follow a chronological sequence of events moving in a linear way through time to be considered a “story.” For Labov and Waletzky, feeling statements are not considered events and, therefore, do not constitute story. Researchers employed Labov and Waletzky’s definition for several decades, however, the definition is now sometimes considered too narrow for wide use.

Broadening the definition, Prince (1982) defined narrative as at least two events not presupposed or entailed by each other. Diverging still from Labov and Waletzky, Prince, recognized two types of events, active, expressing action, and stative, expressing as state or condition. For example, narrating a walk to the store would be an active event. Explaining how one feels while walking to the store is classified as a stative event. In
Prince’s view, a single event alone does not constitute narrative; at least two events,
either active or stative, are needed for narrative.

Young (1987) also departed from the necessity of chronological sequencing. He
wrote that consequential sequencing, rather than chronological sequencing, constitutes a
narrative. One event causes another in the narrative, although the links may not always be
chronological. Consequential sequencing aligns with the rhetorical notion of narrative as
argument; the events built upon one another as premises that might bring the narrator and
audience to a conclusion.

Chapman (1981) utilized sequence and time as factors in his narrative analyses,
but argued against the use of time and chronology to discriminate among discourse and
narrative discourse. Chapman investigated a narrator’s use of discourse time, or the time
it takes to tell the story, in comparison to narrative time, the time period covered through
storied events cover. Storied events can be either satellites or kernels. Kernels are major
plot point; satellites are minor plot points that can support and color the satellites, but are
not essential for plot line development. Chapman warned that “the narrative schema
needs to be actualized…narrative time, discourse time, and chronology don’t matter,
logic does…they function independently” (p. 117-118).

When humans create meaning through narrative, they might not tell their story
through the chronological convention. Particularly within Chapman’s primary field of
fiction film narrative, the use of non-sequential episodes is a powerful technique utilized
by the narrator. For example, Eggers (2000) memoir of parental loss discussed at the
opening of this paper fits well within consequential, non-chronological, sequencing.
Eggers begins with a brief account of his parents’ deaths, and then skips forward to his life several months post-loss, before providing an account of the days and weeks following the deaths. Eggers developed a cause-effect tale, but tells his tale out of chronological order. Although the narrative does not always follow chronological sequence, it is still a narrative.

Some narratives sequences are constructed through theme (Foss, 1996). For example, the episodic narrative is woven together by theme rather than by time (Michaels, 1981). Here, events might not follow a cause-effect or a chronological sequencing. Rather, smaller accounts might be linked, by a sometimes subtle theme, to create a larger narrative. Riessman (1987, 1993) warns that white, Western, middle class interviewers expect to hear chronologically told stories, and therefore sometimes miss the episodic narratives.

Autobiographical narratives describe the way in which people articulate how the past is related to the present and future (Polkinghorne, 1988). As Polkinghorne (1988) explained, we are in the middle of our stories and cannot be sure how they will end; we are constantly engaged in revising the plot as new events are added to our lives. According to Bochner and Ellis (1997), the narratives we construct often aim to “forge a story of the past that helps us function effectively in the present” (p.312). Self, then, is not static, but a configuring of personal events which includes not only what one has been but also projects what one will be.

Bereavement research indicates that loss of a loved one can be a disorienting experience. Narrating the loss can create order out of our disorder (LaRossa, 1995). As
Arvay (2001) wrote, “Narrative as a form of inquiry is complementary to a constructivist approach to human understanding, because narrative is a dynamic process that recognizes that meanings are self-referential, relational, and dialogical” (p.288). Furthermore, we often narrate particular experiences in our lives where there has been a breach between ideal and real, self and society (Riessman, 1993). The narratives can function as a means to come to terms with particularly sensitive or traumatic times and events (Neimeyer, 2001; Riessman, 1993). An individual’s story provides a method to make order out of the disordered characters, events, and happenings central to a disrupted experience.

There is no current publication delineating the bereavement narrative typology. However, since bereavement like illness is a disruption, a typology of illness narratives can inform this study. Author Frank (1995) proposed three types of illness narratives: the restitution narrative, the chaos narrative, and the quest narrative. The restitution narrative has a basic plotline of, “Yesterday I was healthy, today I’m sick, but tomorrow I’ll be healthy again” (p.77). The narrators see illness as something to be overcome so that the body can be restored to its original condition. The chaos narrative, a non-plot narrative, is the opposite of restitution narratives. Whereas the restitution narrative assures the listener that, as bad as it seems, it will get better, the chaos narrative tells the listener that it could happen to anyone, we are all at risk. In the quest narrative, the narrators argue something is to be gained by the illness; they accept the illness and seek to use it. Frank noted that the actual telling of illness narratives does not exclusively adhere to any one of the three categories. He writes, “Actual tellings combine all three, each perpetually interrupting the other two” (Frank, p.76).
**Bereavement Narratives**

Much of what we know about the bereavement narrative stems from bereavement counseling research. Sigmund Freud was a ground-breaking bereavement narrative theorist (Schafer, 1981). According to Schafer, Freud proposed two narrative forms. In the first, the narrator moves from the id to relational integration resolving parental guilt complexes. In the second, the mechanist view, the narrator has limited energy that they can move from self and others and direct it towards others. The mechanist view is fundamental to premise that we need to detach from the deceased to give energy to our other relationships.

The counselor often performs two functions. First, the counselor enables the bereaved to tell their story of loss over and over again until the account feels complete and the storyteller recognizes a change in identity. The storytelling enables the bereaved to cope with the stressors of one’s lives by using attribution to explain what has happened. Healing is achieved when the narrator can tell a story of loss that gives meaning to the loss and purpose to his or her life (Harvey, Weber, Galvin, Huszti & Garnick, 1986; Harvey, Weber, & Orbuch, 1990). In the second, the counselor co-crates the narrative with the client (Romanoff, 2001) and replaces the grief tale with a healthier, restorative one (Gergen, 1992). Researchers (Hermans & Hermans-Jansen, 1995; Gergen, 1992; Polkinghorne, 1992) noted that the lines between research and practice are blurred as both to rely on narrative methods as a fundamental source to understanding the construction of the experience. As such, the research interview can benefit the participant.
In non-clinical bereavement narrative research, Moore and Reet (1987) analyzed fictional narratives of death of a significant person in children’s literature and found little portrayal of natural grief. The stories portrayed stereotypes of tearful girls, stoic boys, and unchanged life circumstances. The children’s literature analyzed contributes to the social construction of gendered grief response.

Psychologist Capps and Bonanno (2000) conducted six-minute interviews with 44 bereaved individuals to identify grammatical structuring in narratives that predict adjustment to loss. The authors found that conjugal bereaved individuals expressing coping difficulties in narratives six-months after their loss also expressed coping difficulties in narratives one-year after their loss. The research suggests that an early struggle with grief predicts long-lasting coping challenges. In a similar narrative study, colleagues of Capps and Bonanno, Field, Hart, and Horowitz (1999), found that griever’s who perceived a high quality relationship with the deceased have an easier time of psychological adjustment than those who reported a lower quality relationship with the deceased.

Narrative analysis was also used by psychologists Nelson and Horowitz (2001) in their investigation of recounted sad memories. The authors identified defensive and non-defensive participants using the Marlowe-Crowne (MC) Social Desirability Scale, a scale consisting of 33 items to measure individual’s socially desirable traits. The scale is often used in conjunction with other measurement tools to investigate the extent of a participants concerned with pleasing the researcher and appearing socially desirable. Nelson and Horowitz found that most participants with a low need to please the
interviewer told stories with at least three events in chronological sequence. Therefore, these stories consisting of at least three chronological events match the definition of narrative forwarded by Labov and Waletzky (1967). In contrast, the participants with a high need to please the interviewers described a sad memory without narrating the events. The participants discussed and described events, but failed to include three chronological linked events. However, different conceptualizations of narrative, such as Prince’s (1982) inclusion of stative elements, might have considered those non-chronologically linked descriptions as narrative.

The research on bereavement narratives told by orphaned adults is still limited. We have vast research stemming from a variety of perspectives that highlight the multifaceted experience of bereavement. The parental bereavement experience is unique because it signifies the loss of significant roles and relationships and is recognized as a low grief experience. Furthermore, narrative researchers agree that the act of narrating events is the construction of our reality whereby we give meaning to that experience. Storytelling can take on many forms and functions that can provide relief to the narrator. However, although we know much about the experience of bereavement, and to a lesser extent the experience of adult orphans, as well as the forms and function narration, the form and function of the bereavement narrative is still unknown. Hence, this grounded narrative study is guided by the following question:

**Research Question**

What is the form and function of bereavement narratives told by adult orphans?
Chapter Three: Methodology

Justification

The method used to investigate the bereavement narratives told by adult orphans is grounded theory as first presented by Glaser and Strauss (1967) in *The Discovery of Grounded Theory*. As this chapter will detail, the narratives of orphaned adults is the object of study, and the method chosen to explore those narratives is a grounded narrative analysis. Grounded theory can be joined with other methodological approaches spanning from objectivist paradigms to constructivist studies derived from interpretive approaches (Strauss & Corbin, 1994; Charmaz, 2001). Therefore, in this project, the guiding principles of grounded theory will work in conjunction with the guidelines for narrative analysis as presented by Sonja Foss (1996) in *Rhetorical Criticism, Exploration and Practice*. This method was selected for three reasons. First, grounded theory approaches are well matched with narrative analysis. Kathy Charmaz (1990, 1991, 2001) is a narrative scholar and grounded theory methodologists who uses grounded theory approaches in her own narrative research. Charmaz (2001) notes that although some narrative scholars, Riessman included, find grounded theory approaches too limiting, she finds the systematic inspection of narratives in the grounded approach to reveal important features of the narratives. This study seeks the same systematic method to reveal features of a lesser known narrative.

Second, the current research on bereavement narratives does not share the same conceptual framework. The research relating to bereavement and grief primarily centers
on the categorization, measurement, and psychological ramifications of the bereavement experience. In this area of grief research, the studies that have been done provided an understanding and characterization of experience; however, we know very little about how individuals narrate and create meaning out of the bereavement experience. Narrative studies, particularly those related to health narratives, aid our understanding of the human storyteller and how stories can be seen as poetic and rhetorical. For example, Vanderford and Smith (1996) recounted silicone breast implant stories and analyzed them both for their form, examining the characters, plot setting, and their function, how the characters served different roles in the stories and how those stories function to create meaning of the experience. In an area of limited research, grief narratives, we have studies that use grammatical differences to classify, describe, and predict one’s grief experience. These studies are concerned only with parts of a largely unknown whole. Both the grief experience research and the narrative research provide a necessary reference for an understanding of the storied grief experience; however, the frameworks for explaining the phenomena are disparate. Using grounded theory approaches to narrative analysis will “provide a useful conceptual rendering and ordering of the data that explains the phenomena” (Charmaz, 2001, p.511).

Third, the form and function of the grief narrative is unknown. Since we have yet to see a theoretical description of grief narratives, such a description of grief narratives seems appropriate. The grounded theory approach was selected because it enables us to investigate the grief narrative from the broadest perspectives allowing the most outstanding features and meanings of those narratives to emerge. Charmaz (2001) wrote
that a focus on meaning while using grounded theory furthers, rather than limits, interpretive understanding. In addition, the grounded theory method was selected because it addresses a framework based on locating the narrative’s most outstanding features could provide a guide to future grief narrative analyses. The primary goal of this method is to pull out the most important features of these narratives, to read what these narratives are telling us, and to develop a framework to explain the features of these narratives.

The grounded-theory method as outlined by Glaser and Strauss (1967) has several basic elements. One is that the focus of the process is on theory generation rather than theory verification. The researcher does not aim to verify a hypothesis. Rather, the aim is to systematically review the data that will result in propositions hypotheses about them. The researcher provides data to support these propositions, but does not attempt to test them empirically at this stage.

Glaser and Strauss (1967) also emphasized the use qualitative data in the grounded theory method. Interviews, participant observation, historical accounts, and other such information constitute the data base on which the framework or theory is developed. This project utilized the participant interviews as the primary unit of analysis. At times, observations of the participants before, during, and after the interview, as well as exposure to memorabilia, such as obituaries and photographs, exhibited by the participants, add support to the analysis.

The grounded method also requires an inductive rather than a deductive process to generate the framework. The analysis of data will start with as broad a view about the phenomenon as possible. I set aside assumptions about phenomenon and avoided
searching for the verification of pre-established theories. I went into this project with a foundation of bereavement, communication, specifically narrative, research, but aimed to set aside previously identified assumptions and searched for the message these narrators are communicating.

Another feature of this method is that it is steeped in data, both in terms of generation and presentation. The support for the framework is the data itself. Since the framework emerges from the data, propositions must be supported by the data. Therefore, the presentation of the analysis and framework contains excerpts from interview data.

Finally, the framework or theory is viewed as an emergent process rather than a final product. As I will describe in detail later in this chapter, I first investigated the narrative components of the stories searching for significant characters and events. In a second level of analysis, I combed through the stories as other patterns emerged. The patterns are not the final step in understanding the phenomena, rather, an important step in the search of full understanding.

The grounded theory method used in this study contains the following seven steps identified by: 1) definition of study objects; 2) researcher’s perspective used as guides to initial data collection; 3) collection of data; 4) coding of data; 5) identification of variables and their propositions; 6) presentation of propositions; 7) development of a conceptual framework. The following is a description of each step and how it functioned in this study.
Step One: Definition of Study Object

The first step in the process is the definition of the question or phenomenon to be studied in order to set the limits of the study. In this study, the topic of interest was bereavement narratives told by orphaned adults. **Orphaned adults** was defined here as a person that lost one or both of their parents while in adulthood (Angel, 1987).

**Bereavement** literally means to shear off or take away by force, the experience many describe when a loved one passes away; the loved one has been sheared or torn away (DeSpelder & Strickland, 1999). Bereavement is interpreted in many ways; for this study, parental bereavement is used interchangeably with “grief” or “loss”, and is the death of one or both parents. This study adopted Prince’s (1983) definition of narrative discussed earlier in this manuscript. Using Prince’s definition, **narrative** is used here to mean the stative events, expressing a state, and active events, explaining an action, told by the narrators during the interview.

Step Two: Researcher’s Perspectives Used as Guides to Initial Data Collection

The second step in the grounded theory method is the identification of the researcher’s existing perspectives on the phenomenon being studied and their use as a guide in the initial data collection. This step suggests the researcher take inventory of the preconceived notions not only to start with initial data collection, but also to identify the notions that might need to be set aside during the in-depth analysis.

As an orphaned adult who lost my father when I was 17 to a sudden heart attack and my mother when I was 29 to a complicated long-term illness, I developed several assumptions about adult-parental loss. Of course, my history with these losses helped
motivate me to further investigation through research projects such as this. The following are two examples of assumptions and how they influenced initial data collection:

There are limited opportunities to talk about the death of a parent and therefore, create a better meaning of the loss through talk. There are clear societal rituals that govern behavior in the first days after loss. When the funeral services are over, and the sympathy cards and flowers have been sent, the mourners are often expected to go back to work and “move on” with their lives. However, as Neimeyer (2001) notes, it is after the first few days that many mourners might need talk about the loss; unfortunately talk of grief is taboo in our culture. Furthermore, although I could rely on close friends to discuss loss, I, aware of the burden, filtered many topics that I might have discussed with a stranger. Guided by these observations, I made two decision regarding data collection. First, the interviews needed to be as open as possible. I wanted the participants to create their stories in whatever fashion served them best. Second, I needed to garner volunteers from traditional recruitment methods. Although friends offered to participate in the study, I did not want the friendship to be a motivator for telling one’s story, and therefore, the narratives’ function to be one of friendship. Furthermore, I had concerns that these stories would be censored for a friend’s ears.

Discussing the loss of a loved one is a personal and potentially emotional act. Precautions needed to be taken to help ensure the interview process would do no harm. Therefore, several aspects of the research protocol were based on Cook’s (2001) guidelines on protecting participants’ well-being during bereavement research. First, Cook warns that interviewers who are not trained in mental health care might develop
research procedures that can cause harm to the bereaved participants. Hence, upon developing these procedures, I met with a bereavement counselor to ensure I was taking the appropriate precautions. Next, Cook suggests that if possible, researchers should avoid including participants who have recently experienced the death. Although a clear time period was not recommended, Cook warned that post traumatic stress is most likely to occur in the first weeks and months of bereavement. Cook questioned a participants’ ability to give informed consent with shortly after the death. Given this guideline, my research announcement requested those who had experienced the loss no less than one year ago. Finally, I followed Cook’s suggestion to allow interested participants to contact the researcher, instead of the researcher contacting potential participants.

**Step Three: Collection of Data**

Locating a diverse group of participants for the study in a small, rural town called for a varied approach to recruitment. Hence, participants for this study attempted to be recruited via three methods, community and university grief counselors, electronic grief support groups, and newspaper announcements in *The Athens Messenger* and *The Post* (Appendix A).

Local grief counselors identified by O’Blennes Memorial Hospital and Athens “Neighbor Helping Neighbor Network” were contacted by a letter describing the study. In the letter, I requested a meeting with the local grief counselors to discuss the project and the notification of potential participants. None of counselors responded to my letter.

To search for participants in the university population, I met with counselors working in the university counseling center, Hudson Health Center. During our meetings,
I explained the study, asked for advice speaking to the uniqueness of the research participants, and requested distribution of the research flyers (Appendix B) to potential participants. The counselors at Hudson discussed their cooperation in a staff meeting and agreed to distribute flyers to appropriate clients. I did not acquire any research participants through counselor referrals; however, one participant who responded to the newspaper announcement was also under the care of university counselors. The participant learned about the study through the newspaper, not through his counselors.

Although adult-child bereavement is a common occurrence, I anticipated a challenge to locate research volunteers within Athens’s small population. Also challenged to find participants, Powell and Golish (2001) found electronic support groups a viable option for locating willing volunteers. Therefore, I requested volunteers from two internet-based bereavement sites, “Griefnet” and “Groww.” Each of the two sites discouraged the use of clandestine research methods such as “lurking,” but provided a protocol for social science research approval.

The well-established website of grief and bereavement information, “Griefnet” had comprised a list of support group members willing to participate in social science research. With their approval, my research description was forwarded to their list of willing members. The second bereavement website “Groww” also allowed for social scientific research. With their approval, an announcement for this study was posted on the Groww webpage specified for such research announcements. Neither of these web-based recruitment strategies produced interested participants.
In the final, and most productive, recruitment method, I placed newspaper announcements in *The Athens’s Messenger* and *The Post*. The first run of *The Athens Messenger’s* announcement was delivered during the worst snow storm of the year. This first run of the announcement produced fifteen people who were either eager to be interviewed or had several questions before deciding to be interviewed. Of the 15 people who made initial contact during the snow storm, nine people joined the study. The announcement in *The Post*, a university newspaper, resulted in 11 volunteers for a total of twenty participants.

A review of research that employed semi-structured, in-depth interviews indicates that most included a small sample. For example, both Michael Arrington’s (2005) study of prostate cancer narratives and Ellingson and Buzzanell (1999) study of breast cancer survivors included fewer than twenty participants. According to Glaser and Strauss’s (1967) saturation theory, a point will occur during the collection of data where the accounts become redundant, eliminating the need for further collection. After the second level of data analysis, described later in this chapter, I determined that I reached that level of saturation. I had enough accounts to identify and explain the conceptual schema and the interviews yielded no new results, hence, I did not pursue additional recruitment methods.

Each form of recruitment (newspapers, flyers distributed by counselors, and websites), asked that interested participants to contact me, either through email or telephone, for additional information. Upon contact, I described the purpose of the study and requested participation. The participants had the option to be interviewed in a face-
Participants

Twenty participants were interviewed for this study. The participants, or narrators, each shared distinct stories of parental loss. To highlight the attributes of each narrator and story, the following is a brief recount of the experience told in the interview. The person by person breakdown is followed by a summary of participants’ demographics. All participants were given pseudonyms.

Brian is a 21 year old education major who lost his father to a sudden heart attack two years prior to the interview. Brian is an only child who has lived in Ohio his entire life and is very close to his mother. Brian works to alleviate his mother’s grief through his sharp wit.

Carolyn, 43, is a juvenile probation officer who lost her father to lung cancer one year prior to the interview. Carolyn and her daughter-in-law, an RN, were her father’s primary caregivers. Carolyn extols the help of hospice caregivers and finds those outsiders who criticized her care to be challenging. Carolyn’s mother is still in good health. She believes that her experience with her father provided her with a wealth of knowledge to share with others and aid her in future care giving experiences.

Chuck, 24, is working towards a graduate degree in chemistry. His father was diagnosed with diabetes in the early 1960s, and died of the disease in 1998, five years prior to the interview. Although his father struggled with his diabetes for decades, his death came as a shock to Chuck and his family. Chuck kept his father’s prayer card in his
suite pocket, but feared looking at it. This prompted Chuck to seek the help of a counselor. The counselor encouraged Chuck to seek experiences where he could talk about his grief experience, hence the response to the research advertisement. Chuck explained that the family does not talk about the death and would not want to know that he sought counseling. He finds himself drawn to people, both as friends and romantic partners, who have lost a parent.

