LIFE AFTER CHILD'S DEATH: THREE TYPES OF PARENTAL MOURNING

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ABSTRACT

LIFE AFTER CHILD'S DEATH: THREE TYPES OF PARENTAL MOURNING

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In the present study, detailed interviews were conducted through Constructivist Grounded Theory (CGT) methodology with parents whose children died. At the end of this research, a theoretical model of parental mourning, including critical dimensions of grief and life after death, was presented. The model contains three modes of mourning; *Lifeless Mourning*, *Mourning Through Action*, and *Muted/Forbidden Mourning*. These three different mourning experiences of parents had different background aspects regarding parental attributions to cause of death, guilt and blame, identification with the deceased child, parental struggles to cope, and the reconstruction of self and identity.

Keywords: Parental mourning, grief, child's death, constructivist grounded theory

ÖZ

EVLAT KAYBINDAN SONRA YAŞAM: ÜÇ ÇEŞİT EBEVEYN YASI

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Bu çalışmada, evlat kaybetmiş ebeveynlerle Yapısalcı Gömülü Teori (YGT) metodolojisi ile detaylı görüşmeler yapılmıştır. Bu araştırmanın sonunda, yas ve ölümden sonraki yaşamın kritik boyutlarını içeren teorik bir ebeveyn yas modeli sunulmuştur. Model üç yas çeşidi içerir; Cansız Yas, Eylem Yoluyla Yas ve Susturulmuş/Yasaklanmış Yas. Ebeveynlerin yas deneyiminin; evladın ölüm nedeni, suçluluk ve suçlama, ölen çocukla özdeşleşme, ebeveynlerin başa çıkma mücadeleleri ve benlik ve kimliğin yeniden yapılandırılmasına gibi bağlamlara bağlı olarak farklılaştığı gözlemlenmiştir. Araştırma kapsamında farklı yas tipleri ve ilgili kategorilerin nasıl bir etkileşim içinde olduğu belirtilmiştir.

Anahtar Kelimeler: Ebeveyn yası, keder, evlat kaybı, yapısalcı gömülü teori

To my beloved husband

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CHAPTER 1

INTRODUCTION

'Ever the river has risen and brought us the flood,
the mayfly floating on the water.
On the face of the sun its countenance gazes,
then all of a sudden, nothing is there!
The abducted and the dead, how alike is their lot!
But never was drawn the likeness of Death,
never in the land did the dead greet a man.
The Epic of Gilgamesh

Birdenbire hiçbir şey kalmaz geriye
Akarsuya karışan su sineklerinden
Ve güneşi gören yüzlerden
Uyuyan da birdir, ölen de!
Asla çizilmedi Ölüm'ün sureti
Yine de ezelden beri
Tutsağıdır onun insanoğlu!
Gılgamış Destanı

Human dies. The loved ones die. The human is condemned to witness the death. The human has to live with this knowledge. This feeling and the need to transcend death, which echoes in the first known literary work of history (Gilgamesh, 2100 B.C.), has an inevitable place in the essence of being human. Death has manifested itself throughout history in all reflections of humans. It has been a matter not only of the wise people but of every living consciousness since it is the ultimate end of existence and what comes next to it is unknown (Frazer, 1927). Sentenced to live with the consciousness that one cannot escape death, humans sought various ways out. As a result of this search, death, what awaits people after death, and the relationship established with death has changed throughout history for different societies (Aries, 1975).

Within the scope of this dissertation, the researcher tried to understand what the death of the child, which is the most painful and absurd state of death, does to parents and what changes occur in their lives after the loss. Disbelief in death, which is, in fact, not being able to believe in death, is a reflex we have carried since the first humans (Frazer, 1927) that inevitably influenced the researcher (me) while studying this type of mourning. We will die, everyone will die, that is, we will die! Everyone and everything we love will perish. How can a person love anyone by knowing this information? How can a person feel safe? How can one live with this knowledge? Considering all these questions, one may also ask 'Have the thoughts and feelings about death always been like this?'. Humans have always died, but have they always died like this? Was it always so destructive and hostile when the death and even the death of children were much more common?

Human beings are weak against nature, and there are many dangers in wildlife; therefore, death has been one of the most fundamental issues since the first human. The first humans believed that death is not inherent in human nature, and supernatural evil forces are involved in every death that takes place. Without the evil power, in fact, human beings are believed to be immortal (Frazer, 1927). However, over time, death gradually became tamed, became a part of human life, and started to be accepted to a certain extent (Aries, 1975). The death being tamed could be a result of the breakdown of the belief that the human being is immortal, the emergence of the belief that life continues after death, and the widespread and inevitable occurrence of death at each house. With these changes, death in Medieval Europe ceased to be an enemy to be defeated and became an accepted situation as the beginning of the next life. At those times, the dying person and the witnessing relatives tended to reflect a sad acceptance. Then, the relationship with death changed again through questioning of religion and belief systems, industrial developments, and decreased dependence on nature (Aries, 1975). Today, death has become an enemy again, which should not be experienced in public or even almost forbidden as a result of lower mortality rates, advances in medicine and technology, and weakened interconnectedness to nature. To a large extent, people no longer witness their dying relatives; instead, the specialists in the hospital's intensive care units accompany the death (Aries, 1975). Hence, death became alien and neglected, perhaps closer to what the first humans felt. For this reason, the destructive power of death becomes much more significant than it was for

the medieval people who could welcome death in their lives. Stating differently, as the visibility of death decreases, its effect increases.

While death is an intense issue for today's people who often need to forget about their mortality, it is not difficult to understand that a child's death has become an increasingly alien and impossible experience that should not happen. Regardless of the perceptions about death, a child's death is considered the most challenging grief in almost every society (Paykel et al., 1971). So much so that the first sentence of many academic articles on this subject tends to state that this loss is the most complicated experience in the world. How to relate to this type of loss has varied from culture to culture and from period to period (Miller, 1999; Riches & Dawson, 2000; Schiffman, 2020).

1.1. Culture, Religion and Child's Death

Death, grief, and mourning can only be fully understood within the cultural context. It is pretty common for everyone to have certain connotations about death and mourning; however, many of these associations are likely to bear traces of the culture and belief system in which the person lives. As stated in the previous section, social structure and belief systems have essential roles in conceptualizing death, how to form a relationship with death and how death can be made meaningful for the individuals and society (Riches & Dawson, 2000; Volkan & Zintl, 2018). In other words, the relationship established with death and what meaning will be created while experiencing this painful incident are primarily influenced by the culture inhabited (Riches & Dawson, 2000; Schiffman, 2020). Before the enhancements in modern medicine, the infant death rates were relatively high among many cultures (Aries, 1927/2015). Stahl (1991) conducted a study with Oriental Jew parents who had experienced infant death very commonly until the mid-20th century. He stated that these parents did not mourn unless their baby was older than one month, although the family concept and mourning rituals were important in their culture. According to Stahl (1991), parents' emotional detachment functioned as an important psychological tool to not lose mental and emotional balance during the times of widespread infant deaths. Similarly, during the medieval times in Europe, parents tended to be almost indifferent to the loss of their

babies such that the dead babies were left around the fields or the places near the house (Aries, 1975).

Cultural norms define acceptable and inappropriate responses and emotions in grief as in many areas of life (Rosenblatt, 2003). For this very reason, normal and abnormal grief differ from culture to culture (Stroebe & Schut, 1998). Besides, culture and religion are also influential in the formation of culture-specific after-death practices, such as how to say goodbye to the deceased, what to do with the body, after-death ceremonies, what to do on special occasions, and how to remember and honor the dead person (Shuchter & Zisook, 2003). Although there may be some intercultural similarities in certain beliefs and practices (Parkes et al., 1997), the social constructivism view argues that mourning is also a social phenomenon and that one's emotional responses are constructed in interaction with cultural codes rather than being a given reality (Averill & Nunley, 2003).

Cultural codes are not limited to identifying the feelings and practices that accompany death. Beliefs and rituals also help the bereaved person find meaning in the loved one's death (Neimeyer, 2002). There are studies suggesting that religious beliefs and rituals have a considerable effect on making sense of and coping with the loss experienced (Benore & Park, 2004; de Vries et al., 1997; Doka, 2002; Horowitz, Bonanno & Hole, 1993; Parkes et al., 1997). However, in some cases, when the individual's subjective experience does not match the expectations and norms, this discrepancy can create an emotional burden on mourners rather than calming and consoling the mourner (Aksöz-Efe et al., 2018). Therefore, to understand mourning and the course of grief, it is necessary to consider both cultural and subjective dynamics.

The sharpening of the distinction between subjectivity and culture can be considered in light of the decreased effect of culture on individual life (Parkes et al., 1997). However, the weakened impact of cultural customs is not experienced equally in every culture (Bağcaz, 2017). For this reason, it should be noted that in order to understand the mourning process, it is crucial to understand its individual, social, cultural, and religious dimensions. Each death and the individual reactions after the death should be evaluated in their subjective context (Bonanno et al., 2005; Klass, 2014; Lalande & Bonanno, 2006). For example, according to the Karma belief in China, if people were

evil in their previous life, they would be punished with their child's death in their current life, which is considered to be the worst punishment. Therefore, bereaved parents were exposed to tremendous social pressure and ostracization, which complicated their grief even more (Zheng et al., 2017). Likewise, the one-child policy in China had many adverse effects on the parents who lost their only child (Fu et al., 2020).

Every culture has particular norms and beliefs which shape emotional expressions and subjective experiences of grief (Stroebe & Schut, 2010), so it is essential to remark social and cultural context of Turkey for this study. Turkey is a region that has been home to a variety of beliefs and communities throughout history and, therefore, is rich in traditions and customs. Although there are various beliefs (Islam, Christianity, Judaism) the majority of Turkey's citizens are Muslim (Sunni or Alevi) (Ataca et al., 2005). Therefore, most of the condolence practices and after-death rituals reflect Islamic customs. When there is a funeral, the family, relatives, friends, neighbors, and acquaintances come together and support the bereaved people. They provide essential assistance in funeral arrangements, cooking meals for the grieving family, serving food to the visitors, and helping with household chores. During the first seven days following the death, bereaved individuals are not left alone and often pray for the deceased collectively. Meanwhile, food is served at funeral home to the guests who come to support bereaved family members. After this ritual, which usually lasts for seven days, people come together again on the 40th and 52nd days to pray for the deceased. In addition to these special dates, commemoration, praying, arrangement of Mevlut, or grave visits can be carried out on anniversaries and religious holidays. The organization of Mevlut, which is gathering of people to pray collectively for the deceased, is one of the most common practices of Muslim families in Turkey on special dates. In addition to praying, food is served to guests in the name of deceased child. All belongings of the deceased tend to be given to those in need following the death, except for a few items that the family members want to keep for themselves as a memento. Besides, it is also common to donate to certain charities or institutions on behalf of the deceased at certain times (Aksöz-Efe et al., 2018; Cimete & Kuğuoğlu, 2006).

In Islamic belief, life does not end with death. On the contrary, there is an infinite life after death. Depending on the good or bad deeds of individuals throughout their lifespan, they will either be in heaven or hell (Hedayat, 2006; Rubin & Yasien-Esmael, 2004). Thus, after-death rituals including collective prayer or helping others on behalf of the deceased are some of the attempts to help the deceased to be forgiven by God and reach heaven. Still, apart from religious meanings, praying or helping others on behalf of their child are emotionally soothing experiences for the parents since they feel connected with their deceased child. In addition, according to Islamic belief, when children die before puberty, that is in the age of innocence, they go directly into heaven. It is also believed that these children refuse to go to heaven without their parents. Therefore, parents losing a baby or a child are believed to reach heaven by means of their children and this sentiment is frequently conveyed by others to provide condolences (Hedayat, 2006).

In addition to religious beliefs, being located at the crossroads between the West and the East also shapes Turkish culture (Ataca, 2009). Turkish culture was traditionally shaped by collectivist values due to the existence of strong relatedness, close ties with family, friends and relatives and prioritization of group needs over individual requirements (Hofstede, 1980/2001; Schwartz, 2006; Kağıtçıbaşı, 1970). However, there has been a rapid social and cultural change (İmamoğlu, 1998). Kağıtçıbaşı presented "relational autonomous self" concept to refer to cultural dynamics in Turkish context (1996). According to her, Turkey is neither individualistic nor collectivistic but is a combination of both. She observed economic independence and psychological interdependence in middle-class urban families (Kağıtçıbaşı, 2005). Psychological interdependence manifests itself in having close ties with nuclear and extended family. Kağıtçıbaşı conceptualized Turkish family characteristics as structurally nuclear but functionally extended (1996). Thus, people frequently interact with grandparents, aunts, uncles and cousins in addition to parents and siblings (Kağıtçıbaşı, 1996). The cultural norm of not leaving the bereaved family alone during the first weeks of loss (Aksöz-Efe et al., 2018) can be considered a reflection of psychological interdependence.

Cultural norms regarding emotional expressions are also related to mourning processes. In Turkey, there is no study about emotional expression of bereaved parents

or gender specific manifestations of grief. According to general findings about emotional expressions, women are more emotionally expressive compared to men (Kuyumcu et al., 2019; Tunay-Akan & Barışkın, 2017). Similarly, showing grief-related feelings are assumed to be more appropriate for women than men in Islamic philosophy (Hedayat, 2006; Rubin & Yasien-Esmael, 2004). Expression of grief related emotions are welcomed during a short period after the loss, but not much after that. Hence, crying after the deceased is considered normal to some extent, but it is expected not to last long.

On the other hand, denial, rebellion, and anger are not very acceptable (Cimete & Kuğuoğlu, 2006). This restriction of expressing certain emotions, such as disappointment, denial and anger, is a part of Islamic philosophy about God's will and fate. In Islam, the manner and time of individual's death is predetermined by God's will and expressing anger about a loss is regarded as rebelling against the will of God. Therefore, these emotions or prolonged mourning process with public manifestations are not socially acceptable (Hedayat, 2006; Rubin & Yasien-Esmael, 2004). As a result of this, in some cases, the bereaved person may be prevented from experiencing and expressing emotions explicitly or implicitly. In the early days of loss, family and friends may prevent the bereaved individuals from fully comprehending death by keeping them busy and diverting their attention away from sorrow. The crowded visits function in a way for the bereaved people to gradually accept the loss, not confront all the upsetting aspects of this bitter reality, and slowly get used to it. However, prolonged prevention of mourning and the attitudes of family and friends that prevent sharing of emotions can also have a negative effect on the course of mourning. If the supporting people encourage the sharing of emotions about the loss, this can positively affect the resolution of grief (Cimete & Kuğuoğlu, 2006).

1.2. The Process of Mourning

1.2.1. Bereavement, Grief and Mourning

Although sometimes these concepts are used interchangeably, they have different meanings (Worden, 2009). Bereavement is the term used for the objective situation of losing a loved one or a significant other to death (Hindmarch, 1993; Kastenbaum & Moreman, 2018; Stroebe et al., 2001). Kastenbaum and Moreman argues that

bereavement is associated with the change in the status of the bereaved; meaning that bereaved individual gains different status after the loss. For instance, a child may become an orphan, or a wife or husband becomes a widow/widower. Nevertheless, Kastenbaum and Moreman (2018) highlight the non-existence of a particular word to account for a parent losing his or her own child, which may mean that there is no internal change in status in regard to being a parent or non-parent in the case of child's death (Klass, 1999; Klass et al., 1996). In other words, a parent is a parent whether the child is alive or dead.

Grief is mainly defined as emotional reactions of a bereaved individual (Hindmarch, 1993; Kastenbaum & Moreman, 2018; Stroebe et al., 2001; Worden, 2009). Grief is the most prevalent emotional response to bereavement but not necessarily the only one; there may be anger, resentment, blame, or delay of emotional reactions in the form of indifference (Kastenbaum & Moreman, 2018). In the process of grief, many areas of life tend to be influenced. The grieving individual may have problems regarding attention, memory, concentration, alertness; may become careless and distressed; and may sometimes be prone to dangerous acts or accidents (Kastenbaum & Moreman, 2018). Grief is not a form of illness, yet it may increase the susceptibility of a person to illnesses prompted by stress-related hormones, such as cardiovascular, inflammatory, and infectious disorders (Hall & Irwin, 2001).

Duration and process of grief have personal and social patterns, yet it is known that even a person appears to have overcome a loss, there will be fluctuations in grief, referred to as waves of grief. A person who recovered from grief may experience waves of distress even years after the loss (Rosenblatt, 2000). Anniversaries, certain people or places associated with the deceased, some major life events, such as graduations, marriage, having a baby, may function as reminders of the deceased that invoke a wave of grief (Kastenbaum & Moreman, 2018). Subsequent waves, in general, tend to be briefer and milder (Kastenbaum & Moreman, 2018).

Mourning refers to social and cultural manifestations of loss. These manifestations of loss and grief are reflected in the manners and actions of the bereaved person (Mander, 2006; Parkes, Laungani, & Young, 1997; Walter 1999). Stating differently, mourning is the reflection of sorrow and grief in culturally and socially accepted and promoted

manners (Kastenbaum & Moreman, 2018). Mourning is the bereaved person's adaptation process to a new life in the absence of the deceased (Worden, 2009). In the present study, the term mourning was used mostly in the results section. Yet, in the introduction section, these three words were used interchangeably to reflect the article authors' preferences. In summary, mourning, grief, and bereavement are related by distinct terms. All the processes, rituals, and emotions related to the death of a loved one are especially intense when that loved one is one's child.

1.2.2. The Effects of Child's Death on Parents

In dark wells, you left me without a ladder (an exit)
See, in the middle of the seas, you left me without any sail
You deeply destroyed all of my convictions (trust)
You left me without you, you left me without "me"
Ümit Yaşar Oğuzcan

Beni kör kuyularda merdivensiz bıraktın,
Denizler ortasında bak yelkensiz bıraktın,
Öylesine yıktın ki bütün inançlarımı;
Beni bensiz bıraktın; beni sensiz bıraktın
Ümit Yaşar Oğuzcan

This poem, which was written by a father who has lost a son, perhaps conveys much more information than many academic findings. A father whose son died feels the death inside of himself. His whole world is covered with an absence and darkness, all his beliefs about life are destroyed, and he also lost his self along with his son. In fact, subtle anger towards the son for being dead can be perceived as well. These are the feelings that can be experienced by many parents to a certain extent, especially when they first face the death of their child. The mourning process, which changes and transforms over time, may begin with the feeling of being alone, lonely, or even deprived of oneself in such a dark well for the parent. Nevertheless, almost no mourning lasts a lifetime in the deep pain of the first few moments. Parents tend to find challenging but creative ways to get out of the well, and if they cannot, they can bring a new light or ladder to their wells. In this section, the effects of the death of a child on mother and father were discussed.

A child's death is considered the most traumatic experience for the parents (Rando, 1986; Rosenblatt, 2001), whether it was expected or not (Rando, 1983). The death of

a child cannot be expected by a parent, even when the death is likely (Schiffman, 2020). The parents tend to avoid even thinking about losing their child, and when it happens, it is experienced beyond the scope of their minds. Therefore, almost all bereaved parents have problems with accepting this painful reality (Wheeler, 2001). As the overall death rates declined, society's implicit expectation of children having a longer and healthier lifespan than their parents became more common compared to the past (Defrain et al., 1991). Therefore, the death of a child is experienced as a traumatic event by parents and tends to have long-term influences on many areas of life (Rogers et al., 2008). When this devastating life experience happens, the parents' entire life is affected by the death of their child. This loss destroys the parents' basic trust in the world and sense of control over life (Schiffman, 2020). The mourning after the loss of a child differs from other kinds of mourning in terms of course and density. Compared with other types of losses, a child's death was found to be the most challenging, complicated, and devastating of all forms of losses, such as the loss of a spouse, sibling, or parent (Gamino et al., 2000; Sanders, 1980).

When parents lose a child, they go through a fluctuating suffering process of mourning and crisis of meaning (Kastenbaum & Moreman, 2018; Wheeler, 2001). Starting with the initial moments, parents struggle with comprehending, accepting, and finding meaning in the death of their child. The parents tend to keep questioning why their child's death happened to them and how it might have been prevented for a very long time (Wheeler, 2001). Although the loss itself is enough to ruin the parents, the death's contextual factors may provide additional burdens on bereaved parents. Whether the loss of the child was due to an accident, suicide, homicide, or illness, whether it was sudden or expected (Lichtenthal et al., 2013), the age of the deceased child (Keesee et al., 2008; Kreicbergs et al., 2004), the existence of previous unresolved losses (Rando, 1983, Volkan & Zintl, 2018), the meaning and future dreams attributed to the deceased (Volkan & Zintl, 2018), the existence of other surviving children (Alam et al., 2012; Rogers et al., 2008), relationship dynamics with the partner (Barrera et al., 2009; Bergstraesseri et al., 2015), and sources of social support (Laakso & Paunonen-Ilmonen, 2002) are involved in the process of parental mourning.

As can be expected, parents go through various physical, social, psychological, and existential kinds of suffering after losing their child (Gilmer et al., 2012; Price & Jones,

2015; Rosenberg et al., 2012). The research results indicated that decreased physical and psychological well-being (Stroebe et al., 2013), prolonged depressive symptoms (Koocher, 1994; Rogers et al., 2008), intense feelings of anger, sorrow, sadness, distress, guilt, blame, loneliness, loss of control (Braun & Berg, 1994; Gilmer et al., 2012; Miles & Demi, 1992; Riches & Dawson, 2000; Schiffman, 2020), harboring disaster thoughts as if something terrible would happen again or intrusive images about the death of the child (Dyregrov & Dyregrov, 1999), avoidance of previous social life (Prigerson et al., 2008), changes in occupational life by either working much more or much less if the parents did not quit their jobs (Gilmer et al., 2012), having grey hair and feeling older (Gilmer et al., 2012), higher rates of psychiatric hospitalization (Li et al., 2005), increased health complaints and poorer physical well-being (Rogers et al., 2008), heightened risk of suicide (Qin & Mortensen, 2003), and increased mortality and morbidity rates (Dias et al., 2017; Li et al., 2003) were associated with parental mourning.

The death of a child affects not only the parents individually but also the partners' relationship, the family system, and even the society (Riches & Dawson, 2000). In some instances, the child's death can be accompanied by additional losses, such as health problems, financial problems, or marital conflict. The effects of bereavement on the family system can be intense and enduring for some families (Schiffman, 2020). Research findings indicated that following the death of a child, decrease in relationship satisfaction and increase in divorce rates (Lyngstad, 2013), blaming the partner (Dyregov & Dyregov, 1999), heightened communication problems or no communication (Stroebe & Schut, 1999) can be observed in some couples. Going through the same devastating loss with the spouse does not guarantee the ease of understanding partner's feelings and functional cooperation. On the contrary, this commonality can be an obstacle to grieve together in some instances (Koocher, 1994). The differences in grieving styles and needs of the partners may lead to negative emotions towards each other (Cook & Oltjenbruns, 1989). For instance, when one of the parents is having trouble accepting the death of the child, he or she may feel angry and resentful towards grieving family members (Walsh & McGoldrick, 2013). Disbelief in the grief of the partner or doubts about the support provided by the partner can be some of the results of differing grief reactions (Beutel et al., 1996). Spousal

perception of the partner's reactions affects their emotions and behaviors toward each other (Albuquerque et al., 2016).

Pre-existing marital problems can also complicate the dyadic coping possibilities and become an obstacle for partners to ask for support from each other. Moreover, differences in the strategies of providing support can be misunderstood as a reflection of not caring (Corbet-Owen, 2003). On the other hand, partners' role in each other's mourning process is not always negative. Although some parents stated that their partners were a source of instability and distress, other parents reported that their partner was a source of stability and support (Barrera et al., 2009).

There is a myriad of personal, situational, and relationship factors that should be considered to have a fuller understanding. Still, it is evident that dyadic coping has a crucial facilitating role in the grief process and adjustment to loss (Bergstraesser et al., 2015). Mutual respect, sharing emotions, concurrently forming continued bonds with the deceased child, shared grief rituals, such as, grave visits, remembering the beloved child jointly or dealing with anniversaries together, and mutually providing consolation were reported to be helpful for bereaved parents to work through their grief not only as a couple but also individually (Bergstraesser et al., 2015). A process of concordant grief among couples through emotional exchange was found to be associated with a more synchronized individual post-traumatic growth process. On the other hand, when the growth was not shared by the partners, increased rates of depression and suffering and decreased relationship satisfaction were observed (Büchi et al., 2009).

In some studies, gender-related differences were considered to understand and explain the course of parental mourning. When the coping patterns of fathers and mothers were compared, it was observed that fathers tend to adopt more work/task-focused coping while mothers were trying to cope by focusing more on their surviving children. Additionally, mothers reported more intense grief reactions, which started to decline after 18 months while the fathers were able to express the impact of the loss more openly 18 months after the death of their child (Alam et al., 2012). Another study focusing on the fathers after a prenatal loss highlighted the fathers' need to be recognized since they feel unable to share their anxiety and fear regarding the

protection of their pregnant spouse. It was suggested that the social pressure to be powerful and the belief that men do not share emotions inhibited fathers from obtaining support (O'Leary & Thorwick, 2006).

Whether there are surviving children or not also had a critical role in the parental mourning process. In general, bereaved parents reported that having surviving children was a life purpose and facilitator of meaning in life after a child's death (Dyregrov & Dyregrov, 1999; Wheeler, 2001). Similarly, having additional children was associated with recovery from the grief (Rogers et al., 2008). The bereaved parents tended to focus on, respect, talk to, or show care and love to their surviving children more (Gilmer et al., 2012), and have strengthened relationships with them (Arnold et al., 2008). As mentioned before, fathers' and mothers' grief attitudes may differ in some areas of life. However, when it comes to surviving children, both parents were reported to be more protective of their children after the loss (Alam et al., 2012) and share an intense fear of something terrible happening to their living children (Dyregrov & Dyregrov, 1999). Although most parents reported positive effects of having surviving children on their grief process, in one study some parents reported that their relationship with their surviving child was a source of additional stress and sorrow (Barrera et al., 2009). Similarly, researchers collecting data from both the parents and surviving siblings found that in some families, children mentioned the hardship of getting the family back together after their sibling's death (Gilmer et al., 2012). Therefore, it is vital to highlight that each family and each loss has its own patterns affected by many interacting and complex dimensions.

The manner of death is considered to be one of the most critical determinants of the course of parental bereavement. Even though losing a child is a devastating experience, the cause of death may contribute to the parents' emotional burden or preparedness. It was reported in many studies that violence of the child's death is associated with the intensity of complicated grief (Keesee, Currier, & Neimeyer, 2008; Lichtenthal et al., 2013). Miles and Demi (1992) compared the guilt of parents whose children died by suicide, accident, or chronic disease. They found that there was more guilt among parents bereaving a loss due to suicide and they reported guilt being the most distressing aspect of their grief, while none of the parents bereaving a loss due to accident or chronic disease reported such feelings of guilt (Miles & Demi, 1992).

Another study focused on cancer-related losses. The researchers found that when the cause of death was malignant tumors or cancer, the parents were exposed to the prolonged physical and emotional suffering of the child in addition to overwhelming feelings of loss (Kreicbergs et al., 2004). Likewise, in a study, it was found that the duration of cancer treatment before the child's death has an impact on the process of parental grief. When the duration was too short, parents were not prepared for the death. When the duration was too long, the coping abilities of the parents were overwhelmed and it became harder to grieve after a long period of treatment, suffering of the child, and relapses (Rando, 1983).

Not only the manner of death but also the age of the deceased child could be one of the determinants of parental mourning intensity. In a study, the timing of the loss and its effect on parents were investigated and the researchers found that parents had significantly greater grief reactions when the child was older than when the loss occurred as a miscarriage (Theut et al., 1989). Similarly, losing a child older than 9-years of age was found to be associated with an increased risk of anxiety and depression for the parent (Kreicbergs et al., 2004).

As mentioned before, the death of one's child is a life-changing loss that challenges all the beliefs and meaning constructed in life. When the death occurs, the parents face the significant challenges of accepting the devastating reality and being surrounded by painful emotions. Starting with the early moments, parents become deeply preoccupied with hard-to-answer questions of why and how. These challenges tend to continue over the years for many parents (Wheeler, 2001). The death of a child is never the only loss in the lives of parents. On the contrary, they tend to lose meaning that they attributed to life, sense of justice, assumptions of security about the world (Barrera et al., 2009), faith and belief in God (Arnold et al., 2008; Gilmer et al., 2012), their parental identity (Riches & Dawson, 1998), sense of self (Gilmer et al., 2012), previous structure of their family, and the previous relationship style with the surviving children and spouse (Schiffman, 2020).

Experiencing deep losses and changes in almost all areas of life, parents start to struggle with the reconstruction of meaning in their lives (Wheeler, 2001). There is no single direction in this journey for the parents (Shuchter & Zisook, 2003). Some

individuals may find answers in religion and faith, some in science (Barrera et al., 2009; Lichtenthal et al., 2013), and some feel distant to the belief in a higher being (Gilmer et al., 2012). Also, some bereaved parents were not able to find any meaning and make sense of the death of their child (Wheeler, 2001). In some studies, the researchers found an association between the cause of death and finding meaning out of the child's death (Lichtenthal et al., 2013; Polatinsky & Esprey, 2000). A violent death was related to poorer outcomes in meaning-making attempts (Lichtenthal et al., 2013). The meaning-making was the most important predictor of grief severity. Parents who reported having little or no sense of the loss were likely to show greater grief intensity (Keesee et al., 2008). Similarly, resolution of grief was found to be associated with finding purpose in life after the child's death (Rogers et al., 2008). Therefore, parents need not only to make meaning of the death but also of their life after the death of their child (Wheeler, 2001).

It is such a relief that the majority of the parents could make sense of their loss and find their ways out of the meaninglessness and feelings of emptiness (Wheeler, 2001). In general, religion and spirituality may provide some tools to make sense of death (Arnold et al., 2008; Gilmer et al., 2012; Lichtenthal et al., 2013; Neimeyer, 2002). Likewise, Sanders (1980) reported that frequent church attenders responded to the questions about their loss with more optimism but more repression of bereavement. As mentioned above, religion can be a source of comfort and meaning, as well as a source of pressure when the personal needs of the grieving person do not fit with the religious norms and rules (Aksöz-Efe et al., 2018).

The presence of surviving children or having a new child after the death was another frequently mentioned source of meaning reconstruction and finding purpose in life (Dyregrov & Dyregrov, 1999; Rogers et al., 2008; Wheeler, 2001). Such that in some instances, bereaved parents with suicidal ideation did not attempt suicide due to the feeling that they have to continue living for their other children (Harper et al., 2011). On the other hand, few bereaved parents also reported additional distress and heartbreak while parenting their surviving child (Barrera et al., 2009).

Being able to maintain the bond with the deceased child and continuing to honor the bond with him/her was considered to be one of the most critical dynamics of the

parental mourning process (Arnold et al., 2008; Harper et al., 2011; Riches & Dawson, 1998). After the death of their child, parents need to make some adaptations to the bond they have with their child to adjust to the lack of physical existence of the child in their new lives. Classical grief theories suggested by Freud and followers claimed that severing bonds with the deceased person was the main objective of the grief work. Yet, contemporary studies provided strong support for maintaining the bond with the child as an important aspect of better adjustment to life following death (Davies, 2004). Forming fuller and deeper contact with the dead child also contributes to finding meaning in the loss experience (Barrera et al., 2009).

Parental grief was suggested to be transformative for those who can form continuing bonds with their deceased child (Arnold et al., 2008). It is not an easy process to maintain the bond with the child while being surrounded by the sorrow of physical absence of him/her. However, parents can find many ways to be contacted with their child, such as frequent visits to the grave, keeping the objects reminding them of their child, or creating symbolic representations of the child in daily life, for example believing that the child comes and visits them in the form of a ladybug (Harper et al., 2011), or through senses of smell, sight, or images (Arnold et al., 2008). Sharing emotions and memories were also very important in forming the continuing bonds (Klass et al., 1996). Despite the pain of talking about loss, communicating with others about their child's life and death was gratifying and provided strength for the parents. By means of communication, parents could bring their deceased child into existence in the eyes of others, which provided recognition of the child and parental identity (Arnold et al., 2008). Like communicating about the child's death to others, the deceased child's photographs had similar supportive effects of maintaining bonds with the child and adjustment to life without the child (Riches & Dawson, 1998). In this regard, photographs provided tangible evidence to the existence of the child, enabled parents to relive significant life events and construct a whole biography of the child, made a publicly recognized parental identity more visible, and shifted the focus of the parents from suffering to celebration of the child's life (Riches & Dawson, 1998). Social recognition of parental identity, the continuing bond between the parent and the child, and having an evidence for the previous existence of the deceased child were essential facilitators of parental grief. A social environment supporting emotional sharing, honoring, and acknowledging the bond with the child also helped parents

integrate the child into their lives in novel ways that were different from the times when the child was alive (Klass, 1997).

