



Forgotten Grievors: An Exploration of the Grief Experiences of Bereaved Grandparents.

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(Part 1)

Abstract

Current knowledge about bereavement is derived from experiences of spouses, parents or children. A paucity of studies exists regarding grief of grandparents. The aims of this Irish national study were to identify and describe the bereavement experience of grandparents following the death of their grandchild and to explore their needs and supports throughout this experience. A qualitative exploratory descriptive design was employed.

Upon receipt of ethical approval, a multi-pronged sampling strategy was employed. Seventeen persons participated in in-dept interviews. Data was subjected to thematic field analysis through NVIVO. Previous literature noted that grandparents experience 'double pain', meaning that they concurrently experience feelings of loss for their grandchild in addition to observing the pain of their own adult child's grief (Gerner, 1990; Reed, 2000). However, our findings revealed that grandparents experience '*cumulative pain*' i.e. in addition to 'double pain'; they also experience pain from other sources. This study found that the resolution of this pain can be either '*inhibited*' or '*facilitated*' by many factors that occur before, at the time of or following the death. There is a need for bereaved grandparents to be recognized, acknowledged and supported by healthcare professionals and society in general.

Introduction

Current knowledge about bereavement has been derived mostly from the experiences of spouses, parents, and children. There is a paucity of studies on the grief of grandparents. This is possibly due to the fact that when a child dies, parental and sibling grief is the primary focus, with minimal attention on the needs of the bereaved grandparents. Even within the bereaved family, the grandparent's loss may not be fully acknowledged. More broadly, the term 'bereaved grandparent' is not commonly used (Nehari et al, 2007). However, a unique and significant relationship often exists between grandparents and grandchildren. Through the transmission of values, and in serving as a support system in times of crisis, grandparents can play a vital part in the lives of their grandchildren (Hodgson, 1988). It is noteworthy that, owing to general increases in lifespan, not only will it become more common for grandparents to experience the loss of a grandchild, but it will also become more common for that grandchild to have reached adolescence or adulthood. This may add to the complexity of the grief, as the grandchild may have been a friend as well as the source of many fond memories. Clarification is required of the needs of these largely ignored members of society. This paper presents an exploration of grandparental grief in Ireland, proposing a new model of the pain they experience.

Literature Review

An extensive literature search specifically sourcing grandparent's grief yielded three qualitative studies (Ponzetti & Johnson, 1991; Stewart, 2000; Nahari et al, 2007), one quantitative paper (Ponzetti, 1992) and a number of books (Gerner, 1990; Kolf, 1995; and Reed, 2000). The literature suggests that grandparent's pain is unique and is referred to as 'double loss'; 'double pain'; 'double edged' or 'pain from both sides' (Rando, 1986; Gerner, 1990; Reed, 2000). They

concurrently experience feelings of loss, worthlessness and inadequacy for their grandchild in addition to observing the pain of their own adult child's grief (Gerner, 1990; Reed, 2000). From both a parental and grandparental perspective, the literature reports that they often have intense grief reactions following the death of their child/grandchild (Reed, 2000; Meert et al, 2001; Rubin and Malkinson, 2001). This intensity has been attributed to the disruption of expectations in the natural order when parents and grandparents outlive their children or grandchildren (Rando, 1986; Heron et al., 2006).

Grandparents and parents expect to predecease their children and grand children (Ponzetti, 1992; Kolf, 1995; Galinsky, 1999). Grief reactions include guilt, shock, numbness and disbelief, accompanied by intense sadness, emptiness, anger, helplessness and confusion. Feelings of failure are attributed to their inability to protect their children (Kenrickson, 2009). The intensity of these reactions is more severe and exaggerated in parental bereavement than in spousal grief (Videka –Sherman, 1987, Rando, 1988). Since grandparents are also parents, they too experience this same intensity (Ponzetti and Johnston, 1991).