Clair is a 20 year old college student who lost both her mother and her father. When Clair was just a year and a half old, her mother died of a brain tumor. Her parents were not married at the time, and her mother’s family helped raise Clair from the time she was born, until months after her mother died. When Clair was a toddler, her father took custody of her and moved her from her home in Massachusetts to her new home in Ohio. This custody battle caused a rift in the family and Clair lost contact with her mother’s side of the family until she reunited with them in her teens. When she was sixteen, Clair’s father suddenly died of a heart attack. Her father had no life insurance, but she did have the house bought with the social security money from her mother’s death. She did not want to leave her high school and return to Massachusetts to her only surviving family. So, with the help of her neighbors, she completed high school, sold her house, and went to college.

Dottie, 28, is a live in nanny who lost her father to a heart attack nine months before the interview. Although Dottie told me over the phone that he had died over a year ago, she admitted in person that only nine months had passed. She said that she lied because she was eager to tell her story and be part of the study. Dottie’s family members
all live within a few miles of one another. Dottie, on the other hand, left her small town to take a nanny position in New Hampshire. Her father died when she was away; she ended the position and moved back home to Ohio to be nearer to family.

Emily, 55, is originally from New Mexico but is now a college professor in Ohio. She lost her mother to cancer 11 years prior to the interview, and her father to a stroke and congestive heart failure five years prior to the interview. Emily did not discuss her mother’s death, instead her story focused on the death of her father. Emily bought her father a house next to his brother so that he could help monitor her father’s health. Although Emily actively provided for her father, his health declined more quickly than she realized. When she was told that his health was failing, she immediately traveled to see him. He died in her arms before she could get him to the hospital. Emily explains that there is still family discord rooted in some of her decisions regarding her father’s funeral.

Erma, 68, lost her father to a long battle with Parkinson’s and black lung disease in 1998 and her mother to congestive heart failure 15 months before the interview. Erma’s siblings and her parents lived in individual homes on the same plot of land while Erma and her husband lived in Florida. When her parents became too ill to live on their own, Erma’s siblings informed her that they wanted to place their parents in a nursing home. To avoid nursing home care, Erma and her husband moved back to Ohio and moved her parents and their belongings into Erma and her husband’s new home on the same plot of land. Erma cared for her aging parents for several years before they each passed away.
Grace, 45, operates a business from her home. Grace’s mother died of breast cancer nineteen years ago; her father died of natural causes three years ago. The circumstances surrounding the death of her mother drive Grace’s story. Her mother developed breast cancer in her early sixties a few years after Grace and her younger sister left the house. Although relatively young and healthy, Grace’s father moved her mother to a nursing home. Grace explains that being sent out of the house nearly destroyed her mother, her sister, and herself. Grace and her sister sneaked their mother out of the nursing home so that their mother could have afternoon naps in her own, familiar bed. Sixteen years after her mother’s death, Grace’s father dies leaving her with little remorse for the man who sent her mother away to die.

Iris, a 72 year old retired administrative secretary, survived her mother’s fatal car accident thirty years ago and her father’s battle with emphysema thirty one years ago. Iris’s story contained the death of her parents but parental death is only one chapter in the life story Iris shared during this interview. Iris’s story featured a difficult childhood, the death of her grandmother, and her son’s incarceration.

Jack, 38 and unemployed, contacted me through the announcement in The Post and told me that he lost both his mother to heart failure and his father to brain cancer in 1996. Two days before the interview, I called him, reached an answering machine and left him a message reminding him of our appointment. Jack did not call me back, but his girlfriend did. She told me that she and Jack were living together but they had a recent fight, and she kicked him out; he was once again homeless. She told me not to expect Jack to show up for the interview. He abused alcohol and drugs and was currently using.
“If he does show, he’ll be high on drugs” she said. I showed up for the interview, and so did Jack. In fact, he arrived over an hour early.

Katie, 25, is originally from Cleveland and is working towards her masters in social work. Nine years prior to the interview, Katie’s mother committed homicide—suicide. Her mother suffered from post-partum depression and was severely depressed as she cared for son with Cerebral Palsy. One day after Katie and her sister left for school, her mother shot and killed her son, then herself.

In 1998 Katie’s father Larry, now a widower, married Carol. Two years later, Larry developed cancer which took his life after a two year battle. During his life, Katie’s and her older sister’s relationship with Carol went from mildly challenging to tumultuous. Carol accused the daughters of “giving him cancer” via his constant worry about their safety and well-being at college. In the last months of his life, when his death was eminent, Katie approached her father with concerns over her financial future. He told her that there was a small life insurance policy in both she and her sister’s name from several years ago, and that his assets and a large life insurance policy was in Carol’s name. He told her that Carol promised to, “divvy it up amongst the girls.”

When their father passed away, the girls financial fears came to fruition. The two sisters received $26,000 to share from the old life insurance policy. Since they were expecting more money, they used nearly half of their inheritance to pay off the funeral bills. Unfortunately, the girls would receive no additional money. Carol denied that another insurance policy existed. In fact, Carol told the community that Larry left her virtually bankrupt as he only provided for the girls. Carol’s friends clandestinely
contacted Katie and told her that Carol shifted the money into her mother’s name to hide the inheritance. Katie thought about seeking legal representation to locate the money, but said, “We didn’t know, we were young.” The final blow came when Carol changed the locks on the house, of which Katie and her sister now over eighteen had no ownership. Carol left Katie and Katie’s sister destitute.

Lilly is a 59 year old college administrator originally from Maryland. Three years prior to the interview, Lilly’s father died of cancer back in her home state of Maryland. Lilly’s siblings provided the primary health care for their father. When Lilly went home for visits she tried to assist in the care giving but said she experienced tension with her siblings and the health care routine.

Marge is a 64 year old retired office worker who lost her father to diabetes 30 years ago. Marge began the interview by telling me that her father was a pedophile and detailing a childhood memory of her father chasing her around the house. Throughout her narrative she explained that she had a low grief reaction to her father’s death, but felt great sadness when her husband passed away.

Micah, a 22 year old college student, lost his father four years ago to a brain tumor, six months post-diagnosis and nine month post-life insurance cancellation. Micah is one of many children but assumes the role of his mother’s primary helper. He helped her sell the house and traveled with her to France as she completed her dissertation. Tensions arose when his mother began to see a man whose values and behavior apparently differed from those of Micah’s father.
Pat, 47, is a former Marine who lost her mother to emphysema three years prior to the interview. Pat’s father left her mother with Pat and her younger sister when they were young girls. Pat narrates fond memories of her childhood in Columbus and frequent trips to the nursing home during the last months of her mother’s life.

Peggy, 21, is preparing to enter law school. She lost her father five years ago to a logging accident near Peggy’s home. The accident occurred on her homecoming weekend. Her story shifts back and forth between episodes of homecoming activities in her Ohio town and trips to the hospital in Pittsburgh, PA. After two days in critical condition, her father passed away.

Samir is a 39 year old college professor from Morocco living in the United States. His mother passed three years ago from a long term illness. In his culture, as he explained, it is common to hide a family member’s death from other family members who are living in “false countries.” The distance is considered enough of a burden and, in an effort to avoid a further burden, the news of death is often hidden until the traveler returns home. Samir, however, made his brother promise to call with any change in his mother’s health. Samir had the knowledge of his mother’s death, but did not have the resources to return home for the funeral. Samir sent home all the money he could to help pay for his mother’s funeral. He returned home for a visit two months after her death.

Sandra is a 21 year old English major whose father died six years ago. While riding on his motorcycle, her father was hit by a drunk driver. Her father suffered frequent injuries from motorcycle accidents. Sandra, a teen at the time, did not realize
severity of his injuries, and did not visit him at the hospital during his last cognizant hours. After a few days in the hospital, the family decided to take him off life support.

Steve is a 42 year old graduate student from the northwestern region of the United States. Steve’s mother passed away seven years ago from a long term illness. At the time of her death she lived with her “second family,” her second husband and children with that husband. Steve is a child from his mother’s “first family.”

Victoria, 65, is a homemaker from England currently living in the United States. Seven years ago, Victoria’s father died of a long term illness. Victoria’s brother, who like her parents lived in England, took primary responsible for checking in on their parents’ well-being. Victoria visited her parents to find that their health had disintegrated. She immediately put her father in the hospital and he passed away days later with his family by his bedside.

Of these twenty participants, fifteen were women and five were men. Eight participants were in their 20s, two in their 30s, four in their 40s, two in their 50s, three in their sixties, and one in her seventies. The mean age was 41. Four of the participants lost only their mother, nine lost only their father, and seven lost both their mother and their father, totaling 27 deaths in all. Seventeen of the deaths resulted in long term illnesses such as cancer, emphysema, and cardio-pulmonary disease. Ten deaths were sudden and included heart attacks, suicide, a car accident, and a logging accident. Four participants experienced the death of their parent while they were children still living at home.

Participants varied greatly in time since death. Since I still included Dottie in the study although she did not meet the time requirements, the most recent death occurred
nine months before the interview. One participant lost a parent 30 years ago; one lost a
parent 31 years ago. Fourteen of the participants lost at least one parent within the last
five years. The mean time since death was eight and a half years.

Many of the participants completed high levels of education and had occupations
tied to the university. Four participants completed high school; four participants
completed high school plus some higher education; six held bachelor degrees; one had a
bachelor degree plus some graduate course work; five held graduate degrees. Of those
participants who were associated with the university, eight were students, two were
administrative staff members, and two were faculty members. Other occupations included
two homemakers, two law enforcement officers, one child care worker, one at home
business owner, a retiree, and one unemployed worker.

Fourteen of the participants self-identified Ohio as their home state. Of those 14,
six participants noted that they were from regions outside of the Athens area. These other
areas included Cleveland, Cincinnati, and Columbus. One person identified West
Virginia as her home state, one identified Maryland. One person said he was primarily
from Northwestern United States, and one person identified New Mexico as the home
state. The study also included two international participants, one from England and one
from Morocco.

In general terms, many of the participants were white, educated, middle class
Ohioans who were associated with the university. The group was homogeneous in many
ways but had three areas of diversification. First, the participant group spanned in age
from 20 to 76 years old. The group also included various types of death, in both the
anticipated and unanticipated categories. Furthermore, the time since death ranged from nine months to 31 years. These three key areas of diversification might provide the varied death experiences useful for this study.

I gave the participants a choice of interview location. One participant chose to be interviewed over the phone so she could still be on call for work. Three participants invited me to their homes for the interview; two interviews were conducted in Lasher Hall, an office on the campus of Ohio University, and the remainder of the interviews took place in coffee shops, bars, and restaurants around Athens. The shortest interview lasted one hour, ten minutes. The longest interview lasted three hours. The average interview lasted approximately one and a half hours. The three longest interviews were conducted with male participants.

When first meeting the volunteers, we engaged in small talk regarding neutral topics such as the interview location, the weather, and the traffic as an effort to build rapport with the participants and put them at ease (Fontana & Frey, 2000). I then explained the consent form and, upon receiving consent, turned on the tape recorder. The audio taped interviews usually began with questions to garner demographic information about the participants.

When the participants appeared comfortable answering questions, the semi-structured interviews moved from demographic questions to questions regarding the bereavement experience (Appendix C), beginning with the key question “can you tell me about your loss?” They heard or read the phrase “story of parental loss” several times before the interviews even began. The phrase was used in the newspaper announcement
recruiting participants, during the contact phone calls and emails discussing the research, and in the consent form processed prior to the interview. The open-ended questions were designed to elicit first, the participants’ own story of the experience told in their own way (Kvale, 1996) and second, the evidence of dialectical contradictions experienced by the bereaved. A dialectical contradiction is the dynamic interplay between forces that are opposite, interdependent, yet mutually negate one another (Baxter & Montgomery, 1996). For example, a person might simultaneously desire to be independent and connected to others. The bereavement process is likely fraught with contradiction as the bereaved simultaneously strive to remain connected with the lost loved one while trying to separate ties in order to return to the post-loss life (Rando, 1993).

To capture the personal narrative, I encouraged the participants to include the people and events they saw as important to their bereavement story. Unless a prompt became overtly necessary, I avoided questions regarding particular people and events that are socially constructed to be significant. For example, I did not ask the participants to describe the funeral. Instead, I asked the participants to describe what happened in the days, weeks, and months after the death. When particular events, or scenes, were identified however, I encouraged the interviewees to be specific about the setting, people, action, and dialogue that comprised the scene of the story.

The last portion of the interview centered on the insider-identification of dialectical tensions. Current research utilizes either researcher-identified or insider-identified occurrences of dialectical tensions (Baxter & Erbert, 1999). Researcher-identification takes place during the researchers’ analysis of qualitative data. For example,
a participant might narrate novelty and predictability when providing an account of the funeral; although the participant might not identify the experience as dialectic, the researcher may use the account as support for the existence of contradiction. Insider-identified dialectics, however, provides the participant with an explanation of the dialectical pulls (for the description of dialectical pulls adapted from Baxter (1990), see Appendix C) and asks the participants if they can identify having a dialectal experience.

**Step Four: Coding of Data**

The audiotapes were transcribed verbatim to include stop-starts, pauses, and vocal utterances. After the initial reading of the transcribed interviews, I employed Strauss and Corbin’s (1990) procedures for analyzing data in a grounded theory approach (Glaser & Strauss, 1967). This resulted in several levels of coding. In the first level of analysis, I adopted the eight narrative categories for a “comprehensive examination of the narrative,” as presented by Foss (1996, p. 402). The following is a synopsis of those eight narrative categories:

1- Setting: What is the scene or setting in the narrative? Does the setting change over the course of the narrative? How does the plot relate to the narrative?

2- Characters: Who are the main characters in the narrative? In what actions do the characters engage?

3- Narrator: What kind of person is the narrator? What kind of powers is available to the narrator? What point of view does the narrator take?
4-Events: What are the major and minor events in the narrative? How are they presented?

5-Temporal Relations: What are the temporal relationships around the events recounted in the narrative? Do events occur in a brief period of time or over several years?

6-Causal Relations: What cause-and-effect relationships are established in the narrative?

7-Audience: Who is the audience to whom this narrative is being addressed? Is the audience a participant in the events?

8-Theme: What is the theme of the narrative? How is the theme articulated in the narrative—through the depiction of setting, characters, or events, or through the narrator’s commentary?

In this first level data analysis, the narrative analysis, I wrote notes in the transcript margins recording the emergence of any narrative pattern and indicators of each of the eight narrative categories. For example, I noted the entrance of each character, noted the scenes related to events, and themes. These margin notes turned into the first set of person by person coding notes which I referred to as “element notes” (Appendix D). For this, I highlighted narrative elements that the narrators repeated and emphasized (Foss, 1996). For each narrator, I created a separate document that outlined the important characters, themes, scenes, and apparent argument structures, temporal relations, in short, the narrative elements of each story. After I noted these narrative elements and created the set of element notes, I returned to the transcripts and added to the margin comments,
this time focusing on the plot line of each narrative. These resulted in the second set of code notes, which I called “plot notes” (Appendix E) for each narrative. The plot notes contained a plot summary of each narrative on separate sheets of paper; a separate document for each narrative.

During the development of the narrative element notes, one of the eight categories, setting became less important than the others. It is likely that these categories held less importance to this study because they hold more significance in narrative criticism of non-fiction, literary works such as those discussed in Chapman (1978) and Ricoeur (1980). After re-evaluating these narrative element notes I collapsed down to seven categories, folding setting into events.

These remaining categories are the same as those analyzed in Vanderford and Smith’s (1996) book, *The Silicone Breast Implant Story*. Vanderford and Smith’s analysis of stories focused on the substance of the narrative. Their analysis, as in mine, centered on the important characters in the stories, the events, the plot, and significant, reemerging themes.

In the second phase of data analysis, the dialectical analysis, I combed the transcripts for evidence of dialectical contradictions during the bereavement experience. The dialectical inquiry took place on two levels. First, I sought “researcher-identified” support of the dialectical tensions within the stories; second, I noted the responses to the “insider-identified” contradictions asked during the interviews. This analysis parlayed into the third set of code notes, termed “dialectical notes” (Appendix F).
The dialectical notes indicated that dialectical tensions might be present, but this data set provided very little support of the existence of dialectical tensions. On some rare occasions the events in the plot could have been interpreted by researchers as exhibiting contradictions or paradoxes. For example, one participant noted that the sudden loss of a parent and the anticipated death of a parent were strikingly different in some ways while remaining very similar in other ways. Furthermore, during the insider-identified interview questions, the participants appeared to struggle with an understanding of the tensions. Many participants simply said, “no, I didn’t experience that.” Many of those who said that they felt those “pulls” were unable to provide an example. More importantly, even when support for contradictions might have existed, this data set did not support that communication is the means by which we manage dialectical tensions, an assumption of the relational dialects perspective.

Step Five: Identification of Variables and their Characteristics

In the identification of variables step of the grounded theory process, the data is compared and sorted in an inductive process until no further conceptual variables are generated and sufficient support emerges for the existence of propositions that describe the variables and their relationship.

In this study, the following variables were identified as important to the parental bereavement story: 1) events, including care giving, moment of death, the funeral, inheritance disputes, dreams; 2) characters, including those who provided help during the death and grief and, more often discussed, those who interfered in care giving and mourning; 3) themes, including sacrifice, quality of relationships, blame, and
relief/gratitude regarding the interview. The elements were identified, in the next step I
sought to find a relationship among these variables.

I answered the basic questions of who, what, when, and where of the narrative, or
the form of the narrative; however the why question, or how the form related to narrative
function, remained unanswered. Asking the ‘why’ question led me to the fourth level of
analysis. Here, I looked for how the narrative elements functioned in the story and served
the narrator. To answer this question of functionality, I employed a version of the flip-
flop (Strauss & Corbin, 1990) technique of qualitative inquiry. Strauss and Corbin
explain that the flip-flop technique requires the critic to view the data in one way, then in
the opposite way. By approaching the narratives from various standpoints and observing
them as distinct entities, the researcher can again comb the data for additional insights. I
utilized the flip flop method to gain insight on narrative function by first viewing
narrators as having the choice to tell their story, then as being required to tell their story.
In looking at the data through this technique, the form and function of the narratives
began to crystallize. The narrators answered a call in the paper to tell their stories; they
had agency and told their stories for a reason. The narrative elements appeared to be
working toward an objective.

With the new understanding of the narratives, I returned to the transcripts to check
my perceptions. I employed the constant comparison method asking, “What makes this
document the same or different than the one I just coded?” (Strauss & Corbin, 1990;
Grove, 1988). The narratives shared the same patterns with remarkable consistency. After
determining that indeed the narratives shared the same form and function, I identified a
schema and created a last set of code notes, “schema notes” (Appendix G) that supported the existence of the schema in each narrative. The schema notes outlined the seven narrative elements, or constructs, shared by each of the participants. These notes included the seven constructs and examples of the constructs in the transcripts.

Finally, I placed the schema notes in piles according to different categories to see if there was a relationship between the schemas, the narrators, and their parents. For example, I placed all of the female’s narratives in one pile, the men in another, and constantly compared the two groups to search for differences. I went through such a comparison using the following different groups: sex, age, time since death, which parent died (mother, father, or both), type of death (anticipated or unanticipated), geographic regions (Athens area, outside Athens area as well as United States, outside United States).

**Step Six: Presentation of Propositions**

In this step of the process, the propositions derived from the categorization of the data are presented, along with support for them from the data to justify their identification as propositions. In this study, the proposition is a central narrative theme that emerged during the sorting and comparison process, and is the synthesis of the interrelationship narrative constructs. The presentation of this narrative analysis constitutes chapter four.

For each step of the narrative schema presented in chapter four, I explain the narrative construct then provide the clearest examples from the transcripts to support the schema. There is a strong effort to preserve quotation exactly as said by the narrator. Therefore, because few people speak in complete sentences, many of the quotations appear fragmented and choppy. Consistent with the guidelines presented in *The*
Publication Manual of the American Psychological Association (2001), the following marks are used to aid the readability and completeness of the transcribed interview quotations:

… The ellipse is only used when material is omitted to condense the quotation.

—The em dash is used to set off an element added to amplify or digress from the main clause. Given the frequent amplifications and digressions from the main clause in spoken narration, the em dash is primarily used here to aid readability.

[] Brackets are used to enclose material that provides additions or explanations. For example, brackets are used in this manuscript to indicate long pauses, laughter, crying, and gesturing.

Presentation Limitations

The presentation of the narrative schema is limited in three fundamental ways. First, this study does not provide the reliability and validity checks consistent with other, more objective, research paradigms. I do not aim to use these interviews as text in which to locate themes that will authenticate current theory, rather I seek to understand the creation of the full narrative. Silverman (2001) aptly describes these two approaches to analyzing in-depth interviews. In the first, which he calls a “realist approach” (p.822), qualitative researchers share the same assumptions of external reality as survey researchers. Like survey researchers, they search for authenticity by employing techniques such as inter-coder agreement and computer-assisted qualitative data programs.
In the second, the in-depth interviews are seen as “accessing various stories or narratives through which people describe their worlds” (p.822). By abandoning the quest for authenticity checks and embracing narrative and searching for the rhetorical force, Silverman (2000) continued, we can co-create “plausible accounts of the world” (p.822). Furthermore, returning to the participants for a check of authenticity will not necessarily ensure agreement. As Mead (1934) taught us, our identities, like our stories, are changing from life to death. The participants’ stories, like all of our stories, might have changed.