The continuing bond and deeper contact with the deceased child were associated with being able to find meaning in the loss and maintaining life with new and very meaningful purposes (Arnold et al., 2008; Barrera et al., 2009; Klass, 1997). The parents who can make sense of their loss and find meaning in this devastating experience reported some opportunities for maturation, positive growth, and appreciation of new aspects of life (Barrera et al., 2009). It was observed that parents were more proactive and found new meaning and purpose in life through helping other people and improving the lives of others (Barrera et al., 2009). Supporting this information, in a study, bereaved parents mentioned that their reason to participate in the research study about their child's death was to help other parents and children despite the pain they felt (Arnold et al., 2008). These parents also focused more on non-material things in life and were more person-centered (Dyregrov & Dyregrov, 1999), had increased empathy for others and their sufferings (Lichtenthal et al., 2013, Wheeler, 2001), gained a new understanding of and appreciation for life, found out what really matters in life, had increased awareness of the importance of close relationships and became better persons (Wheeler, 2001). As they were aware of the brevity of life, they lived more fully and meaningfully (Gilmer et al., 2012; Lichtenthal et al., 2013). An increased amount of volunteer work especially focused on the reason of their child's death, was one of the observed changes in many bereaved parents' lives (Wheeler, 2001). In some studies, these positive changes were conceptualized as Post-Traumatic Growth (PTG). PTG was correlated with being a mother, losing a younger child, having higher levels of resilience (Albuquerque et al., 2017), as well as having the chance to anticipate the death rather than experiencing a sudden loss of the child (Polatinsky & Esprey, 2000).

Considering the related literature in Turkey, there are some studies focusing on effects of child's death on parents. However, the scope of the existing studies was focusing only on certain aspects of parental experiences, such as PTSD (Keten et al., 2015), stress level (Öngay, 2019), the effect of a Grief Support Program on grief intensity (Yıldız & Cimete, 2017), effects of nursing care after a miscarriage on parental depression (Candan, 2012), the social influences of being martyr's mother (Gedik,

2008), and the effects of having an extra child and social support on coping (Tanacıoğlu, 2019). Except for the studies conducted with martyr's mothers (Er et al., 2018; Gedik, 2008; Sancar, 2001), all of them were about the death of a prenatal (Candan, 2012; Keten et al., 2015; Öngay, 2019; Tanacıoğlu, 2019) or a newborn baby (Köneş ve Yıldız, 2020; Yıldırım, 2003; Yıldız & Cimete, 2017). Also, only few of the existing studies were conducted in psychology field (Düzen, 2016; Köksal, 2018; Yıldırım, 2003). Again, the focus of these studies was either on newborn death (Yıldırım, 2003) or miscarriage (Düzen, 2016; Köksal, 2018).

Research methodology is also as important as topic of the existing studies. The method of gathering data, underlying philosophy of science, epistemological stand, chosen research tools, such as interview questions or questionnaires have direct effect on research process, features of participants and findings (Denzin & Lincoln, 2000). Qualitative methodologies in psychology field was started in 1879 (Wertz, 2011). However, with the rise of behaviorism, qualitative methods were abandoned, devalued and marginalized (Danzinger, 1990; Wertz, 2011). Indeed, qualitative research was considered an attack on reason and truth by researchers from positivist tradition (Denzin & Lincoln, 2000). To maintain the privileged position within natural science, qualitative inquiry was silenced (Harre, 2004). Yet, over the past three decades, reevaluation of existing inquiry methods in psychology took place and once marginalized and silenced qualitative methods started to be used again (Wertz, 2011). Still, studies conducted with students and academics revealed some concerns and barriers about use of qualitative methods (Povee & Roberts, 2014) and limited application preference even within programs that support qualitative inquiry (Rubin et al., 2018). Considering the previous and enduring dominance of quantitative methods, there are many qualitative and mixed-method studies about parental mourning (Alam et al., 2012; Barrera et al., 2007; Bergstraesser et al., 2009; Dyregrov & Dyregrov, 1999; Gilmer et al., 2012; Harper et al., 2011; Laakso & Paunonen-Ilmonen, 2002; Miles & Demi, 1992; Tanacıoğlu, 2019; O'Leary & Thorwick, 2006; Wheeler, 2001). Some of the reasons would be a need of researchers to approach this complicated topic with an in-depth and comprehensive manner or avoidance of asking bereaved parents to fill a questionnaire without contacting them in person. Regardless of the reasons, common use of qualitative methods against overall trends in psychology reflects importance and need of qualitative inquiry for this topic. Moreover, there are few

studies about parental bereavement conducted with Grounded Theory methodology (Barrera et al., 2009; Nowak, 2015). However, none of the existing studies with grounded theory methodology were as comprehensive as it was planned in the current research. In addition, In Turkey context, there was no study conducted with Grounded Theory.

In summary, a child's death is a very complex and painful process for a parent, during which meaning and purpose of life, relationships, and personal and parental identity need to be reconstructed. The struggle of bereaved parents to reconstruct life after their child's death has many heartbreaking and strengthening aspects that are unique to the individual. It can be misleading to draw the same lines for each parent in their mourning process. Instead, all the unique facilitating or burdening dynamics should be considered in the subjective context of the parent. It is clear that there is a substantial need of more studies about parental mourning in Turkey. Yet, considering how hard it is to study such a painful topic, it becomes an understandable lack in the literature. Especially, a study conducted through in-depth interviews by asking the whole story would be even harder especially for a parent but also for anyone. On the other hand, such studies may provide valuable information about parental experiences, cultural dynamics and coping and meaning making in the mourning process. In the current study, a qualitative research based on Constructivist Grounded Theory about parental experiences was planned. For this purpose, life changes after losing their child and their unique ways to find their way out of a darkness to return to life was explored. There is no qualitative or quantitative study in Turkey with such a wide scope. Moreover, there is also no study conducted with Constructivist Grounded Theory methodology not only in Turkey but also in other countries. The aims and chosen methodology of the current study has a potential to fill this gap in related literature.

1.3. Aims of the Study

There is no single path in this painful journey. Each parent, even within the same family, finds and creates his or her own way to deal with the loss and construct new meaning in life. As mentioned, many cultural, situational, relational, and personal factors influence the intensity and resolution of the mourning process. In order to gain a deep understanding of this life-altering experience, consideration of all the subjective

dynamics was required. Therefore, in the current study, it was aimed to deeply understand the mourning experiences of the bereaved parents who had different stories of life and loss. In this regard, diversity among parents in terms of the child's manner of death, age of the deceased child, age of the parents, gender, religion and faith, the time passed after the loss, and different coping styles of parents was aimed. In addition to diversity in subjective features, detailed questions about changes in life, relationship dynamics with the deceased child, the surviving child and the partner, feelings, coping struggles, previous losses, previous sudden changes or traumas in life, relationship with the grave, the role of social media accounts, regrets, the things that help the parent to feel better, the role of social support, the things that worsen the sorrow, remaining belongings of the child, and dreams related to the deceased child were asked to obtain a comprehensive understanding of parents' experiences (see Appendix A). Thus, the subsequent questions tried to be answered and explored in detail for the current study: What are the personal, social, familial, religious dynamics of parental mourning and how these aspects affect the mourning process? How do parents change after losing their child? What are the meanings that parents find in the death of their child? What are the ways that parents try to cope with losing their child?

CHAPTER 2

METHOD

2.1. Methodological Background

Constructivist Grounded Theory (CGT) methodology was preferred in this study. There were both philosophical and methodological reasons for this choice. A methodology not only determines a method but also defines the philosophical ground on which the research will be conducted. As the name suggests, CGT is a methodology with constructivist epistemology (Charmaz, 2006; Denzin & Lincoln, 2011; Ponterotto, 2005). Constructivists opposes the idea of a single, objective, and universal truth and claims that reality is constructed at the time of interaction between the researcher and the participant and depends on the context (Ponterotto, 2005). Thus, constructivists assume the influence of context, subjective perceptions, and researcher-participant interaction in constructing subjective reality (Ponterotto, 2005). Contrary to positivism, constructivists states that subjectivity cannot be overcome. In this way, subjectivity is accepted as something that is inherent in the nature of research and causes knowledge formation, rather than something that should be excluded, ignored, and controlled (Charmaz, 2014; Denzin & Lincoln, 2011; Ponterotto, 2005).

If another researcher conducted this research, they would not have contacted the bereaved parents that this researcher had access to, would not have asked the same questions, and would not have received the same answers. Although another researcher and I are likely to have similar findings in a basic framework, that researcher would not have presented the same theory I proposed. Moreover, if I had not studied this subject and met with these participants, they would not have told their stories using the same sentences, and I would not have heard them. Through the research process, a reality was constructed that the parents already knew at the time of the encounter but

had not expressed in an identical way, at another time. Various factors were influencing the construction of the reality during the interviews: the researcher being a doctoral student in a clinical psychology program, contacting the parents through her acquaintances, the parents' being informed about the research topic before the interview, and the environment in which the interviews were conducted. This reality interacted with my subjectivity, and as a result, a theoretical model was produced. In the next stage where the readers encounter the text, researcher's influence will no longer be possible and new realities will be produced.

Course of mourning process is a highly subjective experience and each person has unique patterns of grief. As mentioned before, mourning is influenced by many subjective and situational factors, such as significance of lost relationship, manner of death, age of the bereaved person, life stressors at the time of loss, cultural norms and religious beliefs (Volkan & Zintl, 2006). According to the researcher, in any life experience, unique subjective and social dynamics should be considered to understand the observed phenomenon comprehensively. This perspective is in line with the constructivists' perspectives about any knowledge is a product of social construction and it is impossible to overcome the influence of context and subjectivity. The harmony between the researcher's perspective and underlying philosophy of constructivism was the reason of preferring CGT for studying parental mourning process.

2.1.1. Constructivist Grounded Theory

Constructivist Grounded Theory is a methodology derived from Grounded Theory, which was based on studies in Sociology and Cultural Anthropology (Kenny & Fourie, 2014). There have been different versions of The Grounded Theory methodology in the past. GT theoreticians created different application of GT based on different ontological stances and epistemological definitions. There was a strong positivist influence when Grounded Theory was first introduced. At that time, qualitative research was not generally accepted as scientific, and it was used to provide a basis and guidance for *scientific* research. Information had value to the extent that it was generalizable, verifiable, and provable. In such a period, Glaser and Strauss were able to make room for qualitative methods within positivism by developing a systematic

methodology. Before the positivist movement, there were many ethnographic studies carried out, especially in sociology. However, the positivist ideals of the period caused this connection between ethnographic studies and social sciences to loosen and as a result, social sciences became more positivistic in their approach. In such a period, Glaser and Strauss proposed a method that offered a reconciliation between qualitative and quantitative methods. They proposed a very systematic qualitative method that excludes the researcher's subjectivity and seeks the only and absolute truth that was assumed to exist (Charmaz, 2014; Charmaz & Thornberg, 2020).

In Columbia University, where Glaser studied, the dominant philosophy of science was positivism. Strauss, on the other hand, studied at the Chicago School and was influenced by his school, which significantly impacted the development of a different GT by advocating a new method. In the following years, while Glaser continued to defend positivism, Strauss and Corbin adopted a post-positivism view, arguing that even if there was absolute reality, it could only be reached through interpretations. Thus, they proposed a method that included the researcher's subjectivity, which was inevitable according to their perspective (Hall, Griffiths & McKenna, 2013).

Eventually, the Constructivist Grounded Theory methodology was developed by Kathy Charmaz. Constructivist GT differs from the Grounded Theory in terms of the philosophy of science, information gathering strategies, and the nature of the relationship between the researcher and the participant (Kenny & Fourie, 2014; Mills et al., 2006). Constructivist Grounded Theory, as its name indicates, has a constructivist epistemology. The methodology was developed based on the premises of constructivism, which refuses the existence of objective, universal knowledge, and claims that any knowledge is produced in the context where two subjectivities meet and interact (Charmaz, 2014). The primary purpose of the method is to create an accurate theoretical picture of people's experiences (Mills et al., 2006). In other words, the goal of CGT is to transfer the researched experience into a comprehensive and comprehensible theory (Charmaz, 2014).

2.2. Sampling Method and Participants

According to CGT a heterogeneous sample should be preferred, because context is crucial in the formation of meaning. Therefore, parents from different subjective

backgrounds, cultural and religious norms were preferred as participants to deepen the understanding about the studied phenomenon. By comparing the familiar and different aspects of various experiences, a comprehensive theory of the effects of the same experience on different subjectivities can be obtained (Charmaz, 2014). CGT does not have goals such as having a certain number of participants equally distributed across categories according to participant characteristics, because Charmaz opposed the idea of proving, generalizing, or being objective (Charmaz, 2014; Mills, Bonner, & Frances, 2006; Willig, 2013). For this reason, the researcher did not aim to interview equal number of participants for each category. In the present study, who would be the next participant or the required characteristics of a participant were determined according to the questions formed in the previous interviews or based on the theoretical need. This method was called theoretical sampling (Charmaz, 2014). For instance, interviewing parents who lost their baby 42 years ago (Namık and Ceyda) led to the theoretical need to interview parents whose deceased child was older or the time passed over the death was shorter. Similarly, after interviewing a 76-year old parent (Filiz), the intertwined dynamics between mourning for own past lifetime and mourning for the child's death led the researcher become curious about possible influences of being older. Therefore, younger and older participants were sought to enable comparisons and provide heterogeneity.

In this study, the grief experiences of 27 parents with different characteristics in terms of age, belief, time since the loss, and type of loss were examined. Demographic and loss-related information of all participants was presented in the table (see Table1).

Table 1

Participant Information

#	Nickname	Age	Faith/religion	Child's Age	Manner of Death	Time Passed Over the Death
1	Halid Ziya (1866)	76	Muslim	35 years (1937)	Suicide	5 years (1942)
2	Umut	50	Non-religious-atheistic	3.5 years	Cancer	1 year
3	**Ceyda**	64	Muslim	9 months	Diphtheria	42 years
4	**Namık**	68	Muslim			
5	Filiz	76	Muslim	53 years	Kidney Failure	4 years
6	Seda	50	Muslim	20 years	Accident/Celebral Hemorrhage	5 years
7	**Zaman**	52	Alevi	27 years	Murder/Bomb Attack	4 years
8	**Yoldaş**	56	Alevi			
9	Türkan	68	Muslim	2 years	Heart Failure	34 years
10	**Betül**	42	Muslim	22 years	Duchenne Muscular Dystrophy (DMD)	10 months
11	**Baki**	50	Muslim			
12	Aziz	70	Muslim	2 months	Innate heart failure	39 years
13	Meral	79	Muslim	0	Stillbirth	51 years
14	Hande	64	Muslim	48 years	Cancer	4 years
15	Neşe	44	Muslim	6 days	Developmental complication during pregnancy	7.5 years + 15 years
16	**Ayşe**	70	Muslim	6 months	High fever/ diarrhea late intervention	52 years
17	**Ahmet**	71	Muslim			
18	Mesut	83	Muslim	55 years	Gallstone and late operation	3 years
19	**Hale**	58	Muslim	23 years	Cancer	11 years
20	**Sinan**	67	Muslim		Cancer	
21	**Gonca**	63	Muslim	7 years	Meningitis	46 years
22	**Yasin**	69	Muslim			
23	Narin	56	Muslim	0	Miscarriage/Stillbirth	23 years
24	Leyla	53	Alevi	35 years	The real reason not known by the mother/cancer could be + work accident (Death of 2 children)	10 days + 2 years (previous loss)
25	Afife	36	Muslim	9 years	Train Accident	2.5 years
26	Sema	32	Muslim	2 weeks	Miscarriage/Hospital Germ soon after the delivery (Death of her 4 babies)	11 months + 4 years
27	Can	59	Christian	Stillbirth	Pregnancy complications	31 years

2.3. Procedure

According to CGT, the produced meaning should be grounded in the data which means all the ideas, comments or observations should have their roots in the data. A study with CGT methodology is required to be conducted inductively (Charmaz, 2014). Therefore, the first step of the current study was analyzing Halid Ziya Uşaklıgil's book named Bir Acı Hikâye that he wrote after his 35-year old son's death. This analysis was performed to observe the experiences of a parent after losing his child and a list of questions to be asked in interviews were noted. Then, a personal blog named the Void that involved a father's feelings after losing 3,5-year old son due to cancer was analyzed. Moreover, poems of poets (Recaizade Mahmut Ekrem, Ümit Yaşar Oğuzcan) who lost their children were examined as a part of the question formation process. Likewise, all content under the "the pain of the child's death [evlat acısı]" title of Ekşi Sözlük (https://eksisozluk.com/evlat-acisi--34482? p=12) were coded to identify possible interview questions. The poems and Ekşi Sözlük content were not treated as participants, because there was not enough information about those writers and their experiences regarding losing their child. Thus, their remarks were only used to form interview questions.

The identified questions were semi-structured and updated after each interview to include newly observed aspects of the parental mourning process (see Appendix A). For instance, there were no questions about possible effects of deceased children's social media accounts because no related content had emerged before interviewing Seda, whose son was 20 years old. During the interview, she talked about her social media use, which made the researcher curious about the possible emotional reactions of seeing her deceased child's account or whether she wanted to delete the account or wanted it to stay open. Stated differently, questions about deceased child's existing social media account emerged during the interview with Seda and was included in the list of questions afterwards. After forming a tentative question list, the ethical approval was attained from the Human Subjects Ethics Committee of Middle East Technical University (see Appendix B).

The next step was to find participants by means of close-circle acquaintances. The researcher announced her study to her friends, family members and relatives. The

circle was enlarged when acquaintances asked their own social-circle and some of the potential participants accepted to participate. In addition, some of the participants were found by asking the participants during the interviews whether there were any bereaved parent they know who might consider to participate in this study. Lastly, the researcher started to work for a project which was about changes in couple relationship dynamics after losing a child. Some of the participants were found by means of the data gathering process of that research project.

Each participant was provided with an informed consent explaining that the interviews will be recorded by adhering to the principle of confidentiality and that the information obtained would be published for academic purposes by keeping their identity confidential (see Appendix C). During the research process, analyses were conducted after each interview, before conducting another interview. By this way, new themes or questions were identified and previous analyses were reviewed again in the light of the new information. Stated differently, novel questions were identified and findings were reviewed by going back to pervious transcriptions after each interview. New questions that emerged during the analyses were noted in memos to be asked during the subsequent interviews or considered during the analyses. A research diary was kept to accompany each stage of the study. These notes or memos helped the researcher to realize how her subjectivity was affected by the process and how it affected the process. Also, the memos were utilized to compare the participants' discourses and experiences in terms of similarities and differences (Charmaz, 2014). Memo notes, including the interviewer's feelings, were also a part of the analysis.

According to CGT the researcher should aim for diversity in participants' experiences (Charmaz, 2014). Therefore, the researcher aimed to have a heterogeneous sample in terms of the manner of death, the deceased child's age, parent's age, the place of residence (rural, urban, metropolitan), previous losses, or whether they have another child or not. Interviews were conducted with 25 people and the written texts of 2 participants were analyzed. Twenty-one people were interviewed face-to-face and after the onset of the Covid-19 pandemic, four people were interviewed via phone call. The face to face interviews were conducted at places preferred by the parents, such as their homes, a quiet cafe, or the house of mutual acquaintances. The duration of the

interviews ranged from 37 to 223 minutes that the mean duration was 134 minutes. Most of the interviews were conducted at one sitting.

According to Charmaz, saturation is achieved when each category is articulated and new interviews do not create new questions. Then, the interviews can be terminated (Charmaz, 2014). The concept of saturation is often confused with enough repetition of information. According to CGT, however, there is no need to repeat the information to confirm its accuracy (Charmaz, 2014). Charmaz pointed out that if the same questions were asked repeatedly, new information might not occur and naturally a researcher could mistakenly assume that data was saturated. It can be a risk of premature termination of the research with too few participants (Charmaz & Thornberg, 2020). Therefore, the researcher's main task is to observe whether she is forcing the data in any direction through her subjectivity and try to ask new questions after each interview. In order to prevent the negative influence of subjectivity on the results, the researcher needs to frequently observe the effect of her subjectivity on the process. Utilization of the research diaries, which also contains researcher's observations regarding her expectations and feelings, supports the process of self-awareness (Charmaz, 2014).

Based on the prescriptions of CGT, a theoretical model was established as a result of the present research process. After the interviews, a booklet prepared by the researcher describing and supporting the mourning process was given to the parents. Only one participant sought psychological support and was provided with the necessary guidance.

2.4. Data Analysis

Coding procedure was conducted in four steps as determined by the methodology; initial coding, focused coding, axial coding and theoretical coding (Charmaz, 2006). After the transcription, initial coding took place. The first contact with the data was line by line coding where the researcher tried to figure out what the data is saying or not saying in an open-minded manner. At this stage, a firm commitment to data and an open-mindedness to allow new ideas to flourish were required. While coding, the expressions in the interview were compared within and between the participants to discover similarities and differences.

Under the guidance of the analytical observations obtained in the initial coding, the second stage, focused coding, was conducted. In focused coding, larger chunks of data were synthesized and explained. Then, axial coding took place. Axial coding is a method proposed by Strauss and Corbin (1998) and is used to understand the relationships and connections between the categories and subcategories that are emerging after focused coding. At this stage, the primary purpose is to classify, synthesize, and organize large pieces of data (Creswell & Poth, 2016). Yet, Charmaz (2006) criticized axial coding due to its strictly systematic nature. She suggested that it limits the researcher's understanding and discovery of the studied phenomenon in order to be systematic. Charmaz showed that the analysis could also be done by focusing directly on what the data say, without depending on the guidelines offered by Strauss and Corbin. In this sense, she could distinguish between the categories and subcategories based on the data and show how these categories were related (2006). Therefore, at this stage, instead of following the systematic guidelines, an analysis was conducted to identify and discover the critical dimensions, related subcategories, and the possible relationship between them.

In the last part, the theoretical coding was conducted. During theoretical coding, the relations of different main categories were determined. Theoretical coding created a coherent story of the analyses that was carried out. In addition, this stage allowed the researcher to notice possible deficiencies and gaps in the story and connections. Thus, it enabled re-analyzing the previous data and understand these dimensions by asking new questions in the following interviews (Charmaz, 2006). The analyses and observations were deepened through the memos written at every stage of the study. At the end of the research, a theory grounded in the data was obtained, which explained the relations between the created analytical categories with the apparent and implicit sides (Charmaz, 2006).

2.5. Trustworthiness

In qualitative research, even in epistemologies that accept and embrace the researcher's subjectivity, subjectivity should be approached meticulously. Even though knowledge is co-produced, the researcher has to evaluate their subjectivity as a phenomenon produced together. However, it is not appropriate to match subjectivity with qualitative

research and objectivity with quantitative research (Scriven, 1972). Every researcher has biases and these inevitably have an impact on the process (Morrow, 2005). For this reason, various strategies have been developed to regulate the adverse effects of subjectivity. Each strategy has particular guidelines to follow to ensure trustworthiness. For this study, Charmaz's criteria for CGT were followed. Kathy Charmaz proposed four criteria for CGT to ensure the quality of the research process and results (Charmaz, 2014). These criteria were credibility, originality, resonance, and usefulness. The credibility concept involved having sufficient relevant data, making systematic comparisons throughout the research process, developing a thorough analysis, and the researcher's reflexivity by explicating taken-for-granted assumptions and feelings (Charmaz, 2017; Charmaz & Thornberg, 2020). Originality included suggestion of a new insight, fresh conceptualization about the studied phenomenon, and establishing the significance of the analysis. The resonance concept meant that the constructed concepts should provide insight not only for research participants but also for other people. The last term, usefulness, involved obtaining practical research results that help build a foundation for policy and practice applications, support the creation of new research studies, and display common processes and practices about the research topic (Charmaz & Thornberg, 2020).

In the current study, procedures that ensure trustworthiness proposed by CGT were followed. The interview questions were identified inductively based on texts written by mourning parents. Then, the analyses were conducted right after the interview, and the interview questions were revised based on the emerging results. The coding procedure started with line-by-line coding and gradually reached a more abstract level. Line-by-line coding enabled the researcher to approach the data without overgeneralization or over-abstraction. In this way, new and unspoken features of parental mourning were identified. Moreover, constantly asking new questions to explore new aspects of the study topic, filling the gaps, and comparing reactions of different participants to figure out underlying dynamics helped construct the theoretical representation of the parental experiences. Also, the within and between-participant comparisons enabled the researcher to notice participants' attitudes, unique forms of behaviors, and feelings. Thus, a possible bias of presenting only common mourning experiences and disregarding unique experiences was prevented (Patton, 2002).

Moreover, the researcher had to critically examine her feelings, biases, or confusions by writing them down and thinking about their meaning. Self-reflexivity was also emphasized in many qualitative methods and keeping self-reflective journals was highly recommended (Morrow, 2005). These self-reflective notes were a part of the data, because according to CGT, the researcher is also an integral part of the constructed reality. Therefore, the existence or absence of certain impressions or emotions during or after the interviews was evaluated to understand various dynamics. Keeping notes of impressions and feelings enabled the researcher to discover new paths and prevent possible interference of the researcher's subjectivity. Memo-writing was crucial because it enabled the theory to be dynamic and flexible, and helped include diverse experiences.

In addition to self-awareness, the rule of grounding any identified information on the data ensured the quality of findings. The researcher had to present the underlying data or memo that led to the emergence of the theoretical model. Back and forth movements between data gathering and analyses, comparing previous findings with emerging categories, and analyzing previously analyzed data in the light of new discoveries also supported the study's trustworthiness. Moreover, during the back and forth movements, the researcher discovered new features and questions that were not asked before. Thus, the analysis procedure not only supported trustworthiness but also contributed to the comprehensiveness of findings.

Mutual construction of meaning is also considered to be an indicator of trustworthiness (Morrow, 2005). In the current study, questions were revised after each interview, and new questions were asked to subsequent participants. Also, when the researcher explored a pattern, especially a subtle pattern, this pattern was explained and asked to the following participants whether this was the case for them or not. This also acted as member checking and increased the mutual construction of meaning. In addition, Morrow (2005) highlighted the vitality of contextual grounding to understand the participants' sense-making regarding their experiences. Morrow warned against the danger of excluding contextual information in psychological research by solely focusing on intrapsychic and interpersonal variables (2005). This study overcame such danger by making the contextual information an inseparable part of parental mourning, which was an individual as well as a highly social experience. Therefore, during the

interviews, cultural dynamics, religious believes, interactions with the social circle, supportive and harmful aspects of social relations, the gradual changes in support with time, and the effects of all the social and cultural dimensions on the participants were either observed or directly asked.

The related literature was not searched comprehensively until the analyses were completed in order to avoid becoming familiar with the existing knowledge. There are different opinions on this issue. In addition to those who emphasized that avoiding the literature was necessary not to be influenced by pre-existing knowledge (Glaser & Strauss, 1967), some researchers opposed this view by suggesting that the researcher was already familiar with the studied topic. Hence, the researcher can approach the subject flexibly by observing the diversity in approaches to the phenomenon in the literature (Charmaz & Thornberg, 2020; Morrow, 2005). In the current study, the literature search was postponed until the end of the analyses to focus solely on interview-related explorations. In summary, each of the mentioned strategies contributed to the quality of the interview and the trustworthiness of the theory construction processes by ensuring credibility, originality, resonance, and usefulness.

2.6. Reflexivity

I am a clinical psychologist with a psychoanalytic orientation. During the interview for the master's program, there was a question about possible hardships that I would experience when conducting therapy. I answered the question by suggesting that the psychotherapy process with a bereaved person would be the most challenging experience for me. At that time, the death of someone significant was the worst possible experience for me. Now, I am about to get my Ph.D. by conducting a study on parental mourning. I appreciate my struggle to face my biggest fear at the time of the graduate interview. The research process was very hard for me. I can safely say that I am not the same person anymore. It is a valuable experience to be changed by what I was trying to explore. This is proof of the genuineness and authenticity of my struggles. I met real people, cried with them and reflected on their experiences after losing their children. I felt the fear of losing a significant other deep inside, which enabled me to touch the pain and sorrow of bereaved parents. I witnessed the strength

of those parents and creative ways they found to endure their lives under the shadow of this great loss.

Those parents faced death and found amazing ways to overcome their grief. Those ways were the gift of their sorrow. Then, death gained another dimension, which was about life. Life is precious, because there is an end to it for our loved ones and for us. Initially, I was not expecting to find such powerful coping among the parents. Exploring the parents' strength provided emotional strength for me and eased embracing and finding deep meanings in death. Before, I was inclined to forget about death and not think about losing someone, as many people do. The function of this willing forgetfulness is that we virtually have the sense of immortality as if we have endless time in this world. Therefore, we can endure our lives by mostly forgetting about death.

In addition to this research process having life changing influences on me, my subjective position as a researcher also had an effect on the research process. I support the significance of subjectivity rather than objectivity both as a clinician and as a researcher. Any situation creates a context in which all the relationships, speeches, or topics can be understood. This enables the emergence of that reality at that moment. Therefore, I cannot claim that my findings apply to all parents. I tried my best to capture my subjective experiences created by the interview context and interactions with the parents. Meeting different realities and observing my feelings, thoughts and changes enabled me to comprehend the unique influences of distinct contexts. The "same" me interviewing about the "same" topic resulted in contradictory feelings, ideas, and perspectives. This helped me appreciate the power of context and intersubjectivity. As constructivism suggests, meaning is a subjective phenomenon produced by context through interaction between two or more subjectivities. I created a theoretical model by tracking meaning and changes in meaning depending on the context. Starting with the first moment that I met with a participant, until the end of the research process, I kept a research diary to follow my feelings and changing observations. My emotions and absence of those emotions in another interview were my guide to understand the participants, their different subjective stances, and my expectations. When I was surprised by what I was hearing or witnessing, I critically

reflected on my feelings and possible intersubjective meanings. My diary helped me to stay on track while observing conflicting needs and feelings in parents.

This flexibility provided by semi-structured interviews and conversations with the participants were an excellent source for comprehending and feeling real people's experiences from their perspectives. As a researcher, my only task was letting myself listen and feel the story of parents and sense both spoken and unspoken dimensions. The only way to achieve this was letting my own feelings be evoked without trying to control them for the purpose of objectivity. Also, the flexible nature of qualitative methodology fits with the state of being human. Human existence cannot be predictable. Context shapes individual, psychological, and social dynamics. CGT permitted this flexible exploration, which was quite harmonious with being human. Therefore, three different types of parental mourning and the diverse needs of each type could be identified. Moreover, knowing the participants in person and spending time with them was a precious part of this study. These meetings and sharing intense emotions with them changed me. If we didn't meet each other, I wouldn't sense their sorrow, strength, and struggles deep inside. Then, the only gift of this research process would be some knowledge about the process. This way, I gained much more than knowledge about parental mourning. The process enriched my feelings about human mortality, gave me ideas about living a meaningful life without forgetting death, and trusting the self-healing capacity of human beings in very harsh circumstances.

This research mirrors my personal and professional development during which I found my voice as a clinician and as a person. Now, I respect death and comprehend the great gift of being mortal. We have only one life and we never know when it will end. I cannot be sure that things will be as good as they are now. Tomorrow, in a moment, anything can change. Thinking about what is a fact freed my mind and forced me to face what matters in my life. I don't know how much remaining lifetime I have; the only thing that I surely have is this moment. I have to live as I want. I owe it to myself to hear my own voice and arrange my life accordingly. Throughout the research, I mourned for the temporality of human beings. So now, nothing seems more important than living fully and naturally. This is the gift of this painful research process.

CHAPTER 3

RESULTS

In the current research, the mourning experiences of bereaved parents were explored, and five categories (*Parental Attributions of Death; Guilt and Blame; Identifications with the Child; Type of Parental Struggle to Cope, and The Reconstruction of the Self and the Identity*), and related subcategories were identified. A theoretical model based on these categories had been put forward. In this section, the parents' cultural and individual contexts, the research categories, and the theoretical model were explained.

3.1. Contextual Information

In this section, the religious, social, and cultural contexts that are thought to have an impact on the mourning process and emotional lives of the participants were introduced. This information was considered to be essential to ensure that the theoretical model is evaluated within the context it emerged.

In the current study, the majority of the participants were Sunni Muslims. Considering the important role of faith and religion in mourning, new participants were interviewed to ensure diversity in terms of religion. In order to obtain more religious diversity among the participants, interviews with the Christian, Atheist, and Alawi participants were also conducted. As mentioned, the parents' religious attitudes and beliefs have a crucial position in the mourning process. A substantial increase in religious rituals and trying to communicate with the deceased child through praying were observed in almost all parents with religious beliefs. Praying has a great place in this mourning, both as a means of conveying the wishes about the child to find peace and be forgiven, as well as showing that the child is not forgotten. Besides praying, talking to the foot part of the grave was suggested to be another way of communication with the deceased. All of the participants also shared their belief that dying would mean

meeting their child again. Even the Atheist participant used expressions stating that death represents reunion with his son.

Religious beliefs can have a consoling function for the parent. For instance, Paradise is considered to be the place of reward or reunion with the child. In the case of infant loss, the belief that the dead babies go directly to Heaven and their parents will be taken to Heaven through their babies' intercession can be comforting for some parents. However, the Catholic Christian participant stated that there is no belief in Catholicism that the dead baby will save the mother and father, but that everyone is responsible for their own sins in their religion. The belief that God takes favorite servants from this world early on is another consoling statement that people say to comfort the mourning parents. On the other hand, it is believed that rebelling against God and excessive grieving for the loss would mean opposing God and would also disturb the deceased child. People in the parents' social circle usually condemn such behaviors and try to prevent the parents acting in such ways.

The present research also provided some important information about the rituals after the death of a child and the effects of these rituals on the mourning experience of the parents. These rituals are experienced in different ways by different individuals. For example, due to religious and cultural influences, the grieving parents are not left alone. Many people visit the parents at home to provide emotional support, especially throughout the first week or even for 40 days. During this period, praying and serving food on behalf of the deceased take place. Some participants stated that this crowd and turmoil were good for them. Yet, some of the participants reported that they wanted to be alone and could not feel their emotions freely in the presence of others.

