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THE SOCIAL CONSTRUCTION OF GRIEF ASSOCIATED WITH SUDDEN DEATH

A Thesis presented in partial fulfilment of the requirements for the degree of Master of Arts in Psychology at Massey University.

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1998
ABSTRACT

This research explores how grief is socially constructed, by analysis of the everyday language people use when talking about grief associated with the sudden or unexpected death of a family member. The study deconstructs grief talk in transcripts of interviews with ten participants recently bereaved. The texts were read and discourses producing grief and subjectivity are illustrated. With grief being constituted through language, this was analysed by use of Potter and Wetherell (1992) model of discourse analysis.

The study tends to support the notion that there are idiosyncratic aspects to grief which are constructed and constituted in multiple discourses. Grief, is constructed as inner complex emotions that are influenced by social and cultural factors which bring understanding and meaning to the loss. Grief is something that people 'do' rather than something that is 'done' to them, and therefore, is personal management as people deal and cope with a mixture of other emotions and thoughts which are embodied within the individual. These emotions and thoughts to some extent are able to be controlled. Grief, although an inner complex emotional response to death, is dealt with and managed in social relatedness. However, there are aspects of grief that could not be constructed linguistically, suggesting that grief is not entirely socially or culturally constituted. Thus, there may be aspects to grief which are never resolved, as there are no words to give meaning to that experience. Grief, has many determinants which affect the outcome of bereavement.
I wish to acknowledge the co-operation and courage of the ten people who took part in this study. Their accounts of their experience provided a rich source of material for exploring the issues of how grief is socially constructed.

Special acknowledgement and sincere thanks are due to my supervisor Dr Keith Tuffin, who has encouraged, inspired and guided me through this thesis. His support and valuable criticism at appropriate stages of the study kept me going.

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INTRODUCTION

This thesis is a study of grief associated with the sudden or unexpected death of a family member. Grief has been approached from a social constructionist perspective in that participants were interviewed and their discourse analysed using Potter and Wetherell (1992) model of discourse analysis. The premise on which this research is based is that grief is constituted in discourse, that is, in language and social practice.

With any loss there is grief (Glassock and Gressor, 1992), but the nature of the loss often determines the grief response. Factors associated with a sudden or unexpected death, for example, suicide, homicide, accident or heart attack differ from those associated with an anticipated death or death after prolonged or terminal illness. Death involves great changes and adjustment, often inconveniences and pain, but may also involve joy, reunion, and a new beginning (Kubler-Ross, 1981). With an anticipated death, there is time to prepare. The death can be shared and can be a moving experience, bringing families closer together as they share the pain and agony of the expected loss, but also the joy and growth experienced as good times are remembered and preparations are made for the death. It allows for the expression of feelings and coming to terms of the pending death, and in some cases the eventual death can be seen as a blessing. With sudden or unexpected death, there is no preparation time to come to terms with the loss. There are no opportunities to deal with any unresolved issues or farewell the deceased, and generally the nature of death is quite violent, unnatural and surrounded with publicity. When death occurs from sudden, unexpected circumstances, bereavement reactions are more severe, exaggerated and complicated (Redmond, 1996). Major characteristics experienced as a result of
sudden death include cognitive dissonance, disbelief, conflict of values and belief systems, and withdrawal from support due to the stigma. There is also fear and vulnerability, anger, shame, guilt and emotional withdrawal. Bereavement is also complicated by inadequate understanding and support from community agencies, and lack of acknowledgement from society increases the feelings of loss of control (Redmond, 1996). This study focuses on grief from this perspective of sudden or unexpected death.

When talking about grief it is important to understand three psycho-social terms which are frequently confused. These terms are crucial in understanding the manifestations and practical implications for each application. The terms are bereavement, grief and mourning.

"Bereavement is an objective state or condition of deprivation which is followed or accompanied by the process of grief. Grief is a psychic state or condition of mental anguish, and it is the result of or in anticipation of the bereavement. Mourning is a social state or condition expressing the grief because of the bereavement."

(Pine, 1996, p.103)

Grief has many determinants which affects the outcome of bereavement. However, most psychological research on emotions and grief, in the last several decades have presumed a model in which emotions are construed as internal states, which have expressive, subjective and physiological components (Ginsburg & Harrington, 1996). However, grief reactions are also culturally constructed, quite apart from the differences of individual personalities around cultural norms (Stearns & Knapp, 1996). In this sense, grief is not purely a response to a loss, it is dependant on an evolving cultural context, highly sensitive to functional and larger cultural issues (Stearns & Knapp). That is, a person's response to a loss is influenced, not only by the significance of the loss, but how grieving is perceived.
to be appropriate in that person's culture, and how that person lives and interacts with that social and cultural environment. Therefore, to give meaning to a person's response to a loss caused by a sudden death, it is necessary to understand the social relations in which the individual lives (Wertsch, 1991). This can be explored by analysis of the everyday language people use when describing their experience of a sudden and unexpected loss. The focus of this analysis needs to be on the linguistic resources which people have available to them as they talk about their grief. That is, the meaning given to the experience of loss for individual's depends upon the linguistic resources available to construct that experience. In this way grief is socially constructed.

Information we have about grief comes largely from research conducted under the traditional empiricist paradigm. Our expectations about grief, and what grieving means to us, are generally reflected in the literature with the underlying assumption that grieving is a 'process' which people must go through as they face up to their loss (Westberg, 1990). This present knowledge and understanding about grief suggests that grief occurs when a love tie is severed, and a reaction - emotional and behavioural, is set in train (Parkes, 1986). For example, Gyulay (1989) describes this reaction:

"There is no pain like the pain of grief. It effects every facet of one's personhood. One's entire being - physically, emotionally, socially, spiritually, cognitively and behaviourally - is touched. There is no particular order to these effects. They are essentially interactive. Grief is called grief work. It is the most difficult and painful work one does in life".

(Gyulay, 1989, p.1)

This suggests that the fundamental substrate of grief is the emotional response to loss. Underlying emotions here can include sadness, sorrow, depression, relief,
anger, guilt and anxiety (Worden, 1982). Although grief seems to be a universal response to bereavement (Parkes, 1988), the expression of the emotions of grief is culturally influenced (Barbato & Irwin, 1992). This cultural aspect to the expression of grief comes about in the context of social demands placed on people, so that they become socialised into the culture's valued emotion-meaning systems (Saani, 1990). Sociologist, Gordon (1989) used the term "emotional competence" in reference to this understanding. Saani, suggests that "children learn the emotional behaviours, norms, and symbols of their culture (or subculture) as unintended consequences of social interaction" (Saani, 1990, p.115). Thus, children are seen as active creators of their emotional life. Gordon states:

"Having understood the cultural meaning of an emotion, children become able to act toward it - magnifying, suppressing, or simulating it in themselves, and evoking or avoiding it in other people".

(Gordon, 1989, p.324).

In this sense, emotional experience and development comes via relationships and through a social process. This social process can be seen clearly in the evidence that parents treat their infant girls differently from their boys with respect to their emotional experience (Brody and Hall, 1993). It is here that we see that the emotional range of males is often constricted by their socialisation; and although females are permitted a greater range, certain emotions are often culturally censured (Brody and Hall). In this sense, culture tends to place females in a double-bind, allowing them to be emotional but devaluing them for it (Landman, 1996).

Understanding emotions that are associated with grief are complex, as there are many factors which influence the grief response. Grief intensities also vary with the level of acquaintance and the kind of death (Stearns and Knapp, 1996). It has
been assumed that grief is a basic reaction to a loss, but grief is also a variable (Averill and Nunley, 1988). Not only does the intensity vary from one individual to the next, its manifestations and its very nature varies from one culture to the next (Stearns and Knapp, 1996). In this sense cultural construction of grief means:

"that grief can be understood in part through comparisons between contemporary Western patterns and those of other societies but also through tracing major shifts in grief culture that have led up to these same contemporary patterns"

(Stearns & Knapp, 1996, p.132)

In the past 150 years there have been massive transitions in the manner people perceive and experience grief. That is, grief is not a constant, but varies depending upon social and cultural influences. This shift has come about in response to changes in attachments in the family and shifts in actual patterns of death (Stearns and Knapp, 1996). For example; one historical transition is the intensification of grief since the early nineteenth century (Lofland, 1985). Although grief with its associated emotions was felt by people in Western Europe and Colonial America during this era it appears to have been muted. Stearns and Knapp (1996) suggest three related constraints responsible for this - religion, emotional and economic ties, and the nature of the death itself. These factors operated to mute or restrain open displays of grief, and possibly grief itself. Firstly, it was assumed that grief could demote undue attachment to worldly ties, rather than appropriate focus on God's majesty (Stannard, 1976). That is, religion through the church did not encourage people to grieve. People were taught to fear death rather than openly grieve. Secondly, emotional ties within families were usually somewhat muted. Often marriages were not based on emotional attraction, and there were not intense emotional attachments between parent and child. Economic factors were also evident and these often lessened the impact of grief.
For instance, a death in a family often was seen as keeping the family at a manageable size, while the death of an older parent was often welcomed as the younger generation was often able to inherit land and wealth (Stearns and Knapp, 1996). Thirdly, the nature of death itself often cushioned against grief. Passing away in mature years was labelled as a 'good death'. A timely death meant that in close knit communities, emotional support was readily available and this reduced the need to grieve (Stearns and Knapp, 1996).

However, over the past 100 years the community setting for grief has declined in some instances, as one recent study indicates (Wells, 1994). This has possibly meant that people need to grieve to elicit support from friends and relatives. Two cultural shifts that have taken place to move people towards grief have been, firstly, that love is now emphasised in middle class families (Lystra, 1989). Couples now tend to form relationships that are based on intense emotion. The emotional ties within families are far greater now than 150 years ago. This enhancement of emotional tie has come about as the declining death rate of children has meant that parents can place greater emotional energy into their relationship with their children. A child is not expected to die, and the inheritance from older parents is not so important in today's economy and this has left room for sentimental tenderness (Stearns and Knapp, 1996). Secondly, peoples' perspective of enlightenment through scientific advancement and greater awareness of the issues of grief has made some deaths seem inappropriate (Stearns and Knapp, 1996). Today the death of a child is difficult to cope with and understand. There is much information available today about caring for children, and associated with this information comes criticism of faulty parental practices that lead to unnecessary children's deaths. It is possible that the feeling of guilt associated with the death of a child or family member may have developed with these changing attitudes towards death. Thus, comparing nineteenth century
middle-class culture with today's, it appears that cultural change rather than any concrete functional shift is the reason for variation in the manner in which people grieve.

Much of the traditional research has explored grief - its nature, the emotions associated with it, the process of 'grief work' and how to cope with it from the perspective that grief is a physiological and mental reaction. More recent work in social psychology asserts that events in the world are understood in the context in which they occur (Sarbin, 1986), and that:

"Emplotment, the activity and operation of a narrative, organises the life events and experiences into a coherent, ever-evolving life story. These stories help a person to understand and respond adaptively to life's occurrences".

(Neimeyer & Stewart, 1996, p.360)

This approach suggests a 'discursive' model of grief (Potter & Wetherell, 1992). That is, a person may at any moment construct grief using whatever linguistic resources available to them. In this way, grief can be described in specific or general terms depending upon the context. The participants talk will reveal their particular and different constructions of grief as they describe their experience. My concern in this study is with how grieved people construct their experience and understanding of grief. That is, to derive meaning about grief this study focuses on the linguistic resources people have available to them to talk about grief. In this way, it is the language which is embedded in cultural forms of life, that gives meaning to grief. In this sense, language which people use is significant not by virtue of its capacity to reveal, mark, or describe mental states, but from its function in social interchange (Gergen, 1995).

Chapter One describes the particular perspective of the research approach chosen
for this study. I also outline my reasons for using this methodology as opposed to traditional empirically based quantitative research. Chapter Two develops the theoretical background reviewing grief from a historical perspective to a more contemporary cultural, emotional and social perspective. The constructionist approach is also reviewed. In Chapter Three, the methodology for this study is described. An open-ended interview was used to document the accounts of ten people in relation to their experiences and constructions of grief. The method of analysis of the interview transcripts along with a discussion of ethical concerns are also included in this chapter. In Chapters Four to Six the analysis and some discussion is outlined. This deals with those extracts which relate to the issues of grief and associated factors. The participants' emplotment of grief included several overlapping resources in discussing and describing their grief, and their construction suggests that grief is embodied emotions and thoughts, constituted through social and cultural factors. The discussion and conclusions are presented in Chapter Seven.
CHAPTER ONE

THE RESEARCH APPROACH - DISCOURSE ANALYSIS

My interest in Discourse Analysis came about initially while studying social psychology at a Post Graduate level. Although I had found the empirical approach using statistical data analysis appropriate for research in many areas, my interest was in coming to understand how people socially construct their world, thereby giving meaning to it. I have found this approach to be an empowering and rich resource rather than a body of "facts" to be learnt.

The move towards social constructionism in the social sciences questions psychology's traditional understanding of the person. If we take the view that the social world is like the natural world, that is, hard, external and objective, then appropriate scientific investigation would be predominantly quantitative. However, if one is to take the view of social reality which stresses the importance of the subjective experience of individuals in the creation of the social world, then the research for understanding must come from alternative methods (Cohen and Manion, 1991).

In Psychology, the study of individuals is important, but the purpose for studying individuals is generally to isolate variables and then measure how those variables differ across various conditions or situations. The potential rich source of subjective understanding is neglected in this form of methodology. That is, a subjective approach to interpreting social reality is where there is a search for meaningful relationships and the discovery of their consequences for action. This
Discourse analysis focuses upon people's talk and text.

"Its primary concern is with the ways in which different types of actions are produced and managed" (Cohen and Manion, 1991, p.253).

The term 'discourse' has been used in many forms by various disciplines in science. Gilbert and Mulkay (1984, cited in Potter and Wetherell, 1992) suggests that discourse is a term used to cover all forms of social interaction - spoken language and written texts of all kinds. However, my use of this approach, is to gain a better understanding of how people use language to construct their story, and also in identifying variations and function in their accounts of grief.