Because grandparents are older, it is assumed they have many experiences of death (Reed, 2003). They may be perceived as being immune to grief or having developed coping strategies, hence requiring less support. Such 'disenfranchisement' results in feelings of isolation (Doka, 1989, 2002). Despite extensive life experiences, grandparents often feel unprepared (Reed, 2000) for an event they never believed they would experience (Reed, 2003). Their resilience is also challenged as many have already dealt with multiple losses in their lives.

There is also the potential for emotional strain that can develop between bereaved parents and grandparents (Rando, 1986; Nahari, 2007). Grandparents may have to fulfill many roles at this difficult time (Reed, 2003). Stewart (2000) found that many placed their own pain second to

supporting family members. This places extraordinary physical, mental, and emotional strain on grandparents. Due to their own grief, bereaved parents may find it difficult to provide emotional support to their own parents and the relationship becomes more distant.

The complexity and depth of grandparental grief needs to be validated through scholarly research (Reed, 2003). Studies similar to those of parental loss need to be undertaken. This requires immediate attention as people are living longer, thus possibly experiencing the death of a grandchild. Clarification of the needs of this unique group is required.

Methods

Study Aim

This study aims to identify and describe the experience of grandparents before, at the time of and following the death of their grandchild and to explore their needs and associated supports throughout this experience.

Study Design

Qualitative methods are most appropriate where there is little known about a phenomenon (Creswell, 2005) and in research that is exploratory and in-depth in nature. In order to understand perceptions and insights of bereaved Grandparents, a qualitative exploratory descriptive design was employed.

Recruitment and Sampling

To maximize awareness and potential participants, much consideration was given to the development of a non-probability sampling strategy. A multidimensional nationwide approach was used. This included approaching the following services/groups to identify potential participants: Formal and Informal Bereavement Supports; Hospice; Primary Health Care,

Community Mental Health; Older Persons, Retirement and Religious Organizations. However, the most effective method was through local and national newspapers, local radio stations and placing advertisements in all local libraries.

The inclusion criteria were that the death of the grandchild occurred a minimum of 6 months previously. This time limit minimized the risk of interviewing persons who were experiencing acute grief.

A combination of volunteer and snowball sampling techniques were used, achieving an initial sample size of 22, with 17 eventually consenting to interview.

Characteristics of the sample

Demographic data indicated that 13 were grandmothers and 4 were grandfathers. Interestingly, the male participants were husbands of 4 of the participating grandmothers.

The age range was from 53 to 84 years; the time since death to time of interview ranged from 6 months to 9 years and the age profile of the deceased was from miscarriage to 20 years.

Interestingly, the bereaved parents in 14 out of the 17 participants were females, i.e. the daughter of the interviewee.

Ethical considerations

The study was governed by the principles of beneficence, non-maleficence, fidelity, justice, veracity, and confidentiality with the participants' well-being taking priority at all times (ABA, 2007). Participants were given written and verbal information. To protect confidentiality, recordings were given code numbers and participants were given pseudonyms. Data was stored in keeping with the Data Protection Act 2003. Ethical approval was granted by "The Research and Education Foundation", Sligo General Hospital.

To develop trust, either researcher, phoned the participant two days prior to the interview. Before

the interview, a list of guidelines was read out (Table 1). This offered permission to express any emotion that surfaced. Disclosure was facilitated in a caring manner. The tape could be stopped at their request. Following the interview, either interviewer debriefed with the participant or if necessary, a list of bereavement support services in the area was left with the person. If a close friend/family member was not available, a mobile number of one of the researchers was left with the person. One week following the interview, a 'follow up' phone call was made to the participants to reflect on the interview. Here an 'unexpected beneficence' emerged, in that all revealed that the interview was challenging yet positive and therapeutic.

Data collection

Data was primarily collected via in-depth one-to-one, semi-structured interviews. Where the participants were spouses, some of grandparents choose to be interviewed together. Both researchers conducted all the interviews, apart from one who requested a female interviewer. This ensured a consistent approach.

The interview started by asking them to "tell us about your grandchild_____ ". A range of questions with 'follow-up' probes was used (Table 2).As new perspectives emerged from initial interviews, the tool was revised. Subsequently, a 'follow-up' interview by phone was conducted with the initial participants to explore revised questions with them.