Lincoln and Guba (2001) explain that when working within the constructivist paradigm, the researcher strives for authenticity and fairness as validity. Authentic reports represent, “all stakeholder views, perspectives, claims, concerns, and voices” (p. 180). As such, this study will include the voices of all participants.

The presentation is also limited because there cannot be a complete presentation of all the evidence collected to support the existence of a narrative construct. Thus, while each narrative construct is followed by a number of examples to support its existence of and all voices will be represented (Lincoln & Guba, 2001), those examples only constitute a sampling from the body of evidence. To uphold authenticity and fairness, each narrative variation is explained and supported by examples in the results chapter of this manuscript.

Finally, since this is an exploratory study, the narrative schema serves as a hypothesis. The examples that support the schema are not conclusive proof that the schema is necessarily true or correct. Rather, the propositions in this analysis, supported by evidence, indicate that the schema may be true. The analysis is put forward with the
understanding that more research needs to be conducted before one could conclude the truth or certainty of these claims.

**Step Seven: Development of a Conceptual Framework from the Propositions**

In this last step, the propositions discovered are organized into a framework that helps explain the phenomena and ties the propositions together in a holistic fashion. In thematic analyses, the researcher sometimes needs to tie together the propositions during in this final step. In this narrative study, however, the framework or schema emerges as part of narrative. I am not seeking to tie together the narrative elements such as plot and character. Rather, I am proposing that the schema presented in the following chapter is developed by and functions for the narrators in this study. As described in the next chapter, the narratives’ schema has seven basic constructs.
Chapter Four: Narrative Analysis

What is the form and function of parental loss stories told by adult orphans?

Introduction

Each of these stories followed a consistent form, or schema. Although the specific bereavement events such as funeral conversations and inheritance disputes varied among the participants in the group, the events each person selected to tell served similar purpose or function. Hence, like Fisher (1984) explained, the form served as function for these narrators.

The parental loss stories told by these adult orphans primarily function as narratives that restore the narrator. The story constructs appear to be organized to bring the narrator through a process of confession and restoration. Central to each story is guilt. Guilt here is operationalized in the rhetorical or Burkean (1969, 1984) sense. In other words, their guilt is regret, discomfort, and/or anxiety resulting from the imperfection from which we all suffer. The organization of this chapter follows the organization of these grief narratives. Seven key constructs, each with its own subparts, comprise the narrative schema: 1) confession of guilt; 2) justification for the guilt with the introduction of the villain; 3) the good child/good mourner argument; 4) positive memory; 5) message from beyond; 6) statement of philosophy; 7) final restorative statement. The following paragraphs will preview the narrative structure of these stories of loss.

The first schematic construct is guilt; guilt is the structural component from which all other schematic components emerge. Typically, the confession of guilt is joined by the justification for the infraction. Each participant stories guilt that is usually caused by
infraction against societal, family, or personal values. Although each narrative contained
guilt, the types of guilt vary because they correspond with a wide range of events leading
up to and following a parents’ death. However, the commonalities among the guilts fall
into sub-categories based on the sequence of events: caregivers’ guilt, receivers’ guilt,
and disrespect guilt.

Following the confession of guilt, the narratives turn towards the second construct
which is the positive attributes of the narrator. The second construct emerges as the
narrator offers a justification or reason for the mistake or mistakes. Here, the story’s
villain is introduced. The villains in these stories serve two purposes. First, the villain or
villains, is often central to the justification for the guilt. The blame is placed externally.
For some, the real guilt is in the failure to defeat the villain whose poor acts hurt the
narrator’s parent. In the third narrative feature, the “good child/good mourner” argument,
the villain serves an additional purpose. In this argument, the narrator speaks to each of
her or his own positive qualities or attributes and builds a case for personal innocence.
For example, the narrators detail the good choices made during the health care, funeral
arrangement, surviving parent care giving, and relationship building. For some, the best
deed is to defeat the villain. The fourth schematic construct is the positive memory. The
narrators include stories that speak to the positive relationship and the good times shared
by parent and child. Often these stories reach back into the childhood of the now adult
participant and reflect on the health, strength, and wisdom of the parent.

In the fifth construct, the narrator shares a message communicated from beyond.
The participants see signs of their deceased parent’s well-being in many places. Messages
from parents are seen in dreams, animals, plants, and flickering lights. All of the participants, including an atheist, have seen these messages from beyond.

In the sixth schematic construct, the narrator shares a personal philosophy. This “philosophy” takes several forms such as scripture, Niche quotations, song lyrics, or summarization of the individuals’ value system. The philosophy speaks directly to the confession of guilt. Finally, the narratives make their way to the seventh and final construct, the restorative statement.

*Schematic Construct One: Guilt*

The guilt can take place during any place in the chronology of parental loss. In the most general terms, we can see guilt fall into two overarching categories, performers’ guilt and receivers’ guilt. Performers’ guilt, or anxiety, regards one’s actions or inaction. A significant form of this guilt includes “caregivers” guilt. For those who lost a parent to a long-term illness, the role of caregiver is important. This is particularly the case for those who participants are older.

*Caregivers Guilt*

The caregivers’ performance guilt results from mistakes related to action and inaction. For example, some caregivers have guilt over acts they did, while others experience guilt for the acts they did not do. The caregivers who confess mistakes claim that their actions, although executed with earnest good intentions, did not fully meet the desired outcome. For example, Emily bought her father a house next to his younger brother. Although her father lived several states away, both Emily and her younger brother visited often and Emily called at least once a week. She tried to carefully monitor
his health to determine when and if a nursing home should replace the in-home healthcare worker she had hired. After returning from a several week trip overseas, she received a phone call from her uncle, the next door neighbor. She was told that he was in poor health and she should come right away. Although she urged her uncle to take her father to the hospital while she made the journey, Uncle Ron refused. Emily hopped on the first plane she could get and started the long trek to her fathers’ small town in New Mexico. She arrived in the late hours of the same day to find her father in poor condition. Instead of taking him to the hospital that evening, she decided to wait until morning. The following passage explains her father’s condition and the preparation for the hospital:

[Emily, 12]

What I learned, and this is the part that’s the hardest—he had a recliner in the living room--and, he had been sitting in that recliner for two days without moving—all that that implies. Mini-strokes…cause you lose control of bodily functions. My uncle knew this. My father told me that—that he did think that maybe when I mentioned it, that maybe he would go to the emergency room, but that he wanted to wait until morning. For me to try to sleep. I had a bedroom there…I laid in bed, and I listened to him sitting in that chair trying to breathe. At 7:00 in the morning, I called my uncle and I said, “Would you come help me try to get daddy up?” Because in that two year period, he ate, and sat, and got heavier; and ate, and sat, and got heavier. . .ate, and sat, and got heavier. What I was trying to preserve was some sense of dignity for my father—and underpants—so, I had given him a towel and some other kinds of things, but I
needed help getting him up. I couldn’t move him physically. So, my uncle came over and he got him up, and my uncle took him into the bathroom and helped clean him up.

Got clean underclothes for him, and he had put those on with my uncle’s help. So my uncle brought him in, and my dad sat down on the edge of the bed. I was—I said, “I’ll put your slippers on you, and then we’ll just put a blanket around you, but you don’t need to get any more dressed up than you are.” So, I was down on the floor, literally at his feet, putting his house slippers on when he bent forward. I thought he bent forward to say something to me. It was a massive stroke. It took me a moment to realize that, when he didn’t say anything, and I looked at him. I put him back on the bed, and I had—I had been certified in CPR…So, I said to Uncle Ron, “Call 9-1-1.” I took the phone on the other side of the bed and I started—everyone of those things going—I had never seen somebody dying. I knew that whatever had happened was so massive, that if my father didn’t want to go to an emergency room. . .he sure as hell didn’t want to be the way he was right there. So, I stopped CPR and simply held his hand and talked to him. [Crying.]

It was Sunday morning in a rural community, and so the EMTs had to come from church, most of them. It took them 14 incredibly long minutes to get there. In the meantime, my uncle had said, “Make a second call,” and then he went out on the porch, and left me alone with my father…I don’t know what remnants we retained, and so I kept touching him and talking to him. When the squad arrived, my uncle directed them into the bedroom, they asked me to step out, and then one of the
EMTs came out and asked did I want them to use extraordinary measures—and that was the phrase they used, “extraordinary measures.” …I made a decision…I made a decision and said, “No. No.” It was nothing but the limbic, vegetative state.

My father was 76, not in good health, never—of course, he would never have known, but he would never have forgiven me, had he ended up in a vegetative state, hooked up…I thought at the time—I said, “I sure hope to heaven my brother doesn’t second-guess me,” because on almost every decision, he had second-guessed me.

Fortunately, Emily’s brother did not second guess her decision to deny extraordinary measures.

After explaining her father’s death, Emily continued to explain why she did not bring her father to a nursing facility sooner. The narrative sequence of justification includes her brother’s inability to gauge her father’s health while she was away, the cost and limited options for nursing care at the time of her father’s death in 1999, and her uncle’s refusal to play a part in her father’s healthcare. Uncle Ron emerges as a villain, not only by contributing to her father’s decline, through inaction, but also by interfering with Emily’s funeral plans and thus causing a family rift that remains until today. Uncle Ron passed away in 2003; Emily still carries guilt for not mending the family fracture before Ron’s passing.

Emily had caregiver’s guilt of poor action. Although she played the role of a good caregiver, attempting to meet all of her father’s health and financial needs, the final result
appeared similar to inaction. Her father’s condition still slipped under the radar, as he laid
dying for two days in his recliner.

Victoria shares a similar caregiver’s story. She too, with the cooperation of her
brother, tried to oversee both her mother’s and father’s health. Victoria’s parents live in
England; hence, she often tried to gauge their needs via telephone calls and relied on her
brother for face-to-face assessments. During a visit to England, which took place one
month after her brother’s last visit, she found her parents’ house and physical condition in
ruin. The house contained piles of dirty clothes and dishes covered with roaches; and,
although her parents could not remember the last meal they had, the oven was still on.
Victoria immediately took her parents to the hospital where her father died days later.

Lilly, who lived in Ohio while her family lived in Maryland, has guilt resulting
from leaving the care giving to her siblings:

I certainly don’t think my story is unique but the one thing about it that is difficult
is that I was the only family member who did not live in Maryland. So, I have an
older sister and a younger sister and my older sister has retired. My younger sister
is still working. She took a leave of absence to take care of my father. And then
on a 24-hour rotation, they stayed at my parents’ home. They were doing the
primary care giving so in a matter of six months, from the time he was told that he
had less than three months to live until he passed away, I made six trips to
Maryland, you know to try and fill in for my sisters…so even though I felt that
because I work full-time, I’m a single, uh, person, don’t have a family [emphasis
added by speaker] at home, but I did have a job, I felt that I was doing as much as
I could possibly do. But it was never enough. I tried to explain that if I could, I
would take a leave of absence or family medical leave, but I didn’t have another
income, I didn’t have a husband’s income that would pay my bills. And I felt that
my coming six times in six months was doing pretty darn good. [Lilly, 1]

As Lilly explained, her siblings lived closer to her sick father than she lived. Hence, she
thought the responsibility was theirs. After the death of Lilly’s father, her siblings let
Lilly know their dissatisfaction with her lack of contribution. Lilly explained that when
she did arrive to help with her father, she “came in with ideas and [her sisters] never
completely trusted me.” At times she was scolded for making her parents dinner that her
sisters viewed as unhealthy. While visiting, her sisters would call to ask, “Did you give
daddy his pills? Did you do this? Did you do that?” Lilly says, “It was extremely difficult
for me.” Also difficult for Lilly were the phone calls that her father was going to die:

And then I would get phone calls, you know, “Daddy’s dying. You need to get
here.” So I would either pay three hundred and some dollars for a plane ticket and
fly to Maryland, only to have daddy rally and not die. Um, that happened twice.
One time I took my daughter and my grandson because they said, “Well, this is
really it. He’s really going to die.” And then I get there and he doesn’t die.

Lilly took the trip home for his final passing twice, she chose not to return home the third
time:

Then I saw my dad a week before he passed away and he wasn’t able—I mean,
we weren’t able to have a conversation, or anything like that. He was basically in
a coma. And then I came home and my sisters called and said, “Hospice says that
daddy has forty-eight hours. What do you want to do?” And I said, “I’m not
coming home.” And of course, they were shocked. And I said, “Other than
helping with mother, I just don’t think I can do it right now.” I said, “Just call me
when he’s gone.” And, um, so they did.

Lilly exemplifies the complexities and frustrations of joint care giving. Although she.beginns her story with stating that her sisters were the primary caregivers, as the story goes
on, she uses “we” and “us” as signifiers of the joint venture. Even in a latter retelling of
the 24-hour shift story, she switches from saying it was something “they” did, to
something “we” did. She emphasizes that that the shifts were hard on “us” instead of the
before mentioned “them.”

In a story sharing an opposing view, another participant Carolyn, could have been
Lilly’s sister. Carolyn and her daughter-in-law provided around the clock care to
Carolyn’s father. Although Carolyn and Lilly might not know one another, they play
opposite one another in the same master narrative of join care giving. For the most part,
Lilly plays the outside-observer caregiver; Carolyn plays the primary caregiver [Carolyn,
12]

…somebody coming in telling you that you’re doing something wrong when
you’re the one being there 24 hours a day. Those were the things hardest to deal
with. Someone had made the comment that, even coming out of the supportive
person, said—it wasn’t one of the supportive persons—it was one of my aunt’s
who had not been there on a regular basis and said, “Well, you are just
overmedicating him.” Made the comment to my mother. Having to deal with trying to keep my mom stable, dealing with my father dying, and dispensing medicine in and out around the clock when you don’t have the Hospice nurse there, because I’m not a nurse, um—and, she’s got it regulated and we’ve got everything marked out on a sheet, doing what we need to do—and somebody to come in from outside and say, “You’re overdosing him because you’re giving him too much medicine.” That’s the point in time when I about went through the ceiling ‘cause we were all stressed enough. All I told my mother is, “They better never say one word to me.” Because, we are doing what the Hospice nurse told us. There’s an emergency care kit when someone gets to that point and stage where the oxygen deprivation, they’re trying to get out of bed—they don’t know what they’re doing. You’re to keep them comfortable like he requested. We did exactly what he said, and for people to make that type of comment that’s never ever has been there and did what we did for that entire week—24 hours a day, has no right telling anybody what they need to do. It’s like okay, I’m ready to cut that branch off the family tree. Let’s prune it right now.

Carolyn and Lilly both narrate the common conflict of joint caregivers. In each case the narration functions to highlight the effort made to give care in spite of adversity. For Lilly, the story casts her as an outsider whose contributions, her “ideas” and “suggestions,” are undervalued. Carolyn is the primary caregiver who casts the outsider with ideas and suggestions as the obstacle who undermines the primary caregivers’
actions. Together, we see fertile grounds for conflict, hurt feelings, and frustration on both sides.

For many adult children, the role of caregiver is fraught with anxiety. Since death is inevitable, the caregiver child is doomed to fail is one sense or another. Although the caregiver’s goal might be to give comfort (physical, emotional, financial) for many, sustaining, even prolonging the life of the parent is a battle the adult caregiver is destined to lose. Only when the caregiver sees spiritual care giving, or preparing for the after life, can the aim be truly accomplished. As it will be discussed later in this chapter, these caregivers find guilt in other parts of the loss process. Even stories of the most zealot care giving are fraught with anxiety and second guessing. Physical care giving is an imperfect act. Each of the guilt types is coupled with a series of justifications or explanations for the infraction.

*Moments Before Death Guilt*

Lilly chose not to return to Maryland for her father’s last hours and although her family was shocked, she justified her decision through narrating the difficulties of the trip and twice before, last-minute reprieves. Lilly is not the only participant to miss her parent’s eminent death; in fact five of the participants had some knowledge that death was likely to come, but did not go to their parents during the last moments of life.

Sandra was in high school when her father, a motorcyclist, was hit by a drunk driver at 1:00 am. Her mother and older brother immediately went to the hospital as Sandra decided to stay at home. Sandra’s mother warned her, “this is serious,” but, as Sandra stated in the interview, “This is weird, but I just did not want to go” [Sandra, 3].
Sandra explained that her father frequented the hospital with broken bones and that hospital visits became somewhat routine. She said, “I was freaked out, but it was like, ‘okay, he’s done this before.’” That night in the hospital, her father was still conscious, still able to speak. The following morning, he slipped into a coma. Sandra would never speak to her father again. In the days that followed, Sandra realized that he would indeed die and explained that, on some level, she knew from the beginning that he was going to die. The family decided to take him off life support, and Sandra resolved, “I mean, I wish I did [go to the hospital] but you know there’s no way I can change that now, so I try not to beat myself up about it.”

Sandra and Peggy share similar experiences. Peggy’s senior year homecoming day began with screams coming from a nearby lumber yard where her father worked. A truck load of logs became unhinged and landed on her father. Still alive, the life flight team worked to take him from their small eastern Ohio town to a hospital in Pittsburgh. Peggy’s mother asked her to go in the helicopter with her to Pittsburgh, but Peggy thought “he would be alright” and wanted to attend morning cheerleading practice to prepare for the homecoming football game. As Peggy drove down the road towards practice, several neighbors chased her down and made clear the severity of the injuries. They explained the importance of joining her mother’s flight to the hospital. Peggy joined her mother in the helicopter.

At the hospital, Peggy learned that her father was indeed in critical condition. However, “since it was [her] senior year,” her mother thought she should still attend the homecoming game. Peggy returned to her hometown and watched the game from the
stands, too upset to cheer. At halftime, the game’s announcer reported an update on her fathers’ condition. Peggy became distraught. At this point in the story’s plot, Peggy introduced the first of many villains, the announcer. These villains are characterized by those who both call attention to Peggy’s situation and ignore Peggy’s situation.

Upset over the announcement, Peggy asked her boyfriend, a senior year football player, to leave the game and take her back to the hospital. They arrived at the hospital to find that her father was going in for a high risk surgery that might save his life. However, it was only hours before the homecoming dance, and her mother and aunt suggested she return home to attend the dance. Again here, Peggy states, “I didn’t know he would die.” Her aunt made a phone call to reschedule Peggy’s hair and make-up appointment; Peggy made the appointment on time.

The homecoming night was characterized by “thoughtless” people that treated her too gently and one hero who protected her from her knowledge of her father’s condition. At the dance, fellow students and teachers asked how she was doing, thereby calling attention to her father’s situation. The story continues later that night when a hero emerges. A friend hosted a small after-dance party where the students and parents watched Saturday Night Live. People thought there was a problem with the TV, because the channels switched during commercial breaks, yet no one seemed to have the remote control. Later, Peggy found that party host’s father switched channels to avoid the local news reported updates on her father’s progress. Peggy notes that this was, “a real act of love” [10]. Later that night, Peggy’s aunt showed up at the party to bring Peggy back to the hospital. The surgery was not a success and her father died the next day.
After this detailed account of the days between the accident and the death, Peggy’s story was followed by a quick succession of plot points highlighting her discomfort with methods of showing support. She explained that for two years after the accident, people on the streets would ask her how she was doing, if she was okay [5]. Her reaction to these questions, “It just kind of sets you back like, yeah. It’s like, ‘I was doing great until you just asked me that. Thank you.’ You know?” She had arguments with close friends who said, “I know how you feel.” She had frustrations with her boyfriend who sobbed at the funeral when, “he was supposed to be strong for me.” Peggy nearly left the prom after hearing, “Your dad would be so proud of you,” several times.

Now in college, Peggy tries to “conceal” her father’s death. However, questions about her father do emerge. Peggy lives in her professional fraternity house where she displays a photograph of she and her father in the fraternity’s living room. When visitors come they often ask if the man in the picture is her father. She tells the visitor that her father is in the picture, but he passed away. After she tells the visitors of her father’s passing, they often apologize. She forgives them because they did not know any better, “I’m like, ‘You didn’t know, so there’s nothing to apologize for. It’s not like you knew this and still brought it up.” Peggy separates this group from those in her small town, while still establishing the rules of conduct; now that you know, do not bring it up.

Peggy and Sandra experience similar events, neither fully realizing the eminence of death and both missing their fathers’ last days. Both narratives start at the same point, the accident and the days leading to the death. This similar foundation is the basis of two very different stories; Sandra discusses regret, a fractured mother-daughter relationship,
and, as I will further explain later in this chapter, a rewriting of the days leading to her father’s death. Conversely, as we have seen in Peggy’s story, there appears to be a cyclical pattern of attention. Here, Peggy resents attention, yet finds herself in situations which call attention to her.