All bereaved parents also engaged in charity as another form of mourning ritual. It was observed that the parents help those who have similar characteristics with the deceased child. For instance, bereaved parents tried to help people who share certain features of their child, such as, physical disability, age, gender or illness. The act of helping others on behalf of the deceased child is conducted chiefly on special days such as the deceased child's birthday, anniversary of death, or a religious holiday, when the parent saw the child in his or her dream, or sometimes without any particular reason. In addition, some parents who were very reluctant to participate because of the sorrow

that the research topic could evoke also stated that they agreed to participate solely to help others.

Although religious rituals tend to facilitate the mourning process, they can sometimes be harrowing experiences for the parents. The most bitter experience among these rituals is washing the dead child's body before the funeral. In Islam, there is a process of washing dead person's body and performing ablution (abdest) before burying. Due to Islamic religious rules, only the same-sex parents are allowed to participate in the washing process in order not to interfere with the child's ablution. It has been observed that the parent participating in the washing experienced a quite painful confrontation, and the opposite-sex parents who are not allowed to participate in the washing tended to feel excluded and were deprived of the last goodbye to their child. Similarly, the religious rule of not allowing women to be present in the area at the time of the child being buried in the grave may cause mothers to feel complex emotions such as anger, rebellion, and guilt as a result of rebellion. Some mothers complied with this prohibition, while others attended the funeral.

The social environment had an essential function in the experience of parental mourning, which could both be constructive and destructive. Throughout the interviews, it was observed that the most critical functions of the social environment were normalizing, alleviating feelings of loneliness, inviting the parents back to the life that parents cannot return due to feelings of guilt, and reminding them of their responsibilities (mostly other sons or daughters). The social environment also has the function of sharing maternal and paternal duties. Immediately after the loss, the family members or friends tend to take on the responsibilities of bereaved parents who have difficulty fulfilling those responsibilities. It has also been observed that after a while, the social environment reminds the parents of their duties and the obligation of returning to life for their living children.

Sometimes, the social environment may silence the pain, give comfort immediately, and change the subject due to the intensity of the parent's witnessed sorrow. The attitudes of the social environment towards the grieving parent revealed important information about the social context. For example, a hierarchy in grieving was observed in society's approach. Infant deaths, stillbirths, and miscarriages were

considered at the bottom of this hierarchy. For this reason, parents losing an infant are frequently told not to feel sorry and that they can have another child. They are also told that there are worse cases when parents lose older children, as a way of consoling the believing parent.

Society can also have an impact on the mourning process in terms of gender roles. It was evident that the host and center of this mourning process and sorrow was the mother. For example, even if fathers experienced deep grief, they may adopt the task of supporting their wives and comforting them. Also, the role of masculinity or fatherhood given by the society may prevent them from experiencing and expressing their feelings related to their child's death. On the other hand, it was noticed that some parents experienced their mourning in such a manner that was completely different from the socially assigned gender roles. In such cases, while the father was significantly affected by the child's death, the mother adopted a strong position and avoided her own grief and sorrow to protect the family psychologically.

Finally, there was an interaction between the mourning process and the relationship between the spouses. No matter how close the spouses were, they had difficulty mourning this loss together. For example, even when partners had an excellent relationship, they blamed and accused each other about the child's death. Besides, attitudes such as hiding the grief, longing, or sadness from the spouse to not remind the loss and upset him/her were also expressed by the participants frequently.

The religious, social, and cultural influences explained above were observed in the participating parents' mourning processes. Factors related to social support dynamics, cultural norms and role of religious beliefs and customs were discussed in general terms to provide a contextual background for the theoretical model and the categories that were created. In the following sections, identified theoretical categories and associated subcategories were presented in detail.

3.2. Theoretical Categories

In this section, identified theoretical categories and related subcategories were explained in detail. These categories were **Parental Attributions to the Cause of Death** (*Unspecific Influence; The Perceived Influence of a Perpetrator; Parental*

Influence); **Guilt and Blame** (*Guilt and Self-Blame; Blaming Others; No Guilt and Blame or Both Guilt and Blame*); **Identification with the Child** (*Identification with the Moment of Death; Identification with the Deadness of the Child; Identification with the Aliveness of the Child);* **Types of Parental Struggles to Cope** (*Coping Through Suffering; Coping Through Action; Indifferent/Avoidant Coping*); and **The Reconstruction of the Self and the Identity** (*Suffering Parent; Strong Parent; Rational Person*) (see Appendix D).

3.2.1. Parental Attributions to the Cause of Death

The reason why the parental attributions to the cause of death category was positioned in the first step of the theoretical model is that these attributions have a significant effect on the course of parental mourning. As will also be explained in the theoretical model, guilt has the central position in the model. The parental attributions to the cause of the death tended to influence the direction, severity, and impact of the guilt feelings on the mourning process. When guilt or blame was the powerful and intense emotion, parents tended to have trouble with accepting the loss, which is already a challenging mission in itself. In this section, the subcategories of *Unspecific Influence*, *The Perceived Influence of a Perpetrator,* and *Parental Influence* were explained.

3.2.1.1. Unspecific Influence

This category infers that the cause of death was not due to or could not be attributed to a perpetrator. Initially, it was decided to name the category as Natural Death. However, the manner of death could not account for the experiences of the parents. Even when death occurs naturally, a parent may attribute the reason to a particular person in the child's life. Therefore, it was observed that what matters is the parental attribution regarding the cause of the death. The lack of a perpetrator does not mean that the parents cannot find someone to blame. Their manner of telling the story of death reflected implicit or explicit accusations. However, when a parent cannot attribute the cause of death to a person or institution other than himself or herself, then guilt feelings tended to be settled in the parent. It was primarily observed in natural death situations in which there was no one to blame; guilt tended to be hosted by the parent.

> Filiz: That they, he was going to the funeral. At 11, they would come to pick him up. I was still in my bed, and he was awakened, of course. I saw that he went to his room from the kitchen. I woke up but in another room. I looked, he didn't get up. I said, God, this child will go to the funeral now, so I said, let me get up and check on him. (Silence). His clothes, cloth... Well, his pajamas, I mean, one sleeps in pajamas, but he is dressed up. He's sleeping on his bed with his hands outstretched like that, but he's sleeping. I said, let him sleep a little more, so I closed the door, but I can't get in the room. Then the second time… The clock is ticking. It comes around 9-10 o'clock; at this time, I see him in shrouds. He is in the shroud, lying in the middle of the room like this. His beard turned yellow, but his face was white and clean. His beard… I said goodness. I still couldn't get in. Well, I pulled the door again. Then I said, but the hour is coming, he will go to, go to the funeral. Finally, I got into his room and saw him dead on his bed. I touched his beard, the yellow beard. His beard turned yellow after eight o'clock. Of course, after that, I (short pause) collapsed.

Filiz said funeral instead of dialysis by mistake. Also, she said between 8 and 10 o'clock, her son's beard had turned yellow. It was observed during the interview that Filiz was implicitly blaming herself for not checking on her son, not being able to go into his room. The reason could be that she had realized that her son was dead when she first went to check on him, but she needed to avoid and deny it for a while. Then, when she accepted the reality, she felt incredibly guilty about not being able to go near her son and check his condition. She also had ruminative thoughts about why couldn't she get in the room or if her son suffered before dying.

3.2.1.2. The Perceived Influence of a Perpetrator

The Perceived Influence of a Perpetrator subcategory infers that there are criminals, murderers or perpetrators held responsible for the child's death. The parents' grief experience and guilt feelings were significantly affected by the presence of a perpetrator. In the presence of someone to blame, the guilt that the parent naturally owns can be externalized and shared with a different person or be transferred completely. Finding and blaming a perpetrator was more common in unnatural death conditions (accident, murder, suicide, etc.) than natural death (disease, genetic disease, etc.). However, there may also be a tendency to blame the doctor for his/her incorrect treatment in cases of illness. For example, Leyla said, “I don't trust doctors at all. I brought my daughter in a very healthy condition and they killed her…”. The interview with Leyla was conducted ten days after the loss of her daughter. During the interview, she also talked about her son's death, who died two years ago. She explained the death of her son as follows: “For my son, they said that it was a work accident. They committed murder! His shift was over at 3 p.m. and he was supposed to come home.

They said there are 2 holes in the roof; go and fix it. The roof was 18 meters in height. It was 30 years old and rotted. Neither a tool nor precaution…"

Some of the parents who lost their child due to unnatural reasons were still going through the court process and continued their struggle for justice. For instance, Afife lost her son in a train accident; Sema lost her twin babies due to hospital germ; Zaman and Yoldaş lost their son in a bomb attack at Suruç. These parents struggled for perpetrators to be found, charged and given a big penalty. However, it has been many years since the beginning of each case and there is no progress in court. Also, Halid Ziya Uşaklıgil lost his son to suicide, but throughout the book, it was observed that he experienced this as a murder.

3.2.1.3. Parental Influence

What is meant by Parental Influence is that the parent had a direct role in the death of the child, such as neglecting a medical problem, or the parent evaluated the situation as such. In other types of death where there is no direct parental influence, parents tended to feel guilty for varying degrees even though they were not directly responsible for the death of the child. Interestingly, it was observed that when parents actually directly caused death through neglect, they tended to avoid guilt tremendously. Additionally, in cases where this direct influence was not in reality but told by other people that it was due to the parent's influence, parents tended to feel guilty and blame others at the same time and equally intensely. The following quotation belongs to the parents who lost their child as a result of their late intervention. The way they denied guilt was explained under the category of Guilt and Blame in more detail.

> Ayşe: We went to visit relatives on Eid al Adha (Kurban Bayramı) in December. December 17th was his death. He caught a cold. He had diarrhea… Then I said to his father that the boy has diarrhea, not good, horrible diarrhea. The next day, I said to his father, let's take him to the doctor; I can't stop diarrhea. It was raining cats and dogs on Friday, and he said, "I'll get some medicine." He did, but the child is vomiting and also has diarrhea. "Let's go to the doctor on Saturday." Again, there was terrible rain. We have an appointment at the health center on Monday. My husband said that the rain is awful and you will go to the health center anyway. The boy vomits and has diarrhea. I can't get him to eat anything. We set up a swing, we swing him. Silliness! After that, when I was giving some water, the glass fell out of my hand. The child's shape has changed. I said call Gülseren quickly. She said that let's take a taxi to the children's hospital. Well, the doctor examined and said, 'you are too late; the child is dehydrated.' He said, bring him to the oxygen unit. Well, he was supposed to die in our hands. We returned empty-handed.

3.2.2. Guilt and Blame

Throughout the study, guilt had a central role in the parental mourning process. This feeling, which was seen in almost everyone facing death, was at the core of parental mourning and had an essential effect on the course of grief. This feeling takes its power and direction from the attributed cause of death. Guilt and blame was directed at those who were seen as responsible from the death of the child. Depending on to whom the attribution was directed, the location of guilt and blame was determined. Stating differently, some parents tend to feel guilty, some parents tend to blame others, and some parents tend to avoid both guilt and blame. Under this category, three subcategories were identified: *Guilt/Blaming the Self; Blaming Others*, and *None or Both Guilt and Blame.*

3.2.2.1. Guilt or Blaming the Self

It was observed during the research process that parents could find many creative ways to blame themselves. While some parents felt guilty passively, others experienced this feeling by actively blaming themselves intensely and consistently. This section was titled as *Guilt or Blaming the Self* instead of *Guilt* only, because the feeling of guilt was not enough to convey the whole experience.

It was observed that parents could feel guilty about not preventing their children's death, whom they brought into the world, and felt responsible for their well-being. In this latent feeling, which they do not express overtly, they carry an implicit belief as if they were able to prevent the death but did not rescue their child. For instance, Betül, who lost her son due to a genetic muscle disorder, said that she keeps saying the following words at each visit to her son's grave: "… forgive me, my son, if I have a fault, please forgive me. I couldn't have known…I wish, I wish I had gotten a first aid training. I believe that I didn't get the first-aid training although I knew that I will need it to rescue my son."

> Yoldaş: "We went on your last journey together. In fact, my reason for going on that journey was my desire to shield you. All this time, I witnessed the death of such young and brave people like you… I did not want to be the one left behind who sends you off again. However, I could not fulfill my desire. I am left behind again. You and our 32 companions were the fastest again. I could not catch up with you again… " (p.241)

Some parents tended to feel responsible and guilty about their child's death due to their past acts. For example, one of the participants believed that her baby was stillborn because she did not eat the okra she had craved during pregnancy. Another participant thought she lost a baby because she cried and rebelled a lot when her first baby died. Besides, one of the participants has been feeling guilty for 30 years, assuming that her child had choked on the grapes she fed her at the time of the death, although the autopsy report revealed that she died of genetic heart disease. An interesting dynamic was also observed that sometimes there could be a match between the parent's tendency to feel guilty and the society's tendency to blame the parent.

> Seda: Well, I was thrilled that the metro line has opened because he got into a university in İzmir so he would commute more comfortably. Before this, it was Ramadan, I always prayed during the prayers like this, “please God, let him stay in İzmir (she explained her desire of her son not to get in a university in a different city), let him come home in the evening, sleep in his bed." I always prayed like this so that he would stay with us in our house. We wouldn't miss each other. I couldn't think of saying if it will be good for us (hayırlısıysa). I insisted on saying, 'please let it be İzmir, please let it be İzmir.' People tell me that "you should have prayed for the best from God. But you insisted on praying for him to stay in İzmir. Look what happened! You should have asked this from God appropriately by saying I want this, but only if it is the good thing for us." You can't imagine that such a thing will happen at that moment. What I'm saying now is that I wish he were out of town and he was alive. One cannot think of it at that time. I said, you know, I prayed wrongly.

Parents also tend to blame themselves with the belief that the child died instead of the parent. For instance, Leyla expressed her feelings regarding her son's death by saying: "… one thinks of her own death. A person does not think about the death of her children. One should dig her own grave. [İnsan kendi mezarını kazar.]”

> Umut: Last year. Tomorrow. I wish you hadn't gone, wish I hadn't come. I wish that I wasn't even born, and you were born instead. I wish we exchanged our lives. The birthday photo means that Luca will be born tomorrow, to die...
>
> Yoldaş: My heart, when someone says "may you live long" (“başın sağ olsun” the phrase used to offer condolences, but implies wishing the parent to be alive and in good health), your mother and I just can't accept that word. We will not accept that phrase, although it turns into arguments from time to time. Because there is a meaning in that phrase that as if at least there is something we should be thankful for being alive. I accept this as an insult. Not that I am angry with anyone, I can't get mad… But how can I bear to live when you are not alive?

In other examples, guilt was related to the parent's attitudes towards the child's needs and feelings before the death. Parents tended to brutally judge themselves for situations in which they did not meet or neglected the child's needs. Besides, they deeply

regretted behaviors that set boundaries for the child or delayed requests of the child. For example, a mother who could not feed her child adequately and could not take him to the doctor due to financial difficulties, accused herself of this issue for 40 years.

> Gonca: Every year, he comes to my dreams. He cries. Each year I see him in my dreams crying. People ask why he cries, why does your son cry? I say he is crying because he is hungry. He cries for being hungry. Then I buy something, some milk, then he goes. He comes every year, every year!

It was observed that the parents could carry guilt and regret even if there was no obvious negligence or even when they did take care of the child meticulously.

> Betül: 'You did everything. You did everything he asked for' Even strangers said to me! But it seems insufficient to me. They say this, so I try to believe that I did everything, but it still doesn't seem enough. I wish I had done more.

In this regard, the wishes of the child that had been fulfilled can also function as a source of consolation.

> Sinan: Well, I say… I am glad that we fulfilled his wishes. Today, whenever we talk with his mom, we don't come up with any memories of us hurting him. We may have refused to comply with some of his requests, but we never talked in a hurtful way. Thankfully, God didn't let us hurt him. Even when we did not have enough money, we found it somehow and made him happy. I am glad that we made him happy!

In addition to guilt regarding the death, the new relationship established with the dead child may also include many elements of guilt. Some aspects of the relationship with the deceased, such as not remembering or mentioning the child sufficiently, decreased frequency of visits to the grave, unkempt grave site, and decreased feelings of sorrow, tended to create guilt. For instance, Ceyda expressed her feelings saying: "I never visited her grave. I feel like she would ask why her mom never visits her? Well, the dead do so; when you go the grave, they notice that you came, they know it."

An increase in enthusiasm and a need to return to normal life, previous life routines, or joyful activities could be another source of guilt for some parents. Thus, the decline in remembering and talking about the deceased child while trying to continue living may be experienced as both a need and a source of guilt. As a reflection of this, being happy, giving self-care (hair dyeing, dressing up nicely, going to the doctor), and doing activities that the deceased child enjoyed could be experienced as a betrayal. Thus, even if these needs were noticed, some parents tended to silence them quickly.

> Hale: (they are talking simultaneously) Then you ask yourself if I forgot him.
>
> Sinan: Am I disappointing him? How quickly I forgot my son.
>
> Hale: (talking at the same time) Did I forget? What if I forgot my Yasin (the name of her son) with this rush? I do not cry for my son. I could not open the Quran and read it for him today. I fell for Yusuf's (the other son) troubles, and I fell for the concerns about my grandchildren. Have I forgotten Yasin? It is impossible. You are praying after that. Forgive, please forgive me, my son.

One of the most challenging dilemmas has been observed in the difficulty of parenting the surviving children. Taking care of the other sons or daughters, being happy with them, and providing them things that the parent could not offer to the deceased child might be great triggers of guilt. On the other hand, not being proper parents to the surviving children was also a source of guilt. As time passed, these feelings were not experienced intensely in everyday relationships. They could be triggered only on happy and special days (such as graduation, marriage, starting work) of the surviving children. On such occasions, one side of the parent could be happy, and the other side could feel yearning and guilt. Besides, feeling guilty about not fulfilling deceased child's wishes earlier may put pressure on the parent to fulfill all the desires of the other sons or daughters. In such a situation, the parent may feel trapped in a big dilemma.

> Betül: Doing something without him is hurting me. Remorse… It is still like that. For example, we are having lunch with my daughter, I say that your brother is dead, we are eating, or your brother is dead, and we are doing this. In fact, life goes on for our children, but my conscience is very uncomfortable whenever I do something without him. It is harrowing for me.

3.2.2.2. Blaming Others

Similar to self-blame, blaming others was experienced by most of the parents. Therefore, accusation of sometimes real and sometimes abstract "murderers" constituted an essential part of mourning.

> Mesut: And I saw him at the hospital when he was taken to the surgery. After the operation, he stayed there for a week. Well, in my opinion, the daughter in law showed negligence, in my opinion. They took it slow to intervene. Because even the shepherds who live on top of a mountain have gallstones and survive. I mean, this is Ankara, my son is a doctor, the daughter in law is an associate professor who specialized in this disorder, how can they not notice? It is not possible! There is negligence here, or there is incompetence if not neglect. Is there any bad intention? I don't think so; most probably, there isn't any lousy intention because they have children. It should not be on purpose. Uh, I cannot work out the logic of the existence of an evil intent (pauses). The negligence outweighs, and the incapability comes after that. First, there is

> negligence. Of course, my son also thought that he would definitely recover. So, there is my son's negligence too.

In natural death conditions, the evil eye or the people who made the child upset were blamed for the cause of illness and death. For instance, Hande attributed the cause of cancer to her daughter's ex-husband, who cheated on her. On some occasions, when the evil-eye was assumed to be the cause, the parents mainly emphasized the child's beauty and achievements, and the happiness of the family as the source of other people's jealousy.

> Hale: Well, there is an instance that made me really sorry. Los… Well, how can I say? I can't explain. Was it evil-eye, was it jealousy towards us? Our family was an exemplary one. Everyone was talking about our good relationships with each other. They got jealous, and then cancer happened. Our money had gone, the car and the apartment were sold, our son passed away. We had lost everything.

In instances where there was an actual murderer or massacre, the anger and blame were directed towards people or institutions responsible. For example, Zaman said, "I could be the mother to my black-eyed [son] just for 27 years. The killers took him from me."

> Sema: My twin babies were very healthy. There were no health problems that were mentioned to me verbally, and also, I have medical reports. Then, they said the babies have an infection. My children were in perfect health; they killed my babies. After the death, the doctor told me that the infection was due to the medication I took. I blamed myself for months. Later, when the documents went to the forensic medicine, and the results showed that there was a hospital germ, I felt terrible. They did me a great deal of harm. But I told them too; I will not back down. I said there are so many people writing to me on social media right now. There are families whose children died for the same reason in the same hospital. I have four witnesses who lost their children in the same period. I said I will not stop here. I will not step back.

It was observed that an implicit accusation could also be directed towards the deceased child. This accusation was usually conveyed indirectly and manifested with reproach or complaint. The common allegations were about the child being dead, and the child acting negligently about the cause of death. For instance, Zaman said to her son that "My heart, you should have told me, you shouldn't have hidden from me that you were going. Because we promised each other, if you had let me, I would have come too. I would have hidden you behind my back. I would have stood with the banner at the front. I would have taken on the pieces (of the cluster bomb) that came to you."

The dominant emotion of the parents while blaming others was anger rather than sorrow.

> Umut: You lose your direction when faced with death and start to wander around aimlessly. Then you get angry at a person or a thing. To the people who didn't call you, those who didn't come to the funeral, who did not respect your sorrow… At that moment, you stop being scattered. The anger shows that you choose life despite the loss, even if you are surprised by how you have achieved to live without him. That's why you get angry about what happened to you. Why him? Why you? There is no limit to anger. You get mad at friends, the doctors, your family, yourself, and even your child. You start to question your entire belief system.
>
> Aziz: I never forget that because it was the most painful thing. Occasionally, she (the deceased baby) had been having spasms and getting bruised while crying. We took her to the doctor. After all, they couldn't do anything. One day, she contracted like this (imitates the contraction), then my wife took the baby to the hospital with my brother-in-law. I never forget, if I had a gun that day, I would have shot a few people. Maybe you don't know that time; there were political conflict and student protests. The roads were blocked, and you could not go. I got so furious.

3.2.2.3. No Guilt and Blame or Both Guilt and Blame

It was noticed during the interviews that there were situations in which guilt and blame were not experienced at all, or both were experienced simultaneously and equally strongly by the parents. Some parents had difficulty feeling and transforming guilt and blame due to the direct responsibility that was either perceived by parents or told by the physician.

> Ayşe: Well, the midwife was over 70 years old. I gave birth at home. She said that the delivery would be at 5 in the morning, then she went to bed to sleep. The child was moving; I mean, he was about to come or so. I had my sister with me too, and it was the time for this (delivery). The woman was still asleep, and then we woke her up. She just gave an injection to me from an inappropriate place. That medicine gathered at the child's head.
>
> Ahmet: She is giving an injection to prevent labor pain.
>
> Ayşe: The medicine was gathered in the boy's head like an egg yolk. Well, we didn't ask her why she told us the labor would be 5 a.m. when the baby was already coming. We assumed it was a late intervention. She woke up and struggled a bit, and then the baby was born dead. It is the will of God. Well, something is supposed to be the cause of it to happen. I said, 'don't say anything, give the woman her money as if she provided a normal birth.'
>
> Gökçen: Didn't you get angry at all?
>
> Ayşe: No, we did not get angry.
>
> Gökçen: You didn't even feel angry deep inside?
>
> Ayşe: No, we didn't feel angry. Why would we? Well, because she was an older woman, she came to our house. She was there just to help, and there is no deliberate

> intent. My mom gave birth to us by herself without the use of a midwife. God would give a reason for the baby to survive if he was supposed to live. We can cause neither birth nor death. How on earth we can get angry at the person who helped us. Death is the will of God.

The parent, who neglected to provide care and intervene in the child's illness on time, reacted angrily and in a rejecting manner when his wife expressed her feelings of guilt and regret of not being able to feed the deceased child sufficiently.

> Gonca: Of course! I wish I had bought more things, much more food, a lot of baby food. I wish I bought the most expensive ones.
>
> Yasin: We did buy that special food; shut up! The food that cannot be found easily. What was the name of it? Van, vanillin? I did look for them in different grocery stores. There was no lack of food! But he was only drinking milk and eating the baby food. You can only say this; you cannot say there was not enough food. There was plenty amount of food.

The parent quoted below has blamed herself, the midwife, and the mother-in-law very much, but also blamed her dead baby implicitly for having left her behind.

> Meral: Maybe it's not true, but I could only have commented on this. Well, I guess I craved okra, the okra dish (her friend told that she cooked okra the day before). The next day she came and said, 'Well, we ate the okra, but today I threw away the rest". When she said she threw it away, I felt very sorry about that okra, and I said, "Why on earth would you throw away the okra?" Then I asked my husband to buy okra. He bought okra on the way home that evening, and the next day, people who came to the funeral of the child ate okra, I mean the okra meal. Then our midwife said, uhhh, "Did you crave something?" I told the okra story, and she said, "Thank God you survived, my child." Now, I sometimes still feel sorry for myself, why didn't I ask her to give some okra, and I wonder if I had asked for it, would my child be alive?
>
> Meral: I said to her (the dead baby), “I couldn't even breastfeed you. Why did you leave us as if we weren't able to take care of you?” Of course, it wasn’t something that she did deliberately. Well, I said to my mother-in-law that ‘you froze my child there. Why didn't you put a blanket on her or wrap her up? If you had wrapped her, maybe she would have been alive!' I don't remember what I thought at that moment; I was shocked.

Guilt and Blame major category and the subcategories were explained above. In the following section, third major category named Identifications were presented in detail.

3.2.3. Identifications

Throughout the interviews, parents talked about changes in their lives after the death of their children. These changes were about either including new activities, motivations, targets or giving up previous ones. The identification experience was the situation that the parents adopt specific characteristics, feelings, behaviors, or goals of

their deceased children. With tremendous pain and emptiness that the parents feel after their child's death, one side of the parent almost died with the child. Then, parents filled their emptied part with their deceased child through changing their lives. The parents tried to keep their child alive or feel connected to their deceased child through these mostly unconscious identifications. Under this category, three subcategories were identified; *Identification with the Moment of Death, Identification with the Deadness of the Child, and Identification with the Aliveness of the Child.*

After losing their children, the symbolically dead side of parents was filled with the memory of the child. Identification with the child emerged as a result of this intense preoccupation with memories regarding the deceased child's sentences, reactions, favorite activities and life routines. Identification also took place by overthinking about the child being inside a cold grave, the life he/she cannot live, and the things he/she cannot do. If the preoccupations were about the child's living state, then the parents identified with the aliveness of the child, but if the parents were preoccupied with the child's dead state, they identified with the deadness of the child. In general, it has been observed that those who feel intense guilt tended to identify with deadness, and those whose dominant tendency was to blame others tended to identify with the aliveness of the child.

Moreover, it is important to mention that the quotations in this category may resemble those in the coping category. The reason for this overlap was identification being an unconscious experience. Therefore, parents did not directly talk about and exemplify their identification with their deceased children. The only way to understand and explain the state which the parents were not consciously talking about was to make inferences from their behaviors. These inferences were created based on parents' behavioral manifestations which were also some of the attempts of coping. Hence, it was necessary to differentiate the categories of identification and coping. Identification was an experience that is not chosen deliberately by the bereaved parents. As a result of identifications with the child, parents experienced changes in temperament, discourse, feelings, behaviors, favorite activities, and life purpose that were not previously part of their life. The behavioral manifestations of these changes included the methods adopted by the parents in their struggle to cope. In this regard, a parent who identified with the aliveness might feel better by living instead of the child, while

another parent who identified with the deadness might comfort oneself by constantly remembering the deceased child and avoiding the festive activities of life, and feeling happy. In this respect, the identification with either the dead or the alive state of the child had a considerable effect on the type of coping styles that would be adopted by the parent.

3.2.3.1. Identification with the Moment of Death

An intense mental struggle accompanied by grief, anger, and despair began with the moment of the child's death. This preoccupation included thoughts about how the child died, what he felt or thought at the time of death, how much s/he suffered, and how death could have been prevented. The child's bodily reactions at the moment of death tended to occupy a huge place in the parents' minds for a very long time. As an example, Zaman told that: "I do this (showed the peace victory sign; V-sign) everywhere I go. I will always do. Because my son, my beloved son was doing this while dying."

> Betül: He instantly turned black because he couldn't breathe. Black! I hit him on his back fast. When Berkin turned black, I tore myself, moaned, shouted in the apartment. I cried; "Berkiiiin!" I hit his back. After that, I took him and ran to the door. I intended to shout and ask for help from the neighbors. Then, at the doorway, the blood came from his nose. He urinated. When he did, I screamed thoroughly. When he urinated, I urinated as well in fear. You know, I was scared because he died, I did. I lost myself.

Especially during the initial days or weeks after the loss, parents went through state of indifference to external stimuli, lack of appetite, and feeling sleepy but being unable to sleep were evaluated by the researcher as a reflection of an intense preoccupation and identification with the dead state of the child. These severe bodily reactions of bereaved parents after the loss tended to fade and change over time. However, it was observed that after a while, identification with the moment of death tended to be replaced by identification with deadness or aliveness of the child.

3.2.3.2. Identification with the Deadness of the Child

In this type of identification, there were inclinations of parents to withdraw from life as the deceased child did, resemble a dead person, and to altogether avoid the cheerful situations that used to be pleasurable. In this type of identification, which was associated with the dominance of guilt feeling, it was observed that some changes

occurred in the parents, such as feeling sorrowful wherever they go, staying at home almost permanently, and becoming dull and uninterested in cheerful life activities. These changes of the parent's symbolical death had functions of increasing the emotional contact with the deceased child. The general tendency in this identification was to continue living in a dead state similar to the deceased child's state. The most salient reflection of this identification was the parents' preference to visit the grave frequently and for long hours or preferring dark, lonely, desolate, and silent places that resemble a tomb. By doing so, the parent either symbolically or literally puts oneself in a grave.

> Zaman: "They buried you in front of my eyes. I couldn't do anything. I couldn't say 'Don't do it, don't bury my baby in the ground, my son's eyes are open, he wants to say something.' From that moment on, my eyes filled with soil and began to hurt. "
>
> Ceyda: After that, I didn't do anything. I didn't feel like doing anything. I didn't want to do anything, neither housework nor cooking. Nothing! I was sitting like this. I was sitting.
>
> Gökçen: How did you spend your time?
>
> Ceyda: I'm sitting, just sitting. Nothing else. I'm sitting like that. It's like my body is exhausted. I sit like that. I sit all day (She used present tense while explaining the past). So, it was like that.
>
> Türkan: I don't enjoy anything. I play with my grandchild's toys, but… I don't feel happy anymore. I try to pretend that I'm happy. Nowadays, nothing seems good to me. Nothing! My friend says, let's eat something, I eat. She says, 'visit and see your grandchild,' then I go. I am not eager to do anything.
>
> Leyla: But what is left. I don't want this world; I don't need it. This world took my children from me… I just died yesterday; I am dead. Try to live only for my grandchildren. I also have a son. My son says, if something happens to you, I'll commit suicide.

In addition, parents depicted their emotional pain with words referring to the destruction of the body or vital organs, such as tearing one's heart out, soul overflowing from the lungs, heartache, the heart being sliced, getting shot in the brain, an icy hand wandering in the burning body, and living hell in the body. For instance, Zaman said: "I promised not to cry, but my heart couldn't stand. My wounds don't heal. My lungs are aching, bleeding."

Another example could be the experience of Hale, whose son died of cancer after a long treatment process. During the treatment, her child lost his hair gradually, which upset him and his parents. Hale explained the day when she removed all the hair of her

son while trying to hide her emotions, not to demoralize him. It was such an emotionally laden experience that even though she was sharing her story 11 years after the loss it was still very painful to talk about it. Then, when the mother explained her mourning reactions, she talked about her hair without linking her son's hair loss with her wish to get rid of her hair. This implicit link between the two experiences was considered to be a reflection of identification with the deadness and also the illness of the child.

> Hale: Look, my hair was long. I didn't want to comb my hair. I wanted to shave off all my hair. So, it seemed to me that combing hair was a luxury. Well, it was like, you comb your hair, so it means you were grooming or taking care of yourself. I kept talking about my wish to shave off my hair. I quit dying my hair. I dropped the hair dye entirely since then.

In the period following the loss, the parents found themselves committing suicide without any plan, intention, or even awareness, which was also considered to be an experience of identification with deadness of the child at a more concrete level. Two of the parents, Türkan and Sema, attempted suicide. They explained their feelings of shock and mentioned their concerns about attempting suicide again without even realizing.

> Sema: My husband went somewhere. I was at home. I don't remember what I was doing. I got on the stool and climbed to the edge of the balcony. I am now crying, but I don't remember that moment. Then my husband grabbed my legs. Then I came to my senses, looked at him, and asked, 'what happened?'. My husband said, "will you come down, please. I beg you." I looked and said, "who got me up here like this?" He said, 'come down, come down.' His hands and legs were shaking. I started crying more after I got down. As I said, I take care of my nephew. I got anxious and thought what if I had done this when we were alone with my nephew and she went out to the balcony after me. Then I started to lock the doors.

3.2.3.3. Identification with the Aliveness of the Child

It was observed that in this type of identification, the child continued living symbolically within the parents. As a reflection of this symbolic living, the parents tended to include new activities in their lives that were previously performed by their deceased children. Also, as a reflection of this identification, the parents became the child's representative agent in life and enabled the child to live through their existence. The chosen methods of returning to life were primarily related to the way the child died. Parents who blamed others for their child’s death tended to feel angry and, which enabled them to externalize guilt. Not feeling guilty about their child’s death, these

parents could find energy, which would be consumed by guilt otherwise, to return life and try keep the child alive in their own being.