"Discourse analysis has a triple concern with action, construction and variability (Potter and Wetherell, 1987/92). In saying and writing things, people perform social actions. The specific features of these actions are a product of constructing talk and text out of a range of styles, linguistic resources and rhetorical devices. Part of the interest of analysis is in this constructive process. Since talk and texts are action orientated, versions are likely to show variability according to the different interactional contexts they are constructed to serve. Variation in accounts provides another important lever for discourse analytical work, revealing the situated and functional character of versions". (Edwards and Potter, 1992, p.28)

Thus, language then is not the conveyer of social life, but rather it essentially has a constructive purpose. That is, people use language to construct versions of their social world. One of the principals of discourse analysis is that function involves construction of versions, and that this is demonstrated by language variation (Potter and Wetherell, 1992). In using discourse analysis to explore meaning and
beliefs, these must be represented in the language that is used. If the meaning of grief is discursively constituted, an individual's account of their grief will be constituted as a function of the various linguistic resources available to them. The way that a person talks about their grief may reveal consistency, but may also reveal contradictions and inconsistencies.

People are always constructing versions of events (Potter and Wetherell, 1992), and because of subjectivity, their accounts of the event will vary. In this way, several different accounts of an event can validly operate simultaneously in any particular setting. Thus, discourse analysis accepts and focuses on diversity and flexibility as characteristic of peoples discourses, and rejects consistency, and one correct outcome in reality. Language is both constructed and constructive and is used for a variety of functions. Therefore, the use of language has a variety of consequences. For example, the experience of grief can be described in a number of ways which means there will be considerable variation in accounts. Because of this possible variation and the sensitivities surrounding grief, and keeping with ethical concerns about the participants well-being, I believe the discourse analysis approach offers a viable option for understanding a person's experience of grief. Discourse analysis accepts individual accounts of reality as essentially constructive features in their own right. This is unlike traditional positivist empirical methods which accept subjective accounts only to the extent that they can be used for the development of general rules concerning human behaviour.

There are a number of approaches, and therefore, consequently various meanings in the use of the term discourse. The approach I have taken is that used by Potter and Wetherell (1992) and Edwards and Potter (1992). Four underpinning concepts to this approach which provide the basis of their rationale for discourse analysis are Function, Construction, Variation and Interpretive Repertoires.
Although Function, Construction and Variation have already been discussed, a brief definition of each is now outlined.

**Function** - This term is used to stress that people use language to 'do things'. That is, talk is action and outcome orientated and serves a purposes, for example, to order and request, persuade and accuse. The function of language may be specific or global, and the purpose of discourse analysis is to determine the different functions performed by a person's account.

**Construction** - Potter and Wetherell (1992) suggest that people use language to construct versions of the social world. This suggests that accounts of events are established out of a variety of pre-existing linguistic resources. That is, constructions are actively chosen from a range of available possibilities and resources, with some resources being included and others omitted. The result being that each account is potent in that there are consequences in the nature of accounts. In this sense, accounts of events construct a particular reality, and often serve specific functions.

**Variation** - Each person's account of an event varies according to its function. That is, an account will vary depending on the purpose of the talk and what the speaker is trying to achieve or convey. For example, the accounts of two people who describe an event will vary, and this variation will be determined by how each person perceives the outcome of the event in relation to their own purpose.

**Interpretive Repertoire** - This refers to the way of understanding the linguistic devices that people use in constructing their accounts of events (Burr, 1997). That is, interpretive repertoires can be seen as a set of resources for people to use as they construct their accounts. They are the building blocks which are "constituted
out of a restricted range of terms used in a specific stylistic and grammatical fashion" (Wetherell and Potter, 1988, cited in Burr, 1997, p.116). The set of words or linguistic terms which people draw upon in their account are chosen so that a particular effect or purpose can be achieved.

I must point out also that it is not just the language used by the participants that is important in this study, my own orientation and the discourses I choose as a researcher are equally important. Further, the analysis and reporting in this study are indicative of my positioning as the researcher. Within the research practice of discourse analysis this is referred to as 'reflexivity'. Reflexivity means that talk has the property of being about actions, events and situations, and at the same time being part of those things (Potter and Wetherell, 1992), in this case my reporting of the accounts becomes a part of the process. That is, my reporting is a construction of the participants constructed language use. Therefore, my accounting cannot be taken to reveal a 'truth' lying within the text, as I must acknowledge that these research findings are open to other, potentially equally valid, readings. The entire process becomes integral and constructive.

Edwards and Potter argue that in natural discourse, talk about events and happenings is designed in particular ways "to allow inferences about mental life and cognition" (Edwards and Potter, 1992, p.142) - and "particularly inferences about emotions" (Bamberg 1997, p.219). Bamberg is suggesting that emotions are linguistically constructed in that people only have the use of language to explain or describe a particular emotion or feeling. Using language to explore emotions, is not the only approach that can be undertaken. Emotions can be expressed non-verbally, for example, facial expression, body postures and gestures, and the like. My interest in studying how people socially construct their grief, and therefore, the metaphors used to describe emotions must be the focus.
Discourse analysis offers a means of elaborating and analysing language within the specific contextual constructions as it relates to and constitutes grief. It enables the focus of the study to remain on the inter-relatedness between language and emotions, and not seeing them to be two concurrent parallel systems which interact.
CHAPTER TWO

LITERATURE REVIEW

This chapter explores the concept of grief, how it has emerged through traditional research methods, and how these methods have helped in our understanding of grief. First I will look at traditional theories and approaches to understanding grief, specifically early empirical work that led to the development of stage models. Next I will consider the contemporary work associated with emotional, social and other idiosyncratic factors as it relates to grief. As contemporary literature is overviewed, the focus shifts from grief as a 'process', to the way people use language to constitute meaning of grief. Research of this kind is more than a presentation of the research findings, the methodology constitutes part of the confirmation and validation procedures itself (Potter & Wetherell, 1992). Therefore, literature on discourse analysis is also reviewed, especially the theoretical development of language research from the ethnomethodological perspective.

Theoretical background

Traditional theoretical approaches to grief have tended to fall into two broad categories, descriptive (e.g. Freud, 1917) and process (e.g. Gorer, 1965; Kubler-Ross, 1969) theories. Descriptive theories tend to describe the phenomenology of the grief process in a basic descriptive way which seeks to make the course of grief more perceptible, without giving any understanding how the grief responses occur. On the other hand, process theories of grief seek to model the psychological mechanisms underlying grief and to presume the
purposes served by these mechanisms (Barbato & Irwin, 1992). That is, it is inferred from psychological models on grief that there are underlying mechanisms that are set, leading to the expectation that these mechanisms are present in all grief responses. The study of grief has often been included with the study of emotions. Grief literature recognises that emotions, such as, sadness, anger, and depression come with grieving. Subsequent behaviour or reactions of these emotions, for example, denial, protest, despair and reorganisation or adaption (Averill & Nunley, 1988), do suggests a 'process' model of grief. That is, literature on emotions implies an inner state which influences behaviour and therefore is seen as a grief mechanism (Stearns, 1993). According to this approach an emotion is a feeling, or at least an experience which involves feelings. In this case, emotion words tend to name feelings with the assumption that each word corresponds to a qualitatively distinct experience which may find expression in outward behaviour (Bedford, 1986).

The most influential early theoretical contribution of these theories has emerged from the psychoanalytic tradition, especially Freud (1917), Lindemann (1944) and more recently, the attachment theories of Bowlby (1980). These theories have assisted greatly in understanding emotional symptomatology in response to loss (Stroebe, Stroebe & Hansson, 1994). For example, in traditional research, grief has been considered as an emotional response to loss, and this emotional response has been construed as internal states which have expressive, subjective and physiological components (Ginsburg & Harrington, 1996). In classical psychoanalytical theory grieving was considered purely an individual response to loss with the individual needing to withdraw from the outside world to grieve. Thus social isolation was required for the individual to work through the painful task of detachment from the lost loved one (Stroebe, Stroebe & Hansson, 1988). The trend in these theoretical and empirical works inclines to address grief
responses as fundamental and possibly universal (Winslow & Catlin, 1992). This has led to viewing 'recovery' from grief as a process which seems to have intermeshed phases (Weiss, 1988). The phases of recovery from grief have regularly been identified and named, following Bowlby (1980), as shock, protest, despair, and then a long interval of adaption. Models of grief, for example, Westberg (1990), have developed from such work.

Although "process" models of grief are helpful in creating a baseline for understanding and normalising grief reactions and recovery, they tend to view death or loss as objective reality and assume universal stages or tasks of recovery. Traditional grief theory also casts the griever in a passive role, left alone to negotiate a course of psychological transition forced upon them by outside events. In this sense grief has been seen as prescriptive and therefore pathologises 'abnormal' grieving. This has led to the focus being on emotional reactions to exclusion of meanings and actions, and emphasises efficient return to 'normal' functioning. It has also tended to privatise grief as experience of an isolated individual, experienced outside the context of human relatedness (Neimeyer, 1997).

**Contemporary literature**

In recent times, research into grief includes contributions from a wide variety of perspectives and disciplines, including psychiatry, public health, sociology, gerontology, and social and physiological psychology (Stroebe, Stroebe & Hansson, 1988). Current literature focuses on the multidimensional approach to understanding and assessing grief. There has been a shift from researching grief purely as an emotional response, and this has increased awareness of idiosyncrasies associated with grief. For example, research by Shuchter & Zisook (1986) was based upon six relatively independent dimensions of grief experienced
by 350 widows and widowers in an ongoing longitudinal study. These dimensions include, emotional and cognitive responses to the death of a spouse; coping with emotional pain; the continuing relationship with the deceased; changes in functioning; changes in relationships; and changes in identity. Shuchter and Zisook argue for a multidimensional approach to assessing grief because of its diverse nature. However, to date there are no common strategies for assessing the psychological reaction of bereavement.

"A small number of instruments have emerged that may be useful in research and clinical efforts pertaining to grief. However, these instruments vary considerably in scope, in their specificity to grief (as compared to loss or stress generally), and in their relative emphasis on affective, cognitive, physiological, behavioural, or attitudinal disruption. They also differ widely in the rigor of their theoretical underpinnings, in level of conceptual and psychometric development, in their intended purpose".

(Hansson, Carpenter & Fairchild, 1994, p.63).

Multidimensional instruments for measures of grief, such as, The Grief Experience Inventory (Sanders, Mauger, & Strong, 1985) and the Texas Revised Inventory of Grief (Faschingbauer, Zisook, & De Vaul, 1987) tend to characterise symptomatology rather than the grieving process or adaptive behaviours. That is, assessment focus has tended to be on negative emotional states and the social -behavioural reactions which accompany such states. In some contemporary social psychology literature, theories of grieving are currently shifting away from a stagic conception of the 'recovery curve', and toward richer and more idiographic formulations. For example, contemporary research such as Elders (1993) discusses the treatment of mourners and bereaved that include social, cultural and ethnic factors which influence the grief response. These factors may include support systems, normative beliefs about the type of reaction, economic status, education levels, use of rites and physiological factors. Grief is a complex issue
and no one approach is sufficient.

"Grief is not a linear process with concrete boundaries but, rather, a composite of overlapping, fluid phases that vary from person to person".  
(Shuchter & Zisook, 1994, p.23)

For example, Stearns and Knapp, (1996), suggest that grief is not purely a response, but is conditioned by its dependence upon cultural context and cultural issues. Historical studies have shown that individuals in western cultures have grieved differently over time. For example, cross cultural studies shows an infinite variety in the responses of people to death and in the internalisation of the lost person (Hagman, 1995). Hagman, proposes that rather than being process orientated, mourning should be seen as an adaptive response to specific tasks which arise from the loss. These tasks must be dealt with regardless of individual, cultural, or historical era (Hagman, 1995). Although there are cultural similarities in grieving, that is, most people seem to grieve the loss of somebody close to them (Rosenblatt, Walsh & Jackson, 1976), cultures do differ in how they define loss and what is considered an appropriate expression of grief (Rosenblatt, 1988). Therefore, social psychological aspects of death tend to suggest that:

"death gives rise to personal, emotional responses which tend to set in motion culturally oriented reactions, which in turn elicit specific death practices. In this way, people use traditional customs for handling death, and, in general, societally based reactions guide our behaviour".  

These approaches to grief theory within social psychology tend to be based upon the following criteria. Firstly, loss reveals personal reality for each individual and focuses on idiosyncratic responses to the loss. Secondly, it views people as actively responding to life challenges, is descriptive and explores the implication of varied responses. Thirdly, the focus is on passionate meanings that shape
actions and emphasises how the world is forever transformed by the loss. And finally, it places grief in social or family context (Neimeyer, 1997).

Concerns about the traditional approach to understanding grief argues for an alternative model of grieving. A useful theory on grief would need to meet a number of criteria that stand in contrast to traditional theories. From a constructionist perspective, there is a need to reveal or construct personal reality of death for different individuals, instead of presuming a universal psychological mechanism irrespective of historical, cultural or social contexts. Secondly, people must be seen to be active in grief, not passive reactors to outside events. Grief is something that people 'do', not something that is 'done' to them. People need to assimilate grief into personal and shared systems of belief. Thirdly, personal meaning of the loss is needed to be elucidated in any grief theory rather than outlining what constitutes 'normal' grieving. Fourthly, rather than expecting a grieved person to return to a 'normal' state after 'recovery', it would allow understanding about how the bereaved person's world has been transformed by the loss. Finally, while grieving is a highly personal experience, it is constituted within an ever evolving social and cultural context (Neimeyer, 1997).

Constructionist approach

Neimeyer (1997), suggests that the above mentioned criteria have led to propositions for a constructionist approach to loss. The constructionist approach to loss (Attig, 1996; Neimeyer, 1997; Neimeyer & Stewart, 1996) focuses on processes of "meaning-making" in individuals and human collectives. The process uses the narrative approach to loss (Neimeyer & Stewart, 1996), and is based on two major premises:

"Firstly, human psychological processes are intrinsically social, that is, they cannot be understood independent of context and the social practices
of an individual's community. Second, the development of higher mental functions in children occur as a product of two dialectical processes: (a) the internalisation of activity and (b) children's idiosyncratic transformation and externalisation of such activity during the course of development".