Interviews were recorded using a digital audio recording device. Duration ranged from 50 minutes to 6 hours. In order to unravel their narratives, some participants required considerable time and frequent breaks. This flexible approach allowed participants to tell their story in their own time.

The setting of choice by the majority was their own home. This proved conducive to allowing narration of their experience in a relaxed environment.

Hand written field notes recorded the researcher's discussion of their thoughts on the events or interactions observed in the field (Corbin and Strauss, 2008).

Data analysis

Data analysis and collection occurred simultaneously, using an analytical process known as the constant comparison method (Corbin and Strauss, 2008). As the initial interviews were completed and transcribed verbatim, the transcripts were imported into N Vivo v8 for analysis. The transcripts were read and re-read repeatedly, interpreted and selected text coded under nodes or themes, each of which was given a title. This framework was used to begin the analysis of the subsequent transcripts. The themes emerging from further interviews were then compared with existing themes from earlier interviews. These emerging themes were validated in subsequent interviews. As coding progressed, titles of the nodes or themes were refined and connections made between groups of themes to identify higher order themes. Eventually a hierarchy of themes (known as a tree) was developed. This process continued until no new concepts were emerging.

Rigor of data analysis.

Certain measures were taken to enhance creditability of the findings. Through the use of reflection, 'follow-up' questions and probes, both researchers continually sought clarification and validation of their interpretation of the participant's narratives. The initial 4 interviews were interpreted and analysed independently by both researchers and the findings were then compared to ensure confirmability. Subsequent themes and subthemes were created between both researchers in continuous discussion. A synopsis of the interviews was returned to 4 of the participants to gain respondent validation.

Findings

Three themes subsequently emerged that encapsulated the bereavement experience, namely ‘*cumulative pain*’, ‘*factors that facilitate*’ and ‘*factors that inhibit*’ the resolution of cumulative pain”.

This paper discusses ‘cumulative pain’ (Figure 1).

Cumulative Pain

Previous literature indicate grandparents experience ‘double pain’ i.e. pain for the loss of their grandchild in addition to pain felt observing their son/daughter grieving the loss of their child. However, this study augments these findings. Rather than ‘double pain’, the notion of ‘cumulative pain’ emanated from the interviews. This concept portrays pain from 5 sources (Figure 1). These are pain: associated with previous bereavements; associated with losing their grandchild; associated with their son/daughter’s pain; associated with subsequent negative changes in their son/daughter and the pain that is common to all grief. These following quotes clearly indicate these sources.

Pain associated with their previous bereavements

The first source of pain was that associated with previous losses in their lives. All had experienced the loss of both parents, while some had experienced the loss of their spouse, their siblings and indeed children of their own through miscarriage, stillbirth or in infancy. The following quotes put these experiences in context:

Was it not enough for me to lose my mother and father when I was a child, my eldest brother when I was a teenager and my husband five years ago. Then I had to go through the loss of _____ (name of grandchild) (Evelyn).

I seemed to have gone through so much loss in my life. Now I had to go through this. It was the final straw (Ellen).

Pain associated with the loss of their grandchild

A number of sub- themes emerged in respect of this theme. Namely, the pain experienced if their grandchild was ill and they waited for the inevitable death. Other sources of pain were that of holding their dead grandchild, the pain experienced following the death of their grandchild and the pain of how their hopes and dreams for their grandchild's futures were shattered.

Regarding the pain of the loss itself, for many it was so intense that they wished they had died themselves. This perceived unfairness and a sense of guilt because their grandchild died before them was expressed numerous times.

Maura's quote sums up these points very well:

This was heart wrenching pain. You would prefer to be dead yourself. It is against the grain and the wrong way around'.

Others referred to the pain they experienced during their grandchild's illness.

The heartache of the long spells in hospital, the drives in the middle of the night to catch a flight, leaving at 2 or 3 o'clock in the morning... I was at home constantly worrying (Geraldine).

Anne went on to describe this time as a rollercoaster.