Continuing to perform activities that the deceased child liked to do and adding them to their own life routines were also considered as a reflection of identification with aliveness. For example, Seda started to go to the gym to exercise very frequently in the place very near to where her son fell and died while exercising. Hande shared another example of continuing with the same activities:

> Every morning. What's up, Mommy (Anoş)? Well, I'm good. She was saying, 'come on, let's have a cup of coffee.' She was crazy about smoking and drinking coffee. (Silence) That morning coffee became an indispensable habit for us. Every morning we drink that coffee, even though we have a lot of work to do. All of us! We drink that coffee. When we're done with the breakfast, we go to the table to have our coffee. We do not even change the coffee time.

Actualizing the life goals and aims on behalf of the deceased child were also considered to be a reflection of this identification. Parents were observed to adopt new motivations, behaviors or activities that belonged to the dead child. For instance, starting to support child's favorite football team and attending the match, actualizing the wishes of the child before death, visiting and spending time at the workplace of the child, continuing the political struggle of the child were considered within the scope of identification with the alive part of the child. The following words of Zaman could be an example: "I ordered your favorite chocolate cake and brought it to Saturday Mothers (Cumartesi Anneleri). We served the cake to them with Mahide. Because you wanted to be with them every weekend."

Trying to make the child be known and remembered by many other people and attempting to symbolically keep the child alive was thought to be a behavioral manifestation of the identification with the aliveness of the deceased child. Halid Ziya's following statements could be another example to this kind of identification: "Why did I write all these? There is only one reason: To keep him alive from the day he was born till the day of death and to be with him, with his image throughout the passing days and years."

3.2.4. Types of Parental Struggle to Cope

As emphasized in the categories above, the nature of guilt or blame and the type of parental identification had a vital effect on the way parents tried to cope. In this regard, coping meant struggling both with the feelings of mourning caused by the child's absence and the guilt that emerged intensely in many dimensions of this mourning. There were three subcategories in the Types of Parental Struggle to Cope category: *Coping Through Suffering*, *Coping Through Action,* and *Indifferent/Avoidant Coping.*

3.2.4.1. Coping Through Suffering

As the name indicated, coping through suffering referred to the struggles of coping with the feelings regarding a child's death in a stagnant way. The word suffering was chosen to express the efforts of parents to regulate their feelings by withdrawing from life rather than inclining towards action and an active lifestyle. This coping style was characterized by profound and invading guilt feelings of the parents. Therefore, to cope with the loss of the child and accompanying sense of guilt, these parents tended to withdraw from life, dedicated their own existence to the absence of the child by defining themselves with this loss, and be ceased to live symbolically in the world where the child could not live anymore. The parents with coping through suffering were evaluated to be trying to meet with their deceased child in their deadness by symbolically killing themselves.

It has been observed that people with coping through suffering tendencies preferred sad feelings to happiness. They did not try to calm down quickly when emotions such as guilt, grief, longing, or regret arose. The experiences of suffering, commemorating the child all the time, and not being happy tended to mitigate and calm these parents' guilt.

> Betül: I collapsed, collapsed in a heap (after noticing her child's death). They immediately put me on the stretcher and took me out. I remember that they said, 'let's give an injection (sedative medication) to her.' I said, 'no, don't do it.' Because when the injection is given, you faint, you pass out. I mean, you can't even feel your sorrow. I said never give me an injection.
>
> Betül: I always think of Berkin when I am alone. If people want their pain to lessen, of course, they should go out and meet with others. You know, they say to me, go and

walk around. I feel remorse. I do not want to go, and I really feel more upset when I come from where I went.

G: What did you do to cope?
Türkan: Before that, I would like to cry very much; I always cried (pause). Then, I feel relaxed and fell asleep. When I was bored, I would go to bed early (to look at the deceased child's photos and cry).

There were ways for parents to relieve their guilt and maintain contact with their deceased child. These included turning the house into a temple, protecting the child's room as it was, not wanting to give away the child's personal belongings, hanging up enlarged photographs of the deceased child all over the house, and wanting to spend all the time in the grave if possible.

Hale: After we lost Yasin, we went to the cemetery day in day out. Yasin lies in a cemetery in the village. My husband's village. We went every day. Finally, the people in the village said, "Don't come this much. This kid is sleeping in water (referring to the belief that if people cry after the deceased, the deceased would get wet due to the tears)." Why should he sleep in water? I'm not crying. His father collects weeds and garbage in the cemetery. I pray first. He prays afterwards. We are talking and chatting as if I visited his house. We go there crying on the way, but on our way back, we feel joyful.
Sinan: But it's a very interesting feeling, you know?
Hale: We are happy (talking at the same time). Really.
Sinan: So, when you tell someone about this...
Hale: (interrupting) would not believe.
Sinan: But someone would assume that these parents who lost a son are experiencing it due to something that happened in their mental health. They wouldn't understand our feeling there. So, we sit, read the Qur'an, and pray. We think that staying with him for an extra hour (in the graveyard) is our gain.
Hale: (interrupting) We are very happy. We are happy there. (excited)
Sinan: (talking at the same time) We happily stay until the evening.

It was observed that parents with coping through suffering avoided going out to socialize after the loss. They did not want to attend cheerful events that they used to participate in or felt guilty even if they attended. It was noticed that when this guilt emerged, they tended to commemorate their children.

Baki: I used to go out when he was alive. I have never been out since… Since he passed away, I have not been out to hang out with friends in the evenings. I have never been out. I do not feel like (pause), just I do not.

Türkan: We left those crazy times behind. It was great. We were experiencing good things. We were hanging on with the friends who had a car, and we were traveling. After that (the death of their baby), we left the nightlife with my husband. We used to go frequently. We gave up our nightlife.

These parents did not feel bad only when they socialized to commemorate and pray for the deceased child or aid other people. Quite unlike the other coping styles, parents with coping through suffering were pleased with condolence visits that be crowded and long. Parents reported being able to stop thinking of their deceased child without feeling guilty only at times of condolence visits or Mevlut (the religious event of gathering and praying for the dead).

> Ceyda: You know, when you're alone, you constantly think about it. You think more and more about her and her death. But it becomes different when people come to visit. Well, you talk with them, share troubles with each other. It is a good thing; I mean, it makes me feel better.

> Baki: There have always been people visiting us. They never left us alone. Thanks to our relatives, my brothers and sisters, my nephews. The house was never empty. They constantly came. For about a month, the house was full of people every day. It feels good. In a sense, it makes you forget your sorrow.

In addition, the situations like meeting with friends of the deceased child, eating his/her favorite food, and being in places s/he liked were particularly avoided and tended to make parents feel bad.

> Betül: I really get upset when I don't mention Berkin. I mean, I feel so guilty when I go somewhere to wander or to have a meal… I keep saying that I am eating without Berkin. I go out and meet my friends without Berkin. What am I doing without him? I feel like Berkin will see me from there and say that "You enjoy your life. I am dead, you are going out, you don't even care about me".

In general, parents with coping through suffering felt the deceased child's existence through sensations about the dead child visiting their home or sending signs to them. In the study, these parents stated that their dead child visited and communicated with them when they were awoken or having a dream. These very peaceful moments of meetings and waiting for the child to come or send a sign were important parts of coping through suffering.

> Sinan: But, it's a delicious scent (the scent of Heaven as the parents described during the interview). It's such a pleasant scent! So, of course, I tremble at that moment, even if I am praying. I say, Yasin came. He's probably watching me. So, I feel such a big excitement while performing the prayer. You get into a sensuality. It is as if Yasin is at one side of you, and you are trying to look at him. He sees you, but you can't see him as it happens in the movies. I get into such a feeling. Finally, when I get up from there, I feel happy to have smelled that scent. I say to myself that Yasin came and saw me.

3.2.4.2. Coping Through Action

Parents with an active coping style were able to externalize feelings of guilt. Contrary to guilt in the coping through suffering category, which involved feeling guilty about being alive, parents who adopted active coping got involved in life to keep the child alive by living instead of him/her. The differences in coping style tended to produce significant differences with the course of mourning and the lives of parents. Parents with active coping managed to avoid emotions of grief, soothe the feeling of guilt quickly, and be able to feel happy, joyful, and alive without feeling guilty. By means of identification with the aliveness of the deceased child, being happy was experienced as making the child happy; eating his/her favorite food was like the child eating it. Therefore, being happy, cheerful, active, involved in life, and well-groomed was adopted as a way of keeping the child alive through their own lives and deeds. These parents lived for two people, the child and themselves, and became much more active and social than before.

Unlike the coping through suffering in which the outside world was avoided, parents with active coping styles tended to move away from their home or avoid spending time at home after the loss. For example, Seda said that: "Then, well, after the passing of Berkay, I didn't want to be alone at home. I always go out, almost every day. My husband wants me to stay, but.." Besides, Afife said: "Everything in my life had changed. I moved to another house other than the home that we lived together. I couldn't stay there either, so I moved again. Now, there is no fixed place that I stay permanently."

Similar avoidance was evident for other situations and objects that emphasized the deadness of the child. Therefore, the parents with active coping style wanted to give away most of the deceased child's personal belongings, looked at the remaining belongings rarely, and hung the child's photographs in places that were not always in sight. Similarly, although the child's grave was kept beautiful and well-groomed, the parent tended to avoid grave visits, Mevlut, or collective prayer environments for the child. For instance, Namık said: "When they frequently come to support you, then your sorrow is refreshed. At the moment, you see the people visiting you for your loss, you remember the child and feel sad." Similarly, Sema explained her need to avoid

religious rituals saying: "I am a religious person, but now I don't want to hear any part of Quran. The sound of the prayer reminds me of the first days of the loss, and I don't want it." It was also observed that actively coping individuals tried to avoid grieving together and sharing feelings with family members.

Also, unlike coping through suffering, parents who adopted active coping could easily take care of their surviving children and try to compensate for past regrets about the deceased child with their living children. They could even have a closer relationship with their surviving children than before without feeling guilty.

> Betül: Well, I try not to get angry with my daughter now. Berkin, well, after Berkin, I want to hug and kiss my daughter. She also wants to hug and kiss. She is very warmhearted. I hug, and I often say I love you. I keep telling Betül that I love her because I didn't say enough to Berkin.

In some cases where a person or an institution was responsible for the child's death, the legal struggle carried out by the parents to punish the criminals turned out to be a vital part of this coping.

> Yoldaş: “My son, my dear comrade, we resolutely continued our struggle for justice after you. It is our greatest embarrassment to you that the murderers are still out. However, you should know that we will maintain our rage and determination until we ask the murderers to account for what they did. The perpetrators will sooner or later sit on the defendant's chair. They will pay for their crimes. Don’t worry about that. " (p.243)

In general, the parents who had an active coping style showed a disposition to keep the child alive within their own life and body. In addition to the examples mentioned above, it was noteworthy that the parents who coped actively stated that they felt as if the child was alive despite knowing that the child was dead. Therefore, while individuals with coping through suffering find comfort in visiting their dead child at the grave; the parents with active coping style felt better by sensing that the child with them as if s/he was alive. For instance, Afife said: "Everything I had experienced with him is constantly spinning in my head. I live like he's not gone anyway. Although I am very aware that he was gone."

3.2.4.3. Indifferent/Avoidant Coping

This coping style was characterized by emotional avoidance. In this regard, attempting to keep the emotions away, providing rational explanations to emotion-provoking

situations, and avoiding the memories and reminders of the child, such as the personal belongings, the grave, the photos, and the anniversaries of birth and death of the deceased child were considered to be manifestations of indifferent/avoidant coping.

> Gonca: I burned them all.
> G: You burned them.
> Gonca: He was drooling; his breast was getting wet. Who would need those clothes? I did burn them.
> Gökçen: Are there any of his clothes that you kept?
> Gonca: No, I didn't keep anything. I used to knit sweaters, and I dressed him beautifully. But his saliva was dribbling. So, I burned them all, I burned. I didn't save anything.
> Gökçen: What about his grave? Can you go there?
> Gonca: We never visited the grave. Then, it (the place of the tomb) was lost.

The tendency to avoid and silence the emotions occurred very frequently among the parents who adopted this coping style.

> Gökçen: How did you feel in the first days of loss?
> Ayşe: In the first days, you're, sorry, well your appetite was gone. Your sleep routine was disturbed for a while until you overcome it.
> Ahmet: Yet, we did not have such a condition that required treatment or medication.
> Ayşe: No, we didn't.
> Ahmet: Then, soon after, she got pregnant with Murat, a new child.
> Ayşe: I already did have another child who didn't start school yet. I was always busy at that time that I was sewing and doing lots of things.
> Gökçen: Were there any moments that you felt deep sorrow?
> Ayşe: I don't do anything like that, well, I don't let myself loose.
> Gökçen: Ok, but do you remember any moment when you felt intense emotions about your loss?
> Ayşe: I provide therapy for others. I mean, I console them. So, I comfort myself as well.
> Ahmet: We had never experienced such a thing. I still feel sorry, but not too much. Not in the amount that turns the life upside down. Neither of us never experienced anything like that.

The parents with indifferent/avoidant coping tended to avoid situations in which they would remember and talk about the deceased child. Consistent with this personal avoidance, these parents demanded from their families and friends to normalize quickly and not talk about their child's death. Meral expressed this need by saying: "But it is the best not to talk at all... People around the parent shouldn't talk about babies. Should never evoke the painful emotions of the parent."

> Meral: After a while, we could not mention the child's name in our house again. Yes, we could not say, and we never talked about such things, like you had a brother who passed away or something like that with my children. We tried to cover it up.

In other coping types, erasing the child's memory or forgetting the sorrow about the deceased child made the parents feel guilty and such situations were experienced as if annihilating the child. In contrast, the parents with indifferent/avoidant coping styles tended to express their desire to get rid of the sorrow completely without feeling guilty. For example, Filiz repeatedly stated her wish to forget, to erase the pain throughout the interview: "Actually I want to forget. I want to erase the pain from my head."

Especially among those who lost their baby, the need for rapid recovery was reflected in having a new baby 2 to 6 months after the death of their child. The parents expressed that they feel relieved by the idea of having another baby quickly after the loss. This need was evaluated as the need to replace the deceased baby with the newborn and pretend death never happened. Another reflection of the tendency to cope by replacing the dead child was giving the name of the deceased to their newborn babies. Ayşe-Ahmet couple and Narin stated that they named their children born afterwards the name of the deceased son, which made them feel good.

> Ahmet: I feel very sad when the child comes to my mind, but there is nothing to do. God gave us two more children instead.
>
> Ayşe: Murat's (the child born after the dead child) face is similar to him (the deceased child), I mean, physically resembling him.

On occasions when the emotions could arise and be expressed by the parent, their speech became superficial and self-centered.

> Narin: Well, of course, it was awful. Then, well, the baby was born. Can you imagine my condition? It was a tough time. My strength! Anyway, I was transferred to a special hospital room then. God! The doctor kept saying, 'you could have died, be grateful." I was in the room, and the friends were gonna visit me. Well, I said they shouldn't see me like this; in a neglected appearance. I am always well-groomed. I was very well-groomed at work too. Anyway, my friends were going to come to visit, so I was tidying up my hair and doing this (pinching her cheeks) to make my cheeks seem red.

It was also observed that elderly parents tended to adopt this coping style. In other words, older people focused less on the child's death but more on their lives, which they perceive as being close to an end. It was thought that feeling close to one's own death meant meeting the deceased child soon. That's why they ended up mourning less for the child and focusing more on their current life by enjoying the remaining time. Besides, when the elderly parent was not satisfied with own life so far, he/she tended to mourn for own disappointing life instead of the deceased child.

> Mesut: We lived well for fifty years. My son made me live very happily and beautifully. Will I live another fifty years? God bless my son. There is nothing to do. That's it; his existence was a reward for us which was this much. Ok, it's enough then.
>
> Filiz: I keep remembering the moment of death. Yeah, the moment of death. We lived together for ten years before his death. Of course, we had hard times. He was ill. Well, it was like that, how can I say? I lost my interest in the world, and I don't have any eagerness for anything. We were rather rich; we went bankrupt. It destroyed me a lot. For example, I used to have houses. We are now tenants. Then we became a tenant, then here… Well, that's our luck, fate. I feel sorry about it, and I am sorry for my destiny. My life, my youth, was wasted. I mean, I have never lived my life.

In summary, parents who adopted Indifferent/Avoidant Coping had a substantial need to avoid feelings about their child's death. As a reflection of this need, parents showed tendencies such as muting emotions by utilizing logical explanations, wishing to eliminate the pain completely, and even pretending that the loss had never happened. In the following section, the last major category named the reconstruction of the self and identity was explained.

3.2.5 The Reconstruction of the Self and the Identity

It was observed that parents tended to go through significant changes and reconstruction in their self and identity after their child's death. Processes of making sense of the death, various types of coping, and the way the parents continued their life led to considerable transformations in life after the child's death. In this section, four subcategories including *Common Changes Among Parents, Suffering Parent Identity, Strong Parent Identity, and Rational Person Identity* were explained.

3.2.5.1. Common Changes Among Parents

Some of the changes, such as mourning parent identity, benevolence, normalization of the concept of death, anxiety, perceiving concerns and problems of other people as trivial were occurred in almost all bereaved parents regardless of their mourning types. This subcategory was created to refer common changes in parents.

The identity of "the parent whose child is dead" tended to be attached to these parents. The older aged the child was at the time of death, this identity became more pronounced and known by many people. Other people's tendency to mention the child's death while introducing the parent to unfamiliar people was evaluated as an indicator of this identity.

> Seda: For example, my husband sometimes says that there are tactless people. All people in our neighborhood heard about the situation. However, when he goes to the cafe, they ask him: it was your son who died, right? He said reactively, "Yes, he was my son, so what?". He means, shut up; why are you asking. Something similar happened to me the same day. Where we go to read the Qur'an, they introduced me to people as "the friend whose child has died."

It was observed without any exception that a more benevolent and altruistic identity emerged after the child's death. It was noticed that even those who were less inclined to help before or who were unable to provide financial aid due to their economic status were helping on behalf of the child. These favors and aids appeared in the form of sacrifices offered for the deceased child, showing that they had not forgotten him/her and increasing the child's good deeds by aiding others on behalf of him/her. The benevolent acts of these parents were considered to be an antidote for their feelings of guilt.

Another fundamental transformation experienced by parents who lost their children was observed in their relationship with death and mortality. In their lives, death and even a child's death became much more likely, unlike those who did not experience death so imminently and deeply. As a result of this, the parents tended to behave in ways that would not cause any regret if anything happened to their alive children. They also gave advice to people around to help them emotionally prepare for their child's possible death by saying not to love their children excessively, not to get angry with them, or not to hurt them.

> Betül: That's why I want to give more to my children so that I don't have regrets. I want to do whatever they want; they won't live twice. God did not give my child a long life. We don't know what might happen to us tomorrow. Death is so likely for me from now on. Anything can happen at any moment. I felt this after Berkin's death.

> Meral: It is an indescribable pain. You become estranged from the world. You know that there is death. After seeing him dead, you start to think there is no meaning in life. This time, you feel fear: Will I have another loss? Would anything happen to my children? Would something happen to my husband or mother? I started to live with this fear of death, but over time I accepted it.

Some parents tended to have fear and anxiety about the possible death of their alive children in the same way as the deceased child died. Therefore, they restricted their surviving children's lives and treated them with intense care or overprotectiveness.

> Namık: The children have grown up. They are big men now. But still, Ceyda has this fear. Nothing will happen to them!

> Ceyda: Are you okay, son? Do you feel better? I always ask like that. I can't get rid of this concern. I just can't.

Another significant change occurred in parents' way of looking at sorrow, life problems, and losses of others. It was observed in almost all parents that they tended to devalue, disregard, or get angry with other life problems or losses both in their own lives and in the lives of other people they witnessed. As a reflection of this, it was noticed that they made statements such as "You are sorry for this. Then, what should I do? I lost my child" while giving consolation to these people.

> Hale: Nobody understands you. For example, after the death of Yasin, I secluded myself in my home. I shut off. I don't go out. Before, I had meetings with my friends, but then, I didn't go. I don't go to meetings; I don't go shopping. Because wherever I go, the things they are concerned with and talk about are worldly. They talk about someone buying a property; a house, car, or land. These seem pointless to me. Nonsense! What are they dealing with? There is death in this world. For example, my aunt died when Yasin was about to die at the hospital. When I went to give my condolence, they talked about her son living in Australia and the new land he just bought in Gölbaşı. I lost my temper! I escaped from there immediately. My young child was dying, his mother was also dead, but they were concerned about these issues. What are you dealing with? What will you take with you to the other world? What did my aunt take, what did my son take?
>
> Betül: For example, they're upset about something. I say, "Oh my God! Look at what they're sorry for". I realized how we used to feel sorry for simple things. I tell them right away, "why are you upset about this? There is no death in the end. These will be over, these sad things will be over with the help of God." I see that we used to worry about very trivial things.
>
> Neşe: Your relationship with the other people changes. Someone else's problems seem ridiculous to you. People say, "Oh, I didn't get that outfit. I'm stuck with that." I wish that God gives such troubles to everybody and me as well (laughing). Okay, maybe I was worried about such things back then. But when you see other troubles, big troubles, you don't even want to hear such problems of others. Sounds nonsense!

The changes mentioned above were the shared experiences of parents regardless of their different coping styles. In the following section, different identity constructions of parents were discussed.

3.2.5.2. Suffering Parent Identity

This identity was characterized as the suffering parent whose child is dead. Being alive, forgetting or remembering the child less frequently, and getting involved in life evoked and increased the intensity of these parent's guilt. Thus, the parents' tendency to hold on to the pain and not letting oneself feel better transformed into an identity.

As a result of this, the parents almost lost their own identity and carried the absence of their child as an identity wherever they go. For instance, Ceyda said: "Well, we used to go camping with the boys. We used to go there and swim or visited some other places but… You feel better just a little bit, but the pain is inside you. It never goes."

Benevolent acts or aiding others were seen in all of the parents, partly because the only way for the parents with this identity to be involved in life without feeling guilty was to do something for other people rather than for themselves. Therefore, these parents tended to live for others, not for themselves or make sacrifices, as a way of returning to life without feeling guilty.

> Hale: Iıı, the thing is, before Yasin (implied his death by saying his name), we used to go to both wedding ceremonies and funerals. But we didn't used to go to funerals this often.
>
> Sinan: Sure! Of course. We used to go to funerals but not this often. Well, I mean, we would not be there as emotionally involved as we are now.
>
> Hale: Now…
>
> Sinan: We feel that burden way better.
>
> Hale: Yeah! Because we felt it at the funeral (of our son), we appreciated the crowd that was emotionally supporting us. That's why we feel obliged to go to the funerals of acquaintances.

It was also observed that demanding attitudes legitimized by having had the most severe sorrow in the world tended to be a part of some parents' identities. It was thought that this identity might derive its legitimacy from the magnitude of the suffering, the state of sacrificing oneself for others, and constantly aiding others to cope with their pain. As a result of showing all this kindness and suffering all the pain, some demands were justified. These demands included expecting others to come to the funeral, respecting their sorrow, and expecting the people close to them to refrain from living. For example, Hale resented her surviving son for going on a holiday after his brother's death. She said that “He went on holidays, after Yusuf (she mistakenly said the name of the alive son). After Yasin, he went on a vacation. We haven't seen a vacation yet (11 years passed after the death of their child). As I said, we quit them all, both the vacation and the picnic.”

> Hale: They did not come, even seven days after (the death of her son). When things calmed down a bit, I found his father's phone. I called and said I was Yasin's mother. He said, 'I am sorry for your loss.' I said, huh? Did you know? He said yes, I knew. We were going to visit you. And I said, don't come after this time. I said, my son risked

> his life for your daughter. He made so much effort for your daughter. I said don't come to my house after this time either.

3.2.5.3. Strong Parent Identity

It was observed that the parents with coping through action developed a strong parent identity. A new person from the mixture of the deceased child and the old self of the parent materialized. This new identity, in a way, helped parents keep the dead child alive at a symbolic level through the adoption of their child's favorite activities and people and led to a new parental identity. As a result of the formation of this action-oriented identity, tendencies of living fully, establishing a charity association related to the child's cause of death, maintaining the political struggle of the child, and continuing legal fight about the cause of child's death have emerged. As it is obvious, all of the mentioned activities of the parents were about or related to the deceased child.

> Zaman: "My son, my heart! I walked through all the places that you had been before. The places you camped and swam, the cafes you sat in, the places you liked to go for sightseeing. You are living in my dreams and in my heart, all the time."

The parents with this identity tended to be strong, combative, and fearless in many areas of life. The strong identity manifested itself not only in the legal struggle against the people or institutions responsible for the death but also in the parents' ability to continue living despite experiencing great pain.

> Afife: I have no fear. Because I have nothing to lose. I believe that someone has to force them (the people in charge of the train company that was responsible for the accident) to face what they did. Sometimes I cannot control my anger, it hurts a lot, and we suffer tremendously. Unfortunately, these reactions are overflowing out of me with feelings that cannot be covered or suppressed. I'm not afraid!

These parents tended to undergo significant changes as a result of their active coping struggles. Unlike coping through suffering, the accompanying anger in the active coping style provided motivation for the parents to explore and question both the child's death and the meaning of life. Therefore, the parents tended to gain a new understanding of themselves, their lives, and their values in life.

> Umut: Until I lost him, I never thought how well McQueen's style of motivating the self also accounts for my behavior and my philosophy of life. I was the speed, faster than the fast, quicker than the quick. To survive, I should have been active - 'proactive' if you are interested in new fashion terms.

> Can: Before that, I always prayed, went to the masses on Sundays. And I saw myself as a righteous person, like I know everything, I do everything right. And no one could reach me; I was feeling myself superior. And when I was talking to people, I looked down on them a little, and I felt like I live better. But then, after these events happened, I started to change and asked God for help to accept people as they are. Because every person makes mistakes, and I also make mistakes. I saw myself as faultless then. After the loss, I had the opportunity to meet with God and discovered that I also have many faults. After that, I started to live in comfort and freedom.

The parents with the active coping style were observed to gain some skills about saying no, establish more direct communication, and become less concerned about offending people. Unlike the parents with coping through suffering who want to be cared and supported by others through nonverbal convey of expectations, these parents tended to put down limits in their relationships, have fewer fears about hurting others, and become intolerant. It seemed that active coping parents were less afraid of hurting others and felt less guilty compared to parents who adopted coping through suffering.

> Seda: One day, I finally burst with anger! I became intolerant at that point. I said… For example, I had tension with a person, and after that, I told the friend who brought her, "don't bring her to my house again. Don't invite me to activities with her, don't bring her to me anymore." I said she is not good for me. I had a conflict with her twice, and I realized that I could not get along with her.

3.2.5.4. Rational Person Identity

As mentioned above, parents with Indifferent or Avoidant Coping style tended to have restricted emotional life regarding grief. Avoidance of grief-related emotions had a price of missing the opportunity for change and psychological growth. Stating differently, these parents displayed limited changes in themselves. In line with these parents' needs of preventing the change, ignoring the experience of child's death, and trying to keep the life in its ordinary course, the reconstruction in self or identity became less observable. Also, to emphasize that the child's death was not a prominent part of these parents' identity, the word *person* was preferred instead of the word *parent* in the domain title. In this regard, over-rational attitudes towards emotions was the most salient feature of these parents.

General features of this identity were tendencies of emotional avoidance or superficial expressions of emotions, rapid acceptance of life problems, approaching emotional experiences with logic, and providing logical explanations. It is important to note that based on the present study's findings, it is not possible to interpret whether the

mentioned characteristics were a result of parents' changed identity or people already had these characteristics before the loss.

> Ahmet: Well, death is death. He is dead, gone. And I will also die one day. It doesn't make any sense to cry, wail and experience it as a big problem. It has to be accepted. That's always been my approach.
>
> Gökçen: Don't you feel sadness?
>
> Ahmet: Sure, you'll be sad when you lose someone, but it shouldn't affect your life. If you have a pet, you will feel something even if you lose it, but I have a child, my mother, father, brother, sister passed away.
>
> Gökçen: What is your first reaction when you hear about death?
>
> Ahmet: I don't show anything like that; like shouting, calling, crying. I find it reasonable.

3.3. The Theoretical Model

In this section, the Theoretical Model (see Figure 1) created based on the findings of the present study was presented. As shown in Figure 2, the subcategories and the interaction between them accounted for the three different mourning types (*Lifeless Mourning, Mourning Through Action, and Muted/Forbidden Mourning*) defined by the model. Before the explanation of the theoretical model, it is important to note that the mourning types do not imply categorical divisions among parents. Stating differently, a parent may experience each of the 3-different types of mourning at various times or in various areas of life. The three mourning types were based on different dimensions of the parental mourning process and diverse psychological and behavioral tendencies. In general, however, it was observed that parents adopted a particular type of mourning style predominantly or a single mourning style was more dominant depending on the manner of death, the child's and the parent's age, and some environmental factors.

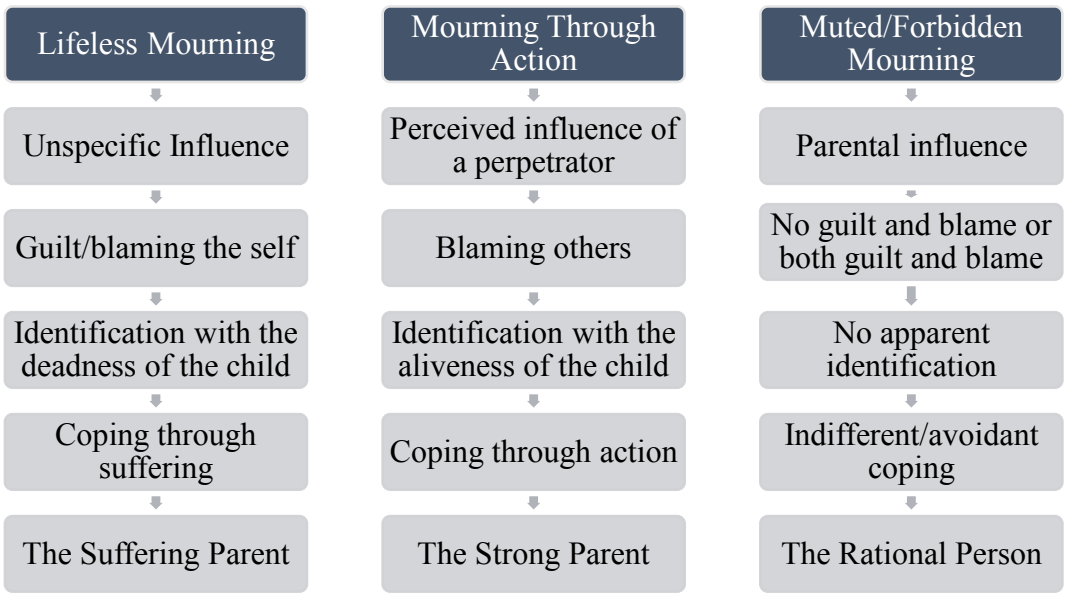

Figure 1. Theoretical model of three types of parental mourning

Feelings of guilt was at the center of the mourning process. The manner of death had a substantial effect on the types of mourning adopted by the parents and the course of mourning, because the attributed cause of death determined direction, intensity, and effect of guilt feelings. In other words, the feeling of guilt had a central position in the parents' mourning process and life after their child's death was directly affected by the rationale, intensity, and direction of guilt. The attributed cause of death determined the intensity and effect of guilt. Nevertheless, certain individual factors (age and whether a crime existed or not) can also have considerable effect on the power of the guilt feeling.

A child's death is a traumatic loss for parents that arouses overwhelming feelings, such as desperation, longing, regret, guilt, and anger. In the model, guilt was observed to be at the center of this mourning. As mentioned, many complex emotions and their behavioral manifestations were a part of parental mourning. On the other hand, in the current study, guilt was recognized to have a particular position and explanatory power regarding the different types of parental mourning. A certain amount of blame and

guilt may be experienced in every loss, but in the context of the child's death, these feelings were both much more severe and difficult to give up. The reasons and nature of this situation were presented in the Guilt and Blaming the Self subcategory.

In the case of a child's death, the grief's persistence can almost become a way of coping. It was observed in some parents that forgetting about the child and fully recovering was experienced as forgetting or erasing the child. Therefore, keeping this pain fresh throughout their lives was preferred by some parents to avoid much more severe sorrow and guilt of killing their child symbolically. Although there may be individual differences, even those who comfortably left the grief behind, did not allow feelings of mourning at all, and adopted an entirely rational approach to avoid emotions have said that this pain was not like any sorrow and mentioned the impossibility of forgetting their deceased child. Subjective differences were observed in all of the research findings, but no exceptions were encountered in the parental discourse about impossibility of forgetting about the child and pain of the loss. In this respect, guilt or blame also had a painful function that kept the child alive in the mother and father, prevented the child from being forgotten, and thus made the child survive at a symbolic level. As a result of the stated reasons and observations, a theory was formed in which guilt was placed in the center. Within the scope of this theory, three different mourning styles with very different emotional and behavioral manifestations were defined.

3.3.1. The Lifeless Mourning

The Lifeless Mourning was observed in parents whose dominant tendency was blaming the self instead of blaming others or sharing the guilt with other sources regarding the cause of the child's death. This mourning type was characterized by intense feelings of guilt, identification with the child's deadness, and avoiding life. The feelings of guilt tended to spread to many life areas and put the parent in a passive position. As explained in the Guilt/Self-Blame subcategory, parents tended to find many areas to provoke guilt. Such that feeling good or rather less upset could be another source of guilt. Therefore, in this type of mourning, healing, overcoming grief, or feeling better led to another attack of guilt, which in turn prevented recovery. Some of the sources of guilt, other than feeling relatively good, were being alive while the child was dead,

thinking that the child died in place of the parents, parenting the surviving children and not being able to parent the dead child, and remembering, mentioning, or visiting the grave of the child less frequently.