(Mascolo, 1994, p.88)

This social constructionist view does not deny the importance of other approaches to grief. Grief has roots that run deep into both our biological as well as social heritage (Averill & Nunley, 1988). However, language orders our perceptions and also make things happen, and can be used to construct and create social interaction and diverse social worlds (Potter & Wetherell, 1992).

"This view would suggest that our experience of the world, and perhaps especially of our own internal states, is undifferentiated and intangible without the framework of language to give it structure and meaning. The way that language is structured therefore determines the way that experience and consciousness are structured".

(Burr, 1997, pp.34-35)

Research in psychology until recent times, has taken a rather traditional view of 'language'. Much of the research into language has come from a variety of disciplines such as social psychology, sociology, philosophy and literary theory on language function. It was assumed that:

"language acts as a neutral, transparent medium between the social actor and the world, so that normally discourse can be taken at face value as a simple description of a mental state or event".

(Wetherell & Potter, 1988, p168).

However, in recent times, researchers have approached this topic quite differently. Language is now viewed as a social practice in itself, in that, it is 'functional' and 'action orientated'. Language is seen as being central to all social activities and has been worthy of study in its own right. Social psychology has seen the importance of studying language because most forms of social interaction involve
people talking together or reading each other’s transcripts (Potter & Wetherell, 1992). For social psychology, language has therefore become important, as it orders our perception and shows us how language is used to construct and create social interaction and diverse social worlds. Analysis of discourse from the perspective of social psychology, has been termed by Edwards & Potter (1992) as a functionally oriented approach to the analysis of talk and text.

Research into language has been influenced by the subdiscipline of ethnomethodology. This is the study of ordinary people’s methods; the methods in question being those used for producing and making sense of everyday social life. Ethnomethodology then, is concerned with a range of features of the way social life is put together. In the study of language, this method of study enables us to look at how language is used in everyday situations (Potter & Wetherell, 1992). Discourse analysis can best be understood by:

"introducing the interconnection concepts of function, construction variation and the analytic unit: the interpretative repertoire".

(Wetherell & Potter 1988, p.169).

Ethnomethodologists (Garfinkel, 1967; Heritage, 1984.) were instrumental in developing the functional approaches to language and the detailed practices of everyday social life. That is, ethnomethodology emphasised the 'action orientation' of language use. It was thought that people not only used language to communicate, but they did things with their discourse. In this case ethnomethodologists suggested that when people use discourse it has repercussions of its own which may not have been formulated or even understood by the speaker or writer (Wetherell & Potter, 1988). For this reason, discourse has become seen as a social practice in itself, and this has been greatly influenced by studies in ethnomethodology. However, while ethnomethodology is primarily
concerned with research methods, it has no official manual of research procedures. Practitioners' are encouraged to utilise whatever procedures they can find or develop to make sense of the taken-for-granted organisational 'work' of everyday life (Flynn, 1991).

Having reviewed the relevant literature, it was found that researching grief from a social constructionist perspective is a relatively new and enriching approach. My interest in this study is to examine the language, that is, the linguistic resources the participants draw upon to construct and give meaning to their grief. The participants accounts will be analysed to see how they construct grief. For instance,

- do the participants draw on discourse that has become common sense accounting about grief?

- What are the consistencies and the variations presented in the constructed versions of grief, that is, is there one constructed version of grief that is drawn upon more than another?

- What linguistic resources are drawn upon to express the idiosyncratic responses to grief?

- What function does the language serve?
CHAPTER THREE

METHOD

This section introduces the methods and procedures that were used in this study. The participants and interview settings are described, and the strategies used to conduct the interviews are detailed. Transcription and interview analysis details are also provided. Ethical considerations arising from the research process and precautions taken to ensure participants protection of identity and well-being are also outlined.

Interview settings

In this research, texts are read for grief talk and how grief is constituted as an object in discourse. To obtain texts of grief talk I interviewed people who had experienced the sudden or unexpected loss of a family member. Letters (see Appendix A) outlining the purpose of this study and requesting volunteers were sent to the Victim Support Group in Palmerston North and also to the Manawatu Area Manager of Workplace Support. Permission was sought from these two organisations for volunteers to either contact the researcher or permission be obtained for the researcher to contact the volunteer to arrange an interview time and setting. There was no difficulty in obtaining 10 participants.

Victim Support is a community-based organisation available to assist all victims of crime, accident and emergency. The role of Victim Support is to provide victims with choices and options so that they may make good decisions. Part of their role is to ensure that victims are treated fairly according to their rights under
the Victim Offences Act 1987. Workplace Support (Inter-Church Trade and Industry Mission) is an organisation that offers a wide range of programmes to meet individual and corporate needs. Chaplains are involved in all life events of the organisation's personnel. These may include bereavement, hospitalisation, a personal crisis, or critical incidents in the work-place. Because of the nature in which these two organisations operate, there was concern that ethical reasons and confidentiality may prevent their assisting in accessing people to participate in the study. However, approval was gained from both organisations. Four participants were obtained through Workplace Support, five were obtained directly through Victim Support and one through the Police who had been contacted by Victim Support.

The well-being of those approached to participate was paramount, and care was taken to ensure that only those people whom Victim Support and Workplace Support felt were emotionally capable to participate were approached. If the person agreed to participate they either contacted me or gave approval for me to contact them to make an appointment time for the interview. Of the ten participants, four contacted me and the other six gave approval for me to contact them. Data collection in the form of interviews was carried out. Nine of the interviews were carried out in the participant's own home and the tenth in an office at my home address. Four of the participants live in a rural town and the other six in a provincial city.

Participants in the study
The criteria for participating in this study was that the person had experienced the loss by accidental or sudden death of a family member and six months had lapsed from that loss. The six month period is arbitrary in that it was felt that within the six month period after a death, it would be inappropriate to include a person who
may consent without fully appreciating what their involvement meant, and also a certain period of time needed to have lapsed so that the person could talk about their grief experience. Because of the nature of this study it was immaterial who participated, as long as they met the criteria of having lost a family member or close friend through sudden or an unexpected death and six months had lapsed from the death.

Each potential participant was handed an information sheet (see Appendix B) detailing the study. It invited those interested in participating to contact the researcher so that any further questions could be answered or to arrange an appointment time for the interview. All potential participants who responded to the invitation to participate, agreed to do so. One participant wrote to me indicating that she found the experience of being allowed to 'tell her story' beneficial and sought to have her mother participate in the study. All participants were asked if they understood the information sheet and were asked if they had any queries about the study or their involvement. The only concern that participants expressed was in relation to whether their 'story' would be appropriate. Participants were reassured that what they said during the interview would be relevant.

The consent form (see Appendix C) was read to the participants and permission was obtained for the interview to be audio-taped. The consent form was then signed and dated by the participant and myself prior to the interview. Participants were also informed that any identifying characteristic, actual name, or place would be edited out during the transcription process. This was done to ensure confidentiality. Any quotation or information which might reveal the identity of any participant has been excluded from the study.
Although I have been a Victim Support volunteer, and I am employed as a Workplace Support Chaplain and Counsellor, I had no previous knowledge or contact with the participants. However, I was aware of the nature of one of the deaths through media coverage of the incident. It was important that participants felt that they were able to talk openly without concerns about confidentiality. I took their agreement to participate and their signing the consent form as an indication of their willingness to do this.

It was not anticipated that the study would cause harm to the participants. The qualitative methodology with its flexible semi-structured interview format was chosen partly in recognition of the fact that the experience of such loss needs to be investigated with sensitivity and respect for the feelings of the participants. The study provided the opportunity for participants to tell their story in a non-threatening environment, with no pressure placed on them to discuss issues with which they were uncomfortable. Full support was available for participants to access professional help to resolve any personal issues that may have arose and all participants were informed of this, both orally and in writing.

During the interview process, I developed a concern for three of the participants. This concern was in relation to their ability to cope with their grief. It was considered that these three participants would benefit from professional counselling. With their permission counselling was arranged with a counsellor of their own choice. One participant after two counselling sessions contacted me to thank me as she had benefited from the sessions. The interview process was a beneficial experience for the participants. That is, by being given the opportunity of telling their story the participants found the experience therapeutic. It has been found that, communication - sharing intense grief - is vital for 'healing' and 'recovery' (Gyulay, 1989). All participants at the conclusion of the interview
indicated that they found the interview experience helpful as they gained self understanding and an increased awareness within their lives. This was important to me as a researcher, as I did not wish to create any more anxiety for the participants, or to 'victimise' them a second time.

**Interview procedure**

All interviews were private and uninterrupted ranging from 50 minutes to one and one half hours. Interviews were tape recorded with the knowledge and consent of the participants. Each tape was labelled with a code number and this number and the corresponding name of the participant was stored separately from the research material and was only accessible to myself. This was done to ensure confidentiality and anonymity of the participants.

The interviews were unstructured and open ended, but focused on particular issues such as the nature of the death, funeral arrangements, personal feelings, thoughts and responses, social support accessed and what the participant found helpful or unhelpful during this time. During the interviews I became concerned that the participants were describing the events of the accident and death or were outlining the nature and characteristics of the deceased, rather than talking about grief. Although this discourse is useful and can be analysed using this methodology, the texts were impoverished resources, as the purpose of this study was to gain understanding of how people talk about and socially construct grief. Although it was my aim to obtain information relevant to this study, it was important to realise that the participants needed to feel comfortable throughout the interview process, and be free to talk about any issue they felt comfortable with. It became clear that participants were not at ease when talking about their feelings and in some cases avoidance of this issue occurred.
Prior to each interview some 15 minutes was spent in conversation with the participant so that rapport could be gained and in answering any questions that the participant may have had about the study. Although no participant expressed embarrassment or discomfort with the interview being taped, often at the conclusion of the interview, once the cassette tape had been switched off, the participant continued to talk more freely about their grief. The atmosphere for each interview was informal and the participants generally talked freely and were only prompted with a question from myself when some clarification needed to be made, to help the participant talk in more detail about an issue, or to gain specific information. At the completion of the interview, each participant was asked if he or she would like to add anything further, or if he or she had any suggestions that may help other people experiencing a similar loss. I found this to be an appropriate way to conclude as it seemed to give the participant a sense of control over and a feeling of satisfaction with the interview process.

Interview questions
Potter and Wetherell (1992) suggest that when conducting interviews of this nature, a detailed schedule which sets out the questions to be asked should be used to ensure that the same question is asked of each participant. However, my use of the question schedule was a guide only, although all questions were used at some point of the interview. In traditional interviews it is important to gain consistency as it provides evidence of a "corresponding set of acts or beliefs" (Potter and Wetherell, 1992, p.163.) However, because of the varying responses from different participants and because each participants experience was unique, probes and variations of questions were needed for different respondents. By taking this approach it was possible to approach issues from various perspectives to ensure diversity of participants accounting practices. To achieve this flexibility, it was necessary to drop the formal procedures which act as a device to restrict variation
in traditional interviews (Potter and Mulkay, 1985, cited in Potter and Wetherell, 1992). I took this approach as, although my objective was to gather information about the social construction of grief, it was not my intention to ask specific questions but simply to guide the participants in 'telling their story'. The interview guide is set out in Appendix D.

**Interview transcription**

Transcripts were made from the audio-taped interviews and include both the participants comments and my questions. The number of pages transcribed from each interview range from 11 to 19 pages. The transcription notations used were those that are recommended by Potter and Wetherell (1992) and Edwards and Potter (1992). Their transcription notation features include, overlap between utterances, pauses to nearest tenth of a second, extension of a preceding vowel, added emphasis, audible intake of breath, material that is either inaudible or there is doubt about its accuracy, and material that has been deliberately omitted.

Information concerning the transcript notations used can be found in Appendix E. Potter and Wetherell write:

"A good transcript is essential for a form of analysis which involves repeated readings of sections of data". (p.165)

However, they go on to write:

"for many sorts of research questions, the fine details of timing and intonation are not crucial, and indeed they can interfere with the readability of the transcript".

(Potter and Wetherell, 1992, p.166).

I found as I read through the transcriptions, the readability was more important than the particular manner in which the notations imply as it related to pronunciation or how long each pause lasted. The focus of this research was to
understand how people socially construct their grief. In this sense, what they said was more important than how they said it. Once the transcribing was completed, the full transcript was sent to the participant so that they could view and edit the manuscript prior to the information being analysed. Four participants altered or corrected the manuscript in some minor way so that it read the way they intended.

**Coding**

While analysing the data, it was important to 'deconstruct' and code the transcripts. Deconstruction refers to attempts to take apart the text and see how it was constructed in a way as to present particular images of how the participants gave meaning to their emotions, actions, beliefs and understanding of grief (Burr, 1997). Coding is important so that each area of discourse could be placed into manageable chunks (Potter and Wetherell, 1992). My first step was to extract from the transcripts, those words or phrases which related to grief. These included social factors such as the influence of other people on grief and the need to share grief with others. Cultural factors such as faith, beliefs and ethnicity were also extracted, along with issues concerning social support and coping with grief. The next step was to create a file for each category and these files became the basis for the detailed analysis. I was able to work directly with transcripts on a computer, shifting blocks of transcript to create a separate file for each category. This process enabled me to keep in direct contact with the material, and allow coherent and compact data files. Once this process was completed I was able to analyse the data. This involved reading and rereading the extracts which began to reveal particular themes. These themes outline how people talk about their grief, as well as influences on 'the grief response', such as social and cultural factors. In many instances, different category areas would contain the same data and were therefore inter-related. Reading and rereading of the material was important to search for organisation and a pattern in the data. This pattern was in the form of both
variability (*differences* in either the content or form of accounts), and consistency (the identification of features *shared* by accounts). As patterns emerged, confirmation of the relevance and construction of these were discussed with others. Variations and consistency within and between the accounts were evident. These are discussed in the analysis section.