We were just up and down, up and down the whole time. Ya never knew. We were in the intensive care, the wee creature was struggling, he was under so much pressure.

Evelyn made reference to the same analogy:

It was a bit of a rollercoaster, we were hopeful at times and then at other times our hopes were dashed. We were just up, down up, the whole time.

Some experienced waiting for the grandchild's inevitable death and this intolerable pain:

Unbearable pain. I felt my heart was going to burst...unbelievable bloody awfulness...there is never a sense of relief that he died...some people say – ‘ah it was happy for him, a release for him’, maybe I am selfish but I would have held onto him, I wouldn’t have let him go...it was that God awful pain, waking up in the morning and that pain there like a tonne of bricks ... it was like if someone stuck a knife in and there was no release, nothing could ease the pain (Anne).

Anne had spent some time waiting for her grandchild to die:

His eyes were so sad. They showed wisdom way beyond his years, just whole acceptance when you looked at his eyes my god it just broke my heart looking at his eyes. Maybe he knew that he wasn’t going to survive.

This same grandmother portrays her experience immediately before her grandson’s death.

He was just lying in his mother’s arms and next thing the arm came up and just went down again. I said ‘there you are. He is waving bye bye to you’.

An analogy is used by Jane regarding the pain:

It was the time of the tsunami in Asia and I remember thinking we are going through our own tsunami. The wave had come over us all.

Many grandparents had the painful experience of holding their dead grandchild.

...the baby was there and the nurses were encouraging us to hold him and not to be afraid. I had to be very careful of his little head because it hadn’t properly come together. And I was willing him to breathe ...please breathe.. breathe...But it wasn’t to happen (Maura).

Maura considers what it might have been like for her grandchild at the time of his death:

I think about how my grandchild died in his mother’s womb...what did he feel...was he looking for his mother...did he think ...this is better for me cause at least I am clinging onto my mother when I’m dying... Rather than coming out and dying in doctor’s or nurse’s hands. He was very

much with his mother when he died.

A dream by Ellen seems to encapsulate the difficulty of her letting her grandson go:

I dreamt of chasing this young man but he kept running away and I was not able to catch up. I thought if he stops once, I will catch up on him and with that I woke up. My two hands were stretched out to catch him. I was saying if I had a hold of you, I'd never let you go.

Seamus describes his pain at the time of the funeral:

The funeral was a disaster. You were looking at someone you love go into the grave. My granddaughter should live on and I should be down there.

Seamus provides further insights into his pain here:

I was in the pits of hell. You know if hell is a place of torment then both I and my wife are in hell.

Most of the grandparents referred to the pain of their shattered dreams, i.e. the pain of contemplating on how their hopes and dreams for their grandchild's future were shattered.

We were looking forward to so much, we were deprived of ...oh....colossal pleasure. He was going to bring us nothing but pleasure, something new everyday, he would have achieved so much, he was great at music...(Geraldine)

Ann considered what type of person her grandchild would have been:

He would have been a very accepting child because you often hear that where children who have illnesses are very accepting, very passive.

Jane refers to the pain of missing out on carrying out her grandparent duties:

We were looking forward to this grandchild coming along, to the future and the cuddling and babysitting...

Jane remembers an explanation that made sense to her regarding her grandchild's death:

Christopher Kennelly was on a show. I remember him saying that we grieve the dreams and the future of the child in the same way we grieve the past of the old man. Suddenly it was like the penny dropped. It's the future I'm grieving.

Seamus refers to his pain of seeing his granddaughter's former friends:

I see her friends growing up, girls that went to school with my granddaughter, now going out with fella's and getting jobs and getting married.

Interestingly, when asked to compare the loss of their grandchild with previous bereavements, the loss of the grandchild was deemed to be abnormal and more intense.

Carmel said it was easier to accept her mother's death as it was more normal.

When mummy died I can honestly say it was a happy release for her. We accepted her death. But not our grandchild.

Some grandfathers also commented. Seamus used an analogy:

I make a comparison with the heat of a fire and a volcano. The pain when my mother died was tense. But there was a vast difference when our grandchild died.