Efforts to calm guilt feelings included attempts, such as withdrawing from life, joy, appetite, needs of the body (such as trying to warm the body when feeling cold while the child was lying under the cold ground), and even not seeking health services (not being able to go to the doctor to reduce pain when the child experienced lots of physical pain before the death). Other ways to alleviate guilt without avoiding life were to turn the house into a temple, to put everywhere large printed photographs of the deceased child, to keep the child's room as it was when s/he was alive and to not allow anyone else to use his/her room, to keep almost all of the personal belongings of the child, and to let oneself find peace and happiness during frequent and long hours of grave visits.

The unhappy parent does not eat with appetite, does not enjoy anything, does not seek solutions to his/her problems, and spends or wants to spend as much time as possible in the grave in a way preferring a symbolic deadness. Continuing to live even though the child died was so painful that living as if a dead person was one of the only ways for these parents to continue being alive. Therefore, parents who experienced lifeless mourning seemed to place the deceased child in the center of their lives and hearts where a void emerged after the child's death.

Every parent could exhibit these feelings and behaviors to some extent, but the very intense and years-long state of this mourning took its power from the traumatic aspects of the death and the depth of guilt. The parents in this mourning style appeared from outside to be the suffering parents of a deceased child. It is important to note that when the loss was novel, almost every parent experienced Lifeless Mourning tendencies. The passage of time or the occurrence of some life problems or indispensable responsibilities, such as taking care of the children of the deceased child or financial problems, may lead some of the parents to mourn through action even though their initial tendency was lifeless mourning.

3.3.2. Mourning Through Action

Mourning Through Action was observed in parents whose dominant tendency was blaming others instead of self-blaming regarding the cause of the child's death. The action referred both to these parents' reactions to the loss and their tendency to be active in their lives after the child's death. The general tendency in this type of mourning was keeping the child alive by utilizing the parent's own life.

Mourning Through Action has arisen from the way loss was experienced and whether there was a real criminal or someone to blame according to the parents' attributions. When there was such a perpetrator in the parent's eyes, the intense guilt feeling could be externalized. The externalization of guilt provided energy which was shared with the deceased child. This implicit experience of sharing one's life with the child was explained in the category of *The Identification with the Aliveness of the Child.* In *Mourning Through Action,* parents tried to cope with this loss with an active stance. They felt better by performing the child's favorite activities or unfinished life goals on behalf of him/her. Therefore, this mourning type was quite different from the *Lifeless Mourning* in terms of parental attitudes and behaviors.

While engaging in favorite activities, foods, or places of the deceased child was a source of guilt in *Lifeless Mourning,* it was a way of connecting with the child and symbolically keeping him/her alive in *Mourning Through Action.* Another difference from *Lifeless Mourning* was the relationship with the reminders of death, which may have parallel sides with the *Muted/Forbidden Mourning*. People who mourn through action needed to avoid situations that emphasized the child's deadness and absence (collective religious practices for the child, the grave, or personal belongings of the child). The basis of this avoidance was the need to leave the child's death behind and keep him/her alive. When exposed to these reminders, it became difficult for these parents to maintain their usual energetic and lively state. Yet, avoiding the grave may also feel like abandoning the child, therefore, parents needed to find excuses to explain this avoidance. For instance, one of the parents accidentally built the grave in the farthest part of the city and another parent did not want the grave of her daughter to be in the same city with them not to upset her grandchildren.

In this form of mourning, the parent almost began to live two lives. One life was devoted to keeping the child alive and the other to maintaining the legal struggle (when there is an actual perpetrator to be charged) about the child's cause of death. As a result of this, it has been observed that following the death of the child, the activities and people that used to be a big part of the child's life also became important in the parents' current lives. For example, one of the parents started doing sports and continued doing it intensively, which was the reason for her son's death. In this type of mourning, oscillations between the other two mourning styles was possible. The dominance of aliveness and action in these parents' lives can derive their strength from the cause of the child's death. The more traumatic and unexpected the cause of death and the greater the role of the perpetrator were, the more likely was the parent to be in this form of mourning.

3.3.3. Muted/Forbidden Mourning

It was noticed that some parents needed to get away from the sorrow, guilt, and the experience of loss itself. This emotional avoidance was the basis of Muted/Forbidden Mourning. As a result of the emotional burnout due to the intense feelings after a child's death, the mourning process was blocked and the emotions were avoided. The reason for not choosing a single word for Muted/Forbidden Mourning was to distinguish between two different experiences. As previously mentioned, each parent could oscillate between all three types of mourning at certain times. Yet, while some parents needed an emotional break after letting themselves feel the painful emotions of the child's death, other parents banned themselves to mourn almost from the very beginning. Although the two situations resembled in terms of keeping emotions at a distance, there were important differences and thus, two words, *muted* and *forbidden*, were used to refer to the differences in the underlying dynamics.

As mentioned before, parents tended to feel guilty after their children's death whether there was an external source to blame or not. Nevertheless, during the interviews, it was noticed that some parents rejected the feelings of guilt and blame as well as other grief related emotions such as sorrow, anger, longing, regret, and sadness. Trying to understand the need for avoidance among these parents, it was observed that these parents, in a way, sensed the threat of actual or attributed guilt for themselves about

the death cause. Stating differently, actual or attributed parental neglect was implicitly assumed by these parents to be the reason for death. When the neglect of parents was suggested by outside sources like physicians, midwifes or relatives to have a direct influence on death, guilt became unbearable, rejected, or quickly normalized by attributing the cause to destiny. These parents struggled to push guilt and blame away to survive under this overwhelming condition. The guilt was neither internalized nor externalized, but was entirely rejected by these parents. They accomplished avoiding guilt, blame, and any other grief-related emotion by means of rationalization and religious sanctions prohibiting prolonged grief. The price of this quick normalization and avoidance of painful emotions were observed to be the sacrifice of many emotions and absence of joy of living fully. These parents appeared to be strict, rational, and machine-like, rather than fragile human beings. Another sacrifice was missing the opportunity to change and to start living more fully by letting this traumatic loss alter them and their lives. Many parents claimed significant changes in their selves and their lives after losing their child. However, those who banned mourning tended to freeze their lives and themselves in a period when the child's death never happened. As a result, these parents could not take the bitter medicine for growth and living more fully.

To protect their life intact, they tended to avoid reminders of the child's death and even reminders of their child's existence. They, in general, gave away all the child's personal belongings, lose the place in the graveyard where the child was buried, and not talk about the memories of life and the death of the child. They, in a way, pretended as if the child never existed and that the death of him/her never happened. When they needed to talk about their deceased child, they tended to speak in a very calm and rational manner. So, they did not disregard or reject the actual existence of their child or his/her death, but they rejected the loss emotionally to protect themselves from unbearable emotions. These attempts to keep things intact were manifested in unshakable, strict, and rational personality characteristics of these parents, which prevented the transformation of grief, as well as the parents.

CHAPTER 4

DISCUSSION

In the present study, detailed interviews were conducted through Constructivist Grounded Theory (CGT) methodology with parents whose children died. At the end of this research, a theoretical model of parental mourning, including critical dimensions of grief and life after death, was presented. The model provides three modes of mourning; *Lifeless Mourning, Mourning Through Action,* and *Muted/Forbidden Mourning*. These three different mourning experiences of parents had different background aspects regarding parental attributions to death, guilt and blame, identification with the deceased child, parental struggles to cope, and the reconstruction of self and identity. In this regard, **Lifeless Mourning** is characterized by ***blaming the self*** about a myriad of topics, including the cause of death, previous relationship with the child and behaviors in post-loss life; ***identification with the deadness of the child*** through choosing to live like a dead person; ***coping through suffering*** by avoiding cheerful situations and focusing merely on pain and loss; and ***the suffering parent identity*** highlighting the emotional harbor of a parent in his or her identity. **Mourning Through Action** is characterized by ***blaming others*** or being able to share guilt by externalizing some parts of it; ***identification with the aliveness of the child,*** which reflects itself as attempts of living on behalf of the deceased child by adopting and enduring his or her life routines or favorite activities; ***coping through action*** by being a more social and active person as if living for two individuals at once; and ***strong parent identity*** who seems to survive the great pain, can be happy again and even helps others despite the suffering. The third type is **Muted/Forbidden Mourning** characterized by refusing ***guilt and blame*** strictly or feeling both equally strongly at the same time; ***no obvious identification*** due to emotional avoidance need; ***indifferent/avoidant coping*** patterns to distance themselves from intense pain and guilt by avoiding the deceased child, memories of loss and previous life; and ***rational***

person identity which underlies the exclusion of emotions in many areas of life including the mourning process after child's death.

These definitive mourning types are not criteria for clustering parents. Instead, these are the types that one individual may experience at different times or on different dimensions of life. However, although the model highlights flexibility for fluctuations between different types of mourning, the general tendency of parents was experiencing one of the three mourning styles predominantly. This section subsequently discussed the role of guilt, identification, age, couple relationship and culture, religion, and social support. Then, the current model was evaluated by comparing and contrasting with other models about mourning and grief. Lastly, the study's clinical and social implications, strengths and limitations, and future directions for studies were presented.

4.1. Fundamental Role of Guilt in Parental Mourning

In the present study, guilt was observed to be the major element of parental mourning that could explain the course of parental mourning. This relationship between guilt and bereavement was supported by many researchers (Arnold et al., 2008; Davis et al., 1995; Dyregrov & Dyregrov, 1999; Lindemann, 1944; Miles & Demi, 1992; Murphy, 1998; Wheeler, 2001). On the other hand, there are mixed results about this association and prevalence rate of guilt among bereaved individuals (Duncan & Cacciatore, 2015; Li et al., 2014). For instance, as mentioned in review articles, there was substantial variation of findings about parental guilt reported by different researchers which ranged between 7% and 90% (Li et al., 2014).

Guilt is hard to define as an emotion because it has many multidimensional components (Gamino et al., 2000; Stroebe & Schut, 2001b). Also, cultural norms and social context tend to define and influence the occasions in which guilt is experienced (Li et al., 2014). Some researchers stated that the lack of an agreed upon definition as well as consistent measures of guilt are some of the reasons behind mixed results and enormous variations about prevalence rates in studies about the relationship between grief and guilt (Li et al., 2014). Nevertheless, the link between death and guilt has been reported by many researchers (Duncan & Cacciatore, 2015; Li et al., 2014). In most of the studies about bereavement and guilt, parents who mourn a loss due to suicide were

emphasized (Bell et al., 2012; Tal et al., 2017). Miles and Demi aimed to explore sources of guilt and compare the guilt feeling among parents whose children died as a result of different causes, such as suicide, accident or chronic disease (1992). They reported that most of the parents stated feeling guilty after the loss, yet only for suicide bereaved parents' guilt was the most distressing part of their mourning (Miles & Demi, 1992).

The common ground of the existing studies about bereavement guilt was their focus on actual cause of death (Bell et al., 2012; Gamino et al., 2000; Miles & Demi, 1992; Stroebe & Schut, 2001b; Tal et al., 2017). In the present study, mainly parental attributions to the cause of death were related to guilt feelings and shaped the course of mourning. Parental attributions were parents' perceptions about why death happened and who was responsible for the loss of their child. Considering the mixed findings and quite varied prevalence rate of guilt, the idea about focusing on parental attributions to cause of death could account for variations and conflicting findings. For instance, in the current study one of the participants lost a child due to suicide and wrote his experiences in a published book (Halid Ziya). According to him, the cause of death was murder without any question, because he thought that his son committed suicide as a result of evil-intended behaviors of some people around his son. Therefore, he could externalize the guilt by directing it to the people who were perpetrators in his opinion.

Regarding the duration of guilt, parental guilt was suggested to decline over time (Stroebe et al., 2014). In the current study, the time passed since the death of child ranged between 10 days to 52 years and decline in intensity of guilt in daily life was observed. On the other hand, when talked about their child's death, even after 52 years, the pain and guilt returned as if child died recently. Moreover, some parents developed behavioral or avoidance patterns over years to prevent feeling guilty. For instance, Hale and Sinan said that they never went on a holiday or picnic after losing their son which was 11 years before. They learned to protect themselves from guilt and endure those methods for years. Therefore, it is important to consider parental avoidance patterns and also return of intense guilt when talked about the loss in detail even years after the loss. In summary, guilt has a fundamental role in parental mourning process. Thus, factors effecting intensity and influence of guilt, such as culture, religion,

parental attributions, manner of death and attributed cause of death should be taken into account meticulously before drawing any conclusion.

4.2. The Role of Identification with the Deceased Child

The concept of identification is already a well-known term in psychoanalytical literature. Freud considered identification a very early reflection of an emotional bond with an important person (Freud, 1922/2011). Accordingly, the earliest identifications assumed an essential role in shaping personality and defining core personal values. Nevertheless, this process involves a major paradox; increased identification via internalization of aims, functions, or specific characteristics of a person results in a decreased dependency on that individual. Stating differently, unconscious attempts to feel the bond with a significant person reflected in identifications with that person which help the person to become self-sufficient and independent (Volkan & Zintl, 2018). A similar way of freeing oneself from a deceased loved person can utilize identification. After losing someone, identifying with the favored and needed features of that person helps to soothe grief and sorrow (Volkan & Zintl, 2018). In the mourning process, if there are no complicating issues, metabolizing the deceased's desired and needed characteristics takes place and those characteristics become a part of personal identity. Therefore, the mourning person feels connected with the deceased by feeling some parts of him or her inside. Additionally, if a person can adopt the functions of the deceased, he or she can be freed from the deceased person and appreciate the gift of enriching the identity through mourning (Volkan, 2007).

Supporting the idea of unconscious identification with the dead person, Lindemann (1944) observed some similarities between the specific features of the deceased, particularly the latest symptoms before death, and behaviors of the bereaved individual. He concluded that a bereaved person, in a way, imitates the deceased during the mourning process. However, Volkan and Zintl suggested that identification is more than imitation, that it takes place unconsciously, and sometimes occurs against the desire of the bereaved person (2018). In other words, people sometimes take in certain parts of the deceased against their conscious will. Moreover, Worden (2009) also implied the situation of identification without mentioning the concept. According

to Worden, people may adopt similar somatic symptoms as the deceased without an underlying medical condition.

In the present study, the concept of identification and its effects on bereaved parents was observed, which supported previous findings. The current model, however, distinguished between different forms of identification and the effect of identification styles on the mourning process and life of the parents after their child's death. Also, interaction between guilt and types of identification was explained in the model, which was another new conceptualization. Three forms of identification were introduced in the present study: *Identification with the moment of death, identification with the child's deadness of the child* and *identification with the aliveness of the child.* The first form of identification was *identification with the moment of death,* which was observed when the child was close to dying or right after death. When a parent was informed about their own child's death, he or she started to have an intense preoccupation with how this loss happened and how it could have been prevented. Accompanying this mental struggle, some parents, either unconsciously or consciously, adopted some behaviors or sensations of their dying child. This identification mostly faded away after a while or was transformed into *identification with the child's deadness or aliveness*, depending on the unique parental mourning pattern.

The other forms of identification, *identification with the deadness or identification with the aliveness of the child*, were more prolonged than the moment of death identification. These two forms of identification tell more about the course of mourning and life after the loss than the moment of death identification since it was the very first reaction to death under the shock. The present model's contribution regarding the prolonged identification forms was distinguishing between internal versus external locus of guilt. Up to now, the identification concept (Volkan & Zintl, 2018) was not defined based on deadness or aliveness and their various effects on bereaved individuals were not conceptualized. This division can be important to understand the attitudes, feelings, experiences, and avoidance style of the parents. Also, in the post-loss period, new relationships formed with life and with the deceased child was considerably affected by the identification type. In this regard, *identification with the deadness of the child* was characterized by blaming the self about various aspects of death, not preventing loss, and behaviors after the child's death. These

parents felt connected with their deceased child by uniting with him or her in their deadness, in the graveyard, or lifeless life adopted after the loss by avoiding feeling any better. Feeling better or not mentioning the deceased child became additional sources of guilt. Therefore, these parents avoided life, stayed at home to connect with their child, or spent extended amounts of time at the graveyard just as the deceased child did.

Identification with the aliveness of the child, on the other hand, was characterized by externalization of guilt by sharing it with an outside source that was assumed to be responsible for the child's death. Being able to blame another source other than one's self provided considerable energy for the parents, so that they could identify with the aliveness of their child. The parents with this form of identification tended to highlight the child's memories when he or she was alive rather than focusing on the memories of death and the absence of the child. Through this identification, these parents felt their children inside and started to live on behalf their children by performing their children's favorite activities, meeting their best friends, or eating their favorite food as a part of mourning and adapting to a new life after loss. These new aspects of living more fully for two people were mostly unconscious choices but happened because they made the parent feel better. In summary, each of the three identification types adopted unconsciously and tended to influence coping styles of parents and the course of mourning process.

4.3. The Role of Child's and Parent's Age

Throughout the interviews, it was observed that there was a hierarchy of parental grief based on the child's age. The younger the age, the lower the pain was assumed by the society. Similarly, other researchers also mentioned the ranking of parental pain based on the deceased child's age (Plagge & Antick, 2009; Theut et al., 1989). Moreover, some parents also tended to compare other children's age to find some solace, because even for bereaved parents of a young child, a grown-up child's death was a worse condition. Some bereaved parents needed to compare their loss with more traumatic deaths to reduce the pain. Yet, some parents got angry with comparisons and perceived such comparisons as disrespectful or undermining their suffering (Plagge & Antick, 2009; Smith & Borges, 1988). This was usually observed among parents who had a

miscarriage, stillbirth, or newborn baby death (Smith & Borges, 1988). Supporting their resentments, relatives and friends did not let these people mourn by suggesting that they should think about having a new baby or bereaved parents who lost their grown-up children. While some parents got hurt by such consolation efforts of others, others needed such normalization and underestimation of their loss to feel better and return to regular life routines. Differences among parental needs implied diverse background dynamics to be taken into account. In the presented theoretical model, the location of guilt explained these differences. For example, *Muted or Forbidden Mourners* needed quick normalization of loss and expected acquaintances to normalize the loss rapidly and not show empathy or mention their deceased child. On the other hand, *Lifeless Mourners* got very upset when their grief was rapidly normalized as if their child's existence was ignored or dishonored. Parents with *Mourning Through Action* tended to be more flexible in such needs that they generally neither expected underlining their sorrow nor disregarded it. Still, they needed others to focus more on positive aspects of their child rather than death-related topics.

Another important factor was bereaved parents' age. When an elderly parent lost a grown-up child, the child's grief was intertwined with the parent's feelings about his or her own mortality and evaluations regarding past life. If an old parent was already dissatisfied with their past life, then the mourning for the child was overshadowed by the parent's mourning for his or her own life and upcoming death. These parents' mourning for the child became complicated by the mourning for their own life. Thus, the pain of the child's death was pushed into the background and left the scene for parent's regrets, grief, and anger regarding an unsatisfied lifetime which would end in a relatively short time. A similar remark was presented in a study about the spousal bereavement of older people (Chan & Chan, 2011). The researchers suggested that losing one's spouse also confronted the older partners with their own mortality. Thus, grieving at older ages leads people to face existential crises by arousing their own death anxiety questionings about life's meaningfulness. The bereaved elders felt hopeless about their future with a limited time and needed to avoid thinking of the past, including the death of the spouse, not to confront the related feelings (Chan & Chan, 2011).

On the other hand, an older parent who was satisfied with his life seemed to have an easier time after the loss of his child. This finding was contrary to the arguments of Chan and Chan because they suggested bereavement in older age directly led to complex existential suffering and death anxiety (2011). In the present study, two different consequences were identified depending on the lifetime evaluations of bereaved older individuals. Taking into account the helpful side of feeling close to one's own death would be an important finding not to assume a single hopeless line for all the bereaved older individuals. Death and loss would be sources of sorrow, anxiety, and fear, but they can also be sources of condolence by ensuring the pain and life will absolutely be over. For instance, the father (Mesut) had a very strong bond with his son and people expected his son's death to devastate him; however, this was not the case. The idea of his impending death consoled the father. In other words, older age in parental mourning could have a function of consolation for some parents by promising a quick reunion with the child. Therefore, this parent could put the grief on the back burner and enjoyed his remaining lifetime. Supporting this idea, when asked about attitudes and feelings about their own mortality, parents considered their death as a desirable experience, which meant reunion with the child and end of the pain (Harper et al., 2011). Taken together, older aged parents tended to experience diminished traumatic effects of the child's death and focused on their own life and mortality. If the parents' evaluations of their lives were satisfactory, the parent tried to enjoy the rest of life by knowing the separation with the child will not take too long. However, negative lifetime evaluations ended with depressive and dissatisfied feelings and these parents' mourning became more complicated. They mourned for their own life as well and were scared of death. Yet the first case of enjoying remaining lifetime if the older individuals were satisfied with their lives was not reported in. In both cases, the effect of the child's death was undermined by parents' attitudes toward their own death. So, having a limited expected lifetime in a way helps some parents to cope more easily.

4.4. The Role of Culture, Religion and Social Support

Culture, religion, and social support have a major influence on the grief and mourning process. Losing a loved one might seem like an individual experience on the surface. Nevertheless, post-loss practices, rituals, and even feelings are influenced by social

constructions (Averill & Nunley, 2003; Neimeyer et al., 2014). How death is perceived and evaluated by others determines the magnitude of social support that bereaved person will be provided with and how the person is expected to mourn. When a certain kind of death was widespread, the social support declined accordingly towards bereaved people with that common experience (Kissane & Bloch, 2002). For example, when newborn death was prevalent among Oriental Jews in17th and 18th centuries, parents did not mourn for their deceased baby younger than 1-month old (Stahl, 1991). The support in the post-loss period depends on how others perceive and give meaning to that loss. In a study, a hierarchy between miscarriage and stillbirth was observed. The authors suggested that friends and relatives would display less empathy and support for the parents who experienced miscarriage which was assumed by friends and relatives to be easier to cope with (Plagge & Antick, 2009). A similar expectation of others from parents to cope with pregnancy loss quickly (Janssen et al., 1996) was mentioned by the participants of the current study. Each parent reacted to such a hierarchy or underestimation of their suffering differently based on their mourning type. The lifeless mourners felt hurt by such comparisons and underestimations. In contrast, the other two types of mourners were okay with such attitudes of others by using them as a source of normalization of their condition.

Another factor related to social support was its role in facilitating and directing feelings of guilt. Socially unaccepted expressions of grief, such as anger, rebellion, crying too much and also not reflecting sorrow, quickly recovering or being well-groomed soon after death of child tended to cause blame or condemnation. Moreover, witnessing the mourning and sorrow of a person is not an easy task, but a child's death is even more challenging. Especially a parent supporting the bereaved parents may have trouble being exposed to a loss that he or she does not even want to think about. As a result, some parents may need to distance themselves from the idea of losing their own child. One method was to blame the bereaved parent for the loss to ensure that death did not happen by coincidence, but it was that parents' fault. This observation was very confusing because it was not that simple to understand why a person blames a suffering parent with such a cruel accusation. Then, after conducting plenty of interviews, the researcher comprehended the need to avoid and get away from the pain and sorrow to soothe the fear of losing a loved one or one’s own child. Such that, the researcher had a significant fear of losing a child who does not exist yet.

Researchers provided support for the idea that people try to protect themselves from feelings accompanying traumatic experiences of others by distancing themselves either physically or psychologically. Researchers suggested that people tend to avoid prolonged exposure to the sorrow of bereaved parents to prevent disruption in one's own life (Riches & Dawson, 2000; Schiffman, 2020) or distance themselves psychologically from others' life-threatening problems to disregard one's own vulnerability (Pysczynski et al., 1995). Moreover, in a study, a considerable role of Karma belief in China regarding parental grief was stated. According to Karma, only an evil person in his or her previous life would have the worst punishment: the child's death. The researchers highlighted excessive social pressure on and ostracization of bereaved parents as a challenging factor complicating the grief (Zheng et al., 2017). The belief and its influences on the mourning process support the idea that culture determines the course of grief and the amount of social support. Also, the need to blame bereaved parents was reflected in Karma belief more systematically and concretely.

It is important to note that supporting bereaved parents is not easy, because friends and other family members also mourn the loss. Therefore, it is much easier for non-family members to support bereaved parents. Also, support for bereaved parents is usually not sustainable, because people need to get back to their everyday lives when consumed by providing support (Brabant et al., 1995; Riches & Dawson, 2000; Schiffman, 2020). Moreover, Islam also prohibits prolonged grief and regards this as rebellion against God's will. Crying too much after a death is assumed to disturb the deceased in his or her life after death (Hedayat, 2006). Interestingly, cultural codes also judge the absence of mourning. There are unwritten rules about the optimal level of expected grief. It was observed that parents deviating from such expected amount of mourning were isolated or continuously judged by friends and family members.

Islam not only prohibits prolonged grief but also provides some consolation by defining ways to communicate with the deceased, such as praying, ensuring the parent will be reunited with the child after death, and suggesting ways to live fully by helping others (Hedayat, 2006). It was observed that most of the parents felt better when thinking of these aspects of religion. During the initial interviews, the researcher was opposed to the prohibition of parents' prolonged emotional expression based of

Islamic beliefs. However, after identifying different mourning types, I observed that some parents needed those prohibitions to recover from their grief without feeling guilty. Thus, Islam became a legitimate force to suggest returning to previous life and not endure the grief too much and people who experience all three types of mourning benefited from the prohibition of grief in their own ways. Nevertheless, for some parents who were not ready to get back to regular life, religious prohibition functioned as a source of more guilt. Similarly, collective prayer events were quite challenging for some parents who needed to avoid the deadness of their child. Therefore, again, it is essential to remember that subjective context, mourning type and needs of parents should be considered to understand their unique requirements and hardships depending on religious sanctions about bereavement.

4.5. The Place of the Current Model in Theories of Grief

Throughout time, grief and mourning theories and aspects of coping have changed substantially. When reviewing related theories, Freud's important work entitled *Mourning and Melancholia* (1917) is essential to mention in the first place. In his article, Freud suggested the necessity of grief work and defined it as a process of detaching emotional energy from the deceased. In this way, the detached energy can be sublimated into other people or life's areas. After Freud, some theorists continued to work on this topic and contributed to the concept of severing bonds with the deceased (Davies, 2003; Lindemann, 1944). Classical perspectives were criticized later on by contemporary theoreticians in terms of ignoring non-western cultural dynamics (Stroebe & Schut, 1999), gender-specific characteristics (Stroebe, 1998), and the need for continuing bonds with the deceased (Klass, 1997; Stroebe & Schut, 1999).

Previous theories focused solely on negative parts of grief and grief was conceptualized as a paralyzing sadness. This perspective prevented people from realizing oscillations of grief responses. According to the current models, the absence of grief or the presence of genuine laughter in the post-loss period can be healthy and adaptive (Bonanno, 2009; Stroebe & Schut, 1999). Disregarding interpersonal aspects of grief and assuming it to be an individual process was also criticized (Schneider,

1984). Another criticized assumption of classical mourning theories was considering lack of intense emotional distress as pathological (Schiffman, 2020).

Finally, one of the most critical oppositions was about the view of severing bonds as an indicator of grief resolution. Current studies repeatedly underlined the phenomenon of continuing bonds with the deceased rather than severing bonds. In fact, keeping the bond alive was a way of coping and consolation for some mourners (Barrera et al., 2009; Klass, 1999; Riches & Dawson, 2000; Rosenblatt, 2000; Talbot, 2002; Wheeler, 2001). The current study also confirmed the existence and healing function of continuing bonds. Most parents tended to keep the bond with their child in new ways depending on their mourning style. Only parents with *Muted or Forbidden Mourning* style had trouble in keeping the bond since they needed to avoid the death of their child, so they ended up mostly avoiding the previous existence of him or her. Therefore, these individuals froze their lives at a time when the child was never born, so that he or she cannot die due to parents' neglect or fault.

Following the psychoanalytic theories of mourning, some theoreticians developed stage approaches (Bowlby, 1980; Kübler-Ross, 1969). In stage approaches, it was assumed that individuals go through defined stages sequentially regardless of individual characteristics or cultural differences (Schiffman, 2020). Basic premises of stage theories were criticized in terms of not accounting for cultural diversity and individual variations. In addition, the need for back and forth fluctuations between the stages was not taken into account in stage theories. Critics emphasized that it would be harmful if professionals force grieving people to pass through each stage in a specific order (Worden, 2018).

Later, task models emerged, which highlighted the active role of the bereaved individual in the mourning process. According to task model, grief is not resolved just by waiting for the stages to pass; instead, a grieving individual has to participate in the process by performing the tasks of grief. Thus, Worden (2002) conceptualized grief as a process rather than a group of stages. He defined four tasks of mourning to be accomplished: accepting the reality of loss, working through the pain of grief, adjusting to a world where the deceased is missing, and emotionally relocating the deceased child and reinvesting in life. His essential contribution was defining

mediators of grief, such as the nature of attachment, how the person died, previous loss history, personality variables, social variables, and concurrent stressors to account for unique conditions affecting the mourning process (Worden, 2009). Worden's work on mediator factors was a significant contribution to the mourning literature, because whether considered or not, these factors are part of the process and affected bereaved people.

In the current study, many mediators were identified affecting bereaved parents. The research questions were determined based on the analysis of the written experiences of parents about their child's death, as suggested by the inductive design. Therefore, mediating factors were also identified and asked during the interviews. When the answers of parents were articulated, substantial variation among parents was observed. When these differences were considered based on three different mourning styles, diverse needs and experiences of parents were understood. For example, concurrent stressors in the post-loss period were assumed to have adverse effects on parents (Rando, 1983; Worden, 2009). This finding was supported for parents with *Mourning Through Action* and *Muted/Forbidden Mourning*. Nevertheless, interestingly, it was observed that additional stressors could be a savior for *Lifeless Mourners.* Those parents had a hard time feeling better, enjoying life, or even taking care of themselves. Lifeless mourners tended to avoid life and ignore their own needs in order not to increase the guilt. Therefore, life troubles or stressors can function as an invitation to life without feeling guilty since it is not a choice but an obligation. So, by means of stressful situations, these parents can avoid their sorrow without blaming themselves for living fully after losing their child.

Another variation between the three mourning types was observed in the influence of surviving children on parents. In many studies, parents reported healing or consoling function of having extra-children on their mourning process (Arnold et al., 2008; Barrera et al., 2009; de Montigny et al., 2017; Dyregrov & Dyregrov, 1999; Rogers et al., 2008). There were also some exceptions mentioned by Barrera and colleagues. In their qualitative study conducted with twenty bereaved parents, they reported mixed perceptions of parents about having a surviving child. For some parents having a child helped to cope with their grief while other parents reported difficulty in parenting after losing a child (Barrera et al., 2007). In the present study, parents with *Mourning*

Through Action and *Muted/Forbidden Mourning* seemed to experience positive effects of having another child for the most part. On the other hand, the existence of surviving children in the post-loss period complicated the process for parents with *Lifeless Mourning*. Taking care of the children, trying to make them happy, and even having a fancy meal evoked intense guilt since the parent could not provide such care to the deceased child anymore. In short, when considering parental mourning, drawing clear-cut conclusions is not possible. Many interrelated factors operate within the same moment and can change any minute. What matters is not set up clear boundaries, accept the complex nature of this process and try to understand the unique needs of a particular bereaved parent.

The Dual Process Model of Coping with Bereavement is suggested by Stroebe and Schut (1999). They formulated two different coping patterns; Loss Oriented Coping and Restoration Oriented Coping. In the model, loss-oriented coping included dimensions of traditional grief theories, such as rumination about the deceased, focusing on the lost relationship, yearning, looking at photos, and crying about death. Restoration-oriented coping was characterized by focusing on secondary consequences of loss, such as identity change, reorganization of life without the deceased, mastering new skills, and distracting attention from the grief. Stroebe and Schut's important contribution was highlighting oscillations between loss and restoration orientations. They defined the need to taking time off from grief. This need automatically involves in the coping process. For instance, one's attention is inevitably distracted from grief to focus on life by reading, talking, or watching something. From time to time, bereaved individuals need to have a break from their sorrow. This need is a healthy reflection rather than a problematic avoidance of the loss. The flexible nature of the model defined healthy oscillations between the coping types which distinguished it from classic models (Stroebe & Schut, 1999).

The Dual Process Model of Coping has certain similar aspects with the current model in terms of being flexible and acknowledging movements between different coping and mourning types. Content of loss-oriented coping and restoration-oriented coping was also mentioned in the present model. Two types of coping and oscillations between them resemble the Mourning Through Action type. However, the psychological dynamics of lifeless mourning and muted or forbidden mourning were

quite different from the Dual Process Model. In other words, both avoidance and experience of grief was defined as a state in the Dual Process Model, which was the case for many bereaved individuals with mourning through action. However, for some people, avoidance or intense experience of loss-related factors were more dominant traits rather than being transient episodes. Depending on the power and pervasiveness of guilt, some parents could not move between different coping patterns as easily. According to the current model, guilt accounted for the difficulty and possibility of moving between grief and avoidance states, which would be an important contribution to contemporary grief theories.