During analysing there was also the concern with function and consequences. That is, it was important to identify how the participant spoke about issues, as it is argued that people's talk fulfils many functions and has varying effects (Potter and Wetherell, 1992). In this way language is not just conveying information but is performing or 'doing' an act that has practical consequences. Talk is constitution of social practice and therefore the building blocks of grief are found in the words of the participants.

**Ethical concerns**
The study was conducted within the ethical guidelines of Massey University and the New Zealand Psychological Society, and was also approved by the Massey University Human Ethics Committee. I have professional qualifications and experience in counselling and am registered as a Member of the New Zealand Association of Counsellors. The protection of participants in this research and the provision of a safe environment was paramount. It was important to me to ensure that the well-being of the participants was upheld at all times. The initial contact with participants was by some other person than myself. This ensured that those approached did not feel pressured into participating. Participants were only contacted by myself once they had indicated their willingness to volunteer. The location of the interview was held at the choice of the participant. It was also made known to the participant (verbally) that they could have a support person present during the interview. The participants felt comfortable in being able to
speak about their grief and no participant took the option of having a support
person present. Potential participants were fully informed about the study and
their rights, both orally and in writing (Appendix B), and had the opportunity to
raise questions with me. All participants were assured of absolute confidentiality
and were informed that they could withdraw from the study at any time or refuse
to reply or pass on any question. Once the participants were fully informed about
the study, and indicated their willingness to proceed with the interview, they
signed a consent form (Appendix C).

All material produced in the course of this research (records, audiotapes,
transcripts) was identified only by code number. The key list linking names and
code numbers was stored separately from the research materials and was only
accessible to myself. The participants had access to their own data and had the
opportunity to discuss, delete or add to what they had already said during the
interview. Four participants exercised their right to alter the transcript. Two
participants altered their transcript so that its readability was improved. Each
participant was also given the option of having their audiotaped interview cassette
returned to them, or have it erased at the end of the study. Eight participants chose
to have the cassette tape erased, one requested the tape be returned and one
requested a copy of the tape at the time of interview. Each participant also
received a summary of the findings (Appendix F) at the conclusion of the study.

Once the interviews were transcribed, checked and coded the texts were ready to
be analysed. In the following chapters, I outline the analysis and discuss the
resources drawn upon by the participants in their discourse.
CHAPTER 4

ANALYSIS - EMOTIONS AND THOUGHTS

This chapter unfolds the discourses participants drew upon to construct grief. Each transcript includes defining talk which is located among emotions and in relation to and inter-relating with other emotions. Grief is linked with complex inner emotions as well as social and cultural influences and an ability to cope. In this chapter I shall examine how the participants spoke about how they "do" grief. Secondly, in Chapter Five my interest is in how grief talk is constituted by social and cultural influences. Then in Chapter Six I outline and discuss how grief discourses constitute coping with grief. To illustrate how this process is enacted, I give specific examples of language use in grief talk that re-produce available discourses and at the same time constitute subjectivities. Because of the nature of the discourse analysis approach, the methodology constitutes part of the confirmation and validation procedures itself. Thus the goal is to present analysis and conclusions in such a way that the reader is able to assess the interpretations (Potter & Wetherell, 1992). For this reason this section will be longer than the corresponding section of more traditional empirical reports.

This chapter is divided into three sections as follows. The first section describes grief as a mixture of other emotions and thoughts resulting from the loss; the second, looks at grief as being embodied within the individual; the third, at issues of control and vulnerability. These sections will take the form of describing and illustrating the resource, and analysing how grief is constructed by looking at the consistencies, variations and the function of the discourse.
Mixture of other emotions and thoughts

The first theme is the construction of grief which draws upon emotional and cognitive discourses. Participants experienced difficulty describing and defining grief. Grief is objectified as "it", but is embodied in a physical way. However, people "do it", but are not always in control. Defining talk positions participants and sets up their stories for particular effects. One resource drawn upon was that grief is a mixture of many integrated emotions and thoughts. The following extracts illustrate this. The bold type is my added emphasis to illustrate key text.

"Grieving is a mixture of a whole lot of things really, but...it's a sense of helplessness, it's a mixture of doubting your own faults, it's a mixture of not accepting what's happened, just totally overcome. And I think a lot of it is just a myriad of thoughts that you have had, emotions that you had just built up and have just - I can't take any more of it."

(Peter p.6)

Defining talk produces grief as a mixture of many things, especially a mixture of thoughts and emotions that have become overwhelming. "It's a sense of helplessness" which is "totally overwhelming". There are many thoughts and differing emotions that are experienced along with non-acceptance and self-doubt. The function of this discourse is to express grief as having many integrated parts and that each part intensifies to a level that overwhelms the individual. The discourse constructs emotional issues relating to the unexpected death, as well as other emotions experienced at a later time. This is also evident in the following account.

"A lot of mixed emotions - angry, sad. It depends how I - long after that...I mean, I had a lot emotionally to deal with because [daughter] and [granddaughter] had left [granddaughter's] dad, and they'd come to live with me. And then the night [daughter was buried her father came to the house and took her away. So I had that to contend with that too..."

(Shona p.6)
Shona describes other issues that were evident at the time of the funeral. She was able to identify the cause of her emotions, and was 'contending' not only with the death, but also with other issues. The mixed emotions was a result of all the issues that needed to be contended with. The effect or function of this discourse is to give explanation and justification for the mixed emotions. In these accounts, grief is constituted in and among other emotions and is produced as a result of other emotions, anger and sadness in Shona's account. Thus, grief is constructed as an immediate response to the loss, and also as something that just 'built up'.

The construction of emotions in relation to the initial response of hearing about the death varies from those emotions drawn upon to express later experiences. Participants are quite clear about the initial reaction and construct their accounts in a manner that reflects their relationship with the deceased, the nature of death and the context of the death. That is, the function of this discourse is not only to express their emotional response, but also to express how they felt about the death itself. For example, the following extracts are in relation to suicide.

"Shock, dismay, couldn't believe it. I never thought out of my three brothers that he would be the one that would do it...... But yea, I was pretty freaked out there for a few days."

"I was a little bit freaked out.....the fact that he actually done - ended his life. You know, um because I have been through the same experience and I've tried to make it work, and I couldn't succeed at making it work - and he did."

(Liz pp.3-4)

"...it was one of shock, horror, I didn't know which way to turn, I couldn't believe it. It was just unbelievable, it was just a feeling I really can't explain it. I just thought 'aw [deceased] no it can't be'. And he wasn't the type that you would think could do that..."

(Maggie p.6)
In constructing these accounts the participants are positioning themselves in context for their story. "Disclaimers" are used distancing speakers from the deceased actions. For example, "I never thought out of my three brothers..." in Liz's account, and "he wasn't the type that you would think could do that..." in Maggie's account. These constructions position the speaker in their response to the nature of the death by justifying their actions or lack of action to prevent the death. In these accounts the participants initial emotional response, are 'shock' and 'unbelief', as their accounts reflects the nature of the death. That is, the discourse is constructed to reflect the shock, horror and disbelief that a family member had committed suicide. The resource of disbelief is also evident in the following account.

"My first sort of feelings about um what had happened were absolute disbelief.... But looking at someone that has been with you all of a sudden gone, um its absolutely - I don't know, I just couldn't accept it." (Peter p.l)

There is therefore, a version of grief that is able to be identified that has an immediate and uncontrollable emotional impact. The resources drawn upon to describe this response include "shock", "dismay", "disbelief", and an inability to "accept it". There is a sense of denial in these constructions and they express responses which were not common, or in other words, constructions of an event or emotions not previously experienced.

Emotions were also drawn upon as participants spoke about the later impact of the loss. However, the resources to express later emotions differ from those drawn upon to express the initial impact.
"When I got home amongst it all, I just let go - your whole being just lets go. You feel overwhelmed with great melancholy. Just overwhelmed by it all."

(David p.2)

Emotions have built up that reach a point where the participant is overwhelmed with great sadness and depression. These emotions just happen as they are "let go". There is also a construction of emotional reaction to the loss, where emotional experience changes and this impacts on the level of everyday functioning. That is, there comes a time where emotions become so intense that there is a changed level of functioning. For example, in the following accounts, emotions are experienced with varying intensity, and not necessarily immediately.

"I was able to handle things for a while and then all of a sudden it sort of just um hit me..... ahh about 2 months [after death]"

(Barry pp.1-2)

"I felt I was really starting to grieve about three or four months after she'd gone. I really - things really started to hit home.....it was like - hmmm boy this is getting tough."

(Jill p.5)

"I felt like I hit a wall when it got to the six month stage. I felt like I wasn't getting anywhere..... I felt like, because I was drinking, I was digging myself into a hole that I could not climb out of. Um, I couldn't see any light at the end of the tunnel...... there was nothing there for me= absolutely nothing. Life wasn't really existing for me=there was nothing there."

(Lucy pp.8-9)

"I can be up town, I can be in a shop and all of a sudden something will hit me and I've got to get out of the shop quick and have a little cry in the car and away I'll come home or whatever I'm going to do."

(Liz p.12)

There is consistency in these accounts as emotions change some months later when "something" hits them. Within these contexts the participants constructed
aspects of their grief as "something" that is unexpected, unprovoked, uncontrollable and happens some months after the unexpected death. Although emotional reaction occurs at the time of death, emotions some months later are intense and have a remarkable influence on the level of functioning. In the following accounts, some emotions were not a result of the actual loss, but were a consequence of other events.

"I said to him ..... I'm really angry at you fellas for not coming to get me."

"I asked to be pall bearer and nope - can't do that, that's not a females job.... Very angry, very angry because I felt that that was the last thing I could have done for him - with carrying him to his final resting place."

(Liz p.10)

The emotion of anger is constructed in and among events in relation to the funeral and is produced as a result of other emotions relating to the death. In this account gender issues are drawn upon as unmet expectations are constructed. The gender discourse is a resource drawn upon to express frustration and anger. The anger is with gender issues rather than the actual loss. The function of this discourse is to express anger about the speakers family and the restrictions they placed on her.

In this section participants drew upon the resource of emotions to talk about grief. Different emotions were identified at varying periods. Initial emotional reaction included "shock", "dismay", "horror", "disbelief", and "great melancholy". The nature and context of the death influenced the emotional response and how participants positioned themselves in their story. The function of the discourse in relation to suicide not only reflected the emotional response to the loss, but also the nature and suddenness of the death. This component in the discourse was not evident in other accounts.
The emotions experienced on being informed of the death are identified and are described as very intense and immediate. Other emotions develop over time and these were not easily identified. Participants constructed this aspect of emotions as being unexpected, unprovoked, uncontrollable, and happening some months after the death. Emotions were also constructed to express reactions to other events and issues. The emotions of 'anger' and 'sadness' were expressed by participants in constructing their accounts of interaction with family members after the death. Emotions and thoughts are embedded in grief talk and these two resources are woven throughout the discourse and will be continued to be examined in relation to other resources drawn upon in talking about grief.

**Embodiment of grief**

Participants constructed grief as embodied within them. Physical metaphors were drawn upon to express this embodiment. The following extracts indicate this embodiment of grief.

"I was just absolutely numb, absolutely numb. It...devastates you - really does....... you're totally inadequate that is all I can really say. And it really guts you something awful."

*(Peter p.7)*

Grief is constituted drawing upon physiological metaphors in response to the loss. Peter talks about being "absolutely numb" that causes devastation which leads to being "totally inadequate". The modal operator, "And it really guts you something awful", indicates the use of physical metaphors to construct and express complex grief emotions.

"It was a tremendous shock=it went right through me like a physical shock. Just right through my body, it rooted me to the spot. I just couldn't move, I couldn't believe it."
"So it was a real shock to me... I was not sure if I yelled or not... I just couldn't receive it. I was almost immobilised."
(David p.2)

Reaction to the loss is something that is very intense which immobilises the body and creates an inability to think. David draws upon the resource of embodiment - "tremendous physical shock" to describe this response. Embodiment of grief is also expressed in the following account.

"Then all of a sudden it sort of just um hit me...... she wasn't going to be around any more. Ahh well, just sit inside here [holds stomach]. it sort of affects you inside that you just can't handle it anymore."
(Barry p.2)

The speaker is positioned in a situation of sudden loneliness, and this produces grief. It is not only the loss itself, but the meaning given to the loss, in which grief is constructed. Grief is described as 'something' in the stomach. The impact is severe and coping is difficult. Other examples of this resource include:

"...it like pulls out your whole inside and just leaves it there and just... put it back in yourself piece by piece.... You don't feel whole, you feel like you have lost a piece somewhere. I keep looking for that piece, but you can't find it so you just walk around like a shell...."
(Shona p.12)

Grief is constructed as something that is a mixture of many integrated but fragmented pieces that have been "pulled" from the body. Although a rebuilding process takes place, life has changed as "you don't feel whole" as something is missing, and this creates 'emptiness'. Further accounts that use this resource to construct emotional reaction of feeling 'empty' include:

"I just remember I was feeling completely alone in the crowd straight away, and that's the way I stayed for quite a long time, empty."
(Jill p.2)
"Life is just empty...... now I find myself walking around lost. Everything has changed."

(Lucy p.8)

The function of these accounts is to locate emotions and grief in tangible bodily terms and to describe life as being different after the loss. Jill constructs this as "feeling completely alone in the crowd... empty", while in Lucy's account, "life is just empty...". Within these accounts the discourse is not describing events, but expresses a changed perspective on life.

Thus, while grief is expressed as a loss with physical and personal emptiness and a mixture of emotions, these emotions are constructed by drawing upon physiological metaphors. That is, grief is constructed drawing upon physiological indices - "it really guts you"; "it pulls your whole inside out"; "physical shock that roots you to the ground"; and a sense of "emptiness". Grief is constructed as life altering, resulting from the emotional response of an unexpected death of a significant person. This emotional impact is felt within the body and therefore 'normal' functioning has been altered and this constitutes grief. Implied within these constructions is the notion of control over emotions and thoughts.