Ted, another grandfather stated that nothing compares to the loss of my grandchild while John, stated that he had 'felt' his grandchild's death more than any other.

As well as the pain of losing their grandchild, all of the grandparents shared the pain of witnessing their son or daughter's suffering.

Maura refers to the overwhelming feeling of knowing that her daughter had to go through labour and give birth to a dead baby.

When we knew that _____ (Daughter's name) was going to be induced and that her baby was dead, it was savage, savage pain....when any of my daughter's go into labour, I go through the

labour with them but I was waiting for the arrival of a newborn baby...but this time I had to go through that with her, knowing that she was going to give birth to a dead baby- it was devastating.

Ellen refers to the feeling of helplessness of not being able to take away the pain felt by the parents of her grandchild:

I feel their pain, my son's pain. I wish I could relieve them of this but you can't, they have lost their only child. I find it very hard to cope with my son's pain.

Anne reflects on how inadequate she felt when she tried to deal with her daughter's pain:

I would never wish it on anybody, the abiding pain; the worst was feeling useless, I couldn't stop my daughter's pain. That, is the most god awful pain, it's the worst thing I ever felt in my life. It was only going through this, that I realised the depth of a mother's love. People say that a mother would kill for a child; well I fully understand that now, because I would kill for my daughter.

She refers to the 'double pain' she was experiencing:

It was a double pain because I felt the pain of my child as well as the loss of my grandchild. This was savage, unbelievable pain.

Maura indicated that she would gladly have taken her daughter's pain:

I just couldn't do enough for her. If I could have taken her pain, I would have taken a triple double pain myself.

Pain associated with subsequent negative changes in their son/daughter

Many grandparents referred to the pain of witnessing subsequent negative changes in their son/daughter.

Anne and Geraldine respectively talk about these changes:

She's lost all her confidence and belief in herself. She's a totally different person she's not the confident outgoing bubbly person that she was, her whole personality has changed. It is very painful for me to see these changes. She's full of self doubt about herself, about her ability as a mother.

The pain of losing _____ is beginning to show on her. She was very brave, much too brave at first ... trying to be normal...now I can see she's in bad health ...she is all screwed up... it is very hard to look at ... there is nothing I can do.

Agnes referred to the changes she saw in her own son who went from being a carefree individual to a person considering suicide:

I never slept a wink all night because the fact that he was on his own. Every time we went on holiday after that there was always some worry.

Dympna outlines her feelings:

Now I have lost a daughter and a granddaughter. I feel that I've lost part of my daughter.

Pain common to all grief experiences.

Regarding all grief experiences, the following words used by grandparents illuminate these reactions:

“Disbelief”, “shock”, “devastation”, “anger”, “resentment”, “helplessness”

“confusion”, “loneliness”, “hopelessness”, “being squashed”, “fear” “out of control”

Here Dawn notes the intensity:

I remember me saying I can't handle that you know it was just such a shock. It was terrible, terrible altogether.

Jane reveals a feeling of regret:

I never actually picked up that child and cuddled him...the opportunity never arose at any point.

This is my one regret...I didn't actually hold him

Grandparents referred to the difficult time they experienced during special occasions:

Christmas was just dreadful...the emptiness.... (Geraldine)

Every other grandchild's birthday your thinking ...what would he be doing now...whose pet would he be... (Ann)

Discussion

The literature also alludes to the concept of 'double pain'. Briefly, this concept denotes the duality of the pain felt for the loss of their grandchild in addition to the pain felt from witnessing their adult child's grief (Rando, 1986; Gerner, 1990; Reed, 2000). Although this study corroborates these findings, it also provides further insights. This study found that the pain of losing a grandchild is cumulative and builds from various sources—a new conceptualization of grandparental pain. This cumulative pain was characterized here by the linking together of five specific sources of pain, not necessarily ranked in any order or level of intensity. The majority of the participants experienced all five sources of pain at once, be it before, at the time of, or following the death of their grandchild.