It is important to emphasize that the social constructivist epistemology shaped the findings of the present study as well. According to assumptions of social constructivism, grief is a social phenomenon that cannot be understood by focusing solely on individual dynamics (Neimeyer et al., 2014). Culture shapes beliefs and values, which in turn affects the emotional expressions of bereaved individuals. There is no inherent emotional expression without the influence of belief and value systems (Averill & Nunley, 2003). In the current study, the role of religion and predefined "appropriate" expressions of emotions were observed too. Moreover, in line with the constructivist idea about reality being a social construction, certain aspects of interview process were taken into account. The research interview created an environment in which the reality of loss was reconstructed in the participants' narratives. Since the topic was the death of their child, the interview itself produced intense grief-related emotions. For instance, a parent lost her child 50 years ago, yet the intensity of emotional pain was quite fresh during the interview. It is pretty important to keep in mind that the research context produces an environment that intensifies emotions and memories. Therefore, Türkan said persistently that nothing helped her to feel better, whole life lost its meaning and joy. However, when she was answering other questions, it was observed that she had plenty of pleasant memories after the death of her child. Nevertheless, when asked directly about the healing process, she could not accept feeling any better since the research topic reminded her grief and guilt. Thus, it is essential to consider beyond the words by looking at own feelings and observations as a researcher by keeping the context created by the research topic or asked questions in mind. Additionally, the role of religion, culture and social support, as mentioned in the previous sections, was in line with the social

constructivist perspectives highlighting the consideration of both individual and social dynamics and their interaction.

Lastly, a model having quite similar definitions of the three mourning types is important to mention. In that study, three bereavement patterns which were similar to the types found in the present study were identified (Barrera et al., 2007); Integrated Grief, Consumed by Grief, and Minimal Grief. Integrated grief referred to a balance between grief reactions and daily activities. These parents tended to control grief reaction's intensity, reframe the loss positively, and focus on everyday life. Consumed by grief referred to overwhelming pain about loss and the memories with the deceased child. These parents searched for places triggering their grief and felt lonely in their grief. Minimal grief was characterized by the absence of emotional expression of grief, reflecting a restricted range of affect and carrying on daily routines as if no change happened (Barrera et al., 2007). As mentioned, there is a substantial similarity between the defined characteristics of these three patterns and the bereavement styles obtained from the present study Nevertheless, the model proposed by Barrera and colleagues only defined the experiences without focusing on underlying reasons accounting for these bereavement pattern differences. The model obtained from the present study, on the other hand, provided an essential explanation for the differences among bereaved parents through parental guilt experience.

As it can be inferred, the findings of the current study were mostly in line with contemporary theories. Many theories defined what happens to bereaved people in detail; however, they did not identify underlying dynamics among different mourning styles. This study provided a critical explanation to account for differences in mourning types.

4.6. Clinical and Social Implications

Various aspects of parental mourning can have many clinical and social implications. The model that emerged from the results of the present study can guide therapeutic processes with bereaved parents. It is important to note that this kind of loss and accepting such a painful reality is anything but easy. Therefore, anyone should respect parents' pace if they have trouble accepting the loss or forming new life routines after the death of their child. For this reason, initial support provided by psychotherapists

or other professionals should include respecting personal needs and type of mourning. After a while, if the mourning process influences daily functioning significantly, a therapist and parent may work together to identify emotional obstacles to move on with their own life

Depending on the nature of death, parents may need guidance and support (Tedeschi & Calhoun, 2005). Especially parents with a history of child's hospitalization in pre-loss period, need and expect support from hospital staff to prepare themselves for the death (Decinque et al., 2006). On the other hand, some parents do not want to hear about possibility of death before losing their child. There is no single or predetermined need of bereaved parents, on the contrary, there are substantial variations among parents. Therefore, any support targeting parents should include subjective needs and conditions of the parents. The current study provided a model defining three different types of mourning styles and specific needs of parents which would have some clinical implications in formation of support interventions. For example, if a parent seems to be avoiding mourning, the therapist may try to understand avoidance-related factors. In any case, a psychotherapist can pursue excess or non-existence of guilt. As mentioned several times, guilt has a central position in parental mourning, whether it is apparent or not (Li et al., 2014). The essential requirement of understanding parental guilt dynamics was mentioned in many studies (Duncan & Cacciatore, 2015; Li et al., 2014). The current study identified detailed picture of parental guilt and blame tendencies which can be a useful information for clinical practices. Stating differently, psychotherapists or health-care professionals are suggested to explore and intervene parental guilt whether it is clear or hidden. Owning whole responsibility and "guilt" could be as hard as not even approaching guilt. In any case, a specialist can try to understand and work through guilt by respecting their personal path of mourning.

In addition to individual psychotherapy, group therapy would be a good option to support bereaved parents. For some parents, it was really hard to feel understood by a person who did not experience such a significant loss (Tedeschi & Calhoun, 2005). Therefore, they need other bereaved parents to share their experiences and feel understood. In this way, they may overcome feelings of alienation, loneliness, and isolation. Whether a parent assumes to be understood only by other bereaved parents or not, many parents who lost a child would benefit from a semi-structured interaction

group therapy focusing on guilt, life after the death of the child, relationship with partner and surviving children, and any other topic that is essential in their lives. Communication, observation and mutual support between the group members would support the mourning process significantly, because sharing their own experience help parents to cope and legitimize the loss (Becvar, 2003).

Self-help groups such as The Compassionate Friends would be a great way to provide systematic support for bereaved parents (Toller, 2011). There are no self-help groups or guidance targeting the bereaved parents in Turkey. Establishing of such organizations to provide advice, help, and connection between bereaved parents would be an outstanding service. As mentioned, these parents become more altruistic and prosocial after losing a child. By becoming a part of such an organization, they can both receive and provide support for others and helping others would also help in coping with their own loss.

Considering social implications, the role of people who support bereaved parents was enormous (Toller, 2011). Any organization targeting bereaved parents can also target the people supporting the bereaved parents. As suggested before, supporting and standing nearby the grieving parent can be consuming for these people. Also, not exactly knowing how to approach them would be an additional burden. Therefore, such organizations providing friends and relatives with guidance and forming support groups for them would be very accommodating and helpful. Similarly, psychoeducation programs or written information targeting those people near the bereaved parent would provide substantial assistance to those people. Also, understanding the mourning process and being informed about the possible needs of the bereaved parent, they can support the parents easier. In this regard, friends and relatives can help bereaved parents through normalization, invitation to life, and reminding responsibilities. These functions were arguably the most vital aspects of social support. Some parents feel incredibly guilty, isolated and alien that normalization and inviting to join life could function as a life vest. These attempts of acquaintances would be a savior, particularly for parents with lifeless mourning who were entangled with guilt and gave up a normal life. Yet, normalization, reminding responsibilities and inviting for activities could help parents with any three types of mourning.

On the other hand, normalization should not involve comparing the sorrow of bereaved parents with "worse" types of losses. Some parents may appreciate such comparisons because the assurance of his or her condition is not the worst experience in the world by others may soothe the pain, isolation, and alienation. Yet, especially for types of death, such as miscarriage, stillbirth, or newborn death, there was a greater tendency of supporting people to compare the loss with other cases of a child's death. Some friends and relatives would be impatient while providing support. These individuals may adopt quick and early consolation efforts by suggesting having another baby or cheering up the parent prematurely. Such efforts may convey disrespect, undervaluation of their sorrow, and degradation of their child/baby for some parents. Thus, it is crucial to differentiate between normalization and comparison of the parents' condition. Avoiding such comparisons in most cases would be beneficial unless the parent needs to hear that his or her condition is not the worst in the world.

During the initial phases of mourning, parents go through intense and complicated emotions. In general, daily functioning, self-care, care for others, appetite, and physical strength diminishes considerably. Parents tend to sincerely appreciate the assistance provided by friends and relatives during the first weeks or months after the death of their child. The duration of needed practical support depends on the type of mourning. Parents with lifeless mourning may expect and require assistance longer than parents with mourning through action or muted-forbidden mourning. Therefore, considering and attuning to subjective experiences and needs of parents would be important. If he or she needs to stay alone, providing some space is as important as standing nearby to support. Some parents find peace during collective prayer events, while others may feel worse after attending a Mevlut for his or her child. There is no single type of support that fits anyone. Especially during the first months, letting the bereaved parents grieve the way they want is vital.

Furthermore, almost with no exception, these parents adopted prosocial and altruistic behaviors after their child's death. Sometimes, helping others would be the only reason to get out of the house or take care of worldly issues. It can be speculated that the underlying guilt would be one of the reasons for these tendencies, yet this would be a limited perspective. Surviving this incredible pain and adopting prosocial behaviors

should be appreciated and facilitated. People around the bereaved parents may consider these parents' need to help others and encourage such behavior.

In summary, in depth exploration of guilt may have both clinical and research based implications. The lack of agreed definition and measures of guilt led a need for more studies about the nature of guilt (Duncan & Cacciatore, 2015; Li et al., 2014). This study may contribute to existing knowledge and be a baseline for the prospect studies, especially in Turkey. Moreover, taken into account altruistic needs of bereaved parents, their mourning would be transformed by means of organizations that they can share, help, support and be supported. Similar organizations or easily available information for the people around the bereaved parents can provide essential help for both bereaved and supporting people, because lack of knowledge leads despair, need to avoid the bereaved or blaming the victim to externalize their own fears of losing a child or a significant person. Therefore, interventions targeting both the bereaved individual and also the immediate social environment would be very beneficial.

4.7. Strengths, Limitations of the Study and Suggestions for Future Studies

Constructivist Grounded Theory methodology can be considered as one of the most important strengths of this study, because it provided freedom for the researcher to explore and ensured in-depth contact with the participants. Starting with the first moment, the researcher (I) kept a diary about observations and own feelings and wrote memos, which enhanced the analysis process. The inductive nature of the CGT enabled deep insider information so that the researcher could identify unspoken and culture-related parts of parental grief. The research questions were selected by analyzing written parental experiences regarding loss of a child. Analyzing parents' experiences, understanding their sorrow, strengths, and needs by focusing on their written words was crucial for this study. Comprehensive questions about parental experiences emerged by utilizing the inductions. Those questions focused not only on sorrow or loss but also social support, religious beliefs, surviving children, relationship with the partner, child's memories, home and grave of the child, changes in self, and some other questions that emerged during the interview or analysis process. The scope of the interview questions was an essential contribution to the related literature since

taking unique needs and conditions into account in the formation of the theoretical model increased the strength of the model and its experience-near nature.

The literature review was conducted at the end of the study to protect the research process from a possible impact of previous knowledge. It should be noted that as a clinical psychologist, the researcher could not possibly be exempt from some knowledge about the mourning process. Still, conducting the literature review after the interviews and analyses enabled the researcher to freely observe the experiences without knowing up-to-date findings or theoretical models about mourning or parental mourning. This was a personal choice, because Kathy Charmaz did not suggest such a strategy, assuming that whether literature is reviewed or not, a researcher would be knowledgeable about the research topic. Therefore, she underlined the importance of reflexivity and consideration of possible impacts of previous knowledge on the current study (Charmaz & Thornberg, 2020).

Throughout the research, many ideas occurred and disappeared as the analyses were conducted again and again. Starting with line-by-line coding, continuing with the analysis through back-and-forth movements and focusing on parents' words repeatedly prevented the researcher from assuming something that was not a part of parents' experiences. Also, repeated exposure to the words and voices of the parents prevented the researcher from assuming a superficial approach to the material and enabled a deeper understanding. Additionally, diversity in terms of the manner of death, age of parent, age of the child, time passed after death, having an extra child or not was another strength of the methodology. Comparison between parental reactions, stories, wordings, feelings, and researcher's feelings during interviews enabled exploring or being curious about shared and unique patterns among parents. This was the key to the theoretical model creation. Three types of parental mourning emerged by focusing on every aspect of parents' experiences, whether they were unique or shared by others. CGT enabled respecting differences and similarities by highlighting what was happening between the individuals in that interview context. The researcher did not have to prove or find more parents for an experience to show a pattern was repetitive and shared by many people. Any dimension of parental mourning was considered and articulated. Thus, "outliers" were treated as a major source of information by knowing that whether it was common or not, these were real feelings, experiences, struggles

and changes of real people. The flexible but, at the same time, systematic guidance of CGT methodology was a strength of this study.

Considering the related literature in Turkey, there are some studies about the influences of a child's death on parents. These studies were conducted within the fields of nursing, psychiatry, sociology, and psychology (Düzen, 2016; Köksal, 2018; Yıldırım, 2003). Except for the studies conducted with martyrs' mothers (Gedik, 2008; Sancar, 2001), all of them were about the death of a prenatal (Candan, 2012; Keten et al., 2015; Öngay, 2019; Tanacıoğlu, 2019 or a newborn baby (Yıldırım, 2003; Yıldız & Cimete, 2017). The scope of the existing studies was also limited to certain aspects of parental experiences, such as PTSD (Keten et al., 2015), stress level (Öngay, 2019), the effect of a Grief Support Program on grief intensity (Yıldız & Cimete, 2017), effects of nursing care after a miscarriage on parental depression (Candan, 2012), the social influences of being martyr's mother (Gedik, 2008), and the effects of having an extra child and social support on coping (Tanacıoğlu, 2019). In short, all the studies conducted with bereaved parents in Turkey were about miscarriage or a baby's death. In some of these studies, only the mothers were selected as participants (Düzen, 2016; Gedik, 2008; Köksal, 2018; Öngay, 2019; Sancar, 2001). Therefore, there was a substantial need for studies in the psychology field about parental mourning, especially the losses of children of different ages. Also, culture-specific aspects, the role of social support, the experiences of fathers, subjective dynamics of parental mourning were the areas that required more investigation. The current study was the first research with a broad scope, including many aspects of the parental mourning process. In addition to the personal sides of the grief, this study included social dimensions of parental mourning, parental needs during and after the funeral, helping and damaging sides of social support, and the role of religion. Moreover, the theoretical model suggested novel conceptualizations that were grounded in parental experiences. These can also be considered an important contribution to the existing literature in Turkey and also in other countries.

Regarding the current study's limitations, the majority of participants were living in big cities and finding more people from small towns and rural areas would have provided crucial information about parental mourning. Because what death means in city life may not be the same in a small village where the graveyard is located at the

heart of the settlement and death is more visible in people's lives. Exploring parent's relationship with death and its influences on the mourning process in rural areas did not happen because the Covid-19 pandemic occurred during the research process and disabled mobility or in-person contact with the parents in rural areas. In addition, parents with religious beliefs other than Islam were not included in the research as much. Especially atheist, agnostic, or theist parents' experiences and coping patterns after the child's death would have provided prominent information. New dimensions and different types of parental mourning could have been identified by conducting conceptual comparisons among parents with different beliefs.

Moreover, ethnic minority participants were limited in number. Considering their hardships due to their ethnic identity, exposure to trauma and political or social losses, inclusion of their experiences would have enriched the study findings. Also, throughout the interviews, sexual life after the child's death was not explored enough due to several reasons. Some parents just talked about changes in sexual life after the loss with ease, but others seemed to experience so much sorrow that the researcher (I) hesitated and avoided asking about changes in sexuality. Also, in Turkey, talking about the sexual part of private life can be considered taboo to some degree. Therefore, in some of the interviews, I sensed that asking questions about sexual life would have embarrassed the parents. Yet, hesitation to ask might be an indication regarding the importance of the topic. Thus, not having enough information about this topic is another limitation of the current study. Lastly, the theory construction process required the abstraction of the observed phenomenon. Some observations were not included in the theoretical model to ensure clarity and lucidity. If each case could be reported, richer and more detailed information would have been acquired. Thus, it may also be assumed as a minor limitation.

Considering future directions about this topic, increased diversity in SES, religious belief, place of residence such as city, village or county, marital status of the parents could be aimed. Additional information could be discovered if the researcher had the chance to interview more parents from different cities and religious beliefs. Also, the deaths of children during the Covid-19 pandemic were accompanied by forced isolation, being devoid of social support and funeral rituals. Interviewing bereaved parents during the pandemic might provide important information about different

dimensions of parental mourning under the complicated circumstances of the pandemic. Exploring possible different attitudes and needs of parents due to the increased prevalence of death, heightened daily exposure of illness, and witnessing death can provide some valuable information. Moreover, observing a parent or a couple longitudinally, seeing their mourning and coping process starting with the first moment for years after the loss would be very informative and comprehensive. It would be pretty hard to conduct such a study or find participants accepting such a long commitment; however, it would be fruitful. Another area for future studies would be searching for the changes in the sexual relationship between bereaved couples. During the interviews, I observed a tendency that fathers avoided returning to the previous routine in sexual life. There were factors about some mothers wanting to have another baby quickly and factors about fathers feeling guilty about the sexual act which ended up with the death of a child. It is a pretty subtle and unclear observation; still, sexual life after the loss would be another critical topic to be studied. Finally, siblings' mourning process and feelings, in general, were neglected by both parents and researchers. However, they go through a complex and intense mourning process in which they lose a sibling and a part of their parents. Therefore, it would be essential and valuable to explore the silent scream of siblings of the deceased children.

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APPENDICES

A. SEMI-STRUCTURED INTERVIEW QUESTIONS

Aile Geçmişiniz (Çocukluğunuzun geçtiği aile ortamı)

1. Nasıl bir ailede büyüdünüz?
2. Aile üyeleri ile ilişkileriniz geçmişte ve şimdilerde nasıl?
3. Daha önce yakın olduğunuz birileri öldü mü? Hayatınız boyunca sizi etkileyen nasıl kayıplar yaşadınız?
4. *Anneniz düşük veya çocuk kaybı yaşamış mı? Size anlatılır mıydı?*
5. Aileyi etkilediğini düşündüğünüz ne gibi kayıp ya da zorlu yaşantılar (taşınma, ölüm, göç, travma gibi) olmuştur?
6. *Çocukluğunuzda geleceğe dair nasıl hayaller kurdunuz?*
7. *Ergenlik süreciniz nasıl geçmişti? Büyümenin sizin için en zor tarafları nelerdi?*

Evlatla kurulan ilişki

1. Çocuğunuz nasıl biridir?
2. Çocuğunuzla nasıl bir ilişkiniz vardı?
    a. Nasıl paylaşımlarınız olurdu?
    b. Birbirinizden ayrı kalınca nasıl hissederdiniz?
    c. Farklı yerlerdeyken görüşme sıklığınız neydi?
3. Doğumu planlı mıydı?
4. Doğacağını duyduğunuz andan itibaren sizin için hangi anlamlara geldi evladınız?
5. Onun geleceği için neler hayal ettiniz?

Kayıp Süreci

1. Kayıp nasıl yaşandı?
2. Nasıl haber aldınız?
3. Habere ilk tepkiniz ne oldu? O duyguyla ne yaptınız? Nasıl yatıştınız?
4. Vefatından sonraki işlemlerini kim yürüttü? Nasıl hissettirdi? O sırada yoğun duygu yaşatan neler oldu?
5. Kaybın ardından iştah, uyku gibi bedensel ihtiyaçlarınız nasıl etkilendi? Etkilendiyse düzeldi mi ya da ne kadar zaman sonra düzeldi?
6. *Kayıp anı ve sonrasına dair hafızanız nasıl etkilendi? İlk anda yaşananları hatırlamakta zorlandığınız oldu mu yoksa her şeyi fazlaca detaylı mı hatırlıyorsunuz?*
7. *Çocuğunuzun sosyal medya hesabı var mıydı? Kapatmayı mı açık tutmayı mı tercih ettiniz? Sizi nasıl etkiledi?*

Yasın bireysel tarafları? Yasın Yaşanma Şekli

1. Hayatınızda neler değişti? Neler eksildi? Neler eklendi?
2. Kişiliğinizde, tepkilerinizde, duygularınızda ve duygularınızı aktarım biçiminizde ne gibi değişimler oldu?
3. *Dövmenizi kayıptan önce mi sonra mı yaptırdınız? Dövmenin varlığı sizi duygusal olarak nasıl etkiliyor?*
4. *Çocuğunuzla ölümünden sonra yakın hissettiğiniz, sanki iletişim kuruyormuş gibi bağlantı kurduğunuzu hissettiğiniz oldu mu?*
5. Rüyalarınız nasıl etkilendi, süreçte rüyalarınızda neler gördünüz? Aklınızda kalan ve sizi etkileyen rüyalarınız ya da düşleriniz oldu mu?
6. Kayıptan sonra aklınızda dönüp duran neler oldu? Sizi yorsa da kaçamadığınız, sürekli aklınıza gelen şeyler var mıydı?
    a. Aklınızda dönüp duran anılar var mı?
7. Bu süreçte neler hissettiniz?
8. Yaşadığınız yası nasıl görüyorsunuz? Hayatınızı ne şekillerde etkiliyor? Ne zaman bittiğini ya da biteceğini düşünüyorsunuz?
9. *Çocuğunuzun yapmayı sevdiği aktivite, sevdiği eşyalar ve yemekler sizi nasıl etkiledi? Kaçındınız mı daha mı yaklaştınız?*
10. *Çocuğunuzun sevdiği bir şeyi daha önceden yapmazken kayıptan sonra yapmaya başladınız mı?*
11. Sakladığınız eşyalar ya da evladınızı hatırlatan, onunla bağ kuruyormuş gibi hissettiren şeyler var mı?
12. Pişmanlıklarınız, kendinizi suçladığınız durumlar oldu mu kaybın öncesi ve sonrasına dair?
13. Mezarı nerede? Mezarının nasıl olacağıyla ilgili kararı kimler verdi? Mezarı nasıl? Mezarına ne sıklıkla gidiyorsunuz? Mezar taşına yazı ya da çevresine (ağaç çiçek gibi) bir şeyler yaptınız mı? Bunları yapıp yapmamak sizi nasıl etkiliyor?
14. Çocuğunuzu şu an nerede ve nasıl hayal ediyorsunuz? Nerede ve nasıl olduğunu düşünüyorsunuz?
15. Özel günler ve yıldönümleri ne hissettiriyor? Böyle zamanlarda ne yapıyorsunuz?
16. *İlk yıl dönümü diğerlerinden farklı mı?*
17. *Dava sürecinde neler yaşadınız? Dava sürecinde yaşananlar yasınızı nasıl etkiliyor?*
18. *Aynı kazada yakınını kaybeden diğer kişilerle bir arada olmak sizi nasıl etkiliyor? İyi gelen ve zorlayan tarafları var mı?*
19. *Kayıp sürecinde sizi en çok inciten durum, kişi, olay nedir?*
20. *Tekrar çocuk sahibi olmak ya da hiç olmamak gibi düşünceleriniz oldu mu?*
21. *Kayıp sonrası önemli bir araba kazası, maddi kayıp, işten çıkma, sağlık sorunu, taşınma gibi yaşantılar oldu mu? Şu kadar zaman içinde hiç trafik kazası yaşadınız mı? Ne gibi sağlık sorunlarınız oldu?*
22. *Sonraki kayıplara bakış; en ağırını yaşamış olma, hayattaki çoğu şeyin üzmemesi gibi bir etki yapıyor mu? Yoksa daha kırılgan mı hissediyorsunuz sonraki acılara?*
23. *Başka insanların üzüntülerinin hafif gelmesi, küçük şeylere üzülen insanlara sinirlenme gibi yaşantılarınız oldu mu?*

24. *Evladını kaybetmiş anne/baba gibi yeni bir kimlik kuruluyor mu? Bu kimlik hayatınızı nasıl etkiliyor?*

Eş ve diğer çocuklarla İlişkiler

1. Eşiniz ile nasıl tanıştınız? Evlenme ve boşanma sürecinizden bahseder misiniz? Bu süreçlerde sizi etkileyen önemli bir anınız var mı?
2. Yas tutarken eşinizin duygusal olarak nasıl etkileri olmuştur? Yasınızı kolaylaştıran ya da zorlaştıran etkisi oldu mu?
3. Suçladığınız, kızdığınız, özlediğiniz, yanınızda olsun istediğiniz ya da başka bir his hissettiğiniz oldu mu?

Çevrenin Etkisi ve Çevreden Beklentiler

1. Süreçte kimlerden destek aldınız? Neler iyi geldi?
2. Yakın çevrenizde sizi hayal kırıklığına uğratan şeyler oldu mu?
3. İnsanlar sizi nasıl, ne şekilde teselli etmeye çalıştılar? Neler dediler? Bunların içinde iyi veya kötü gelenler?
4. Yakınlarınızla ilişkiniz nasıl etkilendi?
5. *Başka çocuklarla ilişkiniz nasıl etkilendi?*
6. *Çocuğunuzun arkadaşlarıyla ilişkiniz nasıl etkilendi?*
7. *Çevrenizden aldığınız desteğin yoğunluğu ve biçiminde zaman içinde değişiklikler oldu mu? Bu durum sizi nasıl etkiledi?*
8. Çalışma sonunda anne babalara destekleyici bir metin oluşturacağım. Bu metinde yakın çevrenin nasıl etkilediğini ve ne yapmalarının daha iyi geldiğini içeren bir bölüm de olacak. Bu açıdan değerlendirince size yas sürecinde en iyi ve en kötü gelen tesellileri paylaşır mısınız? Kayıp yaşamış anne-babalara yaklaşımlarında yakın çevreye nasıl önerileriniz olur?
9. Bazen ebeveyni üzmemek için yakın çevrenin konuyu değiştirme, anmamaya çalışma ve annenin anmasını da engelleme gibi bir eğilimi olabiliyor. Böyle bir durum yaşadınız mı? Yaşadıysanız sizi nasıl etkiledi? Çevrenizdeki kişilerin çocuğunuzu anması ya da az anması sizi nasıl etkiliyor?

Baş etme, iyi ve kötü gelenler?

1. Nelerden güç alıyorsunuz/aldınız? Bu süreçte size iyi gelen neler oldu? Zaman içinde iyi gelen şeyler değişti mi? Bir şeylerin iyi gelmesi nasıl hissettirdi?
2. Bu süreçte kötü gelen neler oldu? Bunların etkisi ne oldu? Bunlardan kendinizi koruyabildiniz mi? Bunun için ne yaptınız?
3. Baş edebilmek için neler yaptınız?
4. Psikolojik destek aldınız mı? Aldıysanız; iyi gelen ve gelmeyen tarafları nelerdir?
5. *Evlat kaybetmiş başka anne ve babalarla görüşüyor musunuz? Onlara destek vermek ya da onlardan destek almak nasıl etkiliyor? Kayıp yaşamamış insanlardan gelen destekten daha farklı bir etkisi oluyor mu?*
6. *Dava sürecinde tanık olduğunuz haksızlık ve hukuksuzluklar nasıl etkiledi? Güçlendiren bir yanı da oldu mu buradan doğan öfkenin?*
7. *Sosyal medya üzerinden nasıl tepkiler alıyorsunuz? İyi ve kötü hissettiren neler oluyor?*

- *Görüşme için iletişim kurduğumda nasıl hissettiniz?*
- *Görüşmeyi kabul etme nedeniniz nedir? Bir yandan anlatmak istememe hisleriniz de oldu mu?*
- *Görüşme için iletişime geçtiğim sıralarda aklınızda kalan bir rüya gördünüz mü?*
- *Tüm bu sorulara yanıt vermek sizi nasıl etkiledi?*

*The questions written in italic format were included later, based on acquired information during the interviews.

B. APPROVAL OF THE METU HUMAN SUBJECTS ETHICS COMMITTEE

UYGULAMALI ETİK ARAŞTIRMA MERKEZİ
APPLIED ETHICS RESEARCH CENTER

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ORTA DOĞU TEKNİK ÜNİVERSİTESİ
MIDDLE EAST TECHNICAL UNIVERSITY

Sayı: 28620816 /145

26 MART 2019

Konu: Değerlendirme Sonucu

Gönderen: ODTÜ İnsan Araştırmaları Etik Kurulu (İAEK)

İlgi: İnsan Araştırmaları Etik Kurulu Başvurusu

Sayın Doç.Dr. Deniz Canel ÇINARBAŞ

Danışmanlığını yaptığınız **Gökçen BULUT'un "Evlat Kaybının Ardından Ebeveynlerin Yas Deneyimleri ve Değişimleri"** başlıklı araştırması İnsan Araştırmaları Etik Kurulu tarafından uygun görülmüş ve **134-ODTÜ-2019** protokol numarası ile onaylanmıştır.

Saygılarımızla bilgilerinize sunarız

Prof. Dr. Tülin GENÇÖZ
Başkan

Prof. Dr. Ayhan SOL
Üye

Prof. Dr. Ayhan Gürbüz DEMİR
Üye

Prof. Dr. Yaşar KONDAKÇI
Üye

Doç. Dr. Emre SELÇUK
Üye

Doç. Dr. Pınar KAYGAN
Üye

Dr. Öğr. Üyesi Ali Emre TURGUT
Üye

C. INFORMED CONSENT FORM

ARAŞTIRMAYA GÖNÜLLÜ KATILIM FORMU

Bu araştırma, ODTÜ Psikoloji Bölümü Doktora öğrencisi Gökçen Bulut tarafından, Doç. Dr. Deniz Canel Çınarbaş danışmanlığındaki Doktora tezi kapsamında yürütülmektedir. Bu form sizi araştırma koşulları hakkında bilgilendirmek için hazırlanmıştır.

Çalışmanın Amacı Nedir?

Araştırmanın amacı, evlat kaybı yaşamış ebeveynlerin yas deneyimlerini kapsamlı bir şekilde anlamaktır. Bu bağlamda, kayıptan sonra ebeveynlerin hayatlarında nelerin değiştiği, yas sürecinden hayatlarının ne şekilde etkilendiği, süreçte nelerin iyi gelip gelmediği boyutlarının anlaşılmaya çalışılacağı görüşme ya da görüşmeler yürütülecektir.

Bize Nasıl Yardımcı Olmanızı İsteyeceğiz?

Araştırmaya katılmayı kabul ederseniz, kayıp ve yas deneyiminizi paylaşmak istediğiniz boyutlarıyla aktaracağınız ve araştırmacının sorularını yönelteceği bir veya daha çok görüşmeye katılmanız istenecektir. Görüşme süresi değişken olmakla birlikte yaklaşık olarak 1,5 -2 saat sürmesi beklenmektedir. Cevaplarınızın daha sonra yazıya dökülüp analizinin yapılabilmesi için görüşmeler sırasında ses kaydı alınacaktır.

Sizden Topladığımız Bilgileri Nasıl Kullanacağız?

Araştırmaya katılımınız tamamen gönüllülük temelinde olmalıdır. Cevaplarınızın bazı bölümleri, kimlik bilgileriniz tamamıyla gizli tutularak, bilimsel yayınlarda kullanılabilecektir. Ayrıca çalışma sonrasında hazırlanması planlanan evlat kaybının duygusal etkileri ve yas sürecine yönelik kitapçık, sizlerden edinilen bilgiler ışığında hazırlanacaktır.

Katılımınızla ilgili bilmeniz gerekenler:

Görüşmeler duygusal olarak yoğun geçebilir. Böyle zamanlarda durmak, size iyi geleceğini hissettiğiniz farklı bir konudan konuşmak, herhangi bir soruyu yanıtlamamak, görüşmeyi ertelemek veya çalışmaya katılmaktan vazgeçmekte serbestsiniz. Böyle bir durumda sadece belirtmeniz yeterli olacaktır.

Araştırmayla ilgili daha fazla bilgi almak isterseniz:

Bu çalışmaya katıldığınız için şimdiden teşekkür ederiz. Çalışma hakkında daha fazla bilgi almak için Psikoloji Bölümü doktora öğrencisi Gökçen Bulut (E-posta: gkcnbulut@gmail.com) ile iletişim kurabilirsiniz.

Yukarıdaki bilgileri okudum ve bu çalışmaya tamamen gönüllü olarak katılıyorum.

(Formu doldurup imzaladıktan sonra uygulayıcıya geri veriniz).