**Control of emotions and thoughts**

Initial emotional response to sudden loss was constructed in a manner where there was an immediate reaction as emotions were something that just happened. However, as the participants continued to talk about grief, the construction of their discourse suggests some control. That is, participants spoke about their thoughts and these thoughts determine the nature of their grief. In expressing this area of grief, construction varied from 'normal' thinking patterns about issues, to intrusive or disruptive and distressing thoughts.
In speaking about controlling emotion there was variation depending upon the function of the discourse. That is, participants spoke about having some control over emotions, but also talked about feeling vulnerable in relation to other people. Control was drawn upon when talking about uncontrollable emotion as an initial response to the loss, and also when emotions could be put on hold and dealt with at a later time. The following extracts define grief, as emotions are 'put on hold' or 'controlled' while other issues are dealt with.

"The emotional side got shut out in the process. ......and perhaps my preoccupation with arrangements and my emotion towards my family's emotions was what stopped that process for me - of grieving. Um, and to a certain degree probably suppressed the anger. It wasn't until until my son expressed anger......that I started to understand my own."

(Peter p.9)

"My feelings were probably two or three months behind the rest of the family, who were immediately grieved."

(Peter p.1)

Peter's distinguishes between his family's grief and his own. His family was "immediately grieved" while his grief came "two to three months" later. The suggestion that grief starts some months later differs in other accounts outlined. Grief is defined as a "process" that can be stopped or suppressed and then dealt with at some later time. This "process" was able to be controlled, as other issues were dealt with, and by being preoccupied. In the following account, Shona makes time to think about the loss and to grieve.

"My work is full on plus [my granddaughter] is full on too, and I don't say I sort of push the grieving out, I just..... if I wanna cry there's lot's of times I go to church and I sit there and I think about [deceased] and that brings tears to my eyes. And yea, I get all weepy like I am now... I don't block it up. I sort of make sure that I do, yea, I have a weep and get on with it, that sort of thing."

(Shona p.8)
Shona finds a quiet place to think about the deceased. These controlled thoughts 'trigger' or 'release' emotions. This deliberate act enables her to grieve and "get on with it". This is also evident in the following account.

"I went through two weeks of um what the rest of the family went through in probably two or three months. And I think it was always there but has been shut out. And I think I did that almost deliberately as well as subconsciously....... Because I always had in the back of my mind that I must keep in control and worry about the family. And I think it was when I, when I realised that they was strong enough at that point um to live as normally as possibly, that's when I started to feel it. And probably when the focus came from me not being as worried as I was about them, came back to my thoughts only, is when it really impacted."

(Peter pp.6-7)

Emotions are both 'consciously' thought about as well as 'subconsciously' in this account. It also defines grief as something that can be "shut out" and then dealt with at a later time. That is, while keeping in control and being preoccupied with family, grief could be controlled. It was not until Peter started to think about the loss that he felt the impact. Grief is constructed as "always being there", but can be controlled by focusing thoughts on other issues. Embedded within this construction are societal expectations of 'being in control' to support and care for family members. Thus, the discourse on control issues offers a construction of grief that thoughts are sometimes experienced as a normal consequence of the loss, and not at other times. This consequence sometimes impacts on the intensity and characteristics of grief.

Variability is seen in the accounts as participants talk about control and consequences of the loss. Another discourse emerged as some participants talked about control, that of emotional vulnerability. That is, grief leads to emotional
vulnerability to other people and events. The discourse drawn upon in relation to vulnerability was generally constructed in two ways. First, there was the construction of being vulnerable to suggestibility by other people, and secondly, vulnerability to their own mortality. For example, in the following extracts the discourse outlines vulnerability in relation to having little control over subsequent events.

"When you are like that, you you're very vulnerable you know. You just say yes to anything."

(Barry p.7)

"And you just don't want to know. You feel more vulnerable, you just couldn't care. You let them take things without argument, because you are not emotionally able to get involved with....."

(David p.7)

Frustration is expressed concerning interaction with other people. Due to emotional response to the loss, other issues seem insignificant. That is, although there is a feeling of being vulnerable, emotions associated with grief are constructed as being more intense than other emotions. Vulnerability is being powerless and having no control. This is expressed in the following account. The social factors embedded in these accounts impact upon the meaning given to this construction of vulnerability.

"Suddenly they [distant relatives] are behaving differently. They have got their grief but it's not as deep as what you feel. And yea that makes you powerless, if you like. It numbs you, it makes you powerless too - and people are behaving differently around you. You look on in wonder, you can't compete with them. You can't do what they are doing and you can't get involved with what they are doing. You just look on. No, grief does make you more vulnerable actually. The deeper you love the person, I think the more vulnerable you are during that time."

(David p.15)
Grief varies in intensity depending upon the emotional bond with the deceased. The greater the emotional bond, then greater vulnerability is experienced with an associated sense of powerlessness and helplessness.

Vulnerability is also talked about in relation to one's own mortality. The construction of grief included making sense or coming to terms with one's own mortality. In the following extract the speaker reflects on the death of the family member, and also in coming to terms with the loss.

"...you sort of see you as someone who has no humanity. You have been stripped of all - of everything. And you realise that one day, you are going to be in the same position. The people are going to view you and you really wished them to say something nice about ya. Because looking at a person you love you feel so vulnerable for them because you are stripped of everything you have got - you are stripped and vulnerable=even in death....... I had the feelings of 'goodness me this is going to be me there one day'."

(David pp.13-14)

David in constructing meaning of the death positions himself in the place of the deceased. The deceased has been "stripped" of everything and is completely vulnerable. In positioning himself in this situation, David constructs vulnerability about his own mortality.

Thus, while being able to control some emotions, there are external factors which cannot be controlled. Therefore, there is an inability to have emotional control over the actions of other people and events. Participants constructed this as being vulnerable in that they did not have emotional energy to deal with these events.

This chapter has examined how grief is constituted through emotional and cognitive discourse. Grief has been constructed subjectively through the discourse
as a mixture of many integrated emotions and thoughts that are overwhelming. These emotions and thoughts are discursively constructed as being embodied, and this was constructed by drawing upon physiological metaphors. The construction of grief showed remarkable consistency within accounts, with variations generally depending upon the function of the discourse. Although grief emotions and thoughts are discursively constructed as being embodied, they are woven throughout the discourse and are to some extent constituted from external social and cultural factors. In the next chapter the focus shifts onto these social and cultural influences.
ANALYSIS - SOCIAL AND CULTURAL INFLUENCES

In the last chapter grief was constructed as a mixture of emotions and thoughts. Grief was constituted in and among other emotions and thoughts and was produced as a result of other emotions, thoughts and experiences. Subjectivities are constituted with complex emotional experience and competence in talking about grief. Such competence depends upon personal experience and knowledge, and embedded in this are social and cultural influences in talking about grief. This chapter continues the theme of emotions and thoughts, but analyses the discourses of social and cultural factors which impact on how grief is constructed. Grief is constructed as something that is not only an 'internal state', but something which occurs 'between people'. Several resources were drawn upon within this theme of social influences. These include, grief is shared; family influences; community; continuing bonds with the deceased; and culture.

Grief is shared / family influences

Family members and friends are constructed as a source to gauge and determine appropriate grieving. However, also constructed is a framework where family and friends hinder or exasperate grieving. The speakers positioning within their story clearly indicates the influence family and friends have on their grief. In the following extracts the discourse is constructed in a manner which reflects helpful interaction.

"I felt that it was a very private thing that grief, it was a sharing amongst the family so that you didn't restrain yourself= you could
just really express your grief amongst the family members. And anyone looking on seemed to be wrong. I could not help feeling afterwards that grief is a very private thing. It's alright family members grieving at the same time, but by words, you can't just even begin to express afterwards that sort of feeling, neither can you share it outside of the family members."

(David, p.3)

Grief is an intense emotion and a 'private thing', but needs to be shared with family members as grief has to be released. There is a sense of embarrassment about grieving in public as intense emotions are expressed. Because all family members are grieving at the same time, grief is shared. Within this account is the notion of an 'emotional community'. That is, several people sharing grief is constructed as socially acceptable, as they share common grief emotions.

Another discourse emerged in relation to 'sharing' grief. As participants spoke about their relationship and interaction with other family members, grief was constructed as being influenced by that interaction. For example, in the following account grieving is described in a manner where family members influenced the participant's grieving.

"...the grieving is a shared thing too. I mean you feel it yourself but you feel it on behalf of others. The fact that I earlier seen my son react so angrily, he - I actually spoke to him in terms of I - I think he telegraphed my anger and tried to behave how I would have as a child."

(Peter pp.4&8)

Grief is sharing emotions with others, and emotions are generated because of responses from other people. That is, emotions are experienced as a result of the loss, but also due to observing the impact of the loss in family members.

"...perhaps my preoccupation with arrangements and my emotion towards my family's emotions was what stopped that process for me -
of grieving. And to a certain degree, probably suppressed the anger. It wasn't until my son expressed anger, as a child would, that I started to understand my own. But he'd obviously telegraphed from me signals right or wrong."

(Peter p.9)

There is another dimension in this construction of shared grief. A part of Peter's grief is related to the grief "telegraphed" by family members. That is, although Peter "stopped the process" of grieving, the observation of grief within the family brings about understanding of his own grief. Social factors are constructed as helpful in making meaning of grief and this is important in coping. For example, in the following account social factors of 'faith' and 'sharing grief' are drawn upon to express positive coping.

"I think that it would be hard if you had no faith, or no one afterwards to reach out to you. When it's not something physical the family can share your grief. I think it would be pretty hard if you were an only child and you had no one to share your grief with immediately and for afterwards. If you had no one, it would be fairly hard to console you."

(David p.5)

"We cried very openly for the first few days. We talked a lot about their father. Got out photos which are still around - of him working......we went through these several times over the weekend. And laughed and joked and cried about silly things we'd done...... We just talked and talked until we couldn't talk anymore."

(Lucy pp.4-5)

Sharing of grief is "consoling" and an outlet for emotions. Grief, although an internal response, is expressed outwardly and shared with others. Faith is also seen to be helpful. The issue of faith and sharing grief suggests that other people or beliefs are helpful in coming to terms with, and making meaning of the loss. In these accounts the participants construct a need to interact with other people that share the grief. However, this 'sharing' of grief was not always constructed as
helpful. In the following account, personal and family grieving is dissociated. Although family members share the grief as an emotional community, their grief is personal and is influenced by social factors within the family.

"Because the family was really all at the same stage as me, we'd just all collide at different angles and um, if one person was up one day, someone else would try and drag them down with something sad....... So, um we couldn't put all our energy into grief, we had to sort of move on=to help out."

(Jill p.6)

Social interaction within the family is constructed as hindering personal grieving. "Energy" is required to grieve, and because of family members own grief this energy is not available, resulting in the need to put aside personal grieving to help others.

In the following extract, the function of the discourse is to express difficulty in relating feelings to family members. This positions the speaker as being isolated within the family context.

"Unfortunately there's just nothing and nobody..... I don't really want to have to tell the family that it's cracking me up [tears] because you're told off for cracking them up."

(Liz p.11)

Loneliness and sadness occurs when there is no support from any source. Each family member grieves privately and the lack of opportunity to share and express feelings is devastating. There is a fear of punishment when expressing emotions. Social factors, that is, the lack of social support, produces negative outcomes. This is examined further in the following account where Liz is responding to whether she was able to talk to anybody about the loss.
"Nope. Nope, handled it all on my own mate. As I say, they [family] pick you up, they take you to the funeral, they bring you home, and they go home again. And you know - I mean, my father goes around to see my brothers - yeap, that's fine but you don't spend any time here = cause Liz is made of stronger stuff, so they seem to think. And because I I don't, I don't show my emotions in front of them either."

(Liz pp.10-11)

The speaker clearly positions herself in this account as she constructs grief without family support. Grief is constructed as a weakness, as "Liz is made of stronger stuff" and is expected to be able to cope without support. This expectation occurs as emotions are not normally expressed, even though these emotions are there. By not showing emotions there is no support or social interaction within the family and the impact of this can be seen as she continues to talk.

"...it just makes it so much harder to arr, to get back into the swing of things again. And to make sure that you are alright and the rest of the family are alright=but do the rest of the family care whether you are alright, you know, and I don't think any of them know just how - how I feel about it and none of them have ever asked me how I feel about it."

(Liz p.12)

"Frustrating, because you have got nobody to talk too. You have got nobody to say well, you know, well I'm having a bad day about this lot. But you just - I suppose you learn to get on with it. .....I sit here with my own feelings and my own thoughts."

(Liz p.12)

Without social interaction it is harder to deal with grief - which is "frustrating". Sharing grief and being able to interact with other family members is embedded in these accounts, and when social support is not available, coping is hindered. Sharing grief also ensures other family members are coping. This is linked with the earlier notion of 'emotional community' where sharing grief within the family was constructed as helpful. The lack of an 'emotional community' is constructed as being frustrating". This can be further seen in Maggie's account. The resource
drawn upon and the construction is consistent with previous accounts.

"...and I am doing it all on my own. I got no- nobody to say, "Oh never mind Maggie, it will be alright". Not looking for sympathy but someone that understands, you know. I'm sitting here doing it all myself. It's terrible sometimes ....I don't like bothering people at all you know, so I just keep coping on my own."

(Maggie p.11)

A new discourse enters this account as social interaction offers the opportunity to be reassured - sympathy is not the issue. Grief is being "done" without the help of others and the consequence is "terrible". Maggie constructs a need to cope with grief, and that coping is related to social support from the community. It also constructs grief as something we "do", rather than something that is "done" to us. Grieving is the act of affirming or reconstructing a personal world of meaning that has been challenged by loss.

Community

Within the theme of the local community, several resources emerged. Discourse about the community was constructed in relation to gaining understanding and support while making meaning of the loss. Seeking approval and acceptance emerged which implies the importance of community support during grief. However, discourse about the community was also constructed which expresses discomfort with the stigma associated with the nature of the death. This is highlighted in the following extract.

"Yes, it played on my mind - I sort of got over that part now because I do feel that it was his choice, and they told me in [name of health institution] that no matter what, even if he came right this lot it would only take the slightest trigger and he would do it eventually because once they get the notion it doesn't go away. It just keeps coming and coming until it just happens."