Sandra expressed regret for missing her father’s last cognizant hours. Peggy shares many of the same events with Sandra. In Peggy’s story, however, she is not expressing guilt for the absence, rather using the absence as building blocks for her master narrative of victimimage. By comparing Sandra’s story to Peggy’s story, we can further support the thesis that we are our stories (Rosen, 1986). The events are similar, but the function of narrating those events appears to be different. Dan McAdams (1997) contended that in late adolescence, we begin to see our lives in narrative terms. We organize events in the past to make sense of our present and forecast the future with some unity. In the cases of Sandra and Peggy, Sandra centers on regret for missing her father’s last hours; in Peggy’s story, missing her father’s last moments is a subplot to the larger story of her discomfort with the attention her orphan hood brought.

Another participant, Brian, mentioned the desire for attention during his interview. I asked Brian if he had experienced the conflicting desires to be with others and to be alone. He responded with the following explanation:

Oh, yeah. Oh, yeah. I think—I know I experienced it. I know I experienced because just the same reason most people experience things like that when they want a lot of people around paying attention to them, ‘cause they want that attention because here, “Look at me, I’m grieving,” which isn’t a conscious
thing—we’re not doing it for our own benefit, it’s just a reaction to death. I definitely know that I did that. Like uh, all my friends would want to you know, “Hey, let’s go to Tee-Jays, let’s get you know—get sloppy.” [22]

Brian synthesizes the pattern of attention seeking and avoidance that Peggy narrated. Both Peggy and Sandra shared the same event, or “mistake” in Sandra’s words, of missing their fathers’ last living moments. However, the personal challenge, or guilt, in these stories is located in two different places. Sandra’s struggles to forgive herself for staying home, whereas Peggy is challenged by the interaction with others as she navigates the attention she receives and seeks to forgive those who show her attention.

Funeral Guilt

Three participants, Samir, Brian, and Steve spoke of guilt which occurred at the time of the funeral. These guilts result from the lack of performance, inappropriate performance, and misinterpreted performance. Although each of these men storied different experiences, the funeral event is central to each story.

Samir’s mother passed away from a long-term illness while he was temporarily living nearly a half of a world away. He last visited her a few weeks prior to her death and had planned to return home again a few months later when he had a break from work.

In the first few minutes of his story, Samir revealed his regret; he did not attend his mother’s funeral. After the regret statement, Samir continued with a long description of the impossibilities for his return for the funeral. He then told a story of driving to the bank while weeping the entire distance. Although the bank was only miles from his house, he had to pull over three times, his tears invading his vision. He arrived at the bank,
emptied his account and wired the money home. The money, which might have gone towards a plane ticket to his mother’s funeral, would pay for a proper funeral for his mother. 

Samir told me the story of his mother’s funeral from his second-hand account. His brothers reported on the celebration of her passing, emphasizing the religious perspective that one should celebrate the passage to God. Samir then paused for a long moment, and told me about the many people who traveled to the funeral to “honor” his mother. People drove and flew through the night to be present for the funeral. In comparison to Samir, these people were “strangers” to his mother. Hearing the frustration rise in his voice, I said, “That must have been very difficult to hear.” He responded with tears in his eyes, “I think the experience was awful to describe. I mean, even, I don’t think there are any words to describe and talk about it…No, no, no!”

As customary in his culture, many people who came to the funeral stayed at his family’s house for days or even weeks. Samir said that the money he sent lessened his family’s financial burden, a far greater use than a plane ticket home. However, throughout the two-hour interview, Samir’s twice brought up both his regret and the men who traveled through the night to attend the funeral.

Samir’s story falls into a regret-justification-regret pattern. He continually negotiates the decisions he made in the first weeks after his mother’s death. He expresses regret for not returning for the funeral, then justifies it by explaining his financial status, then again returns to regret for missing a funeral that mere strangers attended. This vacillation reflects the shifting evaluation of one’s decisions.
The second example of funeral regret is centered in misunderstanding. Steve was a communication professor when his mother passed away. Given Steve’s career, his family thought it would be a good idea for Steve to give the eulogy. Steve was eager to serve his family by using his skills. Unfortunately, the eulogy did not go as planned. He structured the eulogy around the different phases of his mother’s life. An important turning point in his mother’s life was when she and Steve’s father divorced, she remarried and had two more children. Although Steve did not intend to describe this phase negatively, he portrayed this phase as a darker, sadder time then the previously described phase, which he termed the “first family” phase. His mother’s husband and their two children became upset with this characterization. Steve cried, “I didn’t mean to—I wasn’t—my intent, maybe I should have prepared more—it didn’t sound bad in my mind. I never meant to hurt anyone. It was horrible.”

Both Samir and Steve cried during their admission of guilt. Participants commonly displayed emotion at the moment of confession. In a few cases, laughter displayed emotion, not tears. One participant in particular, Brian, used humor throughout most of his story. In fact, his guilt, which in this case is better characterized as anxiety, transpires through his use of observational humor during the first days of mourning and the funeral. The following are excerpts from his story using humor to describe what he observed during several small events within the mourning ritual. The first passage describes the visits to his house:

Just people coming over and making my mom cry. That’s what it consisted of.
You know? Someone would come over for an hour, and then my mom would cry, you know, then they would leave. Then somebody else would come over for an hour or two, and make my mom cry. I was—I just wanted to get to the point where when somebody rang the door or the doorbell, I would just go to the door and say, “Hey, Goober-nut, hey, just leave her alone.” ‘Cause my mom and I are both just very solitary people. That was basically it, just me and her just sittin’ there talking, and every once in a while she’d break down and I’d go for my umbrella, then she’d be okay, and just—we laughed. That’s how we would deal with things—just laugh. So we’d say something that was just totally depressing, and just start laughing about it. [11-12]

Brian also observers the oddities of the funeral and those oddities, at times, moved him to uncontrollable laughter:

Well there were people who like, said the funniest things. There would be people who were in the line for my mom who I had never seen before in my life, and then they would come to me and I was standing right behind her, you know dressed in all black dove tails, they—you know, I would shake their hand or whatever and they’d go, “What relation are you?” I’d have to say, “Son.” [Laughed.] I’d be like, “I’m his younger son.” “Oh, you’re Brian.” “Oh, you’re lovely.” “Yeah, thanks.” “Who are you?” I didn’t know half the people there. [12]

Brian not only critiques the funeral, but he chooses to violate norms to make the experience his own:
Actually, I got pictures of it too. You know, the flower arrangements, and the coffin, and everything. They’re depressing pictures—you know, your dead father. It was nice. I stood in the back of the room after it was all over, the viewing was over—‘cause mom wanted pictures of the flowers. Didn’t want a picture of the coffin right then, but I wanted it. ‘Cause you know, I just kind of like to see him. I had one from the back where you could see the coffin in it. I put—we were allowed to put things in the coffin with him. So I put one of those [scale model trucks] in there, and I put a pair of headphones in there. You know, ‘cause everybody remembers him like that. Everybody just kind of went, “Headphones?” I was like, “Headphones. He needs to be able to hear.” [52]

Brian makes the choice to honor his father by including headphones in the casket. In doing so, he violates the expectations for funeral behavior. A funeral is a performance stage with carefully prescribed scripts (Goffman, 1959). These three adult orphans centered the guilt portion of their narrative on the appropriate funeral performance; in essence, they performed their roles poorly. Although each of the men intended to perform good acts centered on caring for family through financial help, a thoughtful eulogy, and living parent protection, each tripped a bit along the path.

Inheritance Guilt

Many of the participants included an episode concerning money or inheritance in their bereavement narratives. The most common form of inheritance guilt came from the several younger participants who expressed anxiety pertaining to their college expenses. One student explained that she could afford to live alone whereas her friends could only
afford to live with roommates. She said, “I feel a little bad about that.” Another student, now in her fifth year of undergraduate education, said that she felt guilty because if she had paid for it on her own, she would have completed her schooling in four years. One student discussed getting behind in paying his tuition shortly after his father passed away. He called the school to explain his circumstances; even the ability to delay payments brought him guilt, “Sometimes I feel like I abused him, or I almost used his death as an excuse to not pay my own bills, or something like that. You know what I’m saying?”

[Chuck, 25] Summarizing the sentiments of many student-participants, another participant Brian explained, “It’s like I paid too much to have this money—too much cost. It wasn’t worth it. I’d exchange it for my dad any day.” [Brian, 24] In many cases, inheritance guilt could be characterized as receivers’ guilt instead of performers’ guilt; there is a discomfort associated with what one does or does not receive. Some viewed the money as a burden or reminder that their parent passed away. The loss of their parents shifts them into a different lifestyle. For some, that lifestyle is more financially difficult, for others, the inheritance makes life financially easier. The financial gain comes at too big a price.

Some feel discomfort not for what they receive, but for what they did not receive. Erma, who moved back to Ohio from Florida to care for her aging parents, had a sibling conflict when her parents passed away. Erma’s siblings took many of their parents’ possessions from Erma’s home:

I didn’t want to change anything around here, the house itself or the furniture. They took all the furniture. And that upset me, because I wanted everything to
stay the same. They divided it amongst themselves. And I said, I think if the furniture was here it is something else that belonged to her that I could keep that I could hold onto. But they divided it, all of them got something. [9]

Erma kept more sentimental treasures her parents left behind. In particular, Erma has a cabinet filled of her mother’s journals which she read to me during the interview. Erma counters her furniture disappointment by providing an example of what she did receive, “I went to her bed and I said mother I love you so much. And she said I love you too. So, it was worth all the care…I’ll have something they will never have.” Erma’s mother, though described as loving and affectionate, never spoke of love to her children. The siblings received the furniture; Erma received a more valued commodity.

Also in a position of receivers’ discomfort, Clair made important decisions about her inheritance. Clair’s mother passed away when she was just an infant and her father died of a heart attack when Clair was 16. He did not have life insurance; however, Clair did inherit her house. She lived both at her house and stayed with a neighbor as she finished her high school education. When she graduated, she sold the small house and went to college.

Although Clair’s mother died when Clair was an infant, when Clair was an adolescent, she met and became close with her mother’s children from a previous marriage. These step siblings on her mother’s side contacted Clair to find out how she was going to share the money from the sale of her house. Family and community members suggested that Clair give some of the money to the neighbors who supported her throughout the year. Clair was determined to keep the money, but began to feel guilty
about the neighbors who treated her like a daughter. She went to her neighbors to discuss the messages about sharing the money with them; they “would not hear of taking one penny.” Clair justifies her decision concisely, “That house was my house, not even my father’s house. It was my money that paid for the mortgage. My money from social security, from loosing my mom. That paid the mortgage.” Clair’s decision to keep the money caused a rift between her and her step siblings on her mother’s side, the only blood relatives Katie has left.

Inheritance guilt manifested in three different ways. First, the surviving children find receiving the inheritance to come with a burden, a reminder of their parents’ death. The help that the money provides is balanced against the cost of loosing the parent. Second, the surviving children express discomfort for what they do not receive, such as in Erma’s case. For each piece of furniture that went to her siblings, Erma felt that she lost a little of her parents. She balances these losses by enumerating the tangible and intangible gifts she received that her siblings did not. They might have received coffee tables, Erma received the rare, treasured, “I love you.” Finally, the surviving children sometimes express guilt over the decisions they must make regarding the inheritance. In Clair’s case, for example, the community and family pressured her to share her inheritance but chose to keep the money for her own future. Grace, on the other hand, shared some inheritance with a family friend who found the gesture insulting. Although the specific forms of inheritance guilt are varied, inheritance provided an area of concern for nearly all orphaned adult narratives.
Parent Relationship Guilt

One of the most complex guilts observed in this study is guilt associated with the relationships between the children and the deceased and/or surviving parent. This guilt is complicated by both the social taboo of disrespecting a deceased or surviving parent, and in some cases, the participants’ difficulty in allowing themselves to have anger towards a deceased parent. Hence, at times, the parent plays the villain. To illustrate this complex form of guilt narration, four cases are offered.

Some participant regret comes from past difficulties experienced between the child and parent. Clair, who is highlighted above for her discomfort in sharing her inherited house, also expresses regret over past behavior. She simply states:

I think I hold a lot of things back because I have a lot of guilt from when I was a teenager, because I feel—I hate myself, because when I was a teenager I was horrible. I didn’t realize that it’s normal. [Laughed.] I didn’t realize it was normal. So I hated myself for it, and I still do. It’s something I’m working on now, but it’s not—it gets in the way sometimes…Like, I need, I kind of need his forgiveness for the way I acted. ‘Cause like, I can apologize to him as many times as I want and I won’t feel the same, so I need his forgiveness, and I can’t even get that. [24-25]

In some ways, Clair met a societal expectation by being a challenging teenager, but she holds regret for her early behavior. Although a few of the younger adult participants, including Katie, Sandra, and Chuck, shared such regrets, these guilts did not take focus in their bereavement narratives. These guilts did not trigger the pattern of justification,
weighted good deeds, and ending restatement. Other more intricate parental guilts that follow did take a central role in the stories.

Micah, a 22 year old college student, who lost his father to cancer six months post-diagnosis and nine month post-life insurance cancellation, narrated a complex parental guilt. Micah’s parents were together since they were teenagers. After thirty years of marriage and eight children, Micah’s father, a prominent surgeon, passed away. Micah’s eldest son role and therefore parental caregiver was, in his view, unfairly thrust upon him by the absence of his older brother.

Micah’s story has a plot turn with the introduction of the villain, his mother’s new boyfriend. The new unemployed boyfriend is villainous because he is the antithesis of the family work ethic value. The villain does not take on the caregiver role for Micah’s mother; rather, Micah’s mother becomes the villain’s caregiver.

Micah’s resentment towards his mother begins to crystallize in the story when he shares his wishes for his mother’s suicide:

I wasn’t expecting my mom to you know, fall in love or whatever that was, which wasn’t love. It was just you know, not knowing. You know. I expected her to kill herself. I was actually hoping that she would. Well, I don’t know-- what the fuck was the point in her going on without him? I mean, really. [27]

I asked Micah about the significance of her children, he responds:

Fuck us. You could spend a lot you know—I don’t know—it’s just, I want to know or a little bit in between. I mean, no, you don’t spend that much time with somebody and just like “Oh, okay, what do I do now?” So, I was kind of hoping
for [suicide]...I mean, she’s been working on her dissertation for almost four years now. You know, I mean—I’m not—I think a lot of that has, emotionally has to do with the fact that he died in the middle of it, but a lot of that has to do with the fact that she’s with this total drain. You know. So in a lot of ways, it’s just like—I don’t know. I expected her—I mean, it’s just hard to see her—it was hard to see her without him. Then, it was just like, another thing that I didn’t understand about the whole thing—it’s like he died, and I mean there was no way he was going to go to hell, if there even is a hell. But then, there’s I mean—what the hell would heaven be because he had everyone here, everything he would have ever wanted. He had his family, he had his wife, he was in a nice ER, and he was going to be able to retire in like seven years and just do like urgent care, and teach in the Med School. I mean, everything. He had finally worked hard and it was all figured out, and he dies at 51. It was just like—then, I was talking to some nurses at O’Blennes and they were saying, “Well, he’s definitely in heaven,” and I said what I just said and they’re like, “No, heaven is beyond all comprehension of what happiness could be.”

What do I think of that? I think I don’t know shit, but I mean I don’t think my dad could be happy without my mom, basically is what it comes down to.

Micah’s story functions to condemn his living mother while illuminating his father’s halo. His story begins with disobeying his father’s wishes and results in harboring desires that profoundly deviate from societal definitions of compassion and goodwill. An outsider might view the father’s cancellation of the life insurance policy
months before diagnosis as the directly causing the family’s financial devastation.

However, Micah story enables him to use the life insurance to further a case father as sympathetic character. His father was devastated by his choice to cancel the life insurance, he is a victim. The mother’s villainous boyfriend instead is an obstacle in both family financial security and, more importantly, his father’s experience in heaven.

Grace felt little emotion when her father died. He did not treat her mother well before her death, and Grace narrates guilt for not saving her mother from his poor choices:

My dad was very difficult. He made it very difficult for her during that period of time. He was not nice to her at all. Well, he—my dad is, my dad was very selfish and self-centered, and he—she was still working. He had retired. She was still working. She was a teacher. She would come home at night, and of course, even before we knew she had this, she was tired, but she, obviously, had been coming up for a long time—and, he wouldn’t let her rest. He was just a pain. When they knew she was going to die, it was fairly immanent, two to twelve months, she actually passed in two months, he wouldn’t even let her come home. He insisted that she go to a nursing home, even though there was no reason for her to go. That was very difficult. It was extremely traumatic…I remember the day that we had to put her in the nursing home. I know it was July 10th. She died two months after that. I remember that day as one of the worst days of my life…It’s hard to look at my mother’s, the last months of her life, without thinking about how he acted too. Not letting her come home. There was no reason why he couldn’t--it was very difficult. She, seeing her reaction to that--Oh, she was so disappointed.
It was terrible. It was terrible. She um, I think, she felt so betrayed. I think she had wished that she hadn’t married him, period. He was, he would do things like, when she was younger, and she had oh just a benign cyst, he would take her and just drop her off at the hospital, and she’d be up there all alone. I mean really, really. She wanted to come home, and my dad didn’t want her there. So we just said, "She's coming home." We were able to take her, we'd go and get her and bring her back to the house. The most painful thing that I can remember is watching her go through the kitchen, feeling things, looking at the measuring cups, opening the doors of the cabinets, and looking at the stuff. She wanted to be around that stuff, and he wouldn't let her--it was horrible [crying]. We'd go and get her, and let her go home, and she'd take a nap or whatever. She'd sit and do whatever she wanted to do, and then we'd take her back. Taking her back was just awful, just awful. My dad wouldn't come and see her or anything.

Katie, a graduate student in social work, first lost her mother who committed homicide-suicide, then her father to cancer. As her story developed, it became clear that Katie implicated both her mother and her father as unintentional contributors to each others’ deaths. Although Katie’s mother died first, Katie begins her story by discussing her father’s death. In fact, the story begins when her father gave Katie two directives before dying with cancer: stay in school, and stay in touch with her stepmother Carol. Katie stays in school and receives high honors; she does not obey the second directive. Katie develops the most compelling villain stories of the participants.
After Katie’s father died, Carol cut Katie and her sister out of the inheritance, and locked them out of their home. In an act of retaliation and rebellion, Katie and her sister brought a truck to the house to get their belongings and anything else they could fit in the truck:

She said, “I will give you one hour to come get your stuff.” All of our stuff was sitting in the garage, in boxes and bags. She took all of our Christmas ornaments, which mind you, we had a big box, and every year she would get an ornament with our name and the year on it from her and my father. She kept all of those, she dumped all the rest of them in a bag, broke 35 of our ornaments, and had everything else sitting out. So, we get it all up and we’re like, “Okay, we’re going to get the bar now.” She’s like, “It’s my bar.” I’m like, “You don’t drink, you weren’t with him when he bought it, I don’t know why you want it.” “I have 15 witnesses that can prove.” She’s like, “Well, it’s not in the will, so whatever.” So, she called the police on us. This time, I should have stayed because my license still had that address as my home address, um—but I didn’t. We had left before the police got there. We saw them pulling in, as we were pulling out. That’s the last time I’ve spoken to her. Any mail like, you don’t realize like how much your address is on like, alumni stuff gets sent there, everything. She returns it to sender and writes on it, “Addressee not known at this address,” because she doesn’t know me any longer. She’s basically told everybody what a horrible you know, children my sister and I are, and they’re like, “You locked them out of their house
a week after their father died, Katie’s in school and has nowhere to go.” The hardest part about losing my father was realizing how much he did for me.

As Katie stories the villain’s actions, she still weaves a positive comment about her father in the last sentence. In her story, it is not necessarily her father’s death or his choice to keep the inheritance plan as an oral agreement; rather it is the action of Carol that brings Katie grief. Later in the interview, she explained that she cannot blame her father, only feel sympathy for him. Carol masqueraded as a loving wife; if he knew what she had done, he would be in great pain. Katie hopes that the knowledge of what Carol’s actions is shielded from her father’s spirit.

Katie’s life story of grief moves from Carol to the death of her mother Susan in and her brother Jeffery in 1994. Even in this homicide-suicide scenario, Katie does not place blame on her mother. Katie said her mother was, “mentally deteriorating” under the stress of caring for Jeffery, her daughters, and their home virtually alone. Katie is also convinced that more research and advocacy need to take place to better understand and meet the needs of people post-partum depression and caregivers’ stress.

Although Katie does not blame her mother for the homicide-suicide, she does implicate both her mother and father as unintentionally contributing to one another’s death. She explained that her father was not very helpful in taking care of Jeffery:

Like, here’s this 44 year old mother who was up all night, has to be up all day with her kids, taking them to special school, doing this, doing that, like I can’t even imagine the stress that my mother was under. I really can’t…My dad brought home the money and went to bed. I mean, I hate to be that way but he
was old-fashioned. Like, he thought that’s what he did. The dad brings home the money, and the mom takes care of everything else.

