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Support after Loss: Straight Talk from Young Widowed Parents

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SUPPORT AFTER LOSS

Support After Loss: Straight Talk From Young Widowed Parents

Submitted by: Korie A. DeBruin
May 2012

MSW Clinical Research Paper

The Clinical Research Project is a graduation requirement for MSW students at St. Catherine University/University of St. Thomas School of Social Work in St. Paul, Minnesota and is conducted within a nine-month time frame to demonstrate facility with basic social research methods. Students must independently conceptualize a research problem, formulate a research design that is approved by a research committee and the university Institutional Review Board, implement the project, and publicly present their findings. This project is neither a Master's thesis nor a dissertation.

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Abstract

Young widowed parents frequently report challenges with their social environment after the deaths of their partners. The purpose of this study was to have young widowed parents identify helpful ways they have been supported since the deaths of their partners. A total of 42 young widowed parents (6 male, 36 female) participated in this study. A mixed method approach was used to answer the following research question: What are helpful ways that people have supported you since the death of your partner? In order to gain this information, participants were asked to complete an online survey that contained both qualitative and quantitative questions. Young widowed parents were recruited from the following sources: 1. An online support group for young widows and widowers, 2. A loss of spouse support group, 3. Young Widowed Support Group on meetup.com, a local informal support group for young widows and widowers in the Minneapolis/St. Paul area, 4. Acquaintances of the researcher and 5. Snowball sampling. A grounded theory approach was used to analyze the qualitative data from the survey. The main findings that emerged from this study include: 1. Seven types of support seen as helpful, 2. Identification of four main community groups that have provided the most helpful support to young widowed parents since the deaths of their partners, 3. Identification of professional services that have been helpful to young widowed parents, 4. Suggestions for professionals who work with young widowed parents, 5. Things that young widowed parents know now that they wish they had known at the time of their partners' deaths, and 6. Appropriate things to say to young widowed parents after the deaths of their partners. Findings are directly applied to the social challenges that are commonly reported by this population and suggestions to improve services are given.

Keywords: young widowed parent, parentally bereaved children, social support, resilience, protective factors, services, support group, grief, challenges, widow, widower, young, spousal loss, partner loss

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Introduction

Resilience research has identified a variety of protective factors that when present promote health and well-being in people who face adversity (Bonanno et al., 2004; Greef & Fillis, 2009; Haggerty et al., 1994; Hetherington & Blechman, 1996; Power, 2004; Sandler, 2001; Sandler et al., 2003; Stroebe et al., 2006; Stroebe et al., 2005). One identified protective factor for those who face adversity is having caring and supportive relationships with others (APA, 2011; Greef & Human, 2004; Haggerty et al., 1994; Hetherington & Blechman, 1996; Knight, 2007; Newman, 2005; Power, 2004; Sandler, 2001; Sandler et al., 2003; Smith & Carlson, 1997). Some research shows that protective factors are more important than risk factors in determining negative outcomes of adversity (Knight, 2007; Marten, 2001).

Understanding that social support is a protective factor is valuable information because young widowed parents commonly report that they receive inadequate support from their family and friends after the death of their partner (Clinton, 2008; Hooyman & Kramer, 2006; Worden, 2006). As a matter of fact, many of the challenges that young widowed parents report after the death of their partner have to do with their social environment. These challenges include but are not limited to the following: 1. having inadequate access to other young widows and widowers to serve as role models, 2. parenting alone, 3. changed relationships with family and friends, 4. lack of services, 5. support that does not last long enough, and 6. people in society have higher expectations of them because they are young (Barr, 1997; Bradley, 2007; Feinberg, 2009; Ginsburg, 1997; Hayne et al., 2006; Holman & Kramer, 2006; Kwok et al., 2005; Lin et al., 2004; Lopata, 1996; Lowe & Clement,

2010-2011; Lutzke et al., 1997; McGoldrick & Walsh, 2004; Rodgers, et al., 2006-7; Rolls & Payne, 2007; Salinger et al., 2004; Sandler et al, 2003; Shaffer, 1993; Silverman & Worden, 1993; Stokes, Pennington, Monroe, Papadatou & Reif, 1999; Walter, 2006; Worden, 2009). Knowing that young widowed parents report challenges with their social support is important because social support is a known protective factor that helps boost resilience in people who face adversity (APA, 2011; Greef & Human, 2004; Haggerty et al., 1994; Hetherington & Blackman, 1996; Knight, 2007; Newman, 2005; Power, 2004; Sandler, 2001; Sandler et al., 2003; Smith & Carlson, 1997). The adversity that this population faces is significant given that death of a partner is rated as the most stressful adult life event (Dise-Lewis, 1998; Holmes & Rahe, 1967).

The purpose of my research was to have young widowed parents identify helpful ways they have been supported by people in their environment since the deaths of their partners. Once helpful support is identified, both professional and laypeople can use the information to provide and improve helpful support for this population. This is relevant to social work because social workers work directly with young widowed parents and their children in a variety of settings including schools, hospitals, hospice, support groups, and therapy. Social workers can use the findings from this study to improve their support to this population. This research is important because there is currently a lack of research for this population (Hooyman & Kramer, 2006; Stroebe & Stroebe, 2008; Lowe & McClement, 2010-2011).

Improving the support that young widowed parents receive can positively impact how well this population adapts to their loss because social support has been shown to play an important role in improving a person's ability to cope, adapt, and thrive in the face of adversity and stress (APA, 2011; Haggerty et al, 1994; Hetherington & Blenchman, 1996; Hobfoll, 1988, 1989, 2002; Holahan & Moos, 1991; Knight, 2007; Landau, 2010; Mancini & Bonanno, 2009; Masten & Garmezy, 1985; Murrell & Norris, 1983; Newman, 2005; Smith & Carlson, 1997). This is valuable information given that how well a surviving parent does influences how well their children will do (Kwok et al., 2005; Saldinger, Porterfield & Cain, 2004; Silverman & Worden, 1993; Stroebe et al., 2005; Werner, 1993 Worden, 2009). In fact, a couple of studies report that the functioning level of the surviving parent is the most powerful predictor of how well a child will adjust to the death of their parent (Silverman & Worden, 1993; Worden, 2009).

There are some discrepancies with regard to how many young widowed parents there are in the United States. This may be due to the fact that after a widow or widower remarries, their marital status changes from 'widowed' to 'married' on documents that request marital status. The United States Census Bureau (2009) reported that there were approximately 200,000 widowed parents raising approximately 761,000 parentally bereaved children. Ginsburg (1997) on the other hand, reported approximately 400,000 young widows under the age of forty-five years old. Regardless of the discrepancies in numbers, it is estimated that approximately 2.5 million (3.5%) children under eighteen years of age have

experienced the death of a parent and are being raised by widowed parents (Lutzke, Ayers, Sandler, & Barr, 1997; Social Security Administration, 2000).

My research focused on social support because it is a protective factor that is commonly reported as being inadequate for this population. The good news is that even though young widowed parents report they do not get adequate support, support is potentially available because it is common for young widowed parents to report that they rely on extended family, friends, neighborhood and community for individual support and support of their children after the loss of their partner (Clinton, 2008; Hooyman & Kramer, 2006; Worden, 2009). Improving the support that young widowed parents receive after the death of their partner can bolster not only their resilience but the resilience of their children as well. The research question for my study was: What are helpful ways that people have supported you since the death of your partner?

For the purpose of this study, any person who was fifty years old or younger when their partner died is considered a young widow or widower. This age limit coincides with previous research done on this population and is not meant to indicate that anyone who loses a partner at fifty-one years old is not a young widow or widower.

Research Lenses

Personal Lens

This project is inspired by my own experience as a young widowed parent. Because of my unique experience as a young widowed parent and a social worker, I have been able to understand young widowhood from both personal and professional lenses. I chose to focus on social support as it relates to young widowed parents for a number of reasons. First, I've had countless personal conversations with other young widowed parents over the last five years regarding the support they have or have not received. What has been most striking about these conversations is the incredible appreciation young widowed parents have for people in their environment who support them. The support has come from a variety of people in young widowed parents' environments. For example, family, friends, community members, professionals and even strangers have provided helpful support to these young widowed parents that I've spoken with over the years. Secondly, some young widowed parents have learned from other young widowed parents about how to improve their support. For example, a friend of mine told her mother-in-law that my mother-in-law watched my children one day a week. Her mother-in-law said, "Well, I can do that too." This leads to a third point, the helpful support that I've talked about with my young widowed friends has not been extraordinary. To illustrate, one young widow said she appreciated being invited to a friend's house for Thanksgiving. Another young widow told me that she appreciated when a friend volunteered to walk her dog in the evening. Another young widow raved about a friend of her late husband's who did repair work for her

on the house once a month. Lastly, I have been approached by several people who want to support a newly young widowed parent but do not know how to do it. Unfortunately, many of these people stayed away from the newly widowed parents simply because they didn't know what to do or what to say. Fortunately, through our discussions, we were able to identify potential ways they could help their young widowed friends.

Professional Lens

Person-in-environment is a core concept in social work that some believe even characterizes the profession (Hare, 2004). What distinguishes social work from other professions is that social workers seek to change and improve the lives of individuals and society and the relationship between them (Gibelman, 1999, Johnson, 1999; Karles & Wandrei, 1995; Stuart, 1999). In essence, social workers recognize that people exist in environments that affect them and that people affect their environments. Unfortunately, not all the exchanges between people and their environments are positive. As a social worker, I have been influenced by the person-in-environment concept and so has my research. The purpose of my research is to identify different kinds of helpful support that young widowed parents have received since the death of their partner. Once helpful kinds of support are identified, social workers, people who know and wish to support young widowed parents and even young widowed parents themselves can use the findings to improve the kinds of support that they receive from people in their environment.

Theoretical Lens

I chose to use the Ecological Theory as the theoretical framework for my research because it recognizes that people live within and adapt to their environments (Bronfenbrenner, 1979). Bronfenbrenner (1979) was one of the pioneers in Ecological Theory as it pertains to humans. Bronfenbrenner's theory was influenced by biological theories of ecology that explain how organisms exist within and adapt to their environment (Bronfenbrenner, 1979; Naess, 1989; Sands, 2001; Ungar, 2002). Even though biological theories of ecology focus on organisms and Ecological Theory focuses on humans, they both recognize the influential role that the environment has on behavior. Just as organisms live within and adapt to their environments, the Ecological Theory believes that people live within and adapt to their environments as well (Bronfenbrenner, 1979).

Bronfenbrenner (1979) believed that a person could not be separated from their environment. This is similar to the person-in-environment concept that is recognized in the social work profession. Bronfenbrenner (1979) proposed that peoples' behaviors are influenced by interactions they have with their environment. He believed that the interactions were bidirectional in nature (Bronfenbrenner, 1979, Forte, 2007). Ecological theorists focus their attention on these interactions and try to understand how certain interactions influence a person's behavior. According to this theory, different environments will cause people to adapt differently (Forte, 2007; Ungar, 2002). Ecological theorists believe that a person is constantly adapting to their environment (Bronfenbrenner, 1979; Forte, 2007; Ungar, 2002). Bronfenbrenner (1979) believed that the environment could be

broken up into different levels that expanded beyond a person's immediate setting. This belief recognized that larger environments could have an impact on a person's behavior. To illustrate this point, a government policy can influence a person's behavior just like an individual relationship can. Because each person is unique, so are the interactions and possibilities.

Social workers use the ecological perspective to help identify strengths and weaknesses of interactions that occur between people and their environments. Once these interactions are identified, social workers work to change and improve the interactions. Individuals and society can benefit when healthy interactions occur between individuals and their environments.

Literature Review

Existing Research

Loss of a partner under the age of fifty is less common than among older adults and the research reflects this (Hooyman & Kramer, 2006; Lopata, 1996; Lowe & McClement, 2010-11; McGoldrick & Walsh, 2004; Parkes & Weiss, 1983; Stroebe & Stroebe, 1993). This means that less is known about young widows and widowers and the challenges they experience (Lowe & McClement, 2010-11; Hooyman & Kramer, 2006; Silverman, 2004).