(Maggie p.6)
Information is required to gain meaning and come to terms with the death. A community organisation is the source of this information. The nature of the death is an issue that needed to be 'got over', and information gained from the community helped in resolving this issue. This information enables greater understanding, and justification of the death enables resolution of certain issues. In the following account, community sources are again utilised to gain understanding but resolution fails to take place.

"I went to see a priest afterwards when I couldn't sleep......and he explained things to me but it didn't help take the guilt away. It's the guilt and the failure that are there. I sort of thought they would be able to do that for me, he was very very good......but didn't help take the guilt away. I went and saw a psychic and she said to me that a young man had come through the house that weekend before and she wondered who it was. She said, it would have been [deceased] and he'd would have come in peace. She told me that it wasn't my fault - I couldn't blame myself and things like that. But didn't - it helped I suppose - it helped with the day or what, but after a while it doesn't help either"

(Penny p.15)

Information, reassurance and help sought from the community is sought to overcome grief emotions of "guilt" and the "failure". These emotions are constructed as grief, and community resources impact on resolution. That is, although support from a community source is helpful, long term benefits are not gained. However, a community source is described as helpful in the following extract.

"I did read a magazine down at the hairdressers in January...... It had an article in it where a thirty year old woman and her sister committed suicide....and her sister was suffering from depression and she had been helped a lot............ her sister said the failure and guilt just never leaves the family. And the way she talked about it I could identify with and I thought, well, thank God I've heard this or read it from somebody else,
you know. Because I began to think there was something really wrong with me - I'm not dealing with this very well."

(Penny p.17)

A community source - a magazine at the hairdresser - is helpful in gaining understanding and normalising grief feelings. There is relief and comfort in knowing that other people experience similar losses and grief responses. This relief and knowledge helps in coping with grief emotions. In other words, social factors are a gauge to assess coping with grief. In the following extract grief is constructed as 'sort of a stigma', and this stigma is associated with the nature of the death which brings discomfort and a sense of awkwardness when in public.

"One of the hardest things I found..... your husbands committed suicide and it's sort of a stigma, and I felt very uncomfortable going to the supermarket. That was the worst thing and the only thing I felt awkward about and I found that a little bit difficult to handle. People would avoid me, they didn't know how to handle it. And I knew then that I would probably be the same, but I just felt awkward. I just got on with it and working with all these very supportive friendly people was a great help. Had I been stuck at home with children or for some reason I didn't have a job, I think it would have taken me a lot more getting over."

(Rowena p.5)

The nature of the death causes conflict as contact with people is awkward, but supportive friends at work are helpful. That is, on one hand going to the supermarket and being out in public is difficult due to the perceived stigma, and on the other hand staying at home would have hindered grieving. Support from understanding people at work has been helpful. Although this construction positions the speaker in telling her story, individual perceptions influence grieving, which is embedded within social factors.
Maintenance of emotional bonds

Another discourse emerges as the resource of 'maintenance of emotional bonds with the deceased' is drawn upon. Strong affectionate bonds are constructed as influencing grief. Accommodating the self to a changed reality or assimilating the loss into pre-existing meaning systems involved maintaining a connection with the deceased. For example, in the following account maintaining an emotional bond with the deceased is described as being important in coping with the loss.

"Don't never shut the person out, and it won't matter if all your possessions in your house burnt down and every thing went completely= there will always be a special little bits inside you. So in a way you have never really lost them at all. You just have to rediscover what they meant to you and try and put the principles into your life...."
(Jill p.12)

In this account, the speaker intellectualises and positions herself away from her grief. In this manner grief is constructed as 'keeping alive memories of the deceased'. In constructing meaning of the loss, memories of the deceased are described as more valuable than material possession. Although there is a physical loss, maintaining an emotional bond means that "you have never really lost them at all". Memories are special and as long as those memories exist the relationship can continue although new meaning has to be discovered.

Variation is evident in accounts as some participants spoke about ongoing emotional bonds with the deceased. In Peter's account, the repertoire differs as his construction expresses ongoing memories and thoughts of lost opportunities and expectations for the deceased and thus constructs his account from that perspective.

"But a kid eleven years of age loosing sixty, seventy years of his life um it's a sad one. Josh was highly academic and had the world in front of
him, but not to be. Those sort of thoughts don't help either, but I think in time um we will have to accept it, but you never do if you know what I mean. Time heals but you don't forget those sort of thoughts."

"I've always been proud of my children, they are all bright academically, but Josh would um was special in in terms of his ability. Um he had so many abilities academically and so many other areas but he, he really had the world at his feet um and that was just removed through a silly - so I I think of all... what would have brought on grieving, that would probably be the heaviest thought I ever had after my concern for my family - initially. It's um the fact that I would never ever see him graduate from [secondary school] and then go through University and so on, was a great disappointment to me."

(Peter p.6)

Although emotional attachment is strong, the function of this account is to express the senseless loss of someone who had a promising future. Grief not only reflects the loss of a loved one, but also the loss of expectations for that person. By maintaining these thoughts and memories there is a sense of maintaining an emotional bond with the deceased. It is the disappointed expectations that co-produce grief. In this extract the speaker is the object of his grief, inevitably grieving when his expectations are disappointed.

Culture
Cultural discourse emerges as grief is constructed. Here the term culture, not only refers to the totality of the customs, religious and political behaviour taken as an integrated whole that distinguishes one society from another, but also as a group of persons whose customs and other beliefs set them apart from another group. That is, the culture that exists between varying religious beliefs, and between families rather than as a society as a whole. A resource drawn upon when constructing reactions to the loss included cultural beliefs and customs. Generally, culture was constructed in discourse concerning the funeral. In the following account cultural customs has been expressed explicitly as being helpful.
"We had a real Irish cultural funeral.... the music was beautiful and um it sort of portrayed Trevor's life in a way. And there wasn't a dry eye in the church. Um it helped I think ringing up Trevor's friends and asking them to take part...... We had the Irish traditional funeral by um the family all putting earth into the grave on top of Trevor - and all his friends. And one of the family overheard the grave managers and they were talking and they said, "We've seen the start, but we have never seen the finish", and they did finish it. .......I thought that was very therapeutic...."

(Penny pp.8-9)

The cultural funeral is constructed as unusual and different, but creates satisfaction in the manner in which the funeral was carried out. The social acceptance of this type of service is important. "There wasn't a dry eye in the church", signifies social acceptance and this social response is "therapeutic". However, in the following account culture is drawn upon to construct conflict in funeral arrangements.

"I wanted to take her up to somebody who's got a big house on a farm and my mother wanted to take her up to [the marae]. And I said, "No, I don't want her to go to the marae, I want her to go home, the family home..... But we did decide to go to the marae after that, because just too many people came and we didn't have the facilities, so we went to the marae..."

"....... We only stayed there [marae] the one night with her because I didn't want to go too soon, I wanted her to be at the house. Then we went to - there for one night and the next day was the funeral."

(Shona pp.4-5)

Cultural issues are quite explicit in this account. There is a clear implication of cultural preferences which required understanding and negotiation due to cultural differences. Cultural issues are constructed as being 'normal' and involve individual preferences. Cultural conflict is resolved by compromise. In the following extract another discourse emerged where culture was constructed as being helpful in grieving.
"And he was a great advocate for the Maori immersion, he'd actually asked for it at [school] and other schools he'd been in. He was pretty popular because of that I think. But it is the whanau type process that they go through too in the grieving. It - they just respond to it, it was absolutely marvellous."

(Peter p.5)

Cultural response of the community and cultural grieving processes enter into this account. The cultural response is in relation to the deceased's interest in that culture and his popularity because of this. This cultural response is constructed in a positive manner and these memories assist in coping with the grief.

Respondents were asked whether religion or faith influenced their grief. Those who responded to this question clearly constructed their discourse which reflects spiritual support and understanding about death. They each expressed, in different ways, a helpful connotation about their faith. One way this resource was constructed, was to express in general terms the impact faith has on every situation.

"Extremely, extremely, the stronger I get my faith, the higher perspective I get onto every situation. And also through - because I'm not good at communicating, really from what's inside anymore. It's my only release, because it is love - people that I really communicated well with are now gone from inside. I tend to put into prayers at night time or thoughts throughout the day - I seem to have little parcels of thoughts. And some really big things have happened to me spiritually. I haven't seen anybody so-to-speak, but I felt things and I've had fantastic dreams and every little step forward I learn something and it just builds up my faith."

(Jill p.5)

The speaker is positioned in the process of growth, change and self reflection with an emotionally complex inner life. Grief needs to be "released" and faith is an avenue for this release. Faith fills the emptiness and is not just a source of
support. Personal spiritual growth has taken place for Jill, and this increases her faith. The role of faith can also be seen in the following constructions.

"Well, I'm a Christian and I have faith. My faith takes in that death isn't final, the spirit goes on. The husk if you like is left behind - the body. That helps you afterwards. It is when people are not around you, that is when you feel sustained."

(David p.4)

"I think that it would be hard if you had no faith or no one afterwards to reach out to you. When it's not something physical, the family can share your grief."

(David p.5)

Grief is "hard", but faith assists in coping with the loss. There is a distinction between physical and spiritual helping. Both are constructed as helpful, but spiritual beliefs sustain when other support is unavailable. Where there is no faith or social support, grief is compounded. The following extract is in response to the question, "Do you have any religious faith that you find helpful?"

"Nope, no unfortunately not. Unfortunately there's just nothing or nobody. Can't you know, I don't want to have to - I don't really want to have to tell the family that it's cracking me up [tears]."

(Liz p.11)

Liz positions herself as wanting to reach out to others, but fears the consequences. Grief is "cracking her up", causing her to mentally and emotionally give way. Having no social or spiritual avenue for release of emotions creates a situation of little hope. This is constructed as being unfortunate as there is a need to belong and share the grief.

Thus, grief is constructed with regard to social influences or the lack of social support. Social influences range from sharing grief with family and friends to
community and culture. Grief is constituted within and among these social and cultural factors. The language used reflects the complexity in constructing grief, and it is in the social and cultural environments that the participants are positioned which enables them to construct meaning about grief. Within this construction is embedded the notion of coping, and this is further discussed in the next chapter.
This chapter continues the notion that grief is constituted in social and cultural environments, with discourses of coping and social support being produced in the text. A repertoire of coping emerged as participants talked about grief. The discourse constructs individual coping styles and social influences. Social support includes not only the informal support received from social interaction with peers and neighbours within the local community, but also with the types of organisations within the community which offer its services to support people. Such organisations may include for example, Income Support, Inland Revenue Department, Police, Victim Support and other professionals, such as Counsellors.

**Individual coping**

In constructing coping ability, participants spoke of personal thoughts. Individuality is constituted through subjective perceptions, and positioning occurs as speakers construct individual unique perspectives of coping. For example, in the following accounts the resource of 'thoughts' or 'thinking' about the death are seen as a normal consequence in coming to terms with the initial impact of the death.

"It's just the loss and knowing that you are not going to be able to bring him back and the not knowing why he did it. Well, I basically know myself, I think I know why he did it, but ..... your sense of reasoning is gone ..... you can't reason anything anymore."

*(Liz pp.11-12)*
"...I tend to put into prayers at night time - or thoughts through out the
day= I seem to have little parcels of thoughts. I was totally consumed
in thinking about death and life after death."

"I just realised it's far harder to accept and face your pain, than it is to
lock it in the cupboard and and think that it is miraculously is just going
to disappear."

(Jill pp.5&7)

Grief is impaired 'thinking' or 'reasoning', and thinking about the impact of the
loss is constructed as influencing emotions. Although thoughts triggered
emotional responses, they are also a response to the emotional pain. That is, there
is an interplay between emotions and thoughts. In the following account, thought
patterns are expressed in a manner that indicate they are helpful to the participant.

"I'm starting to feel better about myself. I know [deceased] would hate
to think I wasn't coping, because he relied upon me when he was away.
And I guess I have got to look at it that way - he'd be away and I would
keep going and um, so he he knows he can rely upon me. And I guess
that's what brought me to my level where I am."

(Lucy p.9)

Lucy positions herself as she constructs her unique situation and draws upon the
resource of 'thoughts' to explain her ability to cope. These thoughts are
constructed based, ironically, on the memory of what the deceased would have
expected. Thoughts are also carefully processed and are a part of everyday
reasoning, and have helped in coping with grief. Some thoughts can have
negative outcomes. These are intrusive thoughts as they are not thoughts which
bring solutions to problems, but rather are thoughts that have no factual base. For
example, in the following account there are thoughts about suicide, and again
thoughts based upon memories of the deceased.
"...there has been times that I thought I would join him, that's how bad I've been. But then I thought, no, he wouldn't want that....." 
(Maggie p.9)

"I have never felt angry but there are questions that will never be answered. It does bother me at times, because you think - was there something I could of done that I hadn't done? Could I have prevented it?"
(Maggie p.8)

Thoughts are not in relation to making everyday decisions, but rather to try and make meaning of the death. Poor coping results as thoughts of suicide and other emotional disturbances occur.

"...once I've talked and got it out, I feel heaps better. But to sit here and think about it, and I'll tell you when I feel it worse is when I go to bed at night..... and I'm laying there thinking about it, thinking about it, and away I go."
(Maggie p.11)

Maggie distinguishes between talking about the loss and thinking about it. Talking about the loss is helpful, while thinking about the death leads to further distress. Embedded in these accounts is the notion of social support.

Social support
When participants described the support that they needed it was generally in response to a question asking them what support did they find helpful or unhelpful. Their response depended upon their positioning, needs and the nature of support sought and received. Consistent construction was the need to "get grief out" and "other people" were required to do this. Peers, neighbours and professional counsellors were people which the participants sought comfort and understanding, while welfare organisations are a source for information or financial support. A common construction was the need to validate and ventilate feelings. Accounts were constructed depending upon the availability and
willingness of people to listen and be understanding. For example, in the following extract, Lucy expresses her need to talk about her grief but finds people are not always willing to listen.

"Because it helps to talk about it, and often your friends don't want to - they shy away from the subject. Either they've heard enough or they feel talking about it might upset me. So I need people that I can talk about it quite openly with, without them getting upset or trying to shy away from the subject. Because he is too important to forget. You just can't do that and talking about it does help."