Similarly, Katie believes that her father would have survived cancer had her mother lived. Susan would have been an excellent caregiver, and with her help, her father would have been able to overcome cancer. Her mother’s death caused the entrance of Carol in their lives. Hence, this partial parental blame for the deaths presents a challenge for Katie, because she highly regards each parent. The story functions to shift the blame for the grief, not the death, to a third party villain, her father’s second wife Carol. Carol serves as a scapegoat in the story, for Carol willingly disobeys the verbal inheritance agreement and causes Katie and her sister grief.

Grace and Katie share a unique narration device of shifting resentment. Both Grace and Katie say that they have no lasting resentment towards their fathers; Grace has forgiven her father for the treatment of her mother, and Katie does not blame her father for life insurance decisions. However, each speaks of their sisters’ resentment. Both Grace and Katie have sisters who sit in judgment of their fathers’ actions. By narrating their sisters’ accusations, they give voice to frustrations and anger.

Grace, Micah, and Katie also share a similar story characteristic. Each had at least one parent who significantly violated societal norms and left their children in difficult situations, and each narrator uses strategies to deflect umbrage towards those parents. Micah and Katie use the villain to channel blame away from their deceased parents and sympathize with their fathers instead of condemn them for their life insurance decisions. Grace casts her father as the villain and uses his actions to justify her lack of grief upon
his death. All three adult children have complex guilts that include care giving, inheritance, and funerals; however, all the guilt can be classified as parental guilt.

Schematic Construct Two: Justification and Villain

The participants shared stories that highlight some sort of guilt in the form of regret, anxiety, or discomfort with particular moments of their parental loss. Some participants articulated awareness of their guilt, and for those participants, the guilt resulted in verbally expressed regret. In these cases, the participants knew that they acted in a way that fell short of their own, or society’s expectations. Examples of those who articulated their guilt include Emily who wished she placed her father in nursing care sooner, Grace who wished she removed her mother from nursing care, Sandra, who regretted missing her father’s last conscience hours, and Steve who wished he more carefully crafted his eulogy. Still others gave emotional accounts of moments that appeared to violate expectations of behavior and respect, but unlike other participants, they did not articulate their regret. Micah’s wishes for his mother’s suicide, Peggy’s time spent at homecoming instead of her father’s bedside, and Lilly’s absence at her father’s death are all examples of apparent discomfort without the verbal expression of regret to the audience. Regardless if the participant attaches a spoken confession of regret to the guilt, every participant argues a rationale or justification for these acts.

The following section aims to explain the arguments used to justify guilty acts. To illustrate how the guilt confession works in cohort with the justification, I will first review how the parental guilt narratives above and additional parental guilt narratives, are linked to a justification.
Surviving Parent as Villain

Micah, Dottie, and Katie each expressed the guilt of disobeying their dying parent’s wishes. Each of these adult children had fathers that asked them to stay in touch with and, or, take care of the surviving parents. Each of these children fell short of what Katie calls, “the last request.” As explored above, Micah attempted to care for his mother until the entrance of her new boyfriend. In Micah’s view, he cannot help his mother because her new boyfriend undermines his attempts to help his mother with finances and house care. Micah views his mother’s boyfriend as the antithesis of his father; this new man is unemployed and does not contribute to the physical or financial upkeep of their home.

Both Dottie and Katie willfully resist the last request because their fathers do not know that the other parents, in these cases stepparents, are villains. Hence, there is guilt from disobeying the deceased parents’ requests, but it is justified because the deceased parent died unaware of the bad acts performed by surviving stepparents. Dottie explains:

We stayed close up until about four years ago—three years ago. He remarried and when he did that, I think because I stuck up for my sisters—because the new wife wasn’t treating them so well, and I stuck up for them, and I also—the other thing I did was try to get to know her, and didn’t get any help on the other end. So, I—I was kinda like up to here [gestured with hand above her head] with it. [Laughed] And, I said when we had our discussion and he yelled at me I said, “That’s it, I’m done.” So, he lives across the street. [Laughed]
My dad, before he passed away, the last year has tried to convince me that, “You need to go make up with your daddy today.” I just won’t. I hope now that he understands why, you know, with everything else that’s happened, I hope he understands why.

Dottie’s biological father did not know that her stepfather and his new wife treated Dottie’s siblings poorly. Like Katie, Dottie could not follow her father’s directive to mend relationships with surviving stepparents. In both cases, the daughters justify their disobedience by explaining that they knew a side their surviving parents that the deceased parent did not know.

*Deceased Parent as Villain*

Two participants, Grace and Marge, experienced little emotion when their parents passed away. Tales of these low-grief reactions can be grouped under parental grief. The emphasis of these stories did not land on the confession, rather the justification for the confession. Grace and Marge justified the lack of emotional response by providing lengthy descriptions of their deceased parent’s poor acts.

Grace’s story is detailed in the preceding guilt section of this chapter. Much of Grace’s guilt emanated from her inability to take her mother out of nursing care. Grace’s father, the villain in the story, placed her mother in nursing care and refused to allow her to move home. Grace explains the different feelings she has toward memorial days:

I'll always remember the day when my mother died, and her birthday, and Mother's Day is very hard. I don't feel the same way about—in fact, I forgot the
date my dad died. I think he died February 3rd. This year Mother’s Day was hard, and Father’s Day is not—I just don't have the same attitude toward it. [23]

Although she lost her father only three years ago and her mother more than nineteen years ago, she explained she has different responses to memorial days. Grace justifies this low-grief response by explaining her father’s poor treatment of the family and his refusal grant his wife her last wish, to die at home instead of a nursing home. As Grace tells her story, it becomes probable that Grace’s guilt is based in her inability to defeat the villain.

Marge narrated the loss of her father she experienced over thirty years ago. Like Grace, she storied a low-grief reaction to her father’s death. Before we sat down to the conduct the interview, Marge told me “my father died, and I think he was a pedophile.” I got her consent, turned on the tape recorder, and she shared the following:

No, I didn’t have a good relationship with my dad and, it was due to the way that he treated me, and I actually think my father was a pedophile—my dad, it was the way I feel about him. He tried to do things to me as a child, he didn’t, I didn’t let him. But this was after I was, oh, an older teenager—then I was 13 or 14, then 16, 17 those years I literally loathed my dad, I did. I hated him. And I know that he tried to do something one time, that time, I just pulled away from him. I remember him saying, ‘I suppose you are going to tell your mom.’ Because it would have killed her at the time, I would not tell my mom. I pulled myself away from him another time when he tried something like that, he had to go through his bedroom to my bedroom, I went into my bedroom and I jumped out the window
because I didn’t want to be around him. And like I say, he never did anything, but if I had permitted it, you see what it would have been; it would have been incest an incestuous relationship. [1]

Well, as again, I wasn’t in as much of deep grief as many people would have been, you know I didn’t have a loving father that I looked up to or worshiped or had on a pedestal, far from it.

When Marge’s father died, as she explained, she felt a “loss,” but “not the kind of loss that a person with a relationship with their father has.” After years of his abuse towards both Marge and her mother, she no longer considered this man her “father.” Later in life, Marge said she realized that she did not have an “earthly father;” she had a “heavenly father,” and an “earthly dad.”

Both Grace and Marge use argument by comparison to illustrate the low-grief reaction. The listener gains a better understanding of the narrators’ reactions when they compare their reaction to other deaths. In Grace’s above quotation, she compares her difficulty during Mother’s Day, but she does not have the “same attitude” towards Father’s Day. Hence, she develops an argument that she is capable of feeling deep grief, as the grief she felt with her mother, but the loss of her father did not elicit the same type of sorrow. Similarly, Marge spends much of the interview narrating the bereavement for her husband, which she compares to the bereavement for her father:

I had the best husband, we never had an argument, he was the best person, so good to me…That’s the big grief in my life. But I wanted to say about my dad, I did forgive my dad, and God helped me do that, the closer I got to God, the more
I forgave my dad for what he tried to do to me and how he treated my mother. Now, my husband’s death, that was someone I loved. In fact, I think I loved him more than I loved God. And I told him that and he said, “Now, you can’t do that, you need to put God first.” He even told me that. All the more reason to love him…But, I just loved him, I just loved him, he was my life. Yes, I had terrible grief with my husband’s death.

Although Grace and Marge might not necessarily express regret for their low grief reactions, they indeed offer a justification for their low grief and a comparison to show that the low grief related to this particular deceased as opposed to capturing a snapshot of their ability to feel deep sorrow. These women had fractured relationships with their fathers; that fracture impacted the low level response to these women’s experiences.

**Schematic Construct Three: Good Deeds Argument**

The third narrative construct is the good deed. Here, narrators balance the guilt with explanations of all the good things they have done for their parent or in memory of the parent. In this part of the story, narrators argue that although they have failed in some ways, they have also succeeded in other ways. Their narrators’ shortcomings outlined in the confession of guilt are balanced by the effort, and sometimes sacrifices, made to honor their mother and father. The good deeds build an argument that the storyteller was a good child, a good caregiver, and/or a good mourner.

The good deed explanations act as an important shift in the narrative; not only does the content of the narrative shift, but so does the performance of the narrative. Participants move from sharing their guilt, often through tears, to justifying their guilt
with inclusion of the villain, to detailing the many good deeds they did for their parents. The participants become more jovial, speak more quickly, and often smile as if they are sensing a relief for navigating through the expression of guilt.

Some narratives begin with good deeds, before the guilt and justification portion. Even in this good-first structure, narrators return back to good deeds after the guilt and justification. The good deeds passage seems to act as a comfort zone to which the participants can return. The tears shed while explaining guilt and the frowns expressed during the villain’s focus are rapidly replaced with smiles and laughter. The story’s theme of pride now replaces shame.

The good deeds passage is often characterized by acts such as conscientious care giving, making funeral arrangements, and honoring the parent through memorializing. For example, in Emily’s narrative, the first one discussed in this chapter, she explained how although she did not realize that her father’s health was quickly deteriorating, she took great care of him for years before his death. She detailed how she moved him to be closer to family, visited him frequently, and provided financial support. After he passed away, she made all of the arrangements and lost a great deal of money on the resale of his home. In Emily’s words she, “did the best that I could.” Erma also detailed the sacrifices of the good child role. She explains:

Well, my father of course by being in the coal mine, we knew he would have problems later in life. His father before him had died of a heart attack suddenly at 45. His mother had heart problems so we knew ahead of time. As their health began to fail, they needed more care. But we were in Florida and my sister called
me to come home and take care of mother. And when I got home I found out my father was a lot worse. And I found out that the Parkinson’s had been developing. We were living in Florida, we had gone down after my husband had his heart attack—he had a lot of problems. Everyone around here was working his own age, he was 50 years old and he couldn’t work, it was really bothering him. We went to Florida because everyone down there was in the same boat—none of them worked they were all retired and he was getting a long well. But we never made it back, and our health is failing—we figured we would—but our health is failing.

Erma not only took care of her parents, she and her husband sacrificed their own health for the health of her parents. She goes on to detail the steps they took to ensure proper healthcare:

Daddy wasn’t going to live very long. So, I took a hospice class to prepare myself—because I have the personality that I need to be needed…He kept hanging on and finally I put him in the hospital. And he said, “you know I am going to die.” And I said, I’m not going to ask you to fight anymore, I know you are tired. I don’t want to loose you, but you can go. And he died the next evening. And of course we had mother to take care of. Of course she was very sensitive.

Erma also explains the move from their Florida home to a mobile home in an effort to care for her parents:

We had rented a house when we came back from Florida. But she did not want us to. If we left the neighborhood, she would have nobody—she only has five other
children in yelling distance—but she said she would have nobody. [So] we lived in a mobile home in back of her. We had lived there about 10 years.

And the last few months, if she would get ill, I would spend the night with her. My husband and I were in and out all day—and if she needed we would be here all day. In the last month we both stayed. My health was failing and I needed help turning her. 24 hours a day, but I would do it again.

I was in trouble myself, and I would pray that the lord would keep me long enough to keep her out of the nursing home. Because she believed that if you had to go to the nursing home, you weren’t loved anymore. She believed that—well, her generation—when she was gone, I started taking care of myself, and it’s been a long road, but I’m getting there.

Erma’s narrative details the many sacrifices she made to care for her parents in the way her parents wanted to be cared for. Erma’s siblings prepared to take their parents to a nursing home when her parents called to Florida for Erma to “save them.” Erma explained that she and her husband put all of their own desires aside to give her parents the care they wanted. Now that they are gone, Erma and her husband struggle with their own failing health.

*Righting the Wrong*

In addition to the good deeds performed such as caregiver, surviving parent supporter, and financial provider, some participants balanced their guilt by attempting to right the wrong that brought them guilt. In two interviews, the narrators literally rewrote their guilt.
Steve, for example, included two passages in the good deeds portion of the narrative. First, he told a story where he drove through the night to be with his grandmother to help her through the loss of her daughter. Subsequently, he became her most reliable confidant and supporter; hence, he included the more traditional example of a good deed. He then told the story of the poorly received eulogy, and followed with a retelling of the eulogy. He said, “I didn’t mean to come out that way. I meant—what I meant to say—can I tell it for you?” He proceeded with what seemed to be a carefully planned out eulogy which took the phrases of his original eulogy but this time, strung them together with positive interpretations. Instead of describing her final phase of life with her “new family” as lacking the excitement of her “first family” as he described in the original eulogy, he described her “new family” as a more peaceful, calm time in her life.

Sandra also narrated a new version of her guilt. Originally, she chose to stay home upon hearing of her father’s motorcycle accident, and lost the chance to see him before he reached and unresponsive state. In her retelling, she shares a story she crafted for a creative writing course:

We had to write about—a short story, and I wrote about um, a couple—a lesbian couple—and the one girl loses the other girl to an accident very similar to my father’s. Yeah, and it was so therapeutic. It was—it was so easy to write, because I wrote it in first person and I wrote like a—the last scene of it is pulling the plug. I wrote, you know, exactly what I was thinking. You know, the shock of it, the you know—looking at the person—I mean, I don’t know if you remember going
through this, but I just see him all banged up and bruised and da, da, da, and the whole total massive machines that he went through. Um, a lot of it is in my story, she didn’t get to see her girlfriend until they pulled the plug, because I had written in there that since she wasn’t family, they wouldn’t let her back in the ICU, so I wrote a lot about what she was going through you know, at the time before that. I had written in little thoughts like um—one of the parts was like she was thinking, “What if I. . .,” or she was saying, “Oh, I’ve got to clean up our apartment, or she’s going to be really upset when she comes home,” and then I had a little inclusive thought, “What if she doesn’t come home?” It was this—it’s all stuff that you deal with. It’s like, ‘How can I think that?’ [Sandra,11]

Like Sandra, the narrator she created proceeded as if the injured loved one would soon return home; like Sandra, the narrator last saw her loved one when “the plug was pulled,” unlike Sandra, the narrator did not have a choice to see her loved one while still conscious. Sandra rewrote her story so that she did not have the option of visiting her father in the hospital; hospital rules took away her agency. Steve retold his eulogy with new phrasing and word choice. Neither narrator could undo their mistakes, but for this audience member, they retold the experience in a new, ideal way.

Some participants’ good deeds are efforts to give back to society or community, and possibly, right the wrongs of their past. Each participant shared the insights they gained about care giving and mourning. The most obvious form of this good deed is performed by participating in this study. Participants frequently said that the opportunity to help others motivated a response to the research call.
Many narrated additional methods to help others. Carolyn, a woman who provided around the clock care for her father and was challenged by the critics of her care said the following:

You know, I deal with things every day that remind me of him. You know? To talk about it to other people or to see other people who have a good outcome, where they may have early detection, or just telling someone, ‘Don’t let this go.’ Be honest with your doctor about what your symptoms are, or hearing somebody that you know, ‘Well, what should I do?’ ‘Well, let me refer you to a good doctor.’ Anything like that helps me to grieve. [6]

Carolyn gives advice to others as a method to memorialize her father. Later, Carolyn goes on to further explain that helping others is her method of coping; a method to provide herself and others with comfort:

Well, if there’s anything that I can do to help anybody else—I mean that’s going through this—I mean, it still—I get choked up, don’t get me wrong. I have my days, but if there’s anybody that’s having issues with that or need to see some sunshine in it, there’s sunshine in everything if they can look hard enough [laughing]. You know? Memories are what can be your sunshine. [22]

Carolyn’s passage reveals a common pattern. Her good deed narrative tethers to her guilt, or discomfort statement. She highlighted the poor care giving advice as one of the biggest challenges of her experience; and in turn, provides good advice as a coping mechanism and good deed.
Katie’s story, like Carolyn’s, emphasizes the totality of the narrative schema. The following, somewhat lengthy, passage is provided to support the interplay between the good deeds, both as sacrifice and contribution, and their association with the initial guilt or discomfort. Katie’s complex parental guilt is told earlier in the chapter; she lost her mother and her brother from a homicide-suicide, and her father a few years later from cancer.

When he went through the stem cell. Like, he had been through chemo, and he had been through radiation, and then he decided to do the stem cell. By this time, he was already pretty sick. It was like a baseball in his neck. He was in the hospital for 80 days straight for the stem cell. I came home every weekend to see him, and drove three, four hours to see him. I basically spent the weekend at the Cleveland Clinic. Drive home every weekend, and spend the weekend at the Cleveland Clinic. So, then he—he got really ill after that. He missed my graduation for undergrad, which he was real excited about, but I taped it. On my mortarboard on my cap, I had, “Thanks, Dad,” because he paid for everything for undergrad. All five years. I ended up getting a full ride to graduate school through a graduate assistantship, and he was really proud. That was the one thing he pushed was college, and he really wanted me to finish. Then, it was my first year of graduate school; he got really, really bad—like, really sick. Um—every time I’d be home, I would have to help him do everything. It was just really bad. Then, I spent Christmas break of last year at home not working. It was the first time I’ve never worked. I basically spent every waking second with him. We went to
lunch, we went to dinner, we went and did everything we could together. We got really close. Like, he wasn’t—we weren’t super close before that. Like, I always loved my dad, but we didn’t talk like we did when he was really sick. He was kind of an old-school dad, like where he wasn’t affectionate. Like, I’m very affectionate, and he was the exact opposite. Then, Christmas morning at 4:00 in the morning on December 25, 2001, he ended up going into the hospital. It was very scary. He couldn’t breathe.

I was at home. This is when I was home for Christmas break. Our whole six weeks. Then, then, he um, he um—I knew then that he was going to die soon. I came back down to school and went home almost every weekend—every other weekend, I should say. Then, I got the phone call from my step mom and my sister. Well, my step mom was like, ‘He’s fine, but he’s going to go in the hospital. He has pneumonia.’ I was like, ‘This is it.’ My sister knew it, too. So, I came home and I spent a little over a week at home. I was there the last day he was coherent.

Then, he was unconscious pretty much for the next three days. We basically lived at Cleveland Clinic, um, in their Cancer Ward. My sister, the baby, my brother-in-law, myself, and my stepmother basically lived there. It was really bad. He was on a breathing machine. Um [long pause] he did not want us to sustain, you know—he wanted to be let go. So, they did their basic like air, but they didn’t have him like on a breathing tube, or whatever. But, he had this mask. It was really bad. He—there was one night where—the way it made you feel—if you woke up, like
you couldn’t breathe, so he was thrashing around and throwing himself. My stepmother is just not good with people like that, so I basically held him down and made him breathe. It was the hardest thing I’ve ever done, by far. It was very difficult. Then, I was there when he took his last breath. I helped to plan the funeral, and do all that, which I had done with my mother’s. It was just—I don’t know which was worse. My mom committed suicide, so like I didn’t get to see her die. It was after she killed my brother. It’s a long story, but that’s how they both died. Then, it was like—it was kind of when my sister and I were talking about it, like—I don’t know if it’s worse to like not see your parents die, and it happen suddenly, or be there the whole time. Like, it’s just rough. It’s like a toss-up. Like, there’s pros and cons with both. Yeah, it’s like I don’t know which is—I mean, I got to say everything I wanted to say to my father, I wrote him letters, I got to mend all of that ties with her. But, I don’t know—it was very interesting. [2]

Katie’s narrative continually circled back to two challenging areas, her father’s palliative care, and later, her mother’s state of mind that resulted in the homicide-suicide. Katie parlayed her grief into two lifetime career aspirations, the hospice work and advocacy for post-partum depression. “So, and then I got interested in Hospice work. My father had cancer, and he never had Hospice, but I think it’s something that I think we should have looked into, had I been at home to do it” [2]. Like other participants’ stories, her good deeds tie to her guilt.
Katie shares the good deed of supporting others through grief. In her following episode of helping a roommate with parental loss, she says that helping others is a method of working through her own grief, her own guilt:

She still has a father, but her mother was everything. So, I—she went home and she...she was gone for awhile. She was gone for a couple weeks and she came back. She took winter quarter off because she couldn’t do it. She was home for a day, and then had to turn around and go back. Remind you, that’s like an eight hour flight. That’s you know—it’s, so I mean I helped her with a lot of that. I was there for her the second I knew about it. I mean I saw her—I was up in my dorm and I was on the phone, and she walked in and I was just like, “Oh my God, what’s the matter?” She just sat down and we just both cried. You know, I’ve been there—I’ve been there for her since the second I knew. It’s just—I mean, you can tell—just certain people. I helped her through it. Helping her through it helped me through my own thing. It helped me resolve my own stuff, ’cause I realized that I no longer feel guilt about him dying. I’m done with the guilt thing, and I’m pretty much over grieving. You know, I’m pretty much resolved and I’m done with it. [30]

The good deeds portion of the narrative serves as a narrative turning point away from the discomfort and anxiety told in the guilt portion and towards a more positive synthesis of positive memories, messages from the deceased, philosophies, and final statements retelling guilt and projecting positive futures.
Because of the catharsis that appears to happen after the narrator tells the good deeds, I term this final stage of the interview the restoration. The organization of these final schematic constructs is less consistent than the earlier constructs; insofar that, positive memories, messages from the deceased and philosophies are sometimes intertwined. Furthermore, this last restorative phase is told in less than half the time as the guilt-justification-good deeds portion of the narrative. This sequence is told more rapidly and happily than the previous series of episodes.