There are several limitations of existing research for this population. One limitation is the focus that some research places on negative outcomes of partner loss in spite of the research indicating resilience is common after adversity (Bonanno & Mancini, 2008; Bonanno, 2009; Masten, 2001). To illustrate, research

shows that death of a partner increases the surviving partner's chance of developing mental and physical health problems (Cardenal & Sanchez-Lopez, 2005; Dutton & Zisook, 2005; Hooyman & Kramer, 2006; Kowalski & Bondmass, 2008; Landau, 2010; Onrust, & Cuijpers, 2006; Parkes, 1996; Parkes & Brown, 1972; Rodger et al., 2006-7; Stroebe et al., 2006; Stroebe et al., 2005; Stroebe & Stroebe, 1987; Vachon, 1976). Other research shows that young widows and widowers have been shown to be more at risk of experiencing greater negative outcomes after their partner dies than older widows and widowers (Ball, 1977; Blanchard et al., 1976; Ginsburg, 1997; Kowalski & Bondmass, 2008; Stroebe & Schut, 2001; Stroebe & Stroebe, 1993; Worden & Silverman, 1993; Zisook & Schuchter, 1991). Some studies indicate that young widows and widowers with dependent children report greater amounts of stress and psychological distress as compared to widows and widowers who are older and have no children widows and widowers (Kwok et al., 2005; Lin et al., 2004; Worden & Silverman, 1993). Similar to their surviving parents, some research shows that parentally bereaved children have elevated mental health problems as compared to non-bereaved children (Bradley, 2007; Eppler, 2011; Haine, Wolchik, Sandler, Millsap & Ayers, 2006; Kwok et al, 2005; Saldinger, Portfield & Cain, 2004; Sandler, Ayers, Wolchik, Tein, Kwok, Haine, Twohey-Jacobs, Suter, Lin, Padgett-Jones, Weyer, Cole, Krieg, & Griffin, 2003; Worden, 2009).

Another limitation is that this population has a low participation rate in studies (Stroebe & Stroebe, 1989). Lastly, the existing findings on this population may be skewed because those who participate tend to be psychologically distressed, overly willing to participate and/or biased because they are affiliated with the service

provider who referred them to the study (Bonanno & Kaltman, 1999; Dowdney, 2000; Stroebe, 1998). As a result of these limitations, little is known about this population and that which is known is deficit-based.

What is the Problem?

Problems With The Social Environment

Loss of a partner at a young age is described in the literature as being abnormal, off time, unanticipated, unnatural, tragic, and statistically unlikely to occur (Ginsburg, 1997; Hooyman & Kramer, 2006; Lowe & McClement, 2010-2011; McGoldrick & Walsh, 2004; Worden, 2009). Unique challenges evolve because of the untimely loss (Lowe & McClement, 2010-2011). Many of the challenges that young widowed parents report are related to their social environment.

One of these challenges is that young widows and widowers report they hardly ever encounter each other, a reality that leaves them feeling even more isolated (Feinberg, 2009; Ginsburg, 1997). To illustrate, one study noted that at one year after the death of their partners, young widows reported that they had not yet met another young widow (Feinberg, 2009). In another study, one young widow said “one thing that was missing tremendously for me was the support of another young widow” (Lowe & McClement, 2010-2011). This is not surprising given that according to the US Census (2009), only 1.1 % of women and .2% of men ages 35-39 are widowed. Lack of access to other young widows and widowers means limited access to role models (Feinberg, 2009; Ginsburg, 1997; Hooyman & Kramer, 2006; Lopata, 1996; Lowe & McClement, 2010-2011).

Another socially related challenge reported by young widowed parents is the task of parenting and raising children alone (Hooyman & Kramer, 2006; Kwok et al, 2005; Lowe & McClement, 2010-11; McGoldrick & Walsh, 2004; Rodgers, 2006-7; Rolls & Payne, 2007; Shaffer, 1993; Walter, 2006). In addition to performing typical parenting tasks, young widows and widowers are also responsible for the necessary but stressful task of helping their children adapt to their loss (Bradley, 2007; Haine et al., 2006; Kwok et al., 2005; Lin et al, 2004; Lutzke et al., 1997; Saldinger et al., 2004; Sandler et al., 2003; Silverman & Worden, 1993; Worden, 2009). Surviving parents are also responsible for handling rituals that are related to the death such as recognizing anniversary dates and birthdays of the dead parent (Walter, 1996). Rolls & Payne (2007) report that surviving parents often feel like they have neglected their children while trying to grieve and attend to additional stressors.

Another social challenge that young widows and widowers face are changed relationships with family members. Ginsburg (1997) wrote that some young widows reported that their parents became overprotective of them after their partner died and that it created more stress for them. In addition to their own family, young widows and widowers indicated that their relationship with their in-laws became more strained after their partner's death as well (Ginsburg, 1997; McGoldrick & Walsh, 2004; Walter, 1996). As a matter of fact, Ginsburg (1997) reports that conflict between in-laws is the most commonly discussed problem by young widows. Ginsburg (1997) says that this causes problems because "in-laws are one of the widow's strongest links to her husband" (p. 183). Because of this strong link in-laws have with the deceased partner, their presence could help

promote what Worden (2009) recognizes as the final task of mourning which is “to find an enduring connection with the deceased in the midst of embarking on a new life” (p. 50).

Changed relationships with friends are another challenge commonly reported by young widows and widowers (Lowe & McClement, 2010; Walter, 1996). Research has identified a variety of reasons for this challenge. One identified reason is that friends are able to avoid thinking of their own possibility of widowhood by avoiding their widowed friend (McGoldrick & Walsh, 2004). Another reason for this is that friends are confused if they should include the widow/widower in activities that include spouses (Hooyman & Kramer, 2006; Lowe & McClement, 2010). Some friends may perceive the widow or widower as a threat to their own relationship and avoid contact with the widow/widower (Hooyman & Kramer, 2006). Lastly, widows and widowers report that their friends may not be prepared to support them because of their own lack of experience with death due to their young age (McGoldrick & Walsh, 2004; Rodger et al., 2006-7). Losing a partner in young adulthood is an untimely event and it leaves many young widows and widowers feeling like they don't fit in with their peers (Worden, 2009). The result is that many young widows and widowers report that they feel neglected, isolated, unsupported, and abandoned by their family and friends (Hooyman & Kramer, 2006; Lowe & McClement, 2010; McGoldrick & Walsh, 2004; Rodger et al., 2006-7; Walter, 1996).

Another social challenge that young widowed parents report is the lack of services geared toward supporting the entire grieving family (Rolls & Payne, 2007; Sandler et al., 2003; Stokes et al., 1999; Wolchik, Ma, Tein, Sandler & Ayers, 2008).

Providing care for the family is important because death of a parent fractures the entire family system (Rodger et al., 2006-7). Professionals who work with this population recognize that it is necessary to support the surviving parent in addition to their parentally bereaved children (Rodger et al., 2006-7). Supporting the surviving parent is important because children do as well as their parent does (Silverman & Worden, 1993; Worden, 2009). Hooyman & Kramer (2006) report that there is a need for “supportive community-based interventions to help widows [and widowers] with children through this transition” (p. 237).

Another challenge commonly reported by young widows and widowers is that social support does not last long enough (Boss, 2006; Ginsburg, 1997; Silverman, 2004; Worden, 2009). Most widows and widowers report that they get support from family friends immediately after the loss but not much longer (Ginsburg, 1997; Silverman, 2004; Worden, 2009). Widows and widowers may seem well adjusted soon after the death of their partner however studies show that the negative impact of grief may not show up in bereaved individuals for up to two years after the death (Bonanno et al., 2004; Rodger et al., 2006-7; Worden, 2009). People assume that because the widow or widower seems to be doing well that their support is unneeded. This is a problem because young widows and widowers report that they do not really realize what they have lost until after their support has left (Feinberg, 2009; Ginsburg, 1997; Morgan, 1989; Worden, 2009).

In addition to the already mentioned social challenges, young widows and widowers report that family, friends and society have higher expectations of them because they are young (Ginsburg, 1997; Hooyman & Kramer, 2006; McGoldrick &

Walsh, 2004). To illustrate, Ginsburg (1997) says that a young widow 'is supposed to be more resilient, to adjust and handle problems in double time simply because she's young" (p. 181). For example, Ginsburg (1997) says that young widows are often urged to remarry, compared with divorced individuals or even told they have gotten another chance at life.

The previous paragraphs illustrate some of the challenges related to the social environment that young widowed parents face after the death of their partner. An additional challenge is that young widowed parents often lack experience dealing with death because they are young (Ginsburg, 1997; Hooyman & Kramer, 2006; Worden, 2009). Unfortunately, the death of their partner may be his or her first experience with death.

Most Don't Seek Professional Services

Research shows that many young widowed parents do not use professional services even though they report inadequate support from their family and friends (Hooyman & Kramer, 2006; Lieberman, 1996; Lopata, 1996; Rolls & Payne, 2007; Schucter & Zisook, 1993; Stokes et al., 1999). Silverman (2004) researched young widowed parents and found that those who did request professional help did so about two years after the death of their partner and did not identify grief as the presenting problem. Research indicates a variety of reasons why widows and widowers do not seek professional services. One reported reason widows and widowers gave for not seeking help was that they were not used to talking to strangers about their feelings (Lopata, 1996). A second reported reason is that

young widows and widowers with bereaved children associated negative feelings with seeking professional help (Rolls & Payne, 2007). To illustrate, widowed parents reported they were reluctant to get professional help for their parentally bereaved children because they did not want a permanent record tied to their children (Stokes et al., 1999). Young widowed parents also report that they don't seek professional help because it is not available or familiar to them (Rodger et al., 2006). Another reason that young widowed parents report for not seeking help is that it may not be necessary. To illustrate, some grief and loss research indicates that it is not appropriate or effective for all bereaved individuals to use professional support because they are able to adjust on their own with no long-term mental or physical health problems (Bonanno, 2004; Bonanno, 2009; Caserta & Lund, 2007; Ginsburg, 1997; Hooyman & Kramer, 2006; Jordan & Neimeryer, 2003; Lieberman, 1996; Lopata, 1996; Parkes, 1998; Stokes et al., 1999; Stroebe & Schut, 2001). Lieberman (1996) found that only 4% of the widows who participated in the study needed or sought out professional help. Young widowed parents also report that they don't seek professional services because they don't have time to focus on their own needs (Lowe & McClement, 2010-2011).

Knowing that young widowed parents report difficulties with their support after their partner's death is important because research shows that resilient people have caring and supportive relationships with others. Improving the support that young widowed parents receive can help foster their resilience.

What Can Be Done to Improve Support?

The previous section illustrates some of the challenges that young widowed parents report in regard to their social environment. The following section will explain the important role that social support has in promoting resilience.

What is Resilience?

Resilience refers to a person's ability to adapt well after experiencing adversity (APA, 2011; Eppler, 2011; Masten, 2001). Research shows that resilience is common in people who experience adversity (Bonanno & Mancini, 2008; Bonanno, 2009; Masten, 2001). More recent grief and loss literature supports this claim as well. To illustrate, studies show that healthy adaptation occurs more frequently in bereaved individuals than expected (Bonanno, 2004; Bonanno, 2009; Dutton & Zisook, 2005; Haine et al., 2006; Stroebe et al., 2006; Stroebe, Schut, Stroebe, 2005). Even specific research focusing on widows and widowers find that health adaptations are common (Bonanno, 2004; Dutton & Zisook, 2005; Feinberg, 2009; Hahn, Cichy, Ameida & Haley, 2011; Hooyman & Kramer, 2006; Lund, Caserta & Dimond, 1993; McRae & Costa, 1993; Onrust & Cuijpers, 2006).

Resilience research recognizes that not all individuals and families who face adversity end up experiencing negative outcomes (Eppler, 2011; Knight, 2007; Masten, 2001). "The focus on positive as well as negative outcomes distinguishes a resilience approach from other approaches that focus more narrowly on pathological outcomes" (Sandler, Wolchik & Ayers, 2008, p. 61).

Protective Factors

Resilience research has identified a variety of protective factors that are used by individuals, families and communities that foster the ability to cope and thrive after adversity (APA, 2011; Clinton, 2008; Eppler, 2011; Greef & Human, 2004; Hooyman & Kramer, 2006; Masten, 2001; Smith & Carlson, 1997). These protective factors come from both internal skills used by individuals and external skills that come from a person's environment (APA, 2011; Clinton, 2008; Eppler, 2011; Greef & Human, 2004; Hooyman & Kramer, 2006; Masten, 2001; Smith & Carlson, 1997). These protective factors are not extraordinary skills and can be learned by anyone (APA, 2011; Greef & Human, 2004; Shapiro, 2008).

Resilience researchers believe that resilience can be bolstered if protective factors are enhanced (Knight, 2007; Masten, 2001). To illustrate, research shows that children who face adversity handle it better if protective factors are intentionally fostered by their family and their community (Clinton, 2008). Focusing on protective factors is important because they have been found to be more important than risk factors in determining outcomes of negative circumstances (Knight, 2007; Masten, 2001). Fostering resilience can improve people's lives. To illustrate, resilient individuals have been shown to have reduced stress, longer lifespans and healthier lifestyles (Clinton, 2008; Eppler, 2011; Hooyman & Kramer, 2006; Newman, 2005).