İsim Soyad Tarih İmza

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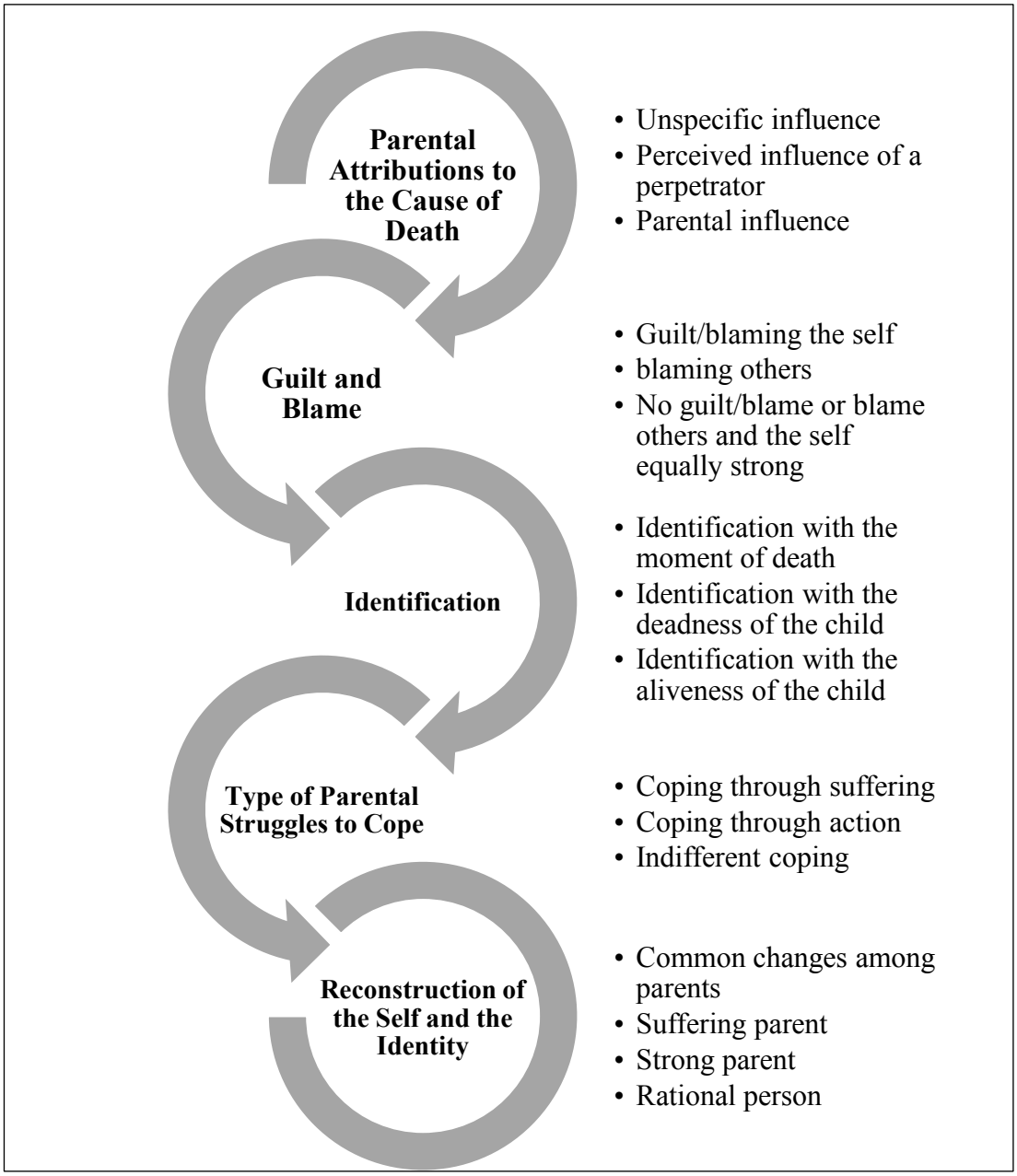
D. FIGURE OF THEORETICAL CATEGORIES



E. SAMPLE CODING

7	B: Tamam teşekkür ederim. Nasıl oldu kayıp?	
8		Ölümün gerçekleştiği yerden bahsederken zorlanma; zor söyleme. O
9	C: Valla biz izne çıkmıştık, Nahit amcan. Şeye gittik, köye gidelim dedik	mekandan ve anmaktan kaçınma
10	teyzesine, tatile; orada hastalandı çocuk. Kuşpalazı oldu, difteri.	
11	Aşıları falan olmuştu ama... Orada ateşlendi falan, böyle bir terlemeler	Aşılara vurgu yapması suçluluk ve yatışmayla ilgili olabilir mi?
12	oldu. Ondan sonra, İzmir'e getirdik biz bunu hastaneye. İşte, çok çabuk	
13	yani, anid|en. Çabucak, işte ertesi gün çocuk vefat etti.	Çabuk ve ani kayıp, şaşkınlığın hala sürmesi; yası zorlaştırması
14		
15	B: Başınız sağ olsun.	
16		
17	C: Sağ ol. Böyle oldu yani, orada mikrop mu kaptı, köyde ne oldu	Köyü ve eşini suçlama; anlatırken sesteki bıkkın ve suçlayıcı ton.
18	bilmiyorum yani (Bıkkın ve suçlayıcı). Böyle, çok acı bir olay	
19		
20	B: Kaçıncı çocuğunuzdu? (böyle derken ben de bunu sormuşum, onun	
21	akışı durmadan sormamam iyi olur)	
22		
23	C: hhıı?	
24		
25	B: İlk çocuğunuz muydu, kaçıncı?	Ölen evladı tanımlarken yaşayan evlatlarda olmayanı vurgulama. Kız olması,
26		yaşasa evlenecek olması. Yaşayanların yapamadıklarını onun yapacağı atfı
27	C: İkinci, ikinci. Kızdı. Öyle işte.	
28		
29	B: Kaç aylıktı?	
30		

Gökçen Bulut
Köyden bahsederken bile bir zorlanma yaşıyor olabilir mi, adını söylerken bile.
Ölüm yeri, ölüm, cenaze, mezar, gömmek gibi evlat yitimini ve öldüğünü çağrıştıran kelime ve anlatımlarda zorlanma – hayata eklenenler?

Gökçen Bulut
Şaşkınlık, sesi yükseldi.

Gökçen Bulut 13 Haziran 2019
C teyze daha depresif fakat N amca öfkeli yaşıyor duygularını, isyan gibi bir üzüntü. Kızgın görünüyor acısından bahsettiği anlar. Bir de kendi kaçınma ihtiyacı varken eşi üzülmesin diye konuyu değiştirdiğinden bahsetti ama aslında eşi konuşmak istiyor gibi de.

Teselli konusunda N amca da annenin acısının başka olduğunu söylüyor, onu üzmememek için çabalamış. Canan Teyze N amcayı teselli ettiğini hatırlamıyor. Babaya düşen böyle bir rol de var mı başka ailelerde de? Yoksa N amca özelinde tutulamayan anne yası, anneme doyamadım durumu mu bu kaçınmaya neden olan. Ayrıca N amca konuşmaktan kaçınsa da mezarına sık sık gidiyor, mezar için bir şeyler yaptırıyormuş. Edilgen bir anma ve acı çekmedense etken bir çaba daha mı iyi geliyor? C teyze 40 yıldır mezarına gitmemiş.

Bir de evlat kaybı konuşulurken kaçınılmaz olarak diğer kayıplar da canlanıyor, bir şekilde onların bahsi de açılıyor.

F. CURRICULUM VITAE

PERSONAL INFORMATION

Surname, Name: Bulut, Gökçen

EDUCATION

Degree	Institution	Year of Graduation
MS	METU Psychology	2015
BS	METU Sociology (Double Major)	2014
BS	METU Psychology	2013

WORK EXPERIENCE

Year	Place	Enrollment
2018- Present	Ankara Hacı Bayram Veli University, Department of Psychology	Research Assistant
2020- Present	Ankara Hacı Bayram Veli University, Psychotherapy and Research Center	Clinical Psychologist
2014-2018	Middle East Technical University, Department of Psychology	Research Assistant
2014-2018	AYNA Clinical Psychology Unit, Department of Psychology, METU	Clinical Psychologist
2017-2019	AYNA Clinical Psychology Unit, Department of Psychology, METU	Supervisor
2018-2020	Child Protection Center of Gazi University Hospital	Volunteered Psychotherapist
2013	Department of Psychiatry at METU Medical Centre	Intern Psychotherapist

PUBLICATIONS

Bulut, G. (2020). Doğum Travması. E. Bekaroğlu (Ed.) in *Anne Babalığa Psikolojik Bakış*. Nobel Akademik Yayıncılık.

PRESENTATIONS

Demirbas H, Gokdemir B.P, **Bulut G**. Exposure to sibling abuse and abusing siblings: The moderator role of traumatic life events. 3rd International Conference on Social Sciences and Education Research. Rome-Italy,27-29 April 2017.

Demirbas H**, Bulut G**, Gokdemir B.P. Childhood abuse, suicide probability and anger. 3rd International Conference on Social Sciences and Education Research. Rome-Italy,27-29 April 2017.

TEACHING EXPERIENCES

- Clinical Psychology, Assoc. Prof. Dr. Deniz Canel Çınarbaş (Fall, 2016; Fall, 2017)- Teaching Assistant (METU)
- Cultural Issues in Psychotherapy, Assoc. Prof. Dr. Deniz Canel Çınarbaş (Spring, 2015)- Teaching Assistant (METU)
- Psychopathology, Assoc. Prof. Dr. Deniz Canel Çınarbaş (Spring, 2017; Spring, 2018)- Teaching Assistant (METU)

AWARDS & SCHOLARSHIPS

2015-2019	TUBITAK National Scholarship Program for PhD Students
2013-2015	TUBITAK National Scholarship Program for MSc Students
2009-2013	METU Dean's High Honor List
2008-2013	TUBITAK National Scholarship Program for Undergraduate Students

G. TURKISH SUMMARY / TÜRKÇE ÖZET

GİRİŞ

1.1. Ölümle Kurulan İlişki

İnsan ölür. Sevdikleri ölür. İnsan buna tanıklık eder. Ve insan bu bilgiyle yaşamak zorundadır. Tarihin bilinen ilk edebi eserinde (Gılgamış, 2100 B. C.) yankı bulan bu duygu ve ölümü aşma ihtiyacı, insan olmanın özünde kaçınılmaz bir yere sahiptir. Ölüm, insanın ifade bulan tüm yansımalarında, tarih boyunca kendini belli etmiştir. Varoluşun nihai sonu ve bilinmez olması açısından, yalnızca bilgelerin değil yaşayan her bilincin meselesi olmuştur (Frazer, 1927/2020). Ölümden kaçamayacağı bilinci içinde yaşamaya mahkûm insan, çeşitli çıkış yolları aramıştır. Bu arayışlar ve bulunanlar neticesinde ölüm, ölüm sonrası insanı neyin beklediği ve ölümle kurulan ilişki tarih boyunca ve toplumlara göre şekil değiştirmiştir (Aries, 1975/2015).

Bu metin kapsamında ölümün ve kaybın en yakıcı ve aykırı hissedilen hali olan evladın ölümünün anne ve babalara ne yaptığı, kayıptan sonra hayatlarında nelerin değiştiği anlaşılmaya çalışılmıştır. İlk insanlardan bu yana taşıdığımız refleks; ölüme inanmama (Frazer, 1927/2020) ki aslında inanamama, aklın sınırlarını zorlaması hali, yasın bu türünü çalışırken kaçınılmaz olarak araştırmacıyı da etkisi altına aldı. Öleceğiz, herkes ölecek, yani öleceğiz… Sevdiğimiz herkes ve her şey yok olacak. Bu bilgiyle nasıl sevebilir insan? Nasıl güvende hisseder? Bu bilgiyle nasıl yaşanır? Tüm bu soruların vardığı noktada hep böyle miydi sorusu ortaya çıktı. İnsan hep öldü ama hep böyle mi öldü? Ölüm hatta evlat ölümü çok daha yaygın olduğu dönemlerde yine bu kadar yıkıcı ve düşman mıydı?

Ölüm, insanın doğa karşısındaki zayıflığının da etkisiyle, ilk insandan beri en temel meselelerden biri olmuştur. İlk insanlar ölümün insanın doğasında olmadığına ve gerçekleşen her ölümde doğaüstü kötü güçlerin parmağı olduğuna, onlar olmasa aslında insanın ölümsüz olduğuna inanmışlardır (Frazer, 1927/2020). Ancak zaman

içinde ölüm giderek ehlileşmiş, hayatın içine karışan ve bir ölçüde kabul gören bir konuma yerleşmiştir (Aries, 1975/2015). Bu ehlileşmede; insanın ölümsüz olduğu inancının kırılması, ölümden sonra yaşamın sürdüğü inancının gelişmesi ve ölümün kaçınılmaz olarak her evde yaygın bir şekilde yer bulmasının etkisi olduğu düşünülebilir. Bu etkilerle, Orta Çağ Avrupası'nda ölüm, yenilmesi gereken bir düşman olmaktan çıkıp kabul gören ve sonraki yaşama başlangıç olarak beklenen bir durum haline gelmiştir. Bu dönemde, ölen insan da tanık olan yakınları da kederli bir kabul gösterme eğilimindedir. Fakat bir zaman sonra inanç sistemlerinin tartışmaya açılması, sanayi gelişmeleri ve insanın doğaya mahkumiyetinin azalmasıyla birlikte ölümle ilişki yeniden değişim geçirmiştir (Aries, 1975/2015). Günümüzde ölüm oranlarının düşmesi, tıp ve teknoloji alanındaki gelişmeler, doğa ile bağın hafiflemesi gibi etkiler sonucu ölüm yeniden düşman, göz önünde yaşanmaması ve unutulması gereken, hatta neredeyse yasaklanan bir hale gelmiştir. Artık insanlar ölmekte olan yakınlarına büyük oranda tanık olmuyor, hastanenin yoğun bakım servislerinde uzmanlar ölüme eşlik ediyor (Aries, 1975/2015). Dolayısıyla ölüm belki ilk insanların hissettiğine yakın bir düzeyde yabancı ve yok sayılan bir noktaya geliyor. Bu nedenle, kaçınılmaz olarak yaşandığında da tahrip gücü, ölümü hayatın içinde var eden Orta Çağ insanının deneyimlediğinden daha büyük oluyor. Ölüm azaldıkça etkisi çoğalıyor.

Ölüm günümüz insanı için zaten yoğun bir meseleyken, insan çoğu zaman ölümlülüğünü bile unuturken evlat kaybının giderek daha yabancı, imkânsız ve olmaması gereken bir deneyim haline gelmesini anlamak hiç de zor değildir. Ölümle ilişkinin doğasından bağımsız olarak da evlat kaybı hemen her toplumda kederlerin ve kayıpların en büyüğü olarak nitelendirilmektedir (Paykel, Prusoff, & Uhlenhuth, 1971). Öyle ki, konuyla ilgili yürütülen çoğu akademik araştırmanın ilk cümlesi bu kaybın en zor kayıp olduğunu belirtme eğilimindedir. Bu kayıpla nasıl ilişki kurulacağı kültürden kültüre ve dönemden döneme değişiklik göstermiştir (Miller, 1999; Riches & Dawson, 2000; Schiffman, 2020).

1.2. Kültür, Din ve Evlat Kaybı

Ölüm ve kayıp ancak içinde bulunduğu koşullar ile birlikte tam olarak anlamlandırılabilir. Elbette, ölüm ve yas deyince herkesin belli çağrışımları olur ancak bu çağrışımların pek çoğunun kişinin içinde bulunduğu kültür ve inanç sisteminden

izler taşıması muhtemeldir. Önceki bölümde belirtildiği gibi toplum yapısı ve inanç sistemlerinin ölümün nasıl anlamlandırılacağına ve ölümle nasıl ilişki kurulacağına önemli etkileri vardır (Riches & Dawson, 2000; Volkan & Zintl, 2016). Ölüm ve kayıpla kurulan ilişki ve bu deneyimi yaşarken nasıl anlam bulunacağı büyük oranda içinde yaşanılan kültürün etkisindedir (Riches & Dawson, 2000; Schiffman, 2020).

Kültürel normlar hayatın pek çok alanında olduğu gibi yas konusunda da kabul edilebilir ve kabul edilemez tepkileri ve duyguları tanımlar (Rosenblatt, 1988). Tam da bu nedenle normal ve normal olmayan yas tepkileri kültürden kültüre farklılıklar gösterir (Stroebe & Schut, 1998). Bunların yanı sıra, kültür ve din aynı zamanda ölüm sonrası pratikleri, ölü ile nasıl vedalaşılacağını ve bedenine ne yapılacağını, ölüm sonrası seremonileri, ölü kişinin nasıl anılacağı, özel günlerde ne yapılacağı gibi pek çok alanda etkili olarak bu pratiklerin büyük oranda kültüre has şekillenmesine neden olur (Shuchter & Zisook, 2003). Belli inanç ve pratiklerde kültürlerarası ortaklıklar olabilmekle birlikte (Parkes, Laungani, & Young, 1997), bu çalışmanın da temel aldığı sosyal yapısalcılık görüşü; yasın da bireysel olduğu kadar toplumsal olduğu ve kişinin duygusal tepkilerinin olaya eşlik eden verili bir gerçeklik olmaktan çok kültürel kodlarla etkileşim halinde inşa edildiğini savunur (Averill & Nunley, 2003).

Kültürel kodlar yalnızca duruma eşlik eden hisleri ve uygulanan pratikleri belirlemekle sınırlı değildir. İnanç ve ritüeller, kayıp yaşayan kişinin bu deneyimde bir anlam bulmasına da yardımcı olur (Neimeyer, 2002). Kişinin yaşadığı kaybı anlamlandırmasında ve başa çıkmasında, dini inanç ve ritüellerin önemli bir etkisi olduğu yönünde araştırmalar mevcuttur (Benore & Park, 2004; de Vries, Davis, Wortman & Lehman, 1997; Doka, 2002; Horowitz, Bonanno & Hole, 1993; Parkes, Laungani, and Young, 1997). Ancak bazı durumlarda, kişinin öznel deneyimi beklenti ve normlarla uyuşmadığında, yatıştırıcı etkisinden çok yas tutan kişilerin üzerine yük oluşturabildiği durumlar da vardır (Aksöz-Efe, Erdur-Baker, & Servaty-Seib; 2018). Dolayısıyla, yası ve yasın seyrini anlamak için hem kültürel hem de öznel dinamikleri göz önünde bulundurmak gerekir. Öznellik ile kültür arasındaki ayrımın keskinleşmesi belki kültürün birey yaşamı üzerindeki etkisinin azalması ile birlikte de düşünülebilir (Parkes, Laungani, & Young, 1997) ancak bu etki zayıflaması ve gelenekleri bırakma her kültürde eşit bir şekilde yaşanmamaktadır (Bağcaz, 2017). Bu sebeple yine belirtmek gerekir ki bir yası anlamak için hem bireysel hem sosyal hem de kültürel ve

dini boyutlarını anlamak önemlidir ve her kayıp ve kayba verilen tepki kendi koşulları içinde değerlendirilmelidir (Bonanno et al., 2005; Klass, 2014; Lalande & Bonanno, 2006). Örneğin, Çin'deki Karma inanışına göre, önceki yaşamında çok kötü olan kişilerin, şimdiki hayatlarında cezaların en büyüğü olan evlat kaybıyla cezalandırıldıkları ve dolayısıyla evladı ölen anne ve babaların büyük bir toplumsal baskıyla karşılaştıkları; bu durumun da yaslarını ne kadar zorlaştırdığı aktarılmıştır (Zheng et al., 2017). Ek olarak, Çin'deki tek çocuk politikasının da evlat kaybı durumunda tek çocuğunu yitiren ebeveyn için farklı olumsuz etkileri olduğunu vurgulayan çalışmalar vardır (Fu et al., 2018).

1.3 Evlat Kaybının Ebeveynler Üzerine Etkileri

Beklendik olsun veya olmasın (Rando, 1983), bir evladın ölümü anne baba için en travmatik deneyim olarak kabul edilmektedir (Floyd ve diğerleri, 2013; Rando, 1986; Rosenblatt, 2001). Çünkü bir ebeveyn için çocuğunun ölümü, ölümün muhtemel olduğu durumlarda bile beklenemez (Schiffman, 2020). Bu nedenle, yaslı anne babaların hemen hepsi bu acı verici gerçeği kabul etmede sorun yaşarlar (Wheeler, 2001). Bu yıkıcı yaşam deneyimine maruz kaldıklarında, ebeveynlerin tüm yaşamı çocuklarının ölümünden etkilenir. Bu kayıp, ebeveynlerin dünyaya olan temel güvenini ve yaşam üzerindeki kontrol duygusunu tahrip eder (Schiffman, 2020). Bir çocuğun kaybından sonraki yas, seyri ve yoğunluğu bakımından diğerlerinden farklıdır. Diğer kayıp türleri ile karşılaştırıldığında (eş, kardeş veya ebeveyn), evlat kaybının en zor ve en yıkıcı olarak deneyimlendiği bulunmuştur (Gamino, Sewell ve Easterling, 2000; Sanders, 1980).

Ebeveynler evlat kaybının ardından yasın acısı ve hayata yüklenen anlamların sarsılmasından doğan kriz durumları arasında dalgalanan bir deneyim yaşarlar (Kastenbaum, 2018; Wheeler, 2001). Kaybın kendisi fazlasıyla yıkıcı bir deneyimken, ebeveynin içinde bulunduğu koşullar ek yükler de getirebilir. Bu bağlamda, ölüm şekli (kaza, intihar, cinayet, hastalık, ani veya beklenmedik) (Lichtenthal, Neimeyer, Currier, Roberts, & Jordan, 2013), ölen evladın yaşı (Keesee, Currier, & Neimeyer, 2008; Kreicbergs, Valdimarsdottir, Onelöv, Henter, & Steineck, 2004), geçmişteki çözümlenmemiş yaslar (Rando, 1983, Volkan & Zintl, 2018), evlada yüklenen anlam ve gelecek tasvirleri (Volkan & Zintl, 2018), sağ evlatların varlığı (Alam, Barrera,

D'Agostino, Nicholas, & Schneiderman, 2012), eşle ilişki dinamikleri (Barrera et al., 2009; Bergstraesseri :Inglin, Hornung, & Landolt, 2015) ve sosyal destek kaynakları (Laakso & Paunonen-Ilmonen, 2002) evlat kaybının yas sürecine dahil olan ve etkileyen durumlardır.

Beklenildiği üzere, ebeveynler evlatlarını kaybettikten sonra pek çok fiziksel, sosyal, psikolojik ve varoluşsal sancılar yaşayabilirler (Gilmer et al., 2012; Price & Jones, 2015; Rosenberg et al., 2012). Çeşitli araştırmaların sonuçlarına göre; fiziksel ve psikolojik iyi olma halinde azalma (Stroebe, Schut, & Finkenauer, 2013), uzun süren depresif belirtiler (Koocher, 1994; Rogers et al., 2008), yoğun öfke, keder, üzüntü, suçluluk, suçlama, yalnızlık ve kontrol kaybı hisleri (Braun & Berg, 1994; Gilmer et al., 2012; Miles & Demi, 1992; Riches & Dawson, 2000), kötü bir şeylerin tekrar olacağı yönündeki düşünce ve evladın ölümüne dair rahatsızlık veren görüntülerin akla bir anda gelmesi durumlarıyla mücadele (Dyregrov & Dyregrov, 1999), önceki sosyal hayattan kaçınma (Prigerson et al., 2008), iş hayatında değişimler (Gilmer et al., 2012), fiziksel yakınmalarda artış (Rogers, Floyd, Seltzer, Greenberg, & Hong, 2008), intihar riskinde artış (Qin & Mortensen, 2003) ve ölüm oranlarında artış gibi değişimler ebeveyn yas süreci ile bağlantılı bulunmuştur.

Özetle, bir ebeveyn için çocuğun ölümü, tüm anlamların, ilişkilerin, kimlik oluşumlarının ve yaşam amaçlarının yeniden yapılandırılması gereken çok karmaşık ve acılı bir süreçtir. Yaslı anne-babanın çocuğunun ölümünden sonraki yaşamı yeniden inşa etme mücadelesinin, bireye özgü birçok incitici ve güçlendirici yönü vardır. Bu nedenle yas sürecinde ebeveynlerin aynı yoldan gideceğini düşünmek yanıltıcı olabilir. Bunun yerine, tüm kolaylaştırıcı veya zorlayıcı dinamikler, ebeveynin öznel bağlamında düşünülmelidir. Bu araştırma kapsamında evlat kaybı yaşayan ebeveynlerin deneyimlerinin, hayatlarındaki değişimlerin ve baş etme mücadelelerinin kapsamlı bir şekilde anlaşılması ve edinilen bilgileri içeren bir teorik model sunulması hedeflenmektedir.

YÖNTEM

2.1. Metodolojik Zemin

Evlat kaybının yas deneyiminin anlaşılmaya çalışıldığı bu araştırmada Yapısalcı Gömülü Teori (YGT) metodolojisi tercih edilmiştir. Bu tercihin felsefi ve yöntemsel olmak üzere çeşitli nedenleri vardır. Metodoloji, metottan farklı olarak yalnızca bir yöntemi belirlemekle kalmaz, aynı zamanda araştırmanın yürütüleceği felsefi zemini de tanımlar. Bu bağlamda, adında da belirtildiği gibi YGT yapısalcı epistemolojiye sahip bir metodolojidir (Charmaz, 2006; Denzin & Lincoln, 2011; Ponterotto, 2005). Yapısalcılık; kendinden menkul, objektif ve tek bir doğru gerçeğin olduğu görüşüne karşı çıkar ve gerçekliğin etkileşim anında ve ortam koşullarına bağlı olarak inşa edildiğini savunur (Ponterotto, 2005). Pozitivist yaklaşımlardan farklı olarak yapısalcılık öznelliğin aşılamayacağını ve dahası aşılması gerekmediğini belirtir. Bu sayede, öznellik dışlanan, yok sayılması ve kontrol edilmesi gereken bir şey olmaktan çıkıp araştırmanın doğasını oluşturan, bilginin oluşmasına neden olan bir şey olarak kabul edilir (Charmaz, 2014; Denzin & Lincoln, 2011; Ponterotto, 2005).

2.2. Yapısalcı Gömülü Teori

Yapısalcı Gömülü Teori, temellerini Sosyoloji ve Kültürel Antropoloji alanındaki çalışmalardan alan önemli araştırma yöntemi Gömülü Teori'den türemiş bir metodolojidir (Kenny ve Fourie, 2014). Bilim felsefesi, bilgiye ulaşma yöntemi, araştırmacı ve katılımcı arasındaki ilişkiyi tanımlama biçimi gibi yönlerden Gömülü Teoriden farklılaşan Yapısalcı Gömülü Teori metodolojisi Kathy Charmaz tarafından geliştirilmiştir (Kenny & Fourie, 2014; Mills, Bonner ve Frances, 2006). Yapısalcı Gömülü Teori, adının belirttiği üzere, yapısalcı bir epistemolojiye sahiptir; dolayısıyla objektif, genel-geçer bir bilginin varlığından ziyade herhangi bir bilginin iki öznelliğin karşılaştığı ve etkileşim halinde olduğu alanda üretildiğini savunur (Charmaz, 2014). Yöntemin temel amacı, kişilerin deneyimlerinin okunaklı bir teorik resmini oluşturmaktır (Mills, Bonner ve Frances, 2006).

Felsefi temelinin yanı sıra bu konunun YGT ile araştırılmasının belli nedenleri vardır. Yas genelinde ve evlat kaybı özelinde kişiler oldukça çeşitli ve kendilerine has bir deneyim yaşarlar (Volkan, 2001; Volkan & Zintl, 2018). Kayıp haberi hatta bazen

kayıp gerçekleşmeden önce başlayabilen yas sürecinde pek çok karmaşık ve karşılıklı etkileşim halinde faktör devrededir. Yas gibi bireysel olduğu kadar toplumsal da olan bu deneyimde hem öznel koşullar (ebeveynin yaşı, ölen evladın yaşı, kurulan ilişki, eşle ilişki, eşin yası ile kendisinin yasının benzerlik ve farklılıklarının etkisi, başka çocuklarının olup olmaması, geçmiş kayıplar vb.) hem de bu koşulların içinde şekillendiği çevresel/kültürel unsurların (dini inanç, gelenek, geniş aile bağları, ekonomik ve siyasi koşullar vb.) bir bütün halinde anlaşılması, ancak pozitivist konumlanışı olmayan nitel çalışmalarla mümkün olmuştur (Davies, 2004). Farklı nitel araştırma metot ve metodolojilerinden de yapısalcı epistemolojiyi benimseyenler vardır ancak YGT deneyimlerdeki çeşitliliği araması; yazılı, görsel veya etkileşimle edinilen farklı kaynakların araştırmaya dahil olabilmesi; tümevarım odaklı olması ve doğrudan edinilen tüm bilginin veriye dayandırılması, araştırma öncesi literatür bilgisinin edinilmemesi yönündeki tavsiyesi ve memo yazımı aracılığıyla araştırmacını öznelliğinin hem farkına varması, süreçteki etkisini gözetmesi hem de veriyi aktarırken kendi öznelliğini katılımcıların söylemlerine dayatmasını engelleyebilmesi açısından tercih edilmiştir.

2.3. Katılımcılar ve Örnekleme Yöntemi

YGT'nin hedefi araştırarak parçası olunan deneyimi kapsamlı ve anlaşır bir teori haline dönüştürerek aktarmaktır (Charmaz, 2014). Yaşanan deneyimin kim tarafından hangi koşullarda yaşandığı, etkisi ve sonuçları üzerinde belirleyici bir role sahip olduğu fikriyle birlikte YGT'de olabildiğince heterojen bir örneklem hedeflenmektedir. Birbirinden farklılaşan deneyimlerin ortak ve farklı yönlerinin karşılaştırılması sayesinde aynı yaşantının farklı öznelliklerdeki etkisini içeren kapsamlı bir algı edinilebilmektedir (Charmaz, 2014). Bir sonraki katılımcının kim olacağı ya da özellikleri önceki görüşmelerde oluşan sorulara veya teorik ihtiyaca göre belirlenir ve bu yönteme teorik örnekleme adı verilir (Charmaz, 2014). Araştırma kapsamında, yaş, inanç, kaybın üzerinden geçen zaman, kayıp türü gibi pek çok konuda farklı özelliklere sahip 27 ebeveynin yas deneyimi incelenmiştir.

2.4. İşlem

Araştırmanın etik onayı ODTÜ-İnsan Araştırmaları Etik Kurulu'ndan alınmıştır. Görüşme sorularının evlat kaybı yaşayan yaslı ebeveynlerin deneyimlerinden yola

çıkarak belirlenmesi hedeflenmiş ve görüşmelerde sorulacak soruların saptanması için evlat kaybı sonrası yazılmış kitap, kişisel blog yazıları, evlat kaybeden şairlerin şiirleri, ebeveynlerin röportajlarının yer aldığı Youtube videoları ve Ekşi Sözlük "evlat acısı" başlığında yer alan tüm içerikler kodlanarak, ilk görüşmede sorulması muhtemel sorular belirlenmiştir. Belirlenen sorularla yürütülen görüşmeler yarı yapılandırılmıştır ve süreç içerisinde gelen cevaplara göre hem sorular hem de görüşme tarzında değişiklikler olmuştur.

Görüşmelerde gizlilik ilkesine bağlı kalınarak ses kaydı alınacağının ve edinilen bilgilerin akademik yayınlarda kimlik bilgileri gizli tutularak yayınlanacağının belirtildiği onam formu katılımcılara sunulmuştur. Araştırma sürecinde görüşmeler ve analizler paralel olarak yürütülmüştür. Yapılan görüşmenin ardından ses kaydı yazılı hale getirilmiş ve ilgili analizler yürütülmüştür. Analizler sırasında oluşan yeni sorular sonraki katılımcılara sorulmak ya da analizler sırasında düşünülmek üzere kaydedilmiştir. Araştırmanın her aşamasına eşlik edecek şekilde araştırma günlüğü tutulmuştur. Memo adı verilen bu kayıtlar sayesinde hem araştırmacı kendi öznelliğinin, süreçten nasıl etkilendiğinin, süreci nasıl etkilediğinin farkına varma şansına sahip olmuş hem de katılımcıların kendi söylemleri ve diğer katılımcılarının deneyimleri ile benzerlik ve farklılık yönünden karşılaştırılması sürecinin takip etmek üzere yazılı bir kaynak oluşturulmuştur (Charmaz, 2014). Hem görüşmecinin hisleri hem de karşılaştırmaların, soruların notlar da analizin parçası olmuştur.

Teorik ihtiyaca göre belirlenen katılımcılarla yapılan görüşmeler sonunda kategorilerin teorik zemini sağlam bir hale geldiğinde, yani gelen bilgiler yeni bir soru oluşturmadığında ya da teori tarafından kapsanamayan bir boyut kalmadığında araştırma doygunluğa ulaşmış kabul edilir ve görüşmeler sonlandırılır (Charmaz, 2014). Değinilen hususlar kapsamında yürütülen araştırmada teorik bir çerçeve kurulup bu çerçevenin içine sığmayan, eksik kalan yeni bilginin gelmediği gözlendiğinde görüşmeler sonlandırılmıştır. Araştırma boyunca yapılan görüşmelerin sonunda, araştırmacı tarafından hazırlanan yas sürecinin anlatıldığı destekleyici bir kitapçık ebeveynlere verilmiştir. Yalnızca 1 katılımcının psikolojik destek arayışı olmuştur ve gerekli yönlendirme yapılmıştır.

2.5. Veri Analizi

Deşifre edilen görüşme kayıtları, Gömülü Teori'nin belirttiği kodlamalarla tekrar tekrar kodlanarak temel teorik kategoriler belirlenmiştir. Kodlama yöntemi metodoloji tarafından belirlendiği üzere 4 basamakta gerçekleşmiştir; ilk kodlama, odaklanmış kodlama, eksenel kodlama ve teorik kodlama (Charmaz, 2006). Deşifreden sonra yazılı veriyle ilk temas, karşılaşılacak her bilgiye açık bir şekilde, verilerin ne dediği anlaşılmaya çalışılarak her satırın kodlanmasıyla kurulur. Bu aşamada, veriye sıkı bir bağlılık ve yeni fikirlerin yeşermesine olanak tanıyacak açık fikirlilik gereklidir. Kodlamalar yapılırken görüşme içindeki ifadeler hem birbirleriyle hem de başka katılımcıların ifadeleri ile karşılaştırılarak benzerlikler ve farklılıklar keşfedilir. İlk kodlamada edinilen analitik gözlemler rehberliğinde, ikinci aşama olan odaklanmış kodlamaya başlanır. Odaklanmış kodlamada daha büyük veri bölümleri sentezlenmeye ve açıklanmaya çalışılır. Son olarak, farklı ana kategorilerin birbirleriyle ilişkilerinin belirlendiği teorik kodlamalara geçilir. Teorik kodlamalar bütünleyicidir ve yürütülen analizlerin ahenkli ve tutarlı bir hikayesini oluşturur. Ayrıca bu aşama, hikayedeki ve bağlantılardaki olası eksiklerin fark edilmesine olanak sağlar ve bu sayede hem önceki analiz aşamalarına dönüp yeniden analiz yürütülmesi hem de takip edecek görüşmelerde bu boyutların yeni sorularla anlaşılmaya çalışılması mümkün hale gelir (Charmaz, 2006). Çalışmanın her aşamasında yazılan memolar aracılığıyla analiz ve gözlemler derinleştirilir. Araştırmanın sonunda, oluşturulan analitik kategorilerin birbirleri ile ilişkileri kurulur ve deneyimi görünen ve gizli taraflarıyla açıklayan anlaşılır ve veriye gömülü bir teori oluşturulur (Charmaz, 2006).