(Lucy p.12)

In establishing grief and coping, the need to talk about the death is important for two reasons. First, there is the need to talk openly as this helps in gaining understanding about the loss, and secondly, talking about the deceased keeps alive memories and the importance of the deceased's life. Lucy constructs an awareness of her need to talk, but also an awareness of the impact that this has on other people. Only certain people are suitable in the role of 'listener' or 'helper'. The following extract constructs a need to talk about the death and the implications of not talking.

"But I feel sometimes that I really would love to talk to someone, because I am better talking than sitting here crying to myself. I - once I've talked and GOT IT OUT, I feel heaps better. But to sit here and think about it....away I go".

(Maggie p.11)

Speaking of grief as having to be "got out", constructs personal complex emotions and inner worlds. The lack of support hinders ability to cope. The need to talk has been constructed as has the consequence of isolation. There is difficulty in gaining understanding and meaning about the death without social interaction. When Maggie has the opportunity to talk, she finds the social interaction helpful. This is further developed as Maggie continues.
"... I am doing it all on my own, I got no - nobody to say, "Oh, never mind Maggie, it will be alright." Not looking for sympathy but somebody that understands you know. I'm sitting here doing it all on myself. Yes, it's terrible and sometimes I go over to my neighbour....... but I don't like bothering people at all you know. So I just keep coping on my own."

(Maggie p.11)

Grief is something that is active - "it" has to be "done", and it is helpful when "done" with understanding people. Being passive and not talking with understanding people makes the experience of grieving "terrible". It is the lack of social support rather than complex inner emotions associated with the death which is constructed in these accounts.

Trait discourse
Participants drew on role and trait discourses to construct versions of support. Role discourse was drawn upon in relation to the way peers and neighbours featured in the role of support person, and also in the construction of the manner of support. In the following accounts, support from peers and neighbours was expressed drawing upon trait discourse. For example,

"I just found it a personal thing that - even the funeral was just a big effort. I don't know, it was horrible - it's sounds selfish, but the grief is just so intense, that to hear, to hear other people say that they are sorry is good, but to try and communicate with them and have five sentences of conversation was so draining. People don't realise they want to stand near you and be seen to supporting you. They want to help....."

(Jill p.14)

Trait discourse constructs grief as "a personal thing" and "intense". Jill characterises her response to the support offered as "selfish" at this time. Those wanting to help are positioned in the role of 'helper'. Support is given for 'social
approval' but this does not help the participant cope. Talking is helpful, but at the appropriate time. In this second account, trait discourse is drawn upon to give meaning to coping.

"...everything just sort of nosedived. The house filled with people. I don't consider myself a people friendly person. We, we have always been very private people that kept very much to ourselves........ So having a house full of people was hard - having to talk about it and not knowing much either........ I sat there just sort of smiling at people - I felt sort of strange. I really didn't understand what was going on. I had my children around me crying, I didn't know how to deal with what was happening to me without coping with my children and without coping with a house full of people. Um, the phone ringing, um members of the family using the phone to tell people, um and neighbours arriving. (Lucy pp.3&4)

Personal traits are drawn upon as the speaker positions herself. "I don't consider myself a people friendly person", and "We have always been very private people" positions Lucy as she constructs her unique coping style and ability to cope. People create confusion and without information about the death, talking to and coping with a house full of people, is "hard". In each of these fragments, the participants are the object of their ability to cope, and their personal traits are drawn upon in constructing their accounts. In contrast, when support from people is constructed as positive and comforting, the deceased becomes the object within the discourse.

"It was overwhelming because the people had come and the people that sent flowers was just overwhelming. Many young people because she was so popular with people and it was just magic - yea it was quite overwhelming."

(Shona p.5)

This account is constructed based upon the deceased, and support is perceived as overwhelming and helpful. Friends are comforting and helpful resulting in better
coping. This is based upon the perceived popularity of the deceased. This is also evident in the following account.

"So they all came round - a bunch of his friends. So we were talking and we started to laugh and talk about some of the times they had together."

(Penny p.7)

Talking and sharing memories with friends is valued in two ways. The comfort received from friends and the sharing of memories of the deceased helps in coping. Although grief is a time of sadness, laughter is possible as memories of sharing time with the deceased are recalled. The speaker is firmly positioned within social acceptance and responses of other people. The contrast or variation in these accounts suggest that an aspect of grieving is somewhat due to personal traits. Positioning of the speaker influences the function of the accounts. That is, where peers and neighbours are seen as supportive, the object and focus is upon memories of the deceased, while discourse constructed to indicate lack of coping was based upon personal traits.

Counselling

Professional counselling is constructed as helping people to normalise emotions and to gain understanding and meaning about the loss. The neutrality and knowledge base of a trained counsellor is embedded within this discourse on helpful support. In this section, the participants responses to a question asking about the support they found most helpful are analysed. In the following extract, helpful support is embedded in neutrality.

"[Counsellor] was very good, cause the family sort of tried to tiptoe around you and then yea, feel like 'God are they going to tell you to get a life soon? But [counsellor] was like she puts-you know, you made an appointment, went to her, talked and then went away and there was sort of good constructive feedback and people weren't sort of
tiptoeing around your family as if they were, you know, in a rush to get rid of you."

"I believe it's good to see a trained counsellor because you can persecute yourself and um, like I say, the family are there and in all sorts of stages."

(Shona p.12)

The function of this account is to explain why a counsellor is helpful. Grief is constructed in a manner that "you can persecute yourself". There are issues in grief of blame or responsibility which in turn 'aggrieve'. Thus, grief is seen to cause further grief, hence an intensification of complex emotional response. It is coming to terms with, and making meaning of the loss that grief responses lessen.

Shona's account focuses on the neutrality of the counsellor, where constructive feedback is given. 'Structure' or 'procedure' is constructed in seeking support from a counsellor, as the process is carried out in an orderly manner. When the entire family grieve, complex emotional inter-relatedness enters the story. Other people 'protect' those who grieve, and this complicates grief. In the following extract, neutrality and the "grieving process" are embedded in the counselling role.

"I realised that my wife was not coping with any more than the grieving process and having people around her, um, and secondly, the fact that it was the first time being through any of that sort of experience......my wife arranged ... for counselling... and that really was a successful process to go through. Having a third person listening to how you were feeling and the inter-reaction of different members of the family were really good."

(Peter, p.2)

There is a contrast between grief and other factors that need to be coped with. That is, grieving is seen as a "process" that is separate from other everyday issues. These other issues are unable to be dealt with due to the "grieving process". Grief is constructed as being in a separate 'state' or 'condition' that the individual must
cope with to be able to 'function normally'. Counselling is construed as helping the family to cope with this 'state' or 'condition'. The following extract adds another dimension to those already discussed. When prompted to further discuss how counselling was helpful, the accounts were constructed to suggest that information gathering and normalisation of the experience was being sought.

"I think having an outsider - professional outsider able to guide like an interviewer does.... but able to guide and explain in simple terms what you're feeling and that they are quite normal. One thing that worried us.... 'are we doing the right things for the children?' I mean, are we feeling the right thing? And it was understanding those feelings and having reassurance that they were quite normal - emotions - that there was nothing wrong in what we were doing, telling the children or arrangements that we were making or whatever. It was that assurance that, um was a great help to us."

(Peter pp.11&12)

Peter constructs grief as something that is unusual, which requires a "guide" to go through uncharted complex emotions and thoughts. Grief is constructed out of concern for "doing the right things" and "are we feeling the right things". Peter constructs the support as being a part of information gathering and approval of their coping style. This 'process' is helping the grieving, as it "reassures". In the following account another discourse constructing a version of 'coping' with grief emerges. That is, the ability to make better decisions.

"I felt like I wasn't getting anywhere. I started what I thought was a very bad habit and that was I started drinking alcohol. Just basically to drown out the pain and that's over a period of about three months. It got to the stage when I was scared in how much I was drinking and in what it was doing to me and what it was doing to the kids. So I stopped and consequently I couldn't sleep. I couldn't deal with everyday life because I was tired - constantly tired. So I went to the doctor and asked for help and he sent me off to counselling....... After just two - three weeks, I feel things are evening out. Not getting better, but they've levelled off in
such a way that I am not drinking at all - I just don't want too. I'm getting the sleep I need so it will get me through the day and I'm ready to cope with making decisions, which I think are important."

(Lucy p.9)

Grief is "painful", "tiring" and has an effect on "everyday functioning". Counselling ensures good decision making, and is part of bringing about change. Emotions, everyday functioning and decision making are embedded within the concept of, and as a fundamental part of grieving.

"I would suggest to any person that it has happened too, that they go through counselling and make sure they have had enough of it when they do have it....... Because I think, of anything if you don't get that part right then you can go on for years through a really miserable experience and can even lead to mental sickness - that sort of thing."

(Peter, pp.12&13)

The speaker is positioned as an observer of the grief process, and constructs grief as "a really miserable experience and can even lead to mental illness". That is, emotions if ignored or unresolved can develop into a mental illness. Professional support is constructed in relation to the ability to cope and function. Counselling is constructed as an important part of the "grieving process" as it enables better decisions to be made, and the prevention of ongoing emotional problems.

Construction of accounts concerning welfare organisations depended upon the nature and context of support/help that was sought and received. Welfare organisations in the discourse included Victim Support, Police and other government departments such as, Inland Revenue, Income Support and the Accident Compensation Commission. In constructing versions of support, variations in the discourse reflects the speakers positioning with the perceived usefulness of the help given by the organisation. For example, in the following extract the 'actions' of the organisation are construed to be helpful.
"They [Victim Support] were initially there on the day and they brought round this spot dog and this type of thing, but um, they did more of tele-marketing the other services of people."

"The two things that really stood out was the competence and the professional job of the police. I mean, you couldn't go past them - they really were. We had a Victim Support Officer in the deposition hearing - she was really top-notch. But the whole crew was just brilliant. Um, and I would think the whole community was as good a healer...... Why I say the police is because it could have been - if it didn't happen at deposition hearing - the sentencing occurring - and he hadn't pleaded guilty, we'd looked at anything up to another twelve months of dragging through a full court - High Court process and that would have been quite dramatic and drawn out."

(Peter p.11)

Support is constructed in these extracts as 'actions' of the organisation and the 'outcome' of those actions. The outcomes are constructed in a positive manner and this is related to the perceived competence and professionalism of the organisation. However, when the outcomes are not perceived to be helpful, versions are constructed negatively. For example,

"I found a lot of things unhelpful - from Victim Support to um ACC, to Inland Revenue - all the departments that are meant to be there to help us. TOTALLY, TOTALLY let me down. Victim Support did nothing for me - apart from visit me that night. They really - there was no ongoing support there. A couple of phone calls, but after that there was nothing. Um, Income Support - it took three phone calls for me to find out what I needed to go in there and apply for a widows benefit. My first conversation with them - they said that I was to young for the widows benefit, that I would have to go on the DPB. That was totally shattering. ACC let me - led me a merry dance...... My case worker let me down there, by not giving me the information. Inland Revenue weren't going to help me out financially.....and when I went to see them I was very blunt. I've had to fight for every scrap of information before I've got anything and got anywhere. They just don't give out enough information..... So all those departments let me down badly. It was hard to deal with that"

(Lucy pp.13&14)
Community organisations are a source of information to assist people to cope. When information is not forthcoming, the speaker positions herself as though she is 'victimised' a second time. That is, there are not only complex emotions of the loss to cope with, there is also the frustration of dealing with insensitive bureaucratic welfare organisations. Embedded within this account is the notion that grief is life altering, and information and support is important to rebuild or restructure life without the deceased. However, when information or support is not forthcoming, then this is "shattering". This is consistent with the following extract.

"Community Mental Health are too busy. [mental health hospital] don't want to know ya. They just tell ya, 'oh if you've got any questions about ya brother's treatment, you had better came back and see the psychiatrist'. That's not much good to me mate, I don't want any answers about his treatment. He didn't have that much damn treatment........... I rang Community Mental Health to talk to someone but no one's available - everybody is too busy - haven't got the funds to keep people on, so I just give up."

(Liz p.14)

Lack of support is constructed as Liz tries to cope. Positioning also occurs as Liz constructs a need to talk about her feelings. When support is not forthcoming, withdrawal takes place leaving the individual to cope alone.

The discourse on coping is constructed in a manner which indicates that support is required to validate and express feelings and thoughts, and also to gather information and seek understanding and approval of responses and actions. There are interesting contrasts in the construction of accounts, and these contrasts are constituted in the function of the discourse. Speakers are positioned depending upon perceived needs, and whether these needs are met. On the one hand, support is evaluated positively as individual needs are met. The participants associated
with this construction express an ability to cope with grief. On the other hand, support is negatively constructed when participants struggle to cope when information is not readily available. Participants construct their accounts, positioning themselves as 'victims', and grief is compounded.
This study has analysed the discourse of participants in accounting for their experience of grief associated with the sudden death of a family member. The constructions of their grief experience and the resources drawn upon has been explored and discussed throughout the analysis.

One clear outcome from the use of discourse analysis as the method of enquiry, is that the participants produced many and varied constructions when talking about grief. Grief is constructed in several ways, and performs different purposes depending upon the context and function of the discourse. However, participants generally constructed grief from an emotional, social or cultural perspective. In doing so three main themes emerged - emotions and thoughts, social and cultural factors and coping. Grief was constructed by drawing upon discourse constituted out of these themes. Subjectivities were constituted with perplexing emotional experience and competence in talking about emotions, thus variation in accounts occurred. That is, the variation is not to say that the participants were dishonest in their accounting.