Social Support is a Protective Factor

Resilience research has identified a variety of protective factors that when present promote health and well being in people facing adversity (Bonanno et al., 2004; Greef & Fillis, 2009; Haggerty et al., 1994; Hetherington & Blechman, 1996; Power, 2004; Sandler, 2001; Sandler et al., 2003; Stroebe et al., 2006; Stroebe et al., 2005). One identified protective factor for those who face adversity is having caring and supportive relationships with others (APA, 2011; Greef & Human, 2004; Haggerty et al., 1994; Hetherington & Blechman, 1996; Knight, 2007; Newman, 2005; Power, 2004; Sandler, 2001; Sandler et al., 2003; Smith & Carlson, 1997). My study will focus specifically on this protective factor because young widowed parents commonly report challenges with their social support after the death of their partner and social support appears to play an important role in improving a person's ability to cope, adapt and thrive in the face of adversity and stress (Hobfoll, 1988, 1989, 2002; Holahan & Moos, 1991; Landau, 2010; Mancini & Bonanno, 2009; Masten & Garmezy, 1985; Murrell & Norris, 1983; Stroebe et al., 2005; Werner, 1993).

Social Support Helps Bereaved People

Grief and loss literature supports general social support literature in recognizing that social support helps people cope, adapt and thrive in spite of loss (Bonanno & Keltner, 1997; Boss, 2006; Dutton & Zisook, 2005; Eppler, 2011; Lowe & McClement, 2010-2011; Rodger et al., 2006-2007; Schneider et al., 1996; Stroebe et al., 2005; Worden & Silverman, 1993). The loss of a loved one is stressful and

research shows that the availability of sufficient social support is effective in buffering the stress that comes with loss (Linker, Stolberg & Green, 1999; Lopata, 1996; Stroebe & Schut, 2001; Walsh & McGoldrick, 2004; Worden, 2009). Studies show that positive adaptation to loss coincides with the perception of having positive social support (Hooyman & Kramer, 2006; Rando, 1993; Ren, Skinner, Lee & Kazis, 1999; Stroebe et al., 2005). To illustrate, a study on widows and widowers showed that younger widows who had more support were healthier and showed fewer depressive symptoms and somatic complaints than those who had less support (Stroebe & Stroebe, 2008). Other research reports that young widows and widowers who perceived social support had reduced anxiety as compared to those who did not perceive support (Brent, 1983; Kwok et al., 2005; Stroebe et al., 2010).

What is social support?

Social support is intuitively understood as the help one receives from other people when faced with adversity. Even though social support is a widely researched concept, there is little consensus about the definition of social support in the literature. In my study, social support is understood as a multifaceted and complex concept (Dumont & Provost, 1998; Gardner & Cutrona, 2004; Lopata, 1996, 2008; Lowe & McClement, 2010-11; Morgan, 1989; Stylianos & Vachon, 2008). Research recognizes two main components of social support. The first component is the type of support that is received (Dumont & Provost, 1998; Hooyman & Kramer, 2006; Lowe & McClement, 2010-11; Rodger et al., 2006-7; Stylianos & Vachon, 2008). This often includes emotional, instrumental, appraisal and informative

support. These will be discussed more thoroughly in the following paragraph. The second component of social support includes the people or groups of people who provide the resources of support (Dumont & Provost, 1998; Hooyman & Kramer, 2006; Lowe & McClement, 2010-11; Rodger et al., 2006-7; Stylianos & Vachon, 2008). This includes but is not limited to family, friends, professionals, neighbors, and community. My study will focus on both components of social support.

The first component of social support focuses on the types of support that people give and receive. Much like the definition of social support itself, there are a variety of types of support that have been identified in research. Some well-documented types of support include the following: emotional support, appraisal support, informational support and instrumental support (House, 1981). Emotional support is the most commonly recognized form of social support (House, 1981; Lopata, 1996). Emotional support includes actions that improve self-esteem like empathy, concern, love, trust, and caring (House, 1981; Stylianos & Vachon, 2008). Appraisal support provides feedback and affirmations on one's views or behavior (House, 1981; Stylianos & Vachon, 2008). Informational support includes giving advice, suggestions or directions to help people respond to demands (House, 1981; Stylianos & Vachon, 2008). Instrumental support is the most direct and concrete type of and includes help in the form of time, in-kind, money, service (House, 1981; Stylianos & Vachon, 2008). Because no single type or source of support have been proven beneficial for everyone in need, the ideal social support would be one where an individual in need has access to a variety of sources and types of support over time (Morgan, 1989; Hooyman & Kramer, 2006).

As indicated, social support includes interpersonal transactions between the receiver and the giver of support (Cohen & Wills, 1985; Dumont & Provost, 1998; Gardner & Cutrona, 2004; Lazarus & Folkman, 1984; Lopata, 1996, 2008; Lowe & McClement, 2010-2011; Stylianos & Vachon, 2008). In order for the support to be effective, the receiver must perceive the support offered as necessary, helpful, beneficial, useful, caring, validating, respectful, balanced, relevant, and responsive to his/her unique individual needs (Cohen & Wills, 1985; Gardner & Cutrona, 2004; Heller, Swindle & Dusenbury, 1986; Lopata, 1996, 2008; Shumaker & Brownell, 1984; Stylianos & Vachon, 2008). Due to the relational transactions that make up social support, the ideal conditions would include a fit between what a receiver needs and what a giver can provide (Lopata, 2008; Stylianos & Vachon, 2008).

Conflicted Findings about the Importance of Social Support

Research that solely focuses on the benefits of social support has been criticized for not exploring the disadvantages of social support (Duck, 1982; Wellman, 1981, 1985; Wellman & Hall, 1985). Even though social support has been shown to be beneficial to people, the literature does report mixed findings regarding the role that social support plays in helping people. As stated earlier, social support is a complex, multifaceted concept and although support received from a support network can be helpful it is not always perceived positively by the recipient (Barrera, 1986; Duck, 1982; Stroebe et al, 2006; Todd & Worrell, 2000; Wellman, 1981, 1985; Wellman & Hall, 1985). Some studies indicate that people perceive the support they receive negatively and that it becomes an additional source of stress

for them (Gottlieb, 1983; Lehman, Ellard & Wortman, 1986; Shinn, Lehmann, & Wong, 1984; Wortman & Lehman, 1985; Wortman & Silver, 1989). Morgan (1989) found that some social support could actually prevent coping.

Bereavement research also shows that bereaved individuals do not always benefit from social support they receive (Bankoff, 1984; Lowe & McClement, 2010-2011; Morgan, 1989; Stroebe et al., 2005). In a couple of studies, bereaved individuals reported that the support they did receive actually created more stress for them (Stroebe et al., 2006). Studies specifically focusing on widows and widowers also report conflicted findings about the role social support has on helping them adapt to their loss (Stroebe & Schut, 2001; Stroebe & Stroebe, 2008). In two studies, widows and widowers reported that they perceived the support that they did receive negatively and that it led to increased stress for them (Lowe & McClement, 2010-2011; Morgan, 1989). Two other studies showed that social support had no effect or even a negative effect on buffering stress for bereaved individuals (Bonanno & Kaltman, 1999; Stroebe & Schut, 2001; Stroebe & Stroebe, 2008).

Why Focus on Social Support?

Regardless of the mixed findings, my study will focus on social support because it is a known protective factor for people who face adversity and it is common for bereaved individuals, including widows and widowers, to report that they have inadequate or unsatisfactory social support (Detmer & Lamberti, 1991; Hooyman & Kramer, 2006; Lehman et al., 1986; Rodgers et al., 2006-7; Rosenblatt,

1994, Sanguesa, 1995; Schuchter & Zisook, 1993; Worden, 2009). Worden (2009) even reports that 'most studies find that those who do less well with bereavement have inadequate or conflicted social support' (p. 73).

Social support is an important topic because all people interact with their environment. Not all of the interactions have a positive effect but interactions do occur. To illustrate, one study of young widows and widowers found that even though the support they received did not buffer them from stress, all the young widows and widowers reported that they had support of some kind (Stroebe & Stroebe, 2008).

The intention for my study is to expand what is known about the kinds of support that are helpful to young widowed parents so that it can be improved. Resilience will be fostered when social support is improved for this population. Young widowed parents, social workers, and people who wish to support young widowed parents can use the findings from my study to improve support.

Methods

Research Design

A mixed methods approach was used for this study because it allowed the researcher to capture the lived experiences of young widowed parents more deeply than a quantitative study, while still allowing some quantitative analysis of key variables. In order to gather relevant information, participants were asked to complete an online survey that contained both qualitative and quantitative questions. The qualitative questions consisted of open-ended questions that

focused on specific ways that young widowed parents have been supported since their partners' deaths. The quantitative questions consisted of current demographic information about the participants along with the date of the participants' partners' deaths and number and age of children at the time of death. The researcher analyzed the participants' responses and the emerging data helped answer the research question.

Research Question

The research question for my study was: What are helpful ways that people have supported you since the death of your partner? Participants completed an online survey consisting open-ended questions to help answer this question. Refer to pages 87-88, "Online Survey Questions," in the appendix immediately following the discussion section to see the questions that were included in the survey.

Sampling and Recruitment

Snowball and availability sampling were used for this study. Participants were recruited via the following sources: 1. An online support group for young widows and widowers called www.youngwidow.org; 2. A loss of spouse support group affiliated with Youth Grief Services, a whole family support group located in Minnesota. This whole family support program serves grieving families with children aged 4 – 18; 3. Young Widowed Support Group on Meetup.com, a local, informal support group for young widows and widowers that offers online support and group support in the Minneapolis/St. Paul area; 4. Acquaintances of the

researcher; and 5. Snowball sampling, a type of non-probability sampling, was also used in that the researcher asked participants who completed the survey to forward the survey on to other young widowed parents who met the criteria. Snowball sampling was used because the participants are difficult to locate (Monette, Sullivan & DeJong, 2011).

Participants were screened at the beginning of the survey to make sure they met the following criteria: 1. Participants were under the age of 50 at the time of their partners' deaths, 2. Participants were pregnant or had children under the age of 18 living with them at the time of their partners' deaths. 3. The death must have occurred at least 6 months prior to completion of the survey.

A total of 42 participants met the criteria and completed the informed consent process. Of the participants, 6 (14%) were male and 36 (86%) were female. One (3%) of the female participants was pregnant at the time of their partner's death. The average current age of the participants was 42.54. The youngest participant was 21 years old and the oldest participant was 54 years old. The most recent death occurred approximately 7 months prior to completion of the online survey and the least recent death was approximately 8 years prior to completion of the survey. The average length of time since the participants' partners' deaths was 2.7 years. There were a total of 40 children under the age of 18 living with the participants at the time of their partners' deaths. Of these forty children, eighteen of them were under the age of 5 when their parent died.

Data Collection

The survey was developed using an online survey tool called Qualtrics. The researcher provided potential participants a link to the survey either by email, flyer or a posting on a website. To see a copy of the information that was distributed, please go to the appendix and find the page titled *Informed Consent and Information About This Study*. The researcher accessed the participants' responses in the report section of Qualtrics. All participants had to complete the informed consent process prior to starting the survey. The distribution of the link varied depending on the setting, see below for details.

Protection of Human Subjects

To ensure that the participants would be protected, an Institutional Review Board reviewed and approved the study prior to the recruitment of participants. The participants completed the survey on a volunteer basis only and they received no incentives for participating. It was not possible to identify participants via the survey. The participants were not considered to be part of a vulnerable population according to the Institutional Review Board.

After participants opened the link to the survey, they began the informed consent process. Each participant completed an informed consent process prior to beginning the survey. The first part of the informed consent process required potential participants to read the following: eligibility requirements, the purpose of the study, how their confidentiality would be maintained, the risks and benefits of participating in the study and how to withdraw from the study if they desired to do

so, contact information for the researcher, an expiration date for the survey and a request to forward the survey to others who were eligible. Participants were asked to click the “I accept” button if they chose to voluntarily complete the survey. After clicking “I accept,” the participants responded ‘yes’ or ‘no’ to the following questions: 1. Were you under the age of 50 at the time of your partner’s death? 2. Did you partner’s death occur at least 6 months ago? 3. Did you have children under the age of 18 living with you/or were you pregnant at the time of your partner’s death? 4. Do you understand what kind of information will be asked of you in this survey? 5. Do you understand that you can withdraw from this study at any time? 6. Do you understand that there are no known risks or benefits to participating in this survey? 7. Do you understand that your confidentiality will be maintained if you choose to participate in this study? The informed consent process concluded with these questions. Participants were allowed to answer survey questions after they completed the informed consent process. If a client answered “no” to any of the previous questions, they were not allowed to continue with the study.