2.6. Trustworthiness

Nitel araştırmalarda, araştırmacının öznelliğinin kabul edildiği ve kucaklandığı epistemolojiye sahip yöntemlerde dahi öznellik titiz yaklaşılması gereken bir durumdur. Nitel araştırmacı bilginin birlikte ve karşılıklı etkileşim anında üretildiğini savunduğu durumlarda kendi öznelliğini birlikte üretilen bir olgu gibi değerlendirme riskine sahiptir. Bununla birlikte öznelliği nitel, objektifliği nicel araştırmalarla eşleştirmek doğru değildir (Scriven, 1972). Her araştırmacının önyargıları vardır ve bunların da kaçınılmaz olarak sürece etkisi vardır (Morrow, 2005). Bu nedenle araştırma metodolojileri öznelliğin olumsuz sayılabilecek etkilerini düzenlemek için

çeşitli yöntemler geliştirmişlerdir. Bu araştırmada kullanılan YGT'nin tüm araştırma bulgularının tümevarım yöntemiyle veriden temel almasını vurgulaması, analizlerin 4 aşamada tekrar tekrar yürütülerek soyutlamaya kademeli olarak varılması, araştırma boyunca tutulan günlüğün araştırmacının kendi etkisini fark etmesini sağlaması gibi boyutları araştırmacının kendi gerçeğini veriye dayatması riskini ortadan kaldıran ve çalışmanın güvenirliğini destekleyen aşamalardır.

BULGULAR

Evlat kaybı yaşamış ebeveynlerin yas deneyimlerinin anlaşılmaya çalışıldığı araştırmada 5 kategori (Ebeveynin Ölüm Nedenine Atfı; Suçluluk ve Suçlama; Evlatla Kurulan Özdeşim; Baş Etme Şekli ve Kendiliğin ve Kimliğin Yeniden Yapılandırılması) ve ilgili alt kategoriler oluşturulmuştur. Kategori ve alt kategorilerin etkileşimlerinin aktarıldığı bir teorik model ortaya konmuştur. Bu bölümde, öncelikle katılımcıların içerisinde bulundukları dini, kültürel ve toplumsal bağlama yönelik bilgiler aktarıldıktan sonra teorik model tanımlanacaktır. Modelin tanıtılmasının ardından her bir kategori ilgili alıntılarla birlikte açıklanacaktır.

3.1. Teorik Model

Bu bölümde, araştırma sonucunda oluşturulan 5 kategori ve kategorilerin etkileşimini içeren Teorik Model tanıtılacaktır. Şekilde görüldüğü üzere, alt kategoriler ve aralarındaki etkileşimler, modelde belirtilen 3 farklı yas türünü (Cansız Yas, Etken Yas ve Susturulmuş/Yasaklanmış Yas) açıklamaktadır. Ancak modeli ve kategorileri açıklamadan önce, tanımlanan yas türlerinin doğrusal olmadığını ve her zaman birbirleri arasında etkileşime izin verdiğini belirtmek gerekir. Bir başka ifadeyle, bir ebeveyn tanımlanan 3 yas türünü de farklı zamanlarda ya da yaşamının farklı alanlarında deneyimleyebilir. Yani yas türleri, kişileri sınıflandırmaya yönelik değildir. Aksine evlat kaybı deneyiminin farklı boyutlarını ve eşlik eden psikolojik ve davranışsal yatkınlıkları aktarmaktadır. Ancak kaybın yaşanma şekli, ölen evladın ve ebeveynin yaşı, çevresel faktörler gibi etkenlere bağlı olarak, kişilerde belli bir yas türünün daha ön planda olma eğilimi gözlemlenmiştir.

Temel olarak bu farkı oluşturan ve seyrin nasıl olacağı üzerinde önemli bir etki; kaybın yaşanma şeklidir. Çünkü kaybın nasıl yaşandığı bu yasın çekirdeği olan suçluluk duygusunun nasıl bir form alacağını, gücünü ve etkisini önemli ölçüde belirler. Bir başka deyişle, bu yasın çekirdeğinde suçluluk vardır ve yas süreci de doğrudan suçluluğun boyutu, gerekçesi, gücü ve yöneldiği konuya bağlı olarak ebeveynin hayatının seyrini etkiler ve dönüştürür. Suçluluğun gücünde ise kaybın yaşanma şeklinin belirleyici bir etkisi vardır. Yine de belli bireysel faktörler (yaş ve suçun gerçekten var olup olmadığı) suçluluğun gücü üzerine yan ve oldukça kuvvetli bir etki sunabilmektedir. Bu bireysel faktörlerin farklılaşan etkilerine yeri geldikçe değinilecektir.

Evlat kaybetmek çaresizlik, özlem, pişmanlık, suçluluk, öfke gibi duyguları çok yoğun bir şekilde uyandıran sarsıcı bir kayıptır. Modelde suçluluk diğer tüm duygu ve eylemlerden sıyrılarak doğrudan veya örtük bir şekilde bu yasın merkezine yerleşmektedir. Suçluluğun merkezi konumu da ebeveynin diğer duyguları nasıl yaşayacağı ve kayıptan sonra yaşamının nasıl şekil alacağı konusunda belirleyici bir etkiye sahiptir. Bu durumun çeşitli nedenleri vardır. Her kayıpta belli bir ölçüde suçlama ve suçluluk hissedilebilir ancak evlat kaybı bağlamında bu hisler hem çok daha şiddetlidir hem de bırakması oldukça zordur. Suçluluğun evlat kaybı özelindeki bazı boyutları evlat kaybını geride bırakılması imkânsız bir hale getirir. Öncelikle, ebeveynler dünyaya getirdikleri bu canlının iyilik halinden kendilerini sorumlu hissederler ve bu his kayıp durumunda sanki evladını kurtarması gerekirken kurtarmamış gibi bir suç hissine neden olur. Ebeveynlerin pek çok söyleminde ve özellikle suç ortakları (yani ölen evladı dünyaya birlikte getirdiği kişi) olan eşlerine yönelttikleri suçlamalarda oldukça gözlenebilir bir haldedir. Bu hissin ebeveyne kurtarabilecekken kurtarmadığı düşüncesini ve yoğun bir suçluluk hissini yükleyebildiği görülmüştür. Elbette ortamda ölüme sebep olan somut bir ebeveyn suçu ya da bir başkasının suçu varsa bu duygu gölgede kalabilir. İkinci ve belki daha belirleyici neden ise ölümün gerçekleşmesi, evlat ölüyken yaşama devam etmenin suçluluğu ile bağlantılı olarak bu kayıpta iyileşmek, acı duyguları geride bırakmak, mutlu olmak çok daha büyük bir suçluluk kaynağı olabilir. Tam da bu nedenle yasın geçmemesi neredeyse baş etmenin bir koşulu haline gelebilir. Çünkü evladı unutmanın, tamamen iyileşmenin bir düzlemde evladı öldürmek gibi deneyimlenebildiği gözlemlenmiştir. Bu nedenle ömürleri oldukça bu acıyı taze

tutmak ebeveynler için çok daha ağır bir acıdan, evladı sembolik olarak öldürmenin suçluluğuna tercih edilen bir durumdur. Yine bu konuda da bireysel farklılıklar olabilmekle birlikte en rahat geride bırakan ve yas duygularına hiç izin vermeyen, tamamen mantık düzleminde yaklaşan kişiler bile bu acının hiçbir acıya benzemediğini ve evladın asla unutulmadığını söylemişlerdir. Araştırma bulgularının hepsinde istisnai öznel durumlar bulunmuştur ancak bu söylemde hiçbir istisna ile karşılaşılmamıştır. Bu açıdan suçluluk ya da suçlama, evladı anne ve babanın içinde canlı tutan, unutturmayan ve bu sayede evladı hayatta kılan/var eden acı bir işleve de sahiptir.

3.2. Cansız Yas

Cansız yas, yoğun suçluluk duyguları, evladın ölülüğü ile özdeşim kurma ve yaşamdan çekilme gibi özelliklerle karakterize bir yas türüdür. Bu yas türü, baskın duygunun suçluluk olduğu ebeveynlerde gözlenmiştir. Suçluluk hisleri yaşamın pek çok alanına sirayet ederek ebeveyni edilgen bir konumda bırakma eğilimindedir. Suçluluğun içeriğinde evlat ölmüşken yaşıyor olmak, evladın sanki kendi yerine öldüğü hisleri, yaşamdan, mutlu olmaktan, evladın acısını hafif ya da hissetmeme anlarından, diğer çocuklarına anne-baba olmaktan doğan yoğun suçluluk duyguları vardır. Bu duyguları yatıştırmaya yönelik çabalar ise; yaşamdan el etek çekme, canlılığa hizmet edecek sağlık arayışından bile kaçınma (doktora gidememe), yemek yerken, üşüdüğünde ve bunaldığında (evlat soğuk toprağın altındayken) bunlara tepki vermekten, bu ihtiyaçlarını yatıştırmaktan, mutlu hissetmekten uzak durma gibi durumları içerir. Bu anlamda, yaşamın hemen her alanına işleyen bir suçluluk tablosu söz konusudur. Bu suçluluğu hafifletmenin yaşamdan kaçınmadan farklı diğer yolları evi mabede çevirmek, her yeri ölen evladın büyük basılmış fotoğraflarıyla doldurmak, evladın odasını hayatta olduğu zamanki gibi olduğu şekliyle korumak, hiçbir eşyasını vermemek, odasını başkasının kullanmasına izin vermemek, çok sık ve uzun saatler süren mezar ziyaretlerinde huzur bulmak ve ancak orada mutlu hissetmeye izin vermek gibi eylemlerdir. Tüm bu eğilimlere bakıldığında; mutlu olmayan, iştahla yemek yemeyen, keyif almayan, sorunlarına çözüm aramayan ve mümkün olan çoğu vaktini mezarda geçiren ya da geçirmek isteyen kişi temsili bir ölülüğü tercih etmektedir. Evladının öldüğü yerde yaşamak öyle ıstırap doludur ki onunla birlikte bir ölü gibi yaşamak; evladının ölümü nedeniyle kendisinin de adeta ölen parçasına, evladın

ölüsünü yerleştirmek, yaşama devam etmenin bir yolu gibidir. Her ebeveyn bir ölçüde bu duygu ve davranışları sergileyebilir, ancak bu eğilimin çok yoğun ve yıllarca süren halleri, ölüm şeklinin travmatikliğinden gücünü alan suçluluğun formundan beslenmektedir. Ancak özellikle kaybın yaşandığı akut dönemde hemen her ebeveyn bu edilgen yas eğilimlerini gösterme ve hissetme yatkınlığındadır.

3.3. Etken Yas

Bu yas türü suçluluğa oranla suçlamanın baskın olduğu ebeveynlerde ve/veya dönemlerde gözlenmiştir. Etken Yas tanımlaması hem ebeveynlerin kayba verdikleri tepkiler ve sonrasında hayatlarındaki etken eğilimi içermektedir. Bu yas türündeki genel eğilim ve baş etme, evladın canlılığını kendi bedeninde yaşatma üzerindendir. Bu eğilimin gücü ve yöneleceği konular kaybın nasıl yaşandığından ve gerçek bir suçlunun olup olmamasından ya da kişinin deneyiminde suçlanacak kişilerin varlığından temel almaktadır. Böyle bir failin varlığında, evlat kaybında hissedilen yoğun suçluluk dönüştürülebilir ve kendinden uzaklaştırılabilir bir hâl alır. Buradan doğan canlılığa dair enerji, evladı öldüren nedenle hukuki ya da bireysel mücadeleye aktarılabilir. Bunun yanı sıra, evlat ölümünün ardından ebeveynin içinde açılan boşluk ya da temsili bir şekilde ölen tarafa evladın canlı hali yerleştirilir. Bu bilgi özdeşim kısmında ayrıntılı olarak aktarılacak olmakla birlikte bu yas çeşidinde ebeveynler hayata karışarak ve evladın yapmaktan hoşlandığı eylemleri gerçekleştirerek baş etme mücadelesi verirler. Dolayısıyla seyir ve gözlenen tutumlar açısından edilgen yastan oldukça farklıdır. Cansız yasta canlılık, evladın okluğunda onun sevdiği eylem, yiyecek, yer ve eşyalarla keyifli bir ilişki kurmak büyük bir suçluluk kaynağıyken, bu yas türünde evlatla temas kurmanın ve evladı kendi bedeninde yaşatmanın, var etmenin bir yöntemidir. Diğer bir farklılık ise ölüm hatırlatıcıları ile kurulan ilişkidedir ve belki bu açıdan yasaklanmış yas ile benzer tarafları olabilir. Etken şekilde yas tutan kişiler evladın ölümünü, yokluğunu vurgulayan durumlardan (mezar, evlattan kalan eşya, Mevlut gibi toplu yapılan dini pratikler) kaçınmaya ihtiyaç duyarlar. Bu ihtiyacın temelinde, ancak evladın ölümünü geride tutarak onu canlı kılmayı sağlamanın etkisi vardır. Bu hatırlatıcılara maruz kalınca, olağan zamandaki enerjik ve canlı hallerini korumak zorlaşır. Ancak mezardan kaçınmak belki de evladı terk etmek gibi hissettirebildiği için genelde bu kaçınmaya eşlik eden somut engeller ortaya koymaya ihtiyaç duyulduğu gözlemlenmiştir. Ebeveynlerden birinin tamamen yanlışlıkla şehrin

en uzak ve ulaşılması güç yerine mezarı yaptırması, bir başka ebeveynin torunları üzülür diye evladının mezarını bulunduğu şehirde istememesi, somut ve dış engellerin örneğidir.

Bu yas ve baş etme biçiminde ebeveyn neredeyse iki kişilik yaşamaya başlar, hayatın yarısı evlada dair hak mücadelesine veya evladın canlılığını sürdürmeye ayrılır. Bunun bir yansıması olarak evladın ölümünün ardından onun yaşarken hayatında büyük yer kaplayan aktivitelerin ebeveynlerin hayatına eklendiği gözlemlenmiştir. Sözgelimi, bir ebeveynde evladının ölümüne sebep olan sporu, onun öldüğü yerde yapmaya başlama ve yoğun şekilde devam ettirme durumu gözlenmiştir. Bu yas türünde diğer iki yas biçimi ile salınımlar söz konusudur. Canlılık ve etken konumun baskınlığı da gücünü ölüm nedenine bağlı suç'un büyüklüğünden alabilmektedir. Ölüm nedeni ne denli travmatik ve fail ne denli suçluysa ebeveyn çoğunlukla bu yas biçiminde konumlanma ve nadiren diğer yas türlerine salınma eğiliminde olabilir.

3.4. Susturulmuş/Yasaklanmış Yas

Bu yas formunun işaret ettiği davranışsal ve duygusal dinamiklerin temelinde acıdan, suçluluktan ve kayıp deneyiminin kendisinden uzaklaşma, mesafelenme ihtiyacı söz konusudur. Yine hem susturulmuş hem de yasaklanmış yasta hissedilen duygunun aşırılığı, yoğunluğu ve yoruculuğu sonucu yasa bir mola verilmesi veya tamamen yasaklanması söz konusudur. Susturulmuş/Yasaklanmış Yas için tek bir kelime seçilememe nedeni bu iki farklı deneyimi birbirinden ayrıştırma ihtiyacıdır. Belirtildiği üzere, her ebeveyn bu 3 yas çeşidi içinde salınabilir. Bu yas deneyimi özelinde, salınan kişilerin yatışma ve duygulardan uzaklaşarak nefes alma, bir nevi yasa mola verme ihtiyaçları ile başından itibaren yas tutamayan, yası adeta yasaklayan ebeveynlerin duygusal mesafeleri aynı değildir. İki durum, görüşte birbirine benzemekle birlikte alttaki dinamiklerdeki farklılık nedeniyle iki isim bu farklılığı işaretlemek adına tercih edilmiştir.

Yası susturan (susturma yerine durdurma kelimesi de düşünülmüştür ancak duygusal olarak mesafelendiklerinde bile yasları geri planda devam ettiği yalnızca duygusal erişimin hafiflediği bir deneyimini aktarmak için susturma kelimesi daha uygun bir karşılık olarak değerlendirilmiştir) eden ebeveynler diğer zamanlarda duyguları yaşamada sorun yaşamazken, yasaklayanlar pek çok duyguyu hayatlarının pek çok

alanının dışında tutma eğilimindedirler. Araştırma kapsamında bir çift ile yürütülen görüşmede, şaşırtıcı şekilde suçluluk ve suçlamaya asla yer açmadıkları, hatta diğer duyguların da çok az yer bulabildiği ve her olaya büyük bir rasyonellikle yaklaştıkları dikkat çekmiştir. Suçluluk ve suçlamanın izinin bile olmadığı bu görüşmede ben ebeveynleri ve ebeyi suçlarken buldum kendimi. Sonrasında üzerine düşününce, ihmallerinin evlatlarının ölümünde önemli bir etkisi olduğunun bir düzlemde farkında olan bu çiftin derinde hissettikleri suçluluk ve suçlamanın taşınamayacak bir düzeyde olabileceğini düşündüm. Bu nedenle, hayata devam etmenin bir koşulu olarak suçluluk ve suçlamayı ve bunun bir bedeli ve yansıması olarak pek çok duyguyu bedenlerinin dışına itme, hayatlarının içinde var etmeme mücadelesi vermektedirler. Bunu da hem rasyonel bir zihin hem de uzun süre yas tutmayı ve üzülmeyi yasaklayan dini kurallar aracılığıyla temin etmektedirler.

Özetle, bu yas biçiminde duygusal yaşantının ve yasın dondurulması, hissizlik ve duygusal kayıtsızlık hakimdir. Ebeveynlerin duygusal olarak yıpranma sonucu zaman zaman Susturulmuş/Yasaklanmış Yas eğilimi göstererek duyguları ile aralarına mesafe koymaları, doğal ve belki de sağlıklı bir ihtiyaçtır. Ancak sürekli burada duran ebeveynlerin katı ve kuru bir duygusal yaşantılarının olabildiği, dışta tutulmaya çalışan duyguların mücadelesinin bir sonucu olarak yaşama renk katan pek çok duygu ve esnekliğin de dışarıda tutulduğu gözlemlenmiştir. Ek olarak, tüm modelde ebeveynlerin 3 yas türü arasındaki salınımından bahsedilmektedir ancak bu yas türünün yasaklanmış tarafı için pek geçerli değildir. Suçlama ve suçluluk topyekûn dışarıda tutulduğu ve buna yoğun bir ihtiyaç duyulduğu için olası bir salınım dengeyi sarsıcı bir etkide olabilir. Salınım hafif düzeyde gerçekleşse bile bunu kendi içlerinde tutma ve dışarı yansıtmama, sözel olarak ifade etmeme eğiliminde olacakları yönünde kuvvetli bir beklentim de yine gözlemlerim (Yasaklayan ebeveynlerle yürütülen görüşmede duygulara işaret edebilecek her anda ve soruda hızlı bir kapatma ve mantıksal açıklamalar eşlik etti) sonucu oluşmuştur.

TARTIŞMA

Araştırma kapsamında, evladını kaybetmiş ebeveynlerle yürütülen kapsamlı görüşmeler sonucunda yasın farklı türlerini açıklayan bir teorik model sunulmuştur. Ölüme yönelik ebeveyn atıflarına ve suçluluk hissinin ebeveynin yasındaki konumuna bağlı olarak farklı bir seyir gösteren üç çeşit yas tanımlanmıştır. Bu bağlamda **Cansız Yas**; kayba ve kayıptan sonraki yaşama dair pek çok konuda ***kendini suçlama***, evladının ***ölülüğü ile özdeşim*** kurarak yaşayan bir ölü gibi olmayı seçme, acısını ve evladının yokluğunu vurgulayan ***acı çekerek baş etme*** ve sonunda ***acılı ebeveyn*** kimliğini inşa etme gibi eğilimlerin bir araya gelmesi sonucu oluşmuştur. **Etken Yas**, ölümü gerçekleşme nedeniyle ilgili ***başkalarını suçlama*** veya evladın kaybının ardından doğrudan oluşma eğiliminde olan suçluluk duygusunu başka kişi veya kurumlarla paylaşarak dışsallaştırabilme, ***evladın canlılığı ile özdeşim*** kurarak onu sembolik bir düzeyde kendi bedeninde yaşatmaya devam etme, ***eylem yoluyla baş etme*** ve bu büyük acıyla bile baş edip başkalarının yardımına da koşan ***güçlü ebeveyn*** kimliği eğilimlerinin yansıması olarak ortaya çıkmıştır. Son olarak, **Susturulmuş/Yasaklanmış Yas** tutan kişilerin ***suçluluk ve suçlamayı*** tamamen dışta bıraktıkları, baskın ve duygusal kaçınmanın bir sonucu olarak gözlenebilir bir ***özdeşim*** geliştirmedikleri ve bu kaçınma ve yok sayma ihtiyacının sonunda her şeyi ve özellikle duyguları fazlaca mantığa bürüyen bir ***mantıklı insan*** kimliğini geliştirdikleri gözlemlere bağlı olarak belirtilmiştir. Belirtilen yas tipleri ebeveynleri sınıflandırmaya yönelik bir girişim değildir. Her ebeveyn belli zamanlarda ya da belli konularda bu üç tip yas özelliklerini gösterebilir. Model bu anlamda dalgalanmalara yer açan bir esnekliği vurgulamakla birlikte, ebeveynlerde genel olarak bir yas çeşidinin baskın olduğu gözlemlenmiştir.

4.1. Suçluluğun Ebeveyn Yasındaki Temel Rolü

Araştırma kapsamında, suçluluk duygusunun ebeveyn yasının seyri üzerindeki en temel etkilerden biri olduğu gözlemlenmiştir. Suçluluk ve yas arasındaki bağlantı pek çok araştırmacı tarafından da işaret edilen bir durumdur (Arnold et al., 2008; Davis et al., 1995; Dyregrov & Dyregrov, 1999; Lindemann, 1944; Miles & Demi, 1992; Murphy, 1998; Wheeler, 2001). Bununla birlikte, bu bağlantı ve suçluluğun yas tutan kişilerdeki yaygınlığı konusunda çok değişken sonuçlar bildirilmiştir (Duncan &

Cacciatore, 2015; Li et al., 2014). Örneğin, yayınlanan bir inceleme makalesinde çeşitli çalışmalarda ebeveynler tarafından belirtilen suçluluk oranının %7 ila %90 arasında değiştiği belirtilmiştir (Li et al., 2014).

Suçluluk karmaşık ve tanımlanması zor bir duygudur (Gamino et al., 2000; Stroebe & Schut, 2001b). Yalnızca kendi içinde tanımlanabilecek bir duygu olmayıp kültürel normlar ve sosyal ortam koşullarından da doğrudan etkilenmekte, suçluluk uyandıran durumlar bu sosyal unsurlara bağlı olarak tanımlanmaktadır (Li et al., 2014). Bazı araştırmacılar, alanyazındaki bu değişken bulguların suçluluk konusunda mutabık olunan tanım ve ölçüm araçlarının bulunmamasından kaynaklandığını belirtmişlerdir (Li et al., 2014). Ancak yine de ölüm ve suçluluk arasındaki bağlantı pek çok kişi tarafından kabul edilmiştir (Duncan & Cacciatore, 2015; Li et al., 2014). Evlat kaybı özelinde ise suçluluğa odaklanan araştırmalar genelde intihar sonucu evladını yitiren ebeveynlere yönelmişlerdir (Bell et al., 2012; Tal et al., 2017). Mevcut çalışmalardaki temel nokta gerçek ölüm nedeni ve suçluluk arasındaki bağlantının araştırılmasıdır (Bell et al., 2012; Gamino et al., 2000; Miles & Demi, 1992; Stroebe & Schut, 2001b; Tal et al., 2017). Ancak bu araştırmada, asıl önemli olanın gerçeklikteki ölüm nedeninden ziyade ebeveynin ölüm nedenine yönelik atfı olduğu ve bu atfa bağlı olarak yasın seyrinin şekillendiği fark edilmiştir. Alanyazındaki karışık ve çelişen bulguları göz önünde bulundurunca, ebeveynin algısındaki ölüm nedenine bakılması da pek çok unsuru açıklamaya fayda sağlayacaktır. Sözgelimi, Halid Ziya kitap boyunca çocuğunun ölüm nedenini cinayet olarak tanımlamıştır. Gerçekteki ölüm nedeni intihar olmasına karşın babanın algısındaki ölüm nedeni yasın seyrini ve suçlulukla kurulan ilişkiyi doğrudan etkilemiştir.

4.2. Ebeveyn Yasını Etkileyen Önemli Faktörler

Teorik modelde belirtilen özdeşim kavramı, psikanalitik literatürde iyi bilinen bir kavramdır. Freud, özdeşimi önemli bir kişi ile kurulan duygusal bağın en erken yansıması olarak tanımlamıştır (Freud, 1922/2011). Kurulan özdeşimler aracılığıyla bebek ihtiyaç duyduğu işlevleri kendi içinde var etmeye başlar ve paradoksal bir biçimde kişi ile kurulan özdeşim arttıkça o kişiye duyulan yoğun ihtiyaç da azalır. Çünkü yetişmekte olan canlı bu özellikleri kendi içinde var ederek dışa bağımlılığını azaltır (Volkan & Zintl, 2018). Benzer bir dinamik sevilen bir kişinin kaybı ardından

da yaşanır. Yas tutan kişi, kaybettiği kişinin ihtiyaç duyulan özelliklerini özdeşim yoluyla kendi içine alır ve bu da yasın ve kederin çözümlenmesinde önemli bir yere sahiptir. Kişi yitirdikleriyle özdeşim kurabildikçe özgürleşir ve kederi dönüştürür (Volkan & Zintl, 2018). Bu araştırmada da özdeşimin rolü ve etkisi tanımlanmıştır. Ancak bu modelde, geçmiş kavramsallaştırmalardan farklı olarak özdeşim çeşitleri, bu farklı çeşitlerin suçlulukla ilişkisi ve yasın seyrinde nasıl bir görünüm ortaya çıkardıkları tanımlanmıştır. Farklı özdeşim çeşitlerinin tanımlanması ve seyrinin açıklanması yeni bir bakış sunması açısından önemlidir.

Ölen evladın ve kayıp yaşayan ebeveynin yaşının da yas üzerinde oldukça belirleyici bir etkiye sahip olduğu görüşmeler boyunca fark edilmiştir. Bu anlamda, çocuğun yaşı küçüldükçe çevredekilerin bu yasa daha az acı ve üzüntü atfettikleri, yasın hemen geçmesini bekledikleri, yeni bir çocuğun bu acının çözümü olduğunu düşünerek bu konuda tavsiye verdikleri gözlemlenmiştir (Plagge & Antick, 2009; Theut et al., 1989). Ölen çocuğun yaşı büyüdükçe, ebeveyne tanınan yas tutma özgürlüğü de genişlemektedir. Bunun yanı sıra, ileri yaşta yetişkin evladını kaybeden ebeveynlerde de farklı ve oldukça etkili bir durum gözlemlenmiştir. Bu kişiler içi evlatla kavuşmak bir ölçüde yakında gerçekleşecek gibi hissettikleri ve kendi ömürlerinin sonuna yakın olduklarını düşündükleri için evladın kaybına dair bir teselli bulabildikleri ve onların yaşamında yasın yıkıcı etkilerinin daha azalarak ortaya çıktığı fark edilmiştir. Kendi geçmiş ömründen memnun olan ebeveynler kalan vaktini iyi bir şekilde geçirmeye odaklanmayı tercih ederken, pişmanlıklarla dolu bir hayat geçiren ebeveynin kendi ömrüne tuttuğu yasın evladın kaybına tutulandan daha ön planda olduğu gözlemlenmiştir. Bu açıdan ileri yaş kayıplarına odaklanmak çok derin ve farklı yas akışlarını göstermesi açısından önemlidir.

Araştırma boyunca belirtildiği üzere, kültür, din ve sosyal destek yasın çok önemli bir parçasını oluşturmaktadır. Birini kaybetmek bireysel bir deneyim gibi görünse de oldukça toplumsal bir yaşantıdır. Kayıp sonrası patikler, ritüeller ve hatta duygular bile sosyal alanda inşa edilir ve kültürden kültüre farklılık gösterir (Averill & Nunley, 2003; Neimeyer et al., 2014). Ölümün yaygınlığı, ölüme yüklenen anlam ve diğer kişiler tarafından nasıl değerlendirildiği sosyal desteğin miktarını ve yas tutan kişinin nasıl yas tutacağını belirlemede etkili unsurlardır. Çok sık yaşanan bir kayıp türüne yönelik sosyal destek de bir o kadar azalır (Kissane & Bloch, 2002). Ek olarak, isyan

etmeme, kederin çok uzun ya da çok kısa sürmemesi, fazla ağlamama, kayba öfkelenmeme gibi sosyal ve dini açıdan tanımlanan normlar yasın dışarı yansıyan tarafları üzerinde önemli etkilere sahiptirler. Yasın uzun süren haline tanık olan destek veren kişiler için kolay olmayan bu süreç o kişilerde de kaybetme korkusu, sürekli ölümü hatırlama, endişe ve normal yaşama dönme ihtiyacı gibi eğilimleri ortaya çıkarabilir. Evlat kaybı öylesine zor bir yas türüdür ki destek sunan kişiler eğer kendileri de ebeveynse düşünmek bile istemedikleri bir kayba daimî bir tanıklık daha da zorlayıcı bir etki bırakabilir. Bazı durumlarda acılı ebeveyni suçlayarak olayın onun başına gelme nedeninin onun bir hatası gibi görerek kendini güvende hissetme girişimi gibi karmaşık, yaralayıcı bir ihtiyacın ortaya çıkabildiği gözlemlenmiştir. Benzer şekilde, destek sunan kişilerin kendilerini korumak için psikolojik veya fiziksel bir uzaklaşmaya ihtiyaç duydukları başka araştırmacılar tarafından da vurgulanmıştır (Riches & Dawson, 2000; Schiffman, 2020). Dolayısıyla yasın çok uzadığı örneklerde, sosyal desteğin giderek azalması ender yaşanan bir durum değildir (Brabant et al., 1995; Riches & Dawson, 2000; Schiffman, 2020).

4.3. Çalışmanın Klinik, Sosyal ve Akademik Etkileri

Ebeveyn yasının incelenmesi sonucu ortaya çıkan teorik modelin pek çok klinik ve sosyal etkileri olabileceği düşünülmektedir. Önerilen modelin yas tutan ebeveynlerle yürütülen psikoterapi çalışmalarını destekleyecek ve rehberlik edecek boyutları bulunmaktadır. Böylesine zor bir kaybı yaşamak ve kabullenmek hiç kolay bir deneyim değildir. Dolayısıyla, ebeveynlerin kabullenme ve acısını yaşama hızına saygı duyulması çok önemlidir. Destek sunan profesyoneller ebeveynin kendi ihtiyaç duyduğu hız ve yas tutma biçimine uyumlu olacak şekilde hayata devam edebilmesinin önündeki engellere odaklanabilirler. Rehberlik, bilgilendirme ve psikoterapi hizmetlerinin ebeveynin yas tutma biçimine uyumlu olarak geliştirilmesi de önemli bir etki olarak düşünülebilir.

Araştırmanın metodolojisi Yapısalcı Gömülü Teori araştırmanın en önemli güçlü taraflarından biri olarak kabul edilebilir. Yöntemin araştırmacıya sağladığı özgürlük sayesinde derinlemesine bir keşif ve kapsamlı görüşmelerin yürütülmesi imkânı bulunmuştur. Yöntemin tümevarım vurgusu sayesinde görüşme sorularından itibaren deneyime yakın bir temas kurulmuş ve bu sayede kaybın sadece keder içeren tarafları

değil, sosyal, kültürel, ilişkisel olmak üzere pek çok boyutunun incelenmesi mümkün olmuştur. En başından itibaren araştırmacının günlük tutması analiz sürecini önemli ölçüde desteklemiştir. Teorik modelin oluşturulmasında kişiye özgü ihtiyaç ve koşulların dikkate alınması, modelin gücünü ve deneyime yakın doğasını arttırdığından, görüşme sorularının kapsamı ilgili literatüre önemli bir katkı sağlamıştır.

Türkiye'deki ilgili literatüre bakıldığında, bir çocuğun ölümünün ebeveynler üzerindeki etkileri hakkında bazı çalışmalar bulunmaktadır. Bu çalışmalar hemşirelik, psikiyatri, sosyoloji ve psikoloji alanlarında yapılmıştır (Düzen, 2016; Köksal, 2018; Yıldırım, 2003). Şehit anneleri ile yapılan çalışmalar dışında (Gedik, 2008; Sancar, 2001) tamamı bir doğum öncesi (Candan, 2012; Keten vd., 2015; Öngay, 2019; Tanacıoğlu, 2019; Tanacıoğlu, 2019) veya yenidoğan kayıplarıyla ilgilidir (Yıldırım, 2003; Yıldız & Cimete, 2017). Mevcut araştırmaların kapsamı da ebeveyn yasının yalnızca belli boyutlarına odaklanmıştır ve dolayısıyla hiçbir çalışma bu araştırmanın içerdiği kapsamda sorular sormamıştır. Bu açıdan sunulan teorik model ve araştırma bulguları, değindiği boyutlar bağlamında Türkiye'deki literatüre katkı sağlama ve gelecekteki araştırmalar için bir temel oluşturma potansiyeline sahiptir.

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