The first origin of pain is that 'associated with previous bereavements'. The aging process involves significant losses such as deceased parents or spouses, possible loss of health and as a result of retirement, older people lose their work, in addition to their social support network. In fact, Malkinson and Bar-Yur (2005) posit that older people's "outside world shrinks" (p.113). These losses and changes have an effect upon the bereavement process during old age. Many of the grandparents interviewed had multiple significant previous losses in their lives. There is a

generally held belief that due to their past experiences of death and loss, many bereaved grandparents may not require much consideration or support (Reed, 2003). This study presents a divergent view, rather than requiring less support, an increased amount is required. Their previous experiences of loss impacted on their level of coping ability and resilience.

A number of Several subthemes of the pain associated with the loss of the grandchild were discerned, the pain during the grandchild's illness, the pain of holding the death grandchild, the pain following the death of the grandchild and the pain of their hopes and dreams for their grandchild being shattered. According to Bowman (1999), the notion of 'shattered dreams' has to do with selected images of oneself or one's family in which one has put high emotional investment. Children represent a parents/grandparents future in terms of generativity. Failure to reach such hopes and dreams results in grieving. According to Malkinson and Bar-Tur, (2005) the death of the future seems integral to the intensity of parental grief responses. This grief of shattered dreams is rarely discussed (Bowman, 1999) and can be hidden and not openly acknowledged. This aspect of grief then becomes disenfranchised (Doka, 1989).

Another contributor to the cumulative pain was the distress of seeing their adult son/daughter's suffering. Rando (1986) referred to the inadequacy felt by grandparents arising from their inability to rescue their child from bereaved parent status. This study substantiates these findings. The participants reported feelings of helplessness and inadequacy at not being able to take away the pain of the parents. These findings illuminate the breadth and intensity of the anguish related to the loss of their grandchild.

The authors are aware of no previous grandparental grief literature alluded to the next finding 'pain associated with subsequent negative changes in their son/daughter'. This new and interesting concept was expressed by the majority of the participants. Some perceived their

bereaved son/daughters as having reduced confidence in their ability as parents, reduced self esteem, and increased self doubt and personality changes. In effect, this implies that grandparents not only experience the pain of losing their grandchild, they are also subjected to a fundamental transformation in their own son/daughter's identity. However, a number of studies that examined parental grief, describe the impact on the bereaved parent themselves as being transformative in nature (Arnold and Buschman Gemma, 2008) and causing problematic emotions (Barr and Cacciatore, 2008). In other words, the impact of the death of a child can cause a wide range of life changes; in particular, parents feel the loss of a sense of personal competence, worth, control and power (Arnold and Buschman Gemma, 2008; Barr and Cacciatore, 2008). Interestingly, Malkinson and Bar-Tur (2005) note that parents report the loss of part of one's self. This coincides with the view presented in the literature surrounding sibling loss. They too experience a 'double loss'. Siblings not only have to deal with the loss of a sister or brother but also a significant part of their parents. The latter loss stems from the reality that siblings find themselves in having to deal with their parents being immersed and preoccupied with the grief for their deceased child which reduces their ability to take care of the needs of their other children (Malkinson and Bar-Tur, 2005).

Concerning the 'pain common to all grief experiences', previous studies have reported that grandparents experience the similar intense reactions as parents, to the death of a child.

Although parents were more likely to note grief reactions, such as shock, disbelief and numbness, than grandparents, physical symptoms such as insomnia, were equally reported among both groups (Ponzetti and Johnston, 1991; Ponzetti, 1992). Similarly, this study revealed comparable reactions from bereaved grandparents. It found that various characteristics of grief in

bereaved grandparents descriptions validated all of the range of psycho-physiological elements involved in the grieving process (Kubler-Ross, 1969; Stroebe & Schutt, 1996; Neimeyer, 2001).

During this study, a very special and poignant relationship developed between the grandparents and the researchers. This relationship fostered an openness and sharing of vivid stories of the grandparents inner world, in many cases, previously unshared. These narratives were accompanied by great emotions and in many cases tears. Despite the fact that some grandparents had lost their grandchild 9 years previous, most did not find it difficult to reconstruct the minute details of the pain experienced before, at the time of and since the death of their grandchild. For the researcher's themselves, in listening to the voices of the grandparents, it touched upon the very essence of our own transience and made us mindful of fragility of life.