The following precautions were taken to ensure confidentiality and anonymity of the participants. First, participant names were not requested on the survey. The online survey data was password protected and only accessible by the researcher. The data from the online survey was exported to the researcher’s computer and saved in password-protected files. Only the researcher had access to the raw data. The files and survey data will be kept until June 15, 2011 and then destroyed.

Data Analysis

A grounded theory approach was used to analyze the qualitative data from the survey (Berg, 2009). The researcher read the textual data and coded the data by writing brief descriptions to small segments of the data (Berg, 2009). The researcher altered and modified the codes depending on what emerged from the data. Once all the data was coded, the codes were used to identify a limited number of emerging themes that adequately reflected the participants' experiences (Berg, 2009). The researcher analyzed the themes and compared them to literature review findings in order to generate a theory about support regarding young widowed parents with dependent children.

Descriptive statistics were gathered for the quantitative responses from the participants. Descriptive statistics reported the participants' date of birth, date of participants' partners' death, number of children under eighteen years old at the time of participants' partners' death, number of children under the age of five at the time of participants' partners' death, gender of participants, and ages of participants.

Strengths and Limitations

In any research project, there are strengths and limitations. A strength of my project is that it will reach a population that is difficult to identify and sample. Another strength is that the snowball method is a simple and inexpensive method to use. The qualitative nature of my study will enable the researcher to get a more in depth look at this population by using the participants' own words to understand

more complex aspects of their experiences. The qualitative portion of my study will provide exploratory research for this under-researched population. The research question for my study will add to strength-based research for this population and has the potential of improving support that young widows and widowers receive from their support system.

There are limitations to any study and the limitations of my study appear below. First, the participants will not be representative of the entire population of young widows and widowers with dependent children. Sampling bias is another limitation of snowball sampling. For my study, participants will be recruited based on their participation in organizations that support young widowed parents and/or people who know the researcher.

Findings

The focus of this study was to have young widowed parents identify helpful support. The main findings that emerged from this study include: 1. Seven types of support seen as helpful, 2. Identification of four main community groups that have provided the most helpful support to young widowed parents since the deaths of their partners, 3. Identification of professional services that have been helpful to young widowed parents, 4. Suggestions for professionals working with young widowed parents, 5. Things that young widowed parents know now that they wish they had known at the time of their partners' deaths, and 6. Appropriate things to say to young widowed parents after the deaths of their partners. These findings

provide useful information to young widowed parents and people who want to support or already do support them.

Types of Support Seen as Helpful

In this study, participants were asked to identify helpful ways in which they have been supported by their family, in-laws, friends, other young widowed parents, community, and professionals both prior to an anticipated death of a partner and after the partner's death. Seven types of helpful support emerged from their responses. The types of support include the following: 1. Childcare, 2. Home, 3. Emotional, 4. Staying in Contact, 5. Funeral, 6. Financial and 7. Spiritual. The first four types of support (childcare, home, emotional, staying in contact) were the most widely recognized among the participants. The types of support will be described more thoroughly below.

Childcare Support. Childcare support was one of the most prominent types of helpful support that emerged from the participants' responses. For this study, childcare refers to the care or watching of children. The participants stated that they used childcare to work, be alone, to go out with friends, to attend support groups, to grieve, to do errands, to be with their dying partner, and to clean. The frequency of the childcare varied from everyday to occasionally. The duration of childcare support varied from shortly after the funeral to the present day. Family, in-laws, friends and people in the community provided childcare support to these participants. The extent of the childcare varied among the participants. To illustrate, one participant wrote, "*When my children were younger, my mother would*

be at my home to greet the children when they arrived home from school.” Another participant stated, “Each Thursday, my mother-in-law picks the two children up from the sitter and takes them to their house and brings them back by bedtime so I can go to the grocery store and clean the house without my 3 year old and 1 year old.”

Participants also indicated that transportation of their children to and from appointments, school and activities was also helpful to them. See Appendix A for a list of helpful kinds of childcare that were identified by participants.

Home Support. Home support was another prominent type of helpful support that emerged from this study. Six different types of home support emerged from the responses; they include: help with the house, help with the yard, help with food, help with shopping, help with the car and help with paperwork. Help with the house, yard and food were the most frequently recognized types of home support from the participants. The frequency of the home support varied from everyday to occasionally. Participants’ home support varied from immediately after the death to present day support. Participants stated that they received home support from family, in—laws, friends, and community members. The duration of home support varied from immediately after the funeral to the present day. Similar to childcare support, participants identified a variety of home support that has been helpful to them since their partners’ deaths. A quote from a participant that illustrates home support immediately after a partner’s death came from a man who stated, *“In the first weeks a ‘meal train’ . . . was provided by other parents in our community. Most days I could count on dinner showing up.”* Another quote that demonstrates home support came from a widower who stated, *“My sister helps wash and change my kids’*

bed sheets each Friday.” Another example of home support came from a widower who stated, *“My family paid to have my snow removal and lawn care done for the year after my wife’s death.”* Lastly, one participant said that she received home support from a godmother who *“painted my daughter’s room before we moved.”* See Appendix B for a list of helpful kinds of home support that were identified by participants.

Emotional Support. Emotional support was another major type of helpful support that emerged from the participants’ responses. Many participants simply listed ‘emotional support’ however, the following types of emotional support emerged within emotional support; 1. Talking, 2. Listening, 3. Supporting, 4. Recognizing and 5. Understanding. Emotional support ranged in frequency from daily to occasionally. The duration of emotional support varied from immediately after the funeral to the present day. Emotional support came from family, in-laws, friends, other young widowed parents, community and professionals.

A notable finding is that participants indicated that they received more understanding and got more advice about parenting and widow and widower related issues from other young widowed parents more so than any other group (i.e. family, friends, in-laws, community). To illustrate, one participant stated, that other young widowed parents were *“always understanding and there when no one else is.”* Another participant wrote, *“My best support although not in person has been the young widowed bulletin board. They get it and you can pour your heart out and they understand.”* Another participant wrote, *“I can discuss feelings and issues and get practical advice on how to handle things and adjust to my new life.”* Another quote

about the value of having support from other young widowed parents came from a participant who wrote, *“Other young widowed parents have given me some of the best support of all, their unconditional friendship. They make me laugh, they allow me to cry, they give awesome hugs, they have helped me believe in myself when I didn’t anymore. I can’t imagine how I would be today if I had not made such amazing friendships with other young widowed parents.”* Another participant felt similarly when he/she stated, *“I get the most support from my friend who is a young widow with children.”*

Another notable finding is that many participants stated that knowing another young widowed parent normalized what they were experiencing. For example, one participant wrote that knowing another young widowed parent helped by *“easing isolation and helping to normalize experiences.”* Another participant stated, *“Hearing the stories of other young widowed parents helped me understand that what I was feeling was normal.”* The following quote illustrates how valuable it was for one young widow to meet another, the participant wrote, *“I discovered a fellow young widow at my son’s school. She talked to me about her experiences and offered to talk to me any time I needed someone to listen. She had been widowed many years before me, but validated many of the emotions I was having.”*

One last important finding in terms of emotional support is that many participants indicated that they liked it when they felt they could talk about their dead partner with others. To illustrate, one young widow wrote that her family offered *“emotional support by accepting my grief and my need to speak of him.”* Other

participants indicated that they appreciated when others talked about their dead partners as well. See Appendix C for specific examples of emotional support that emerged from this study.

Stay in contact. Another major type of support that emerged from this study came from responses that indicated how helpful it is when people stay in contact with them and their families. Participants identified three distinct ways that people stay in contact with them and their family. One way that people stay in contact with participants and their families was via technology including phone calls, emails, texts, Skype and Facebook. Participants also reported that people stay in contact with them and their families via person-to-person exchanges. A few examples of person-to-person exchanges included visits to the home, spending time together, attending school events and eating weekly meals together. The following quote illustrates a person-to-person exchange that came from a widow who wrote, *“I go to mass with them [in-laws] every Sunday, same as I did when their son was living. After mass each Sunday, I still bring our two children over to their house for Sunday breakfast that my father-in-law cooks each week.”* Another participant wrote that friends have been helpful by *“stopping by and saying hi and keeping me included at social gatherings.”* Another participant wrote, *“I have felt the most supported by my friends that included me in activities, playdates, dinners, concerts etc.”* Lastly, participants indicated that people stay in contact with them and their families via mail. Gifts, letters and a photo book about a deceased parent were all examples of helpful items that were received via mail. The frequency of staying in contact varied from everyday to occasionally. The duration for staying in contact varied from

immediately after the funeral to present day. Family, in-laws, friends and community members all were identified as providing this type of support. See Appendix D for a complete list of helpful ways people stayed in contact with participants after the death of their partners.

Three additional types of support emerged from the participants' responses and even though they were not as prominent as childcare support, home support, emotional support and staying in contact, they warrant recognition as well.

Funeral support. The fifth type of support that emerged from this study was funeral support. Participants stated that their family, in-laws and community were the primary providers of this type of support that included help with funeral arrangements, funeral service, flowers for the service and money to help pay for the funeral service and/or headstone. See Appendix E for list of identified funeral support that participants' identified as being helpful.

Financial support. Financial support was the sixth type of support that emerged from the participants' responses to the survey. Financial support came from family, in-laws, friends, community and professionals in a variety of amounts and forms, including monetary and non-monetary. Monetary support included cash, gift cards and gifts. Non-monetary financial support included financial advice and an in-kind trade between a participant and a professional for service. See Appendix F for a complete list of specific ways participants recognized as being helpful financial support.

Spiritual support. The last type of helpful support that emerged from this study was spiritual support. This type of support primarily came from the

participants' spiritual communities. Spiritual support was not mentioned by a large number of participants but those who did mention it recognized it as being helpful to them after the death of their partners. One participant stated, *"The church has maintained steady contact and would provide emotional and spiritual support when I desired it."* Another participant wrote, *"Church reached out early and have held fast to meeting any needs I have from advice to financial to spiritual to comfort."* For one participant whose husband's death was expected wrote, *"Prayer was a huge part. The whole community was praying for my husband. Daily 800-1000+ people were praying for him."*

Help with the dying partner. The previous types of support emerged from the responses of participants who were asked what support was helpful to them after the death of their partner. Help with the dying partner was an additional theme that emerged for young widowed parents whose partners' deaths were expected. Participants identified a variety of ways to provide support to the dying partner including: care, transportation, gifts and visiting the dying partner. See Appendix G for a complete list of care that was identified as being helpful to the dying spouses.

Inadequate support. In addition to the emergence of helpful support, participants also indicated that their support was inadequate. It is notable that participants included negative comments about their support because the researcher did not specifically elicit this information. There were more negative statements about support that came from in-laws than any other group (i.e. family, friends, community, other young widowed parents). To illustrate, one participant

wrote, *"They stopped contact when my husband died, they don't have any interaction with us."* Participants also wrote negative statements about the support they received from their own family. One participant stated, *"My family has been no help whatsoever,"* another wrote, *"Most of my family has given me a wide berth since my husband's death."* Participants also responded with negative statements about the support they received from their friends since their partners' death. To illustrate, one participant wrote, *"My friends have not really helped me since my partner's death. I do not have basically any friends since he died. One of my friends would email me sometimes after his death and that was it."* Another wrote, *"Some of my friends inexplicably drifted away."*

Another challenge with social support that emerged from this study is that participants stated that the support they receive doesn't last long enough. For example, one participant stated, *"After the first year, less support was offered less frequently."* Another participant stated that her in-laws *"have been supportive at times but not on a consistent or long term basis."* Another young widow wrote, *"We had a lot of help when he first died, food, help driving kids to things, home repair, but it has died down. Only a few people still interact with us."*

The previous section outlines both the helpful types of support that emerged and some of the challenges of support that were reported by the participants. The helpful types of support included childcare, home, emotional, staying in contact, funeral, financial and spiritual support.

Sources of Helpful Community Support

In addition to being asked about the support they received from family, in-laws, friends and young widowed parents, participants were also asked how their community supported them. Participants said they got most of their community support from their children's schools, neighbors, spiritual communities and employers. The participants stated that they received all seven types of support (child, home, emotional, stay in contact, funeral, financial, spiritual) from these community groups. The duration of support varied from short term to long term while the frequency varied from daily to occasionally.