*Schematic Construct Four: Positive Memories*

After the narrators taught me about the “ill parent” and the “grieving child,” they seemingly wanted to illustrate the health and happiness once shared with their parents. For example, when Pat’s father left the family, her mother raised Pat and her sister as a single mother working multiple jobs in Columbus. Early in the interview, Pat emphasized her mother’s difficulty raising two little girls on her own. Later in the interview, she shared a positive childhood memory of going to work with her mother. Her mother worked as a reservation clerk at the front desk of one of Columbus’ nicest hotels across the street from the State House; the name of the hotel escaped her at the time of the interview. She and her sister, both young children at the time, would go to work with their mother on Saturdays. They dressed up and collected room keys in a special key box they carried from floor to floor. The hotel manager paid them for the key collection and told them to save their money for Christmas shopping, which they did. Their mother would take her girls to the hotel restaurant where the chef served them tea sandwiches. As Christmas approached, Pat and her sister navigated the few blocks to Lazarus to spend
their Christmas savings. This fond memory stood in stark contrast to the sibling rivalry during their mother’s deterioration that Pat shared earlier in the interview.

Grace, who found the loss of her mother much more trying than the loss of her father, tells a positive memory of her mother. She uses this story to again subtly compare her feelings towards her mother and father, further explaining how the loss of her mother impacted her:

There's really nobody who loves me like she did. Nobody for me to, you know, to run crying to [laugh]. You know—like a child does. Even though I was an adult, I still felt like she was there. You know? Enveloping me with life experiences that I had not had, with wisdom that I did not have. Maybe because she was taken away so early I felt like you know, my growth was stunted in some way [laughed]. We did a lot of things together. We went one time, and I don't know if you're old enough to remember these things, but in the winter of 1977 and '78, there was a terrible winter here in Ohio. . .Well, it was a terrible snow storm but before the snow storm started, Ron had to go to a conference— so Ron dropped me and our son Nathan off at my parents’ house. And it started to snow.

My mom and I prayed for there to be enough snow that school would be called off, so she—a teacher—could stay home. Sure enough, that happened. School was called off the whole week. So, it was like heaven. She wouldn't have to go to school, and we would have an entire week to spend together. It was wonderful. Oh, it was so wonderful. You know, we would sit in the kitchen, and talk, and cook dinner, and everything. It was just—it was wonderful. If I had been cooped
up with my dad for a week, I'd go out of my mind [laughed]. Maybe that's just mothers and daughters.

I think of the sadness—oh, the pain—the grief—I wonder—part of me wonders, you know—how long it's going to last. The other part, well, I don't want to let go either.

For Grace, the story provides comfort, but also reminds her of the loss, the motherly love she no longer experiences.

Katie tells a positive memory that takes place immediately before her father’s death. She believes that her father intended to leave her with one more fond memory before he passed away:

[With my grandmother’s death], I knew it would happen. I knew it was coming. But with my father, we never knew. We didn’t know. A side note—that June before my father died, he and I took a Greyhound out to Portland to see my aunt—and my Grandma, because we thought she was going to be dead. So, we went out there. That was the last bonding experience—the biggest bonding experience we ever had—and the last one. It was great. There was speculation between my aunt, and my sisters, I that he knew he was dying. We think he knew, because he acted a little bit different. We didn’t catch it—we didn’t pick up on it. We think he knew. I think they sense it. It’s just like, yeah, there’s no other—I mean, you can cover up the fact that reasoning that he wanted to see his mother and whatnot, but I think he did it to say goodbye, and to be with me like one last time. It was great. It was really good. It was amazing. Then we came back—I
went to do other things. It was weird, but it was great. It was just like the last
great memory of my father that I know. [Katie, 23]

Some participants used artifacts to help illustrate the happier, healthier parent.
Instead of simply telling me of a happier time, they apparently wanted me to visually see
this time. Erma showed me pictures of spring drawn by her mother in her journal. Sandra,
Dottie, and Victoria showed me photos during the interviews that took place in their
homes. Chuck brought the funeral card that included a photo of his dad; the funeral card
has been in his wallet since the day of the funeral. Clair lost her mother eighteen years
ago and her father four years ago. When she came to the interview, she carried a large
satchel by her side. I assumed the bag held books for classes; instead, she was toting
heavy scrapbooks to show me memories of her family:

I make scrapbooks of like my parents and um like—I put them—like, I brought
them [laughed]—Well, just the two. I have like a million. I’m a crazy picture taker.

I take pictures of everything [long pause] ’cause I only have one picture of my
mom and I—like a recent one, like before I, I mean she died. So, now I take
pictures of every person. Like, I’m a maniac. So, this is my mom. I’m really big
on memories and talking about them. [42]

Clair pointed out each picture in the scrapbook as she told of the events and the people
that filled the frames. She laughed as she told stories of birthday parties and fishing trips.
She did not appear to be the same person who told of selling her home and steering
through inheritance disputes. She appeared somewhat transformed, a happy person than the one who told of such grief.

*Schematic Construct Five: Message from Beyond*

Throughout the course of the interviews, I never asked the participants if they received signs or messages from their deceased parents. However, each participant shared a story of a dream, an animal sighting, or some message that they often interpreted as a sign from their parents beyond.

Samir, a Moroccan man unable to attend his mother’s funeral, asked if I had interviewed any other international participants. I said I had not, and he responded with the following cultural lesson on dreams:

Okay. I came from a culture in which like we dream—things are so better—they’re not dreams. They’re not dreams, they are informations. Dreams you see dead people, for instance, talking to you. It’s like some kind of instructions. If you carry, the other day, or the other month, or next month, follow and they’re telling you what you do, or they’re telling you like describing their conditions, for instance. For instance, I saw my mom in this huge house sitting on this huge bed and everything was big, everything was big. For me, it was like, she’s in a better place, and she’s happy. She’s safe, and she’s healthy, looking healthy, smiling, and all of that. Since then, my sister saw my mom and same time a huge, she explained as the biggest, tallest found tree—I couldn’t make sense of it, but it’s the green thing going on. Green is always good, symbol of life like growth.
In her dream, she felt—she had a good feeling. I don’t know where I’m going with this except, when you see a dead person in your dream coming to you and talking to you and so forth, sometimes you’re kind of concerned, oh, I just dread that he or she is gone, no….They’re not from God, but it’s communication from like two different worlds. The only way we can communicate with the other world is via dreams. For us, dreams are not something usual, something that you experience in the dreams or anything, because we believe in them. We do believe in what you see in your dreams. [25]

Samir’s dream or “information” brought him the knowledge that his mother rested in a good place, a large house like the one he strived to provide for her through his financial assistance. His dream serves as evidence that his mother reached a peaceful destination in spite of Samir’s absence from the funeral.

Pat, who lost her mother to emphysema, includes in her narrative a childhood dream of her mother that still stays with her today:

Well, before she passed away, and I remember I was 38, I had this daydream or an actually dream--you know when you are waking up, and your not sure if you are awake when you are having this or not, you’re sort of in a nowhere land. I had this dream that I had to walk for about a half an hour each with my grandmother. It was my mom when she was 38 and I was 38, and we had this conversation. My grandmother passed away in March of ’67—I was, you know, 11, but I would have turned 12 in July. So you relate to that person as a little kid. You don’t have
adult questions. You relate to your mom in the age that you are. It was just a
dream. [16]

Katie’s dreams bring her father back to have conversations like those they would have if
he were alive today:

The dreams I have about my dad are basically like—last night I had a dream that
he was down here, and we went to the bars, and went shopping, and just the usual
thing. Like, I just I miss him a lot. Like, he was a really—we had a lot of really
good conversations. He was very political. At first, he wasn’t thrilled that I went
into social work, but then the more I explained to him what I did, the more he was
proud of the fact that I went into that. Not for the money, but for something I love,
and because—he was like, ‘There’s no money in it, but um. . .’ He was like, ‘you
know this is you. This is the person that you are.’ Like politically, we’re both very
much on the same page—both democrat, very liberal. That’s what our dreams are
like—we just talk.

Iris’ narrative centered more on the loss of her grandmother and her son’s
incarceration than on the loss of her parents. Like other participants, including Grace and
Marge, she used the other grief stories to reason by comparison. She did not have a strong
grief reaction to the parental death but is capable of feeling great grief as exemplified in
her other loss experiences. When Iris was teenager, she would make long weekend
journeys to visit her grandmother. One weekend when she missed her usual visit her
grandmother passed away; Iris greatly regrets missing her visit and is reminded of this
regret through a childhood dream:
I didn’t see my grandmother pass. She had sent word—there were no phones back then, much in the country where we lived—she had sent word by her next door neighbor…for me to come down there to her house that weekend…I told her to tell grandma that I would be down then on Monday—it was a Friday. On Monday, [the neighbor] came to school, and came to my homeroom, and she said, “Iris, your grandmother died last night.” I just, I felt that—I had been taught that everything is my fault. It was such a horrible, horrible guilt experience, because [my grandmother] told me that before, like two weeks before that, she’d said that I knew I was going to die.’…Then two weeks later, she tells me to come down and she did die. You know, boy that’s a big thing for a fifteen-year-old that don’t have anybody to deal with. You know? I remember I cried, and I cried, and I cried, and I left school. I didn’t even tell the principal, or the teacher, or anyone, and I had ridden the bus to school—it was 27 miles from where I lived—and I went to walk to the highway, two or three miles from the school is where the highway was and hitchhiked…a lady picked me up. You know, it could have—anything could have happened, but she picked me up, and went all the way—and the bridge had washed out where we lived, so you had to get somebody’s attention to bring the boat over to get you. So, I finally got somebody to bring the boat across the river to pick me up, and I went across the river. It was like an eighth of a mile to where my mother was teaching school, and I told her about grandma. To make it worse, she didn’t like grandma anyway, and dad was—he was in Maryland, working in a shipyard… and had gone there to work, we
couldn’t even get word to him, so he didn’t even get to come to his mother’s funeral that he loved so much. Then, I went to bed that night and when I woke up the next morning, I heard people awake. Because I was exhausted, I probably slept late, and I remember I woke up, and I dreamed that grandma had been in her casket on the stand, at the auditorium at the high school, and we were having this ceremony for her death, and that I was sitting way back in the audience. She sat up in that coffin, and said, ‘Iris, I wanted to tell you that I knew I was going to die.’ I woke up just screaming and crying and, you know, mother knew I was crying, but nobody even really came to me, or anything. That had been one of the greatest guilt trips that I had. [crying] I had carried that all my life, and I finally you know, have a place to keep it now. [29]

Iris told this story during early in the interview, situated where most narrators reveal their guilt statements. In this case, the dream serves as a connection to the guilt, justification, and good deeds, rather than the more common dream purpose, a positive statement of well-being from beyond.

Some of the participants told of signs from the deceased taking the form of strange coincidences. Peggy’s father died during her homecoming weekend; however, he still makes his presence known through various signals. She begins with a very common precursor:

This sounds weird, but maybe you can relate to it.

She then continues:
On the way home after he had passed away—there’s a transformer at the end of my street that never goes out…I went passed it, and it went out. Well, I remembered being as a little kid, we’d always make a joke—lights seemed to go out when my mom and I would go under them, when we were shopping or something, “Oh, your dad knows we’re coming home, and he’s trying to clean the house up or something.” We’d always laugh about it, you know? So when that went out, it just clicked in my head like, “He’s watching over me.” You know? So I got home, and finally when my mom and I got to talk later that evening she’s like, “That transformer went out when I went past it.” I’m like, “Right.” She goes, “Yeah.” I’m like, “It went out when I went past it, too.” Ever since then, I’ve had very weird experiences like um—some people probably think I’m crazy, but no. Well it’s actually like, when I’ve been driving before—I was driving home before I went to school here, because I transferred here my sophomore year—I was coming down to visit friends here, and on my way home a light on the highway went out. I’m like, I didn’t pause, stop my car, but I was like slowed down and went “Uh, oh.” I went around the bin and there was a wreck. I thought had I not slowed down, I could have easily just hit that because it had just recently happened it looked like. There were no flares or anything yet, and it was so close to the bin that coming around you would hit it if you weren’t paying attention. That happened, then the other like major thing that happened was at our old—since my dad passed away, about a year later my mom couldn’t work and keep up the business and I helped as much as I could, but I was going to school and she
knew I was leaving for school so like we couldn’t do it, so we had to sell them. At our old shop, I go up that road to get home from anywhere I go, I go past there—there’s a light there that’s like not hooked up to a switch or anything, and the only time it goes out is if the light bulb burns out which, you know, and I was coming home one night from my friend’s house and that light went out at the shop. I was like, “Oh well you know, my dad’s thinking of me.” We live in the middle of nowhere so there’s woods all through there and everything. And so of course I slowed down thinking, “Oh, hey” you know, “Hey, dad.” I got on up the road and actually—20 deer standing in the middle of the road. There’s no lights on this road, I mean, it’s the middle of nowhere country back road type thing. So I thought, “Man…,” and I fly up the road. I mean, I’ll admit that I have a lead foot. Especially on this road that I know. So I’m thinking, “Wow, you know—had I not paused there again.”

Peggy continues excitedly as she provides another example:

This does sound weird—a bit of an OU ghost thing, but when I lived in dorms my sophomore year—my dad was a race car fan, and people always said he kind of looked like Dale Earnhardt, but Dale Earnhardt was his favorite racer—so whenever he had that big accident, I was sitting in my room. I always had the TV on, even if it’s on CNN or something like that, just for background noise. So I’m sitting in my room, I’m doing homework, my back’s to the TV and seriously, the remote was on my bed in my dorm room—and I lived by myself, so it was a single, so nobody else is in there with me—the door is shut. Even though I’m not
watching TV, I’m paying attention to it and I heard like a change of voices and I turned around, and looked, and it had changed channels. When I turned around and looked, the volume was going up. It had turned to ESPN to the report of Dale Earnhardt. I was like, it was only like two channels off or something, off of CNN but still I was like, “Okay.” I immediately picked up the phone and called [my friend] Jessie, and I’m like, “What is this?” I’m like, he goes, “I was just going to call you to tell you to turn it on, but you called me first.” I was like, “Yeah, it turned itself on.” I’m always like, “People think I’m nuts if I tell them this.” I don’t know—just little things like that I feel still, like there’s some kind of spirit like doing things. “I’m still here,” type thing. You know? That’s a good feeling to me. [Peggy, 23]

Peggy’s passage highlights two important aspects of the dream episode. First, she interprets the strange happenings as signs from her father, signs that he is still a presences in her life watching over her; he is “still here” and this, of course, is a good feeling for her. Just like when she was a child and the light turned on as she passed down the road, the pattern continues and gives her comfort. Second, the dream functions as part of the restoration. Although the adult children negotiated guilt, these messages let them know that their infraction did not impede the relationship with the deceased or the deceased’s final resting. In spite of the misdoings and discomfort, the parent rested unharmed, so to speak.
In the last excerpt on messages from beyond, Emily mentions the crossing of an armadillo, her father’s favorite animal, during the search for her father’s final resting place:

So, I suggested that perhaps distributing my father’s ashes around his great-grandfather’s grave would be appropriate. So, my brother did come with me for that. We finally located it again. My uncle didn’t have a map. We now have a map. My brother and I did the map. Uncle Ron couldn’t get up the hill because it was still all overgrown. My brother and I did. There was an armadillo that wondered out of bushes. At that time, we decided maybe that was daddy checking on us. At that point, New Mexico had been—that part of New Mexico, in the hill country—had been under a drought. One of the things that we had said was that maybe, because my father had been so [unclear], that maybe now it would rain. It started raining the next day. I understand that it’s all hooking together things, but nevertheless. [Emily, 22]

Although most participants did not realize they were “hooking together things,” as Emily notes, most participants inquired if their strange occurrences were unique. During this part of their story, participants often began with trepidations. The passages would begin with “this is really weird, but…” or “you might think I’m crazy, but…” When I told them that indeed others had such dreams and sightings, the participants appeared to feel relief.

During the final moments of the interviews, the participants told a three part conclusion to the narrative. The three parts, philosophy, restatement of guilt, and final
restorative statement, intertwined. The philosophical statement often directly corresponded with the guilt. Hence, their personal philosophy appears to dictate the action or inaction for which they feel most discomfort. Furthermore, although the narratives sometimes appear to be ending on a negative note, with the restatement of guilt, participants often choose to end on a positive statement connoting that they are coping; they have been restored.

_Schematic Construct Six: Philosophy_

Dottie’s father battled cardiac problems for two years before suffering a fatal heart attack. During these two years, Dottie lived in another state as a live in nanny and saw her father infrequently. In the early parts of the interview, Dottie cried as she told me that she if only realized how ill her father was, she would have returned home sooner. Dottie now lives only a few blocks from her mother and siblings. Although she still desires living in other parts of the county, she has no plans of leaving the Athens area again. Towards the end of the interview, Dottie said that the most important thing in life is staying close to family [38]. Her personal philosophy reflected her guilty act of leaving home.

Erma, who moved back to Athens from Florida in an effort to care for her elderly parents, also ended with a philosophy that guided her earlier accounts. Erma narrated her reaction to her father’s death; she believed that most people would find her reaction quite strange:

[My parents are] with me all the time. I think, you know, I haven’t lost that fact.

When Daddy died, there was a great little nurse at the hospital. She was also very
spiritual. When they called me in, the nurse called for me to come in…I was standing there holding his wrists when he died and his pulse stopped. And I went out the door and I said to my mother he’s gone because she was on the other side of the door. And I went outside and this nurse was coming down the hall and I said, “Yes!” [emphasis added by speaker, arms raised in the air]. If someone else had seen me do that, they might have thought “how cruel.”… And with mother, I prayed to just take her, just take her out of her misery. And I thought I would feel guilty when she was gone, but I don’t. Because, I would go and talk to her, and I’d say “I’m just praying.” [Erma, 6]

At the end of the interview, Erma notes, “Some people think that I have a warped sense when it comes to death because I am very spiritual, but when you die, it’s nothing but an old pair of shoes so what’s the difference?”

Iris’ story of parental grief folds in episodes of grief throughout her lifetime. As discussed earlier in this chapter, she includes sadness resulting from her grandmother’s death; she also discusses her son’s incarceration in spite of a lifetime of her prison reform advocacy, and being left by her husband to raise their nine children. Iris’ narrative contains two philosophical passages, the first concludes the story of her son’s incarceration:

I remember when they executed him, I was six years old and I remember standing there crying about that. I just thought, “How can they do that?” You know? Maybe God has a right to take people’s lives, but we don’t. I’ve always thought that we can’t make things right, we can’t force people to be right. I mean, I’m
adamant about it. People have a right to have their problems. We have bi-polar in our family, we have dyslexia, you know? Niche says that we are—our sensitivity is in direct proportion to the amount that he uses the word “suffers.” I truly believe that. I had been reading Niche a lot, and I love philosophy. [Iris, 20]

Iris expressed guilt over her son’s incarceration, and the expressed this philosophy related to that guilt. When she narrates the anxiety over raising nine children on her own, she concludes with the following philosophy:

I have given everything—for years—I gave every ounce of everything that I had to my kids. They were terribly important, I mean, they were the most important thing in my life. I decided that if there is someone, and things are so complex, there has to be something, but I don’t know what it is—and I surely don’t believe the Bible—I think it’s a myth. I think like Niche says, “It’s mostly there to control the masses.” I feel that if there is something, that I’m a—I try my very best to be a good person. I do the best I can do. I’ve managed to raise nine kids, which most people would have to be crazy to even think about trying to raise them by themselves. I would still give them anything that I have. If there is a God up there—I’m a good person, not because it’s, it’s not that the key is to heaven, but because it’s the right thing to do. [Iris, 22]

Emily, whose story of holding her father’s hand as he died opened this chapter, spoke of regretting or questioning her inaction. Early in the interview, she explains:
I have trouble when people sort of take a long time to come to—I was going to say futz around, but that’s an indication of the value I assign to that—when people take a long time coming to decisions. I guess I believe…“Make a decision—any decision.” Then, [we] typically go back later and rationalize it anyway. But, move. Move, do something. [Emily, 3]

Near the end of the interview, she recounts those two themes. In the first excerpt, Emily again mentions the family conflict discussed earlier in her story. After her father died, she became separated from her father’s siblings. She questions what they were told regarding her decisions for his healthcare and funeral services:

My aunt died, and no one even told me. Which is why I don’t know what they were told. For sure. What people told them what I did. I don’t know what it is. I mean, I really don’t. I should find out, and I haven’t. I should find out before I regret that, because I try not to have too many of those regrets floating around. [Emily, 25]

The second passage related back to her decisions to wait until morning before taking her father to the emergency rooms, and letting him go after the paramedics were unable to bring him back to life. These are the decisions that she believes caused the family rift:

I certainly can’t change it, but I do believe that it was the right decision. There is a tendency to say, “What if?” “What if I had gotten him to the emergency room
earlier in the week.” I’m not a determinist, but I do believe that there are some things that happen in ways that we can’t explain. [Emily, 29]

Emily’s passage highlights the guilt-philosophy irony. She was proactive moving her father closer to family members and visiting frequently, but she questions her decisions regarding her father’s care and regrets letting family arguments linger after her father died. She said that her decisiveness and quick to respond approach were among her best qualities, yet her regrets stand in direct opposition of those qualities. Hence, once again, the narrator’s personal philosophy appears to be tied to the narrator’s guilt.