The death of a child is traumatic, profound and a painful experience. Many studies have demonstrated that the greatest and most stressful and enduring loss occurs for parents who experience the death of a child (Rando, 1986, Rubin and Malkinson, 2001). In view of the findings of this study, grandparents grief is unique and complex with far reaching effects on the individual. Findings of the study point to the collective magnitude of grief in the grandparents world. This presents a new model of model for interpreting and viewing the grandparents pain following the loss of a grandchild.

This provides an interesting starting point for further research into grandparental grief. Future studies may validate the current findings. More qualitative research exploring the in-depth nature

of cumulative pain is warranted. Quantitatively, variations in the effects of losing a grandchild or in the intensity of the grief reaction could be examined for differences in several variables, e.g. the gender of the bereaved grandparent, the age of the deceased grandchild, the closeness of the relationship between the grandparent and grandchild, and the cause of the grandchild's death. A future paper will explore the range of factors that facilitated and inhibited the resolution of these particular grandparents' grief.

Limitations

The limitations of this study come from the size and nature of the sample. The data was predominantly gleaned from females—although specific efforts were made to recruit males, the number of grandfathers in the sample remained small. The data was also largely obtained from maternal grandparents, and it is possible that different findings and themes would emerge from the study of paternal grandparents. In addition, the participants were all Irish nationals, and it would be interesting to see how the findings would differ among people of different nationalities, as well as among people with different religious beliefs, cultures, systems of support, etc. Finally, although there was a wide range in the age profile of the deceased, this was not a longitudinal study, and future research should examine how the nature of grandparental grief may change over time.

Conclusion

In conclusion, grandparent's grief is often complex and multi-faceted. Previous literature acknowledged the concept of 'double pain', implying the pain felt for the loss of their grandchild and that of watching their adult child's grief. There is also recognition that most grandparents will have experienced the pain of previous bereavements. This study provides empirical

validation in this regard. It also adds that grandparents also realize that the loss of a grandchild results in subsequent negative changes in their bereaved son/daughter. What is most noteworthy is the consistent cumulative nature of grandparent's grief. A second paper will explore the range of factors that can either facilitate or inhibit the resolution of the cumulative pain of grandparents' grief.

Keywords – 'grandparent', 'grief', 'bereavement' 'grandchild', 'qualitative'.