Of these community groups, the children's schools emerged as the leader in the community for providing emotional support for the parentally bereaved children. A quote that illustrates this comes from a young widow who wrote, *"My kids' preschool has been wonderfully supportive, encouraging my kids to remember their dad and talk about their feelings."* Another participant wrote, *"My children's schools were great at supporting my children with services, patience and understanding and keeping in contact with me when grief interfered with their schoolwork."* Another wrote, *"School has been great to act gently with my daughter and meet her needs accordingly."* Many participants identified school social workers as being helpful. To illustrate, one participant stated, *"The social workers at the children's schools have helped by talking to the kids about the loss and keeping me informed as when they have problems at school."* Another participant wrote, *"My son's school allowed my son to go to the school social worker's office when he was feeling emotionally overwhelmed."*

Professional Services

Participants were asked how professionals have been supportive to them since the death of their partners. The survey stated that professionals may include but are not limited to grief education, grief support, individual therapy etc. The majority of the participants stated that they had sought professional support for their children, their families and/or themselves. The majority of those who sought professional help stated that professionals had not only helped young widowed parents but also their children and the entire family. The duration of professional help varied from a couple of times to present day support. The following sections contain more detailed information about professional support as it pertains to this population.

Professionals support young widowed parents. Many participants indicated that they received helpful support from professionals in the form of individual therapy, support groups and legal advice. Individual therapy was the most widely recognized kind of support mentioned by participants. Participants stated that they attended individual therapy for a variety of reasons; including: help with understanding and managing grief, problems with anxiety, depression, underlying issues that were present prior to their partner's death and PTSD that occurred after their partner's death. Another participant wrote the following about individual therapy, *"I attended some sessions with a counselor to be better prepared for helping my children through their grief."* In addition to individual therapy, participants indicated that support groups related to grief, young widows and widowers, and/or spousal loss were also helpful to them since the deaths of their

partners. One participant who specifically indicated that she attended a young widow support group wrote, *"I attended a young widows group . . . which was a couple hours from where I was living . . . It was the first young widows group and it was awesome. I got into it between year 1 and year 2 and although some of the widow/ers were older or didn't have kids, it was wonderful to hear a few people like me, and to help a few people like me. I think we met every other Monday."* For participants who received help from professionals, some went once or twice while others continue to work with professionals at the time they took the survey; one participant indicated that he/she has been in therapy since their partner's death six years ago.

While some participants stated that support groups were helpful to them, many participants indicated that they did not find support groups helpful for a variety of reasons. A negative comment about support groups had to do with the age difference of group members. To illustrate, one participant wrote, *"I have been to two grief support meetings at my church . . . very nice people but their kids are all grown and I can't relate well. I am decades younger than anyone in the group."* One participant had a similar experience, she stated, *"I attended a six week support group over the summer, that met once a week – it was helpful but I was the only young widow there and I felt somewhat alienated."* Another participant was unable to continue attending individual therapy because of a scheduling conflict, this participant wrote: *"I also had a few sessions there [local cancer support center] but couldn't continue due to their lack of evening and weekend appointments."* One young

widow who participated in a two different support groups stated that they were *“both rather formulaic in their approach and limited in their value.”*

Professionals support parentally bereaved children. Some participants indicated that they have found professionals helpful in supporting their parentally bereaved children. Participants indicated that the support has come in the form of individual therapy, support groups, and camps. Individual therapy was the most widely recognized helpful form of support for the participants' children. Specific references were made to grief, music and play therapy. One participant stated, *“Play therapy for my five year old was a very useful tool.”* Another wrote, *“One daughter continues to the therapist for grief support as she experienced a good bit of anxiety and sleep disturbances.”* In addition to individual therapy, participants said they found support groups for their children helpful. One participant indicated that a *“teen workshop for grief and loss”* was helpful for their child. Grief camps (i.e. Camp Erin) for children were recognized as helpful sources of support as well.

Professionals support the whole family. Many participants stated that they found family support groups and family therapy helpful after the death of their partners. The most recognized whole family support from professionals came from family support groups. The following quote illustrates how helpful a family support group was for one young widows family, *“The family based grief group allowed us to have a safe place in which to publicly discuss our loss; it was invaluable to have somewhere safe for my son to say the words, ‘My father died,’ for the first time.”* Another response that demonstrates how helpful family support groups and retreats have been, came from a young widow who wrote, *“My son and I attended*

family support groups and retreats. These helped my son and I start forming our new family (without my wife). Both my son and I felt a sense of community with the other parents and children. The practical information presented was also helpful, such as: to get a physical examination and assure oneself that there is nothing physically wrong with me, understanding that the death of a family member will change the family dynamics, it is normal to want to be alone to lick one's wounds." Another participant wrote the following about family support groups, *"The encouragement, understanding and ideas that we share with one another, as we all try to help our children deal with their grief, has been very helpful."* Some participants indicated that they found the family support groups helpful because of the psychoeducation they received about grief. One quote that illustrates this came from a participant who wrote, *"I have also been taking my kids to a bi-monthly children's grief group that is offered through a local hospice program that is great – they teach the kids a lot about healthy outlets for emotion and the parents learn a lot about how to facilitate a healthy grieving process for the kids in a separate group that meets at the same time."* Participants who attended family therapy found great support as well. To illustrate, one young widower wrote, *"My son and I have been meeting with a family therapist who specializes in helping individuals and families who have lost a family member through death. This person has helped my son and I work through some of the emotional issues we had after my wife's death. The therapist has also been a strong advocate for me to get help with my PTSD caused by the long, progressive and especially difficult nature of my wife's death."*

The responses about whole family support by professionals was mostly positive however one participant wrote, *“I did not get much out of it, it is only 1 hour and by the time all of the late people get there and then the counselor speaks and then has you work on the activity of the month (which was writing a letter to your spouse) there was only time for one participant to talk and then the meeting was over. I found this very frustrating. Also the kids were divided up according to their ages in their little groups. The parents were also broken into groups but I was in a group with people that had younger kids and I really would love to be in a group with widow(er)s that have teenagers, that would be so helpful to me.”*

The previous section described the different ways professionals helped young widowed parents, parentally bereaved children and families. See Appendix H for a list of things that participants found helpful about individual therapy and support groups.

Participants who sought professional support but found it unhelpful gave a variety of reasons, including: it didn't work, it didn't help, led by volunteers who weren't professionals, not practical, not valuable, and the participants couldn't attend because no weekend or evening hours were available.

Suggestions for Professionals

Two categories emerged when participants were asked to provide advice or suggestions for professionals working with young widowed parents. The first category had to do with the services that are provided by professionals and the

second category was about the work that professionals do with young widowed parents. Both of these will be discussed in more detail below.

Suggestions about services for young widowed parents. The first category that emerged from the responses had to do with services that professionals provide. A significant number of participants requested that they would like greater availability of professionals in the evening and weekend hours. One participant requested weekend retreats offerings as well. Participants also requested more long-term support options. To illustrate, one participant stated, *"It takes YEARS to process and adapt to widowhood. A lot of our grief is put off to take care of the grieving children."* Another quote that illustrates the desire for more long term support came from a participant who wrote, *"As a mental health professional myself, I would like clinicians to understand how very long it can take to heal and recover."* Another request is that professionals provide more family resources to young widowed parents. Specific requests were made for whole family support options, places for children to go and parenting resources. The participant who is a mental health professional captured this well when he/she wrote, *"I would like there to be more extensive services readily available to families."* Another request that emerged is for more access to young widowed parents who have experienced a similar loss. This is captured well in the following quote, *"I would like a list of people who have gone through it so I can call who know what I'm feeling."*

Suggestions about working with young widowed parents. In addition to the previously mentioned service-related suggestions, participants offered specific suggestions about the work that professionals do with young widowed parents.

Seven suggestions for professionals who work with young widowed parents emerged from the responses. They include: 1. Listen, 2. Acknowledge the loss is unique, 3. Understand that grief takes time, 4. Understand that grief is unique, 5. Encourage young widowed parents to keep a routine for their family and provide practical parenting tips, 6. Encourage young widowed parents to consider using a financial planner, and 7. Encourage young widowed parents to get involved.

Listen. Participants noted that they want professionals to listen to them. Several stated that they wanted professionals to listen to their concerns and fears and to reassure. One participant said, *“Listen! The most frustrating part about being a young widowed parent is not having the other parent (or anyone else who cares as much about your children as you do) to discuss issue and make decisions with. I actually had a friend who told me I was lucky because I got to make all the decisions myself . . . I don’t feel lucky . . . I feel overwhelmed. There are a thousand important decisions to be made and no one to help make them.”*

Acknowledge the loss is unique. Participants stated that they would like the early loss of a partner while children are living at home to be acknowledged as a unique experience. There are several quotes to illustrate this, one participant wrote, *“Young widowhood is very different from widowhood in older age. We have a lot of different issues.”* One of the issues recognized by the participants is how challenging it is to raise children who are grieving while also grieving as a parent. To illustrate, one participant wrote, *“Acknowledge the incredible stress of being an only parent who is grieving and now has to raise children alone who are in the throes of grief themselves.”* Another participant captured additional challenges faced by young

widowed parents in the following quote: *“loss of a spouse, loss of future hopes and dreams, loss of co-parent, loss of any semblance of social life.”*

Understand that grief takes time. Participants also want professionals to know that grief takes time. Participants stated that grieving is a long term process, one that may take even longer for *“a young widowed parent may delay their own grief in trying to help their children deal with their grief.”* One participant recommended that professionals, *“Educate yourself on the grieving process of adults as well as children – it’s far less simple than many of you think and the period of time to ‘recover and redefine’ is longer than many realize.”* Many participants stated that professionals understand that everyone grieves at their own pace and that days fluctuate between good and bad.

Understand that grief is unique. Participants responded that professionals understand that grief is unique for each individual. One participant wrote, *“Just realize that the adjustment to being a widowed parent seems to be so different for each person based on their own history, circumstances, beliefs and emotional constitution. The widowed parents’ needs vary greatly due to these factors.”*

Encourage family routines and recommend parenting tips. Participants stated that professionals encourage young widowed parents to establish or keep a routine. To illustrate, one participant wrote that professionals could suggest young widowed parents to *“... keep on a routine, make sure the kids get their homework done. Real easy goals. Probably establishing the same routine and letting the kids know that not much will change and that they still have YOU as a parent. The professionals should aid the bereaved parent to realize these things and help them*

form a plan that works for them.” Participants also stated they would like parenting resources including *“love and logic resources,” “practical but compassionate advice about how to parent, not only alone, but with children that are grieving a loss,”* and *“information for where to go for emotional help for me or my child.”*

Encourage the use of financial planning resources. Participants stated it would be helpful if professionals encourage young widowed parents to consider using financial planners. Participants placed specific emphasis on using financial planning during the first two years after their partners’ death however retirement planning was recognized as well. Participants would like professionals to help them understand Social Security Insurance rules as well. One participant said it would be helpful to use professionals for career planning resources.

Encourage involvement. Participants state they would like professionals to encourage them to get involved with their community and new activities. For example, one participant wrote, *“Encourage any new idea that is brought up by the widow that is healthy for example, a vacation, a trip to the beach, picking a hobby back up.”* Another participant said it would be helpful to receive *“healthy adult emotional resources”* from professionals. On a different note, it can be difficult for young widowed parents to get involved even if they desire to do so. The following quote captures this issue well, it came from a participant who wrote, *“My counselor is great about saying I need to do things for myself but I’m exhausted after working and doing everything around the house. Also, I would need a babysitter and that would cost money.”*

Avoid the following when working with young widowed parents.

Participants also recommended that professionals avoid the following when working with young widowed parents. 1. Don't assume young people will get over loss faster, 2. Don't judge, 3. Don't treat the death of a spouse like a divorce, and 4. Don't tell them to move on.

What Participants Know Now That They Wish They Had Known Earlier

Participants were asked, "What is something you know now that you wish you would have known soon after your partner's death?" Five themes emerged from the participants' responses, they include: 1. More about grief, 2. We would be ok, 3. Support would be inadequate, 4. Financial, 5. Available services. Each one of these will be discussed in more detail below.