"Rather, the casting and recasting of events or the creation of different versions is endemic in natural discourse. It is a pervasive and unavoidable feature of social life".  
(Marshall and Wetherell 1989, p.110)

However, when making general reference to grief, there was consistency in the linguistic resources drawn upon and this was a foundation to express grief. It is
constituted out of a discourse that they share and describe a consistent meaning of grief. It functions to present each participant as being consistent regardless of the individual differences and the varying context of the death. Participants had difficulty in talking about grief as an 'internal emotional state', but were able to express themselves and construct versions when they spoke about their actual grief response. This difficulty in describing grief indicates a possible lack of understanding about grief, and the meaning given to grief is associated with personal experiences within a social and cultural context. This may indicate that there is a part of grief that is not socially or culturally constituted and therefore linguistic resources are not readily available due to unfamiliarity to construct grief talk. In other words, if the grief response to a sudden loss is a new experience, words may not be available to construct this new experience linguistically. Thus, there may be aspects to grief that are never resolved, as there are no words to give meaning to that experience.

The analysis showed that when the participants talked about grief, their story was positioned in individual perspectives and was embedded in emotional, social and cultural factors. I suggested in the introduction that grief reactions are culturally constructed and that it is necessary to understand the social relations in which the individual lives. This suggests that to understand what meaning is established after a loss, it is important to understand the social and cultural environment in which the grieved individual lives. In this case I expected emotional responses to be consistent, but the different experiences of grief to be influenced by social and cultural backgrounds. Generally this expectation has been confirmed. By talking about grief as being 'shared', and by constructing versions of accounts in relation to other people, the participants kept social and cultural factors firmly embedded in the discourse. In other words, grief resides or is embodied within individuals, but is something that is 'done' between people.
When the participants came to talk about the death, the function of the discourse depended upon the nature of the death. Although there was consistency in initial emotional responses, the discourse was constructed in a manner that reflects not only what the loss has meant, but also social factors associated with the death. For example, discourse associated with suicide was constructed in a manner which reflects the social implications of such a death. While attempting to explain grief coherently, these participants set their constructions on the actions of the deceased and the social implications of those actions rather than on the death itself. In doing so they positioned their talk, distancing themselves from the deceased actions, thus disclaiming prior knowledge that the deceased was suicidal. Constructions of grief emotions for these participants included "guilt", "failure" and "embarrassment" due to the stigma society places on suicide.

In describing grief, the participants generally constructed emotions in two ways. First, emotions being uncontrollable and being embodied, drawing upon physical metaphors to gain meaning and expression. These emotions are described explicitly. That is, there is clear understanding of the emotional 'state' or 'condition' that the participant is experiencing. Emotions experienced as an initial reaction are quite explicit and are described as "shock", "horror" and "dismay". Participants constructed these emotions as being very intense and immediate and being embodied within the person. Secondly, emotions described implicitly are those emotions that have been constructed as a result of cognitive and social factors. These emotions were generally constructed as "sadness", "anger" and "depression" and were unexpected, unprovoked, uncontrollable and occurring some time after the initial reaction to the death. There is suggestion that these emotions are a result of social factors associated with the death. Underlying the participants accounts on emotions is an assumption that some emotions can be controlled and this control influenced when and how the individual grieved.
In some places there are tensions between emotions, social factors and culture. These tensions were generally expressed within social and the family context. The tension is a function of using two discourses to talk about grief. One discourse is used to describe and express emotions while the other discourse provides explanation and justification for those emotions. In this sense there is a content or 'report' component to the language and an underlying relationship or 'command' aspect. That is, the language does more than convey information, it also defines the relationship between the emotion and its cause.

All of the participants in this study produced constructions that objectified grief as "it". This enabled grief to be talked about in general terms as being embodied within the individual but was socially and culturally influenced. The various ways grief was socially constructed differentiated from the kind of grief expressed in relation to personal emotions and reactions, and were constructions of the kind that reflect the importance of these social factors. That is, each participants' construction reflected their personal experience that was socially constituted. In some cases, social and cultural factors were constructed as helpful, while in other cases these factors led to further anguish. Social factors were produced in one of five ways. Grief can be "shared" with other people, however, this was not always construed as beneficial; grief is influenced by family members and close friends; grief impacts on the community and the community influences personal experiences of grief; grief is determined and influenced by cultural beliefs and expectations; and finally, grief is reflected in maintaining a bond with the deceased. The implication here is that social and cultural factors are an important aspect of grief and the lack of appropriate social support and acceptance impacts negatively on grieving.

Within the discourse on social and cultural factors is embedded the notion of
Two discourses emerged as participants constructed coping. Firstly, peers, neighbours, and professional counsellors were people where comfort and understanding is sought. Welfare organisations within the community are expressed as a source of information or financial support. Construction of accounts reflected the function of the discourse. Participants who received information or support constructed their accounts affirmatively as they perceived this support as enabling them to cope with grief. Secondly, personal coping styles were constructed and this generally was expressed by drawing upon trait and cognitive discourse.

All the participants except one are still experiencing the impact of grief, that is, the death occurred within two years of the interview. They have talked about grief using discourse that is appropriate and relevant to how they were feeling at the time, as opposed to just recall of memory. This enabled a construction of grief which reflects true feelings and experience rather than intellectual thoughts enmeshed within memory. It is implicit within the participants' accounts that they are explaining themselves in ways that are consistent with societal and cultural norms. However, these constructions are entirely appropriate in context, and meet the expectation of consistency. In this sense the participants drew on discourse that has become 'common sense' accounting of grief. The participants have, by their constructions, marked the necessity to express themselves in a way that reflects the importance of interaction with social and cultural environments. That is, to gain meaning of grief, there is a requirement for social relationships and approval. Therefore, the variations in the discourse may be due to personal experiences, positioning, and the specific nature of the death.

This present study can be seen to confirm that grief has many determinants which affects the outcome of bereavement. Emotions are internal states that have
expressive, subjective and physiological components (Ginsburg & Harrington, 1996), but grief reactions are also to some extent socially and culturally constructed (Stearns & Knapp, 1996).

Much of the data in the texts was an impoverished resource as it did not relate to the research questions. There was a requirement to be sensitive to the needs of the participants during the interview, allowing them to speak freely. However, I have found the approach taken in this study to be an appropriate method in conducting research into grief. It has been empowering and a rich source of information. The approach allowed for the unique study of subjective experiences and accounts of grief, but was also therapeutic for the participants.

A number of areas that emerge from this study may provide the basis for future investigation. These include the question of how the different variations in accounting for grief are related to existing social relationships. Embedded in social relations are the issues of gender, social class, education, age, personal traits, religious beliefs and vocation. A second and important question to be investigated is the different way participants grief accounting relates to the nature or cause of death. That is, it was found that there were variations in grief talk depending upon how the deceased died. This may lead to a better understanding of individual support and coping needs, as well as other interventions, if appropriate, which could help in assisting grieving people to gain understanding and meaning of the loss.
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Appendix A

Kevin Mist
PALMERSTON NORTH

13 February 1998

Manager
N.Z. Council of Victim Support Groups
Police Station
Private Bag
PALMERSTON NORTH

Manager
Workplace Support
36 Cascade Crescent
PALMERSTON NORTH

Dear

I am doing research this year at Massey University into how people socially construct and express grief that is associated with the sudden death of a significant person. I hope to have ten people participate in this research. At this stage I am in the process of locating these participants so that the interviews can be carried out in March or April.

I am aware of the sensitive nature in which Victim Support functions and the issue of confidentiality. However, I am writing to ascertain if it is possible that you or any of the Victim Support Workers may know of any person that is willing to volunteer to participate. Participants of this study will have experienced the sudden loss of a significant person, and at least six months has lapsed following that loss. I have enclosed an Information Sheet (Appendix B), which outlines what is involved. If any person indicates their willingness to participate they may either contact me, or I can contact them to arrange an interview time that suits them.

This request is only tentative as the research project still requires approval from the Human Ethics Committee at Massey University.

Yours sincerely

Kevin Mist
Appendix B

THE SOCIAL CONSTRUCTION OF GRIEF ASSOCIATED WITH SUDDEN DEATH

INFORMATION SHEET

What is this study about?
I am interested to learn about the influences upon people as they grieve. In this study my aim is to investigate how grief is influenced by social relations and culture. I hope to gain understanding of how people use everyday language to talk about their response to a loss caused by accidental or unnatural death. The participants' of this study will have experienced the loss by accidental death of a family member or close friend, and six months have lapsed from that loss.

The researcher.
My name is Kevin Mist. I am a student at Massey University, and this research is for my Master's Thesis. I have a BA degree in Psychology and Education, a Diploma in Social Sciences (Psychology), a New Zealand Certificate in Counselling, and have almost completed a Diploma in Ministry Internship. I am being supervised by Dr. Keith Tuffin, a Senior Lecturer of the School of Psychology at Massey University.

What is my involvement?
You are being invited to participate in an audio taped interview with the researcher. The interview will be approximately 45 - 60 minutes long, and will be at a time and place which suits you. In the interview, you will be asked to talk about and describe your experience of losing a family member or close friend through a sudden and unnatural death. Any questions I ask will be to prompt you in telling your story, rather than to gather specific information.

What can I expect from the researcher?
You have the right to decline to participate in this study. If you do agree to take part in the study, you have the right to:
- refuse to talk about any issue(s) during the interview.
- withdraw from the interview at any time.
- ask for the audio tape to be turned off at any time during the interview.
- provide information on the understanding that it is confidential to the researcher and the researcher's supervisor, and will not be shown to anyone else without your permission.
- have your audio tape transcribed by the researcher.
Appendix B

- be given a copy of your transcription so that you can read over your interview and edit it to your own satisfaction before the information is analysed.
- have all names, places, and other identifying information changed during transcription so that you cannot be identified in any way. Quotes from your account may be used in the thesis, but they will not identify you in any way.
- be given access to a summary of findings at the completion of the study.
- have your information stored securely at all times. Audio tapes will be transported in a combination lockable briefcase.
- at the end of the study, have your audio tape returned to you, or erased, on your say so. Your transcript will be kept in storage.
- be put in contact with a trained counsellor if you suffer any distress at any time, as a result of your participation in the study.

You are welcome to contact me or my supervisor, either before you agree to take part, or at any time during the study, for further information or to discuss and clarify any questions you may have about the study:

Kevin Mist
C/- School of Psychology
Massey University
Home Ph.(06)356 1855

Dr. Keith Tuffin
School of Psychology
Massey University
Ph.(06)350 4140
Appendix C

THE SOCIAL CONSTRUCTION OF GRIEF ASSOCIATED WITH SUDDEN DEATH

CONSENT FORM

I have read the Information Sheet and have had the details of the study explained to me. My questions about the study have been answered to my satisfaction, and I understand that I may ask further questions at any time.

I understand my rights as a participant including the right to withdraw from the study at any time, or decline to answer any particular questions during the interview.

I agree to provide information to the researcher on the understanding that no one other than the researcher and the researcher's supervisor will have access to the information. (The information will be used only for this research and publications arising from this research).

I agree/do not agree to the interview being audio taped.

I also understand that I have the right to ask for the audio tape to be turned off at any time during the interview.

I agree that quotations from my transcription may be used in segments of the thesis, on the condition that they do not identify me in any way.

I wish to participate in this study under the conditions set out in the Information Sheet.

Signed: ____________________

Name: ____________________

Date: ____________________

Researcher: ________________
Appendix D

THE SOCIAL CONSTRUCTION OF GRIEF ASSOCIATED WITH SUDDEN DEATH

INTERVIEW SCHEDULE

- Background to death: Relationship with deceased? What actually happened - how, when, where?
- How did you find out? Who told you? Where were you?
- What was your initial reaction?
- Others' reactions: Family members, friends, workmates, acquaintances?
- Involvement of Professionals: Police, Medical personnel, others?
- Funeral arrangements: Who made them? Were you involved? What happened? Reactions/comments of others about the death?
- Own feelings and reactions: (e.g.) sad, angry, depressed, etc.
- Ongoing relationship with mutual friends?
- Death ever discussed at home or with others?
- Deceased still talked about?
- What form of social support did you find helpful/unhelpful?
- Comments/suggestions to others going through similar experience?
- Other comments including comments on the current study?
Appendix E

TRANSCRIPTION NOTATIONS

Pauses
" too short to measure = (.3)

Overlap in utterances = [ ]

extension of preceding vowel sound = ::

added emphasis = underline

words louder than surrounding = CAPITALS

audible intake of breath = .hh

inaudible or doubt about word = (Brackets)

transcript deliberately omitted = [ ]

clarification information = [the speaker's mum]

no discernible gap between speaker's utterance and the start of the next =

break in the voicing of a sound = Mrs Smith/ie

abrupt stop (hyphen) = and -.hh

faster or slower speech = <(faster) > (slower)<
Appendix F

SUMMARY RESULTS OF THE STUDY INTO THE SOCIAL CONSTRUCTION OF GRIEF ASSOCIATED WITH SUDDEN DEATH

The purpose of this feedback is to provide you with some background information and to give you the basic findings of the study. Conclusions at this stage are tentative.

Previous research into grief has come largely from a traditional paradigm which has presumed a model of grief in which emotions are construed as internal states. These traditional theories of grief have assisted in understanding emotional symptomology in response to loss and have generally been responsible for the development of 'process' models of grief.

This study set out to see how people talk about grief by analysing the linguistic resources (discourse) drawn upon to construct grief. It was expected that grief reactions are to some extent socially and culturally constructed, quite apart from individual differences. That is, societal and cultural beliefs and norms influence and reflect how people grieve.

Data was collected early in 1998 from ten participants who had experienced the sudden death of a family member.

The results of the study tend to support the notion that there are many aspects of grief which are constructed in various ways depending upon context. It also appears that these constructions are linked to societal and cultural beliefs and norms in that participants drew upon common discourse in their accounting of grief.

Briefly, the study shows:

* grief is a mixture of other emotions and thoughts
* grief is embodied within the individual (loss responses are talked about as physical metaphors)
* social factors, support and relationships are embedded within grief
* cultural beliefs and norms bring understanding and meaning to the loss
* grief can be controlled to some extent
* people 'do' grief (it is not something that is 'done' to us) that is, grief is personal management as we deal and cope with the loss

I wish to thank everyone who participated in this study. Without your help this research would not have been possible. I hope the study has increased your awareness about grief and that you found the opportunity to participate helpful.

If you would like more information please contact me - telephone (06) 356 1855.

Kevin Mist