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References

- An Bord Altranais (2007) *Guidance to Nurses and Midwives Regarding Ethical Conduct of Nursing and Midwifery Research*. An Bord Altranais, Dublin
- Arnold J and Buschman Gemma P (2008) The continuing process of parental grief. *Death Studies* 32: 658-673
- Barr P, Cacciatore J (2008) Problematic emotions and maternal grief *Omega* 56(4):331-348
- Bowman T (1999) Shattered dreams, resiliency, and hope: "Restorying" after loss. *J Pers Interpers Loss* 4: 179-193
- Corbin J Strauss A (2008) *Basics of Qualitative Research 3rd edn*. Sage Publications, London
- Doka KJ (1989) *Disenfranchised Grief: Recognizing Hidden Sorrow*. Lexington Books, Lexington, Massachusetts
- Doka KJ (2002) *Disenfranchised Grief: New Directions, Challenges, and Strategies for Practice*. Research Press, Champaign, Illinois
- Galinsky N (1999). *When a Grandchild Dies: What to Do, What to Say, How to Cope*. Sky Publishing, Houston
- Gerner MH (1990) *For Bereaved Grandparents*. Centering Corporation, Omaha
- Creswell JW (2005) *Educational Research: Planning, Conducting and Evaluating Quantitative and Qualitative Research*. 2nd edn. Pearson Education, New Jersey
- Heron M, Hoyert DL, Murphy SL, Xu J, Kochanek KD, Tejada-Vera B (2006) Deaths: Final data for 2006. *Natl Vital Stat Rep* 57(14): 1-134
- Hendrickson KC (2009) Morbidity, mortality, and parental grief: a review of the literature on the relationship between the death of a child and the subsequent health of parents. *Palliat Support Care* 7(1): 109-34
- Hodgson LG (1988) Grandparents and older grandchildren. In: Szinovacz ME, ed. *Handbook on Grandparenthood*. Greenwood, Westport, Connecticut: 171-83
- Higgins A, Glacken M (2009) Sculpting the distress: easing or exacerbating the grief experience of same-sex couples. *Int J Palliat Nurs* 15 (4): 179-6
- Kolf JC (1995) *Grandma's Tears: Comfort for Grieving Grandparents*. Baker Books, Grand Rapids, Michigan
- Kubler-Ross E (1969) *On Death and Dying*. Macmillan, New York
- Malkinson R, Bar-Tur L, (2005) Long term bereavement processes of older parents: The three of grief *Omega* 50 (2): 103-129
- Meert KL, Thurston CS, Thomas R (2001) Parental coping and bereavement outcome after the death of a child in the paediatric intensive care unit. *Paediatr Crit Care Med* 2(4): 324-8
- Nehari M, Grebler D, Toren A (2007) A voice unheard: grandparents grief over children who died of cancer. *Mortality* 12(1): 66-78
- Neimeyer RA (2001) *Meaning Reconstruction and the Experience of Loss*. American Psychological Association, Washington DC
- Ponzetti JJ, Johnson MA (1991) The forgotten grievers: grandparents reactions to the death of grandchildren. *Death Studies* 15(2): 157-67
- Ponzetti JJ (1992) Bereaved families: a comparison of parents' and grandparents' reactions to the death of a child. *Omega: J Death Dying* 25 (1): 63-71
- Rando TA (1986) *Parental Loss of a Child*. Research Press, Champaign, Illinois

- Rando TA (1988) *Grieving: How to Go on Living When Someone You Love Dies*. Lexington Books, Massachusetts
- Reed ML (2000) *Grandparents Cry Twice: Help for Bereaved Grandparents*. Baywood, New York
- Reed ML (2003) Grandparents Grief – Who is listening? *The Forum Newsletter* **29**(1): 1–3
- Rubin SS, Malkinson R (2001) Parental response to child loss across the life cycle: clinical and research perspectives. In: Stroebe MS, Hansson RO, Stroebe W, Schut H, eds. *Handbook of Bereavement Research: Consequences, Coping and Care*. American Psychological Association, Washington DC: 219–40
- Stewart AJ (2000) When an infant grandchild dies: family matters. Doctoral Thesis, University of Wellington
- Stroebe M, Schutt H (1999) The dual process model of coping with bereavement: rationale and description. *Death Stud* **23**(3): 197–224
- Videka-Sherman L (1987) Research on the effect of parental bereavement: implications for social work intervention. *Soc Serv Rev* **61**(1): 102–16

Table 1

List of guidelines given at the start of each interview.

- _____ we would like to hear about your experiences of losing _____(grandchild's name), what your thoughts and feelings were/are on the loss of _____(grandchild's name),
- You can respond anyway you like, you can cry, shout, get upset, get angry...
- In relation to some of these questions, it may be the first time you have had to think about what the question is posing, so before you respond, take that time to think about it and do not rush in with an answer
- There are no right/wrong answers
- You can pass on any question
- Try and be as open and honest as you can, remember everything you say to us is confidential
- There are no constraints on time
- We want to find your experiences from your perspective as a grandmother/father

Table 2

Topics Addressed in Interviews
<ul style="list-style-type: none">• Participants Demographic Details• Relationship with deceased grandchild• Role and responsibilities - pre death/at time of death/post death e.g. level of involvement in decision-making, provision of a supportive role• Emotional Response – identification of emotions experienced and expressed• Coping mechanisms- what grandparents found helpful and unhelpful• Family dynamics – impact of death on family, on relationship with bereaved children and on relationship with partner• Contact with health professionals-level and perceptions of contact

Figure 1

'Cumulative Pain'

5 Sources