Wish they had known more information about grief. Some of the participants stated that they wish they had known more about their own grief and their children's grief. To illustrate this point, one respondent wrote, "*The only thing that surprised me was the extent of my own grief. Even though I knew the end was coming, I had no idea just how all encompassing that grief would be or how long it would last.*" Another participant wrote, "*I wish I had known that I didn't have to be strong. I tried so hard to be strong in the beginning, I was numb and terrified of falling apart because the kids needed me. But I wish I had let myself collapse and really grieve. It has taken a long time to let myself grieve, and I know now that crying really helps – it won't make me fall apart, and it actually is healthy for the kids to see their mother grieve.*" Another quote that illustrates this came from a participant who

wrote, *"I wish I could have known how wiped out I was going to feel. You really cannot think clearly for quite a while."* In terms of children's grief, one participant wrote, *"I wish we would have known it was normal for boys to be angry or withdraw when faced with a sick parent."*

Wish they had known that both they and their children would be OK.

Participants also stated that they wish they would have known that they would be ok and that their children would also be OK. To illustrate this, one participant wrote that she wish she had known *"that I would be able to live well and be happy with him even 5 years after his death."* Another respondent wrote that she wish she had known *"that my daughter would not be emotionally scarred by the death of her father; that it is still possible for her to be a happy, well-adjusted child."*

Wish they had known that support would be inadequate. Another theme that emerged from this study was that participants wished they had known that support would be inadequate. To illustrate this, one respondent wrote they wish the had known *"that many people just can't be counted on, and will cut relationships with me because seeing me reminds them of loss and that bad things can happen."* Another quote that illustrates inadequate support came from a respondent who wrote, I wish I had known *"that I need to build a new social network because existing friends are not comfortable with death and loss and drift away."* Most respondents wrote that they wish they had known that people don't understand their loss. One participant responded, *"That people who have not walked this journey often say things that are very painful because they do not understand or know better. Especially about how to grieve and how long it should take, there is nothing magical*

about one year, and most newly widowed really do not want to be told they will meet someone else, since we are still trying to accept that the life we planned will not happen. How very lonely and isolating the experience is.” This is an example of support that is given but not received positively by the receiver.

Wish they had known more about financial issues. Participants also indicated that they wished they had known more financial information after their partner died. Several participants wrote that they wished they had managed the finances differently. For example, one young widow wrote that she *“should have handled the money differently. I should have been harder on the kids asking for things, I used buying what they wanted as showing my love and trying to make up to them that their dad had died.”* Another participant wrote, *“I wished I had handled finances better the first year.”* In addition to managing finances differently, another wrote that he/she wished they knew *“more about the rules with SSI.”* Another participant wrote, *“I didn’t know I would receive accident compensation payments or government help for me to be able to afford the rent so I moved out [of the house] straight away.”*

Wish they had known about available resources. Lastly, some participants indicated that they wished they would have known what available resources were available to them after their partner’s death. A response that captures this idea well came from a participant who wrote, *“I also wish that there was a comprehensive list of services available for families onsite at the hospital. Documents covering emergency information, social security information, grief support information, lists of mental health providers etc would be very helpful.”* One

participant requested the following, “A list of people who have gone through it so I can call who know what I’m feeling.”

Appropriate Things to Say to Young Widowed Parents

Participants were asked, “What are supportive things people can say to young widowed parents?” The ten following themes emerged from the participants’ responses. The themes appear in descending order with the first one receiving 34 responses.

1. Offer specific ways to help (and follow through). (i.e. food, home, childcare, shopping).
2. Invitations to get together with others.
3. Acknowledge that the loss is unique.
4. Don’t say anything at all – just listen.
5. Say, “I’m sorry.”
6. Talk about the dead partner.
7. Ask, “How are you doing?”
8. Support decisions.
9. Support grieving.
10. Say, “I’m thinking about you.”

Participants of this study provided valuable information in their responses. More specifically, we now know the following: 1. Types of support seen as helpful, 2. Sources of community support, 3. Professional services commonly used by participants, 4. Suggestions for professionals working with young widowed parents,

5. What participants know now that they wish they had known earlier and 6.

Appropriate things to say to young widowed parents. The following section will look at the findings and determine what implications they have for social work practice and policy.

Discussion

This study was successful because young widowed parents identified helpful kinds of support they received both prior to and after their partners' deaths. In addition to identifying helpful support, participants also reported challenges with their social environment. This is notable considering the intent of this study was to elicit helpful ways that people supported young widowed parents. The social challenges that emerged in this study are consistent with social challenges that were presented in the literature review. According to the Ecological Theory, both the positive and negative responses are useful because they can be used to change and improve interactions between young widowed parents and people in their environment. With that said, I will use the findings from this study to inform what can be done in regard to each of the commonly reported social challenges that were introduced in the literature review and confirmed in this study. Additional findings will also be discussed. Specific attention will be given to the implications the findings have for social work practice, policy and research. Similarities and differences between this study and others will also be discussed.

How to Connect Young Widowed Parents With One Another

Previous research found that a challenge for young widowed parents is that they lack access to one another (Feinberg, 2009; Ginsburg, 1997). Many participants in this study reported a similar experience. One participant said she drove two hours to attend a weekly support group for young widows and widowers and found it helpful but stated that most of the participants were older than her and had no children. Other participants who attended support groups stated that they felt that they didn't fit in as a young widow or widower among older widows and widowers in support groups.

Participants who had access to other young widowed parents reported that knowing other young widowed parents helped them feel supported, normalized, and understood. Participants in this study reported that they got more advice about parenting and widow and widower related topics from other young widowed parents than any other group (family, in-laws, friends, community). Clearly, having access to other young widows and widowers was beneficial for young widowed parents who participated in this study. These findings also support previous research that stated that young widowed parents miss something important when they don't have access to one another (Feinberg, 2009; Ginsburg, 1997; Lowe & McClement, 2010-2011).

This information is valuable for social workers and other mental health professionals who can use the information to create services that connect young widowed parents. This could be done by offering support groups, parenting classes and retreats specifically for young widowed parents. Another idea for connecting

young widowed parents is to create programs that invite young widowed parents to connect with each other through an activity that promotes healthy living and self-care activities (i.e. book club, hiking club, social gatherings, yoga). When creating groups for young widowed parents, social workers and other mental health professionals must keep in mind that mixing young and old widows and widowers together may be more harmful than helpful for some of the young widowed parents. To illustrate, one participant stated that she felt alienated at a support group because she was so much younger than the other participants.

Social workers and other mental health professionals can create opportunities for newer young widowed parents to connect with young widowed parents who experienced the deaths of their partners years ago. The more experienced young widowed parents could serve as mentors and role models to the newer young widowed parents. This could be done on a one-to-one basis or by inviting an experienced young widowed parent to speak to a group of new young widowed parents who are in an existing support group. The experienced young widowed parent could use a practice similar to one used in Alcoholics Anonymous where they share their experience, strength and hope with those who are in the midst of their struggles. Having the opportunity to connect newer widows and widowers with more experienced widows and widowers would be beneficial because research shows that young widowed parents have limited access to role models (Feinberg, 2009; Ginsburg, 1997; Hooyman & Kramer, 2006; Lopata, 1996; Lowe & McClement, 2010-2011).

Another way to connect young widowed parents is to create more extensive services for the whole family. This would allow opportunities for the whole family to connect with people who share a similar experience. This type of service would allow families to connect socially and free the young widowed parents from finding and paying for childcare to attend a social gathering. This may be done via whole family support groups or organizing family outings (i.e. game nights at a grief center, bonfire, ice-skating). Whole family outings give these families an opportunity to see other families that look much like their own.

How to Improve Parenting Support for Young Widowed Parents

The findings of this study confirm previous research that report that young widowed parents find it challenging to be the only person who is responsible for parenting and raising their children (Hooyman & Kramer, 2006; Kwok et al., 2005; Lowe & McClement, 2010-11, McGoldrick & Walsh, 2004; Rodgers, 2006-7; Rolls & Payne, 2007; Shaffer, 1993; Walter, 2006). In addition to completing typical parenting tasks, participants also stated that they felt responsible for supporting their children as they grieved (Bradley, 2007; Haine et al., 2006; Kwok et al., 2005; Lin et al., 2004; Lutzke et al., 1997; Saldinger et al., 2004; Sandler et al., 2003; Silverman & Worden, 2009). This was a challenge for many of the participants who indicated that they wish they had known more about children's grief at the time of their partners' deaths. Other parents said they sought professional services so they could learn how to facilitate their children's adaptation to loss. A notable finding is that some participants recommended that professionals discuss parenting issues

with them. To illustrate, some participants said they wanted professionals to encourage them to keep routines in their family. Other participants stated that they wanted professionals to offer practical parenting tips to them.

Social workers and other mental health professionals can use these findings to improve support to young widowed parents who face the daunting task of raising grieving children alone. One way to address this challenge is to have social workers and other mental health professionals advise young widowed parents to advocate for specific support from family, in-laws, friends, and community members who may be willing to help them with their parenting needs. Another way to address this challenge is for social workers and other mental health professionals to be aware of the parenting needs of parentally bereaved children so they can inform young widowed parents how to address these needs effectively. Another way is to have social workers and other mental health professionals offer parenting groups for young widowed parents. In this type of group, parents can learn practical parenting information that supports both them and their children. Topics may include but are not limited to the following: educating parents about children's grief, parenting tips for parents (i.e. establishing routines, setting limits), how to encourage discussion about grief with children, research informed discussions about parentally bereaved children and young widowed parents, self-care, how to recognize a death anniversary, read and discuss books or articles about children's grief etc. In addition to learning parenting skills, participants would also be coming in contact with other young widowed parents, an experience that can be helpful in itself. Social workers and other mental health professionals can offer parenting skills

classes in a variety of settings including but not limited to hospice, school districts, support groups and private agencies. In addition to traditional mental health professionals, Early Childhood Family Educators could support young widowed parents as well by offering parenting groups specifically geared to this population. This would be useful for parents of non-school-age children because whole family support groups are not usually intended for children under five years old. Another option is for social workers and other mental health professionals who offer whole family support groups to consider offering childcare for children under 5 years old so young widowed parents with small children can have the opportunity to connect with other young widowed parents while their children are being taken care of.

How to Promote Strong Connections Between Young Widowed Parents & People In Their Support System

Promoting a strong connection between young widowed parents and people in their environment is worthy of focus because Bronfenbrenner (1979) recognized the influential role that the environment has on a person's behavior. Unfortunately, young widowed parents commonly report that changed relationships with their family and friends is a challenge that they frequently face (Lowe & McClement, 2010; Walter, 1996). Participants in this study reported that they often experience changed relationships with their family and friends after their partners' deaths as well. Many participants responded that their support was inadequate. Some participants even indicated that they had little if any contact with family, friends and in-laws after their partners' deaths. These findings support previous

research that found that young widows and widowers reported that they felt neglected, isolated, unsupported and abandoned by their family and friends (Hooyman & Kramer, 2006; Lowe & McClement, 2010; McGoldrick & Walsh, 2004; Rodger et al., 2006; Walter, 1996). Similar to previous research, in-laws received the most negative statements from participants in this study (Ginsburg, 1997).

The good news is that some of the participants indicated that the relationships they had with family, in-laws and friends got stronger after their partners' deaths. One participant even stated that in-laws provided better support than his/her own family. These participants provided practical information that informs us about helpful ways to support these families.

Social workers must anticipate that young widowed parents will receive inadequate support from their family, friends, in-laws and community after their partners' deaths. With that said, social workers must respond to this commonly reported challenge. One way to do this is for social workers to speak openly to young widowed parents about this commonly reported challenge and to encourage them to advocate for support from their family, in-laws and friends. This could be done in a variety of ways, including directly asking people to provide one of the seven types of support that young widowed parents in this study reported as being helpful (i.e. childcare, home, financial, staying in contact, spiritual). Another way is to encourage young widowed parents to create a Lotsa Helping Hands website at <http://www.lotsahelpinghands.com/>. This is a free website that can be used to communicate specific things young widowed parents and their children need help with. Social workers can encourage young widowed parents to post a link to the

Lotsa Helping Hands website via a Caring Bridge website, Facebook or to email the link to people in their support system. This type of website would benefit a young widowed parent who can easily post a need as well as people in their support system who want to help but may not know how.

In addition to encouraging young widowed parents to seek support from people they already know, social workers and other mental health professionals can encourage young widowed parents to find opportunities to connect with new people. This may be done through taking a class, attending a support group, being in a book club, attending an Early Childhood Family Education class etc. Social workers and other mental health professionals can also create opportunities for young widowed parents to connect with each other as mentioned in a previous section.