Some narrators expressed philosophical statements rooted in anger. Micah, who after his father’s sudden death from recently diagnosed cancer, surmises his philosophy with the following statement:

It doesn’t matter how well you live your life, or how great and grandiose the things that you will be, because in the end it’s just all going to be fuckin’ torn away from you anyway. So, that’s basically it. I mean, it was ridiculous. I mean, he had worked long and hard, and gotten to where he had wanted to be, and it doesn’t deserve to happen to anybody. [Micah 23]

Throughout the narrative, Micah directed anger towards God, his father’s co-workers at the hospital where is father practiced medicine, his siblings for “abandoning” him to take care of his mother, his mother for building a relationship with a man whom Micah found an ill-fitting replacement for his father, as well as the ill-fitting replacement. The above quotation demonstrates how Micah deduces his life experiences into a philosophy.
Schematic Construct Seven: Restorative Statement

The final part of the narrative’s conclusion is a restorative statement that ended the narratives on a positive note of coping. Even Micah, who as shown above shared an angry philosophy, ended his interview with the more optimistic interpretation:

I have a pretty good grasp on it now. I might be looking at things in the wrong way, but at the same time if anything it’s—we don’t have a lot of time, so we should try and enjoy what we have. [37]

Erma summarized her interview by saying, “I don’t know—to me, you don’t lose them—they just move on and you have to catch up… all and all, I think we are alright.” Katie ends her interview with the following statement:

Life is an uphill struggle, but it has moments where—it’s like a roller coaster, kind of. It’s uphill and it’s so easy, and other times it’s uphill again. Most of the time it’s uphill, it depends on what life gives you.

Some of the participants tied their concluding remarks to the experience of being interviewed. Marge, whose father attempted to molester her, shared these final thoughts:

I wanted to tell you that I am glad I got the opportunity to talk to you about this. If I have said anything to you today, anything at all worth while--that God is worthwhile and loved ones do exist, I don’t know where they are, in some spiritual world. And we have to somehow go along with their lives, and it’s not easy.
In the final passage, we can see that Samir’s conclusion ties the restatement of guilt into the restoration experienced during the interview. Early in the interview, Samir spoke of his sadness for missing his mother’s funeral and that there are no words to fully describe how he felt. Here, at the end of the interview, Samir recounts his grief, and explains that he feared the interview would cause his negative feelings to re-emerge.

It’s not about what I wanted to talk about and didn’t want to….Didn’t have a chance to. No. It’s about the fear that I had before I came to the interview. Uh—I was afraid to talk about the—you know—the experience. Losing my mom and talking about my mom. Because for you, it’s an interview. Because for you, it’s an interview and probably—probably, most likely, because of course, once again you lost your parents in the past, so you’re familiar with everything. For me, it’s like more descriptive. Then, I was afraid that at one point, certain images would come back. Let me tell you they were so hard, harder than you could think, than you could imagine. Like for instance, going back to Meknes once, right after my mom died during spring break, and my brother was in the car and I was driving, he turned to me and said to me to cry. I didn’t cry at all when I saw my brother. Just driving and saw people coming from all over the place and when he mentioned this guy coming overnight from Spain, driving all the way from Spain when he heard the news—I don’t know what happened, it was like—is that the guy coming from Spain driving all night long and has to go back to work the other day, and I didn’t show up? That was the saddest moment of my life. That was really tough. It was really tough. The description—the way my brother put it—he
said he was just like telling me, giving me information about what happened and describing shit, and it was like—that guy came all the way from Spain, from Madrid, driving and showed up in a thin, weird way, muddy, this and that. He had been driving non-stop, non-stop, non-stop. . .it was like if that guy could be there and I didn’t show up—I’m her son. She was my friend, and I was her friend and I didn’t show up. So, I think the other spot was like going into the house—going into the house, so I was really concerned about the interview before, because I was afraid that it wouldn’t feel the way I feel right now [laughing].[Samir, 32]

Samir continued to laugh and say that he felt better; he felt relieved. He said, “this has been a very good thing, a good experience to talk.”
Chapter Five: Discussion and Conclusion

Twenty people answered an announcement in the newspaper to tell their story of loss. Although the narrators represented a wide range of ages, time since loss, and parental deaths, remarkably, the stories shared the same schema. Whereas chapter four detailed the seven schematic constructs comprising the grief narratives of orphaned adults, this chapter aims to explain how the schema functions by weighing one’s guilt and innocence to bring the narrators through catharsis to restoration. The deliberation between guilt and innocence is witnessed and co-created by an audience member who aims to use the narratives to enact social change. This final chapter will synthesize the results of this study by discussing the narrative analysis and the function of the narrative, exploring the implications of the findings, outlining the limitations of the study, and suggesting future research.

Discussion of Narrative Analysis

The various stories of loss chronicled many similar events, but those events served different functions for different stories. Common events included the care giving for the dying parents, witnessing the death or hearing the news of the death, the funeral, inheritance disputes, care of the surviving parent, dreams or strange coincidences, and positive memories of a healthy parent. These events are not always recounted in their chronological sequence. Instead, they are arranged schematically in a three act grouping of guilt, innocence, and restoration comprising seven schematic constructs. The events serve as support for premises that build the narrator’s argument. Hence, the event of care giving, for example, supports an argument of guilt for one person and an argument of
sacrifice and innocence for another. The seven constructs form the following message; a message that brings the narrator to restoration.

*Premise One: “I made some mistakes…”*

The first act contains only one construct, guilt characterized by regret or discomfort, and is the most detailed account in the narrative. Here, the participants share decisions or lack of decisions that they deem as poor or inappropriate. Those experiencing anticipated losses often shared guilt, event regret, over care giving acts. Even with the best efforts, the act of care giving is an imperfect one eventually resulting in an unavoidable death. Not all caregivers relayed guilt in their care giving story. One participant, Erma, expressed only the innocent argument during the care giving episodes. The death of her parents appeared to be “good deaths.” Good deaths according to Neimeyer (2001) are deaths that are seen as transitions to another life. Erma’s story still contained guilt, her guilt rested in the disputes with siblings.

Younger participants who lost a parent suddenly via an accident or rapid illness often suffered from guilt resulting from the moments before death. In these cases, the adult children did not fully realize the extent of their parents’ injuries and therefore missed precious time with their parents. With one exception, a person whose guilt centered on the attention she received during this time, these narrators expressed regret, fully cognizant of their mistake.

Many men in this study expressed funeral guilt. This guilt is symbolized by acts of disrespect. Not attending the funeral, performing an ill-received eulogy, and providing satirical commentary during the funeral supported this particular premise of disrespect.
guilt. Although it might be a simple coincidence given the confines of an exploratory study, it is still noteworthy that men often and women rarely, fell into this category of guilt. One interpretation of this phenomenon is the clear story constructs associated with the funeral ritual. Funerals have a distinct time line, characters, and action to be described. When asked to “share a story of your loss” the funeral provides fertile grounds for story development versus describing one’s feelings (Moss, Rubinstein & Moss, 1997).

However, this interpretation would presume that guilt is expressed in the easiest told account. A second interpretation is associated with the clearly defined norms of funeral rituals. Moss, Rubinstein, and Moss found that when talking about parental bereavement, men often focus on specific actions. The acts of care giving by men and bereavement for all are less prescribed. The clearly identified societal violations during a funeral might produce guilt in men more often than in women.

Although I never asked about money or inheritance, most participants included at least a subplot of inheritance guilt. For some, these stories included the division of money or property among relatives. Some of those who provided primary care argued that they should be compensated through the division of the inheritance. Others felt the weight of being good shepherd of their deceased parents’ money. Some of the younger participants discussed using their money to live without a roommate or take an extra year to finish school, choices made possible by their inheritance. Shepherding the money wisely demonstrates respect.

The final guilt, parental guilt, is expressed by people who have discomfort with the deceased or surviving parent. This can be the most complex guilt because it severely
breaches the decree to honor one’s mother and father. In the cases of Grace and Katie, the blame for one parent’s death rests on the shoulders of the other parent. Each woman fully explain how their parents are culpable and illustrate their past and their siblings’ present negative feelings towards their parents, however they deny any current resentment of their own. For some participants parental guilt results because of their inability to emulate their parents by making choices that would please them. Micah’s, Katie’s, and Dottie’s fathers gave them specific directives before dying. Their challenges living up to those directives resulted in guilt and anger.

Premise Two “...but those mistakes weren’t really my fault.”

In this second premise, the narrators use the schematic constructs of justification and villain as support for their argument that there are reasons for the mistakes that were made. In this section the locus of control is external. They are not fully responsible for their actions or the results of their actions. Time and money are often the limited resources to blame for poor acts. Victoria and Pat did not have the time and money to visit their ailing parents frequently and Samir did not have the money to attend his mother’s funeral in Morocco.

Villains are used to show the barriers to good action and good outcome. Each story, like every good story, contained at least one villain. Grace’s father refused to let Grace release her young mother form a nursing home, Emily’s uncle did not alert her regarding her father’s declining health until it was too late, and Lilly’s family did not want her help in the care taking of her father.

Premise Three: “I did a lot right along the way, and for this, I suffered.”
The justification served as a transition away from guilt towards restoration. The innocent argument is introduced through the good deeds construct of the schema. The same stories that served as support for guilt can serve as support for noble acts of sacrifice and good deed. One participant might reveal guilt for being absent during care giving whereas another participant chronicles the sacrifices during care giving. Good deeds encompass not only care giving sacrifices, but also relationship maintenance and mournful grieving. The participants told of being good children during their parents’ lives and their sadness at the loss of their parents. Hence, in spite of their guilty actions, they found narrated evidence to prove that they have suffered. Narrators are also making current contributions to redeem their wrongs. They are hospice volunteers, preparing to lobby for post-partum, and aiming to cure cancer as laboratory scientists.

The narrators built arguments by comparison to show how greatness of their sacrifice and the depth of their sorry and explained how their siblings’ contributions and good deeds somewhat paled in comparison to their own. Emerging as the heroes of their epics, they spent more time, money, and tears than other family members. In stories where a lack of sorrow constituted the guilt, the narrators shared other stories of grief to illustrate that they are capable of, and have experience, great sadness, but that sadness resulted from another life loss. For example, Marge justified her low grief reaction to her father’s death by explaining that father tried to molest her as a child. She went on to argue that was his actions, not emotional shallowness that led to her reaction. She proved her emotional threshold by detailing the immense grief resulting from her husband’s death. Narrators utilized argument by comparison to plead their cases of innocence.
Premise Four: “In spite of the mistakes, I am more innocent than guilty.”

The fourth premise includes the schematic constructs of the good memory and the message from the deceased. In this phase of the narrative, we briefly depart from talk of dying, death, and grief to take a respite in a positive memory of the parent while living. For many, this memory takes the audience back to the childhood of the narrator, when times where more simple and the parent had decisive control. This passage emphasizes the strength of the relationship before any mistakes were made.

We then fast forward past dying and death to a story where the parent is in a final resting place but still continuing the bond of the relationship. The dreams, flickering lights, and appearance of a parent’s favorite animal or song are interpreted as a new stage; a stage passed death and dying. This passage, like the fond memory, brings narrator and audience away from the disorder of death and dying into a phase that resembles the relationship before death.

These two episodes are crucial in the determination of innocence. Regardless of all my misdoings, my parent is looking over me again, like in childhood; therefore, my mistakes must not have harmed my parent. The consequences of guilty actions, hurting the parent, are nullified. The verdict for the most heinous offense, hurting the deceased parent, is innocent.
Conclusion: “These were/are tough times, but I feel better now”

The narrative’s function becomes clear during the conclusion containing a statement of personal philosophy that guides their lives, a restatement of guilt that sometimes conflicts with that philosophy, and a statement of restoration. Like a television judge, they took those few moments to become philosophical as they review the case before them. The narrative served to help the storytellers organized their negative feelings about what occurred during the dying, death, and bereavement. It provided an opportunity to justify and explain the reasons for those poor actions and recall all of the good choices and sacrifices made during the process. Furthermore, it enabled them to conclude that, since their deceased parents still communicated with them, the parents were unharmed; the verdict, innocent.

Implications

Narrative versus Experience

The parental grief narrative and the parental grief experience are two different entities. Guilt has been associated with bereavement since the work of Freud and continues today, most notable, through psychometric measures. The Grief Experience Inventory (Sander, Mauger, & Strong, 1979), an index used to describe, classify, and predict the multidimensionality of grief, includes guilt within its subscales. However, other GEI identified reactions to grief, such as anxiety and depression are absent from the stories.

Fisher (1987) wrote, “Good reason are the stuff of stories, the means by which humans realize their nature as reasoning-valuing animals” (p.65). Accounts of guilt and
innocence, unlike those of depression and anxiety, help the narrator construct and reveal to the audience his or her reasoning-valuing choices. It is through those storied choices that we understand the narrator’s goals and values (Turner, 1980). Furthermore, MacIntyre (1984) explained that our stories arise from moral code. The philosophical statement might serve as the moral code by which we have an infraction, causing guilt, arising in story. The second phase of the narrative, the innocent, argues that they lived by the code, relieving guilt, and again giving rise to story.

These narratives also differ from experience because narratives are collective undertakings co-told and designed with the audience’s input. As audience I co-constructed these narratives in two significant ways. First, throughout the interviews, I absolved the narrators of their guilt. In my efforts to do no harm, I conveyed support throughout their tearful confessions of guilt. Without realizing how I might influence their stories, I uttered phrases during guilt such as, “Oh, that must have been rough,” “You didn’t know any better,” and “you tried your best.” One participant expressed guilt for using his inheritance on tuition, and I responded by saying, “Wouldn’t your father want you to spend money on school?” He responded, “Yeah, I guess you’re right, he probably would.” During the justification, I made comments such as, “That must have been frustrating,” and “well, what could you do? It sounds like you had no choice.” I also lauded the participants for their good deeds and sacrifices, and was empathetic during their tales of deepest sorrow. I will never know if I had the authority to absolve them of their guilt and I will never know if their personal verdicts would have been the same had I not been so supportive.
Second, I served as a social change agent for the narrators. Much rhetorical study focuses on argument for the function of social change. At first look, these narratives appear to fall outside this purview of such research. However, given some participants’ goals to improve status quo for the dying and the bereaved, their story in this interview might function as a means to further this goal. The consent form reads (Appendix H):

Benefits:

Your participation in this project will help scholars, counselors, and support services further understand how we grieve to best help those in grief. Also, this project intends to provide insight to those who either have or will experience the death of a parent.

The consent verifies that the interview might cause social change. Hence, the narrative differs from experience due to audience in put on at least two levels. I play a role of contributor rather than scientist. The narratives follow a Quintillion form, not to instruct me, but to persuade me.

*Poetic Form versus Rhetorical Form*

Fisher’s (1984, 1985) articulation of narrative paradigm synthesizes the two traditional strands of narrative inquiry, poetic form and rhetorical function. When viewing these strands in more discrete categories, such as those put forth in the works of Lucaites and Condit’s (1985) and McGee and Nelson (1985), we can further our understanding of the narratives and audience’s role. Nineteen of the twenty storytellers provided narratives sharing the same schema convincing the audience of their virtue, and possibly, the need for social change.
One storyteller, Jack, provided a different narrative. Jack included the good deed section shared by others, but few other narrative similarities emerged. Initially, I surmised that this narrative differed due to the probability of drug induction. Although this is a possibility, we should also note the considerable similarities between Jack’s narrative and what Author Frank (1995) called a chaos narrative. The chaos narrative is a non-plot story difficult to hear because it lacks any coherent sequence, and signifies that the storyteller imagines life never getting better. I put forth an additional interpretation; Jack’s narrative is a poetic narrative. This narrative, told by Jack, lacked the same rhetorical argument and verisimilitude found in others. Jack said that he was using this interview as a means to brainstorm for his upcoming memoir on parental loss; Jack appeared to function more as poet than as rhetor.

Lucaites and Condit (1985) explained that the form and function of poetry is to advocate self and beauty rather than truth. Jack’s narrative contained more song lyrics and poetic parallel phrasing than the intrinsic reason necessary for rhetorical function (McGee & Nelson, 1985). Furthermore, the use of flattery during the interview is a method commonly used by poets when unsure of the audience’s stance toward the poet or her poetry (Lanser, 1981). Jack’s compliments, poetic phrasing, lack of fidelity help explain why he did not develop the same schema; he acted as poet, the others as rhetors.

Theoretical Ties

The findings of this study can be viewed, at least in part, through three additional theoretical lenses, Kenneth Burke’s dramatistic process, Victor Turner’s social drama, and Baxter and Montgomery’s dialectical perspectives. First, Kenneth Burke’s
dramatistic process, first presented in *A Grammar of Motives* (1969b) then more fully articulated in *Permanence and Change* (1984), is the acceptance or rejection of a hierarchy through guilt, purification, and redemption. Dramatic action insures when a person rejects the traditional hierarch, or social order, and feels guilt, the discomfort associated with the myth of perfection. The social actor then seeks to purge the guilt; Burke suggests we use two forms of purification, mortification and/or victimage. Mortification requires the social actor to make a symbolic offering, or sacrifice to appease society and restore social order. The guilt can also be purged through the use of a scapegoat that symbolized the guilt and explains or justifies the misdoing. After the purification, the social actor is redeemed and accepted back in the social order until the guilt builds to the point of once again needing purification.

In some respects, these narratives share similarities with Burke’s dramatistic process, on other levels, they diverge. The narratives start with a Burkean concept of guilt insofar as it is the discomfort associated with the myth of perfection. The participants also appear to be purging their guilt through of mortification, such as retelling the misinterpreted eulogy and rewriting the moments before death story for the creative writing course, as well as volunteering at hospice and offer advice to friends in caregiving roles. The participants also employ the use of scapegoats via the justification for misdoings through limited resources and the villains’ interference.

The narratives diverge from the dramatist process in fundamental ways. First, although these narrators express guilt, I am skeptical that the guilt emerges from a rejection of social hierarchy. Rather, as the statements of personal philosophy support,
these guilts are formulated, at least in part, by the narrators’ own moral code. Fisher (1984, 1985) supports this difference when he claimed that Burke’s dramatism differs from narrative because dramatism implies prescribed roles, and storytelling is the creating, recreating and reinterpreting scripts. Furthermore, the dramatistic process does not fully account for the final part of the narratives. These narrators conclude their innocence when they offer stories symbolizing the continuing bonds of unharmed parents.

These narratives also share similarities to anthropologist Victor Turner’s (1981) writings on social dramas. Turner references Burke’s concept of “dramas of living,” then expands and modifies it so it applies to those living in a group. Turner sees social dramas having four phases, breach, crisis, redress, and either reintegration or recognition of schism. In the first phase of the drama, the social actor breaches a group norm, value, or law. Next, a turning point, the crisis mounts and group members take sides. The social actor tries to limit the spread of the crisis by redressing, which often includes sacrifice. Finally, he or she can either reintegrate with the group or live with the schism that now resides.

This framework of a social drama might indeed exist in the experience of a family loss but not necessarily in the story of parental bereavement. Choices are made, like the funeral arrangements made by Emily, which can cause a family rift. In Emily’s case, this rift, or schism, is one which she recognizes but does not try to remedy. For Emily, this caused grief and she narrated that grief. However, just because this social drama might occur, it does not mean it will be storied. An orphaned adult might not feel guilt resulting from the social drams; or, they might have other offenses or guilts they seek to negotiate.
through story; therefore, the social drama might exist in experience, but not inevitably in narrative.

Finally, although the dialectical analysis did not yield new understandings of relational dialectics or bereavement, some results of this project could be viewed through a dialectical lens. Baxter and Montgomery’s (1996, 1998) work on relational dialectics led me to believe the experience of bereavement is dialectic, and therefore prompted me to search for such contradictions. Although the contradictions might exist, this project did not yield enough support for the existence of relational dialectics in the orphaned adult bereavement narrative. In particular, the interview questions searching for the supra dialectics of autonomy-connection, open-privacy, and novelty-predictability yielded a limited response.

This dialectical inquiry could not conclude the narrated existence of relational dialectical contradictions for two essential reasons. First, although the narrators sometimes said they experienced the dialectical tensions, autonomy-connection more so than open-privacy, open-privacy more so than novelty-predictability, they offered few examples to support this existence; those who did offer examples sometimes offered stories that signified a misunderstanding of the dialectical tension. The stories provided some embedded examples of relational dialectics; however, they were not the essence of the story. Second, the stories did not function to reconcile the relational dialectics. One of the assumptions of the dialectical perspective is that we use communication to negotiate the tugs and pulls. The communicated negotiation of the supra dialectics is not observable here.
We can, however, view the overarching guilt versus innocence theme as dialectical. Consistent with the assumptions of the relational dialectic perspective, guilt and innocence are on opposite ends of the continuum, they are interdependent, and they are negotiated through communication, in this case, storytelling. The narrators start with guilt and move toward an innocent verdict. The relationship to other dialectical pulls, the final assumption, is unknown, for the stories do not support other tensions. If not completely fitting with the term dialectical, these stories can at least be described as paradoxical or ironic.

**Limitations**

This project employs a grounded narrative analysis and is both bound and freed by its methodological principles. As such, the findings are not generalizable and not are submitted as truth, rather a possibility of truth for these participants. Given this grounded method edict, the study is limited in two ways, the participant recruitment, and the interview questions.

These stories are not told in a natural setting; these storytellers perused a venue to tell their stories. The other two other recruitment methods, bereavement counselors and grief support web sites, did not yield any participants. One interpretation of this phenomenon is that people already engaging in talk about the experience were not compelled participate in this study. Those who did participate had a story to tell, a trial, and responding to an announcement in the paper provided an audience. A second interpretation is that these participants wanted to enact social change; hence, they participated in the study to help improve the understanding of grief. These narratives
functioned in a particular way for this group, but we do not know if they would function in the same way for people who did not respond to a voluntary call for stories. If I performed an ethnographic account of stories told in a support group setting, I might have found a different story both in form and function.

Interview questions regarding dialectics might have influenced the story creations. I began the interviews with the open-ended solicitation for narrative; and throughout the interview, I asked probing questions to elicit further story development. When the story appeared complete, I turned to the insider-identified questions of dialectics. After these questions, the narrators usually returned to their story. I am left to wonder if those dialectical questions influenced the remainder of the story by taking some narrators’ thoughts in a different direction. It is possible that the ill-fitting anecdotes provided during this question and answer session included episodes that the narrator wanted to include in the story regardless of the question at hand. As Marge said to me after the description of the first tension, “I don’t know about all that. I had a story to tell and that’s what I told.”

Suggestions for Future Research

The orphaned adults in study created narratives that fell into a narrative schema of guilt, innocence, and restoration; the most critical future research projects involve applying this schema to other stories of loss. First, we should determine if orphaned adulthood is indeed central to these stories. Care giving and inheritance are family responsibilities, but not only children’s responsibilities. In addition, the guilt did not only emerge in care giving and inheritance episodes. Jordan and Ware (1997) found that adult
children felt guilt during bereavement when they took on the parental role of caregiver. Angle (1987), a Rabbi with thirty years of bereavement counseling, asserts that many orphaned adults have come to him with one of two guilt forms. First, the adult orphan might not have made the right choices during the dying phase of the parent’s life. Perhaps they did not seek the right medical attention or did not visit the parent frequently. Second, the adult child might have had a poor relationship with the parent and now regrets not mending the ties before death. This study asserts that the guilt will emerge somewhere in the narrative even if not in health care or relationship. In an auto ethnographic account of his grandmother’s death Nick Trujillo (1998) wrote in the first paragraph, “To this day, I wish my dad had called me earlier so that I could have traveled to Los Angeles to see Nauny one last time: instead, I went there to attend her funeral and deliver her eulogy” (p.344). Given the research findings, we must ask if other family bereavement narratives will share similarities with non-familiar bereavement stories. Answering this question will bring us closer to a model of bereavement narratives across a wide-range of populations.

Second, we must investigate if this loss narrative schema is specifically tied to bereavement. Throughout the interviews, participants created minor plot lines of loss, sometimes somewhat divergent from their bereavement narrative. One person provided lengthy discussions of her guilt resulting from her son’s incarceration, another person emphasized the loss of her husband, two more participants discussed a loss childhood through poor child rearing, and yet another participant developed a plot line regarding her rape. These participants had losses they needed to discuss, and this was their venue. It is
plausible, that the schema not only describes the bereavement narrative, it might also describe a wide-range of losses.

Finally, the findings of this study call for considerable applied research. With the exception of clinical and religious settings, where there are trained practitioners, there are limited venues for the discussion of death, dying, bereavement, and loss. Over and over, participants told me that they never got a chance to tell their story of loss, no one had ever asked. In the case of parental bereavement, family discussion might be restricted by components such as the villain and the consequences of admitting guilt. Victor Turners (1981) work teaches us that the breach, in this case guilt, can cause a crisis in the group leading to a schism. Furthermore, in family death grievers are relying on other grievers for support. As one of the Dottie said, “yea, I worry about my step-mom, and she worries about me. We mostly only talk about the happy times with dad, because we don’t want to upset each other.” Researchers agree that a naturally occurring social support system is critical for successful coping (Cluck & Cline, 1986). Ironically, those who are in position to best aid the bereaved sometimes isolate or avoid the bereaved. Cluck and Cline explain that, although family and friends may perceive the nature of grief as a sympathetic event, they are often unable to confront their own feelings about death. As a result, they are unable to provide long-term support to the bereaved. “The goal for family and friends, then, often becomes avoiding communication with the grieving persons until he/she is ‘back to normal.’ Consequently, the helping relationship frequently ceases to exist” (p.311). Given these significant restraints, further research should be directed towards
support groups, on-line and face-to-face, as well friendship as a means to share the loss narrative.

A further investigation of the competing roles and responsibilities is also warranted. Participants narrate limited decisive control because they must balance the responsibilities of work and family under the constraints of time and money. Time, and money, as well as work and family, are used to justify poor actions. For example, Samir could not return home for his mother’s funeral because he had limited finances and would have difficulty getting a long leave from work. Likewise, Grace could not care for her mother at home because Grace recently began a new career and she had a young son at home who needed her care. The constraints and competing responsibilities should be analyzed in a micro level to increase our understanding of mourner’s and caregiver’s stress in the work and family context.

Unlike the narrators in this study, David Eggers does not end his memoir with a restorative statement. Instead, he returns to the scene of his mother’s funeral then breaks away plot and fills the final pages with a direct, angry message to his readers:

Don’t you know that I am connected to you? Don’t you know that I’m trying to pump blood to you, that this is for you, that I hate you people, so many of you mother-fuckers—When you sleep I want you never to wake up, so many of you I want you to just fucking sleep it away…What the fuck does it take to show you mother-fuckers, what does it fucking take what do you want…how much do you want because I am willing and I’ll stand before you and I’ll raise my arms and give you my chest and throat… (p.437)
Perhaps Eggers written narrative of adult orphanhood cannot share the same function as the oral narratives described in this study. I served as a judge for the participants, guiding their way to restoration with nods, sympathetic facial expressions, and verbal forgiveness. It is possible that without the affirmative interplay between interviewer and interviewee, the narrator who declares himself guilty is destined resent the witness to the confession. Hence, the narrative alone might not serve a positive function the narrator, but the narrative told to a supportive other might serve to transport one to restoration.

MacIntyre (1981) taught us that we understand narratives because “we all live out narratives in our lives and because we understand own lives in terms of narratives” (p. 197). This project introduced me to twenty people who shared with me some of the most intimate moments of their life stories. For these twenty people, the interview provided a time to sit down and weave a narrative exploring their sadness and their pride. They did what they could, they tried, and they believe they either have or soon will make it through the more difficult times to the happier ones. With them, my own story has been understood, recreated, and retold.
References


(Final work published 1917)


Bereavement Research: Consequences, Coping, and Care (pp.301-328).


Appendixes

Appendix A

Newspaper Announcement for The Athens News and The Athens Messenger:

Research Participants Needed
Have you suffered the loss of a parent while you were in adulthood? An Ohio University researcher is interviewing adults who have lost one or both of their parents. I am interested in exploring your personal story of parental loss. Your participation will be kept confidential. For further details, please contact Dawn Carusi at 753-4483 or by email at DCarusi@hotmail.com.

Announcement for research on Griefnet.org:

(link)
Research on Adult Loss of a Parent:

(Information)
I am an Ohio University researcher conducting interviews on the adult loss of a parent. The study is to explore personal stories of parental loss and the impact it has on the survivor’s lives. The aim of this research is further our understanding of how we communicate during and about loss. Long distance interviews, lasting approximately one hour will take place over the phone at the interviewer’s expense, or via email. For more information, please contact me at DCarusi@yahoo.com.
Dear Counselor,

I located your name through Athens Neighbors Helping Neighbors network. From the description on the Neighbors Helping Neighbors website, I understand that you provide grief and bereavement counseling. I am writing you to request your help in a research project I am conducting for my dissertation in Interpersonal Communication at Ohio University.

The study aims to investigate adult’s experience of loosing one or both parents. Since I am looking at the experience through a communication perspective, I am exploring the stories survivors tell about the loss of their parent(s). To gather these stories, I plan to interview volunteers for approximately one hour, at a time and place of their choosing. Little social scientific research has been conducted on the loss of parent’s while in adulthood, and I hope my findings will further our understanding of how individuals view and explain the impact of this unique loss.

Instead of identifying grieverers through public records to solicit participation in this study, I have decided to discuss potential participants with grief counselors. I would greatly appreciate the opportunity to meet with you and further discuss my research and the steps I am taking to minimize risks to survivors who volunteer to be interviewed. I hope that after reviewing my plan for study you would consider forwarding my contact information to any of your clients or parishioners who might be interested in volunteering.

I can be reached at 753-4483, or at DCarusi@yahoo.com.

Thank You,

Dawn L. Carusi
PhD Candidate
Ohio University
School of Interpersonal Communication
Appendix B

FLYER FOR DISTRIBUTION

STORIES OF PARENTAL Bereavement

I am an Ohio University researcher embarking on a study of parental loss. We often tell stories about significant moments in our lives. This study centers on the personal stories we tell about losing one or both of our parents. I am searching for individuals who are willing to be interviewed about their parental bereavement experience. If you lost a parent when you were 18 or older, but no sooner than 10 months ago, I would like to tell you more about this study.

Interviews will last approximately 1-2 hours and begin early winter quarter. You can contact me anytime to find out more information. I can be reached at Dcarusi@hotmail.com or you can call me at 753-4483.
Appendix C

Interview Topics and Questions

1. Tell me the story of your loss.
   a. Prompt if needed: Begin with when your first learned of the death.
   b. Probe: What did you do in the days, weeks, and months after the death to deal with your grief?

After the narrative, the following questions will be used to gain more detail.

2. Who stands out as an important person during your grieving process?
   a. Probe: What role did they play?
   b. Why was that person important?
   c. When was that person most important? Are they still important today?

3. When you think about your whole experience of grieving your mom/dad, from the when he/she first died until today, what events stand out?
   a. Prompt if needed: You mentioned in the story the (funeral, going back to work, etc), tell me more about that.
   b. Probe: Did anything unexpected happen?
   c. Probe: Did you anticipate something happening that did not?
   d. Probe: Why do you think you expected____________.

4. What were some of the memorable things that people have said to you during your bereavement?
   a. Probe: What did you think of that? (Anger, surprise, funny?)
   b. Probe: Are there things that you remember saying to others?
   c. Probe: Are there things you expected to hear, but did not hear?

5. Do you still have some sort of a relationship with your mom/dad?

6. Many people at some point or other in their relationship experience certain ‘pulls’ or ‘tugs’ within themselves in different directions. The first of these ‘pulls’ is will label the ME-WE Pull. On the one hand, a person is attracted to the relationship with the other person and wants to be with that person, yet he or she also wants autonomy, separation or independence to be their own person and do their own thing. The second ‘pull’ I will label the To Talk or Not to Talk Pull. On the one hand, a person wants to tell it all and disclose in a totally open manner to their partner about everything, but they also feel a ‘tug’ toward discretion and not talking about everything. The last ‘pull’ I will label the Novelty-Predictability pull. On the one hand, a person wants a little
mystery, spontaneity, surprise or uncertainty in their relationship. On the other hand, a person wants to know what is coming off in the relationship with some degree of predictability. Are these three ‘pulls’ clear? What is really important to understand is that people may experience these sorts of things in relationship where they are both satisfied or dissatisfied—these ‘pull’ do not say anything about how well or poorly the relationship is doing. You may or may not have experienced any of theses ‘pulls’—that is what we are interested in discussing. (Baxter, 1999 p.75).

Can you identify times that you felt these ‘pulls’?

7. Has this experience changed your life?
   a. Probe: If so, how?
      a. Probe: Has it changed who you are?

8. During our talk today, or during any time that you’ve discussed this experience with a friend or family member, were there any details that you debated talking about?

9. How are you doing now?
Appendix D

Sample Narrative Element Notes

Emily

1- Setting

- Home at her father’s house
- Making arrangements for her father from her home
- At the cemetery looking for her grandfather’s grave

2- Characters

- Her father
- Brother: takes back seat as she handles most of the arrangements
- Uncle Rob: Rob is somewhat of a bad guy. He isn’t helpful and sometimes hinders in the healthcare process. He appears to be fuel an after death family turn against Emily.
- Mother, and her death are not really discussed.

3- Narrator:

- Tried very hard to take good care of her father/made a lot of sacrifices, but has regrets and questions some actions.

4- Events:

Major Events

Taking care of her father—moving him to live closer to Uncle Rob
Father dying (told in a lot of detail)…had to choose to let the EMAs let him go (called brother on the phone to confirm decision)
Had to sell the house, lost a lot of money on the house.
Family and she not talking—she doesn’t know what they were told about the memorial service…but thinks they are angry about decisions she made (her brother is fine with the rest of the family)

Minor Events

Finding grave
A good memory about her father
Mom’s death

5-Temporal Relations:

For the most part, the story encompasses about seven years from Dad moving to
Uncle Rob’s to now—not really talking with side of the family. Most of it is less
than 1 year—death & looking for plot

6-Causal Relations:

Uncle Rob caused family rift
Uncle Rob might have caused death (poor care of father)
Not understanding how sick dad was caused death (caused not putting him in
nursing home care)
Caring for dad caused financial problems

7-Audience:

Says that she would not share these details (especially moments of death) with
people “not socially polite” but it is okay for this project

8-Theme:

She tried all she could, but it still turned out messy.
Appendix E

Sample Plot Notes

Emily

This is a caregiver’s story. After the loss of her mother, dad’s health began to slowly deteriorate. She and her brother bought dad a house in California for dad, but then when Dad wanted to move to New Mexico, next to Uncle Ron, brother pulled out. She and her husband bought the house alone. She tries to put it delicately, but Uncle Ron was not helpful. She tells a story of going to New Mexico because Uncle Ron tells her that dad isn’t doing well. She goes; he is almost dead (in chair for days). He insists that they wait until morning to go to the emergency room. In the morning, she tries to get him together (for dignity), as she goes to help him put slippers on, he leans over (she thinks to whisper)-but he is essentially gone at that point. She performs CPR, then stops to hold his hand and talk to him. EMS asks if she wants “extraordinary methods”—she calls brother & decides ‘No.” Later she tell about finding her grandfather’s grave when an armadillo comes by.

There is a rift in the family—between brothers—she thinks it has something to do with the decision regarding memorial services, but she isn’t sure, she doesn’t know what they think and she wants desperately to live a life w/o regrets, but this is a regret. It will take a great deal of emotional energy to mend the rift but she feels it is something she has to do.

She takes care of all things—the care giving, financial (most of it), the house, etc. with little help from others. A sympathetic story of work.
Appendix F

Sample Dialectical Code Notes

Emily

Autonomy-Connection: Said she experienced it—couldn’t really develop support. She said that she wished he was still here.

Novelty-Predictability: No doesn’t think she’s experienced this.

Talk-Not to Talk: Doesn’t give the details that she gave me; not “sociality polite”

She didn’t really elaborate on the tensions, instead pulled back to concern over family rift.
Appendix G

Sample Schema Code Notes

Emily

Confession
Health declined more...realized [5,11,14,16]/Should have nursing home [15-17]
  *Brother wasn’t much help [5]*
  *Uncle didn’t help at all—villain [10]*
  *Dad didn’t take care of self [11, 12, 20]*
Showed too late to death scene to really help/waited for next morning [16]*
  *Difficult to get to small town [11]*
  *Tried CPR [13]*
  *Dad wanted to die at home [17]*
No extraordinary measures [14] (right decision)
 Poor funeral arrangements, family rift [10, 23, 24]*/Villain died b-4 repair [11]*
  *Miscommunication*
  *Was doing it solo*
  *Best she could do*

Philosophy
Better with a plan [2]
Move—do something [2]
No regrets [11]
Some things can’t explain [27]

Contribution
  Took care of dad, financially, medically, etc. [6, 6, 8, 8]
  Did all post-death work solo [19]

Message from beyond
  Armadillo [21]
Restate guilt [21, 26-27, 31]
Fond Dad memory [32]

Audience—usually doesn’t talk about this, not socially polite [29]

Mom died too, suddenly of heart attack…didn’t talk about it
Appendix H
Ohio University Consent Form

Title of Research: Communication Investigation of Adult Children’s Parental Bereavement

Principal Investigator: Dawn L. Carusi

Co-Investigator: N/A

Department: School of Interpersonal Communication

Federal and university regulations require signed consent for participation in research involving human subjects. After reading the statements below, please indicate your consent by signing this form.

Explanation of Study
Purpose of the research:

The purpose of this research is to investigate the experience of losing one’s parent, or parents, during adulthood. I am specifically interested in how you view the experience and how the loss has impacted you.

Procedures to be followed:

This interview session will be audio taped. I will first ask you to tell the story of your loss. Then, I will ask questions regarding your experience. At any time, we can stop the interview for a break, we can postpone the interview for another time, or we can simply end the interview. There will be no penalty for ending the interview. I will provide contact information of grief counselors if you wish to speak to someone about stress resulting from this interview.

Duration of subject's participation:

The interview will last approximately one hour. Similar interviews have lasted between 45 minutes and one and a half hours.

Risks and Discomforts

It can often be difficult or painful to discuss traumatic events like bereavement. Please remember we can take a break or completely stop this interview at any time.

Benefits
Your participation in this project will help scholars, counselors, and support services further understand how we grieve to best help those in grief. Also, this project intends to provide insight to those who either have or will experience the death of a parent. On a personal level, sometimes discussing traumatic events provides an emotional relief.

Confidentiality and Records
As the only researcher on this study, only my advisory committee and I (consisting of four Ohio University Professors) will have access to these interview data. However, your name will not be attached to your interview transcript. You will be given a pseudonym (a fake name) to be used in the reporting of these findings. Only I will know of your participation in this study. The audiotapes of the interviews will be kept in a secure location. Only I will have access to the audiotapes.

Compensation
No compensation will be provided.

Contact Information
If you have any questions regarding this study, please contact Dawn L. Carusi, at 753-4483 or dcarusi@yahoo.com or you may contact Dr. Jerry Miller, Dissertation Advisor at 593-4831 or Jerry.Miller.1@ohio.edu.

If you have any questions regarding your rights as a research participant, please contact Jo Ellen Sherow, Director of Research Compliance, Ohio University, (740)593-0664.

I certify that I have read and understand this consent form and agree to participate as a subject in the research described. I agree that known risks to me have been explained to my satisfaction and I understand that no compensation is available from Ohio University and its employees for any injury resulting from my participation in this research. I certify that I am 18 years of age or older. My participation in this research is given voluntarily. I understand that I may discontinue participation at any time without penalty or loss of any benefits to which I may otherwise be entitled. I certify that I have been given a copy of this consent form to take with me.

Signature____________________________________________________ Date_____

Printed Name__________________________________________________
Endnotes

1 The quoted titles, such as “Narrative Themes” are those used by Eggers in his book.

2 For a comprehensive review of gender and communication literature see Julia T. Wood’s (2001) *Gendered Lives: Communication, Gender, and Culture*.

3 Much of the organizational structure used to explain the methods in this chapter is based on Anthony Radich’s (1986) unpublished dissertation. Radich’s grounded methodology chapter was provided to me as an exemplar for organizing a grounded narrative methodology such as the one used in this study.

4 The coding of data employs the narrative analysis as described by Foss (1996).

5 All of the interviewees are provided pseudonyms for confidentiality.