Another way social workers and other mental health professionals can improve support to this population is by providing services to family and friends of young widowed parents. This may not be a reality for many social workers because they do not have access to the extended families of young widowed parents however the following examples are possible ways this may be implemented across different settings. One way is to offer family and friend sessions that inform family and friends about grief, ways they can help, appropriate things they can say to a young widowed parent and let them know how much the young widowed parent is relying on them for support. This type of course could be offered via hospice, hospitals, agencies, grief centers, and schools. These sessions can be provided both prior to and after a death. Another way to improve support between young

widowed parents and their support system is for social workers and other mental health professionals who come in contact with extended families to have direct conversations about this commonly reported challenge and give them specific ways they can help a young widowed parent (i.e. childcare, home, emotional, staying in contact, funeral, financial, spiritual) and encourage them to provide long-term consistent support. Social workers and other mental health professionals can also invite family members to attend individual therapy sessions with young widowed parents. This may be useful to help build narratives about the actual death, talk about different perceptions about the death, be a way to show a family or friend how to talk about death, teach support people appropriate ways to respond to someone who is actively grieving, or be a safe place to have a conversation about an issue that developed after the death. Social workers and other mental health professionals can also provide family and friends with resources (i.e. relevant books, relevant support groups like Compassionate Friends for in-laws, grief psychoeducation material, pamphlets with seven helpful categories of support) either directly or via the young widowed parent.

How to Improve Services

Participants from this study provided valuable information that can be used to improve services for this population. A general request was for more services available during the evening hours and on weekends.

More open to using professional services than expected. Previous research found that many young widowed parents do not use professional services (Hooyman & Kramer, 2006; Lieberman, 1996; Rolls & Payne, 2007; Schucter & Zisook, 1993; Stokes et al., 1999). Professional services refer to mental health services. The results from this study conflict with this research. Participants in this study were far more open to professional services than the Liberman (1996) study that reported that only 4% of the widows in that study needed or sought out professional help. As a matter of fact, most of the young widowed parents who participated in this survey had sought professional services of some kind. Individual therapy was the most commonly reported professional service used by the participants. Some participants indicated that their children benefited from individual therapy as well, one participant specifically noted the usefulness of music therapy for a young child. The other professional services that were mentioned included spousal loss support groups, family therapy, grief camps for children, retreats and whole family support groups. In addition to being open to using professional services, another finding is that participants reported that it would have been helpful to receive a list of services that were available to them. Participants also reported that they want professionals to recognize that their loss is unique.

Social workers and other mental health professionals can improve professional services for this population in a number of ways. First, social workers can expand their services to include both evening and weekend hours to better fit the needs of these families. Another way to improve services for this population for

social workers to inform young widowed parents about local and national professional resources that are available to them. Useful information might include but not be limited to contact information to local therapists, grief centers, relevant books, available support groups, retreats, online support groups, and social security information. This information could come in a variety of forms including email, website, pamphlet or word of mouth. Ideally, this information would be readily available so it can be provided to these families promptly. Not all young widowed parents come in contact with social workers and other mental health professionals, therefore it would be beneficial if funeral homes, doctors, grief centers, schools, law enforcement, nurses, emergency rooms, and behavioral health clinics in hospitals could have useful information readily available for this population as well.

Social workers and other mental health professionals who work with young widowed parents can provide information about children's grief and adult grief to this population because many indicated that they wish they would have known more about grief. At a policy level, social workers and other mental health professionals can advocate for surviving partners to get more time off from work after their partner dies due to the fact that many participants reported that they did not know how intense their grief would be. Another way to improve services for this population would be to promote self-care with young widowed parents who are under significant stress and taking care of grieving children while grieving themselves. Social workers and other mental health professionals can also inform themselves about needs of grieving children so they can educate young widowed

parents about the needs of parentally bereaved children and offer useful parenting tips.

Social workers and other mental health professionals can also respond to the needs of young widowed parents and their families by specializing in grief and loss and making themselves known to referral sources. It is highly recommended that social workers and other mental health professionals be able to combine both grief therapy and trauma therapy with clients who may experience PTSD or traumatic grief after the deaths of their loved ones, as was the case with several of the participants in this study. Social workers and other mental health professionals can gain knowledge about trauma by seeking out and attending trauma trainings. Social workers and other mental health professionals who do not feel qualified to work effectively with this population must be willing to provide prompt referrals to effective and reliable professionals who are more experienced in working with this population. Participants in this study also recommended that professionals understand that grief is unique and that it takes a long time to grieve so it is important for professionals working with this population to keep both of these in mind when working with this population. Social workers and other mental health professionals can improve their support to this population by acknowledging that the loss of a partner at a young age is unique.

Another way social workers and other mental health professionals can improve services for this population is offer hope to young widowed parents who are in the midst of grief and stressful changes. This suggestion is influenced by

participants who upon reflecting stated that they wish they would have known that both they and their children would be OK.

More whole family support. Many participants reported a need for more extensive services for their entire family. This coincides with previous research that reported a lack of services that help the entire grieving family (Rolls & Payne, 2007; Sandler et al., 2003; Stokes et al., 1999; Wolchik et al., 2008). Participants said they used family therapy and whole family support programs. Participants in this study reported that they used whole family support groups more often than family therapy.

Participants revealed useful information about support groups. For example, participants said they would like to be with other young widowed parents who were similar in age with them. They also indicated that it was helpful for them to talk with young widowed parents who had children who were similar in age to their own. Participants requested support groups to be practical, valuable and supportive. Improving support for the surviving parent is crucial because how well a surviving parent does influences how well their children will do (Kwok et al., 2005; Saldinger, Porterfield & Cain, 2004; Silverman & Worden, 1993; Stroebe et al., 2005; Werner, 1993; Worden, 2009). One participant requested that professionals run the group instead of volunteers.

Participants specifically mentioned that whole family support programs were helpful for the following reasons: 1. Participants learned about grief as it relates to children and themselves, 2. Participants received encouragement, understanding and support from people who had a shared experience, 3. It was a

safe place for children and adults to talk about their loss, 4. Participants got support for their parenting needs, 5. They learned to facilitate their children's grief (i.e. talking about grief, learning health outlets for emotions), 6. Parents learned that family dynamic would change as a result of the death, and 7. It helped participants begin to form their new family.

Social workers can respond to the need for more family support programs by offering more whole family support programs. This would require agencies to fund more of these programs. Social workers may consider dividing young widowed parents up by age, both of themselves and their children. This would allow participants to discuss specific age related issues with one another. Offering on-site childcare for children too young to participate in support group activities is one way to improve services to young widowed parents with very young children. Ideally, trained professionals would run groups. In situations where financial issues prevent trained professionals from running groups, social workers must train volunteers so they can effectively lead group and facilitate discussion about grief. The volunteers must feel supported by professionals who preside over the groups (i.e. adequate training, receive prepared lesson plans, time to process after leading groups etc.). Other whole family services that could benefit these families include whole family retreats. Social workers can also provide family therapy for these families that is practical, relevant and effective. Social workers who work with these families must be able to talk about grief and loss in order to help families who have experienced a loss. Schools of social work can prepare their social workers for this task by offering grief and loss courses in their programs.

More discussion about financial issues. Many participants mentioned the issue of finances in this study. It would be unethical for social workers to advise young widowed parents about financial planning and investing due to lack of expertise, however social workers can address some of the financial issues without overstepping their boundaries. To illustrate, social workers can educate young widowed parents about commonly reported financial regrets and successes for this population and encourage young widowed parents to work with financial professionals. Participants of this study indicated that they wished they knew more about social security rules. Social workers can respond to this desire by providing links to social security websites that contain answers. Another option is for social workers and other mental health professionals to inform themselves about social security rules that apply to young widowed parents so they can educate young widowed parents about rules that apply to them. For example, a young widowed parent's survivor benefits will end when their non-disabled child turns 16 years old (SSA, 2011). Social workers and other mental health professionals may even be able to bring in a social security expert who can talk about practical issues that apply to young widowed parents. Another way to improve services for this population is for social workers and other mental health professionals to establish relationships with financial professionals who have experience working with this population so they can refer young widowed parents to them and/or invite these professionals in to speak to young widowed parents.

How to Promote Consistent, Long-Term Support

Participants reported that they frequently lacked long-term support from family, friends, in-laws and community. This coincides with previous research that reported that support doesn't last long enough for this population (Boss, 2006; Ginsburg, 1997; Silverman, 2004; Worden, 2009). Several participants reported that they got immediate support after the funeral but not much longer. This is similar to previous research that found that grieving people get support immediately after the death but not much longer (Ginsburg, 1997; Silverman, 2004; Worden, 2009). It may come as no surprise that participants of this study requested more services to fill this gap left behind by family, friends and communities. Fortunately, many participants found support of other young widowed parents via the online support group, www.youngwidow.org.

Social workers and other mental health professionals can respond to this challenge by providing consistent, long-term support for young widowed parents and their families. Consistent, long-term support can be provided in a variety of different ways. One way is to offer support groups that are available and open to young widowed parents on a long-term basis. It is important to keep in mind that the average length of time since participants' partners' deaths was 2.7 years. Other participants were seeking support six and seven years after their partners' deaths.

In addition to support groups, social workers can provide retreats to young widowed parents years after their partners' deaths. Another way social workers can respond to this challenge is for the creation of consistent, long-term family programming that focuses on community building versus support. In this case, the

community would consist of young widowed parents and their families. Community activities might include but are not limited to bonfires, camping trips, weekly community dinners, movie nights, barbeques, sledding etc. This type of program would be ideal for families who have already attended and completed a support group series.

Another way social workers and other mental health professionals can work to improve long-term support for this population is to encourage young widowed parents to advocate for long-term support from their family and friends. Also, when possible, social workers can speak directly with extended family members about how important their support is as was mentioned in an earlier section.

Agencies who work with these families would need to provide funding to cover the costs of providing long-term, consistent support for these families. At a policy level, social workers and other mental health professionals can advocate for longer term insurance coverage for families who use therapy and/or support groups.

Consistent, long-term support is important given that some young widowed parents reported that they didn't seek professional help until a year after their partner died. Others said that their grief was delayed because of the demands they faced as an only parent. Another consideration is to offer support groups, retreats, and gathering years after the death given the demands placed on the young widowed parent after a partner's death.

How to Reduce High Social Expectations

Another common social challenge for young widows and widowers is that society has higher expectations for them simply because they are young (Ginsburg, 1997; Hooyman & Kramer, 2006; McGoldrick & Walsh, 2004). Although not an overwhelming finding, participants did support this research. To illustrate, participants recommended that professionals don't assume young people will get over loss faster, don't treat the death of a spouse like a divorce and don't tell them to move on. Social workers must keep these recommendations in mind when they are working with young widowed parents. More specifically, participants recommended that social workers not compare the death of a spouse with a divorce.

Additional Discussion Topics

Schools are important sources of support for families with school-age children. Findings from this study show that schools provide important sources of support to families who experience loss. With this said, school social workers must be aware of this topic and be prepared to talk about grief and loss with their students, families and staff members. School social workers must also be informed about resources that are available to families that are in need of more services than the school can provide.

Young widowed parents who do not have school-age children may be lacking a valued community support. Social workers must be aware that young widowed parents with non-school-age children may be more at risk simply because they lack a valuable source of community support. Social workers can implement programs

geared for these families. Social workers may work directly with Early Childhood Family Educators to implement such programming. Whole family support groups with childcare options may be useful for families with children under age five years old as well. In this study alone, eighteen of the forty children were under the age of five when a parent died.

Talk about the dead partner. Another notable finding from this study is that participants found it helpful when conversations occurred about their dead partner. Some participants said they liked when they could talk to others about their dead partner. Others said they liked it when others brought up their dead partner. Social workers can let family, in-laws, and friends know that it's acceptable to talk about the dead partner with the young widowed parent and his/her children. One participant reported that a brother-in-law gave a dad book to his/her child; this is an example of a gift that encourages conversation about the dead parent. Social workers can encourage young widowed parents to talk about their dead partner to their children as a way to keep children connected to their dead parent. Conversation about the dead parent/partner may be one way that these families are able to maintain "an enduring connection" with the dead parent/partner, an important task of mourning according to Worden (p. 50, 2009).

Social support can buffer stress after loss. Many participants commented that the support they received from their family, friends, community, other young widowed parents and professionals was incredibly helpful to them after their loss. These findings support previous research that found social support to effectively buffer stress after loss (Linker, Stolberg & Green, 1999; Lopata, 1996; Stroebe &

Schut, 2001; Walsh & McGoldrick, 2004; Worden, 2009). Responses indicated that young widowed parents especially benefited from knowing other young widowed parents.

Ideally, each young widowed parent would have a place where they were guaranteed support after their partner's death. Unfortunately, many of them lack this type of support from their family, in-laws, friends and community. Social workers and other mental health professionals can fill this need by offering services in their community (i.e. city, county, region, state) that are geared toward supporting young widowed parents and their parentally bereaved children. If possible, an agency would be established in communities to provide this type of service. Another possibility would be the creation of a program within an already existing agency that could provide this type of service. This type of agency or program could provide a variety of services to young widowed parents, for example, whole family support groups, bereavement counseling, outreach to newly bereaved families, family activities, resources, mentors, camps, retreats, classes, book clubs, relevant books, available online resources etc. for young widowed parents and their families. In addition to providing services for young widowed parents and their children, this agency or program would work with schools, hospitals, hospice, funeral home directors, community sources, financial professionals and mental health professionals who work with this population in a variety of ways. Ideas include but are not limited to the following: 1. Different sources could refer families to the agency for support and resources after a loss. 2. The agency can provide trainings for professionals (i.e. hospice, schools, hospitals, funeral home directors,

social workers, etc.) who work with these families. 3. The agency can reach out to young widowed parents soon after the death and reconnect after a year. This may be via mailings, phone calls, emails, and brochures. Preferably, every young widowed parent in the community would be aware of this agency and the services it provides.

Future Research

Findings from this study can be used to guide future research for this population. Research that focuses on services that are available for families that offer consistent, long-term programs for families with a shared experience (i.e. chemical addiction, bereavement) would be useful for social workers and agencies who wish to implement this type of service.

Another area where future research could focus is having young widowed parents identify specific ways support groups or classes could be useful to them. Ideas may include specific discussion topics (i.e. social challenges that young widowed parents face, financial issues, how to keep kids connected to their dead parent, how to recognize death anniversaries etc.), skills (i.e. how to facilitate children's grief), psychoeducation about grief, specific parenting challenges young widowed parents face etc. This information could be used to create programs that are practical and useful for young widowed parents.

Another area to focus future research on is the experiences of young widowed parents who had infants or young toddlers at the time of their partners' deaths. Research that focuses on the lived experiences of young widowed parents

with infants and toddlers could inform infant and toddler grief and ways support could be improved this subset of this population.

Strengths and Limitations

Strengths. There are several strengths to this study. First, this study had a significantly higher participation rate than other studies that focus on this population. Secondly, the findings from this study contribute to the lack of research for this population. Another strength is that the findings provide practical tools for improving support that can be used by young widowed parents and their families, in-laws, friends, community and professionals who serve them.

Limitations. There are some limitations to this study as well. One limitation is that participants were not representative of the entire population of young widowed parents. The participants were connected to other young widowed parents either through agencies who serve young widowed parents, support groups, online support groups or by being acquaintances of the researcher. Therefore, the results cannot speak for the entire population of young widowed parents. One way this may have impacted the findings is that participants may have been more willing to use professional services than others who were not connected with other young widowed parents.

Conclusion

Young widowed parents commonly report challenges with their social environment. This research is important because it identified helpful ways people

can support young widowed parents. Focusing on ways to improve social support is important because social support is a known protective factor that can help boost resilience in people who face adversity (APA, 2011; Greef & Human, 2004; Haggerty et al., 1994; Hetherington & Blenchman, 1996; Knight, 2007; Newman, 2005; Power, 2004; Sandler, 2001; Sandler et al., 2003; Smith & Carlson, 1997). Improving support for young widowed parents is crucial because how well a surviving parent does influences how well their children will do (Kwok et al., 2005; Saldinger, Porterfield & Cain, 2004; Silverman & Worden, 1993; Stroebe et al., 2005; Werner, 1993; Worden, 2009). The good news is that young widowed parents revealed practical and ordinary ways for family, in-laws, friends, community members and professionals to provide helpful support to both them and their children.

Appendices

Informed Consent²
and²
Information About This Study

- Title of the Study:** Promoting Resilience in Young Widowed Parents
- Purpose of the Study:** The purpose of this study is to have young widowed parents identify specific ways that they have been supported by people in their environment since the death of their partners. The objective is to use the findings to identify common themes that could be used to improve the support that young widowed parents receive from people in their environment after the death of their partners.
- Eligible Participants:** Young Widowed Parents Who:
1. Were under the age of 50 at the time of their partner's death.
 2. Were pregnant or had a child or children aged birth to 18 living at home with them at the time of their partner's death.
 3. Had a partner who died at least 6 months ago.
- Procedures:** Participation in this survey is voluntary. If you agree to take part in this research study, you will be asked to complete an online survey. The survey will take approximately 15 to 20 minutes to complete. You will be asked to respond to questions that are related to the support you have received since your partner's death.
- Confidentiality:** Your identity will be kept confidential. No identifying information will appear in any publication or presentation of this study's findings.
- Risks:** There are no known risks for people who choose to participate in this study. You may withdraw from the study at anytime by closing the survey. If you decide to quit at any time before you have finished the survey, your answers will NOT be recorded.
- Benefits:** There are no direct benefits to people who choose to participate in this study however you will be contributing to knowledge about young widowed parents and their support. The findings of this study will be emailed to you if you provide your email address at the end of the survey.
- Contact Information:** This study is being conducted by Korie DeBruin as part of the requirements for Master of Social Work degree from the University of St. Thomas and St. Catherine University in St. Paul, MN. This study is being conducted under the direction of Katharine Hill, PhD, MSW, MPP, LSW, Professor of Social Work. If you have questions about this study or you would like a physical copy of the survey mailed to you, please email Korie DeBruin at [researcher's email address].
- Survey Link:** If you know of someone who may be interested in completing this survey, please forward the survey link on to them. The survey will be available until 2/2/2012.
http://stthomassocialwork.qualtrics.com/SE/?SID=SV_2mZUfljDV02P5TS

Appendix A

Helpful Childcare Support

- Childcare
 - Daily
 - Weekly
 - Occasionally
 - After school
 - Work/school conflicts
 - Overnight
 - Few hours
 - Weekends
 - On vacation
 - Sleepovers
 - Playdates
 - Childcare swap

- Transportation of children to appointments, school, and activities.

Appendix B

Helpful Home Support

- House
 - Maintenance
 - Repair
 - Cleaning
 - Laundry
 - Appliance repair
 - Painting
 - Stripping wallpaper
 - Decorate for the holidays
 - Advise
 - Reorganizing/organizing
 - Sale
 - Dog sitting
 - Winterizing
 - Plumbing
 - Going through partner's things
 - Changing the bed sheets weekly
 - Teach how to repair things

- Yard
 - Yard work
 - Cutting/splitting wood
 - Shoveling
 - Mowing

- Food
 - Grocery shopping
 - Meal preparation
 - Bringing food (snacks, dinner, lunch)
 - Feeding children

- Shopping
 - Diapers
 - Clothes
 - Grocery
 - Gifts for holidays
 - Mother's Day
 - Father's Day
 - Christmas
 - Birthdays
 - School needs

- Car
 - Repair

- Paperwork
 - Thank you notes
 - Bank
 - Lawyers

Appendix C

Helpful Emotional Support

- Talking
 - Grief
 - Dead Partner
 - Children (praise and concern)
 - Advise
 - Difficult things
 - Anger
 - Stress
 - Struggles
 - Confidential information
 - Prayer
 - Feelings

- Listening
 - As grief is processed
 - Through the tears
 - Children (praise and concern)

- Supporting
 - Surviving Parent
 - How the surviving parent is raising the children.
 - The surviving parent in living a good life.
 - The surviving parent's decisions.
 - The surviving parent's grieving process.
 - Parenting
 - Communicating how the kids are doing.
 - Kids
 - Show concern about the children.
 - Extra time to do homework
 - Work with emotions and behavior issues
 - Guidance
 - Encourage kids to talk about their dad
 - Talk about feelings

- Recognizing
 - Holidays
 - How difficult it is to raise children alone
 - Death Anniversary
 - Cards, flowers

- Understanding
 - Struggles of solo parenting

- Normalization of feelings

Appendix D

Ways to Stay in Contact

- Technology
 - Phone
 - Email
 - Text
 - Skype
 - Facebook
- Person to Person
 - Visit
 - Daily, weekly, occasionally, holidays, anniversaries, 1 week/summer, short, long
 - Family Meals
 - Keep the person socially connected
 - Go out together
 - Attend Children's Events
 - Live Together
 - Spend Time With Kids
 - Talk to them.
 - Teach them about tools.
 - Teach them how to hunt.
 - Teach them about respect.
- Mail
 - Gifts
 - Birthday
 - Holidays
 - Symbolic
 - Letters
 - Photo Book of Dead Parent

Appendix E

Helpful Funeral Support

- Planning and help with funeral arrangements.
- Planning and help with funeral service.
- Money for all or part of:
 - Funeral Service
 - Headstone
 - Funeral Home Service
 - Flowers at Funeral

Appendix F

Helpful Financial Support

Monetary

- Funeral Expenses
- Children's Expenses
 - Clothes
 - Activities
 - Toys
 - College
 - School
 - School reduced tuition.
 - Donation from a family.
 - Dental
 - Orthodontist reduced bill.
- Cash/Donations
- Gift Cards
 - Groceries
 - Massage
 - Gas
- Financial Benefit
 - Medical Expenses
- Employer
 - Paid time off
 - To attend treatments with partner
 - After funeral.
 - Funeral Expenses
 - Renovation of home to accommodate dying partner.

Non-Monetary

- Financial Advice
- In Kind Gift in exchange for therapy.
- Employer allowed caretaker to work from home.

Appendix G

Help With the Dying Person

- Care
 - Help care for the dying partner.
- Transportation
 - to/from medical appointments
- Gifts
 - Flowers
 - Cards
- Visiting
 - Long-term stay with the family prior to the death.
 - Stayed with the dying partner so the other partner could leave.
 - Talking

Appendix H

Helpful Support From Individual Therapy and Support Groups

- Grief
 - Understanding grief
 - Parent
 - Child(ren)
 - Be prepared to help children through their grief.
 - Learning healthy outlets for emotions.
 - Helping parent facilitate a healthy grieving process for their children.
 -
 - Managing grief
 - Learning how to help children deal with grief.
 - Psychoeducation
 - Grief may cause a person to isolate.
 -
- Practical Information
 - Physical exam for surviving parent.
 - Understanding that death changes family dynamics.
- Emotional Support
 - Understanding
 - Encouraging.
- Age is important.
 - Young widowed parents want to be with other young widowed parents.
 - Young widowed parents want to be with other young widowed parents who have children in the same age range as themselves.

Online Survey Questions

1. What is your gender? (male, female)
2. Were you pregnant at the time of your partner's death? (Yes/No)
3. What is your current age? _____
4. When did your partner die? (month/day/year)
5. How many children under the age of 18 were living with you at the time of your partner's death? _____
6. How many children under the age of 5 were living with you at the time of your partner's death? _____
7. How has your partner's family helped you since his/her death? Please provide specific details. Some examples may include but are not limited to help that involves childcare, food, shopping, financial support, emotional support, home repair, etc. Please explain what the support looked like. For example, what does emotional support look like? Note: Please type N/A if this is not applicable to you.
8. How has your family helped you since the death of your partner? Please provide specific details. . Some examples may include but are not limited to help that involves childcare, food, shopping, financial support, emotional support, home repair, etc. Please explain what the support looked like. For example, what does emotional support look like? Note: Please type N/A if this is not applicable to you.
9. How have your friends helped you since the death of your partner? Please provide specific examples regarding helpful support you have received from your friends since your partner's death. Some examples may include but are not limited to help that involves childcare, food, shopping, financial support, emotional support, home repair etc. Please explain what the support looked like. For example, what does the emotional support that you received look like? Note: Please type N/A if this is not applicable to you.
10. How have other young widowed parents helped you since the death of your partner? Please provide specific examples regarding helpful support you have received; from other young widowed parents. Note: Please type N/A if this is not applicable to you.

11. How has your community supported you since the death of your partner?
Examples of community may include but are not limited to the following: children's school, neighborhood, place of employment , spiritual community etc. Note: Please type N/A if this is not applicable to you.
12. How have professionals helped you since the death of your partner? Please provide specific examples regarding the support you have received from professionals. Examples of this type of support may include but are not limited to grief support, grief education, individual therapy etc. Note: Please type N/A if this is not applicable to you.
13. Was your partner's death expected? Yes No If yes, please explain how your family, in-laws, friends, professionals and/or community helped you prior to your partner's death. Note: Please type N/A if this is not applicable to you.
14. What is something you know now that you wish you would have known soon after your partner's death?
15. What suggestions, recommendations or advice do you have for professionals who work with young widowed parents?
16. What are supportive things people can say to young widowed parents?

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